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Walden University 2015

Abstract

Therapeutic Foster Parents' Perspectives of the Efficacy of Preservice Training

by

Mirae J. Grant

MA, Marylhurst University, 2008

BS, Portland State University, 2002

Doctoral Study Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Education

Walden University

December 2015

Abstract

Preservice training programs offered in a city in the Pacific Northwest have not been assessed to determine whether they adequately prepare therapeutic foster parents (TFPs). This phenomenological study identified factors that influenced the impact of preservice training on parents' preparation to manage their foster children's behavior, foster parent attrition, and multiple moves of the foster children. Chamberlain, Rork, McNeil, and Christenson's work linking training programs with the success of foster children was used to frame this study. Data were generated from semistructured interviews of 12 certified local TFPs who had completed preservice training and had at least one child placed in their home for at least a weekend. NVivo 10 qualitative analysis software was used to manage the data, which were analyzed via an inductive process. Findings indicated that TFPs felt the training was effective and the information provided was useful in real life situations. Suggestions for improvement included adding additional examples of behavioral issues and personal stories from trainers and facilitating increased interaction among foster parents. TFPs reported that their intrinsic motivations for fostering had more impact on decisions to continue with foster children in their home than did the preservice training. The project generated from the study was a policy recommendation addressed to program stakeholders that could have a significant social impact in developing training to better address behavioral challenges, prevent multiple moves, and promote cultural sensitivity while reinforcing parents' motivation for fostering.

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Dedication

I dedicate this project study to the foster providers who do such difficult work and to the foster children who teach us so much. I give special thanks to Dena DeCastro for never letting me quit, always lending an ear, and forever believing in me and my work. I give special acknowledgement to my parents, Bruce and Audrey Grant, and my sisters, Michele Grant and Denise Fletcher, for their support and humor. I also dedicate this dissertation to my family, friends, and associates for putting up with my absence, for being there when I needed them, and for generally making me smile and brightening my days. Finally, I dedicate this work to my children, the inimitable Brittany, Jamie, Christian and Elly, who know more than anyone how much we all sacrificed for me to pursue this dream. Without you, I would not have had the courage to continue.

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Section 1: The Problem

Introduction

Every state in the United States has a system of out of home care (foster care) for minor children whose parents are unable or unwilling to adequately care for their children (Gerstenzang, 2009). These programs enlist the help of foster parents to care for these children in their homes until a permanent home can be found. Most states require foster providers to attend training (sometimes referred to as preservice training) to assist them in understanding foster children and their special needs as well as to prepare them to address potential behavioral issues (Gerstenzang, 2009). Preservice training is particularly important when preparing therapeutic foster parents (TFPs) to assume this role, given that they are being asked to oversee children who have already received a mental health diagnosis and present with additional behavioral issues (McDaniel, Braiden, Onyekwelu, Murphy, & Regan, 2011). While the literature cited here often related to a broader foster parent community, the focus of this study was on the training needs of TFPs in Oregon. This study involved three agencies in Oregon which included one agency which provided the preservice training for two agencies which later certified and supported the TFPs. My study evaluated the effectiveness of the preservice training program offered to these parents, addressing both content and delivery, that was designed to assist TFPs in dealing with behavioral issues in a way that could prevent multiple foster placements (which are highly damaging to children) and limit foster parent attrition.

Definition of the Problem

It is uncertain as to how well the preservice training offered to foster parents prepares them for the behaviors of the children placed in their home. These behaviors often lead to multiple placements of the foster child, which then can be a contributing factor in causing that foster child to exhibit more behavioral issues (Van Camp, Vollmer, et al., 2008). Additionally, there is a correlation between increased behavioral difficulties of the foster child and the high rate of foster parents quitting (Bullock, 2012).

In Oregon, of the 7,602 children who were in the foster care system for federal fiscal year (FFY) 2014 (October 1, 2013 through September 30, 2014), 3,008 foster children (39.6%) had three or more placements (Oregon Department of Human Services, 2015). Though this figure has decreased slightly every year since 2007, the number is still higher than desirable. Multiple placements are generally deemed to be detrimental to foster children (Barber & Delfabbro, 2003; Children and Family Research Center, 2004; James, 2004; Oosterman, Schuengel, Slot, Bullens, & Doreleijers, 2007). Reducing the number of placements of children in foster care in Oregon is mandated by the Oregon Department of Human Services (Oregon Department of Human Services: Children, Adults, and Families Division, n.d.). The reasons for this instability of placements can vary widely. Sometimes the children are moved because of their behavior, sometimes it is a policy change, sometimes it relates to the foster parents' inability to cope with the child's issues, sometimes it is because the foster parents' expectations for the child are too high, and often it is a combination of these and other contributing factors (Barber & Delfabbro, 2003; Children and Family Research Center, 2004; James, 2004).

There is also a problem in the foster care system of the United States in recruiting and retaining a sufficient number of qualified foster homes on all levels to meet societal needs (Barbell & Freundlich, 2001; Christian, 2002; Ciarrochi, Randle, Miller, & Dolnicar, 2012; Conceição, Johaningsmeir, Colby, & Gordon, 2014; Denby, Rindfleisch, & Bean, 1999; Fees et

al., 1998; D. Gibbs, 2005; Goodman, Bonk, Mattingly, Omang, & Monihan, 2008; Jolly & Russell–Miller, 2012). The U.S. Department of Health and Human Services (2005) documented this problem. This report compiled information from the child welfare agencies of three states, New Mexico, Oklahoma, and Oregon, noting that, in addition to difficulties in finding good homes with people willing to take on this burden, 47–62 % of foster parents' homes were closed within a year of their first placement, figures that align with the national attrition rate of 50% (Gibbs, 2005; Jolly & Russell–Miller, 2012).

There were several prevailing reasons noted in the literature as to why foster parents said they quit. These included: a lack of agency support and communication, the child's behavior, life changes, adoption, and lack of input into the child's permanency plan (Christian, 2002; Denby et al., 1999; Goodman et al., 2008; Jolly & Russell–Miller, 2012). Additionally, the few existing studies on foster parent attrition cited the quality of foster parent training (both preservice and ongoing) in their lists of areas that were critical to the success of foster parenting (Denby et al., 1999). They also noted that an understanding of the effectiveness of preservice training provided important insights that might help providers and those who oversee them address this issue (Christian, 2002; Denby et al., 1999; Goodman et al., 2008; Jolly & Russell–Miller, 2012).

It is not understood which factors or combination of factors are most likely to cause disruption of the foster child and/or the exiting of the foster family and which of these can be addressed effectively in preservice training (Jolly & Russell–Miller, 2012). There are not enough reports of studies available to determine which or what combination of these factors are most likely to influence these disruptions, either positively or negatively. I sought to understand the

best ways to address how those issues could most effectively be addressed during preservice training.

There are several trainings that are required in Oregon for all people who provide in home foster care. Foster providers are required to attend an orientation meeting unless the requirement is waived by their certifier (Oregon Administrative Rule: Standards for Certification of Foster Parents and Relative Caregivers and Approval of Potential Adoptive Resources, 2011). The certifier is the person who works with potential foster providers to determine eligibility for becoming foster parents (Oregon Department of Human Services: Children, Adults, and Families Division, 2011b). Each foster provider must receive at least 15 hours of preservice training before becoming certified (Oregon Administrative Rule: Licensing Foster Care Agencies, 2008). In the course of this training, the general topics covered include an overview of foster care, the importance of the birth family, information on child development, abuse, neglect, sexual abuse, discipline, valuing a child's heritage, working with a child's biological family, the next steps in the certification process, mandatory reporting requirements, effective parenting, and traits of traumatized children (Oregon Administrative Rule: Licensing Foster Care Agencies, 2008). Few studies have been conducted on the efficacy of the training that is currently provided.

After foster parents are certified they are required to have at least 15 additional hours of training, annually (Oregon Department of Human Services: Children, Adults, and Families Division, 2011b). The topics covered in this training are not specifically outlined. Instead, the certifier is expected to create a training plan based on the needs of the children placed with the foster parents and the specific needs of these foster parents (Oregon Administrative Rule: Licensing Foster Care Agencies, 2008). This is to help ensure that the foster parents are prepared

for the specific children who are placed in their homes and increase the chances of a successful placement.

Several studies have been conducted to evaluate the efficacy of foster parent training in preparing prospective foster parents to handle the unique needs and behavioral issues that foster parents face with the children placed in their care (Chamberlain, Price, Reid, & Landsverk, 2008; Collins, Kim, & Amodeo, 2010; DeGarmo, Chamberlain, Leve, & Price, 2009; Dozier et al., 2009; Fisher, Chamberlain, & Leve, 2009; Nash & Flynn, 2009; Rork & McNeil, 2011; Van Camp, Montgomery, et al., 2008; Van Camp, Vollmer, et al., 2008). Chamberlain et al. (2008) conducted a study to first test whether foster parents who attended a parent management training program gained the additional skills required to effectively deal with their foster children's behavioral issues resulting in a reduction in the number of times that foster child moved from home to home. The next step was to determine whether the addition of the training for foster parents enrolled in the study resulted in fewer moves of their foster children when compared to those in a control group of foster parents with no extra training (Chamberlain et al., 2008). Chamberlain et al. (2008) adjusted a version of a parent management training program that had been used in several previous studies. Foster parents with non-medically fragile foster children between the ages of five and twelve who had lived for at least 30 days at the foster parents' home were invited to be in the study. The foster parents who signed up attended training sessions. filled out daily reports, and worked closely with the facilitator. Additionally, Chamberlain et al. (2008) and colleagues worked closely with the foster parents, the agencies, child welfare workers, and researchers as part of the research process.

The results of the Chamberlain et al. (2008) study indicated that collaboration among stakeholders could succeed in improving services and communication, and that developing evidence based training could have a significantly positive impact in reducing the number of times a foster child moves from one home to another. The researchers also noted that unless agencies, providers, and foster parents cooperated, no implemented changes would succeed (Chamberlain et al., 2008). However, when those parties worked collaboratively, they were more likely to be able to intervene creatively while adhering to the standards developed using intervention strategies previously adopted (Chamberlain et al., 2008). Chamberlain et al. suggested that collaboration between all parties was critical to the success of any change that might be proposed or made in this environment.

DeGarmo, Chamberlain, Leve, and Price (2009) conducted a second study within the Chamberlain et al. (2008) study that examined whether and how the group dynamic of the training programs themselves might become an additional positive factor in assisting foster parents to successfully address some of the behavioral issues that the children present. I noted that most previous studies in this area centered on the trainers and individuals engaging with the trainers. DeGarmo, et al. (2009) looked at the group dynamic. They focused especially on foster parent attitudes and their level of involvement in the 16 weekly meetings that were required of the foster parents and whether that interaction translated into fewer moves for the foster child (DeGarmo et al., 2009). DeGarmo et al. randomly assigned individuals who agreed to be part of the study to an intervention. Since this study was done as a part of the Chamberlain et al. (2008) study, the same methods were applied in the selection process. After each training, leaders rated foster parent participation on a Likert type scale and then analyzed the results using hierarchical

linear modeling (DeGarmo et al., 2009). The results suggested that a foster child who has had several moves previously has more stability in the homes of foster parents who have had a high level of participation in group training programs (DeGarmo et al., 2009). The converse was also indicated; foster parents who participated the least were less effective in dealing with the behaviors of the foster children in their homes and had a higher probability of a negative placement disruption (DeGarmo et al., 2009).

Dozier et al. (2009) focused their study on foster children and attachment. Children in foster care generally suffer from more attachment issues than do other children due to the neglect and/or abuse they have suffered at the hands of their primary caregivers prior to entering the foster care system (Dozier et al., 2009). Foster parents can further jeopardize healthy attachment if they do not understand how to nurture these children in a way that will aid them in forming healthy relationships (Dozier et al., 2009). Dozier et al. (2009) conducted a randomized clinical trial in which they compared the effects of an evidence based foster parent training program entitled, "Attachment and Biobehavioral Catch-up". This program focused on attachment and helped providers learn how to nurture children who are not easy to nurture. They received consent from the biological parents of the foster child to participate and from the foster parents for their own involvement. Forty-six children between the ages of 3 to 39 months old were involved in the study (Dozier et al., 2009). Each foster provider was randomly assigned to one of two training groups, each facilitated by experienced social workers, for a period of 10 weeks. One month after the trainings ended the foster providers were required to track specific behaviors of the child for 3 days and enter that information into a diary. Researchers then coded these diaries based upon factors associated with attachment (Dozier et al., 2009).

Results from the first three page diary indicated that the foster children living with foster parents who had attended the evidence-based attachment training demonstrated fewer avoidance behaviors than those of foster parents who attended the cognitive development training (Dozier et al., 2009). Dozier et al. (2009) pointed out that these results were based on the foster providers reporting on the foster children's behaviors. The researchers concluded that their work indicated that the evidence-based attachment training did help foster parents teach the foster children less avoidant behaviors (Dozier et al., 2009). The training could also have effectively demonstrated to the foster parent the importance of addressing attachment issues with their foster children (Dozier et al., 2009). Dozier et al. (2009) pointed out that, though different, both were positive outcomes.

Nash and Flynn (2009) conducted a cross sectional analysis of a larger data set from other studies. Specifically, they were concerned with the lack of empirical data and randomized trials to support the two major training programs used to train foster parents: the Model Approach to Partnerships in Parenting (MAPP) and the Parent Resources for Information, Development, and Education (PRIDE), both of which are more procedural and philosophical in nature, as opposed to behavioral (Nash & Flynn, 2009). Nash and Flynn (2009) used existing data to determine whether there is a relationship between the training offered and the following four preselected foster child outcomes:

- the Strengths and Difficulties Questionnaire Total Difficulties Scale, as rated by the foster parent;
- the internal developmental assets scale, as rated by the child welfare worker;
- the child's relationship with the foster mother and father, respectively; and

• the child's placement satisfaction, as rated by the foster child. (p. 131)

Nash and Flynn (2009) reported that in 83% of their regressions the training had no impact on the preselected foster child outcomes. They also noted that this was consistent with the majority of the few other studies that have been conducted on foster parent training, with the major exception of the one conducted by Chamberlain et al. (2008) (Nash & Flynn, 2009).

Nash and Flynn (2009) noted that their study had a small number of control variables and that there were inherent limitations in a cross sectional and cautioned that their results did not imply that foster parent training was ineffective. They argued that this finding suggested that, although philosophical and procedural training programs (such as MAPP and PRIDE) do not have much empirical data to support their effectiveness, the trainings are critical in developing foundational knowledge in foster parents (Nash & Flynn, 2009). But this work alone is not enough. Nash and Flynn (2009) suggested that supplemental behavioral training programs such as Keeping Foster Parents Trained and Supported (KEEP) should also be required to teach effective behavioral interventions to foster providers.

Additionally, one of the results of their study was unexpected: Nash and Flynn (2009) found that the more training foster providers received, the more likely they were to report having difficulties with their foster children's behaviors, and that boys were more likely to be reported than girls. They postulated that one inadvertent side effect of training was that it sensitized foster providers to the needs of their foster children, leading them to report more behavioral issues after training than before (Nash & Flynn, 2009). This could be because the training raised the expectations of the foster providers for those in their charge to unrealistic levels (Nash & Flynn,

2009). Nash and Flynn (2009) suggested that trainers and agency staff need to be made aware of this issue and correct for it in the course of their training.

Additional studies on the efficacy of preservice training in preparing foster parents for the foster children must be conducted in order to understand the relationship between training and foster parent abilities (Dorsey et al., 2008). The effectiveness of preservice training in transferring knowledge and skills to foster parents about how to deal with the issues and behaviors of foster children placed in their homes is critical (Dorsey et al., 2008). Moreover, it is important that the real implications of preservice training for foster parents are identified and understood in order to identify areas of potential improvement.

It is not fully understood the degree to which the preservice training programs prepared people to become successful foster parents and whether TFPs are as effective as they might be (Broady, Stoyles, McMullan, Caputi, & Crittenden, 2010; Davies, Webber, & Briskman, 2015; Dorsey et al., 2008). Improving these training programs is a key to properly preparing foster parents for the realities of being a foster parent, limiting multiple placements of foster children and helping prevent foster parent attrition (Broady et al., 2010; Davies et al., 2015; Dorsey et al., 2008). Multiple placements and foster parent attrition cost the state time and money and appear to limit the effectiveness of the foster care system as it may sever familial ties, can take children out of their communities, and may lead to increased behavioral difficulties (Brown & Bednar, 2006; Holland & Gorey, 2004; James, 2004; Price, Chamberlain, Landsverk, & Reid, 2009).

Rationale

Evidence of the Problem at the Local Level

In Oregon, of the 7,602 children who were in the foster care system in federal fiscal year (FFY) 2014, 3,008 foster children (39.6%) had three or more placements during their time in foster care. Within this group, 941 children (12.4%) had six or more placements (Oregon Department of Human Services, 2015). Table 1 shows the number of placements and percentages for children in foster care from 2006 through 2014. The trend in Oregon is an increase in placement stability (Oregon Department of Human Services, 2015). However, there are still too many children who have multiple placements (Barber & Delfabbro, 2003; Chamberlain et al., 2006; Children and Family Research Center, 2004, 2011; Eggertsen, 2008; Hurlburt, Chamberlain, DeGarmo, Zhang, & Price, 2010; James, 2004; Oosterman et al., 2007; Oregon Department of Human Services, 2015).

Table 1

Number of Placements and Percentages of Children in Foster Care from 2006–2014 in Oregon

| # of Placements | 9/30/2006 | | 9/30/2007 | | 9/30/2008 | |
|-----------------|-----------|------|-----------|------|-----------|------|
| 1 | 3,355 | 32% | 2,788 | 29% | 2,810 | 31% |
| 2 | 2,873 | 27% | 2,529 | 27% | 2,377 | 26% |
| 3 | 1,532 | 14% | 1,408 | 15% | 1,316 | 15% |
| 4 | 853 | 8% | 849 | 9% | 737 | 8% |
| 5 | 565 | 5% | 529 | 6% | 476 | 5% |
| 6 or more | 1,483 | 14% | 1,451 | 15% | 1,342 | 15% |
| Total in Care | 10,661 | 100% | 9,554 | 100% | 9,058 | 100% |

| # of Placements | 9/30/2009 | | 9/30/2010 | | 6/30/2011 | |
|-----------------|-----------|------|-----------|------|-----------|------|
| 1 | 2,920 | 34% | 3,381 | 38% | 3,364 | 38% |
| 2 | 2,245 | 26% | 2,222 | 25% | 2,272 | 26% |
| 3 | 1,076 | 13% | 1,144 | 13% | 1,196 | 14% |
| 4 | 686 | 8% | 668 | 8% | 618 | 7% |
| 5 | 400 | 5% | 370 | 4% | 369 | 4% |
| 6 or more | 1,290 | 15% | 1,131 | 13% | 1,063 | 12% |
| Total in Care | 8,617 | 100% | 8,916 | 100% | 8,882 | 100% |

| # of Placements | 9/30/2012 | | 9/30/ | 2013 | 9/30/2014 | |
|-----------------|-----------|-------|-------|-------|-----------|-------|
| 1 | 3,488 | 39.8% | 3,113 | 37.6% | 2,619 | 34.4% |
| 2 | 2,152 | 24.5% | 2,101 | 25.3% | 1,975 | 26% |
| 3 | 1,199 | 13.7% | 1,098 | 13.2% | 1,125 | 14.8% |
| 4 | 640 | 7.3% | 623 | 7.5% | 586 | 7.7% |
| 5 | 399 | 4.5% | 385 | 4.6% | 356 | 4.7% |
| 6 or more | 892 | 10.2% | 983 | 11.8% | 941 | 12.4% |
| Total in Care | 8,770 | 100% | 8,303 | 100% | 7,602 | 100% |

Note. I took the 2008 figures from the Status of Children in Oregon's Child Protective System. In 2009, this report was renamed the Child Welfare Data Book. The figure for the total number of foster children in care in 2008 as reported in the 2009 Child Welfare Data Book is 8,970. The percentages remained the same. In 2012, this report was renamed the Foster Care Data Book. As of this writing, the 2013 Child Welfare Data Book has not been released. (Department of Human Services: Children, Adults, and Families Division, 2008, 2009; Office of Business Intelligence, Department of Human Services, 2012, 2013, 2014; Oregon Department of Human Services, 2015; Oregon Department of Human Services: Children, Adults, and Families Division, 2010, 2011a).

Placement stability is critical to foster children and foster agencies (Hurlburt et al., 2010). *The Adoption and Safe Families Act* (AFSA) of 1997 stated that the three goals for any child in the child welfare system were safety, permanency, and well-being (AFSA of 1997, 1997, sec. 105–89). This was further clarified by the *Foster Care Independence Act* (also known as the Chaffee Act) of 1999 which has a provision that requires states to make certain that foster providers are ready physically, mentally, and emotionally to address the needs of foster children (Chaffee Act of 1999, 1999, sec. 112). These federal laws clearly indicate that training is both critical and necessary because of the harmful effects that multiple placements have on the foster child.

Foster children have often suffered multiple traumas that bring them into foster care (Hussey & Guo, 2005; James, 2004; Oosterman et al., 2007; Orme & Buehler, 2001). These traumas can lead to mental health issues and behaviors that are maladaptive, further isolate and stigmatize the foster child, and cause multiple placements (Price et al., 2009; Van Camp, Vollmer, et al., 2008). Multiple placements, in turn, can sever familial ties, take children out of their communities, and contribute to increased behavioral difficulties (Barber & Delfabbro, 2003; Hurlburt et al. 2010; James, 2004). Additionally, children with difficult behavioral challenges put stress on the resources of the child welfare system, place tremendous stress on foster parents, and can result in the exit of good foster parents from the system (Hurlburt et al., 2010).

I was unable to find public data that gave the number of foster homes closed during the federal fiscal years (FFY) or state fiscal year (SFY) in Oregon. However, I was able to find the, "Child Welfare Data Book" reports from 2007 to 2011 prepared by the Office of Business

Intelligence, Oregon Department of Human Services that gave the number of new homes certified during that year and the total number of homes that were certified on the last day of that year. To extrapolate the number of foster homes closed during that FFY or SFY, I took the total number of certified foster homes on the last day of the previous year, added the number of new foster homes certified during the current year and subtracted the total number of certified foster homes on the last day of the current year. For FFY 2007, the equation would be (5,309 + 1,867) – 4,893 = 2,283. Table 2 shows the number of new foster homes certified, the number of existing homes on the last day of the year (FFY or SFY), the estimated number of homes that were closed during that year, and the attrition rate of foster parents in Oregon from 2006 to 2011 (the last year this information was available). The attrition rates for first year foster parents in Oregon in 2011, though well below the national average of 60% (Goodman et al., 2008) were at 46%, a number that is still too high.

Table 2

Number of Certified Foster Homes and Number of Homes Closed from 2006–2011 in Oregon

| Item | FFY 2006 | FFY 2007 | FFY 2008 | FFY 2009 | FFY 2010 | SFY 2011 |
|--|-------------|-------------|-------------|-------------|-------------|-------------|
| New Foster Homes Certified during FFY or SFY | No data | 1,867 | 1,877 | 1,837 | 2,008 | 1,971 |
| # of Certified Foster Homes on Last Day of FFY or SFY | 5,309 | 4,893 | 4,735 | 4,432 | 4,673 | 4,542 |
| Foster Homes Closed during the FFY or SFY | No data | 2,283 | 2,035 | 2,140 | 1,767 | 2,102 |
| % Foster Parent Attrition | No data | 47% | 43% | 48% | 38% | 46% |

Note. I am unable to extrapolate any figures after SFY 2011 as the Child Welfare Data Book was split into three publications (2012 Foster Care Data Book, 2012 Family Services Data Book, and 2012 Foster Care Data Book). Some of the same information remained, but the section entitled, "Foster Care" which gave me the numbers above is no longer in any of the publications. I have been unable to find this information for Oregon anywhere else. (Department of Human Services: Children, Adults, and Families Division, 2008, 2009; Office of Business Intelligence, Department of Human Services, 2012; Oregon Department of Human Services: Children, Adults, and Families Division, 2010, 2011a).

The purpose of this study was to identify factors that influence the impact of training provided to TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and prevention of multiple foster children moves. Specifically, I aimed to investigate whether or not current TFPs felt that their preservice training adequately prepared them for the behavioral challenges faced after they had a child placed in their home. It also provided feedback on which training topics they perceived to be of the most value and their opinions on the methods used to transfer learning. Finally, the results were used to make recommendations for changes to make preservice training programs more effective.

Evidence of the Problem from the Professional Literature

The literature available on the problem reflected the need for more research into the effectiveness of the training offered to prospective TFPs (Collins et al., 2010; Nash & Flynn, 2009; Rork & McNeil, 2011). Collins, Kim, and Amodeo (2010) reviewed the extant literature published from 1990 to 2009 relating to the effectiveness of child welfare training programs and discovered that only 14 articles met their criteria. They concluded that researchers need more rigorous methods when studying several dimensions of training for both foster parents and child welfare social workers, including evaluations of the impact of the training programs themselves, styles of training, and the depth and scope of the curriculum offered to foster parents (Collins et al., 2010). Collins et al. (2010) also noted that 10 state child welfare systems had adopted foster parent training programs before conclusion of any evaluation on those training programs. They reported that the limitations of the studies on foster parent training were well documented and that more scholarly research was needed (Collins et al., 2010).

Additionally, Rork and McNeil (2011) published a study that critically reviewed 17 studies that investigated foster parent training programs. They concluded that, not only was there scant research available, the reports that had been published demonstrated methodological errors which called their results into question (Rork & McNeil, 2011). Rork and McNeil (2011) offered several suggestions for improving foster parent skills, including providing foster parents with quarterly newsletters and utilizing different, known training programs (such as the Incredible Years, MAPP, KEEP, etc.) to provide attachment based training to foster parents.

Nash and Flynn (2009) conducted a study where they utilized another study to look at preservice training selected results for the foster children. The results of their study led to two

conclusions. First, the efficacy of preservice training should not be assumed, and, therefore, this training must be scientifically studied to justify the huge amount of faith and resources the system places in it (Nash & Flynn, 2009). Second, trainers and trainees need to be aware of the delicate balance between becoming too sensitized to the behaviors of the foster children (due to unrealistically high expectations) and the dangers of not having high enough expectations for their foster children as both situations set the foster child and the foster parent up to fail (Nash & Flynn, 2009).

From personal observation it became apparent that few of the trainers seemed to be aware that there are specific differences between the ways adults learn and the teaching methods that are effective with children. Most of the trainers who teach the preservice training are skills trainers, case workers, certifiers, therapists or other staff whose education background is in child development or social service areas (Curry, Lawler, Schneider–Muñoz, & Fox, 2011). Therefore, most have not had much exposure to the field of adult education with its emphasis on modes of learning that have proven effective in adults and the numerous resources available in that field (Conceição et al., 2014; Curry, McCarragher, & Dellmann–Jenkins, 2005; Denby et al., 1999). Attention to how adults learn and the adoption of methods that fit their needs have been found to increase the effectiveness of training programs designed to efficiently transfer knowledge and skills to older learners (Galbraith, 2004; Knowles, Holton, & Swanson, 2011; Merriam, Caffarella, & Baumgartner, 2007).

Definition of Terms

Behavioral Rehabilitation Services (BRS): The services provided to children who need a higher level of foster care than the state level normally provides. This level of care, often called

Therapeutic Foster Care, always has the added component of treatment for the foster child. The goal of BRS is to stabilize the child so that he or she can be successful in the community and step down to a less restrictive level of care as quickly as possible and thereby achieve permanence (Oregon Department of Human Services: Children, Adults, and Families Division, 2011a). Therapeutic Foster Care (TFC) provides these services.

Certified: An individual or couple who has completed the set training, background checks, and paperwork required to become foster parents and have received a Certificate of Approval from the Department of Human Services (Oregon Administrative Rule: Standards for Certification of Foster Parents and Relative Caregivers and Approval of Potential Adoptive Resources, 2011). Usually, homes are certified with the adults listed as residents in the home designated as the foster parents.

Certifier: The person who works with potential foster providers to determine eligibility for becoming foster parents (Oregon Department of Human Services: Children, Adults, and Families Division, 2011b). They conduct home visits, collect and review the required paperwork, and make the determination as to whether or not the people should be certified. After certification, they continue to work with the foster providers to ensure compliance with the rules and procedures outlined by the system.

Closed: A home whose certification has expired, been voluntarily withdrawn, or whose Certificate of Approval from the Department of Human Services has otherwise been revoked (Oregon Department of Human Services: Children, Adults, and Families Division, 2011b).

Enhanced Supervision: Program mandated for each Therapeutic Foster Home's program that dictates where the foster child needs to be at all times in relation to the foster parent, usually

within sight and sound in the home during waking hours and within arm's reach in public (Oregon Administrative Rule: Standards for Certification of Foster Parents and Relative Caregivers and Approval of Potential Adoptive Resources, 2011).

Foster Child: The term that is generally used to refer to infants, children, and youth (ages newborn through at least age18 and sometimes even older) who have been placed in the custody of the Department of Human Services by a judge for their protection (Oregon Administrative Rule: Standards for Certification of Foster Parents and Relative Caregivers and Approval of Potential Adoptive Resources, 2011). Foster children can be placed with relatives (kinship care), unrelated adults (foster care), in group homes, in lock down facilities, and in mental health facilities such as hospitals.

Foster Parent: An individual or couple who resides in a home that has been certified to provide care for a foster child (Oregon Administrative Rule: Standards for Certification of Foster Parents and Relative Caregivers and Approval of Potential Adoptive Resources, 2011). Some foster care agencies are beginning to refer to foster parents as "foster providers".

KEEP: Acronym for the Keeping Foster Parents Trained and Supported program, a foster parent preservice training adapted by Chamberlain et al. (2009) at the Oregon Social Learning Center in Eugene, Oregon from the Multidimensional Treatment Foster Care (MTFC) intervention model (Price et al., 2009). It consists of 20 hours of preservice training and then additional ongoing in service training sessions. KEEP is an evidence based training program that focuses on teaching foster providers skills to use in managing children with difficult behaviors and attachment issues while requiring that foster parents receive daily support and ongoing

training. The expectation in KEEP is that foster providers know how to apply the interventions and set the foundation for their relationship with the foster child (Dorsey et al., 2008).

MAPP: Acronym for the *Model Approach to Partnerships in Parenting*, one of two preservice training programs that are most often used in the United States (Nash & Flynn, 2009). It consists of 30 hours of training that include a competency based curriculum that introduces foster parents to the core values of foster care, orients them to policies and procedures, and helps them understand how foster care will impact their lives (Dorsey et al., 2008; Waldbillig, 2008).

Permanency: The long term objective determined for the foster child which includes options such as: reunification with the biological parents, adoption, long term foster care, emancipation (aging out of the system), going to live with other relatives, and guardianship (Barber & Delfabbro, 2003).

Permanency Plan: A legal document that outlines the long term plan for a foster child (Oregon Administrative Rule: Developing and Managing the Case Plan, 2009). The goal of a permanency plan is to reduce the time a child is in the foster care system and to ensure that the child has a permanent home–either back with their biological family, with relatives, or with an adoptive family.

Preservice Training: The basic training that most foster parents receive from their agency (either state or private agencies) prior to certification (Goodman et al., 2008). If preservice training is required, the core competencies are laid out by each state and are interpreted by each agency, which adopt different curricula (Christenson & McMurtry, 2007; Dorsey et al., 2008).

PRIDE: Acronym for Parent Resources for Information, Development, and Education, one of two foster parent preservice training programs that are most often used in the United

States (Nash & Flynn, 2009). It consists of 27 hours of training based on a competency based curriculum designed to prepare foster parents to work as part of a team. The goal of the program is to insure that the foster parents are clear on their partners on the team, that they understand how best to protect and nurture the foster children placed with them, and that they know how they might meet the needs of the children in their care (Dorsey et al., 2008; Waldbillig, 2008).

State Foster Care: The basic level of foster care. The state maintains guardianship of the foster children, provides case management, and makes recommendations on permanency (Oregon Administrative Rule: Developing and Managing the Case Plan, 2009).

Therapeutic Foster Care (TFC): A higher level of foster care designed to accommodate foster children who have a mental health diagnosis, receive treatment, and require a higher level of supervision. The state still has guardianship and provides case management, but the TFC agencies provide the BRS treatment (which all foster children in TFC receive) and foster parents who have additional training in dealing with children/youth who have more behavioral issues. Children in TFC are not stable enough to have an active permanency plan. Only after the child stabilizes will they step down to state foster care and move towards permanency (Smith, Stormshak, Chamberlain, & Whaley, 2001; Southerland, Mustillo, Farmer, Stambaugh, & Murray, 2009; Trunzo, Bishop–Fitzpatrick, Strickler, & Doncaster, 2012).

Therapeutic Foster Parents (TFP): Foster parents who work with private foster care agencies that provide BRS services to high needs children. These foster parents are required to have more hours of training to be certified, have more regulations regarding the ways in which they interact with the foster children, and work with the foster care team to try and stabilize the

child so that s/he can step down to state foster care and permanency (Smith et al., 2001; Southerland et al., 2009).

Significance of the Problem

Many factors contribute to the issues surrounding both foster parent attrition and the lack of placement stability for foster children (Courtney & Prophet, 2011; Jolly & Russell–Miller, 2012). The problem is that it is uncertain as to how well the preservice training offered meets the needs in preparing TFPs for the behaviors of the children placed in their home (Nash & Flynn, 2009). It is important to address this problem to help local agencies and agencies throughout Oregon better determine what they can do to reduce foster parent attrition and create more placement stability for foster children.

Guiding/Research Question

While there have been a limited number of studies about the impact of preservice training on foster parent retention and placement stability, additional research is required to evaluate the specific training programs provided (Collins et al., 2010; Murray, Tarren–Sweeney, & France, 2011; Nash & Flynn, 2009; Rork & McNeil, 2011). Past research includes several studies that evaluated the effectiveness of foster parent training in preparing foster parents for being foster parents and dealing with their foster children's' behavioral challenges (Barber & Delfabbro, 2003; Chamberlain et al., 2008; Collins et al., 2010; DeGarmo et al., 2009; Dozier et al., 2009; Fisher et al., 2009; Goodman et al., 2008; Jolly & Russell–Miller, 2012; Nash & Flynn, 2009; Rork & McNeil, 2011; Van Camp, Montgomery, et al., 2008; Van Camp, Vollmer, et al., 2008). Nash and Flynn (2009) conducted a cross sectional analysis of studies of the effectiveness of the two most used foster parent training systems, MAPP and PRIDE. Several of the authors of these

studies pointed to a lack of past research on these systems, and some have added that the place to begin such research is to ask foster parents about their perceptions of the efficacy of their training (Chamberlain et al., 2008; Murray et al., 2011; Rork & McNeil, 2011). The type of research needed to begin this process is a qualitative approach with semistructured interviews to find out the foster parents' perceptions.

The intent of this study was to determine the effectiveness of preservice training offered to TFPs in reducing attrition and stabilizing placements among TFPs working for two therapeutic foster agencies in Oregon while being trained by a third agency. It was based on feedback gathered via semistructured interviews from TFPs who were certified from two local agencies in Oregon about their perceptions of the effectiveness of the preservice training provided to them to help them deal with their foster child/children's behaviors. Studying the Oregon TFPs' perceptions of how the preservice training they received has impacted their future choices was useful in disentangling anecdotal "evidence" from actual reported findings. At this point, there are many theories as to what is the most effective kind of training for TFPs (Christenson & McMurtry, 2007; Collins et al., 2010; Dorsey et al., 2008; Price et al., 2009).

The overarching question for this study was: What were the opinions of the certified TFPs about the effectiveness of their preservice training based on their lived experiences? The following specific guiding research questions were asked of existing TFP in interviews:

 How effective was the agency's preservice training in preparing TFPs for the difficulties they face after a child placement?

- How well did the agency's preservice training cover issues TFPs encountered with the foster children that contributed to or prevented attrition of certified TFPs?
- How well did the agency's preservice training cover issues TFPs encountered with the foster children that contributed to or prevented multiple placements of foster children?
- What should be changed in the delivery or content of the agency's preservice training to meet the expressed needs of the TFPs?

In line with the problem and guiding/research questions, the objectives of this study were:

- To determine the aspects of the agency's preservice training that helped or hindered certified TFPs' preparedness for the foster children.
- To determine the aspects of the agency's preservice training that contributed to or prevented attrition of certified TFPs.
- To determine the aspects of the agency's preservice training that contributed to or prevented multiple placements of foster children.
- To determine the strengths and weaknesses in the content and delivery of the agency's preservice training.
- To make recommendations for change if appropriate.

The data to support this study were generated using a set of semistructured interviews based on the Interview Guide I developed (Appendix B). There were 12 total participant TFPs who had had a nonmedically fragile therapeutic foster child between the ages of 3 and 17 who had lived for at least 30 days in their home for full time providers or had at least one weekend

placement for respite providers. Each of these TFPs, were either from single or dual parent foster homes, and they were chosen using purposeful, convenience sampling.

This study involved three agencies which included one agency which provided the preservice training for two agencies which later certified and supported the TFPs. The problem motivating this study was a need to understand whether the local agency's preservice training used in the certification process for TFPs working in these two agencies in Oregon prepared them for the challenges they faced after the placement of a foster child in their home. The assumption is that many trained foster parents sense that they are not fully prepared for the children placed in their care and that this issue is never fully resolved. Each placement is a unique case and no general orientation will address all of the possible problems they will experience. But training can be provided that is more closely tailored to meet foster parents' needs and acquaint them with the resources available when they encounter issues. The results of this study will help in the tailoring process. I am following the advice of Rork and McNeil (2011), who ended their study with the suggestion that," this field may benefit from asking foster parents directly about their needs, rather than hypothesizing about what others believe their needs to be" (p. 165).

There were four main reasons for conducting this study. First, it assessed the efficacy of the local agency's preservice training programs that were designed to assist the agencies' TFPs in terms of their preparation for managing the difficult behavioral issues that foster children placed in their care presented due to their traumatic histories. Second, it helped determine which aspects of the agency's preservice training contributed to or prevented TFP attrition. Third, it helped determine which aspects of agency's preservice training contributed to or prevented the

multiple placements of foster children. Finally, it elicited suggestions for areas in which the training could be improved and gathered feedback on current strength areas.

Review of the Literature

I used three main search strategies to find the most current studies and the most salient literature to review. First, I used the following multidisciplinary search databases: Academic Search Complete, EBSCOhost, Education Search Complete, Education Source, ERIC, ProQuest, PsychARTICLES, PsychEXTRA, PsychINFO, Sage, ScienceDirect, and SocINDEX. I filtered using the search option of selecting only peer reviewed journals. I entered the following search terms alone and in combinations: adopt, attachment, attitudes, basic foster parent training, behavior disorders in children, behaviors, carer support, causes, certification, child development, child welfare training, community based, competency, curriculum, evidence based practice, family foster careers, family life education, foster, foster care, foster care system, foster children, foster families, foster home, foster home care, foster mother, foster parent, foster provider, foster provider training, foster training, history of, kinship, looked after children, MAPP, out of home care, parent training, parenting education, parenting skills, permanency, placement breakdown, placement disruption, placement drift, placement instability, placement outcome, placement stability, preservice training, PRIDE, program effectiveness, public and private agencies, public welfare policy, recruitment, residential care, residential treatment, responses, retention, role perceptions, satisfaction, services for, social work with children, statistics, study and teaching, surveys, therapeutic foster care, therapeutic foster parents, therapeutic foster training, treatment foster care, and treatment foster parents.

Next, I looked through the Walden Dissertations and Theses database and searched for dissertations through ProQuest using some of the search terms above. I used these to determine what other research might be currently being conducted on preservice training. I also used the dissertations to look for sources I might have missed. I filtered using the search options of full text only, completed within the past 10 years, written in English. Additionally, I searched the Project Gutenberg database for classic sources. I also searched through the official federal and state websites looking for public data, statistics, and laws on foster care. Finally, I looked through the bibliography in each study I reviewed and made sure that I had reviewed their primary sources. I would repeat this process every few months as my research took me in different directions. This allowed me to develop a mastery of the literature.

In this section, I will first present the conceptual framework that grounds this study, then offer a brief history of the evolution of the child welfare system and foster care in the United States, and follow with short sections on state foster care and therapeutic foster care today. I will then review the training requirements for state foster parents and for TFPs. This will be followed by a discussion of the literature about the evaluation of preservice training and the implications for possible project directions based on the anticipated findings of the data collection and analysis. Finally, I will offer a short summary of the literature available to support the findings in this study.

Conceptual Framework

The conceptual framework was guided by Chamberlain, Price, Reid, and Landverk (2008), Rork and McNeil (2011), and Christenson and McMurtry's (2007) work that indicated that foster parent preservice training is linked with the success of foster children. The

phenomenon that grounds the study is that, although there are few studies on the efficacy of preservice training, there are even fewer studies which explore how foster parents view their training after they have had a child placed (Brown, 2008; Rork & McNeil, 2011). Therefore, the most logical framework on which to base this study was to ask the foster parents themselves about their opinions of the preservice training after they had a child placed (Rork & McNeil, 2011).

Historical Overview

Foster care and the current child welfare system in the United States evolved over several hundred years influenced by changing social attitudes towards children and more awareness of child neglect and abuse (Hacsi, 1995; Holt, 1992; Myers, 2008). Myers (2008) divided the history of child protection in America into three eras, the first beginning in colonial times and lasting through the American Civil War in which children were on their own, a second in which society saw untended children as a problem that needed to be addressed but depended upon local communities and churches to deal with the problem, and then a third where more attention was made to their needs in which the government stepped in to create legislation to protect children.

From the first era on, poor and orphaned children in the United States have been placed in substitute care (Hacsi, 1995; Holt, 1992; Myers, 2008). During the 1700s, children and orphans were considered miniature adults and were indentured to others to learn a trade early on (Hacsi, 1995). Parents often died young as a result of war, injury or disease, but family and small communities often took in children to provide labor on farms and in shops (Hacsi, 1995). By the mid 1800s, the indenture system began losing favor due to the slowly changing attitudes towards children and the emergence of the view of childhood as a time of innocence in which young

people were to be nurtured (Hacsi, 1995). During this period, impoverished, parentless, and abandoned children were increasingly sent to orphan asylums instead of becoming indentured or placed in other homes to work (Hacsi, 1995).

The second era evolved during the latter half of the 19th century, based partially on the need of the western states for cheap labor and the fact that urban orphan asylums were being criticized more and more for "creating" children who were "unfit" to be productive citizens (Holt, 1992). The Children's Aid Society (CAS), founded by the antiurban reformer Charles Loring Brace, began sending urban poor and orphaned children to rural areas on what became known as "orphan trains," calling it 'placing out' and basing it on the idealization of rural life that was prevalent at that time (Brace, 1872; Holt, 1992). This was basically an informal form of indenture (Holt, 1992). The rising number and concentration of children made the founding of CAS possible (Hacsi, 1995). Child labor was identified as a problem, as were the horrible living conditions in which the poor and particularly poor children found themselves (Hacsi, 1995; Holt, 1992). One goal of the CAS was to sever the ties between children and their biological parents when they were deemed unfit to raise them (Brace, 1872). This was a major change in the approach taken and done, according to Brace (1872) to protect the children.

At first, the main complaint against "placing out" came from Catholics who were strenuously opposed to Catholic children being placed in Protestant homes (Hacsi, 1995). As the practices of the CAS came under more and more scrutiny, opponents of this practice argued that the CAS neither screened the new homes nor checked back to see how things were going (Hacsi, 1995). These opponents believed that changes were required (Hacsi, 1995). The more the CAS was required to investigate homes, the fewer suitable homes were found to be available (Hacsi,

1995). There was also a major discrepancy between the goals of the CAS and those of the parents of the children who were placed out (Holt, 1992). The CAS wanted to end the parental relationship even though many destitute parents who placed their children out during hard times fully intended to regain custody of them when things turned around (Hacsi, 1995). Of the 22,000 children placed out between 1854 and 1900, most went back to their families within a few years (Hacsi, 1995).

By the late 19th and early 20th centuries, the CAS had faded, and the in 1875 the Societies for the Prevention of Cruelty to Children (SPCC) emerged as the country's foremost organization for protecting children (Myers, 2008). The SPCC's goal was to combat the problems of child abuse and neglect – a goal that reflected ideas that were just becoming part of the social consciousness of the nation (Myers, 2008). This group pressed society to protect the safety and well being of the child, and more often those removed from their homes left as a result of mistreatment than as true orphans (Myers, 2008). While some children were placed due to the death of their parents or were given up by their parents because of economic circumstances, the newly created juvenile courts gave the SPCC (and other agencies like them) the power to remove children from abusive situations (Myers, 2008). This eventually led the police, state and local governments to recognize the reality of child abuse and neglect and fostered attempts to address these issues (Myers, 2008).

Throughout these first two eras, when an older child was taken from her or his home, that child was expected to work for his or her keep (Hacsi, 1995; Holt, 1992). The younger children were not expected to work and, therefore, were considered a burden to the families who took them in (Hacsi, 1995). Some private and governmental agencies began paying homes for

boarding these children to prevent the older children from being valued only because they could work (Hacsi, 1995). These agencies also began paying to attract more people who might open their homes to these children (Hacsi, 1995). During this first 30 years of the 20th Century, there was a huge debate over whether children fared better when institutionalized or when they went into foster homes (Hacsi, 1995). The creation of the juvenile court system in each state (between 1899 and 1919), in effect, cemented the practice of utilizing foster homes (Myers, 2008). At that time, the juvenile courts were much more likely to remove children from the home than help the family deal with the children (Hacsi, 1995; Myers, 2008).

During the first two eras, religious groups ran and funded the most of the existing orphanages (Hacsi, 1995; Myers, 2008). Then the Great Depression hit, and these religious groups could no longer meet the need due to a lack of donations and other private support so local governments had to step in (Myers, 2008; Rymph, 2012). To assist in this effort, the *Social Security Act of 1935* provided small federal grants that allowed the states to create agencies to serve children (Hacsi, 1995). This legislation also provided funds to create the Aid to Dependent Children (ADC) program, now known as the Temporary Assistance to Needy Families (TANF) program to give financial assistance to homes with children in need (Hacsi, 1995; Rymph, 2012). Over the next several decades, these child welfare services expanded their scope, offering new services and garnering increased funding (O'Neill Murray & Gesiriech, 2004; Rymph, 2012). By the 1960s, children were being placed in foster homes three times as often as in orphanages (Hacsi, 1995). During this time, responsibility for funding care for these children moved from private charities to state and federal government (Hacsi, 1995).

In 1946, a pediatric radiologist named John Caffey published an article about injured children in which he implied that their injuries had been inflicted by their parents (Myers, 2008). Caffey's article broke through the societal denial and secrecy surrounding child abuse (Myers, 2008). The medical profession began to take notice (Myers, 2008). After that, more and more medical professionals published articles that demonstrated that some childhood injuries were due to abuse (Myers, 2008). But American society was not yet ready to confront the truths about child abuse and neglect and their causes (O'Neill Murray & Gesiriech, 2004). In fact, many states refused aid to families they deemed *immoral*, a practice exemplified by the 1960 Louisiana Incident when the state of Louisiana purged 23,000 children from their welfare programs because they were the product of unwed mothers (O'Neill Murray & Gesiriech, 2004). Although far from being the only state to purge their welfare rolls, the Louisiana Incident garnered national attention and led to changes in policy at the U.S. Department of Health, Education, and Welfare in the form of a mandate known as the Fleming Rule which required states to provide for their needy children no matter what the home situation (O'Neill Murray & Gesiriech, 2004). It further stated that either the states had to do something to make the home suitable, or they had to move the child to a suitable home while still providing for the financial needs of the child (O'Neill Murray & Gesiriech, 2004). The social outrage over the Louisiana Incident opened the door to a new level of social awareness, ushering in the third era of child welfare programs (O'Neill Murray & Gesiriech, 2004).

The third or modern era of the foster care system began in 1962 with the publication of the seminal article "The Battered Child Syndrome" in which the authors presented evidence of the prevalence of child abuse by both parents and foster parents (Kempe, Silverman, Steele, Droegemueller, & Silver, 1962; Myers, 2008). Kempe, Silverman, Steele, Droegemueller, and Silver (1962) detailed the physical symptoms of this kind of abuse and named it the Battered Child Syndrome. They went on to provide several case studies that included photos which showed the broken bones of abused infants, concluding that the parents and foster parents of these children were the cause of these injuries (Kempe et al., 1962). "The Battered Child Syndrome" helped to remove the secrecy surrounding child abuse and contributed to a change in society's attitudes about the rights of children and the responsibility of the government on all levels to ensure the safety of America's children (Barbell & Freundlich, 2001). The federal government stepped in, and the current foster care system began to take shape (Myers, 2008).

The next major change to child welfare policy came in 1974 with the enactment of the *Child Abuse Prevention and Treatment Act* (CAPTA) (Myers, 2008). CAPTA was the first federal legislation that funded programs to prevent child abuse (Myers, 2008; O'Neill Murray & Gesiriech, 2004). The caveat was that, in order for the states to receive funding, they had to investigate and report child abuse cases to the newly formed National Center on Child Abuse and Neglect (NCCAN) which worked under the auspices of the U.S. Department of Health and Human Services (USDHHS), the successor to what had been the U.S. Department of Health, Education and Welfare (O'Neill Murray & Gesiriech, 2004). Besides administering the CAPTA, NCCAN also funded research and training on child welfare. CAPTA was instrumental in creating the foundation of the current foster care system (O'Neill Murray & Gesiriech, 2004). After it passed, an increasing number of children were removed from their biological homes and placed in foster care for longer durations (Myers, 2008; O'Neill Murray & Gesiriech, 2004).

The next major legislation in the modern era began in 1980 with the passing of Public Law 96–272, the *Adoption Assistance and Child Welfare Act of 1980* (AACWA) (O'Neill Murray & Gesiriech, 2004). The AACWA formed the basis of the development of our current foster care system (Myers, 2008; O'Neill Murray & Gesiriech, 2004). For the first time, a national policy for the management of neglected and abused children was put in place along with provisions designed to regulate those agencies whose primary responsibility was to manage foster children (Myers, 2008; O'Neill Murray & Gesiriech, 2004). The AACWA included legislation on permanency planning; required the states to make reasonable efforts to keep the biological family together or reunite them in a timely manner; mandated judicial reviews of cases every six months to ensure that the needs of the children were being met and that they were not lingering in the foster care system too long; introduced the requirement of least restrictive placement of each child in the system; and required that child welfare agencies in each state create a plan for executing their missions (Hacsi, 1995; O'Neill Murray & Gesiriech, 2004; Public Law 96–272, 1980; Sribnick, 2011).

At first, the AACWA caused the number of children in foster care to decrease, but between 1986 and 1995, that number increased by 76% (O'Neill Murray & Gesiriech, 2004). Reforms were necessary, and although there were a few changes in policy between 1980 and 1997, the major reforms came in the form of the AFSA (Child Welfare League of America, 2009). AFSA stipulated that the three goals for children in foster care were, "safety, permanence, and well–being" (Child Welfare League of America, 2009, p. 6).

The AFSA required states to report their child welfare numbers to the USDHHS to ensure that the reforms were leading in a positive direction (Child Welfare League of America, 2009).

These major reforms and the focus on permanency helped to reduce the number of children in foster care from 559,000 on 9/30/1998 to 402,378 on 9/30/2013, a reduction of 28% (U.S. Department of Health and Human Services, 2006a, 2014). These figures are available because the AFSA required the states to start reporting them in 1998.

The Chafee Act focused primarily on giving more resources to youth who age out of the system (Graf, 2002). The Chafee Act did establish training requirements. It stipulates that,

Before a child in foster care under the responsibility of the State is placed with prospective foster parents, the prospective foster parents will be prepared adequately with the appropriate knowledge and skills to provide for the needs of the child, and that such preparation will be continued, as necessary, after the placement of the child. (Chaffee Act of 1999, 1999, sec. 112)

Both of these Acts govern the current foster care system in the United States.

State Foster Care

State foster care is the basic level of foster care provided (Department of Human Services: Children, Adults, and Families Division, 2009). Children in foster care today are a challenging population with specialized needs resulting from the abuse and neglect they have suffered prior to entering the system and their experiences in the foster care system itself (Barbell & Freundlich, 2001; Barth, 2001; Bîrneanu, 2013; Brown, Bednar, & Sigvaldason, 2007; Children and Family Research Center, 2004; Conradi et al., 2011; DeGarmo et al., 2009; Dorsey et al., 2008; Dozier et al., 2009; Fisher et al., 2009; Hurlburt et al., 2010; Leve et al., 2012; Luke & Banerjee, 2012; Murray et al., 2011; Piescher, Schmidt, & LaLiberte, 2008; Reddy et al., 2013; Rork & McNeil, 2011; Woods, Farineau, & McWey, 2013). As a result, it is

becoming increasingly difficult to recruit and retain sufficient numbers of qualified foster parents at the state level, let alone find enough to support the higher level of attention required within therapeutic foster care (Barbell & Freundlich, 2001; Denby et al., 1999).

Therapeutic Foster Care

Therapeutic foster care (TFC) is a higher level of care designed to accommodate children who have a mental health diagnosis and have been referred for that level of care by the state (Southerland et al., 2009). They receive treatment and require a higher level of supervision than those who are placed at the state level (Smith et al., 2001; Southerland et al., 2009). The state still has guardianship and provides case management, but the TFC agencies ensure that the children receive psychological services (which all foster children in TFC receive) and are placed with foster parents who have additional training in dealing with children/youth who have more behavioral issues (Smith et al., 2001; Southerland et al., 2009). Children in TFC are not usually stable enough to have an active permanency plan (Smith et al., 2001; Southerland et al., 2009). Only after the child stabilizes will he or she step down to state foster care and move towards permanency (Smith et al., 2001; Southerland et al., 2009). Since the children placed in therapeutic foster homes have most likely already had multiple placements and experiences that have led to more and more severe behavioral issues, effective training for TFPs is critical to the success of the placement and the retention of the foster parent (Barth, 2001, 2009; DeGarmo et al., 2009; Hurlburt et al., 2010; Lindsey, 2001; Mainwaring, 2014; Van Camp, Vollmer, et al., 2008; Wilson, 2006).

Training Requirements for State Foster Parents

Preservice training requirements vary from state to state. I sought a list of foster parent training requirements by state from the Casey Family Programs State Child Welfare Policy Database (2013) which is managed by Child Trends, a nonprofit research center which conducts and publishes research on child welfare issues. This database is sponsored by the Casey Family Foundation and provides state by state breakdowns on a wide variety of child welfare and foster care related topics. (Casey Family Programs: State Child Welfare Policy Database, 2013). It is noteworthy, however, that this database does not present any information on foster parent training – either in the form of state requirements, topics covered in training, the number of hours required to get certified or statistics on the number of people trained.

I continued to look for these types of statistics through The Annie E. Casey Foundation (Annie E. Casey Foundation: Publications and Research, 2013) which offers an extensive publications and research section, and the U.S. Department of Health and Humans Services: Administration for Children and Families in their Data and Reports section, all to no avail (Administration for Children and Families, 2013; U.S. Department of Health and Human Services, 2006a, 2006b, 2008, 2009a, 2009b, 2010, 2011, 2012, 2013, 2014). I continued my search with the Child Welfare League of America (CWLA), which ran the National Data Analysis System (NDAS) from 1997 – 2009. Their website directed me back to the U.S. Department of Health and Humans Services: Administration for Children and Families for data on foster parent training hours or any statistics of foster parents and training, but, as noted above, none was available.

I was finally able to find a list of training hours required by state that also included the curriculum offered (if the states reported one) (Gerstenzang, 2009). However, the sources from which the information came were not included. Table 3 is adapted from the list in, "Fostering Families Today". Please note that many states have caveats as to how the training is received, when it has to be completed, and differing requirements for training hours based on the number of adults in the home in which the child is placed.

Table 3 Mandatory Preservice Training Hours by State as of 2008 (Unless Otherwise Noted) and Training Curriculum Used

| Required Hours | States |
|----------------|---|
| 6 Hours | Minnesota, Pennsylvania |
| 60 – 40+ Hours | Wisconsin (depending on the designated level)* |
| 8 Hours | Nevada |
| 10 Hours | |
| 12 Hours | Alaska, Georgia (IMPACT), Idaho, New Mexico California, Colorado, Michigan (PRIDE), Mississippi |
| 12 110013 | (PATH) |
| 14 Hours | South Carolina |
| 15 Hours | Oregon (Plus Orientation Training)** |
| 16 Hours | Wyoming |
| 18 Hours | Hawaii, Montana |
| 20 Hours | Indiana (Fosterparentscope) |
| 21 Hours | Florida (GPS-MAPP), New Hampshire, Nebraska |
| 24 Hours | Maine, Massachusetts (MAPP), Ohio |
| 27 Hours | Delaware (PRIDE), New Jersey, Illinois (PRIDE), Maryland, |
| | Missouri (STARS), North Dakota (PRIDE), Oklahoma (OK |
| 20.11 | PRIDE) |
| 30 Hours | Alabama, Arizona (PS MAPP)*, Arkansas, District of Columbia (PS MAPP), Iowa (PS MAPP), Kentucky (GPS–MAPP), |
| | Louisiana (MAPP), North Carolina, Rhode Island, South Dakota, |
| | Tennessee (PATH), Texas (PRIDE), Vermont, Washington, West |
| | Virginia (PRIDE) |
| 32 Hours | Utah (CCBT) |
| 45 Hours | Connecticut (PRIDE) |
| # of Hours Not | New York |
| Specified | |
| No Preservice | Virginia (CRAFFT) |
| Requirement | from the National Resource Center for Family_Centered Practice and Permanency |

Note. Table 3 is adapted from the National Resource Center for Family-Centered Practice and Permanency Planning at the Hunter College School of Social Work (Gerstenzang, 2009). *Wisconsin began requiring training as of January 1, 2011 (Department of Children and Families, 2015).

^{**}When this table was created, Oregon did not have a set number of preservice training hours. This figure has been updated with the most current figures from the Oregon State Archives which list the most current OARs filed through October 15, 2013 (Oregon Administrative Rules: Private Child Caring Agencies Licensing Umbrella Rules, 2013, p. 215).

In Oregon, DHS requires state foster parents to complete two trainings which are referred to in OAR 413–215–0316 Orientation Training and Foundations Training (see Appendix C). This OAR describes the training requirements that the foster care agency must provide, as well as the topics that must be covered. The topics that must be covered during the Orientation include:

- the policies and procedures of the foster care agency,
- a description of the needs of the children in that agency,
- the culture of foster care,
- grief and loss specific to foster children,
- the rights of foster parents,
- the responsibilities of foster parents,
- the long term ramifications of foster care on foster children,
- the resources available to foster parents,
- confidentiality,
- the rights and role of the biological families, and
- mandatory reporting requirements. (Oregon Administrative Rules: Private Child
 Caring Agencies Licensing Umbrella Rules, 2013)

For the complete list and exact wording of the OAR, please see Appendix C. Additionally, OAR 413–215–0326 Training for Parents in Certified Provider Homes (see Appendix D) specifies the number of Foundation training hours that state foster parents need prior to certification and the topics that must be included in the training plan. The topics required for Foundations include:

• a description of the needs and characteristics of the foster children they represent,

- a description of how to parent foster children,
- suggestions as to how to deal with behaviors positively and without punishment,
- suggestions for working with the biological family,
- mandatory reporting requirements, and
- information about preparing the teen for transitioning out of foster care to independence. (Oregon Administrative Rule: Licensing Foster Care Agencies, 2008)

Training Requirements for Therapeutic Foster Parents

The legal requirements for training for TFPs in Oregon outlined in OAR 413–215–0326 are identical to the training requirements for state foster parents (Oregon Administrative Rules: Private Child Caring Agencies Licensing Umbrella Rules, 2013). However, both local sites involved in this study require more training hours for initial certification for TFPs and more in subsequent years to update their skills than does the state.

Local Agency Training for Therapeutic Foster Parents

This study involved three agencies which included one agency which provided the preservice training for two agencies which later certified and supported the TFPs. All three of these local agencies adhere to the legal requirements for training for TFPs in Oregon as outlined in OAR 413–215–0326. Each prospective TFP is required to attend a three hour Introduction to Foster Care (Intro) training that includes: a roadmap of the child welfare system, why children enter foster care, definitions of jargon, what makes a good TFP, benefits of becoming a TFP, expectations of TFPs, the matching process, the importance of maintaining placement, bio family involvement, the proper use of discipline, costs of providing care, the certification process,

paperwork needed, and health and safety requirements. This training is conducted by a team of two highly experienced professionals who answer all questions and make the presentation as interactive as possible while being sure that all the information is conveyed. This training is offered on the first Tuesday evening of every month. The attendance varies from no one showing up to having almost 30 participants. After attending this training, the prospective TFPs then attend the next part of the preservice training.

After either attending Intro or having a certifier cover the topics face to face, the prospective TFP must attend the preservice training. This training is usually offered from 9:00 a.m. – 5:00 p.m. on two consecutive Saturdays each month. During the summer months, the preservice training is offered on a full weekend – a Saturday and Sunday. As with Intro, the attendance varies from no one showing up to having almost 40 participants. If fewer than three families show up, the training is cancelled. Once the number of attendees exceeds 25, the amount of interaction decreases substantially so that the trainer can cover all the material. Each day, three modules (based on the OARs) are taught by three different trainers employed in varying positions in both agencies. The topics are: child development, child abuse, understanding challenging behaviors, transitions, grief and loss, child sex abuse, and culture, family, and community. All modules are presented in PowerPoint presentations. The manner in which the trainers present the material varies greatly among presenters. Some stick to reading the slides and answering questions. Others add in discussion questions, role playing, and interactive activities, depending upon the trainer. After each module, the prospective TFPs fill out and submit an anonymous evaluation form. There are no systems in place to determine the transfer of learning. After attending preservice training from the recruiting/training agency, the prospective TFP then

selects their agency (out of the two who certify TFPs in this study) and program of choice and continues on the certification process with that program.

Evaluation of Preservice Foster Parent Training

Most states require foster parent training before a home is certified (Gerstenzang, 2009). The federal government, through AFSA and the Chaffee Act, mandated that states stabilize placements and most states opted to initiate training to address this issue (Chamberlain et al., 2008). However, while "most foster parents in the United States are required to participate in training, . . . no empirical support exists for the training's effectiveness" (Chamberlain et al., 2008, p. 27). Collins, Kim, and Amodeo (2009) agreed, and suggested that "Although public child welfare agencies, as well as contracted private providers, conduct extensive amounts of training, the evaluation evidence for [the] effectiveness of training interventions is sparse" (p. 41). Nash and Flynn (2009), Rork and McNeil (2010) and Van Camp et al. (2008) also supported this conclusion when reporting the results of their studies. There is not enough data to know if preservice training is effective.

The literature was clear that the effectiveness of preservice foster parent training has not been thoroughly researched and that this is a known issue (Nash & Flynn, 2009; Rork & McNeil, 2011; Van Camp, Vollmer, et al., 2008). "Although there is widespread acknowledgement of the need for more attention to evaluating training interventions, the knowledge base remains thin" (Collins et al., 2010, p. 42). There is a need for empirical data relating to the efficacy of the preservice training currently being conducted (Collins et al., 2010). Along with empirical data on the effectiveness of preservice training, key issues need to be identified that should be addressed in the training, both in confirming those issues that have previously been identified and

identifying new issues as more research is conducted (Dozier et al., 2009). As a result, I collected data from current foster parents about what may have been missing from their training and what additional knowledge might have helped them succeed, supporting efforts to go forward in developing "evidence based practice[s] to address different levels of need and risk in foster care" (Fisher et al., 2009, p. 122).

Implications

The outcomes/findings of my research informed the development of the project presented in Section 3 of this paper. Therefore, the project that best fit the needs of all interested parties was to present a policy recommendation paper to submit to all participating agencies with recommendations for change. The goals of the project were three fold. First, it is expected to present the results clearly and succinctly. Second, it puts forward some ideas that came out of the results. Third, it will outline policy recommendations based on the results.

Summary

The problem this section addressed was how well the preservice training offered meets the needs in preparing TFPs for the behaviors of the children placed in their home and whether improving the preservice training might be the key in limiting multiple placements and foster parent attrition. The rationale offered for studying this problem was two–fold. First, the Chafee Act requires that foster parents receive training before and after a child is placed to assist the foster provider in handling the difficult behaviors they may face with the foster children placed. However, the county, state, and federal government report that foster parent attrition is still too high. The AFSA of 1997 stipulates that the "safety, permanence, and well–being" of children in foster care are of paramount importance and requires that states demonstrate that they are

complying with the law (AFSA, 1997). Although the average number of placements a foster child experiences in Oregon has decreased, it is still too high (Oregon Department of Human Services, 2015). States are mandated to reduce foster parent attrition and the number of child placements (Chamberlain et al., 2008).

A section defining key terms was included. The significance of the problem was then presented with the guiding questions clearly outlined. The review of the literature included: a brief history of foster care in the United States explaining how foster care evolved to what it is today, sections explaining the difference between state and therapeutic foster care, short sections outlining the training requirements for state and therapeutic parents, and a section that presented the extant literature on studies on the effectiveness of preservice training. Finally, there was a section that included implications for the study and possible project directions. Section 2 outlines the methodology that was used in the study, as well as reporting the findings. Section 3 presents the project that derived from the findings. Finally, Section 4 presents my reflections and conclusions from the dissertation process.

Section 2: The Methodology

Introduction

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. There are too few studies investigating the effectiveness of preservice training for foster parents in general and virtually none about the training required to properly prepare TFPs (Children and Family Research Center, 2004; Collins et al., 2010; DeGarmo et al., 2009; Esaki, Ahn, & Gregory, 2012; Robson & Briant, 2009; Rork & McNeil, 2011). The studies that do exist are not easily replicable and have issues with validity, consistency, and reliability (Rork & McNeil, 2011). As stated in Section 1, researchers have suggested that the place to begin in understanding the value of these programs is to ask foster parents themselves about their perceptions of the efficacy of their training after they have had some experience as a foster provider (Darling, 2007; Hall, 2012; Jolly & Russell–Miller, 2012; Nash & Flynn, 2009; Ortiz, 2000; Rork & McNeil, 2011). In keeping with that suggestion, a qualitative, phenomenological research design was used for this study based on an in depth investigation of the lived experiences of foster parents themselves.

In the following section, I will first discuss the research design and approach, including the justifications for my choices. I will subsequently describe in detail the setting and sample. I will next lay out the following: the target population and sampling frame, participants, instrumentation and interview guide, data collection procedures, data credibility and transferability, data analysis, and ethical considerations and informed consent. I will then describe the assumptions, limitations, scope and delimitations of this study and measures taken

for the protections of the participants' rights, including confidentiality, informed consent, and protection from harm. I will then provide data analysis, with a comprehensive section on the findings from the study and then close with a short conclusion.

Research Design

Selecting the appropriate research design for a study is critical to the effectiveness of the study (Mitchell & Jolley, 2013). Study after study in the literature offers comments on the lack of research into foster parent training effectiveness (Chamberlain et al., 2008; Children and Family Research Center, 2004; Collins et al., 2010; DeGarmo et al., 2009; Dorsey et al., 2008; Esaki et al., 2012; Holland & Gorey, 2004; Lee & Holland, 1991; Robson & Briant, 2009; Rork & McNeil, 2011). Additionally, several of the studies suggested that the beginning point in any proposed study should be to ask the foster parents themselves about their perceptions of the content and the efficacy of the training offered (Darling, 2007; Hall, 2012; Jolly & Russell–Miller, 2012; Nash & Flynn, 2009; Ortiz, 2000; Rork & McNeil, 2011). This study was developed based on their input.

At first, I considered conducting a quantitative survey that could be easily replicated and would offer concrete conclusions. I found several surveys that could have been adapted to my purpose and received permission to adapt them. As I delved deeper into the literature, however, I discovered the problem was that even when the state mandated specific numbers of hours of preservice training and required that specific topics be covered, foster parents and TFPs were often not adequately prepared to deal with the behavioral challenges they faced with their foster child. This was corroborated by the high number of multiple placements and high foster parent attrition that occurred (Brown & Bednar, 2006; Holland & Gorey, 2004; James, 2004; Price et

al., 2009). It became clear that what I was to seek in depth answers that quantitative, empirical data could not provide. I needed to conduct an in depth investigation of the lived experiences of TFPs to fully understand the possible influence that preservice training had on the preparedness and attrition of TFPs, the kind only generated by a qualitative instrument.

I looked at several qualitative methods, including ethnography, grounded theory, narrative research, and phenomenological research. Ethnography did not fit because, due to confidentiality and logistical issues, I could not study foster parents in their homes over a prolonged period of time. Grounded theory did not fit because I did not need to develop a theory based on the views of the participants, and I would not be able to compare two groups. Narrative research did not fit because I wanted to hear about the lived experiences of foster parents in relation to their training, not their lives in detail. I wanted to study the lived experiences of foster parents to provide rich information that could facilitate in depth analysis of participants' perspectives of the foster parent training process (Moustakas, 1994; Schultze & Avital, 2011). Phenomenological research fit these criteria.

To meet the objectives of this study, a qualitative phenomenological research design was used. A qualitative case study using this design facilitates in depth analysis of a phenomenon within a group of participants without the controlled environment of a laboratory (Mitchell & Jolley, 2013; Silverman, 2011). The advantage of qualitative studies is the richness of the data collected, especially when collected through interviews and the opportunities offered to modify the course of the interview when new threads open within its context (Gredler, 2001; Moretti et al., 2011). I used qualitative methodology to investigate the personal experiences of the participants in the study to better understand their corresponding meanings.

For this study, the experiences of TFPs from two agencies in Oregon who attended the preservice training from a third agency were collected to identify the effectiveness of different aspects of preservice training. The trainings were offered to prepare TFPs to work with the foster children assigned to them. The assumption is that the level of preparation of these foster parents had an impact on the number of placements foster children must endure and also the high level of TFP attrition. Because phenomenological research is based on the participants' lived experiences, it offered a comprehensive overview and insights into the participants' thoughts, perceptions, and experiences as they related to the preservice training for foster parenting (Moustakes, 1994).

Target Population and Sampling Frame

The target population consisted of TFPs certified during February and March 2015 by two therapeutic foster agencies in Oregon. The sampling frame, which was a representative subset of the target population, included TFPs from the agencies who had a nonmedically fragile therapeutic foster child between the ages of 3 and 17 who had lived for at least 30 days in their home for full time providers or had at least one weekend placement for respite providers, and were either from single or dual parent foster homes.

Determining the exact sample size that is necessary to achieve theoretical saturation in a qualitative phenomenological study is not precise, with different experts citing different numbers needed for the sample size and saturation (Guest, Bunce, & Johnson, 2006; Mason, 2010). Guest, Bunce, and Johnson (2006) conducted a study that reviewed seven databases and 24 research methods books and concluded that this literature not only did not sufficiently define saturation, it provided, "no description of how saturation might be determined and no practical guidelines for

estimating sample sizes for purposively sampled interviews" (p. 60). Guest et al. (2006) found seven sources that listed their protocols for deciding how many interviews would be enough to be considered saturation, depending upon the type of study. The number that was most consistent for phenomenological studies was between six and 12 interviews. Additionally, for qualitative studies, a sample size of 10–20 participants is often deemed sufficient to gather detailed accounts of personal experiences (Silverman, 2011). Moustakas (1994) noted that a small sample size is advised for phenomenological research studies in order to allow time to gather a rich, in depth understanding of the phenomena under study. As of February 28, 2015 there were 78 homes certified for the agencies' therapeutic foster care programs. Originally, I wanted to continue the interviews until no more significant insights or themes emerged after at least two consecutive interviews, but in the end, only 12 of TFPs in this population agreed to participate.

Participants

To recruit a sample of TFPs who met the criteria for inclusion discussed in the sampling frame, purposive sampling was used. Purposive or purposeful sampling is frequently used in qualitative studies for focused sample recruitment (Marshall & Rossman, 2011). Purposeful sampling allows for the inclusion or exclusion of subjects as the research begins (Marshall & Rossman, 2011). In this case, the inclusion criteria included that each TFP had gone through preservice training and that each TFP had had at least one child placed in their home full time or at least one weekend placement as respite providers after the training was completed. Moreover, purposeful, convenience sampling was chosen because the people selected were accessible and willing to contribute to the study, and because an effective assessment could be conducted in this way faster and at less cost (Marshall & Rossman, 2011).

I intended to use snowball sampling to identify additional subjects based on recommendations from people in the original sample after they became aware of the purpose of the study (Noy, 2008). I thought that snowball sampling could also increase the number of TFPs from the two certifying agencies who would agree to participate to develop a clearer picture of the value of the training these agencies offered (Noy, 2008). However, none of the TFPs offered the name of another TFP who might be willing to participate.

To recruit individuals for this study, I contacted the two local certifying agencies as well as the third recruiting/preservice training agency. These agencies were informed of the nature, purpose, and significance of the study, especially in terms of the questions to be raised to existing TFPs about the efficacy of their preservice training in content and delivery. The agencies agreed to cooperate in the study, and I obtained signed Letters of Cooperation (Appendix E) from all three local foster care agencies after I received IRB approval and before I began any work. I also provided a signed Confidentiality Agreement (see Appendix F) to all three agencies to assure them of the confidentiality of my work and let them know that I would not share identifying information from respondents with anyone.

I emailed TFPs associated with both agencies using addresses provided by both certifying agencies, explaining the nature and intent of the study and inviting them to participate as an interviewee. The email included a copy of the Informed Consent Form containing the measures taken for their ethical protection, an assurance that participation was voluntary with minimal risks to the participant, that no payment would be given, that no one would ever see their names but me, and that their responses would be secured in a password protected file and destroyed after five years, all per Walden University policies. I also provided participants with contact

information for individuals at Walden University to whom they could address comments and complaints. In each case, when individuals agreed to meet, I obtained their verbal agreement to the Informed Consent Form before our meeting.

Additionally, one certifying agency sent out an email to all their providers letting them know that I would be contacting them and asking them to participate in my study. The other certifying agency announced at their support group that I was looking for participants and encouraged their providers to participate. I asked each participant if they knew of anyone who might want to participate. I asked the program managers of the programs to announce that I was looking for participants, which they did. I attended trainings and support groups for both agencies and asked for participation. I updated my plan and allowed for phone interviews as requested by several participants who could not have participated any other way. Finally, I called all potential participants from the lists from the agencies and asked if they would like to participate. In the end, I was able to conduct 12 interviews from the 78 families, speaking with about 15% of the total available TFPs.

Instrumentation and Interview Guide

In this study, I employed semistructured face to face or phone interviews as the primary mechanism for gathering data. I asked questions aligned with the purpose of the study and its research questions. An Interview Guide (see Appendix B) was developed with questions adapted from an existing instrument called the 2012 Foster Parent Survey: Survey Questions 4 to 5 (see Appendix G) which was reproduced and modified with the permission of Nancy K. Raiha of the Children's Administration, Washington State Department of Social and Health Services (Raiha & Whitbeck, 2013) (see Appendix H). Using this survey instrument as the basis for interview

questions helped ensure that appropriate content was covered. Then, open ended questions were added to support more in depth discussions with participants and modify the tool as information emerged. I added several additional questions in the course of the study as I realized they were necessary to fully address the research question, and modified some of the existing questions after the interviews for clarity. Since most of the interviewees could not understand the question, "How do you think the delivery impacted your learning experience?" it was deleted.

I attempted to establish a researcher/participant working relationship from the moment of contact. I introduced myself and made sure that participants knew that I was a foster provider and that I had gone through the preservice training myself. In my experience as a foster parent recruiter for the past eight years, I have found that letting people know of these experiences can help build the desired relationship. I reiterated the rationale for this study which was to strengthen the training and assist future foster parents. I reminded them that their identities would only be known to me and that confidentiality would be strictly upheld. I actively listened to them and responded to their concerns appropriately and honestly. I also reiterated that I was a mandatory reporter.

The questions in the Interview Guide were separated into five categories: demographics and background, preservice training content, preservice training delivery, attrition, and multiple placements. Each category had open ended questions to encourage the participant to open up and speak about their experiences.

Data Collection Procedure

Qualitative research, especially studies that use interviews, are advantageous in terms of the richness of the data that is collected (Moretti et al., 2011). Interviews were more appropriate

than strict quantitative surveys for this study because the study was designed to address local needs. Research questions addressed the lived experiences of participants. Also, recorded interviews offered an opportunity for respondents to freely express their answers without having to wait for the interviewer to write out their responses.

Before I scheduled any field test, pretest, or final interviews, I created a Field Notes and Reflective Journal Log (Appendix I) to keep track of data and emerging understandings. I used this log to record my thoughts, questions, and details during each interview. I utilized NVivo 10 qualitative analysis software to analyze the data after the interview but used the Field Notes and Reflective Journal Log to note my observations and thoughts after each interview.

Prior to actual data collection, I interviewed the heads of three participating agencies and two additional staff members referred by these administrators of these agencies as a field test of the Interview Guide to ensure that participants would understand the questions and that the questions to be offered were appropriate to support the study. These five individuals consented to help and agreed to test the interview questions. All were professionals in the field. They all had extensive experience in foster care and all had knowledge of the preservice training. One participant was bilingual and bicultural and addressed the cultural nuances related to the work of the TFPs. None of these people were questioned for the final study.

The participants for the field test were asked to interpret each question in their own words and understanding. The actual meaning and intent of each statement was then relayed to the participant and modifications were made to ensure clarity. Each participant in the field test assisted in revising the Interview Guide, and individual revisions and the responses that

prompted them were noted in my Field Notes and Reflective Journal Log. Results from the field test were the basis for changes to the Interview Guide.

After the Interview Guide was updated during the field tests, a pretest of the interview was conducted with two former foster parents. One had been a TFP through one of the participating agencies and the other had worked elsewhere in the state. Neither of these individuals were interviewed as part of the final study. There were two main reasons for conducting the pretest interviews after the field test. First, it was important to make sure that actual foster parents reviewed the interview questions for clarity and meaning. Second, it was critical that the questions were not biased and did not cater only to native English speakers, since a percentage of the TFPs had first languages other than English.

After the field tests and pretest interviews, I contacted the foster care agencies and asked them to provide the names, phone numbers, and email addresses of their existing foster parents so I could contact them to see if they were interested in participating in the study. Using the list of email addresses provided, I emailed the existing foster providers, explained the nature and intent of the study, and invited them to be interviewed. The email included the Informed Consent Form containing the measures taken for their ethical protection, an assurance that participation was voluntary with minimal risks to the participant, that no payment would be given, that no one would ever see their names but me, and that their responses would be secured in a password protected file and destroyed after five years, per Walden University policies. I also provided the participants with contact information for the individual at Walden University to whom they could address comments and complaints. I included Walden University's approval number for this study, which was 02–03–15–02203061, and I noted that it expired on February 2, 2016. For

potential participants who did not have an email address on record, phone calls were made, insuring that the same data were collected by reading a prepared script that explained the nature and intent of the study and inviting their participation.

I emailed each participant the Informed Consent Form and obtained their acknowledgement of receipt before I scheduled the interview with them. Each participant either emailed me back that the message had been reviewed and understood it or gave me verbal acknowledgment. After I received this acknowledgment, I scheduled the actual semistructured face to face interviews based on the convenience of the consenting participants. When I scheduled the interviews, I reminded each participant of my past relationship with them in my role as recruiter and back up trainer. In the past, I was a foster provider for one of the agencies. It was over five years ago, but it was possible that some of the participants might have known me in that capacity, though that did not turn out to be the case. Currently, the trainers most often come directly from the staff of the two certifying member agencies. My current role is that of a recruiter and back up trainer for the agency whose only purpose is to recruit the apeutic foster providers and host the preservice training. While I no longer regularly train TFPs, I am often present at preservice trainings at the beginning and the end of the sessions in the capacity of recruiter, so the participants will most likely have met me before as most of the foster providers attend the preservice training hosted by this agency. However, I seldom have further contact with the foster providers until after they have been certified.

I anticipated the possibility that my role as the recruiter and backup trainer might have an impact on the reception I received when I interviewed the TFPs, and I compensated for that.

However, in discussion, participants indicated that they understood my role as a researcher, and

the potential conflict did not materialize. Already having had a working relationship with most of the participants seemed to allow for a closer connection with the interviewees. During my recruiting and training, I was honest as to some of the difficulties and challenges I had faced while fostering children. During the interview, this honesty seemed to have served to engender trust, indicated that I wanted their candid opinions, and communicated to them the idea that I could relate with their experiences.

Each interview lasted from about 40 minutes to a little more than an hour, though no time limit was set since the actual duration was highly dependent on the answers offered and personality of the individual participants. The review of the Informed Consent Form took about 10 minutes per interview. The recorded portion of the interview lasted on average between 10 and 40 minutes, and the closing lasted about five minutes.

I had originally intended to meet with participants in the local library, but I ran into problems. Meeting rooms were often booked when I needed them or there was no library available when and where I needed it. However, I was able to use the conference rooms at one of the agencies on the weekends when no one was there. This worked well, and I was able to do the first 10 interviews either at the library or in the conference room. At that point, I was having difficulty getting more participants, and those who said they might participate declined to do so because of time constraints. I suggested that we conduct the interview over the phone, and that is how I got the final two participants to agree to provide data.

I began each interview session by introducing myself again and respectfully greeting the participant. I reiterated that I did not represent any certifying agency and that there would be complete confidentiality, unless they reported abuse as I am a mandatory reporter. I was clear

that I was looking for honest feedback on the quality of the training, regardless of whether or not I conducted one of the training sessions. I then read them the Informed Consent Form, had them sign it in person, and gave them a copy and told them to keep it for their records. For the two telephone interviews, the Informed Consent Form electronically and I obtained their verbal consent again over the phone after I read it aloud to them. I then conducted the interview using the Interview Guide. Table 4 maps the interview questions to the research questions.

Table 4

Relating Interview Question to Research Questions

Research Question **Interview Question** How effective is the agency's Think back to the preservice training. What information (content) was preservice training in most helpful in preparing you for the challenges of having a foster preparing TFPs for the child? difficulties they face after a Do you think that the preservice training adequately prepared you for child is placed? the behavioral challenges you have faced from the foster children place in your home? Why or why not? How well does the agency's • What keeps you motivated to be a TFP? preservice training cover Have you ever seriously thought about resigning? If so, what stopped issues TFPs encounter with you? If not, what helps you to continue this work? the foster children that How effective was the training in giving you the skills to handle the contributed to or prevented pressures of being a TFP? attrition of certified TFPs? How well does the agency's How many foster children have been in your home, both full time and preservice training cover respite? Not exact number, a range is fine. issues TFPs encounter with How often did a foster child come into your home after abruptly the foster children that disrupting from another foster home? contributed to or prevented Have you ever asked to have a foster child removed from your home? multiple placements of foster Has it happened more than once? children? If yes, why? What do you think happened? What could have helped you keep that child in the home (if anything)? What should be changed in What information (content) would you have liked to have included the delivery or content of the that was not or expanded that was? Basically, what do you wish you agency's preservice training had known about fostering? to meet the expressed needs Is there any information (content) that was not helpful? Why? of the TFPs? Do you have any suggestions to improve the content of the preservice training? Have you ever referred back to the materials handed out at the training? Why or why not? Did the trainers use the PowerPoint on the overhead? If so, did you follow in the binder? What did you think of the delivery of the preservice training – specifically the presenters' teaching style? Did you feel engaged? If not, what could have been done to better engage you? How would you feel if we handed out a questionnaire on each day and had you fill it out, sign it, and turn it in to us at the end of each

preservice training?

How do you think the delivery impacted your learning experience? What suggestions do you have for improving of the delivery of the Each interview was audio recorded with the permission of the participant, as stated in the Informed Consent Form. Audio recording made the interviews easier to conduct as the participant was not distracted by note taking, and I was able to transcribe the interviews later. After all the questions in the Interview Guide were asked and discussed, I ended the interview by thanking the participant and informing him or her that he or she would be asked to review the transcript of their interview to ensure accuracy.

Data Credibility and Transferability

Each interview was member checked (also known as respondent validation) for accuracy at several junctures (Lincoln & Guba, 1985; Sandelowski, 2008). Member checking requires verification of initial interpretation accuracy and transcript approval with participants (Lincoln & Guba, 1985; Sandelowski, 2008). Member checking was done at several junctures instead of just once. First, I asked each participant clarifying questions during the interview. Then, at the end of each section, I summed up what I heard the participant say and made sure that my interpretation reflected theirs. Finally, I had the interview transcribed and the participant was asked to read over the printed transcript of the interview and determine if the transcript accurately represented their experiences, if this is what they meant to say, and if they would like to make changes or clarifications in the text (Sandelowski, 2008). Each participant member checked their interview. Only one made a minor change in the text.

Table 5 outlines the initial data collection and coding.

Table 5

Data Collection for 12 Participants

| Date | # Interviews | Action | | |
|-------------------|--------------|----------------------------|--|--|
| 3/04/15 | 2 | Initial Coding | | |
| 3/09/15 | 2 | Initial Coding | | |
| 3/12/15 | 2 | Initial Coding | | |
| 3/17/15 | 4 | Initial Coding | | |
| 3/29/15 | 2 | Initial Coding | | |
| Total Interviews: | 12 | Total Coded: 12 Interviews | | |

Transferability is correlated to external validity (Munhall, 2012). Furthermore, it is a characteristic that focuses on the ability of the study to allow a transfer of findings to another population different from the one used in this study (Lincoln & Guba, 1985). The conclusions drawn from this study may not be transferable as they reflect only the voices of those interviewed. However, it can be expected to reflect a consensus of the opinions of the TFPs in Oregon and may prove instructive to TFPs elsewhere as long as the reader adjusts their interpretations of the information offered to fit the local context. I collected detailed descriptive data and direct answers from the participants.

Ethical Considerations and Informed Consent

Informed consent or the right of each individual to voluntarily choose to participate in a study, to decline to do so, and to discontinue participation as the interview progresses is required in all studies since the Nuremburg Code was developed after World War II (Weindling, 2001). Critical to all studies are the issues of participants' rights, confidentiality and informed consent (Weindling, 2001). All of these items were included in the Informed Consent Form given to each participant either electronically or on paper.

Each potential participant was emailed the Informed Consent Form. Upon meeting, each participant was also given and required to sign a copy of it prior to the interview. This form gave each potential participant all the information that they needed to support an informed decision as to whether they wished to participate. This information included: who was being asked to participate in the interview, who was doing the study, who was eligible to participate in the study, the purpose of the study, how long it would take to complete the interview, the fact that interviews were audio recorded, sample questions, information on the voluntary nature of participation of the interview, any risks and/or benefits of the interview for the participant, payment policy (no payment given), privacy of the participant, a statement of confidentiality stating how the each participants identity was protected, how the studies were stored, who had access to the original data, the IRB approval number, and the contact information of Walden University's representative and myself.

Assumptions, Limitations, Scope, and Delimitations

In the course of the study, I contacted, interviewed, and member checked with TFPs whose homes were currently certified through the chosen agencies. The Informed Consent Form stated that the respondent should only take part in the interview if he or she had at least one placement for full time providers or at least one full weekend placement for respite providers. All respondents attended the preservice training offered through the local recruiting/preservice training agency.

The following were assumptions upon which this study was based:

 The certified home had had at least one child placed if they were full time and one full weekend placement if they were respite.

- All respondents attended preservice training.
- Each TFP was interviewed only once.
- All preservice training was similar enough to be able generalize the results with other preservice training programs.
- There would not be a significant difference in responses from state foster parents and TFPs.
- The list of currently open homes was complete and accurate.
- The TFP understood that the study was only referring to the specific local agency's preservice training and not any other training they may have received subsequently.
- The respondents from other countries and cultures correctly interpreted the questions.
- The respondents from other cultures gave accurate feedback and did not just tell
 us what they thought the interviewer wanted to hear (which can be a cultural
 issue).

The following are some of the elements that limit the generalizability of the study:

- The sample came only from TFPs from the two certifying agencies in Oregon.
- The preservice training was proprietary to the agencies, though it did fulfill the legal requirements of preservice training as laid out by the state of Oregon.
- The interview was only available in English.
- The small size of the sample.

The following are some of the delimitations of this study:

- No translation service was provided.
- The names of participants were not collected (each was assigned a number).
- Self selection could have been an issue because of the people who declined to participate.

Data Analysis

I prepared for the data analysis by following Moustakes' (1994) phenomenological research process which involves the "Epoche, Phenomenological Reduction, Imaginative Variation, and Synthesis" (p. 84). The first step is the Epoche process, where, "we set aside our prejudgments, biases, and preconceived ideas about things" (Moustakas, 1994, p. 85). I cleared my mind, printed fresh transcripts, and approached the analysis from a fresh perspective, free from preconceived notions about the material. I then began the next step of phenomenological reduction which involves, "seeing things as they appear, in returning to things themselves, free of prejudgments and preconceptions" (Moustakas, 1994, p. 90). To do so, I referred back to each interview multiple times, each time noting textural qualities. I then began listing and sorting every expression into preliminary groupings (horizonalization) related to the questions asked (Moustakas, 1994). I noted all perceptions of the TFPs essential in developing an understanding of their experiences (Moustakas, 1994).

The second step of the phenomenological reduction step was to, "determine the Invariant Constituents by reduction and elimination" (Moustakes, 1994, p. 120). An invariant constituent is an idea or expression that is introduced by an interviewee that is nonrepetitive and is guided by the following two questions posited by Moustakes (1994):

- 1. Does it provide a necessary expression that is sufficient for understanding the meaning that the participant intended to convey?
- 2. Is it possible to label the experience described? (p. 120)

Using this process, I gathered and authenticated the invariant constituents from the full transcripts of each of the 12 interviews. I also eliminated expressions that had nothing to do with the requirements. For example, one respondent was asked, "What information of the content would you have liked to have included or expanded that was not?" and that individual answered, "There wasn't enough support". This expression had nothing to do with the training and, therefore, was not included in the results. Respondents are human and often want to have their say, even if what they are saying is off topic and not relevant to the question asked. These expressions were excluded from the results.

Additionally, I put a procedure in place for handling discrepant cases. There has been some discussion as to the differences in meanings between negative cases, disconfirming cases, and discrepant cases (Anzul, Ely, Freidman, Garner, & McCormack–Steinmetz, 2003; Padgett, 2008). In the end, the consensus seemed to be that the differences in definition become blurred, and the significance was in the noting and utilization of these cases in the analysis (Anzul et al., 2003; Padgett, 2008). Therefore, I referred to each case that was an exception as a discrepant case. I noted each discrepant case and then reviewed it to check for general themes, consistent significant alternative points of view from those of the rest of the group, and answers that did not fit any category. I considered all discrepant cases and looked for themes.

After I gathered and authenticated the invariant constituents, I then utilized Moustakas' (1994) next step of imaginative variation, where meanings are derived from continually

analyzing the invariant constituents from different perspectives, different lenses, and putting them together in different ways to disinter meanings (p. 120). After much fluidity, I tagged the clustered findings and branded these invariant constituents as the "core themes of the experiences" (pp. 120–121). I sorted these invariant constituents into subcategories, continually refining and questioning the true meaning of each expression. To look at the information from a differing lens, I created a textural synthesis of each interview, looking for meanings that could only be seen by looking at the whole.

Finally, I began the process of synthesis – finding the meanings behind the expressions (Moustakas, 1994, p. 102). Using this technique, I established categories that aligned with my guiding research questions. I began with a preconceived notion that I wanted to sort the invariant constituents into themes, but each time I tried, the idea of themes and subthemes broke down. It was only when I released my attachment to the word "theme" and used the correct verbiage of "category" that the patterns of the experience began to emerge. I then finalized these categories after several more reviews of the interview transcripts, continually revising and questioning the groupings until after completing the findings section.

I validated the invariant constituents, subcategories, as well as the three main categories by asking the following questions as proposed by Moustakas (1994):

- Are they expressed explicitly in the complete transcription?
- Are they compatible if not explicitly expressed?
- If they are not explicit or compatible, are they relevant to the participant's experience and should they be deleted? (pp. 120–121)

After asking the questions, I also manually checked the entire clustered and themed list of experiences versus the original interview transcripts of the participants.

Findings

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. The first step was to report the results of the basic demographic questions asked of all participants. Their responses are in Table 6. There were 12 participants, two of whom (17%) were part of single parent households. Seven of the 12 homes represented (62%) were bilingual, and another language besides English was spoken in the home. The average length of time that these participants had been certified at the time of the interview was four years. The provider who had been the foster provider the longest attended the preservice training in 2006. The most recent foster providers attended the preservice training in 2014. All but one (92%) of the providers attended the training over two full weekend days, with only one having attended over seven Tuesdays. Exactly half (50%) of the participants had previous parenting experience while the other half had none.

Table 6

Basic Demographics of Participants

| Participant # | Single/ dual parent home | Bilingual | Years certified | Year preservice completed | Weekend training | Previous parenting experience |
|---------------|--------------------------|-----------|--------------------|---------------------------|---------------------|-------------------------------|
| 1 | Dual | Yes | 8 | 2007 | Yes | Yes |
| 2 | Dual | Yes | 3 | 2012 | Yes | Yes |
| 3 | Dual | Yes | < 1 | 2014 | Yes | No |
| 4 | Dual | Yes | < 1 | 2014 | Yes | No |
| 5 | Dual | No | 1 | 2013 | Yes | No |
| 6 | Dual | No | 5 | 2010 | Yes | Yes |
| 7 | Dual | Yes | 9 | 2006 | No | No |
| 8 | Single | No | 7 | 2008 | Yes | Yes |
| 9 | Single | Yes | 3 | 2013 | Yes | No |
| 10 | Dual | No | 3 | 2012 | Yes | Yes |
| 11 | Dual | Yes | 3 | 2013 | Yes | Yes |
| 12 | Dual | No | 4 | 2011 | Yes | Yes |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

It is relevant to note that one of the 12 people interviewed offered responses that were materially different from those of the others. While almost every interviewee digressed from the questions asked and began to discuss their relationship with their agency staff or their experiences with the state, I brought them back to discussing the preservice training and they did not veer off topic again. However, one person brought what appeared to be a clear agenda to the discussion.

Instead of answering my questions, that individual repeatedly brought up incidents with and feelings about certain agency staff members and/or policies that had nothing to do with the training. For example, when asked if he/she had any suggestions to improve the content of the preservice training, the response was, "Right. So don't expect any support and expect yourself to be blamed for the behaviors."

During the clustering and thematizing process, three major categories of responses emerged that aligned with the guiding research questions were:

- 1. The effectiveness of the preservice training in TFP preparedness for the behaviors of foster children;
- 2. The effectiveness of the preservice training in helping to prevent TFP attrition; and
- 3. The effectiveness of the preservice training in helping to prevent multiple moves of the foster child.

Category 1

The first category and the four subcategories attached to it directly addressed the first objective of this study, which was to determine the aspects of the agency's preservice training that helped or hindered certified TFPs' preparedness for the foster children placed in their home. The guiding question was, "How effective was the agency's preservice training in preparing TFPs for the difficulties they faced after a child was placed?" Table 7 displays that the TFPs reported that, overall, the preservice training was effective in preparing them for real life situations. Seven of the 12 participants (58%) stated that the preservice training was effective and that the insights gained from it could really be employed in real life situations. Two more interviewees felt that the preservice training was somewhat helpful in preparing them for the behaviors they faced.

Table 7

Category 1: Effectiveness of Preservice Training in TFP Preparedness

| Category: Effectiveness of the preservice training in TFP preparedness | # of |
|--|--------------|
| for the behaviors of foster children | interviewees |
| Preservice training was effective and could really be employed in real | 7 |
| life situations | , |
| Preservice training was somewhat/mostly effective in preparing the | 2 |
| TFP for the behaviors of the children placed | 2 |
| Preservice training was not effective in preparing the TFP for the | 2 |
| behaviors of the children placed | 2 |
| The preservice training did not apply as they already had the | 1 |
| education/skills | 1 |

Note. Each interviewee could only respond to each question once, so the total number of interviewees equals 12.

The majority of interviewees reported that the preservice training was effective in preparing them for their foster child and could be employed in real life situations. Participant 2 agreed that the preservice training was effective, noting that "That whole day was informative and helpful. I remember because we weren't familiar with child abuse, sex abuse, you know... all the things children have gone through and go through. And it was helpful for things we've had come up later". Participant 8 stated that the program and training have been good and did not suggest further improvements: "Well, I think this is a very good program. And one thing I really appreciate is all the support that we get from the people in charge as well as other foster parents. So it is been really good." This might imply that, not only was the content of value, but the opportunity to meet with trainers and perhaps others entering the system enhanced the comfort level of the individuals as they entered the system. Participant 11 was more effusive, "I'd like to give a shout out that preservice training... that was wonderful!"

In two cases, the TFP had extensive training/education/experience in the field, but both said that what they found helpful in the training was that it facilitated a conversation between

them and their less experienced partner on parenting children with these issues. Participant 6 stated:

I think, for me... I think it is all helpful. I think...even with my education, it is always a good reminder. it is always important to review. I don't think there's anything that's not helpful. And I think, also...in our relationship, it was helpful to spark conversation. It was helpful for my partner to understand...like because I have two children of my own entering the relationship that I had...it was good for us to have the discussion about what she's seen before.

Category 1: Subcategory 1. The first subcategory consisted of the responses of the interviewees on the most helpful content of the preservice training as presented in Table 8. The top three responses as to the most helpful aspects of the preservice training, with each response being listed independently by three interviewees (25%), were: all of the preservice training, concrete examples of behavioral issues, and the module on challenging behaviors.

Table 8
Subcategory 1: Most Helpful Content of Preservice Training

| Invariant constituent | # of instances |
|--|----------------|
| All of the preservice training | 3 |
| Concrete examples of behavioral issues | 3 |
| Module on challenging behaviors | 3 |
| Expect the unexpected as a foster provider | 2 |
| Module on child development | 2 |
| Personal stories of the trainers | 2 |
| Social circles activity | 1 |
| TFP assertiveness | 1 |
| Working with DHS | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of invariant constituents in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

Three of the 12 interviewees felt that they could not separate out one particular aspect of the training that was most helpful to them. Instead, they found it all helpful. Their responses mirrored their answer about the efficacy of the preservice training in Category 1. Participant 11 stated, "From my recollection, I believe that they were all good trainings". Participant 10 shared, "I actually enjoyed all of it. Because there's the teaching aspect. There's the role playing, which I really love."

Three of the 12 participants shared that the most useful aspect of the preservice training were the concrete examples of behavioral issues. Participant 5 stated, "I think that having real life stories of what's going on is really important." Participant 8 added, "Well, they told of personal experiences, and that had a lot to do with it [most helpful content], you know... So I think I learned a lot from that."

Participant 12 shared that all information taught at preservice was very useful, but that the module on the challenging behaviors of the children was particularly so: "That was the one. I knew a little bit about abuse and a little bit about child sex abuse. But the challenging behaviors information was the one that was most helpful for me."

Category 1: Subcategory 2. The second subcategory consisted of the responses of the interviewees on requested content and suggestions for improvement of the content of preservice training as presented in Table 9. Of all these responses, the top four listed in Table 9 were those mentioned significantly more often than the others.

Table 9
Subcategory 2: Requested Content of Preservice Training/Suggestions for Improvement

| Invariant constituent | # of instance |
|---|---------------|
| More concrete examples of challenging behaviors and strategies for dealing with | mstance |
| them | 6 |
| Realistically discuss the trauma/'damage' of the foster children and how that looks | |
| (violence, threats, etc.) | 5 |
| More personal stories from trainers | 4 |
| Realistically explain how difficult it is to be a TFP | 2 |
| More on working with/understanding bio families | 2 |
| | $\frac{2}{2}$ |
| More on grief and loss More on the exact role of the TER, being an educational surrogate. TERs role in | 2 |
| More on the exact role of the TFP – being an educational surrogate, TFPs role in | 2 |
| the therapeutic process, role in returning the kids to their bio families, where and | 2 |
| when does the TFP have some say, are they allowed to go to hearings. | 2 |
| Choosing the right placement for you | 2 |
| Add in when to refer back to the training materials | 1 |
| Add in when to call the support line | 1 |
| Discussion autism | 1 |
| What to expect from DHS | 1 |
| Dealing with visits – from agency, bio family, DHS | 1 |
| Protecting against allegations – keep doors open, rule of three | 1 |
| Document everything | 1 |
| Discussion on where they can take the foster child without permission, if they can | 1 |
| have a friend spend the night, who needs to get a background check | |
| How attachment and grief and loss affect everything | 1 |
| How to parent a child that is not yours | 1 |
| Nothing. They covered it well. | 1 |
| Confidentiality – dealing with social media, school pictures, photos, yearbooks, | 1 |
| etc. | 1 |
| More on self care—taking respite | 1 |
| Discussion on all the different appointments – psychiatrist, therapist, skills trainer, | 1 |
| case worker, case manager, CASA, bio family, medical, dental, school, etc. | 1 |
| TFPs will be held to a higher standard than bio families | 1 |
| What to do when you forget to give meds | 1 |
| Dealing with the trauma on the TFP's family when things go wrong | 1 |
| More info on MPD (multiple personality disorder) | 1 |
| It's really on the job training, so "expect the unexpected" | 1 |
| More specifics on the different programs | 1 |
| Make sure to explain that the programs are not 100% privately funded | 1 |
| Perspectives from other cultures | 1 |
| More info on DID (dissociative identity disorder) | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of invariant constituents in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

When making suggestions to improve the training, half of the interviewees wanted more concrete examples of challenging behaviors and strategies for dealing with them. Participant 6 suggested that every module have a section on challenging behaviors commonly seen that relate to that topic. Participant 3 stated, "So say this kind of situation happens…like say a child's waiting by their door for their mom to come. OK. What kind of stuff would you do? It really gives you something to think about. Because these situations do kind of come up." Participant 8 stated that one of the most important lessons learned in the training sessions was how to handle behavior challenges commonly encountered when dealing with the children, and they wanted more about how to do so.

Five (42%) respondents requested more realistic discussion on how traumatized the foster children really were, and how that manifests in behavioral issues such as violence, threats, and maladaptive behaviors such as running into traffic. Participant 5 discussed how difficult it was to walk the line between being realistic and scaring people away. "We don't really do a good job of telling new foster parents the really hard parts. And I think it is a balancing act of trying to still bring them in and give them the support and not scare them away in the beginning." Participant 2 shared that psychological preparedness and training about the realities of dealing with traumatized children would have helped make the training more effective:

I think if anything, because we do therapeutic foster care, I think I would have liked more psychological training...just when kids break down. They touched on it a bit, and it was helpful for me, but to just really focus on just what these kids can do, are capable of doing, and how to handle situations like that. They give generalities. But nothing like...here's a kid that comes into your home and all of a sudden he blows up or breaks

down because your cat is looking at him, and he starts freaking out and goes, "your cat's staring at me and he's putting a spell on me." And then next thing I know, the kid's gone ballistic. I did not know that existed.

Four (33%) respondents wanted more personal stories from the trainers, specifically the trainers who had been foster parents or had specific stories on behaviors that those being trained might see and how that trainer handled each situation. Participant 3 described how effective it was to hear from a trainer who had also fostered, "And the specific stories helped. I think that more specifics really give us a feel for what we're going to be experiencing and what we're going to be going through." Participant 5 agreed, "I think that having real life stories of what's going on is really important." Participant 11 was even more specific about the impact of the personal stories and the desire for more, "When I became a foster parent, I lived most of the experiences from the training we got. I'm not going to go into detail, but that was really, really helpful."

There were three discrepant cases of note for Subcategory 2. For each, I asked about the content of the preservice training. In the first discrepant case, Participant 11 suggested, "I wish we could do the same [preservice] again." Now that that person had fostered, s/he felt that a level of context has been added that would allow TFPs to relate to the training differently.

In the second discrepant case, Participant 9 wanted more stories, but fewer that were "too personal". When asked what would be "too personal", this person stated that some of the stories caused discomfort and that was less helpful.

The third and final discrepant case in this subcategory was when Participant 9 stated that s/he would have appreciated more information on how to set up his or her home. This person felt

that it might have been useful to suggest that TFPs need to have "mandatory motion sensors, that you have to lock up cutlery and chemicals." It is important to note that this information was discussed in a training session that was part of the preservice but was not mandatory for all programs and was not taught on the full weekend of training.

Category 1: Subcategory 3. The third subcategory consisted of the responses relating to the efficacy of the delivery of the preservice training as seen in Table 10. The main finding in this subcategory was that 7 of the 12 interviewees felt engaged by the preservice training and found it useful, while 4 more felt that it depended upon the trainer. One respondent did not find it helpful.

Table 10
Subcategory 3: Preservice Training Delivery

| | # of |
|--|--------------|
| Invariant constituent | interviewees |
| Felt engaged by the style and delivery of the presenters. | 7 |
| Depended on the trainer. Some engaged us, some read the slides, did not seem to know the material, bored us. | 4 |
| Did not feel engaged. The presenter taught us like we were in fifth grade. | 1 |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

Seven (58%) of the respondents stated that they felt engaged by the style and delivery of the presenters. Participant 11 highlighted that the trainers engaged the participants well, "Yes. Most of the time, we were engaged. And the trainers were really good. They knew exactly what they were teaching. They had lots of experience." Participant 9 stated that the trainers were engaging, "Yeah. Definitely. And it definitely, obviously stuck in my brain." Participant 10 added, "First of all, I felt all of our presenters of the information were well informed. Um, they've obviously walked the walk, which is why it is easy cognitively to recognize."

An additional four (33%) felt that the effectiveness of the delivery depended upon the trainer. Participant 4 did not like when the trainers read from the slides, "The specific modules where people had just read. But yes, I would say it was less memorable for sure. Because the stories I still remember in specific detail." Participant 2 shared that she liked some of the trainers, but had issues with one:

[NAME] sat at the desk. Her PowerPoints did not work on the computer. She had to fumble forever to get it up there. And then she was just stumbling. It was so boring. She was monotonic. I did not feel she knew her material. It was like she was just reading this stuff

Participant 7 had a less positive view. When asked about the delivery of preservice training stated:

No, it was just something you would read out of a magazine. It wasn't specific. And some of the trainers did not seem to be qualified or relevant to your situation... Well, [NAME], when she trained, was a bulldozer. I mean, she was just... she taught it like we were fifth graders and she was the teacher.

Participant 9 went on to say that all the trainer has to do to rectify this situation was to give the trainees some respect, "don't treat them like idiots".

One invariant constituent that is not listed above and was not an answer to any question asked came up organically during the interviews. It concerned two trainers, a husband and wife team, who were active between 2008 and 2013. Nine of the 12 interviewees had taken some preservice training conducted by this pair. Eight of the 9 (89%) specifically mentioned them by name as examples of effective trainers. Participants repeatedly mentioned the dynamics of the

couple, the fact that they were foster parents, their extensive experience, the concrete nature of their stories, their knowledge of adult training techniques, and their ability to engage the people whom they trained as elements that made their training sessions so memorable. They also noted that having two trainers with shared experiences playing off each other was helpful. Participant 2 summed it up by saying, "Well, first let me tell you that [these two] worked well together because they were both so good. One picked up where the other left off. There was no gap. They knew the material and presented it. They made it lively. And they engaged the audience."

Category 1: Subcategory 4. The fourth subcategory consisted of the suggestions for improvement of delivery of the preservice training as seen in Table 11. The top two suggested for improvement were related. Five (42%) TFPs wanted to hear more from actual foster parents and 4 (33%) wanted to also hear from former foster children. The invariant constituent (nonrepetitive idea or expression) with the third highest number of instances for improvement of the delivery was to have two presenters at once.

Table 11
Subcategory 4: Suggestions for Improvement of Preservice Training Delivery

| Invariant constituent | # of instances |
|---|----------------|
| More trainers and/or interaction with those who have been foster | 5 |
| parents | |
| Have a foster youth panel | 4 |
| Have two presenters at once | 4 |
| Don't just read the slides, less PowerPoint | 3 |
| Passionate, energetic trainers | 2 |
| Have people go around the room and learn more about their | |
| backgrounds and incorporate that information into your delivery | 2 |
| style. | |
| No suggestions. it is all good. | 1 |
| More respect for the knowledge of the people attending the training | 1 |
| Trainers who are experts | 1 |
| Show videos | 1 |
| Less rigid presenters – do not just follow the book. | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of invariant constituents in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

Participant 4 suggested that training would be more effective and better if former foster children and veteran foster parents could share their experiences with those currently in training, "Maybe have some graduates...former foster children or something like that to share their experiences with us or veteran foster parents like yourself sharing experiences with us."

Participant 5 also noted the importance of hearing from former foster children and parents, "Something I liked about this training a lot was having foster parents be part of actually giving information in training... I think I already touched on this, but I'll go back...just panels. Panels of foster parents, panels of people who've been through this." Participant 8 believed that the personal experiences also increased the effectiveness of the program: "Well, they told of personal experiences, and that had a lot to do with it, you know. Because most of the trainers have been foster parents. And so they have a lot of experience. So I think I learned a lot from

that." Participant 11 stressed that the foster parents as trainers engaged the participants well, "Most of the time what helped them to be that well prepared was that they were foster parents before they became trainers. So they were really engaging."

Four (33%) interviewees wanted to have two trainers present at once. Participant 2 added that it helped when the training was offered by a couple. These sessions were perceived as having made the experience a lot easier to understand as trainees felt that these sessions were taught well and that those being trained were encouraged from the start:

Probably my first day with that couple. Because they made you want to come back. You know, they were interesting. And the subject matter. Of course, we're coming into this, so we needed to know the information. And they just made it a good experience.

Another invariant constituent came out of the conversations and was mentioned by three of the 12 (25%) participants when asked about the efficacy of the delivery of the training. These three interviewees wanted to meet more case managers, skills trainers, agency and program staff at the preservice training. Participant 3 summed up why they wanted these staff members at the training:

I think seeing different staff, especially from different agencies, how they approach problems, that would be interesting as well. If we had training from different staff who do different aspects of that [agency jobs], maybe even talking about what they might do.

That would be interesting.

Category 2

The second category of responses generated by the study was based on questions relating to how well the preservice training covered issues TFPs might encounter with the children that

encouraged them to continue as foster providers, a question which is aligned with the guiding question, "How well does the preservice training cover issues TFPs might encounter with the foster children that contributed to or prevented attrition of certified TFPs?". Table 12 shows that 6 (50%) of the respondents said the preservice training either fully or somewhat contributed to helping prevent them from quitting. It is important to note here that 4 (33%) interviewees said that the preservice training had nothing to do with whether or not they continued on as foster parents.

Table 12

Category 2: Effectiveness of Preservice Training in Helping Prevent TFP Attrition

| Category: Effectiveness of the preservice training in helping to | # of |
|--|--------------|
| prevent TFP attrition | interviewees |
| Preservice training contributed to preventing TFP attrition | 5 |
| Preservice training was somewhat/mostly effective in contributing to preventing TFP attrition | 1 |
| Preservice training was not effective in contributed to preventing TFP attrition | 1 |
| Did not answer the question – their answer had nothing to do with preservice training | 1 |
| Did not understand the question as the preservice training was not connected to their choice to stay as TFPs | 4 |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

Five (42%) said the training contributed to preventing them from quitting. Participant 3 discussed how the stories, the talk about self care, how to document and protect yourself from allegations, and how to prepare for visitation really helped them understand what they were getting into. As mirrored some answers in the above sections, Participant 8 reiterated that the preservice training helped them not to quit, noting "Oh yes. Definitely, I believe. All of it."

Four interviewees did not understand the question about their motivations to stay as foster parents were not connected to the preservice training at all. Participant 5 stated, "Our

intention around being a foster parent was to be a family for a kid, no matter what that looked like to them." It is interesting to note that, of the 12 respondents, nine (75%) reported that they had never seriously considered resigning, while the remaining three (25%) were considering it or had considered it. But even this last group said that the preservice training was not a factor in their decision making process.

There was one discrepant case where the interviewee discussed what did not help them with the pressures of being a foster parent, and it had nothing to do with the preservice training. Participant 7 shared:

Maybe I'm not answering your question directly, but I think it [my response] is relevant, so I'm just going to say this. One of the hardest parts for our family has been the lack of feeling included in a lot of what's going on for our kids... It can make foster families feel not important in the lives of these kids or that their voices aren't valued.

This idea corresponded with Participant 6's idea that the role of the foster provider should be discussed during preservice training. As Participant 6 explained:

Most foster parents are struggling with how do we advocate for this kid's needs.

Especially with a return to parent when the parent's not stable. But there's also a lot that you have to accept... So, what is the foster parent's role? Like, when do they get involved? And then, throughout the life of the case, where does the foster parent have some say or some responsibility in terms of the whole process?

So, it can be concluded that, even if taking preservice training does not always contribute directly to the retention of a foster provider, this training helps the provider understand the frame in which he or she must work. So, adding a section on the role of the foster provider to the

preservice training content could make that clearer, limiting the degree to which hurt feelings might later lead to foster parent attrition.

Category 2: Subcategory 1. The first subcategory consisted of the responses of the interviewees relating to their motivation to continue as a foster parent as seen in Table 13. Only two (17%) respondents mentioned that having good training was a motivating factor into their decision to remain in the program at all. Though half of the respondents said that the training at least helped to prevent them from quitting, it was not the main reason they stayed. This result strongly suggests that the motivation for becoming and staying a foster parent requires an internal locus of control and is a decision made by the TFP long before the child is placed in their home. Training can help them continue when things get difficult, but they have to have an internal motivation to not quit. The invariant constituents of this subcategory support this idea.

Table 13
Subcategory 1: Motivation to Continue as a TFP

| Invariant constituent | # of instances |
|---|----------------|
| Love kids/fostering | 7 |
| Rewards of seeing the kids change/making a positive | 7 |
| influence on them | / |
| Want to give back to the community | 4 |
| TFP is committed to fostering | 2 |
| Have a good team behind you | 1 |
| Have a good support system | 1 |
| Understand it will be difficult | 1 |
| Have good, continued training | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of invariant constituents in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

Seven of the 12 participants (58%) said that the reason they chose to stay despite the problems they experienced had nothing to do with the training—they stayed as foster parents because they saw positive changes in their foster children. Participant 1 stated how the positive

changes they saw in the children allowed them to stay motivated to continue despite the issues and problems encountered along the way:

When we start saying...ok gratitude means that you are going to give what you receive. Partially, "yes," but we understand the impact that our affection and care is having among these children. So we decided to continue. And we have seen a lot of progress, and we have seen one or two get really successful in life. And that's our motivation. That we can see progress. We can see how the children are changing. Yeah. And it is highly motivating for us.

A different group of seven (58%) continued being foster parents despite the challenges, because they love children and they love fostering children.

Category 3

The third major category covered in the study was based on questions about the TFPs and multiple moves of foster children, which align with the guiding question, "Did the preservice training have any impact in preventing the TFP from having the foster child moved from their home". As seen in Table 14, 7 out of the 12 interviewees were not sure how many foster children had been placed in their home. Their answers ranged from one to 40+, if they could answer at all. Of the 12 respondents, seven (58%) said that preservice training helped prevent them from asking that a foster child be moved out of their home. Four (33%) of the interviewees had asked for a foster child to be moved out of their home, while one was seriously considering it. What is of note here is that 8 of the 12 respondents (67%) did not know or were not sure if their foster child had been kicked out of another home before entering theirs. Since foster children who have

suffered multiple moves are known to have significantly greater behavioral issues, this seems to be a gap in training (Barber & Delfabbro, 2003; Hurlburt et al., 2010; James, 2004).

Table 14

Category 3: TFPs and Multiple Moves of Foster Children (FC)

| Did preservice help prevent you from | # of FC placed in their home, full time | # FC entering home after disrupting | TFP asked for FC to be moved out of their |
|--------------------------------------|--|-------------------------------------|---|
| asking FC to be | and respite | elsewhere | home |
| moved | and respite | CISCWIICIC | nome |
| Illoveu | | | |
| No | 30–50 | Don't know | Yes |
| Yes | Don't know | Maybe | Yes |
| Maybe | 1 | 1 | Yes |
| Yes | 1 | 1 | Considering it |
| Yes | 15 | None | No |
| No | 30+ | Maybe | No |
| Yes | 15+ | Don't know | Yes |
| Yes | Lots | None | No |
| Yes | 2 | Maybe | No |
| Yes | 2 | Don't know | No |
| No | 20+ | Maybe | No |
| No | 40+ | Don't know | No |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

When asked if they had ever considered quitting as a foster provider, Respondent 7 said, "Oh, at times, yes. What stopped me was the fact I like doing it." Respondent 9 stated, "No. Because I knew what I was getting into." Respondent 10 also said they had not considered quitting, because, "I have hope". Respondent 1 summed it up by saying:

No. Absolutely no. Because I think that foster care is not a rose garden. And, if you are serious and well committed, you need to understand that we're going to find bumps in the road every single day. But if you have a good team behind you, if you have support, you have good training, again, you can overcome that.

Four (33%) of the TFPs questioned had asked that at least one child who had been placed with them be moved out of their home.

Category 3 Subcategory 1. Subcategory 1 displays in Table 15 the reasons why the four respondents who had asked that a foster child be moved out of their home did so. These invariant constituents seem connected, and, in fact, each of these TFPs had found the children who were moved to be uncontrollable and that is why the foster child had to leave. I decided to use the interviewees' exact descriptions as it is possible that they are more nuanced than descriptions of the child characterizing them as being aggressive or out of control.

Table 15
Subcategory 1: Reasons TFP Asked Foster Child to Be Moved

| Invariant constituent | # of instances |
|---|----------------|
| Physical aggression | 2 |
| Foster child uncontrollable, would not follow rules | 2 |
| Foster child not a good fit, should not have come (respite) | 1 |
| Foster childs' "psychotic break" | 1 |

Note. Each interviewee who responded, "yes" to having had a child moved had the opportunity to respond in an open ended manner, so there was no set number of invariant constituents in this subcategory. However, the maximum number of instances for each invariant constituent could not exceed 4 as there were only 4 interviewees who responded in the affirmative.

Conclusion

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. Based on the purpose and research questions used in the study, a qualitative phenomenological approach was the most appropriate method of research. Participants were composed of 12 TFPs who lived in Oregon with a nonmedically fragile foster child between the ages of 3 and 18 at the time of the interview. These TFPs must have had experience as certified full time foster providers, defined as having had at least one placement who had lived for at least 30 days in their home or having had at least one weekend placement for respite providers. Sample recruitment was purposive. Data collection

was conducted through in depth semistructured interviews. Data analysis was based on Moustakas' (1994) four step phenomenological research process. Finally, the findings were presented in detail.

The main finding was that, in general, the TFPs found the content of the preservice training to be helpful in dealing with the behaviors of the foster children in their home, though they wanted more concrete examples of possible foster child behavior and more stories from foster parents. They also found that the delivery was effective as long as the trainer did not read directly off the slides, and suggested that they would prefer to have two trainers present during these sessions. The TFPs interviewed had intrinsic motivation for staying as foster providers and not asking the foster children to be moved, although the preservice training was a mitigating factor.

The next step was to select a project that developed from these findings. Most projects fall within four broad categories: the evaluation report, curriculum plan, professional development, and policy recommendation paper. I did not perform an evaluation, therefore could not write an evaluation report. The preservice curriculum is set by the government, so I could not write a curriculum plan. I did seriously consider writing a professional development training, but decided that the only project that could fully present the richness of the results would be to write a policy recommendation paper. The next section will go into further detail the policy recommendation paper that evolved out of the results.

Introduction

The project that evolved out of the findings from this study was a policy recommendation paper (Appendix A). In this section, I will describe the project, including the goals, rationale, and a brief review of literature. I discuss and give background on other foster parent trainings, reiterate the research on the importance of placement stability, give an overview of some of the overarching adult learning theories, present information on training the trainer, and offer some suggestions on presentation skills. I will then discuss the implementation of the project, including the potential resources and existing supports available to help in implementing its recommendations, potential barriers, the proposal for implementation including a timetable, and the roles and responsibilities of the student. I will continue by discussing the implications of the results in the local community and the far reaching possibilities for social change. Finally, I will provide a brief conclusion.

Description and Goals

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. This study involved three agencies which included one agency which provided the preservice training for two agencies which later certified and supported the TFPs and covered both the content and the delivery of the trainings. Therefore, the project that best fits the needs of all interested parties was to present a policy recommendation paper to submit to all three agencies with recommendations for change.

There were three goals of this project. First, to present the results of the study clearly and succinctly. Second, it puts forward some ideas that came out of the results. Third, it will outline policy recommendations based on the results.

Rationale

Because of the nature of this study and the differing perspectives of the shareholders, the only project that fit logically was to present a policy recommendation paper (Appendix A) that might be used to enhance the program based on the study's results. The data analysis in Section 2 lends itself to this project type in that the findings themselves suggested changes that could be implemented without major modifications of the curriculum offered or the materials used. Phenomenological studies reveal the lived experiences of the participants. They do not provide concrete solutions to the issues. Instead, the findings are the catalyst to create discussions among the shareholders.

The problem addressed related to TFPs who felt that they were inadequately prepared for the children placed in their home, even after preservice training. The data revealed the need for information from the TFPs' perspectives that fell in three categories: the effectiveness of the preservice training designed to prepare TFPs to deal with the behaviors of foster children, the effectiveness of the preservice training in limiting TFP attrition, and the effectiveness of the preservice training in reducing the number of moves of the foster child from one home to another. However, the data revealed that most of the participants felt that the training was effective and could be employed in real life situations, yet they asked for specific additions. The policy recommendation paper evolved out of the results of my study and includes an overview of

the findings. I then discuss implications of the findings. Finally, I provide recommendations for change based on the findings.

Review of the Literature

The goal of this project was to give to shareholders a presentation of the findings in a way that could support policy recommendations designed to enhance the existing preservice training based on the qualitative phenomenological findings of this study. I conducted a review of literature to reinforce my decision to present the findings to the shareholders in the form of a policy recommendation paper and to present current and supporting information on other foster parent trainings and the importance of placement stability. I continued the review of literature based on the results of the study that discussed salient adult learning theories, some basic information on training the trainer, and ways in which to improve presentation skills.

I used the Walden Library to find resources to support my decision to use the policy recommendation paper as my project using the following multidisciplinary search databases:

Academic Search Complete, EBSCOhost, Education Search Complete, Education Source, ERIC, ProQuest, PsychINFO, and Sage, I filtered using the search option of selecting only peer reviewed journals. I entered the following search terms alone and in combinations: white paper, policy recommendation, program evaluation, evaluation, findings, definition, description, model, performance, adult education, adult learning, higher learning, foster parent training, preservice training, cross cultural training, foundations training, placement stability, foster parent attrition, foster parent retention, foster home care, parent education, andragogy, learning styles, learning methods, presentation skills, training trainers, training nonprofessionals, teaching how to train, and transfer of learning.

Preservice Training Success

It is difficult to point to existing studies that demonstrate that foster parent training is effective in helping prepare foster parents for the difficulties they face after a child is placed because not much research has been done on the topic (Delaney, Nelson, Pacifici, White, & Smalley, 2012; Rork & McNeil, 2011). However, one recent study conducted by Davies, Webber, and Briskman (2015) shows promising results

Davies, Webber, and Brickman (2015) conducted a study in England where they evaluated the foster parent training program entitled, "Park's Parenting Approach". Park's Parenting Approach was adopted from different parenting programs (not listed in the study) based on the foundation of attachment and social learning theories to be geared toward Britain's equivalent of TFPs (Davies et al., 2015). The purpose of the training was, "to support careers in managing challenging behavior by developing positive relationships with their foster children" (Davies et al., 2015, p. 39). Of the 61 foster providers who began the nine week course (two hours per week), 55 completed the course and the pretest and posttest evaluations (Davies et al., 2015). Results from the pretests and posttests showed that there was an increase in foster parent confidence and a notable reduction in behavioral issues in their foster children (Davies et al., 2015). One hundred percent of the participants felt that a learning transfer had taken place and that they would be able to remember and use the skills they learned (Davies et al., 2015). There were several limitations of the study. First, the sample was all Caucasian with no control group and no randomized trial (Davies et al., 2015). Even with these limitations, it is encouraging to find a study that shows that the participants felt that the foster parent training was beneficial to them in helping them deal with behavioral issues they face with their foster children.

Difficulties in Assessing the Effectiveness of Preservice Training

More information needs to be collected on the effectiveness of preservice training in helping foster parents deal with the challenges they face as foster providers (Antle, Barbee, Sullivan, & Christensen, 2009; Cooley & Petren, 2011; Delaney et al., 2012; Pithouse, Hill—Tout, & Lowe, 2002; Puddy & Jackson, 2003; Whenan, Oxlad, & Lushington, 2009). Effective preservice training can increase foster parent satisfaction which can help prevent costly foster parent attrition (Whenan et al., 2009). Behavioral issues with foster children are a significant contributing risk factor in causing multiple moves of foster children (Macdonald & Turner, 2005; McNeil, Herschell, Gurwitch, & Clemens—Mowrer, 2005; Narendorf, Fedoravicius, McMillen, McNelly, & Robinson, 2012; Strijker, Van Oijen, & Knot—Dickscheit, 2011; Taylor & McQuillan, 2014). Effective preservice training can lead to improved placement stability as the foster parents are better prepared for the difficulties they will face after a child is placed (Everson—Hock et al., 2012; Macdonald & Turner, 2005; Ward, Courtney, Del Valle, McDermid, & Zeira, 2009).

However, even studies that intend to research the training as part of the foster care experience often go in a different direction than anticipated (Broady et al., 2010). Broady, Stoyles, McMullan, Caputi, and Crittenden (2010) conducted a qualitative study in New South Wales, Australia, that considered the preservice training and agency support for 12 existing foster parents. Broady et al. (2010) conducted a focus group with the participating foster parents, as well as follow up interviews with five of the 12 where they discussed their experience with foster care. Their results did little to add to the literature on foster parent training, presenting instead five global domains of the foster care experience as an overarching frame for the

experience of foster parents in general (Broady et al., 2010). The five domains were: the birth family, the motivation of the foster parent, agency influences, issues of the impact of foster care on their interpersonal relationships, and the attachment the foster parent formed with their foster child (Broady et al., 2010, p. 564). Broady et al.'s (2010) study highlights one issue that complicates studying the effectiveness of preservice training based on the lived experiences of foster parents themselves, namely that the foster parents often focus on other domains that affect them after they have completed the training and after they are certified.

Another aspect that makes it difficult to evaluate the efficacy of preservice training is the range of education and training of the human services professionals who are conducting the training (Murray, Culver, Farmer, Jackson, & Rixon, 2014; Murray, Southerland, Farmer, & Ballentine, 2010). Curry, Lawler, Schneider–Munoz, and Fox (2011) discussed and identified the domains in professional training and development of the human service professionals that can strengthen the trainers. These include using tools such as professional development in training, including more stories to begin forming a relationship, and making sure that any theory that is included be grounded in real life examples of how to put the theory into practice (Curry et al., 2011). Curry et al. (2011) concluded that, "Experts can say with very little certainty what training interventions, under what circumstances, at what cost, will produce what desired effects" (p. 158). This uncertainty about what the people who conduct the preservice training need adds to the issue of understanding the effectiveness of the preservice training. One foster parent could be trained on the topic of child development by someone who had a Master's degree in Early Child Education, while another trainer did not have the higher education but had been a foster

parent for twenty years, while a third might be a case manager new to the job with little experience in child development.

Finally, it is difficult to determine the efficacy of the preservice training for those people from different cultures and different economic levels (Zinn, 2009). Anecdotal evidence and demographic information on foster parents suggests that there are a significant portion of foster parents from different races and cultures from the instructors (Zinn, 2009). In this study, I did not collect information on the country of origin, but at least two of the participants were not born or raised in the United States. Closson (2013) stated that, "too often, the race, ethnicity, and culture of the participants are not considered when designing or conducting the trainings" (p. 61). It is critical to include the perspectives of all participants regardless of color, culture, or economic status (Bridwell, 2013; Brown, Sintzel, Arnault, & George, 2009; Warde, 2007).

Adult Learning

The idea that adults learn differently than children is an idea that began less than 70 years ago (Knowles et al., 2011). The traditional model of pedagogical learning was based on monastic ideas beginning in the seventh century that teachers made all decisions about the why, when, where, and what would be taught and that the students were receptacles who passively absorbed this information (Knowles et al., 2011). Additionally, this model assumed that there was no difference between adult and child learners (Knowles et al., 2011). This paradigm lasted until the mid 1950s when social science researchers started discussing, creating theories, researching, and presenting models of adult learning as an alternative to the pedagogical model (Knowles et al., 2011). Andragogy, the science of how adults learn, is considered the foundation of adult learning theory (Knowles et al., 2011).

Andragogy. It is difficult to pin down a precise definition of andragogy as adult learning is an active and growing discipline so the core principles are continually being revised (Knowles et al., 2011). Additionally, there is a growing modernist and postmodernist movement to challenge the concepts of andragogy and adult learning theories in general (Murray, 2014; Sandlin, Wright, & Clark, 2013). These are relevant discussions, but in order to disagree and challenge, one must understand the basic concepts of andragogy as presented by Knowles et al. (2011). Knowles et al. (2011) presented the seminal work on andragogy, "The Adult Learner" in 1972 and has made numerous revisions since. For purposes of this brief review, I will present the six basic principles of andragogy based on Knowles' work.

The first principle of andragogy is that adults need to know and understand why they are learning something (Knowles et al., 2011). When they have an interest in a topic, adults spend time and effort considering the benefits of pursuing that learning and the consequences of not doing so (Knowles et al., 2011). Therefore, the first role of the trainer is to convince the participants of the value of what they will be teaching (Knowles et al., 2011). For true learning to take place, adults need to know that what they are learning will benefit them (Knowles et al., 2011). One way to encourage this "need to know" is to create effective presentations (Knowles et al., 2011). Presentations should be a communication between the trainer and the participant (Cardwell, Aranda, Hernandez, & Hoi Ho, 2014; Murray, 2014).

Second, adults have a need to be perceived as being in control of their own lives (Knowles et al., 2011). This self concept is rooted in their subconscious, and participants will rebel at the idea that trainers are there to pedagogically force them to submit to their will (Knowles et al., 2011). However, since this has been their experience over most of their adult

lives, they show up at the training and passively expect the trainers to teach them (Knowles et al., 2011). So another goal of the trainer is to create a training that encourages self directed or entrepreneurial learning, which requires that the adults actively participate in not only managing their learning but applying the learning to their lives (Paige, 2010; Palis & Quiros, 2014). Oftentimes, participants resist undertaking the self reflection necessary to truly embrace learning because it is emotionally and intellectually challenging (Holloway & Gouthro, 2011). Trainers need to be aware that changing the participants' entrenched ideas causes them discomfort and provide the emotional and intellectual support to assist them in challenging their previously held ideas (Knowles et al., 2011).

Third, the learner comes to the training with a lifetime of experiences (Knowles et al., 2011). Much learning is "found learning" or information that is gleaned informally through the experiences of living (Paige, 2010). Oftentimes, the best trainers in any group of adults are the participants themselves because the aggregated life experience that each adult brings to the training is staggering (Knowles et al., 2011). Trainers of adults who utilize techniques that call upon the "found learning" and the life experiences of the participants, such as, "group discussions, simulation exercises, problem solving activities, case methods,...and peer helping activities" will find that the learning transfer is much higher (Knowles et al., 2011, p. 64). It is critical that the trainers add variety to the activities to keep the attention and focus of the participants (Bryson, 2010). There is need for caution here, as there is always the possibility that the adult is "set in their ways" and is not open to new ideas (Knowles et al., 2011). It is up to the trainer to ascertain where the participant is in the process and, if needs be, gently challenge their beliefs (Knowles et al., 2011).

Fourth, adult learners are motivated by their readiness to learn (Knowles et al., 2011). For example, prospective foster parents who are unsure if they will proceed with the process might not glean as much from the training as those who know they will continue (Knowles et al., 2011). Trainers can help motivate the participants, but it is up to the participant to know if they are ready and willing to learn (Foley & Kaiser, 2013; Hung, 2013).

Fifth, adults are task or problem oriented learners (Knowles et al., 2011). They learn better if they know they will need the information later (Knowles et al., 2011). Additionally, they retain the knowledge much more if they are presented with real life situations to which they can apply to their own lives and experiences (Knowles et al., 2011). One of the most requested updates to the preservice training by the foster parents who participated in the study presented in this paper was to add in more real life scenarios. Clearly, the stories that were told resonated with them, and they retained the memory of the stories long after the training and were able to apply the lessons of the stories to their own experiences in foster care. An effective trainer will not only share the stories, but use them to help the participant reframe previous learning to assist them in changing their minds about what they thought they knew (Foote, 2015).

The sixth and final principle of andragogy is that adults are internally motivated (Knowles et al., 2011). While they might attend the preservice training because it is a requirement for them to do so, they need an internal reason to really engage. One way to motivate the participants is by paying attention to the different cultures represented in the group and addressing other cultures in the training rather than seeing problems only though a Western lens (Coryell, 2013). According to Sun (2013):

Educators can choose to teach without regard for students' cultural experiences, expecting students to learn the *right* (our way). Or, educators can realize Western approaches are not the only right way, thus enriching their teaching through understanding foreign concepts. (pp.131–132)

It is important for trainers to awaken the motivation in the participant to actually engage in the training and allow the transfer of learning to take place (Knowles et al., 2011).

Recommendations

The following recommendations are based on comments from the participants across five categories: content, delivery, attrition, multiples moves, and miscellaneous suggestions. It is important to remember that, for the most part, foster providers were satisfied with their training and felt it helped them in dealing with the behaviors of the children placed in their care. The following recommendations could only strengthen the training.

Content

Foster parent training often has a large component of behavioral management techniques for dealing with the behavior of the foster children (Macdonald & Turner, 2005; McNeil et al., 2005; Murray et al., 2010; Pithouse et al., 2002; Strijker et al., 2011). The TFPs interviewed reported that, although they felt the training was generally effective, they wanted more training on dealing with challenging behaviors. I recommend that each module of the preservice training add in a section entitled, "Challenging Behaviors" that includes a review of typical behaviors connected with that subject, concrete examples of what these behaviors could look like, and personal stories of an actual event and how it was resolved, making sure the stories and examples

include a sampling of the different programs and are inclusive of the different cultures of the foster providers (see the section below on Delivery for more concrete suggestions).

Pithouse, Hill–Tout, and Lowe (2002) conducted study in which they added additional training on behavioral management techniques for existing foster parents. Although the results indicated that the additional training did not have a measurable impact on how the foster parents dealt with their foster children's behaviors, the foster parents reported a high satisfaction level with the training and the majority said that they had begun to integrate these measures into their parenting (Pithouse et al., 2002). Some of the foster parents in the study also reported that, after the training, they were better able to look at the behaviors of individual children and recognize the underlying causes for them (Pithouse et al., 2002). Even if adding in a section for each module on challenging behaviors to the existing preservice training does not immediately translate into action, it could assist the new foster parents in seeing their foster children's behaviors as results of their trauma and not just willful misbehavior.

Additionally, it is important to provide a composite description of an actual foster child/youth, with history, behaviors, and interventions from each program. This should also be expanded to include concrete rules about confidentiality and social media, the sharing of photos, policies on photos in yearbooks, inclusion of the foster child on school email contact lists, etc. Include in this composite information on the role of the foster provider. This is touched on at Intro, but the suggestions were to expand it to be more concrete and specific, such as what does it mean to be an educational surrogate, the TFP role in the therapeutic process, the TFP role in returning the kids to their biological families, where and when does the TFP have some say, and the TFPs' rights and role in the permanency/court process. Foster providers who have a clarity as

to their role can experience less stress which can lead to improved satisfaction and lower attrition rates (Whenan et al., 2009).

Another recommendation would be to strengthen the section in the training entitled, "Culture, Family, and Community" that concerns the foster provider's own family and how fostering impacts them. Add in discussions on how to comfort kids who are not your own (especially when it would not be appropriate to hug) how to foster as a couple, how to discuss with your own family (your parents, siblings, young children and grown children) some of the issues that will come up and what they can expect when their loved one's become foster parents (Whenan et al., 2009).

Delivery

One recommendation is to have two trainers present for each training, especially one who has been or is currently a foster parent. This could be accomplished with having a foster provider panel, which would also facilitate more experienced foster providers meeting and providing support to newer foster providers, which is another method of helping trainees to contextualize what they are learning (Osmond, Scott, & Clark, 2008).

Part of improving the preservice training delivery and assisting with adult learning would be to create and implement a program to train the trainers on how to transfer their leaning so that TFPs can translate their knowledge into action (Murray et al., 2010; Osmond et al., 2008). The core content presented at preservice training is most useful if the trainer can facilitate the transfer of learning so that the TFP apply that knowledge to their own lives (Antle et al., 2009; Osmond et al., 2008). This would include adding in more exercises/scenarios for each module that allow the foster provider to work out solutions.

It is also important that the trainer recognizes and integrates the race and culture of the participants in order to enhance the learning transfer (Closson, 2013). Identify the racial and cultural demographics of the participants, design and implement a plan that helps ensure that the cultural perspectives of the participants are included the preservice training modules (content), and invite people from these different backgrounds and cultures to review and dialogue on how to improve the learning transfer (Closson, 2013; Coryell, 2013). Sun (2013) offers some suggestion for how to improve the learning transfer from Western educators to non–Western learners: greet them in their native tongue, show interest in their cultural perspectives, encourage them to speak about the differences, demonstrate patience with these differences, show support for their way of doing things, concretely connect their experiences to the content of what you are teaching, and really listen and authentically integrate their perspective when they speak. This is a process, but the first step is recognition that there is a need for an expanded cultural awareness and then an intentionality to include and embrace cultural diversity (Sun, 2013).

Attrition

The TFPs interviewed had intrinsic motivations for not quitting, such as a strong desire to make a difference in the life of a child, which has been reported in other studies (Harden, D'Amour Meisch, Vick, & Pandohie–Johnson, 2008; Whenan et al., 2009). Training was a small contributing factor, but not the main reason they stayed. Foster parents who are intrinsically motivated, who have an understanding of the developmental stage of their foster child and adjust their expectations accordingly, and who are committed to the foster child have a greater quality of placement (Harden et al., 2008). I recommend creating a part of a training where the foster

providers review their motivations to become a foster prover, which might help them to continue fostering through the difficult times.

Multiple Moves

What was interesting here was not what the foster parents knew about the harmful effects of multiple moves on foster children or if they had asked for a child to be moved, but what they did not know. Eight of the 12 (67%) of the respondents did not know if their foster child had disrupted from another home before entering theirs. Foster children who have suffered multiple moves are known to have significantly greater behavioral issues than those who did not (Macdonald & Turner, 2005; Ward et al., 2009). I recommend that a slide be added to the "Challenging Behaviors" module that facilitates a discussion on the potential harm of multiple placements and that TFPs would better be able to understand and parent their foster children if they knew if they had experienced multiple moves. Additionally, it is important to add in some discussion about what to do if the TFP is struggling with a placement and how to best handle the situation.

Miscellaneous Suggestions

Two comments in particular did not fit in any category. The first recommendation is to try and have more people attend the Intro training module as some comments/suggestions for improvement were in areas that were covered in that module and nowhere else. The TFPs interviewed who did not attend that module commented that they had not realized that there were specialized requirements for the home (locked cabinets, beds with frames) and felt lost as to the steps after preservice training. This information was later covered by their certifiers, but sometimes that was weeks or months into the process, and the uncertainty caused them stress.

This stress was detrimental to the success of the foster parent in the long term (Whenan et al., 2009).

Finally, one respondent said they wished they could go back and retake the preservice after they had had a few children placed as then they could relate so much better. This could also fill some of the need to have actual foster parents at the training.

Implementation

After creating a clear, concise policy recommendation paper, I emailed the three shareholders who originally gave me approval for the study. I gave a bullet pointed summary of the findings, presented the recommendations on those finding, then presented the findings in more detail in tables for the visual learner, and attached a synthesis of the answers to every question asked the participants (minus demographics. Additionally, I indicated to them that I would make myself available to discuss the findings and answer questions with the shareholders and with the preservice revision committee if they choose to do so.

Potential Resources and Existing Supports

The shareholders of all three agencies have been more than willing to assist me during the research process. There is a monthly committee meeting where a summary of the results could be presented, along with the recommendations based on those findings. Each agency is represented at the committee, so changes to the content and delivery of the training could be discussed there. Additionally, there is a preservice training committee that meets periodically. This committee could meet to actually revise the preservice training modules themselves if they chose to do that, and I would be happy to attend if asked. However, additional resources would be needed.

There would have to be hours budgeted for making the revisions, and then meetings held to review those revisions and have them approved. All training materials would need to be updated in electronic and hard copy format. All of this takes planning and funding.

Potential Barriers

There are several potential barriers to the implementation of the recommendations based on the findings. One suggestion was to add a second trainer for each module. Adding a second trainer would be costly and might not be practical. A potential solution, however, might be found in other suggestions. The respondents wanted more foster parents as trainers or to have a foster provider panel. One wanted to be able to go back and take the training again, after certification and after a child had been placed. In addressing these suggestions, existing foster providers could be included in one or more of the modules for the preservice training, giving them a chance to retake the training after they have experience that puts the material offered in context. In addition, they could provide feedback as to what it is really like being a foster parent to those new to the system.

There are ten preservice cohorts per year. The participants wanted to hear from a panel made up of foster youth and former foster youth. It is difficult to receive permissions to have foster children/youth speak. A potential solution might be to have a separate quarterly training with a panel made up of foster youth and foster providers open to both existing and potential foster providers.

Proposal for Implementation and Timetable

I conducted my research in March of 2015. I plan on emailing the results to the participating agencies in late fall of 2015. After that, the implementation is up to the shareholders

of the agencies. Some parts of the suggested content revisions could be easily implemented after approval at the committee meeting. But the more significant changes could take months. The most realistic timeline would be to add a "challenging behaviors" section to every module in late 2015 or early 2016 when larger annual updates are routinely developed, reviewed, and approved.

Roles and Responsibilities of Student

My only role was as a researcher. My responsibility was to submit the results to each of the participating agencies. What they do with the results from there is outside my purview.

Project Evaluation Plan

The project design was a policy recommendation paper based on the lived experiences of TFPs on the efficacy of their preservice training. A summative policy recommendation paper is completed after a training has been implemented, with the aim of disseminating information about the training and not worrying about who will eventually read the report (Mathison, 2007). This study involved three agencies that included one that provided the preservice training for two agencies which later certified and supported the TFPs. The participating agencies were the only shareholders. As such, the goal of the project was to present the findings. The shareholders continually evaluate the preservice training to accommodate Oregon Administrative Rules (OAR) changes, which can occur annually ("Oregon secretary of state: About the OARs," 2015). New programs are introduced. Policies change and adapt over time. Best practices evolve and change with new research into therapeutic interventions for children. New trainers come in and update their module in the preservice training based on their experiences, training, and education. Every preservice module trainer receives feedback from the attendees each time they train. The goal of this project was to provide feedback from TFPs who had had a child placed. I will be

asking for feedback from the shareholders who receive the policy recommendation paper which would enable me to know if the message translated to them. The next steps are up to the shareholders.

Implications Including Social Change

Local Community

This project addresses the needs of the learners in my local community by turning to them for their feedback on their perceptions of the efficacy of the preservice training to become foster providers. The partnering agencies work with children in the local community. They recruit and train foster providers from the local community. Improving the preservice training can only help in keeping the children in our community. The best case scenario is that more local foster providers acquire better skills to assist them in helping these children and youth as a result of their participation in this training. This might, in turn, lead to fewer harmful moves for the foster children in their car, leading to a healthier community.

Far Reaching

This work might be important in other venues in which foster parents are being trained. Other agencies can look at the results and compare and contrast the content they are using to the suggested content by participants in this study. Since the research was conducted with TFPs in a therapeutic foster care, they might not transfer. However, preservice training is general enough that it may give the planners from other agencies in other cities in other countries ideas for discussion as they adapt material to fit into their context. And in this field, any discussion on how to improve training and better serve children is positive progress.

Conclusion

The project that evolved out of the findings from this study was a policy recommendation paper. In this section, I described the project, including the goals, rationale, and a brief review of literature. I then discussed the implementation of the project, including the potential resources and existing supports, potential barriers, the proposal for implementation including a timetable, and the roles and responsibilities of the student. Since the implementation is dependent upon the shareholders, the implementation plan was based on what they might decide to do. I discussed the implications of the results in the local community and the far reaching possibilities for social change. In the next section, I will offer my reflections and conclusions.

Section 4: Reflections and Conclusions

Introduction

This section presents my reflections and conclusions on this research project. I will first offer the strengths of my project in addressing the problem and then discuss my recommendations for the remediation of the limitations. I will then present a synopsis of what I have learned about scholarship, project development, and leadership and change. Next, I will provide an analysis of myself as scholar, practitioner, and project developer. I will then reflect upon this project's potential impact on social change. Finally, I will discuss the implications, applications, and directions for future research, after which I will offer a short conclusion.

Project Strengths

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. There are not enough studies on foster parent training programs (Chamberlain et al., 2006; Collins et al., 2010; Dozier et al., 2009; Fisher et al., 2009; Nash & Flynn, 2009; Rork & McNeil, 2011), and no studies were identified in the literature that dealt specifically with trainers working with TFPs. Of those studies, few offer the foster parent's perspective of their preservice training after they have been certified and a child has been placed. While qualitative studies, by their nature have a local focus, conclusions drawn locally can inform practice in other communities so long as the results of the study are tested against local needs there. While the results are not generalizable to a broad range of situations, this project adds to the scant extant research that is available and may suggest topics of value in developing new research projects. Another strength is that this study is

replicable, so it could be repeated in other cities, and given that the procedures are clearly outlined, it can be modified as needed for application elsewhere. But the greatest strength of the project offered is that the recommendations made to the shareholders are concrete and easily implemented. The majority of TFPs interviewed made it clear that the preservice training provided was effective in giving them some of the needed skills to parent foster children, though it could be improved with minor adjustments. Proposed adjustments are described below.

Recommendations for Remediation of Limitations

There were several significant limitations in this study in addressing the problem of foster parents who are unprepared for the level of behaviors they experience in the foster children who are placed in their home. First, there were only 12 TFPs who were willing to be interviewed out of the 78 certified foster homes within this population. Of those, only one was involved in the Hispanic community. While it was not possible to find more willing participants from this community, this can bring into question how representative the data were of the community of TFPs in this Oregon community. I focused only on the preservice training, not any subsequent agency, program, and ongoing training, so the level to which TFPs' understanding grew and attachments with trainers and training agencies grew is uncertain. Finally, only interviewing current TFPs could have had an impact on the results. It would have been useful to speak with some of those trained during this cycle who left the program, perhaps out of frustration with the work and the system, but no list of certified TFPs who left the system prior to the study was available.

There are several strategies I would recommend to remediate some of these limitations. First, I would attempt to recruit more participants. To do so, I would recommend interviewing in groups instead of individually, possibly even have people split off out of support groups. This could be problematic, but it would provide more input from more people. Next, I would try to find ways to get more people in the Latino community to get a more representative sample of TFPs. I am unsure about how to accomplish that, but it must be done to build credibility. Additionally, I would expand the study to include sections on other trainings the foster parent received. Finally, I would try to recruit more partner agencies that have state and TFPs in which to recruit and speak with former foster parents.

I could have addressed the problem of unprepared foster parents differently. I could have eliminated the dimensions of foster parent attrition and the multiple moves of the foster children and focused solely on the issue of whether or not the preservice training adequately prepared TFPs to be a foster parent. I could have added in a quantitative component to collect hard data, such as exactly what trainings they had and from whom, and how they would rate each of the trainings. An alternative to addressing unprepared foster parents would have been to interview the staff of the agencies involved and their trainers and get their perspective. Additionally, I could have interviewed foster providers who had quit to gain insight into the reasons why they left the program and to provide another perspective.

Scholarship

I have always had a critical eye when disseminating information, especially results in different studies. I can usually easily identify omissions in the data, errors in logic, or faulty procedures. During the dissertation writing process, I discovered that it was extraordinarily difficult to encapsulate the research process into a deliverable that was concise, complete, and logical. I have gained a much greater appreciation of the ease in which errors occur.

I have learned that scholarship is a process; that the end results come together as the researcher creates and maintains impeccable habits of keeping a record of every source and being meticulous in taking notes and giving credit. I have learned that it is difficult to be a scholar at home, outside of the concrete walls of an institution. I have learned that the hard work getting ready to do the research, setting up the processes, doing the literature review, being purposeful in the methodology is rewarded when it is time to analyze the data. Finally, I have discovered the gratification of utilizing the discipline of a scholarly approach to overcome obstacles and embed myself in the project.

Project Development

I learned that project development is difficult, oftentimes tedious, and impossible to do alone. In order to complete this project, I had to talk about it with colleagues, friends, and anyone else who would listen. I discovered that I could not cling to ideas of what I wanted to do. Instead, I had to allow the project itself to reveal what needed to come next. For example, I originally wanted to conduct a quantitative study for this project and refused to consider going in a different direction for months and months. Had I been open to feedback, open to what more experienced scholars and researchers were saying, I would have saved time and effort

Leadership and Change

I do not believe I learned much new information about leadership and change. Instead, my ideas that good leadership is collaborative and that change is the only constant were reinforced by my experiences. The shareholders at the three agencies, all leaders, demonstrated their skills by not only allowing me to conduct research, but also by their willingness to discuss in detail the meanings of the questions in the Interview Guide, by providing me with all the

training materials, and allowing me access to their support groups and trainings. They continued to support me over the years it has taken me to complete the project and through all the iterations of the project itself.

Analysis of Self as Scholar

My strengths as a scholar are in my attention to detail, ability to synthesize large amounts of information, and meticulous record keeping. I have found that the more I work, the more I am able to distill difficult, complex ideas into concrete, applicable solutions. One of the most difficult aspects to develop in myself as a scholar was the ability to not only ground my ideas in theory, but then take it a step further and combine multiple opinions into comprehensible writing.

Analysis of Self as Practitioner

Through the course of this process, I have learned that I am passionate about teaching adults, specifically potential foster providers. I read adult learning theories for fun, discuss ideas for bettering myself as a trainer with friends and coworkers, and find myself writing down anecdotes that reflect my perspective as a TFP who adopted two of my foster children. I have realized how much I still have to learn and how much each potential foster parent has to teach me about parenting children who have suffered trauma.

Analysis of Self as Project Developer

I have discovered the aspects of project development in which I excel, and the aspects in which I need to improve. I have an appreciation of the overarching ideas, but distilling that into a methodology is difficult for me. I have some talent in creating the interview questions, following procedures such as passing the IRB, and getting the proper approvals. I am a skilled interviewer when it comes to working with foster parents. My greatest strength when developing a project is

my ability to synthesize what was said and what was not, analyze results, and synthesize those to develop practical recommendations for stakeholders.

The Project's Potential Impact on Social Change

This project's potential impact on social change at the local level and beyond is small, but far reaching. The results, though far from conclusive, suggest that foster parents enter the system with intrinsic motivations to continue working as foster parents and keep the foster children in their homes, and that preservice training has only modest impact on the resulting commitment to the system. As a result, recommendations for change of the content and delivery of the preservice training are concrete, and, if implemented, will just make those being trained stronger. The respondents wanted more personal, concrete stories from the trainers. If just one extra story could help prevent one child from being moved out of a foster home, then that is one child in our community who has more time to heal. The potential of every individual is immeasurable so if only one child is helped, then all those involved have succeeded in changing their world. For example, an interviewee recounted that she remembered one of her trainers telling a story about how her foster child was threatening to run away and how she dealt with it. Participant 2 went on tell the story of how one of her respite placements had gotten really upset and had threatened to run away. In fact, she was at the door. Participant 2 reported,

I said, "I really wish you would stay." Then I got up. I knew she wasn't going, because she was at the door threatening. A girl who's going to run is going to open that door and go. So I knew she did not want to, but she needed to save face. And I'm remembering stuff about how to talk to kids. How to deescalate. How to calm a situation. And I used a very calm voice. I did not yell. She's used to fighting. She comes from a chaotic

background. And I walked up to her. I said, "You know, it is been a long day. I know you haven't eaten in a while. You're probably hungry. Can I make something for you to eat? Your aunt is coming tomorrow. Can we just get through the night? You can still be mad at me. You know, you can still stay mad, but it is not safe outside. Can I take your bag to your room?" She said "Ok." That was training. And I would've never known to do that. And my husband said, "where'd that come from?" Because he knows me. And I don't know. But it was helpful. She gave me a hug when she left the next day, you know?

Implications, Applications, and Directions for Future Research

I learned so much about the TFPs perceptions of the preservice training. It is generally accepted that it is difficult to train someone to be a foster parent as there are so many variables that have to be experienced that can not be taught. Even so, it is critical that foster parents receive as much information that can be transferred as possible. The feedback from the TFPs is critically important in knowing what information they remembered, what they wish they had known, and how best to transfer that knowledge.

This project has implications for future research. First, I suggest that future researchers use their expertise to revise the Interview Guide and duplicate this study on a larger scale with state foster parents to collect more data and verify the results. I suggest that they expand the population to include former foster providers to collect a richer portrait of the efficacy of the preservice training.

Another direction for future research would be to investigate the intrinsic motivations which keep foster parents from quitting and help them decide not to ask a foster child to be moved out of their home. The results indicated that there was some relationship between the

training and preventing foster parent attrition and multiple moves, but there is so much that needs to be learned on this subject.

I suggest that a training program for the trainers of foster parents be developed based on some basic adult learning theories. There is so much research to be done on how the delivery of the training affects the transfer of learning. It would be fascinating to find out if a one hour training session on how to teach adults could improve the results of future training programs. Just asking the foster providers about the efficacy of the delivery of the training is not likely to be sufficient as trainees may have difficulty in verbalizing failings relating to adult learning styles and teaching strategies.

Conclusion

In this section, I offered my reflections and conclusions on my research. I first offered the strengths of my project in addressing the problem. I then discussed my recommendations for the remediation of the limitations. I then presented my learnings on scholarship, project development, and leadership and change. I continued by providing an analysis of myself as scholar, practitioner, and project developer. I then presented my reflections on this project's potential impact on social change. Finally, I discussed the potential implications, applications, and directions for future research.

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. More research into the efficacy of preservice training needs to be done. However, the results of this study indicate that

there is a positive correlation between preservice training and foster parents who are prepared for the challenges they will face after they have a child placed.

References

- Adoption and Safe Families Act of 1997, Pub. L. No. H. R. 867 § 105–89 (1997). Retrieved from http://www.gpo.gov/fdsys/pkg/BILLS-105hr867enr/pdf/BILLS-105hr867enr.pdf
- Annie E. Casey Foundation: Publications and Research. (2013). Retrieved November 2, 2013, from http://www.aecf.org/KnowledgeCenter.aspx
- Antle, B. F., Barbee, A. P., Sullivan, D. J., & Christensen, D. N. (2009). The effects of training reinforcement on training transfer in child welfare. *Child Welfare*, 88(3), 5–26. Retrieved from http://www.cwla.org/
- Anzul, M., Ely, M., Freidman, T., Garner, D., & McCormack–Steinmetz, A. (2003). *Doing qualitative research: Circles within circles*. Philadelphia, PA: Falmer Press.
- Barbell, K., & Freundlich, M. (2001). Foster care today (pp. 1–46). Washington, DC: Casey Family Programs. Retrieved from http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/policy-issues/foster_care_today.pdf
- Barber, J. G., & Delfabbro, P. H. (2003). Placement stability and the psychosocial well–being of children in foster care. *Research on Social Work Practice*, *13*(4), 415–431. doi:10.1177/1049731503013004001
- Barth, R. P. (2001). Policy implications of foster family characteristics. *Family Relations*, 50(1), 16–19. doi:10.1111/j.1741–3729.2001.00016.x
- Barth, R. P. (2009). Preventing child abuse and neglect with parent training: Evidence and opportunities. *Future of Children*, *19*(2), 95–118. doi:10.1353/foc.0.0031

- Bîrneanu, A. (2013). Behavior problems in foster care children. *Revista de Asistenta Sociala*, *12*(4), 15–23. Retrieved from http://www.ceeol.com/aspx/issuedetails.aspx?issueid=f6eb286d-f476-44ac-b977-babfbe7b002d&articleId=4d71353c-12b8-4b5f-b4f3-97d82cba592d
- Brace, C. L. (1872). *The dangerous classes of New York [Project Gutenberg version]*. Retrieved from http://www.gutenberg.org/ebooks/33431
- Bridwell, S. D. (2013). A constructive–developmental perspective on the transformative learning of adults marginalized by race, class, and gender. *Adult Education Quarterly*, *63*(2), 127–146. doi:10.1177/0741713612447854
- Broady, T., Stoyles, G., McMullan, K., Caputi, P., & Crittenden, N. (2010). The experiment of foster care. *Journal of Child & Family Studies*, 19(5), 559–571. doi:10.1007/s10826–009–9330–6
- Brown, J. (2008). Foster parents' perceptions of factors needed for successful foster placements.

 **Journal of Child & Family Studies*, 17(4), 538–554. doi:10.1007/s10826–007–9172–z
- Brown, J. D., & Bednar, L. M. (2006). Foster parent perceptions of placement breakdown.

 *Children and Youth Services Review, 28(12), 1497–1511.

 doi:10.1016/j.childyouth.2006.03.004
- Brown, J. D., Bednar, L. M., & Sigvaldason, N. (2007). Causes of placement breakdown for foster children affected by alcohol. *Child & Adolescent Social Work Journal*, *24*(4), 313–332. doi:10.1007/s10560–007–0086–9

- Brown, J., Sintzel, J., Arnault, D., & George, N. (2009). Confidence to foster across cultures: Caregiver perspectives. *Journal of Child & Family Studies*, *18*(6), 633–642. doi:10.1007/s10826-009-9264-z
- Bryson, D. (2010). Adding variety to your learning activities. *Journal of Visual Communication* in Medicine, 33(2), 83–85. doi:10.3109/17453054.2010.481781
- Bullock, R. (2012). Crisis? What crisis? *Adoption & Fostering*, 2–3. doi:10.1177/030857591203600201
- Cardwell, M. S., Aranda, J. H., Hernandez, R., & Hoi Ho. (2014). Empowering your presentation skills. *Donald School Journal of Ultrasound in Obstetrics & Gynecology*, 8(1), 100–104. doi:10.5005/jp-journals-10009-1343
- Casey Family Programs: State Child Welfare Policy Database. (2013). [Research]. Retrieved November 2, 2013, from http://www.childwelfarepolicy.org/
- Chamberlain, P., Price, J. M., Reid, J. B., Landsverk, J., Fisher, P. A., & Stoolmiller, M. (2006).

 Who disrupts from placement in foster and kinship care? *Child Abuse & Neglect*, *30*, 409–424. doi:10.1016/j.chiabu.2005.11.004
- Chamberlain, P., Price, J., Reid, J., & Landsverk, J. (2008). Cascading implementation of a foster and kinship parent intervention. *Child Welfare*, 87(5), 27–48. doi:0009–4021/2008/050827–48
- Children and Family Research Center. (2004). *Multiple placements in foster care: Literature*review of correlates and predictors. Urbana, IL: Children and Family Research Center,

 University of Illinois at Urbana–Champaign. Retrieved from

 http://cfrc.illinois.edu/pubs/lr_20040201_MultiplePlacementsInFosterCare.pdf

- Children and Family Research Center. (2011). Placement stability and number of children in a foster home. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana–Champaign. Retrieved from http://cfrc.illinois.edu/pubs/bf_20120131_PlacementStabilityAndNumberOfChildrenInA FosterHome.pdf
- Child Welfare League of America. (2009). Overview of the adoption safe families act (ASFA):

 Reasonable efforts and the federal child and family services review (CFSR) (p. 40). Child

 Welfare League of America. Retrieved from

 http://courts.michigan.gov/scao/services/cws/Materials/07–23–09–

 3ASFARevisitedOverview.pdf
- Christenson, B., & McMurtry, J. (2007). A comparative evaluation of preservice training of kinship and nonkinship foster/adoptive Families. *Child Welfare*, 86(2), 125–140.

 Retrieved from https://www.questia.com/library/p435256/child-welfare
- Christian, S. (2002). *NCSL state legislative report: Supporting and retaining foster parents*.

 National Conference of State Legislatures. Retrieved from http://www.ncsl.org/issues-research/human-services/ncslnet-state-legislative-report-supporting-and-r.aspx
- Ciarrochi, J., Randle, M., Miller, L., & Dolnicar, S. (2012). Hope for the future: Identifying the individual difference characteristics of people who are interested in and intend to foster–care. *British Journal of Social Work*, *42*(1), 7–25. doi:10.1093/bjsw/bcr052
- Closson, R. (2013). Racial and cultural factors and learning transfer. *New Directions for Adult & Continuing Education*, 2013(137), 61–69. doi:10.1002/ace.20045

- Collins, M. E., Kim, S. H., & Amodeo, M. (2010). Empirical studies of child welfare training effectiveness: Methods and outcomes. *Child & Adolescent Social Work Journal*, *27*(1), 41–62. doi:10.1007/s10560–009–0190–0
- Conceição, S. C. O., Johaningsmeir, S., Colby, H., & Gordon, J. (2014). Family caregivers as lay trainers. *Adult Learning*, *25*(4), 151–159. doi:10.1177/1045159514546216
- Conradi, L., Agosti, J., Tullberg, E., Richardson, L., Langan, H., Ko, S., & Wilson, C. (2011).

 Promising practices and strategies for using trauma–informed child welfare practice to improve foster care placement stability: A breakthrough series collaborative. *Child Welfare*, 90(6), 207–225. Retrieved from https://www.questia.com/library/p435256/child–welfare
- Cooley, M. E., & Petren, R. E. (2011). Foster parent perceptions of competency: Implications for foster parent training. *Children and Youth Services Review*, *33*(10), 1968–1974. doi:10.1016/j.childyouth.2011.05.023
- Coryell, J. E. (2013). Collaborative, comparative inquiry and transformative cross–cultural adult learning and teaching: A Western educator metanarrative and inspiring a global vision.

 *Adult Education Quarterly, 63(4), 299–320. doi:10.1177/0741713612471420
- Courtney, J. R., & Prophet, R. (2011). Predictors of placement stability at the state level: The use of logistic regression to inform practice. *Child Welfare*, *90*(2), 127–142. Retrieved from https://www.questia.com/library/p435256/child–welfare
- Curry, D., Lawler, M. J., Schneider–Muñoz, A. J., & Fox, L. (2011). A child and youth care approach to professional development and training. *Relational Child & Youth Care Practice*, 24(1/2), 148–161. Retrieved from http://www.cyc-net.org/Journals/rcycp/

- Curry, D., McCarragher, T., & Dellmann–Jenkins, M. (2005). Training, transfer, and turnover: Exploring the relationship among transfer of learning factors and staff retention in child welfare. *Children and Youth Services Review*, 27(8), 931–948. doi:10.1016/j.childyouth.2004.12.008
- Darling, J. D. (2007). *Identifying the training and support needs of select sample of foster*parents (Doctoral dissertation, Pepperdine University). Retrieved from

 http://search.proquest.com.ezp.waldenulibrary.org/pqdtft/docview/304708491/abstract/13
 954FA75651E931FFD/31?accountid=14872
- Davies, P., Webber, M., & Briskman, J. A. (2015). Evaluation of a training programme for foster carers in an independent fostering agency. *Practice* (09503153), 27(1), 35–49. doi:10.1080/09503153.2014.983434
- DeGarmo, D. S., Chamberlain, P., Leve, L. D., & Price, J. (2009). Foster parent intervention engagement moderating child behavior problems and placement disruption. *Research on Social Work Practice*, *19*(4), 423–433. doi:10.1177/1049731508329407
- Delaney, R., Nelson, C., Pacifici, C., White, L., & Smalley, B. K. (2012). Web–enhanced preservice training for prospective resource parents: A randomized trial of effectiveness and user satisfaction. *Journal of Social Service Research*, *38*(4), 503–514. doi:10.1080/01488376.2012.696416
- Denby, R., Rindfleisch, N., & Bean, G. (1999). Predictors of foster parents' satisfaction and intent to continue to foster. *Child Abuse & Neglect*, *23*(3), 287–303. doi:10.1016/S0145–2134(98)00126–4

- Department of Children and Families. (2015). *Wisconsin administrative code ch. DCF 56:*Foster home care for children (p. 127). Wisconsin Department of Children and Families

 Division of Safety and Permanence. Retrieved from

 http://dcf.wi.gov/publications/pdf/dcf_p_pfs0131a.pdf
- Department of Human Services: Children, Adults, and Families Division. (2008). 2007 status of children in Oregon's child protective system (No. DHS 1535) (p. 52). Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/abusestats2007.pdf
- Department of Human Services: Children, Adults, and Families Division. (2009). 2008 status of children in Oregon's child protective system (No. DHS 1535) (p. 56). Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/abusestats2008.pdf
- Dorsey, S., Farmer, E. M. Z., Barth, R. P., Greene, K. M., Reid, J., & Landsverk, J. (2008).

 Current status and evidence base of training for foster and treatment foster parents.

 Children and Youth Services Review, (30), 1403–1416.

 doi:10.1016/j.childyouth.2008.04.008
- Dozier, M., Lindhiem, O., Lewis, E., Bick, J., Bernard, K., & Peloso, E. (2009). Effects of a foster parent training program on young children's attachment behaviors: Preliminary evidence from a randomized clinical trial. *Child & Adolescent Social Work Journal*, 26(4), 321–332. doi:10.1007/s10560–009–0165–1
- Eggertsen, L. (2008). Primary factors related to multiple placements for children in out–of–home care. *Child Welfare*, 87(6), 71–90. Retrieved from https://www.questia.com/library/p435256/child–welfare

- Esaki, N., Ahn, H., & Gregory, G. (2012). Factors associated with foster parents' perceptions of agency effectiveness in preparing them for their role. *Journal of Public Child Welfare*, 6(5), 678–695. doi:10.1080/15548732.2012.723978
- Everson–Hock, E. S., Jones, R., Guillaume, L., Clapton, J., Goyder, E., Chilcott, J., ... Swann, C. (2012). The effectiveness of training and support for carers and other professionals on the physical and emotional health and well–being of looked–after children and young people: a systematic review. *Child: Care, Health & Development*, *38*(2), 162–174. doi:10.1111/j.1365–2214.2011.01247.x
- Fees, B. S., Stockdale, D. F., Crase, S. J., Riggins–Caspers, K., Yates, A. M., Lekies, K. S., & Gillis–Arnold, R. (1998). Satisfaction with foster parenting: Assessment one year after training. *Children and Youth Services Review*, 20(4), 347–363. doi:10.1016/S0190–7409(98)00011–5
- Fisher, P. A., Chamberlain, P., & Leve, L. D. (2009). Improving the lives of foster children through evidenced–based interventions. *Vulnerable Children & Youth Studies*, *4*(2), 122–127. doi:10.1080/17450120902887368
- Foley, J. M., & Kaiser, L. M. R. (2013). Learning transfer and its intentionality in adult and continuing education. *New Directions for Adult & Continuing Education*, 2013(137), 5–15. doi:10.1002/ace.20040
- Foote, L. S. (2015). Transformational learning: Reflections of an adult learning story. *Adult Learning*, 26(2), 84–86. doi:10.1177/1045159515573017
- Foster Care Independence Act of 1999, Pub. L. No. H. R. 3443 § 112 (1999). Retrieved from http://www.nicwa.org/law/fcia/PL106–169 summary.pdf

- Galbraith, M. W. (Ed.). (2004). *Adult learning methods: A guide for effective instruction* (3rd ed.). Malabar, FL: Krieger Publishing Company.
- Gerstenzang, S. (2009). Foster parent training in America. *Fostering Families Today*, (July/August), 28–30. Retrieved from http://www.fosteringfamiliestoday.com
- Gibbs, D. (2005). *Understanding foster parenting: Using administrative data to explore*retention (p. 68). Washington, DC: U.S. Department of Health and Human Services,

 Office of the Assistant Secretary for Planning and Evaluation. Retrieved from

 http://aspe.hhs.gov/hsp/05/foster–parenting/report.pdf
- Gibbs, D., & Wildfire, J. (2007). Length of service for foster parents: Using administrative data to understand retention. *Children and Youth Services Review*, *29*(5), 588–599. doi:10.1016/j.childyouth.2006.11.002
- Goodman, D., Bonk, K., Mattingly, J., Omang, J., & Monihan, K. (2008). *Recruitment, training, and support: The essential tools of foster care* (pp. 1–48). Anne E. Casey Foundation.

 Retrieved from

 http://www.aecf.org/upload/PublicationFiles/recruitment%20training%20and%20support
 .pdf
- Graf, B. (2002). *Information packet: Foster Care Independence Act 1999* (p. 7). National Resource Center for Foster Care and Permanency Planning. Retrieved from http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/information_packets/foster_care_independence_act-pkt.pdf
- Gredler, M. E. (2001). *Learning and instruction: Theory into practice* (4th ed.). Upper Saddle River, NJ: Merrill Prentice Hall.

- Guest, G., Bunce, A., & Johnson, L. (2006). How many interviews are enough? An experiment with data saturation and variability. *Field Methods*, *18*(1), 59–82. doi:10.1177/1525822X05279903
- Hacsi, T. (1995). From indenture to family foster care: A brief history of child placing. *Child Welfare*, 74(1), 162–180. Retrieved from https://www.questia.com/library/p435256/child-welfare
- Hall, M. E. (2012). Foster parents' perceptions of their knowledge, skills, and abilities in relation to the behavioral challenges of foster youth (Doctoral dissertation, University of Arkansas). Retrieved from http://search.proquest.com.ezp.waldenulibrary.org/pqdtft/docview/1013441865/abstract/1 382526B477467F258E/12?accountid=14872
- Harden, B. J., D'Amour Meisch, A., Vick, J. E., & Pandohie–Johnson, L. (2008). Measuring parenting among foster families: The development of the Foster Parent Attitudes

 Questionnaire (FPAQ). *Children and Youth Services Review*, 30(8), 879–892.

 doi:10.1016/j.childyouth.2007.12.015
- Holland, P., & Gorey, K. M. (2004). Historical, developmental, and behavioral factors associated with foster care challenges. *Child & Adolescent Social Work Journal*, *21*(2), 117–135. doi:10.1023/b:casw.0000022727.40123.95
- Holloway, S. M., & Gouthro, P. A. (2011). Teaching resistant novice educators to be critically reflective. *Discourse: Studies in the Cultural Politics of Education*, *32*(1), 29–41. doi:10.1080/01596306.2011.537069

- Holt, M. I. (1992). *The orphan trains: Placing out in America*. Lincoln, NE: University of Nebraska Press. Retrieved from http://www.questia.com/read/15238034/the–orphan–trains–placing–out–in–america
- Hung, W. (2013). Problem–based learning: A learning environment for enhancing learning transfer. New Directions for Adult & Continuing Education, 2013(137), 27–38.
 doi:10.1002/ace.20042
- Hurlburt, M. S., Chamberlain, P., DeGarmo, D., Zhang, J., & Price, J. M. (2010). Advancing prediction of foster placement disruption using brief behavioral screening. *Child Abuse & Neglect*, *34*(12), 917–926. doi:10.1016/j.chiabu.2010.07.003
- Hussey, D. L., & Guo, S. (2005). Characteristics and trajectories of treatment foster care youth.

 Child Welfare, 84(4), 485–506. Retrieved from https://www.questia.com/library/p435256/child-welfare*
- James, S. (2004). Why do foster care placements disrupt? An investigation of reasons for placement change in foster care. *Social Service Review*, 78(4), 601–627. doi:10.1086/424546
- Jolly, R., & Russell–Miller, M. (2012). Foster parent retention and satisfaction. *McNair Scholars Journal*, *9*(1), 9–20. Retrieved from http://scholarworks.gvsu.edu/mcnair/
- Kempe, C. H., Silverman, F. N., Steele, B. F., Droegemueller, W., & Silver, H. K. (1962). The battered child syndrome. *Journal of the American Medical Association*, *181*(1), 17–24. doi:10.1001/jama.1962.03050270019004

- Knowles, M. S., Holton, E. F., & Swanson, R. A. (2011). *The adult learner: The definitive classic in adult education and human resource development*. Amsterdam, Netherlands: Elsevier.
- Lee, J. H., & Holland, T. P. (1991). Evaluating the effectiveness of foster parent training.

 *Research on Social Work Practice, 1(2), 162–174. doi:10.1177/104973159100100204
- Leve, L. D., Harold, G. T., Chamberlain, P., Landsverk, J. A., Fisher, P. A., & Vostanis, P.
 (2012). Practitioner review: Children in foster care vulnerabilities and evidence–based interventions that promote resilience processes. *Journal of Child Psychology & Psychiatry*, 53(12), 1197–1211. doi:10.1111/j.1469–7610.2012.02594.x
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: SAGE Publications, Inc.
- Lindsey, E. W. (2001). Foster family characteristics and behavioral and emotional problems of foster children: Practice implications for child welfare, family life education, and marriage and family therapy. *Family Relations*, *50*(1), 19–22. doi:10.1111/j.1741–3729.2001.00019.x
- Luke, N., & Banerjee, R. (2012). Maltreated children's social understanding and empathy: A preliminary exploration of foster carers' perspectives. *Journal of Child & Family Studies*, 21(2), 237–246. doi:10.1007/s10826-011-9468-x
- Macdonald, G., & Turner, W. (2005). An experiment in helping foster–carers manage challenging behaviour. *British Journal of Social Work*, *35*(8), 1265–1282. doi:10.1093/bjsw/bch204

- Mainwaring, D. (2014). Educational psychologists as advocates of children in out of home care:

 An innovative program model that empowers young people and the adults who support them. *Educational & Child Psychology*, *31*(1), 101–123. Retrieved from https://www.bps.org.uk
- Marshall, C., & Rossman, G. B. (2011). *Designing qualitative research* (5th ed.). Los Angeles, CA: SAGE Publications, Inc.
- Mason, M. (2010). Sample size and saturation in PhD Studies using qualitative interviews.

 Forum Qualitative Sozialforschung / Forum: Qualitative Social Research, 11(3).

 Retrieved from http://www.qualitative-research.net/index.php/fqs/article/view/1428
- Mathison, S. (2007, December 15). Summative evaluation. In *Encyclopedia of evaluation* (p. 403). Thousand Oaks, CA: SAGE Publications, Inc. Retrieved from http://knowledge.sagepub.com/view/evaluation/n533.xml
- McDaniel, B., Braiden, H. J., Onyekwelu, J., Murphy, M., & Regan, H. (2011). Investigating the effectiveness of the incredible years basic parenting programme for foster carers in Northern Ireland. *Child Care in Practice*, *17*(1), 55–67. doi:10.1080/13575279.2010.522979
- McNeil, C. B., Herschell, A. D., Gurwitch, R. H., & Clemens–Mowrer, L. (2005). Training foster parents in parent–child interaction therapy. *Education & Treatment of Children* (ETC), 28(2), 182–196. Retrieved from http://www.educationandtreatmentofchildren.net/
- Merriam, S. B., Caffarella, R. S., & Baumgartner, L. N. (2007). *Learning in adulthood: A comprehensive guide* (3rd ed.). San Francisco, CA: John Wiley & Sons.

- Mitchell, M. L., & Jolley, J. M. (2013). *Research design explained*. Belmont, CA: Wadsworth Publishing.
- Moretti, F., van Vliet, L., Bensing, J., Deledda, G., Mazzi, M., Rimondini, M., ... Fletcher, I. (2011). A standardized approach to qualitative content analysis of focus group discussions from different countries. *Patient Education and Counseling*, 82(3), 420–428. doi:10.1016/j.pec.2011.01.005
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: SAGE

 Publications, Inc. Retrieved from http://srmo.sagepub.com/view/phenomenologicalresearch-methods/SAGE.xml
- Munhall, P. L. (2012). *Nursing research: A qualitative perspective*. Sudbury, MA: Jones & Bartlett Learning.
- Murray, D. S. (2014). Navigating toward andragogy: Coordination and management of student–professor conversations. *Western Journal of Communication*, 78(3), 310–336. doi:10.1080/10570314.2013.866687
- Murray, L., Tarren–Sweeney, M., & France, K. (2011). Foster carer perceptions of support and training in the context of high burden of care. *Child & Family Social Work*, *16*(2), 149–158. doi:10.1111/j.1365–2206.2010.00722.x
- Murray, M., Culver, T., Farmer, E., Jackson, L. A., & Rixon, B. (2014). From theory to practice:

 One agency's experience with implementing an evidence–based model. *Journal of Child and Family Studies*, *23*(5), 844–853. doi:10.1007/s10826–013–9738–x

- Murray, M., Southerland, D., Farmer, E., & Ballentine, K. (2010). Enhancing and adapting treatment foster care: Lessons learned in trying to change practice. *Journal of Child & Family Studies*, *19*(4), 393–403. doi:10.1007/s10826–009–9310–x
- Myers, J. E. B. (2008). A short history of child protection in America. *Family Law Quarterly*, 42(3), 449–464. Retrieved from http://www.americanbar.org/publications/family law quarterly home.html
- Narendorf, S. C., Fedoravicius, N., McMillen, J. C., McNelly, D., & Robinson, D. R. (2012).

 Stepping down and stepping in: Youth's perspectives on making the transition from residential treatment to treatment foster care. *Children and Youth Services Review*, *34*(1), 43–49. doi:10.1016/j.childyouth.2011.08.031
- Nash, J., & Flynn, R. J. (2009). Foster–parent training and foster–child outcomes: An exploratory cross–sectional analysis. *Vulnerable Children & Youth Studies*, *4*(2), 128–134. doi:10.1080/17450120902808349
- Noy, C. (2008). Sampling knowledge: The hermeneutics of snowball sampling in qualitative research. *International Journal of Social Research Methodology*, *11*(4), 327–344. doi:10.1080/13645570701401305
- Office of Business Intelligence, Department of Human Services. (2012). 2011 child welfare data book (p. 41). Children, Adults and Families Division Office of Program, Performance and Reporting. Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/2011–cw-data-book.pdf
- Office of Business Intelligence, Department of Human Services. (2013). 2012 foster care data book (p. 13). Children, Adults and Families Division Office of Program, Performance and

- Reporting. Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/2012—cw-data-book.pdf
- Office of Business Intelligence, Department of Human Services. (2014). 2013 child welfare data book (p. 36). Children, Adults and Families Division Office of Program, Performance and Reporting. Retrieved from http://www.oregon.gov/dhs/abuse/docs/2013%20Data%20Book.pdf
- O'Neill Murray, K., & Gesiriech, S. (2004). *A brief legislative history of the child welfare system*(p. 6). The Pew Commission. Retrieved from

 http://www.pewtrusts.org/uploadedFiles/wwwpewtrustsorg/Reports/Foster_care_reform/

 LegislativeHistory2004.pdf
- Oosterman, M., Schuengel, C., Slot, N. W., Bullens, R. A. R., & Doreleijers, T. A. H. (2007).

 Disruptions in foster care: A review and meta–analysis. *Science Direct Children and Youth Services Review*, *29*, 53–76. doi:10.1016/j.childyouth.2006.07.003
- Oregon Administrative Rule: Developing and Managing the Case Plan, Pub. L. No. I–B.3.1 413–040–0000 thru 0032 (2009). Retrieved from http://www.dhs.state.or.us/policy/childwelfare/manual_1/i-b31.pdf
- Oregon Administrative Rule: Licensing Foster Care Agencies, Pub. L. No. II–C.1.2 413–215–0301 thru 0396 (2008). Retrieved from http://www.dhs.state.or.us/policy/childwelfare/manual_2/ii–c12.pdf
- Oregon Administrative Rules: Private Child Caring Agencies Licensing Umbrella Rules, Pub. L.

 No. II–C.1 413–215–0001 thru 0131 (2013). Retrieved from

 http://arcweb.sos.state.or.us/pages/rules/oars_400/oar_413/413_tofc.html

- Oregon Administrative Rule: Standards for Certification of Foster Parents and Relative

 Caregivers and Approval of Potential Adoptive Resources, Pub. L. No. II–B.1 413–200–
 0301 thru 0396 (2011). Retrieved from

 http://www.dhs.state.or.us/policy/childwelfare/manual 2/ii–b1.pdf
- Oregon Department of Human Services. (2015). 2014 child welfare data set: Number of placements for children in foster care (p. 1). Children, Adults and Families Division Office of Program, Performance and Reporting. Retrieved from https://rom.socwel.ku.edu/Oregon_Public/Login.aspx?H=2088
- Oregon Department of Human Services: Children, Adults, and Families Division. (2010). 2009 child welfare data book. Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/2009-cw-data-book.pdf?ga=t
- Oregon Department of Human Services: Children, Adults, and Families Division. (2011a). 2010 child welfare data book. Children, Adults and Families Division Office of Program,

 Performance and Reporting. Retrieved from

http://www.oregon.gov/DHS/abuse/publications/children/2010-cw-data-book.pdf?ga=t

- Oregon Department of Human Services: Children, Adults, and Families Division. (2011b).

 Standards for certification of foster parents and relative caregivers and approval of potential adoptive resources (p. 66). Retrieved from
- Oregon Department of Human Services: Children, Adults, and Families Division. (n.d.). CFSP for fiscal years 2010–2014. DHS. Retrieved from http://www.oregon.gov/DHS/children/publications/cfsp/cfsp-2010-2014.pdf

https://apps.state.or.us/Forms/Served/de9303.pdf

- Oregon secretary of state: About the OARs. (2015). Retrieved September 1, 2015, from http://sos.oregon.gov/archives/Pages/about_rules.aspx
- Orme, J. G., & Buehler, C. (2001). Foster family characteristics and behavioral and emotional problems of foster children: A narrative review. *Family Relations*, *50*(1), 3–15. doi:10.1111/j.1741–3729.2001.00003.x
- Ortiz, J. D. (2000). *Motivation and satisfaction of foster parents* (Doctoral dissertation,

 University of Kansas). Retrieved from

 http://search.proquest.com.ezp.waldenulibrary.org/pqdtft/docview/304625925/abstract/13

 954FA75651E931FFD/88?accountid=14872
- Osmond, J., Scott, T., & Clark, J. (2008). The knowledge of caring: Revisiting the need for knowledge support of carers. *Child & Family Social Work*, *13*(3), 262–273. doi:10.1111/j.1365–2206.2008.00546.x
- Padgett, D. (2008). *Qualitative methods in social work research* (2nd ed.). New York, NY: Sage Sourcebooks for the Human Services.
- Paige, R. (2010). Beyond student–centered instruction: A model for teaching learning–to–learn strategies. *International Journal of Interdisciplinary Social Sciences*, *5*(5), 299–307. Retrieved from http://thesocialsciences.com/publications/journal/about–the–journal
- Palis, A. G., & Quiros, P. A. (2014). Adult learning principles and presentation pearls. *Middle East African Journal of Ophthalmology*, 21(2), 114–122. doi:10.4103/0974–9233.129748
- Piescher, K. N., Schmidt, M., & LaLiberte, T. (2008). Evidence–based practice in foster parent training and support: Implications for treatment foster care providers (pp. 1–85). Center

- for Advanced Studies in Child Welfare. Retrieved from http://www.ffta.org/research_outcomes/EBP_FP_Training_Support_guide.pdf
- Pithouse, A., Hill–Tout, J., & Lowe, K. (2002). Training foster carers in challenging behaviour:

 A case study in disappointment? *Child & Family Social Work*, 7(3), 203–214.

 doi:10.1046/j.1365–2206.2002.00249.x
- Price, J. M., Chamberlain, P., Landsverk, J., & Reid, J. (2009). KEEP foster–parent training intervention: Model description and effectiveness. *Child & Family Social Work*, *14*(2), 233–242. doi:10.1111/j.1365–2206.2009.00627.x
- Public Law 96–272, Pub. L. No. P.L. 96–272 (1980). Retrieved from http://www.ssa.gov/OP_Home/comp2/F096–272.html
- Puddy, R. W., & Jackson, Y. (2003). The development of parenting skills in foster parent training. *Children and Youth Services Review*, 25(12), 987–1013. doi:10.1016/S0190–7409(03)00106–3
- Raiha, N. K., & Whitbeck, B. (2013). 2012 Foster parent survey: DSHS foster parents speak

 (No. 11.188) (p. 114). Olympia, WA: Research and Data Analysis Division, Washington

 State Department of Social & Health Services. Retrieved from

 http://www.dshs.wa.gov/pdf/ms/rda/research/11/188.pdf
- Reddy, S., Negi, L., Dodson–Lavelle, B., Ozawa–de Silva, B., Pace, T., Cole, S., ... Craighead, L. (2013). Cognitive–based compassion training: A promising prevention strategy for atrisk adolescents. *Journal of Child & Family Studies*, *22*(2), 219–230. doi:10.1007/s10826–012–9571–7

- Robson, S., & Briant, N. (2009). What did they think? An evaluation of the satisfaction and perceived helpfulness of a training programme developed as an indirect intervention for foster carers. *Adoption & Fostering*, *33*(2), 34–44. doi:10.1177/030857590903300205
- Rork, K. E., & McNeil, C. B. (2011). Evaluation of foster parent training programs: A critical review. *Child & Family Behavior Therapy*, 33(2), 139–170. doi:10.1080/07317107.2011.571142
- Rymph, C. E. (2012). From "economic want" to "family pathology": Foster family care, the new deal, and the emergence of a public child welfare system. *Journal of Policy History*, 24(1), 7–25. doi:10.1017/S0898030611000352
- Sandelowski, M. (2008). Member check. In L. M. Given (Ed.), *The SAGE Encyclopedia of Qualitative Research Methods* (pp. 502–503). Thousand Oaks, California: SAGE Publications, Inc. Retrieved from http://knowledge.sagepub.com/view/research/SAGE.xml
- Sandlin, J. A., Wright, R. R., & Clark, C. (2013). Reexamining theories of adult learning and adult development through the lenses of public pedagogy. *Adult Education Quarterly*, 63(1), 3–23. doi:10.1177/0741713611415836
- Schultze, U., & Avital, M. (2011). Designing interviews to generate rich data for information systems research. *Information and Organization*, 21(1), 1–16. doi:10.1016/j.infoandorg.2010.11.001
- Silverman, D. (2011). *Qualitative research: Issues of theory, method, and practice*. Los Angeles, CA: SAGE Publications, Inc.

- Smith, D. K., Stormshak, E., Chamberlain, P., & Whaley, R. B. (2001). Placement disruption in treatment foster care. *Journal of Emotional & Behavioral Disorders*, *9*(3), 200. doi:10.1177/106342660100900306
- Southerland, D., Mustillo, S., Farmer, E., Stambaugh, L., & Murray, M. (2009). What's the relationship got to do with it? Understanding the therapeutic relationship in therapeutic foster care. *Child & Adolescent Social Work Journal*, *26*(1), 49–63. doi:10.1007/s10560–008–0159–4
- Sribnick, E. G. (2011). The origins of modern child welfare: Liberalism, interest groups, and the transformation of public policy in the 1970s. *Journal of Policy History*, *23*(2), 150–176. doi:10.1017/S0898030611000029
- Strijker, J., Van Oijen, S., & Knot–Dickscheit, J. (2011). Assessment of problem behaviour by foster parents and their foster children. *Child & Family Social Work*, *16*(1), 93–100. doi:10.1111/j.1365–2206.2010.00717.x
- Sun, Q. (2013). Learning for transformation in a changing landscape. *Adult Learning*, *24*(3), 131–136. doi:10.1177/1045159513489116
- Taylor, B., & McQuillan, K. (2014). Perspectives of foster parents and social workers on foster placement disruption. *Child Care in Practice*, 20(2), 232–249. doi:10.1080/13575279.2013.859567
- Trunzo, A. C., Bishop–Fitzpatrick, L., Strickler, A., & Doncaster, J. (2012). Pressley Ridge treatment foster care: The model of care thirty years later. *Reclaiming Children and Youth*, *21*(2), 22–26. Retrieved from https://reclaimingjournal.com/

- U.S. Department of Health and Human Services. (2006a). *AFCARS report: Final estimates for fy*1998 through fy 2002 (No. 12) (p. 16). U.S. Department of Health and Human Services,

 Administration for Children and Families, Administration on Children, Youth and

 Families, Children's Bureau. Retrieved from

 http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report12.pdf
- U.S. Department of Health and Human Services. (2006b). AFCARS report: Preliminary FY 2005 estimates as of September 2006 (No. 13) (p. 8). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport13.pdf
- U.S. Department of Health and Human Services. (2008). *AFCARS report: Preliminary FY 2006*estimates as of January 2008 (No. 14) (p. 8). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from
 http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport15.pdf
- U.S. Department of Health and Human Services. (2009a). AFCARS report: Preliminary FY 2007 estimates as of October 2009 (No. 15) (p. 8). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport15.pdf
- U.S. Department of Health and Human Services. (2009b). *AFCARS report: Preliminary FY 2008* estimates as of October 2009 (No. 16) (p. 8). U.S. Department of Health and Human

- Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport15.pdf
- U.S. Department of Health and Human Services. (2010). *AFCARS report: Preliminary FY 2009*estimates as of July 2010 (No. 17) (p. 8). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from
 http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport17.pdf
- U.S. Department of Health and Human Services. (2011). *AFCARS report: Preliminary FY 2010 estimates as of June 2011* (No. 18) (p. 8). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from http://www.acf.hhs.gov/programs/cb/stats research/afcars/tar/report18.pdf
- U.S. Department of Health and Human Services. (2012). *AFCARS report: Preliminary FY 2011*estimates as of July 2012 (No. 19) (p. 6). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from

 http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report19.pdf
- U.S. Department of Health and Human Services. (2013). *AFCARS report: Preliminary FY 2012*estimates as of July 2013 (No. 20) (p. 6). U.S. Department of Health and Human

 Services, Administration for Children and Families, Administration on Children, Youth

- and Families, Children's Bureau. Retrieved from http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport20.pdf
- U.S. Department of Health and Human Services. (2014). *AFCARS report: Preliminary FY 2013*estimates as of July 2014 (No. 21) (p. 6). U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Retrieved from
 http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport21.pdf
- U.S. Department of Health and Human Services: Administration for Children and Families.
 (2013). Administration for Children and Families: Data and Reports. Retrieved
 November 2, 2013, from http://www.acf.hhs.gov/
- Van Camp, C. M., Montgomery, J. L., Vollmer, T. R., Kosarek, J. A., Happe, S., Burgos, V., & Manzolillo, A. (2008). Behavioral parent training in child welfare: Maintenance and booster training. *Research on Social Work Practice*, 18(5), 392–400. doi:10.1177/1049731508318658
- Van Camp, C. M., Vollmer, T. R., Goh, H. L., Whitehouse, C. M., Reyes, J., Montgomery, J. L., & Borrero, J. C. (2008). Behavioral parent training in child welfare: Evaluations of skills acquisition. *Research on Social Work Practice*, 18(5), 377–391. doi:10.1177/1049731507314008
- Waldbillig, A. A. (2008). Implementation of PRIDE in Virginia: An examination of role

 perception among foster parents and foster care workers (Doctoral dissertation, Virginia

 Commonwealth University). Retrieved from

- http://search.proquest.com.ezp.waldenulibrary.org/pqdtft/docview/304836974/abstract/13 954FA75651E931FFD/33?accountid=14872
- Warde, B. (2007). Comparison of role perceptions of immigrant foster parents of African descent from English–speaking Caribbean countries and African–American foster parents.

 **Journal of Immigrant & Refugee Studies, 5(4), 59–74. doi:10.1080/15362940802179108
- Ward, H., Courtney, M., Del Valle, J. F., McDermid, S., & Zeira, A. (2009). Improving outcomes for children and young people in care. *Vulnerable Children & Youth Studies*, 4(2), 101–106. doi:10.1080/17450120903013014
- Weindling, P. (2001). The origins of informed consent: The international scientific commission on medical war crimes, and the Nuremberg Code. *Bulletin of the History of Medicine*, 75(1), 37–71. doi:10.1353/bhm.2001.0049
- Whenan, R., Oxlad, M., & Lushington, K. (2009). Factors associated with foster carer well—being, satisfaction and intention to continue providing out–of–home care. *Children and Youth Services Review*, *31*(7), 752–760. doi:10.1016/j.childyouth.2009.02.001
- Wilson, M. E. (2006). The effects of foster parent training on parental attitudes and behaviors as measured by the Parent–Child Relationship Inventory (Doctoral dissertation, The University of the Rockies). Retrieved from http://search.proquest.com.ezp.waldenulibrary.org/pqdtft/docview/304938864/abstract/13 954FA75651E931FFD/5?accountid=14872
- Woods, S. B., Farineau, H. M., & McWey, L. M. (2013). Physical health, mental health, and behaviour problems among early adolescents in foster care. *Child: Care, Health & Development*, 39(2), 220–227. doi:10.1111/j.1365–2214.2011.01357.x

Zinn, A. (2009). Foster family characteristics, kinship, and permanence. Social Service Review,

(2), 185. doi:10.1086/600828

Appendix A: Policy Recommendation Paper

Introduction

Of the 7,602 children in foster care in Oregon for federal fiscal year 2014, 3,008 (40%) had endured three or more placements and 941 (12%) had six or more placements (Oregon Department of Human Services, 2015). Table A1 shows the number of placements and percentages for children in foster care from 2006 through 2014. The trend in Oregon is that more children are having more placement stability (Oregon Department of Human Services, 2015). However, there are still too many children who have three or more placements (Barber & Delfabbro, 2003; Chamberlain et al., 2006; Children and Family Research Center, 2004, 2011; Eggertsen, 2008; Hurlburt et al., 2010, p. 2010; James, 2004; Oosterman et al., 2007; Oregon Department of Human Services, 2015).

Table A1

Number of Placements and Percentages of Children in Foster Care from 2006–2014 in Oregon

| # of Placements | 9/30/2006 | | 9/30/2007 | | 9/30/2008 | |
|-----------------|-----------|------|-----------|------|-----------|------|
| 1 | 3,355 | 32% | 2,788 | 29% | 2,810 | 31% |
| 2 | 2,873 | 27% | 2,529 | 27% | 2,377 | 26% |
| 3 | 1,532 | 14% | 1,408 | 15% | 1,316 | 15% |
| 4 | 853 | 8% | 849 | 9% | 737 | 8% |
| 5 | 565 | 5% | 529 | 6% | 476 | 5% |
| 6 or more | 1,483 | 14% | 1,451 | 15% | 1,342 | 15% |
| Total in Care | 10,661 | 100% | 9,554 | 100% | 9,058 | 100% |

| # of Placements | 9/30/2009 | | 9/30/2010 | | 6/30/2011 | |
|-----------------|-----------|------|-----------|------|-----------|------|
| 1 | 2,920 | 34% | 3,381 | 38% | 3,364 | 38% |
| 2 | 2,245 | 26% | 2,222 | 25% | 2,272 | 26% |
| 3 | 1,076 | 13% | 1,144 | 13% | 1,196 | 14% |
| 4 | 686 | 8% | 668 | 8% | 618 | 7% |
| 5 | 400 | 5% | 370 | 4% | 369 | 4% |
| 6 or more | 1,290 | 15% | 1,131 | 13% | 1,063 | 12% |
| Total in Care | 8,617 | 100% | 8,916 | 100% | 8,882 | 100% |

| # of Placements | 9/30/2012 | | 9/30/2013 | | 9/30/2014 | |
|-----------------|-----------|-------|-----------|-------|-----------|-------|
| 1 | 3,488 | 39.8% | 3,113 | 37.6% | 2,619 | 34.4% |
| 2 | 2,152 | 24.5% | 2,101 | 25.3% | 1,975 | 26% |
| 3 | 1,199 | 13.7% | 1,098 | 13.2% | 1,125 | 14.8% |
| 4 | 640 | 7.3% | 623 | 7.5% | 586 | 7.7% |
| 5 | 399 | 4.5% | 385 | 4.6% | 356 | 4.7% |
| 6 or more | 892 | 10.2% | 983 | 11.8% | 941 | 12.4% |
| Total in Care | 8,770 | 100% | 8,303 | 100% | 7,602 | 100% |

Note. I took the 2008 figures from the Status of Children in Oregon's Child Protective System. In 2009, this report was renamed the Child Welfare Data Book. The figure for the total number of foster children in care in 2008 as reported in the 2009 Child Welfare Data Book is 8,970. The percentages remained the same. In 2012, this report was renamed the Foster Care Data Book. As of this writing, the 2013 Child Welfare Data Book has not been released. (Department of Human Services: Children, Adults, and Families Division, 2008, 2009; Office of Business Intelligence, Department of Human Services, 2012, 2013, 2014; Oregon Department of Human Services, 2015; Oregon Department of Human Services: Children, Adults, and Families Division, 2010, 2011a).

I was unable to find public data that gave the number of foster homes that were closed during the federal fiscal years (FFY) or state fiscal year (SFY) in Oregon. However, I was able to find the, "Child Welfare Data Book" reports from 2007 to 2011 prepared by the Office of Business Intelligence, Oregon Department of Human Services that gave the number of new homes that were certified during that year and the total number of homes that were certified on the last day of that year. To extrapolate the number of foster homes closed during that FFY or SFY, I took the total number of certified foster homes on the last day of the previous year, added the number of new foster homes certified during the current year and subtracted the total number of certified foster homes on the last day of the current year. For FFY 2007, the equation would be (5,309 + 1,867) - 4,893 = 2,283. Table A2 shows the number of new foster homes certified, the number of existing homes on the last day of the year (FFY or SFY), the number of homes that were closed during that year, and the attrition rate of foster parents in Oregon from 2006 to 2011 (the last year this information was available).

Table A2

Number of Certified Foster Homes and Number of Homes Closed from 2006–2011 in Oregon

| Item | FFY 2006 | FFY 2007 | FFY 2008 | FFY 2009 | FFY 2010 | SFY 2011 |
|--|-------------|-------------|-------------|-------------|-------------|-------------|
| New Foster Homes Certified during FFY or SFY | No data | 1,867 | 1,877 | 1,837 | 2,008 | 1,971 |
| # of Certified Foster Homes on Last Day of FFY or SFY | 5,309 | 4,893 | 4,735 | 4,432 | 4,673 | 4,542 |
| Foster Homes Closed during the FFY or SFY | No data | 2,283 | 2,035 | 2,140 | 1,767 | 2,102 |
| % Foster Parent Attrition | No data | 47% | 43% | 48% | 38% | 46% |

Note. I am unable to extrapolate any figures after SFY 2011 as the Child Welfare Data Book was split into three publications (2012 Foster Care Data Book, 2012 Family Services Data Book, and 2012 Foster Care Data Book). Some of the same information remained, but the section entitled, "Foster Care" which gave me the numbers above is no longer in any of the publications. I have been unable to find this information for Oregon anywhere else. (Department of Human Services: Children, Adults, and Families Division, 2008, 2009; Office of Business Intelligence, Department of Human Services, 2012; Oregon Department of Human Services: Children, Adults, and Families Division, 2010, 2011a).

The attrition rates for first year foster parents in Oregon in 2011, though well below the national average of 60% (Goodman et al., 2008), were at 46%, a number that is still too high. The average length of service for a foster provider in Oregon between 1990 and 2002 was eight months, with only 19% staying for over two years (Gibbs & Wildfire, 2007). The question is, why? All foster parents receive preservice training. Did the preservice training adequately prepare the foster parents for the challenges they would face? The only way to find out the answer to this question was to ask the foster providers themselves.

Scope

A qualitative phenomenological approach was used. The purposeful sample included only those TFPs who had gone through preservice training and who had had at least one child placed in their home for full time TFPs or at least one weekend placement for respite TFPs.

Participants consisted of 12 currently certified local therapeutic foster providers recruited from and living in the focus community. Data were collected using in depth, semistructured interviews.

Purpose and Guiding Questions

The purpose of this study was to ask certified TFPs about their perceptions of the effectiveness of the preservice training. There were four guiding questions:

- How effective was the agency's preservice training in preparing TFPs for the difficulties they face after a child placement?
- How well did the agency's preservice training cover issues TFPs encountered with the foster children that contributed to or prevented attrition of certified TFPs?
- How well did the agency's preservice training cover issues TFPs encountered with the foster children that contributed to or prevented multiple placements of foster children?
- What should be changed in the delivery or content of the agency's preservice training to meet the expressed needs of the TFPs?

Summary of Findings

Table A3 reflects the basic demographics of the participants. Ten out of the 12 were from dual parent homes, 7 out of the 12 identified as bilingual, all participants had attended the weekend preservice training, and 7 out of 12 of the participants had previous parenting experience.

Table A3

Basic Demographics of the Participants

| Participant # | Single/ dual parent home | Bilingual | Years certified | Year preservice completed | Weekend training | Previous parenting experience |
|---------------|--------------------------|-----------|--------------------|---------------------------------|---------------------|-------------------------------|
| 1 | Dual | Yes | 8 | 2007 | Yes | Yes |
| 2 | Dual | Yes | 3 | 2012 | Yes | Yes |
| 3 | Dual | Yes | < 1 | 2014 | Yes | No |
| 4 | Dual | Yes | < 1 | 2014 | Yes | No |
| 5 | Dual | No | 1 | 2013 | Yes | No |
| 6 | Dual | No | 5 | 2010 | Yes | Yes |
| 7 | Dual | Yes | 9 | 2006 | No | No |
| 8 | Single | No | 7 | 2008 | Yes | Yes |
| 9 | Single | Yes | 3 | 2013 | Yes | No |
| 10 | Dual | No | 3 | 2012 | Yes | Yes |
| 11 | Dual | Yes | 3 | 2013 | Yes | Yes |
| 12 | Dual | No | 4 | 2011 | Yes | Yes |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

Nine out of 11 (82%) respondents said either that the preservice training was effective or somewhat/mostly effective and could be employed in real life situations. (This is only out of 11 as one respondent said that the question did not apply to them).

The top three responses as to the most helpful content of preservice training were: 3 out of 12 (25%) said that all of the preservice training was helpful, 3 out of 12 (25%) said that the most helpful content of the preservice training were the concrete examples on behavioral issues, and 3 out of 12 (25%) reported that the module, "Challenging Behaviors" was the most helpful content of preservice training. Table A4 lists all the participants' answers as to the most helpful *content* of the Preservice training.

Table A4

Most Helpful Content of Preservice Training

| Item | # of instances |
|--|----------------|
| All of the preservice training | 3 |
| Concrete examples of behavioral issues | 3 |
| Module on challenging behaviors | 3 |
| Expect the unexpected as a foster provider | 2 |
| Module on child development | 2 |
| Personal stories of the trainers | 2 |
| Social circles activity | 1 |
| TFP assertiveness | 1 |
| Working with DHS | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of items in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

The top three suggestions for improvement for the content of the preservice training were: 6 out of 12 (50%) said they wanted more concrete examples of challenging behaviors and strategies for dealing with them, 5 out of 12 (42%) wanted a more realistic discussion on the effects of the trauma and "damage" that the foster children had suffered and how that manifests in their behavior (violence, threats, etc.), and 4 out of 12 (33%) wanted more personal stories from the trainers. Table A5 lists all the participants' answers as to the *requested content* of the Preservice training and/or suggestions for *improving the content* of the Preservice training.

Table A5

Requested Content of Preservice Training/Suggestions for Improvement

| | # of |
|--|-----------|
| Item | instances |
| More concrete examples of challenging behaviors and strategies for dealing with them | 6 |
| Realistically discuss the trauma/"damage" of the foster children and how that looks | 5 |
| (violence, threats, etc.) | |
| More personal stories from trainers | 4 |
| Realistically explain how difficult it is to be a TFP | 2 |
| More on working with/understanding bio families | 2 |
| More on grief and loss | 2 |
| More on the exact role of the TFP – being an educational surrogate, TFPs role in the | |
| therapeutic process, role in returning the kids to their bio families, where and when does | 2 |
| the TFP have some say, are they allowed to go to hearings. | |
| Choosing the right placement for you | 2 |
| Add in when to refer back to the training materials | 1 |
| Add in when to call the support line | 1 |
| Discussion autism | 1 |
| What to expect from DHS | 1 |
| Dealing with visits – from agency, bio family, DHS | 1 |
| Protecting against allegations – keep doors open, rule of three | 1 |
| Document everything | 1 |
| Discussion on where they can take the foster child without permission, if they can have a | 1 |
| friend spend the night, who needs to get a background check | 1 |
| How attachment and grief and loss affect everything | 1 |
| How to parent a child that is not yours | 1 |
| Nothing. They covered it well. | 1 |
| Confidentiality – dealing with social media, school pictures, photos, yearbooks, etc. | 1 |
| More on self care – taking respite | 1 |
| Discussion on all the different appointments – psychiatrist, therapist, skills trainer, case | |
| worker, case manager, CASA, bio family, medical, dental, school, etc. | 1 |
| TFPs will be held to a higher standard than bio families | 1 |
| What to do when you forget to give meds | 1 |
| Dealing with the trauma on the TFP's family when things go wrong | 1 |
| More info on MPD (multiple personality disorder) | 1 |
| It's really on the job training, so "expect the unexpected" | 1 |
| More specifics on the different programs | 1 |
| Make sure to explain that the programs are not 100% privately funded | 1 |
| Perspectives from other cultures | 1 |
| More info on DID (dissociative identity disorder) | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of items in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

Eleven out of 12 (92%) respondents said either that the delivery of the preservice training was effective or somewhat/mostly effective in engaging them, but it depended upon the trainer.

Table A6 lists all the participants' answers as to their feelings on the *delivery* of the Preservice training.

Table A6

Delivery of the Preservice Training

| Item | # of interviewees |
|---|-------------------|
| Felt engaged by the style and delivery of the presenters. | 7 |
| Depended on the trainer. Some engaged us, some read the slides, did not seem to | 4 |
| know the material, bored us. | • |
| Did not feel engaged. The presenter taught us like we were in fifth grade. | 1 |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

Eight of the 9 (89%) respondents who had taken some of the training with Don and Susan Sheets mentioned them by name and reported them as the main reason the delivery was so effective as there were two of them, they had many years of foster parent experience, and they were engaging. The top three suggestions for improvement of the *delivery* of the preservice training were: 5 out of 12 (42%) wanted more trainers and/or interaction with those who had been foster parents, 4 out of 12 (33%) wanted to see a foster youth panel, and 4 out of 12 (33%) wanted to have two trainers at once. Table A7 lists all the participants' answers as to suggestions for improving *delivery* of the Preservice training.

Table A7

Suggestions for Improvement of the Delivery of the Preservice Training

| Item | # of instances |
|--|----------------|
| More trainers and/or interaction with those who have been foster parents | 5 |
| Have a foster youth panel | 4 |
| Have two presenters at once | 4 |
| Don't just read the slides, less PowerPoint | 3 |
| Passionate, energetic trainers | 2 |
| Have people go around the room and learn more about their backgrounds and incorporate that information into your delivery style. | 2 |
| No suggestions. it is all good. | 1 |
| More respect for the knowledge of the people attending the training | 1 |
| Trainers who are experts | 1 |
| Show videos | 1 |
| Less rigid presenters – do not just follow the book. | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of items in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

Six out of 12 (50%) said either that the preservice training was effective or somewhat/mostly effective in preventing them from quitting as foster providers. Five out of 12 (33%) said that the preservice training was not connected to their choice to stay on as foster providers. Table A8 lists all the participants' answers as to the effectiveness of Preservice training in helping prevent them from quitting being foster parents.

Table A8

Effectiveness of Preservice Training in Helping to Prevent TFP Attrition

| Category: Effectiveness of the preservice training in helping to prevent TFP | |
|---|-------------------|
| attrition | # of interviewees |
| Preservice training contributed to preventing TFP attrition | 5 |
| Preservice training was somewhat/mostly effective in contributing to preventing TFP attrition | 1 |
| Preservice training was not effective in contributed to preventing TFP attrition | 1 |
| Didn't answer the question – their answer had nothing to do with preservice training | 1 |
| Didn't understand the question as the preservice training was not connected to their choice to stay as TFPs | 4 |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

The top three motivators to continue on as foster providers were: 7 out of 12 (58%) loved kids/fostering, 7 out of 12 (58%) were motivated by the reward of seeing the kids change, and 4 out of 12 (33%) felt compelled to give back to the community. Table A9 lists all the participants' answers as to their motivations to stay as foster parents.

Table A9

Motivation to Continue as a TFP

| Item | # of instances |
|---|----------------|
| Love kids/fostering | 7 |
| Rewards of seeing the kids change/making a positive influence on them | 7 |
| Want to give back to the community | 4 |
| TFP committed to fostering | 2 |
| Have a good team behind you | 1 |
| Have a good support system | 1 |
| Understand it will be difficult | 1 |
| Have good, continued training | 1 |

Note. Each interviewee had the opportunity to respond in an open ended manner, so there was no set number of items in the subcategory. However, the maximum number of instances for each invariant constituent could not exceed 12 as there were only 12 interviewees.

Seven out of 12 (58%) said that preservice training helped prevent them from asking a foster child to be moved out of their home. Eight out of 12 (67%) did not know or were not sure if their foster child had disrupted from another home before entering theirs. Table A10 lists all the participants' answers as to multiple moves of the foster children in their care.

Table A10

TFPs and Multiple Moves of the Foster Child (FC)

| Did preservice help prevent you from asking | # of FC placed in their home, full time and | # FC entering home after disrupting elsewhere | TFP asked for FC to be moved out of their home |
|---|---|---|--|
| FC to be moved | respite | disrupting elsewhere | moved out of their nome |
| No | 30–50 | Don't know | Yes |
| Yes | Don't know | Maybe | Yes |
| Maybe | 1 | 1 | Yes |
| Yes | 1 | 1 | Considering it |
| Yes | 15 | None | No |
| No | 30+ | Maybe | No |
| Yes | 15+ | Don't know | Yes |
| Yes | Lots | None | No |
| Yes | 2 | Maybe | No |
| Yes | 2 | Don't know | No |
| No | 20+ | Maybe | No |
| No | 40+ | Don't know | No |

Note. Each interviewee could only respond to each question once, so each column has a total of 12 answers.

Four out of 12 (33%) of the interviewees had asked for a foster child to be moved out of their home, while one was seriously considering it. Of these, the top reason for asking for a child to be moved were the physical aggression of the child and/or the foster child was uncontrollable and would not follow the rules. Table A11 lists all reasons a TFP asked for a foster child to be moved out of their home.

Table A11

Reasons TFP Asked Foster Child to Be Placed Elsewhere

| Item | # of instances |
|---|----------------|
| Physical aggression | 2 |
| Foster child's uncontrollable, would not follow rules | 2 |
| Foster child not a good fit, should not have come (respite) | 1 |
| Foster child's "psychotic break" | 1 |

Note. Each interviewee who responded, "yes" to having had a child moved had the opportunity to respond in an open ended manner, so there was no set number of items in this subcategory. However, the maximum number of instances for each invariant constituent could not exceed 4 as there were only 4 interviewees who responded in the affirmative.

Two questions did not fit into any category. The first question was if the participant had referred back to the training materials. Nine out of 12 (75%) had not referred back to the training

materials, be they the CD or the printed binder. Some said they just did not need to. Others had forgotten to go back and look.

Finally, 3 out of 5 (60%) who answered the question reported that they would be fine with having to fill out a questionnaire at the end of each day of training. The other two who answered the question were strongly against having a questionnaire of any kind as they said that put too much pressure on them.

Recommendations

The following recommendations are based on comments from the participants across five categories: content, delivery, attrition, multiples moves, and miscellaneous suggestions. It is important to remember that, for the most part, foster providers were satisfied with their training and felt it helped them in dealing with the behaviors of the children placed in their care. The following recommendations could only strengthen the training.

Content

Foster parent training often has a large component of behavioral management techniques for dealing with the behavior of the foster children (Macdonald & Turner, 2005; McNeil et al., 2005; Murray et al., 2010; Pithouse et al., 2002; Strijker et al., 2011). The TFPs interviewed reported that, although they felt the training was generally effective, they wanted more training on dealing with challenging behaviors. I recommend that each module of the preservice training add in a section entitled, "Challenging Behaviors" that includes a review of typical behaviors connected with that subject, concrete examples of what these behaviors could look like, and personal stories of an actual event and how it was resolved, making sure the stories and examples

include a sampling of the different programs and are inclusive of the different cultures of the foster providers (see the section below on Delivery for more concrete suggestions).

Pithouse, Hill–Tout, and Lowe (2002) conducted study in which they added additional training on behavioral management techniques for existing foster parents. Although the results indicated that the additional training did not have a measurable impact on how the foster parents dealt with their foster children's behaviors, the foster parents reported a high satisfaction level with the training and the majority said that they had begun to integrate these measures into their parenting (Pithouse et al., 2002). Some of the foster parents in the study also reported that, after the training, they were better able to look at the behaviors of individual children and recognize the underlying causes for them (Pithouse et al., 2002). Even if adding in a section for each module on challenging behaviors to the existing preservice training does not immediately translate into action, it could assist the new foster parents in seeing their foster children's behaviors as results of their trauma and not just willful misbehavior.

Additionally, it is important to provide a composite description of an actual foster child/youth, with history, behaviors, and interventions from each program. This should also be expanded to include concrete rules about confidentiality and social media, the sharing of photos, policies on photos in yearbooks, inclusion of the foster child on school email contact lists, etc. Include in this composite information on the role of the foster provider. This is touched on at Intro, but the suggestions were to expand it to be more concrete and specific, such as what does it mean to be an educational surrogate, the TFP role in the therapeutic process, the TFP role in returning the kids to their biological families, where and when does the TFP have some say, and the TFPs' rights and role in the permanency/court process. Foster providers who have a clarity as

to their role can experience less stress which can lead to improved satisfaction and lower attrition rates (Whenan et al., 2009).

Another recommendation would be to strengthen the section in the training entitled, "Culture, Family, and Community" that concerns the foster provider's own family and how fostering impacts them. Add in discussions on how to comfort kids who are not your own (especially when it would not be appropriate to hug) how to foster as a couple, how to discuss with your own family (your parents, siblings, young children and grown children) some of the issues that will come up and what they can expect when their loved one's become foster parents (Whenan et al., 2009).

Delivery

One recommendation is to have two trainers present for each training, especially one who has been or is currently a foster parent. This could be accomplished with having a foster provider panel, which would also facilitate more experienced foster providers meeting and providing support to newer foster providers, which is another method of helping trainees to contextualize what they are learning (Osmond, Scott, & Clark, 2008).

Part of improving the preservice training delivery and assisting with adult learning would be to create and implement a program to train the trainers on how to transfer their leaning so that TFPs can translate their knowledge into action (Murray et al., 2010; Osmond et al., 2008). The core content presented at preservice training is most useful if the trainer can facilitate the transfer of learning so that the TFP apply that knowledge to their own lives (Antle et al., 2009; Osmond et al., 2008). This would include adding in more exercises/scenarios for each module that allow the foster provider to work out solutions.

It is also important that the trainer recognizes and integrates the race and culture of the participants in order to enhance the learning transfer (Closson, 2013). Identify the racial and cultural demographics of the participants, design and implement a plan that helps ensure that the cultural perspectives of the participants are included the preservice training modules (content), and invite people from these different backgrounds and cultures to review and dialogue on how to improve the learning transfer (Closson, 2013; Coryell, 2013). Sun (2013) offers some suggestion for how to improve the learning transfer from Western educators to non–Western learners: greet them in their native tongue, show interest in their cultural perspectives, encourage them to speak about the differences, demonstrate patience with these differences, show support for their way of doing things, concretely connect their experiences to the content of what you are teaching, and really listen and authentically integrate their perspective when they speak. This is a process, but the first step is recognition that there is a need for an expanded cultural awareness and then an intentionality to include and embrace cultural diversity (2013).

Attrition

The TFPs interviewed had intrinsic motivations for not quitting, such as a strong desire to make a difference in the life of a child, which has been reported in other studies (Harden, D'Amour Meisch, Vick, & Pandohie–Johnson, 2008; Whenan et al., 2009). Training was a small contributing factor, but not the main reason they stayed. Foster parents who are intrinsically motivated, who have an understanding of the developmental stage of their foster child and adjust their expectations accordingly, and who are committed to the foster child have a greater quality of placement (Harden et al., 2008). I recommend creating a part of a training where the foster

providers review their motivations to become a foster prover, which might help them to continue fostering through the difficult times.

Multiple Moves

What was interesting here was not what the foster parents knew about the harmful effects of multiple moves on foster children or if they had asked for a child to be moved, but what they did not know. Eight of the 12 (67%) of the respondents did not know if their foster child had disrupted from another home before entering theirs. Foster children who have suffered multiple moves are known to have significantly greater behavioral issues than those who did not (Macdonald & Turner, 2005; Ward et al., 2009). I recommend that a slide be added to the "Challenging Behaviors" module that facilitates a discussion on the potential harm of multiple placements and that TFPs would better be able to understand and parent their foster children if they knew if they had experienced multiple moves. Additionally, it is important to add in some discussion about what to do if the TFP is struggling with a placement and how to best handle the situation.

Miscellaneous Suggestions

Two comments in particular did not fit in any category. The first recommendation is to try and have more people attend the Intro training module as some comments/suggestions for improvement were in areas that were covered in that module and nowhere else. The TFPs interviewed who did not attend that module commented that they had not realized that there were specialized requirements for the home (locked cabinets, beds with frames) and felt lost as to the steps after preservice training. This information was later covered by their certifiers, but sometimes that was weeks or months into the process, and the uncertainty caused them stress. This stress was detrimental to the success of the foster parent in the long term (Whenan et al., 2009).

Finally, one respondent said they wished they could go back and retake the preservice after they had had a few children placed as then they could relate so much better. This could also fill some of the need to have actual foster parents at the training.

Implementation

After creating a clear, concise policy recommendation paper, I emailed the three shareholders who originally gave me approval for the study. I gave a bullet pointed summary of the findings, presented the recommendations on those finding, then presented the findings in more detail in tables for the visual learner, and attached a synthesis of the answers to every question asked the participants (minus demographics. Additionally, I indicated to them that I would make myself available to discuss the findings and answer questions with the shareholders and with the preservice revision committee if they choose to do so.

Conclusion

The purpose of this study was to identify factors that influence the impact of training provided TFPs in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children. More research into the efficacy of preservice training needs to be done. However, the results of this study indicate that there is a positive correlation between preservice training and foster parents who are prepared for the challenges they will face after they have a child placed.

References

- Antle, B. F., Barbee, A. P., Sullivan, D. J., & Christensen, D. N. (2009). The effects of training reinforcement on training transfer in child welfare. *Child Welfare*, 88(3), 5–26. Retrieved from http://www.cwla.org/
- Barber, J. G., & Delfabbro, P. H. (2003). Placement stability and the psychosocial well–being of children in foster care. *Research on Social Work Practice*, *13*(4), 415–431. doi:10.1177/1049731503013004001
- Chamberlain, P., Price, J. M., Reid, J. B., Landsverk, J., Fisher, P. A., & Stoolmiller, M. (2006). Who disrupts from placement in foster and kinship care? *Child Abuse & Neglect*, *30*, 409–424. doi:10.1016/j.chiabu.2005.11.004
- Children and Family Research Center. (2004). *Multiple placements in foster care: Literature review of correlates and predictors* (p. 8). Urbana, IL: Children and Family Research Center, University of Illinois at Urbana–Champaign. Retrieved from http://cfrc.illinois.edu/pubs/lr_20040201_MultiplePlacementsInFosterCare.pdf
- Children and Family Research Center. (2011). *Placement stability and number of children in a foster home*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana—Champaign. Retrieved from http://cfrc.illinois.edu/pubs/bf_20120131_PlacementStabilityAndNumberOfChildrenInAFosterH ome.pdf
- Closson, R. (2013). Racial and cultural factors and learning transfer. *New Directions for Adult & Continuing Education*, 2013(137), 61–69. doi:10.1002/ace.20045

- Coryell, J. E. (2013). Collaborative, comparative inquiry and transformative cross–cultural adult learning and teaching: A Western educator metanarrative and inspiring a global vision. *Adult Education Quarterly*, 63(4), 299–320. doi:10.1177/0741713612471420
- Department of Human Services: Children, Adults, and Families Division. (2008). 2007 status of children in Oregon's child protective system (No. DHS 1535) (p. 52). Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/abusestats2007.pdf
- Department of Human Services: Children, Adults, and Families Division. (2009). 2008 status of children in Oregon's child protective system (No. DHS 1535) (p. 56). Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/abusestats2008.pdf
- Eggertsen, L. (2008). Primary factors related to multiple placements for children in out–of–home care. *Child Welfare*, 87(6), 71–90. Retrieved from https://www.questia.com/library/p435256/child–welfare
- Gibbs, D., & Wildfire, J. (2007). Length of service for foster parents: Using administrative data to understand retention. *Children and Youth Services Review*, *29*(5), 588–599. doi:10.1016/j.childyouth.2006.11.002
- Goodman, D., Bonk, K., Mattingly, J., Omang, J., & Monihan, K. (2008). *Recruitment, training, and support: The essential tools of foster care* (pp. 1–48). Anne E. Casey Foundation. Retrieved from http://www.aecf.org/upload/PublicationFiles/recruitment%20training%20and%20support.pdf
- Harden, B. J., D'Amour Meisch, A., Vick, J. E., & Pandohie–Johnson, L. (2008). Measuring parenting among foster families: The development of the Foster Parent Attitudes Questionnaire (FPAQ). *Children and Youth Services Review*, *30*(8), 879–892. doi:10.1016/j.childyouth.2007.12.015

- Hurlburt, M. S., Chamberlain, P., DeGarmo, D., Zhang, J., & Price, J. M. (2010). Advancing prediction of foster placement disruption using brief behavioral screening. *Child Abuse & Neglect*, *34*(12), 917–926. doi:10.1016/j.chiabu.2010.07.003
- James, S. (2004). Why do foster care placements disrupt? An investigation of reasons for placement change in foster care. *Social Service Review*, 78(4), 601–627. doi:10.1086/424546
- Macdonald, G., & Turner, W. (2005). An experiment in helping foster–carers manage challenging behaviour. *British Journal of Social Work*, *35*(8), 1265–1282. doi:10.1093/bjsw/bch204
- McNeil, C. B., Herschell, A. D., Gurwitch, R. H., & Clemens–Mowrer, L. (2005). Training foster parents in parent–child interaction therapy. *Education & Treatment of Children (ETC)*, 28(2), 182–196. Retrieved from http://www.educationandtreatmentofchildren.net/
- Murray, M., Southerland, D., Farmer, E., & Ballentine, K. (2010). Enhancing and adapting treatment foster care: Lessons learned in trying to change practice. *Journal of Child & Family Studies*, 19(4), 393–403. doi:10.1007/s10826–009–9310–x
- Office of Business Intelligence, Department of Human Services. (2012). 2011 child welfare data book (p. 41). Children, Adults and Families Division Office of Program, Performance and Reporting.

 Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/2011–cw–data–book.pdf
- Office of Business Intelligence, Department of Human Services. (2013). 2012 foster care data book (p. 13). Children, Adults and Families Division Office of Program, Performance and Reporting.

 Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/2012–cw-data-book.pdf
- Office of Business Intelligence, Department of Human Services. (2014). 2012 family services data book (p. 7). Retrieved from http://www.oregon.gov/dhs/abuse/docs/Family%20Services.pdf

- Oosterman, M., Schuengel, C., Slot, N. W., Bullens, R. A. R., & Doreleijers, T. A. H. (2007).

 Disruptions in foster care: A review and meta–analysis. *Science Direct Children and Youth Services Review*, *29*, 53–76. doi:10.1016/j.childyouth.2006.07.003
- Oregon Department of Human Services. (2015). 2014 child welfare data set: Number of placements for children in foster care (p. 1). Children, Adults and Families Division Office of Program,

 Performance and Reporting. Retrieved from

 https://rom.socwel.ku.edu/Oregon Public/Login.aspx?H=2088
- Oregon Department of Human Services: Children, Adults, and Families Division. (2010). 2009 child welfare data book. Retrieved from http://www.oregon.gov/dhs/abuse/publications/children/2009-cw-data-book.pdf?ga=t
- Oregon Department of Human Services: Children, Adults, and Families Division. (2011). 2010 child welfare data book. Children, Adults and Families Division Office of Program, Performance and Reporting. Retrieved from http://www.oregon.gov/DHS/abuse/publications/children/2010–cw–data–book.pdf?ga=t
- Oregon Department of Human Services: Children, Adults, and Families Division. (n.d.). CFSP for fiscal years 2010–2014. DHS. Retrieved from http://www.oregon.gov/DHS/children/publications/cfsp/cfsp-2010-2014.pdf
- Osmond, J., Scott, T., & Clark, J. (2008). The knowledge of caring: Revisiting the need for knowledge support of carers. *Child & Family Social Work*, *13*(3), 262–273. doi:10.1111/j.1365–2206.2008.00546.x

- Pithouse, A., Hill–Tout, J., & Lowe, K. (2002). Training foster carers in challenging behaviour: A case study in disappointment? *Child & Family Social Work*, 7(3), 203–214. doi:10.1046/j.1365–2206.2002.00249.x
- Strijker, J., Van Oijen, S., & Knot–Dickscheit, J. (2011). Assessment of problem behaviour by foster parents and their foster children. *Child & Family Social Work*, *16*(1), 93–100. doi:10.1111/j.1365–2206.2010.00717.x
- Sun, Q. (2013). Learning for transformation in a changing landscape. *Adult Learning*, *24*(3), 131–136. doi:10.1177/1045159513489116
- Ward, H., Courtney, M., Del Valle, J. F., McDermid, S., & Zeira, A. (2009). Improving outcomes for children and young people in care. *Vulnerable Children & Youth Studies*, 4(2), 101–106. doi:10.1080/17450120903013014
- Whenan, R., Oxlad, M., & Lushington, K. (2009). Factors associated with foster care well–being, satisfaction and intention to continue providing out–of–home care. *Children and Youth Services Review*, 31(7), 752–760. doi:10.1016/j.childyouth.2009.02.001

Script

Hello! My name is Mirae Grant and I am doctoral student at Walden University. I am working on my final project to complete my education. I was a TFP for three years, and a state foster parent for about five years. I went through the [AGENCY] preservice training myself. This is why I am so interested in this topic. I've done it and I know how hard it is.

Thank you for agreeing to this interview, which will take about 60 minutes and will include five sections regarding your perceptions of the [AGENCY] preservice training and its impact on you.

May I record this interview for accuracy and so that I do not distract you by taking notes? After the interview is transcribed, I will have you review it for accuracy. Then, I will keep the recording and paper copy in a locked filing cabinet and the electronic versions will be password protected, where only I can get in.

This study is voluntary. No one at any of the [AGENCIES] will treat you differently if you decide not to be in the study. In fact, none of these agencies will ever know if you participated in the study. All of your responses are confidential. Your responses will remain confidential and will be used to develop a better understanding of the effectiveness of preservice training in preparing you to be a therapeutic foster provider, both in content and delivery. The purpose of this study was to identify factors that influence the impact of training provided therapeutic foster parents (TFPs) in three areas: their preparedness for the behaviors of the foster children, foster parent attrition, and preventing multiple moves of the foster children.

Again, your participation in this interview is completely voluntary. If at any time you want to take a moment and stop, just let me know. You may also withdraw your participation at any time without consequence. Do you have any questions or concerns before we begin? Let's get started.

The focus of this interview is on the 16 hours of [AGENCY] preservice training that you attended prior to certification. Please limit your answers to this training as much as possible.

Section One: Demographics/Background

- 1. Do you have a single or dual parent home?
- 2. Are any other languages spoken in your home? Just yes or no please.
- 3. How long have you been a therapeutic foster parent?
- 4. When did you complete your [AGENCY] Preservice 16 hours of training?
- 5. Did you do full days of training or was in over a period of seven weeks? Which would you have preferred and why?
- 6. Was I one of your trainers?
- 7. Do you have any previous parenting experience? I am thinking more about you having experience parenting children who are living in your home.

- 8. Have you ever been a certified foster parent before?
 - 1) If so, where and when?
 - 2) Why did you stop?
 - 3) How did the [AGENCY] Preservice Training compare to their beginning training?

Section Two: [AGENCY] Preservice Training Content (information you learned): Try to think about the [AGENCY] preservice training you attended, not any ongoing or subsequent training.

- 9. Think back to the [AGENCY] preservice training. What information (content) was most helpful in preparing you for the challenges of having a foster child?
- 10. What information (content) would you have liked to have included that was not or expanded that was? Basically, what do you wish you had known about fostering?
- 11. Is there any information (content) that was not helpful? Why?
- 12. Do you have any suggestions to improve the content of the [AGENCY] preservice training?
- 13. Do you think that the [AGENCY] preservice training adequately prepared you for the behavioral challenges you have faced from the foster children place in your home? Why or why not?
- 14. Last year, the [AGENCY] switched from handing out the training manual in binder format to a CD format. Which did you receive?
- 15. Have you ever referred back to the materials handed out at the training? Why or why not?

Section Three: [AGENCY] Preservice Training Delivery (the presenter and how they taught, their teaching style):

- 16. Did the trainers use the PowerPoint on the overhead? If so, did you follow in the binder?
- 17. What did you think of the delivery of the [AGENCY] preservice training specifically the presenters' teaching style?
 - 1) Did vou feel engaged? If not, what could have been done to better engage you?
- 18. How would you feel if we handed out a questionnaire on each day and had you fill it out, sign it, and turn it in to us at the end of each day?
- 19. How do you think the delivery impacted your learning experience? How so?
- 20. What suggestions do you have for improving of the delivery of the [AGENCY] preservice training?

Section Four: Attrition (how long you stay as a foster parent):

- 21. Nationally, over 50% of foster parents quit in the first year. What keeps you motivated to be a foster parent?
- 22. Foster parenting is difficult. Have you ever seriously thought about resigning? If so, what stopped you? If not, what helps you to continue this work?
- 23. How effective was the [AGENCY] preservice training in giving you the skills to handle the pressures of being a TFP? Can you name some of the skills that helped you?

Section Five: Multiple Placements

- 24. How many foster children have been in your home, both full time and respite? Not exact number, a range is fine.
- 25. How often did a foster child come into your home after abruptly disrupting from another foster home?
- 26. Have you ever asked to have a foster child removed from your home?
 - 1) Has it happened more than once?
 - 2) If yes, why? What do you think happened?
 - 3) What could have helped you keep that child in the home (if anything)?
- 27. Do you think that the [AGENCY] preservice training had any impact preventing you from having a child moved?
- 28. In general, what was the most impactful part of the training what stands out in your memory?
- 29. In general, what was your least favorite part of the training?

Before we conclude this interview, is there anything else you would like to share? *If interviewee wishes to end the interview, ask them if they would be willing to tell you why. Thank you for your participation!

Appendix C: OAR 413–215–0316 Orientation for Foster Parents and Approved Provider Parents

A foster care agency (defined in OAR 413–215–0306) must comply with all of the following requirements:

- (1) The foster care agency must ensure that each parent who applies to operate a certified provider home (defined in OAR 413–215–0306) receives orientation training.
- (2) The orientation training required by section (1) of this rule must include, at a minimum, all of the following:
 - (a) The policies and procedures of the foster care agency.
 - (b) The needs and characteristics of children needing placement.
 - (c) Attachment, separation, and loss issues for children and families.
 - (d) The importance of cultural identity to the child and ways to foster this identity.
 - (e) The impact of foster care on the child and family.
 - (f) The rights and responsibilities of the foster parent (defined in OAR 413–215–0306) or approved provider parent (defined in OAR 413–215–0306) and the foster care agency.
 - (g) The resources available to the foster parent or approved provider parent.
 - (h) Legal responsibility to report suspected child abuse.
 - (i) Confidentiality.
 - (j) Rights of families and children.

(Department of Human Service, Child Welfare Programs: Division 215–Private Child Caring Agencies, 2013)

Appendix D: OAR 413–215–0326 Training for Parents in Certified Provider Homes

A foster care agency (defined in OAR 413–215–0306) must comply with all of the following requirements:

- (1) The foster care agency must have and follow a written training plan that:
 - (a) Provides each parent in a certified provider home (defined in OAR 413–215–0306) a minimum of 15 hours of training before the foster care agency places a child in the home.
 - (b) Provides each parent in a certified provider home a minimum of 15 hours of training annually prior to the issuance of the annual approval required by OAR 413–215–0331.
 - (c) The training plan must include all of the following topics:
 - (A) Characteristics and needs of children who may be placed with the family.
 - (B) Ways to effectively parent children who are placed by the foster care agency.
 - (C) Positive behavior management, nonpunitive discipline.
 - (D) The importance of the child's family and working with the child's family.
 - (E) Preparation of the child for independence based on the child's age, stage of development, and needs.
 - (F) Legal responsibility to report suspected child abuse.

(Oregon Department of Human Services: Children, Adults, and Families Division, 2008, p. 27)

Director Oregon

Date

Dear Mirae Grant:

Based on my review of your research proposal, I give permission for you to conduct the study entitled "<u>Therapeutic Foster Parents</u>" <u>Perspectives of the Efficacy of Preservice Training</u>" within (<u>AGENCY</u>). As part of this study, I authorize you to contact currently certified therapeutic foster providers who:

- Have had at least one nonmedically fragile child between the ages of 3 to 18 placed in their home for at least 30 days
- Attended the FFCN Preservice training

The following is an overview of the recruitment, data collection, member checking, and results dissemination activities of the study:

Prior to actual data collection, a field test of the Interview Guide will be performed to ensure that participants can understand correctly the questions. Five potential and consenting participants will be asked to be interviewed for this field test. Three will be professionals in the field: the director of Foster Care for (AGENCY), the director of Foster Care for (AGENCY), and finally, the director of (AGENCY). Two will be former foster providers. Of those two, one will have been a TFP and the other will have only worked through the state. None of these people will be questioned for the final study.

For each question, the participants for the pilot study will be asked to interpret the question in their own words and understanding. The actual and correct meaning of the statement will then be relayed to the participant in order to compare with their perceived meaning. They will also be asked if there are any phrases that need to be restated for clarity.

After the field test, the actual semistructured face to face interviews will be scheduled based on the preference and availability of the consenting participants. Each interview is expected to last for one hour; however, no time limit is given since the actual duration is highly dependent on the answers of each of the participants. The interviewer will meet in local public library.

The interview will then progress with the use of the Interview Guide. Each interview will be audio recorded with the permission of the participant as stated in the statement of informed consent. Audio recording will also make interviews easier to conduct for both the participant and researcher. After all the questions in the Interview Guide have been asked and discussed, each interview will end with the interviewer thanking the participant and informing them that they may be asked to review the transcripts of their interview to check for its accuracy (member checking).

Data analysis will be conducted using NVivo 10® by QSR qualitative analysis software which supports content analysis in qualitative studies. Analysis will start by using the transcripts of the interviews to categorize the information to identify patterns representing in the responses of the participants during the interviews. The second step involves the testing of individual expressions if: (a) it provides a necessary expression that is sufficient for understanding the meaning that the participant intended to convey, and (b) labeling the experience is possible. Expressions that do not satisfy the two criteria in the second step will result to elimination from further analysis. The invariant constituents will then be grouped to relay the core theme of the experience. Next, finalization of thematic categories will occur depending on the review of the interview transcripts. After that, verbatim examples of the transcribed interviews will be created to validate the invariant constituents and themes through the process of textural description. Finally, the textural/structural description will be presented to illustrate the essence of the experience and involve the invariant constituents and themes. After that, a peer debriefer will take a look to verify the findings.

Individuals' participation will be voluntary and at their own discretion.

We understand that our organization's responsibilities include: giving the researcher access to all current therapeutic foster providers. We reserve the right to withdraw from the study at any time if our circumstances change.

I confirm that I am authorized to approve research in this setting.

I understand that the data collected will remain entirely confidential and may not be provided to anyone outside of the research team without permission from the Walden University IRB.

Sincerely,

(AGENCY)

Appendix F: Confidentiality Agreement

Name of Signer: Mirae Grant

During the course of my activity in collecting data for this research: "Therapeutic Foster Parents' Perspectives of the Efficacy of Preservice Training" I will have access to information, which is confidential and should not be disclosed. I acknowledge that the information must remain confidential, and that improper disclosure of confidential information can be damaging to the participant.

By signing this Confidentiality Agreement, I acknowledge and agree that:

- 1. I will not disclose or discuss any confidential information with others, including friends or family.
- 2. I will not in any way divulge, copy, release, sell, loan, alter or destroy any confidential information except as properly authorized.
- 3. I will not discuss confidential information where others can overhear the conversation. I understand that it is not acceptable to discuss confidential information even if the participant's name is not used.
- 4. I will not make any unauthorized transmissions, inquiries, modification or purging of confidential information.
- 5. I agree that my obligations under this agreement will continue after termination of the job that I will perform.
- 6. I understand that violation of this agreement will have legal implications.
- 7. I will only access or use systems or devices I am officially authorized to access and I will not demonstrate the operation or function of systems or devices to unauthorized individuals.

Signing this document, I acknowledge that I have read the agreement and I agree to comply with all the terms and conditions stated above.

Signature:

Date:

TRAINING QUESTIONS

4. Preservice Training

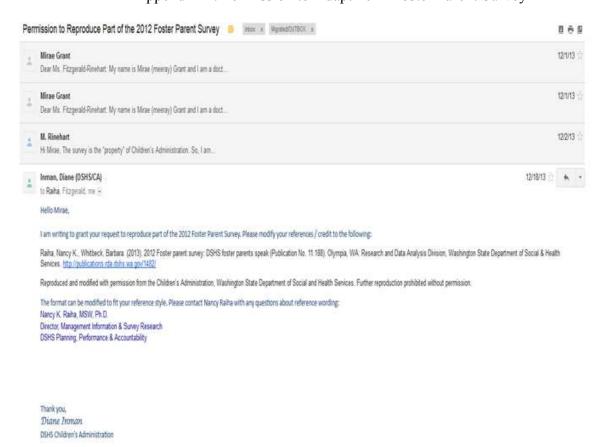
Thinking about only the 16 hours of preservice training you have had before you became a certified foster parent, how adequately has it prepared you to care for the needs of foster children placed in your home?

Response Options for Question 4:

- More than adequate
- Adequate
- Somewhat adequate
- Somewhat inadequate
- Very inadequate
- 5. Open ended Questions to Facilitate Strategic Planning for Training
 - C. What about foster parent training has been helpful?
 - D. How could foster parent training be improved?

University of Washington Alliance for Child Welfare Excellence. (2011). 2012 Foster parent survey: DSHS foster parents speak (No. 11.188). Olympia, WA: Washington State Department of Social & Health Services. Retrieved from "Reproduced and modified with the permission of Nancy K. Raha from the Children's Administration, Washington State Department of Social and Health Services. Further reproduction prohibited without permission

Appendix H: Permission to Adapt 2012 Foster Parent Survey



Appendix I: Field Notes and Reflective Journal Log

| Time & Date | 11:00 a.m. 2/05/2015 |
|-----------------------|--|
| Place: | Her office |
| Purpose: | Interview Review Questions: Field Test 1 |
| Participants Present: | Mirae Grant, SC |
| Setting: | Exit Interviewee Me |
| Setting Description: | We sat at her office in a large, cavernous room that had many dozens of cubicles. We sat next to each other. She had a bowling pin that was covered in diamond looking rhinestones that had a red star set in rhinestones in the middle next to her computer. There were boxes full of papers and flyers everywhere. She had personal photos behind her desk. It was a very small space. We sat next to each other, with our backs to the cubicle wall. I put the recorder between us. I did not know if it would record very well due to the loud murmur of people talking and printers printing, as well as the sound of jets overhead and the sound of the pounding of a heavy rain at the unseen window. |
| Notes/Reflections: | We sit at her desk at her work. It is a little noisy as this is a huge room with cubicles everywhere. I tell her that, although she signed and read the Informed Consent on her own, I am going to read it aloud to her again, just so I am clear that she understands. I read it aloud. She verbally agrees and nods her head to each section. Then I tell her that we are going to review the Interview Guide. I tell her that I do not want her to answer the questions, just listen to the questions and tell me what she thinks I mean. I read the script. She wanted to me add in how long it would take for them to member check. She felt it would be clear if I updated the purpose in paragraph four of the Script to read, "The purpose of this study is to improve the effectiveness of the preservice". |

Section One made sense and she only made one change – #4 change the first word "Did" to "Do'. Section Two she wanted to change the wording on question #2 to, "What information (content) would you have liked to have included that was not or expanded that was? Basically, what do you wish you had known about fostering?" #4 change to, "Do you have any suggestions to improve the content of the FFCN preservice training?" She had no changes to Section Three. Section Four: #1 change to "Nationally, over 50% of foster parents quit in the first year. What keeps you motivated to be a foster parent?" Section Five: Split question #2 into two parts that read: 2. How often did a foster child come into your home after abruptly disrupting from another foster home? 3. Have you ever asked to have a foster child removed from vour home? a. Has it happened more than once? b. If yes, why? What do you think happened? c. What could have helped you keep that child in the home (if anything)? Feelings: What I was surprised at how nervous and uncomfortable I was in reading the Informed Consent Form completely out loud. But I surprised you, what intrigued you, what felt it important that, though I had emailed it and they had disturbed you? signed it, I still felt it important to read it. I was surprised at how great her suggestions were and how much better she helped to make the questions. I really enjoyed this interview. Action Plan: What ✓ Add in the "20 minutes" to Time & Date it takes to member to do differently check. next interview. ✓ Update purpose in paragraph four of Script to read, "The purpose: of this study is to improve the effectiveness of the preservice..." ✓ Move the space at the beginning of the fifth paragraph (before "Again"). ✓ Section One: #4 change the first word "Did" to "Do'. ✓ Section Two: #2 – change wording: What information (content) would you have liked to have included that was

| | not or expanded that was? Basically, what do you wish you |
|---|---|
| | had known about fostering?" |
| | Section Two: #4 change to, "Do you have any suggestions |
| | to improve the content of the FFCN preservice training?" |
| · | Section Four: #1 change to "Nationally, over 50% of foster |
| | parents quit in the first year. What keeps you motivated to |
| | be a foster parent?" |
| · | Section Five: Split question #2 into two parts that read: |
| | 2. How often did a foster child come into your home after |
| | abruptly disrupting from another foster home? |
| | 3. Have you ever asked to have a foster child removed from |
| | your home? |
| | a. Has it happened more than once? |
| | b. If yes, why? What do you think happened? |
| | c. What could have helped you keep that child in the |
|] | home (if anything)? |

| Time & Date | Noon 2/05/2015 |
|-----------------------|--|
| Place: | His office |
| Purpose: | Interview Review Questions: Field Test 2 |
| Participants Present: | Mirae Grant, AM |
| Setting: | w i n d o w Me Me Door |
| Setting Description: | In his office. There ae papers on the desks. We sit diagonally towards each other. I put the recorder on the desk near me. There are files and papers in his office, but not much else. It looks like he is fairly new to this office. |
| Notes/Reflections: | Script: Explain more about what a doctoral program is (don't assume everyone will know). Define "content" and "attrition". Section One: Add question: Are any other languages spoken in your home? Section Two: No changes. |

| | Section Three: Add question: "Did the trainers use the PowerPoint on the overhead? If so, did you follow in the binder? Did you read the English or the Spanish? |
|---------------------|--|
| | Section Four: No changes. Section Five: No changes. |
| Feelings: What | He had some great suggestions for simplifying the questions for |
| surprised you, what | nonnative English speakers. He also added in some questions |
| intrigued you, what | that were asked in a culturally sensitive manner, especially if |
| disturbed you? | they are bilingual or not. He did not change as many as the first, |
| distuibed you! | so I feel that things are looking up. He also suggested that for |
| | ease of understanding to make continuous numbering of the |
| | questions, not numbering under each section. He suggested |
| | reading that name of each section aloud to show a transition. |
| | Fantastic feedback. |
| Action Plan: What | ✓ Update number of questions to make them continuous. |
| to do differently | ✓ Be sure to read the section headers each time for ease of |
| next interview. | understanding. |
| | ✓ Script: Explain more about what a doctoral program is |
| | (don't assume everyone will know). |
| | ✓ Script: Define "content" and "attrition" in a more simplified |
| | manner. |
| | ✓ Section One: Add question: Are any other languages spoken in your home? |
| | ✓ Section Three: Add question: "Did the trainers use the |
| | PowerPoint on the overhead? If so, did you follow in the |
| | binder? Did you read the English or the Spanish? |
| | ✓ |

| Time & Date | 9:00 a.m. 2/11/2015 |
|-----------------------|--|
| Place: | Her office |
| Purpose: | Interview Review Questions: Field Test 3 |
| Participants Present: | Mirae Grant, KO |

| Setting: | W i n d o w Me |
|---|---|
| | Door |
| Setting Description: | Her office. It is in small room with four other cubicles. It is fairly loud so I do not record. Her lunch is on the desk. I put my papers on top of papers on her desk. There are calendars and schedules, and the Foster Child Bill of Rights on her partitions. |
| Notes/Reflections: | Section One: Add in 7: Have you ever been a certified foster parent before? a. If so, where and when? b. Why did you stop? c. How did the FFCN Preservice Training compare to their beginning training? Section Two: No changes. Section Three: In the header, define teaching styles. Section Four: No changes. Section Five: Question 22: Add in a note about there being no fear of judgment or repercussions. Change it to read: Have you ever asked to have a foster child removed from your home? a. Has it happened more than once? |
| | b. If yes, why? What do you think happened? c. What could have helped you keep that child in the home (if anything)? |
| Feelings: What surprised you, what intrigued you, what disturbed you? | She is very thoughtful and spends time thinking through each question. Her suggestions are well thought out and precise. Wonderful feedback. Really great discussion. |
| Action Plan: What to do differently next interview. | ✓ Section One: Add in 7: Have you ever been a certified foster parent before?a. If so, where and when? |

| b. Why did you stop? |
|--|
| c. How did the FFCN Preservice Training compare to |
| their beginning training? |
| ✓ Section Three: In the header, define teaching styles to read |
| (the presenter and how they taught, their teaching style). |
| ✓ Section Five: Question 22: Add in a note about there being |
| no fear of judgment or repercussions. Change it to read: |
| Have you ever asked to have a foster child removed from |
| your home? |
| a. Has it happened more than once? |
| b. If yes, why? What do you think happened? |
| c. What could have helped you keep that child in the home |
| (if anything)? |
| ✓ Change first general question at the end (and number it 26) |
| to, "In general, what was the most impactful part of the |
| training – what stands out in your memory?" |
| ✓ Number second general question 27. |

| Time & Date | 11:30 a.m. 2/11/2015 |
|--|---|
| Place: | Her office |
| Purpose: | Interview Review Questions: Field Test 4 |
| Participants Present: | Mirae Grant, MB |
| Setting: | Me in do o w |
| Setting Description: Notes/Reflections: | Her cubicle. It is in the corner of a huge, cavernous room. It is really noisy, with jet planes flying overhead, so I did not record. We sat across from each other, with me almost sitting at someone else's desk. A family photo is on her desk, along with a poster with an inspirational message. Section One: Add in another question at the end, "Did you do full days of training or was in over a period of seven weeks? Which would you have preferred and why? |
| | |

| | Section Two: No changes. Section Three: Section Three: 16. Add bullet point reading, "Did you feel engaged? If not, what could have been done to better engage you?" Add in another question at the end Section Four: No changes. Section Five: 22: Remove note about there being no fear of judgment or repercussions. |
|---|---|
| Feelings: What surprised you, what intrigued you, what disturbed you? | What a great discussion! She really had an ear for the questions and had great feedback on how to do the interview to connect with people. |
| Action Plan: What to do differently next interview. | ✓ Section One: Add in another question at the end, "Did you do full days of training or was in over a period of seven weeks? Which would you have preferred and why ✓ Section Three: 16. Add bullet point reading, "Did you feel engaged? If not, what could have been done to better engage you?" |

| Time & Date | 10:00 a.m. 2/12/2015 |
|-----------------------|---|
| Place: | Her office |
| Purpose: | Interview Review Questions: Field Test 5 |
| Participants Present: | Mirae Grant, MF |
| Setting: | W i n d o w Interviewee Me Door |
| Setting Description: | Her office. It is decorated with many drawings from her granddaughter, books, plaques, and photos. She has obviously been in this office for some time. It is nicely decorated, feels professional yet personal. She is very welcoming. |
| Notes/Reflections: | Section One: No changes. |

| | Section Two: No changes. Section Three: In question 15. Misspelled "binder". Section Four: No changes. Section Five: No changes. |
|---|---|
| Feelings: What surprised you, what intrigued you, what disturbed you? | She has a wealth of knowledge. She was so open, so inviting. She carefully listened to each question and it was clear that the other four field tests of the Interview Questions had done their work as she only found a misspelled word. After this interview, I feel really prepared to go forward. I am interested to see how the two pretest interviews go: how will people interpret the questions? Will they flow? Will they be honest? We spend quite a bit of time discussing flow. |
| Action Plan: What to do differently next interview. | ✓ Section Three: Question 15. Misspelled "binder". |

| Time & Date | 10:00 a.m. 2/17/2015 |
|-----------------------|---|
| Place: | Conference Room |
| Purpose: | Pretest Interview 1 |
| Participants Present: | Mirae Grant, TB |
| Setting: | Whiteboard D O r W i n d o w Interviewee |
| Setting Description: | We met in a conference room on site. There was not even a clock on the wall. It was a very empty, blank space. No window. I put the recorder between us. The only other things in the room were a three line land line telephone on the table and a wastebasket by the door. The whiteboard had been erased, but you could still almost read what had been written there in black and red pens. |
| Notes/Reflections: | She was put off at first by the recorder. She seemed to relax after a few minutes. |

| | Interview transcribed. |
|---|--|
| Feelings: What surprised you, what intrigued you, what disturbed you? | She did the training ten years ago, so did not remember much about it. This made it rather difficult to see if the questions made sense as she answered based on other trainings that are not congruent with preservice. The interview took about 40 minutes – I expected it to be longer. She gave great feedback on the flow and I rearranged some of the questions in demographics based on this feedback. I realized that these pretest interviews were going to help me prepare to create a rapport, look at the flow, and practice with the equipment, but would not necessarily give me information as to the content of the questions. After some reflection I realized that was ok, that I would prefer to use someone who had suggestions as part of the main study. I learned that all the preparation that I had gone to really paid off here – I felt comfortable, had all the forms ready, had the recorder ready, knew the location, etc. |
| Action Plan: What | ✓ When scheduling the appointment, remind them (though it |
| to do differently | is written in the email) that the session will be recorded. |
| next interview. | |

| Time & Date | 5:00 p.m. 2/17/15 |
|------------------------------------|--|
| Place: | Over the Phone |
| Purpose: | Pretest Interview 2 |
| Participants Present: | Mirae Grant, JM |
| Setting: | |
| Setting Description: | She could not meet in person, so I interviewed her over the phone. It was a good connection. I recorded this on speaker phone. |
| Notes/Reflections: | I called her on her cell phone. I dialed *70 before the call do disable call waiting. I had purchased and tested the audio in advance. She was alone in her apartment and so was I, so there were not any distractions that way. She had already eaten dinner, so she was not eating or drinking while we were on the phone. |
| Feelings: What surprised you, what | I was surprised by how little she remembered of the training. She kept veering off topic and I had to keep bringing her back on track. And some of the questions seemed redundant because |

| intrigued you, what | she had already answered them organically during other |
|---------------------|---|
| disturbed you? | questions. She did not talk much. I wondered if the format – |
| | being on the phone – affected the interview and my ability to |
| | connect with her. |
| Action Plan: What | ✓ Don't staple the Interview Guide pages together – it makes a |
| to do differently | lot of noise on the recording and is difficult to hear through. |
| next interview. | ✓ Make sure that the chairs do not squeak – it is really |
| | distracting. Try and have them sit on a chair that does not |
| | roll or lean back. |

| Time & Date | 10:00 a.m. 3/04/2015 |
|--|---|
| | Office |
| Place: | |
| Purpose: | Interview 001 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Interviewee |
| Setting Description: | His office. He had boxes of clothes, toys, games, and school supplies all along the wall across from the door. His chair squeaked throughout the interview. It did not look like he had been in this office long as there was not much of a personal nature in there. He confirmed that. His wet, dripping umbrella was in a wastebasket by the door. We could hear people talking and walking up and down the hall throughout the interview. |
| Notes/Reflections: | I was afraid during the whole interview that it would not record well. His chair squeaked and he kept rolling back, away from the recorder. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | This interview went a little out of the bounds of just discussing preservice. However, this individual was from Latin America and had some really incredible suggestions on how to update the preserviced training to be more culturally sensitive to the Hispanic population. He was clear that just translating things into Spanish was not enough or even having someone bilingual speaking Spanish was not enough. He said if the trainer did not |

| | group up in another country of Hispanic origin, then he/she |
|-------------------|---|
| | would not be able to truly understand that perspective. |
| Action Plan: What | ✓ Try and put a table between us so that they will not roll |
| to do differently | back. |
| next interview. | ✓ Make sure the chair does not squeak before recording. |
| | ✓ Add a question about if I had been one of their trainers. |
| | ✓ Add a question about how they would have felt if we had |
| | added a questionnaire at the end, if/how that would have |
| | impacted their learning. |

| Time & Date | 12:30 p.m. 3/04/15 |
|---|---|
| Place: | Conference Room |
| Purpose: | Interview 002 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Window Interviewee Me Door |
| Setting Description: | This was a small, cutely decorated room set up to look like a kitchen table. There was a bowl of fruit and snacks and a vase of flowers on the table. Just really cute and homey. The room was a little noisy, but not too bad. |
| Notes/Reflections: | I hooked up a microphone to her as she was difficult to hear. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | She had some really great suggestions for improving content – specifically to go into more details and specific scenarios of what to do when a child decompensates. I was surprised that she did not use the 24 hours support number more. I had not even thought of that. She really liked having two trainers at one time. I was also surprised that she was so vehemently against adding in a questionnaire to test understanding. |
| Action Plan: What to do differently next interview. | ✓ Add a question on if they had called or used the 24 hours support line and if it was mentioned in training. ✓ If they do not bring up the food, then it was not a concern. Don't ask them specifically. It is not necessary. |

| Time & Date | 10:00 a.m. 3/09/2015 |
|---|--|
| Place: | Library |
| Purpose: | Interview 003 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Whiteboard O r Interviewee Me |
| Setting Description: | This was a small conference room in a huge, modern, gorgeous library. The room was large for the table and chairs. Everything seems new and well kept. The whiteboard was completely clean – no marks, no leftover tape, nothing. There was no window. When the door was closed, it was super quiet inside. |
| Notes/Reflections: | This was a GREAT location. So conducive to the interview atmosphere. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | This was a newly certified foster parent. I was surprised at how many of the stories he specifically remembered. I was surprised by him mentioning the need for more discussion on self care, since he was so new. As with the other interviews, Challenging Behaviors was his favorite training. He had quite a few really concrete scenarios to add to the training. |
| Action Plan: What to do differently next interview. | ✓ None |

| Time & Date | 11:30 a.m. 3/09/2015 |
|-----------------------|--------------------------|
| Place: | Library |
| Purpose: | Interview 004 |
| Participants Present: | Mirae Grant, Interviewee |

| Setting: | Whiteboard |
|---|--|
| | Interviewee Me |
| Setting Description: | This was a small conference room in a huge, modern, gorgeous library. The room was large for the table and chairs. Everything seems new and well kept. The whiteboard was completely clean – no marks, no leftover tape, nothing. There was no window. When the door was closed, it was super quiet inside. |
| Notes/Reflections: | I realized during this interview, after transcription, that I needed to tweak the question in Section One: #2: Are any other languages spoken in your home? Add in Just yes or no please as the other languages spoken might identify the family (there are more bilingual families besides just Spanish and English). Interview transcribed. She spoke very softly and with few words. This was the shortest interview so far as she did not expand her ideas. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | I was surprised at how quiet she was, how I could not really get her to engage much. She just is a woman of few words, so I had to accept that. However, she did have some excellent suggestions for improvement of the content and delivery – pointed, specific, and direct. |
| Action Plan: What to do differently next interview. | ✓ Section One: #2: Are any other languages spoken in your home? Add in Just yes or no please |

| Time & Date | 10:00 a.m. 3/14/2015 |
|-----------------------|--------------------------|
| Place: | Conference Room |
| Purpose: | Interview 005 |
| Participants Present: | Mirae Grant, Interviewee |

| Setting: | Me Interviewee |
|--|---|
| Setting Description: | This was a sparsely furnished conference room. There was nothing on the walls, not even a whiteboard or a clock on the wall. It was a very empty, blank space. I put the recorder between us. The only other things in the room were a three line land line telephone on the table and a wastebasket by the door. There was a window overlooking the street and the large shops that were across the street. The window would not open. It was a gloomy, grey day and the severity of the room made it even gloomier. I brought string cheese and cinnamon rolls to make the room more inviting. Since it was a Saturday, no one else was in the building and it was very quiet so we kept the door open. |
| Notes/Reflections: | Highly educated in this field. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | I was surprised when she said that, of all the many times she has had this training from different agencies, this was the first time that people who had actually been foster parents were the trainers. She felt strongly that this was critically important. I was intrigued when she said that we do not tell enough of the really hard parts, that she wanted really concrete stories because so many of the other interviewees said the exact same thing. I did not anticipate that. |
| Action Plan: What to do differently next interview. | ✓ None |

| Time & Date | Noon 3/12/2015 |
|-----------------------|--------------------------|
| Place: | Library |
| Purpose: | Interview 006 |
| Participants Present: | Mirae Grant, Interviewee |

| Setting: | Interviewee in do o w |
|---|--|
| Setting Description: | This was a conference room in a busy library. The library opened at noon, so we had to wait outside for everyone to go in. The room was a little stuffy. 15 minutes into the interview the lights turned off (they must have been motion sensor lights). The day was gorgeous through the window and the lights did not turn on again. It was remarkably quiet, and the furniture, though not new, was nice and the room looked really good. |
| Notes/Reflections: | Mental health professional. Extremely experienced. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | I was surprised by her saying that what she liked about the training was how it helped her wife, who does not have the experience she does. That intrigued me. I was impressed with how specific she was on how to improve the training. She also had an incredible suggestion to add a section about "challenging behaviors" to each module. |
| Action Plan: What to do differently next interview. | ✓ None |

| Time & Date | 1:15 p.m. 3/12/2015 |
|-----------------------|--------------------------|
| Place: | Library |
| Purpose: | Interview 007 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Interviewee www. |

| Setting Description: | This was a conference room in a busy library. The room was a |
|----------------------|--|
| | little stuffy. 15 minutes into the interview the lights turned off |
| | (they must have been motion sensor lights). The day was |
| | gorgeous through the window and the lights did not turn on |
| | again. It was remarkably quiet, and the furniture, though not |
| | new, was nice and the room looked really good. We were |
| | interrupted once by someone wanting to use the room, but I had |
| | scheduled it until 4, so I got that sorted out fairly quickly. |
| Notes/Reflections: | The interview was scheduled to begin at 1:15, but he could not |
| | find the location. By the time he arrived at 1:30 or so, he was |
| | frustrated and said that I gave terrible directions. I apologized |
| | and agreed with him. |
| Feelings: What | I was surprised at his generalized anger at the agency. He had a |
| surprised you, what | difficult time answering the asked questions – he seemed to |
| intrigued you, what | have an agenda about what he wanted to talk about, and it was |
| disturbed you? | not the preservice training. He had done his training so long ago |
| | he did not really remember it. I am not sure how useful this |
| | interview will be. |
| Action Plan: What | ✓ Give better directions. If they are not sure where it is, be |
| to do differently | sure to let them know how bad you are giving directions. |
| next interview. | ✓ Before scheduling the interview, make sure they remember |
| | some of it. |

| T' 0 D 4 | N 2/14/2015 |
|-----------------------|---|
| Time & Date | Noon 3/14/2015 |
| Place: | Conference Room |
| Purpose: | Interview 008 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Door Interviewee |
| Setting Description: | This was a sparsely furnished conference room. There was nothing on the walls, not even a whiteboard or a clock on the wall. It was a very empty, blank space. I put the recorder between us. The only other things in the room were a three line land line telephone on the table and a wastebasket by the door. |

| | There was a window overlooking the street and the large shops |
|---------------------|--|
| | that were across the street. The window would not open. It was |
| | a gloomy, grey day and the severity of the room made it even |
| | gloomier. I brought string cheese and cinnamon rolls to make |
| | the room more inviting. Since it was a Saturday, no one else |
| | was in the building and it was very quiet so we kept the door |
| | open. |
| Notes/Reflections: | She was a wonderful person, but not verbose at all. Her very |
| | presence was calm and serene. |
| Feelings: What | Again, she brought up to teach more about behavior challenges. |
| surprised you, what | That is a theme emerging, for sure. Another theme that is |
| intrigued you, what | emerging is how much they liked having trainers who had been |
| disturbed you? | foster parents before. I was surprised by how her answers were |
| | all positive as she has been a foster parent for a long time and |
| | has seen so much. But it would fit with her calm personality. |
| Action Plan: What | ✓ Is there anything I could do to make someone talk more |
| to do differently | when they just do not like to talk? |
| next interview. | |

| Time & Date | 1:30 p.m. 3/14/2015 |
|-----------------------|---|
| Place: | Conference Room |
| Purpose: | Interview 009 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Me Interviewee |
| G 41. D . 1. | |
| Setting Description: | This was a sparsely furnished conference room. There was nothing on the walls, not even a whiteboard or a clock on the wall. It was a very empty, blank space. I put the recorder between us. The only other things in the room were a three line land line telephone on the table and a wastebasket by the door. There was a window overlooking the street and the large shops that were across the street. The window would not open. It was a gloomy, grey day and the severity of the room made it even |

| | gloomier. I brought string cheese and cinnamon rolls to make the room more inviting. Since it was a Saturday, no one else was in the building and it was very quiet so we kept the door |
|---------------------|---|
| | open. |
| Notes/Reflections: | On time. Very open. He was so engaging it was difficult not to |
| | just get caught up in having a great conversation with him. |
| Feelings: What | I was really surprised at how much information he missed by |
| surprised you, what | not attending Intro night. That is not a requirement, but all the |
| intrigued you, what | information he wished had been included had been covered in |
| disturbed you? | Intro. He remembered me training one of the modules, but his |
| | memory of my story was incorrect. That was interesting. |
| Action Plan: What | ✓ Remember to keep my comments to a minimum, no matter |
| to do differently | how interesting the interviewee. |
| next interview. | |

| Time & Date | 1:00 p.m. 3/17/2015 |
|---|--|
| Place: | Conference Room |
| Purpose: | Interview 010 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | Window |
| | Interviewee Me Door |
| Setting Description: | This was a small, cutely decorated room set up to look like a kitchen table. There was a bowl of fruit and snacks and a vase of flowers on the table. Just really cute and homey. |
| Notes/Reflections: | What an amazing interviewee. She had so much energy, so much to say. She was quite something. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | I was surprised that she kept on fostering after one of the kids had injured her. I was intrigued by her interpretation of the chaos of the bio families' lives. Again, missing Intro made a difference – she missed some critical information about how therapeutic care is funded, which is covered in Intro. I was also intrigued that so many of the respondents went back to read the book if it was printed, not in electronic form. |

| Action Plan: What to do differently | ✓ | At a certain point, you just have to end the interview. Decide on which point that is. |
|-------------------------------------|----------|--|
| next interview. | ✓ | Make sure and remind them that this is a recorded conversation so it will not read like a book. She was rather disturbed by the way it read. |

| Time & Date | 1:00 p.m. 3/29/2015 |
|---|--|
| Place: | Phone Interview |
| Purpose: | Interview 011 |
| Participants Present: | Mirae Grant, Interviewee |
| Setting: | |
| Setting Description: | This was my first recorded phone interview. |
| Notes/Reflections: | I had tested the recording system several times with different |
| | people on different phones to see if this would record. This interview recorded well. |
| Feelings: What surprised you, what intrigued you, what disturbed you? | I was afraid that I would not be able to connect as well over the phone, but that was not the case. This interview would not have been possible if we had to meet in person. I was surprised at his keen insight. I was intrigued by how he needed clarification on some of the questions because of the language barrier, but when he understood the questions, his answers were on par with other interviews. For this interview, I finally just skipped the actual questions that he had already inadvertently answered instead of having him try and say it again. |
| Action Plan: What | ✓ Nothing – it worked really well. |
| to do differently | |
| next interview. | |

| Time & Date | 4:00 p.m. 3/29/2015 |
|-----------------------|--------------------------|
| Place: | Phone Interview |
| Purpose: | Interview 012 |
| Participants Present: | Mirae Grant, Interviewee |

| Setting: | |
|---|---|
| Setting Description: | Phone interview. |
| Notes/Reflections: | There were major technical difficulties during this interview. At first the connection was bad, then the special phone recording equipment did not work. So, after section one, I switched to my backup recording plan – speaker phone next to the recording device. Thank goodness that I had a backup plan or this interview would not have been recorded. It is not the greatest quality of interview, but it will work. I wrote in the answers to section one (demographics) and will have him member check it for accuracy. I told him it would not be verbatim and he was fine with that. |
| Feelings: What | The only new bits of information that were new in this interview were when he discussed the delivery of the training |
| surprised you, what intrigued you, what | interview were when he discussed the delivery of the training. He said that because the trainers were always open for any |
| disturbed you? | questions, he felt validated as a participant. He also said that he liked it best when there were two trainers there, that he felt he learned more and the information was richer when they played off of each other. |
| Action Plan: What | ✓ Try not to do any more phone interviews, if I can avoid it. |
| to do differently next interview. | But I only got this and the last interview because of the phone. |