Spring 2011

The foster parent experience of attachment

Taylor Cohen

University of New Hampshire, Durham

Follow this and additional works at: https://scholars.unh.edu/thesis

Recommended Citation

https://scholars.unh.edu/thesis/627

This Thesis is brought to you for free and open access by the Student Scholarship at University of New Hampshire Scholars' Repository. It has been accepted for inclusion in Master's Theses and Capstones by an authorized administrator of University of New Hampshire Scholars' Repository. For more information, please contact nicole.hentz@unh.edu.
The foster parent experience of attachment

Abstract
This study explores the attachment experience of foster parents. The researcher used a qualitative research framework to explore what 10 foster parents experienced in regards to attachment with their foster children. Based on the data and content analysis, a foster parent ecology emerged showing that the foster parent/child attachment relationship is affected by doctors, therapists, social workers, case workers, other foster parents, and the biological parents. The temporary nature of foster care and the goal of reunification of child to biological parent also affected the attachment relationship between foster parent and foster child.

Keywords
Social Work, Sociology, Theory and Methods, Sociology, Individual and Family Studies
THE FOSTER PARENT EXPERIENCE OF ATTACHMENT

BY

TAYLOR COHEN

Bachelor of Arts, Communication, Florida Gulf Coast University, 2009

THESIS

Submitted to the University of New Hampshire

in Partial Fulfillment of

the Requirements for the Degree of

Master of Science

In

Family Studies

May 2011
This thesis has been examined and approved.

Thesis Director, Dr. Malcolm Smith, Associate Professor, Family Studies

Dr. Michael Kalinowski, Associate Professor, Family Studies

Jack Lightfoot, Director of Advocacy, Child and Family Services
ACKNOWLEDGEMENTS

I would like to thank several people who have helped me through the thesis process. First, I would like to thank my thesis committee for their time, advice, and patience during this project. My advisor, Dr. Malcolm Smith helped me every step of the way and gave advice and support that helped me through every part of the process. Both Dr. Malcolm Smith and Dr. Michael Kalinowski pushed me to do my best work and I am thankful for that. I would also like to thank Jack Lightfoot for his work done with foster care and for agreeing to be on my committee.

I also would like to thank Jen Guillmette, the director of the New Hampshire Foster and Adoptive Parent Association, who helped me find my sample for this study. Thank you also to all the foster parents who participated in this study. Thank you for taking the time to sit and talk with me about your experiences. You all are amazing people who are helping the lives of a vulnerable population and I commend you for everything you do.

Thank you also to my family and friends. Your support has been wonderful. Thank you for believing in me and pushing me to do my best.
ABSTRACT

THE FOSTER PARENT EXPERIENCE OF ATTACHMENT

by

Taylor Cohen

University of New Hampshire, May, 2011

This study explores the attachment experience of foster parents. The researcher used a qualitative research framework to explore what 10 foster parents experienced in regards to attachment with their foster children. Based on the data and content analysis, a foster parent ecology emerged showing that the foster parent/child attachment relationship is affected by doctors, therapists, social workers, case workers, other foster parents, and the biological parents. The temporary nature of foster care and the goal of reunification of child to biological parent also affected the attachment relationship between foster parent and foster child.
TABLE OF CONTENTS

ACKNOWLEDGEMENTS ........................................................................ iv
ABSTRACT ...................................................................................... v

CHAPTER PAGE

INTRODUCTION ........................................................................... 1
 The Foster Care System ................................................................. 1
 Federal Laws and Policies ............................................................ 4
 New Hampshire Statutes ............................................................... 6
 Foster Parents ............................................................................ 8
 This Study .................................................................................. 10

CHAPTER I: REVIEW OF THE LITERATURE ................................... 11
 Risk Factors and Protective Factors of the Foster Care System .... 11
 Attachment Theory ..................................................................... 13
 Attachment Theory and Foster Care ............................................ 16
 Reactive Attachment Disorder ...................................................... 18
 Attachment and Age .................................................................. 21
 Attachment Theory and the Current Study ................................. 23

CHAPTER II: METHODOLOGY ......................................................... 25
 Sample Selection ........................................................................ 25
 Research Design ......................................................................... 26
 Validity ...................................................................................... 29
CHAPTER III: RESULTS

The Sample
Content Analysis
Validity Testing and Member-Checking
The Themes
Support
What do Foster Parents Want in Regards to Support?
The Network
Age
Gender
Previous Experiences
Creating/Maintaining the Relationship
The Language of Attachment
Barriers to Attachment
Other Themes
Other Kids in the Family
APPENDIX B: INTERVIEW QUESTIONNAIRE

APPENDIX C: IRB APPROVAL
INTRODUCTION

The purpose of the present study is to examine the foster parent experience of attachment. In order to understand the foster parent experience, it is important to understand the history of the foster care system in the United States and in New Hampshire, the laws and statutes that affect the foster parents, and the role foster parents play in the foster care system.

The Foster Care System

According to the Department of Health and Human Services (2010), foster care is the network where children are placed when they are taken from their homes due to abuse or neglect. During the 19th Century, removing children from parents who were living in poverty was considered the best approach to child protection and society protection from children who would not grow up with correct attitudes and behaviors. “The intention was to remove the children from the harmful influences of poverty, including the parents” (Abrams & Ramsey, 2010, p. 435).

In 1853, Charles Loring Brace, a minister from the New York Children’s Aid Society, was concerned about immigrant children sleeping in the streets (National Foster Parent Association, 2011). He began advertising in the South and the West for families who were willing to provide homes for these children. As a result of this project, social agencies and even state governments began doing the same. Massachusetts, Pennsylvania, and South Dakota were the first states to lead the movement of foster care.
Massachusetts began paying families who took children in when they were too young to be indentured. Pennsylvania passed the first licensing law in 1885, which made it a misdemeanor for anyone to care for more than two unrelated children without a license. In 1893, South Dakota began providing subsidies to the Children's Home Society for their work and care with children. At the turn of the 19th century, social agencies began to formally supervise foster parents, keep records of foster parents and foster children, take into consideration the individual needs of children, and the federal government began supporting state inspections of foster homes. Services were beginning to be provided to biological parents so the child could be reunified and foster parents were now seen as a part of the team working to find a permanent plan for children in the system (National Foster Parent Association, 2011).

The focus of foster care was not only to protect the children but to also rehabilitate the parents. In the 1970's, the states became more focused on the removal of children again, so Congress passed the Adoption Assistance and Child Welfare Act of 1980. This act pressured states to shift back to an anti-removal policy. Abrams and Ramsey (2010) state, “Removal from the home was considered less desirable because of concerns about family integrity and the harm that removal and extended foster care placement can cause children” (p. 436). Then, in 1997, the Adoption and Safe Families Act was passed. This act, made removal easier and expedited termination of parental rights (Abrams & Ramsey, 2010).

If the biological parents are deemed unfit by the local courts, their parental rights are terminated. According to law, parents can be deemed unfit if they continue to abuse
and/or neglect their child and refuse services offered to them. In New Hampshire, the Department of Children, Youth, and Families (DCYF) investigates cases of child abuse and neglect. If the assessment shows that a child’s safety is at risk, DCYF petitions the court to have the child removed and placed either in foster care or with a family member (New Hampshire Department of Health and Human Services, 2010). There are several types of foster care settings: foster family homes, group homes, institutions, pre-adoptive homes, and supervised independent living (Adoption and Foster Care Analysis and Reporting System [AFCARS], 2009). According to the Adoption and Foster Care Analysis and Reporting System (AFCARS) (2009), 24% of foster children in the system across the nation were placed with foster family homes where the foster parent was related to them and 47% of foster children in the system were placed with foster family homes where the foster parent was not related to them. AFCARS (2009) also reports that 10% of foster children were placed in an institution.

The United States foster care system served 588,000 children in 2010 and the New Hampshire foster care system serves 900 children in a given year (New Hampshire Department of Health and Human Services, 2010). The goal of foster care is reunification. Therefore, the state’s goal for children that enter the system is to have children reunite with their biological family. If the state determines that reunification is not possible, then the goal becomes adoption. The average time a child spends in the foster care system is two years, although it is recognized that this process can damage a child (AFCARS, 2010).
Federal Laws and Policies

One federal law that affects foster parents is the Adoption and Safe Families Act, Amendment IV-E, passed in 1997 (Child Welfare Information Gateway, 2009a). This federal regulation allows states to perform criminal background checks on prospective foster parents and adoptive parents before they may be approved to have a child placed in their home (Child Welfare Information Gateway, 2009a). Prospective foster parents can be denied approval if they have ever been convicted of felony child abuse or neglect, spousal abuse, a crime against children, or a crime involving violence including rape, sexual assault, or homicide (Child Welfare Information Gateway, 2009a). They can also be denied approval if they have been convicted of a felony for physical assault, battery, or a drug-related offense within the past five years (Child Welfare Information Gateway, 2009a).

Another way the Adoption and Safe Families Act of 1997 affects the foster care system is requiring the State to make reasonable efforts to keep the child with their natural or biological family. Most foster children are in the system because they were abused and/or neglected by their parents (Doyle, 2007; Department of Health and Human Services, 2010). “Under the Adoption and Safe Families Act of 1997 (ASFA), while reasonable efforts to preserve and reunify families are still required, the child’s health and safety constitute the paramount concern in determining the extent to which reasonable efforts should be made” (Child Welfare Information Gateway, 2009b, p. 2). According to
this statute, DCYF needs to make sure they provide services to the biological family such as therapy and treatment in order for the child to be reunified with them.

There are times when reasonable efforts are not required. The Child Protection Act § 169-C:24a (2005) states that the state agency can discontinue reasonable efforts and file for a petition for termination of parental rights when one or more of the following circumstances exist: a) the child has been in an out-of-home placement due to a finding of child neglect or abuse for 12 of the most recent 22 months; b) the court has determined that the child has been abandoned; c) the parent has been convicted of murder of another child of the parent, sibling, or stepsibling of the child, the child’s other parent, or other persons related by consanguinity or affinity, including a minor child who resided with the defendant; d) the parent has been convicted of manslaughter of another child of the parent; e) the parent has been convicted of attempt, solicitation, or conspiracy to commit any of the offenses specified above; and f) the parent has been convicted of a felony assault that resulted in an injury to the child, a sibling or stepsibling of the child, the child’s other parent, or other persons related by consanguinity or affinity, including a minor child who resided with the defendant (Child Protection Act § 169-C:24-a, 2005).

Once a child is placed in foster care, the biological parents have twelve months to fulfill their treatment plan whether it is for substance abuse treatment and rehabilitation, parenting classes, or therapy sessions (Child Welfare Information Gateway, 2009c). At the one year mark, there is a permanency hearing where a judge decides if the child is going to be placed with their biological parents or if another permanency plan needs to be made.
Another law that impacts foster care is the Child Abuse Prevention and Treatment Act (CAPTA) of 2003. People who were interested in becoming foster parents had to undergo a criminal background check before they could be licensed as foster parents. Now, CAPTA requires a criminal background check on all adults living in the home of a prospective foster parent (Child Welfare Information Gateway, 2009).

The most recent legislation affecting the foster care population is the Fostering Connections to Success an Increasing Adoptions Act of 2008. This act increases support for kinship care, increases supports for older foster youth, seeks to ensure positive educational and health care outcomes for foster children, and increases support for adoption (Abrams & Ramsey, 2008).

Along with the federal laws mentioned above, New Hampshire laws and statutes also affect the foster care system.

New Hampshire Statutes

There are several New Hampshire statutes that affect the foster care system. The first New Hampshire statute that affects foster care is in regards to foster parents. The New Hampshire statute entitled License Required: Prohibition Against Child Endangerment, RSA § 170-E:27 (1991) states, “No person shall establish, maintain, operate, or conduct any agency for child care or for child-placing without a license or permit issued by the department under his subdivision.” In order for someone to become licensed as a foster parent, there is a specific checklist that must be ticked. For example,
there are a specific number of hours of training for foster parents to fulfill in order to keep their license. This is discussed further in the chapter.

There are also statutes that affect what is happening to the child. The Child’s Welfare and Findings Regarding Removal, RSA § 169-C:6-b (2008) states:

The court shall within 60 days of a child’s removal from the home, determine and issue written findings as to whether reasonable efforts were made or were not required to prevent the child’s removal. In determining whether reasonable efforts were made to prevent the child’s removal, the court shall consider whether services to the family have been accessible, available, and appropriate.

This is an interesting statute because foster parents are with the children for those sixty days. Another kind of hearing does take place once a child is taken from their home. This is a permanency hearing, where the judge, guardian ad litem, and child welfare services determine the plan for the child; will they be returned to their biological parents or stay in foster care and be adopted? Permanency Hearings, RSA § 169-C:24-b (2008) states that a child who has been in an out-of-home placement such as foster care, for twelve or more months, the court will hold a permanency hearing to figure out when the child will be returned to their biological parents or if a different permanency plan must be composed. According to this statute, there are three other kinds of permanency plans: termination of parental rights or parental surrender when an adoption is contemplated, guardianship with a fit and willing relative or party, or a different planned permanent living arrangement.
In order for a child to be returned to their biological parents in a case of child abuse and/or neglect, the parents must demonstrate to the court three things, according to the Standard for Return of Child in Placement, RSA § 169-C:23 (2000): they are in compliance with the dispositional order, the child will not be endangered when they return home, and the return of the child is in their best interests.

**Foster Parents**

Foster parents are an integral part of the foster care system. “Agencies tended to focus on the temporary nature of foster care, with little emphasis on the role that foster parents and relatives could play as members of a team committed to the safety, well-being, and permanence of children” (Abrams & Ramsey, 2010, p. 441). However, more currently, foster parents are becoming more visible in the process of foster care. They are being given more responsibilities than just caring and nurturing children. They are expected to advocate for children, mentor birth parents, and provide social workers, lawyers, and judges, with information about the well-being and permanency of their foster children (Abrams & Ramsey, 2010). Current research (See Chapter 1), suggests there still needs to be more focus on foster parents.

According to the New Hampshire Foster and Adoptive Parent Association (2011), in order to become a foster parent, one has to complete a home study, a 21-hour course called Foster and Adoptive Care Essentials, a criminal records check as mentioned above, a Central Registry check, a Home Fire inspection, a Home Health inspection, Medical Information Forms for everyone in the prospective foster home, and a second
Home Study. Training for foster parents is provided by the Granite State College Education and Training Partnership.

Foster parents play an integral role in the foster care system because they are the people caring for the children who are removed from their homes due to abuse and neglect. The New Hampshire Department of Health and Human Services’ webpage about becoming a foster parent states:

Foster parents are asked to provide a safe, stable, temporary, and caring atmosphere for a child placed in their home. Foster parents become part of a team effort to support the child and implement the plans made for the child. This will involve working with biological parents, courts, DCYF, and other involved agencies.

In New Hampshire, any resident over the age of 21 can apply to become a licensed foster parent (Department of Health and Human Services, 2010a). There are different requirements for foster parent licenses depending on the type of foster parent. General foster care, for example, requires the Foster and Adoptive Care Essentials (FACES) training which is 21 hours, whereas the Emergency foster care license requires extra hours of training.

Foster parents receive a monthly reimbursement for board and care of their foster child. This monthly reimbursement goes towards the costs of food and clothing as well as other costs due to caring for the child. The amount varies because it is based on the age of
the foster child and the needs of that foster child (Department of Health and Human Services, 2010b).

This Study

The present study examined the experience of foster parents in New Hampshire. Specifically, this study analyzed foster parents' experience of attachment to their foster child. Attachment, for the purposes of this study is defined as the social bond between foster parent and child (Ryan, Testa, & Zhai, 2008). Attachment is going to be discussed more thoroughly in the next chapter. Before examining attachment, the experience of foster children and foster parents is going to be discussed.
CHAPTER I: REVIEW OF THE LITERATURE

Recent research indicates that children in the foster care system have an increased likelihood of mental health problems, delinquency, and behavior problems than children who are not in the foster care system. These issues have contributed to increased risk factors in the foster care system (Pecora et al., 2010).

Risk Factors and Protective Factors of the Foster Care System

Risk factors are variables that increase the probability of a negative outcome for individuals or groups. On the other hand, protective factors are variables that can help decrease that probability of a negative outcome and buffer the individual from the impact of a stressful experience or condition (Bengston, et al., 2005).

For children in foster care, risk factors often include instability in their family life, criminal justice problems of their biological parents, frequent placement changes, and experienced abuse and neglect. Protective factors, on the other hand, include stability and predictability of the child’s environment, and adult and social supports (Pecora, et al., 2010).

A protective factor that has been associated with positive outcomes from the foster care system is secure attachment (Morrissey, 2009; Lindhiem & Dozier, 2007; Buehler, Rhodes, Orme, & Cuddeback, 2006). Attachment, for the purposes of this study,
is defined as the social connection between foster youth and foster parents (Ryan, Testa, & Zhai, 2008). Attachment and attachment theory will be discussed in more detail later in this chapter.

Since children often linger in the system before they are reunified with their biological families or adopted, these children also go through multiple placements. The average number of placements a child in foster care in the United States experiences is three (Doyle, 2007).

Current research indicates that multiple placements adversely affect foster care children (Ryan et al., 2008; Buehler et al., 2006; Bruskas, 2008; Schwartz, 2008). These detrimental effects can include: mental health problems, weak attachments, and juvenile delinquency (Ryan et al., 2008).

To offset these negative effects, it has been found that one of the most important protective factors for foster children is the experience of forming attachments because attachment formation is a predictor of healthy psychological development (Ryan et al., 2008). Unfortunately, for children in the system, forming attachments can be hard.

According to Morrissey (2009), who conducted a study on multiple child care arrangements:

From a child’s perspective, changing classrooms, caregivers, or peer groups within a single setting, as well as moving among different care settings (e.g., a center and family child-care home) may be stressful experiences, particularly if
these settings differ in structure, rules, peer groups, caregiving attitudes and practices, and behavioral expectations. (p. 60)

Due to the high number of placement movements, or placement instability, most foster children become unable to form long-lasting attachments (Golding, 2008). Healthy attachments and the networks that attachment creates can be a powerful source of emotional protection for foster children, a population that already has many risk factors. According to Perry (2006), who conducted a study on the psychological outcomes of adolescents in foster care who lose access to their network ties, “The majority of youth in foster care have at least three distinct network domains (the biological family, foster care, and peer networks) from which they draw health-protective resources like instrumental and emotional support” (pp. 374-375). When children move from one home to another, they are faced with the loss of parents, siblings, and friends.

**Attachment Theory**

Most previous research examining children in the foster care system has used John Bowlby’s Attachment Theory to analyze the children’s experience (Golding, 2008; Dozier, Lindhiem, Lewis, Bick, Bernard, & Poloso, 2009; Ponciano, 2010). Attachment theory focuses on infants and their ability to attach to principal attachment figures, while this study focuses on the foster parents and their experience of attachment with their foster children. Therefore, Bowlby’s definition of attachment will not suffice. For this study, attachment is defined as: “The social bond or connection that exists between foster youth and adoptive parents” (Ryan et al., 2008, p. 123). There are several aspects of attachment theory that are relevant to this study. First, attachment theory
examines the learning cycle of children in their environment. Attachment theory focuses on the infant’s reaction to and adaptation to its surroundings. According to Bowlby (1982), infants grow up in a goal-corrected system, which consists of two significant components, “a means of receiving and storing instructions regarding the set goal” and “a means of comparing the effects of performance with instruction and changing performance to fit” (p. 70). Children learn, at an early age, what to do to get their parents to come to them. They learn that, for example, by crying, their parents will come. Other types of attachment behavior include smiling, following, and clinging (Bowlby, 1982). Attachment behavior has a significant impact on a child’s experience of creating and maintaining long-lasting relationships from birth until 3 years of age.

For infants, attachment to a preferred figure develops during their first year of life (Bowlby, 1982, p. 223). Attachment to this primary figure grows with increased interaction with them. If the primary caregiver is not physically close enough to the infant, or if the infant feels that there is a chance that the caregiver is going to leave or move farther away from them, they may become anxious and/or sad. Both reactions, according to Bowlby, are likely to arouse anger (Bowlby, 1982). After six to nine months of age, babies are more likely to respond to strange figures with fear responses. The development of attachment to a new figure becomes increasingly difficult after the child turns one because of the increase in fear responses to strangers (Bowlby, 1982). This fear response can have a profound effect on the success or failure in a foster home placement. In children aged two to four years, attachment behavior varies from individual to individual. “As children get older, the attachment behavior is less frequently and intensely activated” (Bowlby, 1982, p. 261). After their third birthday, most children
become able to feel secure in a strange place with secondary and substitute attachment figures. In the age of adolescence, attachment behavior is commonly directed towards persons outside the family as well as institutions and groups other than the family such as a college, a work group, or a religious group (Bowlby, 1982).

Bowlby (1982) was deeply concerned about loss of an attachment figure. His research indicated that loss of an attachment figure for a child can create fear and anxiety. This fear is linked to the reason why children act out in certain ways when a parent leaves or dies. According to Bowlby (1982), there are two types of anger: anger of hope and anger of despair. Anger of hope is characterized by the child wanting the parents or the principal attachment figure to return because they are afraid and the child is hopeful that their actions will ensure that their parents or principal attachment figure will be there for them in the future. Anger of despair is where the behavior of the child is to discourage the principal attachment figure from going away again (Bowlby, 1982).

A third aspect of attachment theory is the concept of detachment. According to the theory, detachment is seen whenever a six-month-old to a three year old child spends a week or more out of his or her principal attachment figure’s care and was not being cared for by a specially assigned substitute. Detachment is characterized by a complete absence of attachment behavior when they first meet their principal attachment figure again (Bowlby, 1982, p. 20). More importantly, especially for this study, detachment also can occur after several, prolonged separations between principal caregiver and child. "There is abundant evidence that after a child has been away from home in a strange place and in the care of strangers he is liable to be very frightened lest he be taken away
again” (Bowlby, 1982, p. 13). Detachment is also seen as the underlying reason for aggressive behaviors that foster children exhibit (Wotherspoon, O’Neill-Laberge, & Pirie, 2008; Buehler, Rhodes, Orme, & Cuddeback, 2006). More current literature delves into attachment theory and how it applies to foster care.

**Attachment Theory and Foster Care**

Attachment theory is helpful when examining the experience of children in the foster care system in several ways. The first concept of attachment theory that is helpful with this research study is detachment. Foster children experience detachment oftentimes because of the multiple moves they experience and the multiple people in their lives that come and go (Bowlby, 1982; Ryan et al., 2008; Wotherspoon, O’Neill-Laberge, & Pirie, 2008). Foster parents are with the children when they are exhibiting aggressive behaviors, so for this study, it is important to understand what the foster parents are going through when working with their foster children at such times. Buehler, Rhodes, Orme, and Cuddeback (2006) state in their research article about competency domains for foster parents,

> [E]ffective attachments sometimes are difficult to form when children have serious behavior problems or attachment disorders. Thus, some foster parents will need to accept and value children whom might be upset about being in foster care and resist forming relationships while in care. (p. 534)

Attachment theory is also important in defining the role of foster parents in their foster children’s lives. Although Bowlby’s theory focuses on children, recent research
has used attachment theory to examine the experience of foster children. Recent literature also has turned to the role and experience of foster parents (Dozier, et al., 2009; Ponciano, 2010).

In the Dozier et al. (2009) study of foster parent and child relationships, the researchers found that the child, not the parent drove the interaction (p. 324). For example, if the child was avoidant, the parent would respond as if the child did not need them. Dozier et al. also found that the strongest predictor of attachment among children is the parent’s state of mind, the manner in which adults process attachment-related feelings and thoughts (p. 324).

Poinciano’s (2010) study of the role of maternal sensitivity and characteristics examined the foster mother experience. The variables explored in this study were maternal sensitivity, adoption status, and prior foster parenting experience. “This study revealed that certain variables combined to predict maternal sensitivity; however only maternal sensitivity and, surprisingly, less experienced foster mothers directly predict the security of attachment of the child to the foster parent. This suggests that what a caregiver brings to the relationship is important” (Ponciano, 2010, p. 108).

Clearly, foster parents are a part of the attachment process. They play a role in creating and maintaining relationships with their children. This study is going to examine and analyze the foster parents’ experience of not only being a foster parent, but also, of attaching or not to the children they take in.

The goal of foster care is permanency, so it is supposed to be a temporary placement for children until their birth parents can take them home or until their foster
parents or another foster family will adopt them. However, the attachment process does not necessarily wait for a child to leave foster care. Thus, there is a lot of pressure on foster parents. “Foster care placements are intended to be temporary. One might thus expect some reluctance or unwillingness in developing strong and secure attachments” (Ryan et al., 2008, p. 118).

A second way that attachment theory is important in the foster care system is in understanding the effects that multiple placements have upon the ability of foster children to relate to their foster parents. As was mentioned above, most children have three placements during their stay in the foster care system. Multiple placements do not allow children to be able to or to learn how to form long-lasting relationships.

Changing homes because of placement disruption compounds the sense of loss that children being placed must face by leaving behind parents and often siblings and friends. (Pecora et al., 2010, p. 36)

A lot of their fear and anxiety manifests itself through anger and hard to control behaviors, which in turn affect the foster parents taking care of them. Even harder is when children come to the foster home detached. Children who are detached and are in foster care usually are diagnosed with some kind of attachment disorder (Bowlby, 1982b; Bruskas, 2008, Dozier et al., 2009).

**Reactive Attachment Disorder**

Since so many foster children go through multiple foster home placements, it is hard for them to know how to create and maintain a relationship with a caregiver.
Foster children who are unable to attach or have attachment problems are diagnosed with Reactive Attachment Disorder (RAD). Two sources that define RAD are the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) and the International Classification of Diseases (ICD-10).

The DSM-IV, is currently what psychiatrists and physicians use in the United States to diagnose individuals. According to the Center for Disease Control (2011), in 2013, the United States will also be using the ICD-10. The DSM-IV and the ICD-10 define RAD differently, but there is overlap between the two manuals. The DSM-IV defines RAD as a disturbance of social relatedness in most social contexts associated with pathogenic care and has two subtypes, the inhibited form, and the disinhibited form (Minnis, Marwick, Arthur, & McLaughlin, 2006). RAD develops before the child turns five. The American Psychiatric Association (DSM-IV) (1994) states:

By definition, the condition is associated with grossly pathological care that may take the form of persistent disregard of the child’s basic emotional needs for comfort, stimulation, and affection (Criterion 1); persistent disregard of the child’s basic physical needs (Criterion 2); or repeated changes of primary caregiver that prevent information of stable attachments (e.g., frequent changes in foster care) (Criterion 3). (p. 116)

The first subtype of RAD, the inhibited form is characterized by the child as excessively inhibited during social interactions or excessively hyper in social interactions. The child also has ambivalent or contradictory responses. In the second
subtype, the disinhibited form, the child has diffuse attachments, and has an excessive familiarity with strangers (Minnis et al., 2006). Although RAD is persistent, it can be put in remission if the child is in an appropriate, supportive environment (Minnis et al., 2006).

The ICD-10, the International Classification of Diseases, defines RAD as abnormalities in social relationships associated with parental abuse and neglect (Minnis et al., 2006). Again, RAD manifests within the first five years of a child’s life and is persistent, but according to the ICD-10, RAD is reactive to changes in environmental circumstances (Minnis et al., 2006). The ICD-10 also has two subtypes of RAD, Reactive Attachment Disorder, and Disinhibited Attachment Disorder. The Reactive Attachment Disorder subtype is characterized by fearfulness and hyper vigilance which do not respond to comforting, contradictory or ambivalent social responses in social contexts, poor social interaction with peers, aggression towards others and aggression towards one’s self, misery, apathy, and growth failure in some cases (Minnis et al., 2006). The second subtype, the Disinhibited Attachment Disorder, is characterized by diffuse, non-selectively focused attachments in early childhood, attention-seeking and indiscriminate friendliness in middle school, poorly modulated peer interactions, and these behaviors may all be associated with emotional or behavioral disturbances (Minnis et al., 2006).

RAD is an important aspect of attachment theory and of the foster care system to cover because the behaviors that children exhibit because of their RAD status are being dealt with and observed by foster parents. According to Buehler et al. (2006), “Effective attachments sometimes are difficult to form when children have serious behavior
problems or attachment disorders” (p. 534). Another difficulty associated with attachment is the age of the child.

**Attachment and Age**

Bowlby’s attachment theory focuses mainly on children up to three years old. Bowlby (1982) stated that:

Principal determinants of the pathway along which an individual’s attachment behavior develops, and of the pattern in which it becomes organized, are the experiences he has with his attachment figures during his years of immaturity—infancy, childhood, and adolescence. (p. 41). Bowlby recognized that attachment is a lifetime process and starts in the first three years of life (1982). Since Bowlby, research has turned to the attachment process in children older than three years of age. Cushing and Kerman (2009), in their essay on security and attachment state:

Youth enter foster care with different relational needs depending, in part, on the age at which they enter care. Infants who enter foster care before having developed significant attachment relationships need a sensitive and responsive caregiver who will provide continuity of care over time. (p. 112)

Whereas:

Older youth who enter foster care after having established significant attachments with caregivers and significant others need to maintain these connections whenever feasible. (p. 112)
Young children, even after three years of age are still in the process of attachment. “Despite their increased competence, pre-schoolers still require adults to guide their actions and meet their dependency needs” (Wulczyn et al., 2005, p. 33).

School age children and adolescents have different attachment needs than their younger counterparts (Golding, 2008; Scharf & Mayseless, 2007). Golding (2008), in her book about nurturing attachments with children who are in foster care or who are being adopted, states: “Attachment needs do not disappear but become attenuated or weakened” (p. 38). Adolescence is an age where youth are beginning to seek autonomy and at the very same time, need the security of their parent’s authority and attachment (Golding, 2008).

Scharf & Mayseless (2007) in their essay on attachment in adolescence point out four tasks that adolescents face concerning changes in their attachment working model. These changes are: changes in the expression of attachment, changes in who adolescents target their attachment behaviors to, changes in composition and structure of their network of attachment figures, and changes in their attachment internalized models. Adolescents tend to pull away from their parents at this time because they spend more time away from home than actually there. Their attachment behaviors tend to be targeted at their peers rather than their parents as well (Scharf & Mayseless, 2007).

When adolescents pull away, parents tend to try and balance their adolescent’s yearning for autonomy and their wanting to be together. If an adolescent has a secure attachment model, establishing autonomy and negotiating the balance between autonomy and togetherness should be easy. However, if the adolescent has an insecure attachment
model, then establishing autonomy and balancing that with togetherness is strained (Carlivati & Collins, 2007).

**Attachment Theory and The Current Study**

This study will examine and analyze foster parents’ experience of not only being a foster parent, but also, of attaching or not attaching to the children they take in. Attachment theory is an important lens when examining foster care in a couple of ways. First, the concept of detachment is important because of the aggressive, out-of-control behaviors that foster children may exhibit due to the number of placements, moves, and caregivers they have had. Second, Bowlby’s concept of loss is important to this study because the research shows that both children and foster parents go through a period of grieving when the foster children go from one home to another (Bowlby, 1982; Bruskas, 2008; Pecora et al., 2010). As mentioned before, the definition of attachment for this study is going to be “the social bond or connection that exists between foster youth and adoptive parents” (Ryan et al., 2008, p. 123). The present study will seek to understand the attachment process from a foster parent’s perspective. It will explore the following research questions:

1) What is the attachment experience of foster parents?

2) What are the barriers, if any, of forming an attachment with foster children?

3) How do current foster care policies affect the attachment relationship between foster parents and the children in their care?
This study will examine these questions through an interview process with a small sample of foster parents. This study will examine the experience of foster parent attachment through the perceptions of foster parents' experiences with the children they foster, therefore giving voice to the attachment relationship between foster parent and foster child.
CHAPTER II: METHODOLOGY

The current study takes a qualitative approach to examine the attachment experience of foster parents in the New Hampshire foster care system. Content analysis of the data gathered through face to face interviews was conducted. Each interview consisted of questions asking the foster parents about their experience, if any, of attachment with their foster children (See Attachment B). The transcripts of the interviews were then analyzed for recurring themes, and those emergent themes were tested for validity, giving voice to the foster parents involved in the study and to the experiences of the children whom they have cared for.

Sample Selection

Foster parents do the work of caring for our neediest children in relative obscurity. They care for children ages birth to 18 years old and are supported by a small subsidy from the state. In New Hampshire, a network of foster parents is maintained by the New Hampshire Foster and Adoptive Parent Association. In order to contact a potential sample for this study, the researcher contacted the New Hampshire Foster and Adoptive Parent Association, who in turn, e-mailed 25 foster parents who are members of the association. These parents were chosen randomly to participate in this study. Of those e-mailed, eleven responded. Of those eleven, ten were interviewed.

Foster parent couples who agreed to participate in interviews together were considered one participant for the purposes of this study since their experience
of attachment was observed together. This consideration allowed for easier comparison between couples and single parents who participated in this study.

During the transcription process, foster parent couples were interviewed at the same time and named differently in the transcription. For example, if Foster Parent 2 included the foster mother and foster father, when the foster mother spoke, she was labeled Foster Parent 2A and when the foster father spoke, he was labeled Foster Parent 2B. The researcher and the foster parent determined via e-mail when and where the interview would take place. If the foster parent preferred to meet outside the home, that was an option. Interviews lasted from thirty minutes to one hour.

Research Design

The research framework for this study is qualitative. Qualitative research was chosen because of its “fit” with the purpose of the study. First, the research questions of this study are exploring what the attachment experience of foster parents is. Creswell (1998), who specializes in quantitative and qualitative research methods states:

In a qualitative study, the research question often starts with a how or a what so that initial forays into the topic describe what is going on. This is in contrast to quantitative questions that ask why and look for comparison groups (e.g., Is Group 1 better at something than Group 2?) or a relationship between variables, with the intent of establishing an association, relationship, or cause and effect. (p. 17)
Creswell also states that qualitative research most effectively explores the perceptions and feelings of human experience as opposed to trying to quantify it.

Another reason for using a qualitative approach is that the topic of the attachment experience of foster parents needs to be explored. There have been several studies on the attachment of children to parents and the children’s behavior (Buehler, Rhodes, Orme, & Cuddeback, 2006; Lindhiem & Dozier, 2007; Marcellus, 2010). As Marcellus (2010) put it:

Development of an understanding of the complexity of the role foster parent and incorporation of that understanding into plans of care and treatment strategies will ensure the voice of foster parents is represented within decision-making around health and child welfare policies for children in care. (pp. 23-24)

This study is about the foster parent’s role in attachment and what their experience is. In Chapter 4, there will be discussion about how the findings of this research concern current policies in place. The current literature has focused on foster care in specific states of the United States (Ryan, Testa, & Zhai, 2008; Ponciano, 2010), across the United States (Morrissey, 2009), and Canada (Wotherspoon, O’Neill-Laberge, & Pirie, 2008; Marcellus, 2010). However, foster care in New Hampshire is not examined or analyzed in the literature nearly as much as studies using data from other states and Canada.

Additionally, qualitative research was used for this study because the foster parent experience of attachment and the experience of foster parents in the foster care system in
general need a more detailed analysis. As was mentioned earlier in Chapter 1, foster parents play an important role in the attachment process (Ponciano, 2010; Dozier, et al., 2009). This study is going to go further and examine what their experience with attachment is, what barriers to attachment they encounter, and how current foster care policies affect the attachment relationship between foster parents and the children in their care.

Another reason why qualitative research was a good "fit" for this study was because of the small sample size. According to Slevitch (2011), in qualitative research, "[a]n attempt is usually made to understand a small number of participants' own frames of reference and worldviews, rather than to test hypothesis on a large sample" (p. 78). According to Monette, Sullivan and DeJong (2008), one factor that influences the sample size is the research hypothesis. Quantitative research requires a large sample size, whereas qualitative research requires a small sample size, usually because of the type of topics and research questions addressed by qualitative research (Creswell, 1998).

In addition, since the purpose of this study is focusing on a "what" question and the meaning of attachment experience is being explored, a small sample is key (Creswell, 1998). The purpose of the study is to examine and analyze the experience of foster parents which is done through the interview data. If the topic of this study was about a relationship between two variables and how statistically significant that relationship is, then quantitative research would be more suitable (Creswell, 1998). As Montcalm and Royse (2002) state, "Qualitative researchers often employ small samples or numbers of
research subjects and prefer depth and quality of information over counting or quantifying” (p. 4).

Validity

Part of any research study and project is validity. Validity refers to the reliability and consistency of the data (Koro-Ljungberg, 2010). Validity, for a qualitative research study, is obtained in a few ways. First, content validity was reached in the current study by reading through the transcriptions and coding recurring themes. “Content validity is the measurement property that assesses whether items are comprehensive and adequately reflect the patient perspective for the population of interest” (Brod, Tesler, & Christensen, 2009, p. 1263).

Member-checking and validity testing were used to ensure that this study met qualitative standards of validity. Member-checking is defined as the researcher using qualified individuals to analyze the data and look for recurring themes (Brod et al., 2009). For the current study, individuals who did not have specific knowledge of the foster care system were also used to analyze the data. Two University of New Hampshire students were recruited to read through the transcriptions and find recurring themes which were then matched with what the researcher found. In addition, the Director of the New Hampshire Foster and Adoptive Parent Association was also contacted to check the themes because of her experience and expertise on the foster care system and foster parents. This allows for confirmation of the themes that were found by the researcher (Lewis, 2009).
Another way validity is achieved is through a comprehensive comparison to the literature and looking for the themes found in the data that match those found in the literature. "In qualitative research, by using interviews, theory, previous research literature, personal observations, and other data, findings can be compared to determine the validity of a certain theme or category" (Lewis, 2009, p. 11).

**Procedure**

Interviews were conducted in March and April of 2011. In order to participate in the study, participants were required to sign an Informed Consent form (Appendix A) to show that they understood the risks, the benefits, and their role in the study. There were a couple of possible risks from participating in the study. The first risk that might have occurred was that the questions could have brought out emotional answers. The second risk is that, as a foster parent, they work very hard and have various stories to tell. Thus, disclosure can be hard to do. If they felt emotionally tired and weak after the interview, they were encouraged to reach out to the New Hampshire Foster and Adoptive Parent Association and their local foster parent support group. The possible benefit of this study was that it could help the community and the foster parent better understand the relationship of foster parents and their foster children so that studies like this could better inform both policy and practice.

The interview consisted of three sections: basic information, foster parent training, and attachment. The first section, basic information, consisted of questions about the foster parents’ age, gender, number of foster children, and number of years as a foster parent. (See Appendix A: Interview Questionnaire).
The second section, foster parent training, consisted of questions about the kind of training foster parents had, what they took away from the training, and what they would add to the training. This section was added because foster parent training is required in the state of New Hampshire in order for an individual/couple to be licensed as a foster parent. Foster parent training is also important to look at because that is where foster parents get the information they need to understand the children that come into their home. Training is provided through Granite State College and includes classes on RAD and attachment. The training adds to their states of mind by informing them of foster children behaviors and characteristics and what foster care is. In the previous chapter, foster parent state of mind was discussed as a factor in how well their foster children will attach to them (Dozier, et al., 2009; Ponciano, 2010; Chaffin, et al., 2006). (You can see these questions in Appendix A: Interview Questionnaire).

The third section of the interview consisted of questions about the participants’ experience of attachment. This section included questions about creating and maintaining bonds with foster children, how and why different foster children bond differently to one foster parent than another, and why foster parents may or may not maintain a relationship with their foster children when they are either adopted or moved to a different foster home. (See Appendix A: Interview Questionnaire).

The interviews were recorded with a digital audio recorder. In addition to these recordings, the researcher kept field notes, detailing the emotions, expressions, and atmosphere of the interview. These field notes were used as a reference to place the
comments of the participants in context and in ensuring that vague comments could be made clearer through interpretation of the affect of the subjects.

After each interview was conducted, it was transcribed by the researcher, allowing for a deep immersion of the researcher into the meaning of the subjects’ statements. This technique serves to also improve the validity of the findings (Strauss & Corbin, 1998). To protect the individual’s confidentiality and in compliance the University of New Hampshire Institutional Review Board, all identifying information was removed. This information included spouse’s names and foster children’s names.

The recordings on the audio recorder were then deleted to ensure confidentiality of the participants’ identity. Since names and identifying information were whited out, the researcher coded foster parents by numbering them, “Foster Parent 1,” “Foster Parent 2,” “Foster Parent 3,” etc.

**Content Analysis**

A content analysis process was used to examine the data. First, the researcher read through the transcriptions and looked for major themes. Second, the researcher deeply immersed herself in the literature by talking to foster parents, rereading the literature to see if the themes in the literature and transcriptions matched up, and through the transcription process which allowed for the researcher to intimately interpret the information from the interviews (Kearney, 2001). Third, the researcher elicited the help of two outside readers to examine for an agreement of themes. These outside readers serve to validate the themes that emerged from the data (Cresswell, 2007; Lewis, 2009;
Brod et al., 2009). The first person was a graduate student in the Physics Department of the University of New Hampshire and the second person was a graduate student in the Family Studies Department of the University of New Hampshire. Fourth, the researcher contacted the New Hampshire Foster and Adoptive Parent Association to look through the list of themes from the transcriptions to see if they agreed because of their expertise and work with foster parents. Fifth, the research measured themes against the current literature on foster parenting and analyzed the gaps of the literature and the direction that should be taken in future research.

In order to analyze the data effectively, the researcher used three theories to guide the interpretation of the data: Grounded Theory, Symbolic Interaction Theory, and Ecological Theory.

**Theoretical Approaches**

In order to interpret the data from the interviews, it was important to use theories as lenses to help with the interpretation. For this study, the researcher incorporated three theories; Grounded Theory, Symbolic Interaction Theory, and Ecological Theory.

**Grounded Theory**

Grounded theory, according to Creswell (1998) is a theory intended to “generate or discover a theory, an abstract analytical schema of a phenomenon that relates to a particular situation. This situation is one in which individuals interact, take actions, or engage in a process in response to a phenomenon” (p. 56).
Grounded theory is a lens through which the discovery of new research themes and theories are allowed to emerge from the data. In this study, these themes emerge from the interviews and the voices of the foster parents. The data gathered in this project was viewed through a grounded theory perspective in order to look at foster parent’s engagement and experience in the process of attachment in response to the phenomenon of foster care. “The researcher typically conducts 20 to 30 interviews based on several visits ‘to the field’ to collect interview data to saturate (or find information that continues to add until no more can be found) the categories” (Creswell, 1998, p. 56). Due to time constraints, only ten interviews, one per participant, were conducted. Information from the interviews was coded into recurring themes and categories.

According to grounded theory, the researcher is in a pendulum swing between the field and the analysis, meaning that the researcher goes back and forth between researching and analyzing. Burck (2005) states:

A grounded theory analysis begins with a line-by-line coding of the written text, identifying descriptive categories which are constantly compared for similarities and differences. These in turn are clustered or merged in order to construct the researcher categories at a more conceptual and interpretive level. These categories, in turn, are used to re-examine the data to further elaborate the concepts analyzed. (p. 245)

In this research, grounded theory provides a structure through which the foster parent experience of attachment, a very real and powerful process, can be revealed.
Symbolic Interaction Theory

The second theory that is used to analyze the data is symbolic interaction theory. "Symbolic interactionism, more than any other of the family theories, calls for paying attention to how events and things are interpreted by social actors" (White & Klein, 2007, p. 94). Symbolic interaction theory also focuses on how people seek meaning and how people create and maintain their identities by interacting with others (Bengston et al., 2005).

One of the ways people create and maintain their identity is through language. According to Bengston et al. (2005), "Language, and how it is communicated, is central to the construction of social reality. Therefore, symbolic interaction theories rely heavily on conversational evidence" (p. 42). The present study used interviews with foster parents in order to find out how they created and maintained relationships with their foster children and what their experience of attachment with their foster children was like. Through the conversation with the researcher and the foster parents, the researcher was able to code and discover recurring themes, categories, and experiences which will be discussed in the next chapter.

Another concept of symbolic interaction theory that is important for this study is identity. Identity is defined by society, situations, context, and the roles people play (White & Klein, 2007). The identity of "foster parent" is defined by others' perceptions of the foster care system, the foster children in the foster parent's care, and the child welfare system, which will be discussed in further detail in the next chapter. All of these ideas mesh together to form the experience of attachment for foster parents.
Ecological Theory

Ecological Theory was developed by Bronfenbrenner and consists of five systems that all affect the growth and development of children. These systems are: the microsystem, the mesosystem, the exosystem, the macrosystem, and the chronosystem. The microsystem consists of the child's immediate environment. This is where the child learns about the world around them. The family and school are two examples of the microsystem. The mesosystem is the connection between two microsystems. For example, if a child has friends from school connect them to a new summer camp, that is a mesosystem because two microsystems are interacting; the school and the summer camp. The macrosystem is the larger system of cultural beliefs and societal values. This system influences how individuals act, react, and work together. The exosystem consists of systems that are not in direct interaction with the child such as policies and laws. The chronosystem consists of the historical time relationships exist. For example, we are all now in a historical time where families and children are most vulnerable, so that will affect our relationship with our children. (Swick & Williams, 2006).

This theory is used to look at the ecology of the foster parent and the foster child and how that affects their relationship. The next chapter is going to examine the results and findings from the interviews, which will be interpreted through grounded theory, symbolic interaction theory, and ecological theory.
CHAPTER III: RESULTS

This study explored three research questions:

1) What is the attachment experience of foster parents?

2) What are the barriers, if any, of forming an attachment with foster children?

3) How do current foster care policies affect the attachment relationship between foster parents and the children in their care?

As discussed in the previous chapter, a content analysis was used to analyze the data from the interviews. To better understand the sample and who was interviewed, the first section of the questionnaire, “Basic Information”, will be examined.

**The Sample**

There were ten participants in this study. As was mentioned in the previous chapter, foster parent couples were combined and counted as one participant. Of those who participated, there was only one couple who was interviewed together. There were three single foster parents in the study and the other six participants’ spouses were unable to participate due to scheduling conflicts. Of the ten participants, nine were female and two were male. The least amount of tenure a foster parent had in the sample was two years. The highest amount of tenure a foster parent had was 20 years. The foster parents in this sample had lived with a minimum of three foster children to a maximum of twenty
five foster children. At the time of the interview, four participants had a foster child in their care while the other six had none. The foster children in the care of these foster parents ranged from the ages of four days to 17 years old. The length of stay ranged from a couple of days to a couple of years.

**Content Analysis**

The interviews focused on the three research questions mentioned above. In order to explore these questions, a content analysis process was conducted to find recurring themes. The researcher was deeply immersed in the voices of the foster parents during the transcription process. Once the interviews were transcribed, the content was coded using a process described in Creswell (Creswell, 1998).

In accordance with grounded theory (Burck, 2005) themes were allowed to emerge from the dialogue with the foster parents. These themes were chosen based on their frequency of occurrence and their relevancy to one of the three research questions. The themes that were found included: support systems, age of foster children, gender of foster child and foster parent, previous experience of foster parents and foster children, creating and maintaining the relationship, the language of attachment, barriers to attachment, and an “other” category. The “other” category included themes that were interesting, but not found in the majority of the interviews. In order to understand these themes and how they relate to attachment, each will be examined more thoroughly.
Validity Testing and Member-Checking

After the content analysis, the researcher recruited three people to read through the transcriptions and find recurring themes. Two people were graduate students from the University of New Hampshire Family Studies program, one person was a graduate student from the University of New Hampshire Physics program. These outside readers served as a method for checking validity of the content analysis process as described in Creswell (1998). The researcher also contacted Jen Guillmette, Director of the New Hampshire Foster and Adoptive Parent Association who also served as a knowledgeable “insider” who was asked to validate the themes.

The two graduate students from the University of New Hampshire Family Studies program found the following themes: need for more support between foster parents and better connections, more support in every aspect of the foster care system and all who are involved, attachment of foster parents and the need to protect themselves from becoming overly attached, strong family ties and bond helped children attach, game nights and activities were all ways foster parents tried to create a relationship with the new foster child, and maintaining a relationship with foster children was positive when that relationship was safe and healthy for the child, and advocacy for children.

The themes that were found by the researcher were reinforced by the themes that were found by the graduate students and the director of the New Hampshire Foster and Adoptive Parents Association. The differences between each person's findings could be because of the different experiences each person has had, especially when it comes to the idea of attachment. The literature on attachment validated the findings of the researcher.
and the lack of familiarity with the literature may account for the slight differences between the outside readers and the content analysis. The director of the New Hampshire Foster and Adoptive Parent Association also has had hands on experience with foster care and the experiences of foster parents, which the researcher and the other graduate students do not have. However, there was still a general consensus on the following the themes.

**The Themes**

Various themes emerged during the content analysis of the interviews. Those themes reflected the depth of the foster parents’ perceptions and experiences with their foster children.

**Support**

This area of discussion included the experiences participants had with their outside support networks in the foster care system and what participants felt would aid or hinder their ability to make attachments with their foster children. Their support system included: social workers, resource workers, therapists, the judicial system, birth families, and other foster parents. All of the interactions that the participants had with their support network appeared to affect their experience of attachment to their foster children. The information they were given and the support that they had affected their state of mind, which as previous literature has shown, affects foster parents’ ability to attach (Dozier et al., 2009).

**What do Foster Parents Want in Regards to Support?**
Eight of the ten participants stated that they had an interest in having a new kind of support or an increased amount of support that is already given and that support increased their ability to focus on the attachment needs of their foster children. For example, some foster parents wanted foster parent training to include time for foster parents to network and talk about their experiences with other foster parents. The participants thought that time to network and to talk with others eased stress and frustration with their foster child’s behavior and attitude. As previous literature has shown, the state of mind of a foster parent affects their ability to attach, so stress and frustration would hinder the relationship between foster parent and foster child (Dozier et al., 2009). A foster mother stated:

The only thing that I think, the instructors perhaps should be conscious of is when you get a bunch of foster parents in and you start talking about a subject, everyone wants to share what’s happened to them, what’s worked for them, what hasn’t worked for them, so they should build time into the class for that to happen, instead of you know, extending the length of the class, so that that can happen or, you know, I guess reduce how much time they’re lecturing, so that sharing, ‘cause that’s such an important part of the classes, is networking and getting to know people.

A foster father also pointed out the importance of mentoring and connecting with other foster parents and how that helps with one’s experience of being a foster parent and creating a relationship with the foster child:
I think it’s one of the great needs, particularly getting our newbies connected with senior foster parents. Just so you have somebody to call when it’s like, ‘Ahh, I don’t think I fully understood in the training when they said this,’ because you know, your life gets somewhat invaded…. I think the best addition to the training isn’t really more classes, isn’t more head knowledge, ‘cause we get it all at this point. But its some connections, so we know how to, who we could call.

Some foster parents also mentioned a telephone tree or hotline. For example, a foster father mentioned a 24-hour helpline:

There needs to be a 24 hour helpline because it always seems when something goes wrong, it’s not at the time when, your social worker is available, or they’re out… You have to wait ‘til Monday and hope that they check their voice mail first thing on Monday and then hope that they get back to you.

He also stated that there should be a list of contacts made by the foster parent trainers which would include foster parents to call based on specific behaviors foster children exhibit:

It would be nice for them to um accumulate a list of certain types of, of behaviors of kids and then have a point of contact, not necessarily for that, but somebody that can say, ‘Hey look, there’s this foster parent out there that had to deal with this particular type of behavior’ because you, behaviors may come in you never know what you’re getting.
He goes on to say that it would help the foster parents dealing with the behavior by saying: “Hey look, this is what I did. It worked, it didn’t work.” By having a helpline, foster parents can get advice from more experienced foster parents and get useful tips and strategies concerning their relationship with their foster child. By getting tips and strategies that worked with certain behaviors, such as RAD behaviors, foster parents in this study felt that they would be less stressed and frustrated, which in turn, would help build a healthy relationship with their foster children and facilitate healthy attachments.

Another way to network and find support from other foster parents is to go to conferences for foster parents. “A lot of it is networking too,” said one foster mother, who has been a foster mother for the past three and a half years, “Like, when I’m at the conferences and stuff, it’s all other foster parents where I can be like, ‘Hey, have you ever had a kid that did this? Like, I don’t understand why they’re doing this.’”

Several of the participants also mentioned that they would like better support groups. There are support groups all around New Hampshire, but there is a time and a location restraint for some foster parents. A foster mother stated:

I feel like right now, it’s kind of hither and yon, you know, and if you’re able to attend a meeting, that’s great, but so often again, the meetings aren’t timed where people can actually go and take time out of their life for a two hour support group meeting.

Another foster mother also pointed out how helpful a support group can be:
There's such a huge community out there of people who want to help who can give you an idea, or give you advice, or let you just, vent, you know, because sometimes you need to.

For these foster parents, taking time to work with each other and help each other with the behaviors of the kids they take care of and with the ins and outs of the foster care system is really helpful. The participants stated that extra support could diffuse stress and frustration, which would impact their relationship with their foster child and how it was created, maintained, and solidified. This leads into one of the properties of the support theme, the network of people that the foster parent interacts with.

The Network

Within the theme of support, participants identified networks as important to the attachment process because the relationship between foster child and foster parent was often impacted by the social workers, case workers, doctors, therapists, other foster parents, the school the foster child attends, and biological parents. Most of the participants talked about their encounters with everyone in the network and how it affected their experience as foster parents. A foster mother stated that "I've depended on the team of workers to help with that and therapist's and um social workers to make the right decision for the child and give the child what, the services that they need." In regards to attachment, some foster parents had to break the attachment with their foster child because of lack of communication between them and the caseworkers or the foster child would not open up to creating any kind of relationship with the foster parents because the caseworker told them they were only going to be there for a few months.
These experiences made attachment to foster children that much harder not only for those specific children but also for future ones.

When working with social workers and caseworkers, the foster parents had certain experiences that affected how they perceived foster parenting and how they perceived life with their foster child. Their perception of foster parenting of their life with their foster child both affected their relationship with their foster child. For example, one single foster mother talked about how helpful it was to have a caseworker come to the house and help teach skills in parenting and work with the child and their behavior:

I’ve actually, with this current child that I have, I’ve had somebody actually coming into my home, and saying ‘Okay, here’s a, here’s a plan. Here’s what you, you know, these are the reinforcement strategies, here’s the um, the practice that you need to do.’

Another foster mother participant talked about a more negative side of working with caseworkers in regards to what they tell the child about their placement in foster care:

You know, with this boy, it was really difficult. He was adamant that he wasn’t gonna be a part, I mean, first of all, they set him up with, ‘you’re gonna be there for a few months,’ you know, ‘oh your aunt said she’ll take you and we just need to work on that,’ and then that didn’t happen, and so then it was, ‘oh well, your dad’s getting out of jail soon, and you can go stay with him then,’ so it was a series of, building up, building, building up, and then he’d crash down.
This affected the child and his behavior, which in turn changed the way the foster mother interacted with the child and the experience of the attachment process with the child. The foster parent had a harder time creating a relationship with this child because of the way the social worker/case worker explained the situation and how he was not going to be with this foster family for a long time. According to the literature, children will become detached because they are moved so many times that they do not want to get hurt again, so it becomes harder for the foster parents to attach as well. (Golding, 2008; Buehler, Rhodes, Orme, & Cuddeback, 2006). These and other barriers to attachment will be discussed in detail later in this chapter.

Another team member or member of the network is the doctors/therapists. Foster parents in this study had somewhat of a negative experience with doctors and therapists, which in turn, affected what happened to the child. The participants had experiences where the doctor or therapist relationship with their foster child impacted their own relationship with their foster child. For example, a foster parent stated,

I’ve had doctors say, ‘Well, you’re gonna keep them for like, for a while? Are you gonna keep them?’ And I’m like, ‘Does it matter?’ Like, what needs to be done? Let’s do it.

She also had the experience of a misdiagnosis of her foster child that impacted the healing process for him. She stated:
I've had doctors say, 'Well I'm not taking care of this child because they are bipolar,' well, no they're not. Just because somebody diagnosed them that way just to get their payment, um, the child wasn’t.

In this case, the doctors were supposed to help work with the child and help them through their medical issues. For the participants, the negative interactions with the doctors and therapists were frustrating. They want to help their foster children and show them that there are positive role models and relationships for these children in the real world. However, when doctors and therapists do not help with the child and the root of the problem, this creates stress for the foster parent. A foster mother discussed how there was a root of the problem. ADHD, PTSD, whatever the diagnosis, they are all related to the child’s trauma of being abused or neglected.

This foster mother also had an experience where she found out, after the placement, that she wasn’t supposed to receive the child. Before this child was placed, there was a meeting with doctors, counselors, the guardian ad litem, and the caseworker to decide which placement would be best for the child. The doctor had told the agency not to place the foster child in a home with another child because of his sexualized behaviors. This child was still placed with her, who had a biological son in the house. She and her husband attached to this foster child very easily and were keeping adoption open. This foster parent stated:

When I go to the doctor’s office, he’s telling me, ‘Oh, he was never supposed to be with you,’ which was because of the, one the bullying, but two because um, he
had sexualized behavior, which I found out the night before when he tried something with my son.

The doctor let her know that the foster child would leave victims in his wake, but he was not, at this point, a vicious sexual offender. Still, she had her son to think about:

My husband and I were like beside ourselves, I mean, we were crying, like by ourselves. We were just like devastated. We weren’t the type to give up on people—on a child, like we just wouldn’t do that, in that we were basically forced to.

Even though this foster parent couple attached to this young boy, they were forced to break this attachment because the network around them did not work together and communicate well. The attachment relationship between the foster parents and this child was broken, and it affected the foster parents. They both decided to take a break from fostering after this child was moved because they were hurt from this experience. As of the interview process, this foster mother was sending in her paperwork to foster again, but there was a brief break because of this experience.

Therapist appointments are also an aspect of the network since a lot of the foster children in the sample needed to see therapists because of the trauma they experienced. One foster parent talked about how hard therapy was for her foster children:

There was counseling every other week, but they never see the same counselor. They move counselors from office to office. Then we went four weeks at one point, ‘cause they scheduled it wrong, with no appointments. These were children
that were killing animals, they needed intense therapy, they would not bring them up to the next level.

However, once she changed from one agency to another, she had a different counselor experience:

My foster son now, sees his therapist every single week. And he has a mentor that comes to the house, and he has a caseworker that comes to the house, from Child and Family Services. So he’s seeing people three times a week, so that when his dad gets out of jail, in December, that he might be ready to meet his father and hopefully, reunification, I mean, hopefully, but try to bond with a child who’s never met his dad, so we’ll see.

Therapy appointments help children through their behavioral issues and trauma issues. However, if they are not getting the therapy they need, their behaviors might not change for the better, which in turn affects their foster parents’ experience of attachment.

Another aspect of the network is other foster parents. There were a couple of foster parents who talked about experiences where other foster parents came over and helped, were significant in diffusing the situation. One foster mother discussed an experience she had when her foster child was out of control:

He literally uh, flipped out, you know, and threw the sofa, threw the chairs down, ripped the sofa, um, was just uncontrollable, I couldn’t, I couldn’t restrain. You know, I couldn’t, he was gonna hurt himself, and I actually called um another foster parent who was, who lived right down the street and he came right over.
The foster parent network is also helpful in creating attachment relationships because experienced foster parents can help the newer foster parents with the behaviors and issues of their foster children that they are experiencing. The network of the foster parents was brought up previously when support groups were talked about.

Another aspect of the network is the school. Foster parents take their foster children to school and enroll them as soon as they can. However, the school system can be helpful and not so helpful in regards to the foster children. Like with the doctors and therapists, foster parents want their foster children to have a positive experience and to have people surrounding them that are going to help them through their situation. By having a positive support system, foster parents are able to form positive and healthy relationships with their foster children since their state of mind is not full of stress or frustration. One foster mother discussed how she had to communicate with the school and advocate for her child when it came to her child’s Individualized Education Plan (IEP). The school was not being honest about her foster child’s progress in school, but they rewrote her IEP without changing it too much:

If she needs to work on math or writing, let me know, because that’s the only way I know to work on it with her. Like, if you don’t, if you say, ‘Oh, yeah, she’s doing great,’ then I think she’s doing great, like I would much rather you say, ‘Okay, this is, these are her weak parts,’ like tell me her strong parts too, but tell me the weak parts we can work on so that I can help her be better, you know?

She went on to talk about how the school her foster daughter went to reworded the IEP in kindergarten from the one in pre-kindergarten. She hadn’t met any of her
goals, and her progress still wasn’t good. This affected the relationship between the foster child and foster parent:

Her, her last progress report is the exact same as it’s always been, like there’s things it seems like she just can’t learn, which is fine, but then we need to, for first grade, you know, we need to write it maybe focusing less on the stuff she can’t get.

For her, this was hard because it was a reality that maybe her foster daughter would not grow up and continue developing:

So I had said once, ‘Well, what if this is it? Like this is all she’ll kind of stay a little kid forever, ‘cause she hasn’t really aged a lot?’ Um, and I’m like, then that’s fine, like, I’m, that’s fine with me, I just want to know because if there’s a way for her to mature and kind of like emotionally grow up a little bit, um, and be like a normal quote, unquote child, then I, like I want that for her.

The relationship with her foster daughter could develop, but in a limited way because of her foster daughter’s developmental issues. In this instance, the school plays an integral part in ensuring the academic and developmental needs of her child.

Biological parents are also an aspect of the network. Foster parents and birth parents can work as a team to help the child and help find out what is in the best interests of the child. Some of the foster parents in this study welcomed communication with the birth parents because they wanted to show the child how to create good relationships,
they wanted to stay in the child’s life after reunification, and they wanted the birth parents to contact them in order to get help with their child after reunification.

In regards to the birth parents contacting the foster parents, one foster mother explained that the birth parents could count on them for support: “So their parents actually give us a call too when they’re struggling and they, they can count on us for support on that aspect.” Another foster mother also said that she encouraged the biological parents to call her for help and assistance:

I told him, I was like, ‘You know, when she goes home, like give me a call.’ And I told (foster child)’s mom the same thing, ‘Like give me a call. Like, if you get overwhelmed, like give me a call and I’ll take them for the weekend.’

She had created a relationship with her foster children and wanted them to be safe, so when they were reunited with their birth families, she still wanted to help out where she could:

I would much rather him call me and be like, ‘Can you take her, like once a month for the weekend, like the long weekend?’ I don’t care, like twice a month, have me take her, than for him to be overwhelmed and then do something that gets her placed back in foster care ‘cause then he’s starting all over again, trying to get her back again and it looks really bad if they lose a child for a second time.

Biological parents are also a part of the network because the foster children still have visits with them. A foster parent discussed this process and how it affected the foster child, their emotional well-being, and their behaviors:
They’d go home for visits, which is a good thing, but they would come back, five steps back, typically. So you had, that was okay, you had to be okay with all of that. And sometimes you’d feel like you work so hard, and then you lose ground, you work so hard, you lose ground, but it’s all part of the process.

He also went on to discuss how the younger foster children in his care were more resilient until they saw their birth parents and then they would go backwards, crying, bedwetting, and then progress would be made again.

Another way birth parents are an aspect of the network is that, in some cases, foster children were still attached to their birth parents, even when eventually adopted. A foster parent shared that her foster daughter, now her adoptive daughter, was only attached to her because she fed her and clothed her. She also disclosed that her daughter had Reactive Attachment Disorder and attached to everyone, even if they had only met her for a short amount of time. She stated:

She’ll attach so much to that person that everyone else, including me, will be invisible, um, so I guess I’m being greedy, but like, I’m her mom, you know, and she has two moms, but she’s only attached to one of us, you know, it’s not me.

Another foster parent also discussed how her foster daughter, now adoptive daughter had a hard time attaching to her because of her connections to both her previous foster parents and her birth parents:
Everything in her wanted to go back to her, what she knew, which was one, either her foster parents or her um biological parents. And so, that was, it was really hard for her and she had an especially hard time, at first, attaching to my husband.

This statement also brings in another theme which will be discussed later; the theme of gender and attachment. It is obvious that there is a network that surrounds foster parents that affects the attachment process between foster parent and child. This network can be a resource for help when it comes to the foster parent creating and maintaining a relationship with their foster child. The network can also be a source of stress for foster parents, especially when the people in the network are not all working together. This theme clearly affects the relationship between foster child and foster parent. Another theme that affects the relationship between foster parent and foster child is age.

**Age**

Several participants stated that they found it easier to attach to foster children of certain ages and that they were drawn to the characteristics of certain children based on age. Since they had a leaning interest in, for example, toddlers, it was easier for them to attach to children in the toddler stages. For example, one foster mother discussed how her favorite ages were eight and nine, “I think their age makes a difference, you know, they were eight turning nine, which, um, personally is my favorite age.”

She also had previous experiences working with younger children and she was interested in the growth and development for that age. In regards to her current placement, she stated:
When (Foster Child) was first presented to me, she was 8 then she became 9, oh wait she’s 10 and she’s turning 11, like one of the ages, I specifically said I really wasn’t, really keen on, was that pre-pubescent, pubescent time. Um, I’ve done, I’ve coached junior high girls softball, done summer camp at that age, and that is a really hard age for me, as an adult, to deal with those kids, and you know, some people do it wonderfully, but it’s a struggle for me.

Another foster mother stated that the nature of her interactions was often shaped by the age of the foster child:

With a baby, it’s more nurturing and more loving and more, and then with a teenager, you got so much. They won’t let you do that kind of stuff. But um, it’s, and it’s more like a friendship type of thing with the older kids.

She also gave an example of how she interacted with her 17 year old foster child. When she first met her foster daughter, she didn’t talk much, but then she told her that she was a hair dresser and that broke the ice: “She’s 17 in high school, so hair and makeup, all that stuff kind of, just help, break the ice.”

Another foster mother disclosed that with her older foster daughter, instead of asking what she learned at school, she would ask for a trivia fact of the day. Then they would have a conversation about that trivia fact for the day. Whereas, with her younger foster children, asking them what they learned at school still brought about a discussion about their school day. This foster mother was drawn to younger children and struggled
as a teacher and coach with older children. With her older foster child, when no
discussion happened, she seemed frustrated and annoyed.

In regards to the younger children attaching more easily than older children, One
foster mother disclosed her experience when she fostered two siblings:

Like (Younger Foster Child), kind of moved in, assimilated very easily, you
know, we were, we were mom and dad, and that was it, there was no looking
back. The older one had more issues.

Another foster mother said that younger and older children attach based on their
needs: “The little ones attach much easier because they depend on you so much more.”
She had a foster child who was 13 when he came into her home, and he was very
parentified and therefore resentful of any parenting she and her husband tried to do.

I think for a long time, he didn’t put out there because he was afraid, you know, I
mean, we knew that, but you know, it’s hard to parent a child that doesn’t want to
accept any type of affection or parenting.

This also made it hard for the foster parents to create a relationship and therefore bond to
the child. It becomes hard for both foster parent and foster child when the foster child is
being moved to another placement or to their biological parents’ home. For example, one
foster parent disclosed her experience with dropping off her first three foster children at
their grandparents’ house because they were adopting them. This set of siblings was with
her for eight months and the grandparents decided to adopt them. She said “The day I put
the littlest one in the van, he was holding onto my coat, begging me, begging me, not to
let him go, so, it's been a process.” The month after this event, she had cried every time she walked past their room. The littlest one clearly attached to her and she attached to him as well as to his other siblings, but she had to let go.

Clearly, age played a factor in the foster parent’s attachment experience. The younger ones were “easier” to attach to while the older ones, as one foster parent said, it’s a different kind of attachment. Another demographic characteristic that affected attachment was gender.

**Gender**

For the participants in this study, gender also appeared to play a significant part in the attachment process. First, foster mothers had different experiences of attachment than foster fathers, depending on the gender of the child. One of the reasons for this is the previous experience of the foster child, which will be discussed as a theme later in the chapter. Another way gender manifested was with the specific needs of the child, for example, if the child was recommended by a caseworker to not be put in a home with a male figure. A third way gender influenced attachment was with the interaction between the gender of the foster parent and the foster child.

In regards to the specific needs of the child, the agency can request that a child be placed in a specific type of home. For example, one foster mother was a single foster parent with an all-girl household, so she was able to take care of her most recent foster care placement. According to her and a conversation she had with her foster child’s previous placement:
She’s so terrified of men that like, the, you know, the woman would go in the bathroom and she’d be sitting outside the door like talking through the door, like, ‘Are you coming out yet? Are you almost done?’ Like, and it would just drive them nuts.

This affected the state of mind of the parents and their ability to attach to this foster child because of her behavior. The foster parents also had specific experiences in regards to attachment based on their gender. For example, a foster father stated:

I think a lot from my perspective, being you know, this quote unquote ‘father-figure,’ um, it’s a lot different for the kids because all of ‘em came from families that had mothers and the father so a lot of time absent or non-existent.

He goes onto say that the children have a harder time attaching to him because they never had that father figure. Another foster parent also discussed the lack of a father figure and how it affected the children:

Usually, it’s the woman that they go towards because usually the men are either not home, um, you know, they’re usually the, for like, they’re still the breadwinners in some family dynamics, or they’re not involved at all.

This affects the foster parents because the foster fathers still want to be involved in their foster child’s life. For example, another foster parent went into the experience of her husband trying to attach to one of their foster children:

For my husband, you know, watching him try so hard to attach to her, I mean, he would just go above and beyond, and he would like, leave little flowers, and he
would write her notes and, you know, he would just, he would just try so hard to, you know, pay extra attention to her and, it killed him that she just wouldn’t have anything to do with him.

She also stated that her foster children, now her adopted children, always wanted to have a mother figure in their life, so that also affected the attachment process for both foster parent and child.

Clearly, gender of the foster parents plays a role in how their foster children react to them and in turn how foster parents create and maintain a relationship with their foster children. In a few of the examples, the foster parents mentioned how their foster children attached more easily to women based on their previous experiences, which is the next theme that was found in the literature.

**Previous Experiences**

The previous experiences of foster parents and foster children also impacted the experience of attachment. Some foster children were abused by men and therefore attached more easily to the foster mothers. At the same time, some participants have had previous experiences with children that influenced their parenting strategies, what ages of foster children they were most comfortable with, when to take a break from fostering, as well as their reason for being a foster parent.

The foster child’s previous experiences often affected how they behaved, and that behavior appeared to affect the foster parents’ attachment experience. For example, one foster mother described her experience of Reactive Attachment Disorder with two of her
foster children as if they saw people as objects because of their experiences with their mother:

There’s another foster child, where he, a younger one, who kind of had uh, and I think his sibling sister did as well, ‘cause they, they just seemed to have gone through their mom’s relationships and it just didn’t matter to them, a person was just another object to them, so.

According to the foster mother, their biological mother would have sexual relations with men in front of them. The transient nature of their mother’s relationships taught them that people were disposable. This was a behavior that affected how the foster parents created a relationship with them and how they interacted with them and therefore, the child’s and the foster parents’ experience of attachment.

Another foster mother described a situation where she learned about her foster child’s reason for being in the foster care system:

She like poured hot sauce all over him, it was, yea, it was horrible, so he told me that and then he said, um, he said to me, he said, ‘My brother and sister, my brother and sister blame me for my mother not having any of us.’

In this moment, she told her foster child that it was not his fault and told him that she would talk with his siblings so that they would not blame him anymore. The reaction of the child was, “You’d, you’d do that?” This conversation became a moment where foster mother and foster son created a more meaningful relationship. She was able to
show him that she cared about him and that it really was not his fault, which brought down a barrier between foster mother and child.

The number of placements that a child had experienced in the foster care system also appeared to influence the attachment experience. As was stated in Chapter 2, multiple placements can be a factor in foster children’s behavioral issues (Ryan, Testa, & Zhai, 2008; Wotherspoon, O’Neill, & Pirie, 2008). One foster parent talked about how her older foster child had a harder time opening up to her and her husband:

She had—so my four year old had a harder time, um, attaching, she, she had been moved, we were her third home in a year, and so, she, she really um, you know, was unsure of what was going on and needed a lot of assurance and, um, needed to be reminded that she was loved, and really looked for our love and affection, you know, as a security.

She also talked about this foster child and how it took her longer to attach to the foster father. The foster parents are the ones who are living with these behaviors and who are helping the children through their issues due to the trauma of their past experiences. Their experience of attachment is being altered because of the behaviors that their children exhibit. For this foster father, he struggled to have his foster daughter attach to him because of his gender and he wanted to attach to this child.

Another example of a foster child’s previous experience is with what their life was like before becoming a part of the foster care system. One single foster mother stated:
The twins came to me in a very um, they were, they had moved a couple of times and had lived a very transient life, dealing with a lot of stuff, and um, I was, that was my first placement.

She went on to talk about how they appreciated the stability of their foster home as opposed to the transient life of hotels and sleeping in cars. Her foster children were able to feel comfortable in her home because of its consistency. They also were able to open up to her and trust her, helping her create a relationship with them. In regards to her other foster child, she talked about the cycle of risk factors and the role models in that child’s life, “You look at the family tree and nearly every single person has been, served time in jail. Um, she doesn’t have a lot of good, healthy role models.” She also stated that she wanted to be in her foster child’s life in whatever capacity she could be so that her foster child does have a good role model. In this foster parent’s case, attachment as a social bond between foster parent and child manifested in any way it could depending on the situation. This foster mother also talked about her reservations about adoption and how she had her reservations about adopting, but she still wanted to be a part of her foster child’s life.

Another way foster children and foster parents’ previous experience plays a role in the attachment experience of foster parents is with the foster child’s previous experience of caregivers and their consistency. With her first two foster children, their mom being out of the picture was confusing for them. On the one hand, the mother was physically assaultive to one of the foster children, so they knew they didn’t have to
worry, but on the other hand, they knew their mother. She was consistently with them, even though their lives were going from home to home and car to car:

I think they had a harder time with mom being gone and then me stepping into this role on my own, like, ‘Well, what makes you think that you’re gonna be able to do it, huh? Huh? Huh?’ You know, that kind of testing.

For this foster parent, that testing created a tension between her and her foster children. Her attachment to them, at first, was tough, because even though she was open to them, their behavior made it hard for her to create a relationship.

One foster mother discussed the permanency plan for her foster children. This affected the relationship in that one was 17 and aging out of the foster care system, while the other was up for adoption. When a foster parent is told of the status of the child and the status of the parental rights of the biological parents, it affects how the parent creates and maintains a relationship with the foster child. This will be seen in more depth in the theme of barriers to attachment.

Another example of previous caretakers and the experience of foster children is when children are parentified so much so that they do not know how to be a child. One foster mother talked about how her husband and one of their foster children bonded:

When he came to us, the only relationship he had had with a man, their home was so regimented, they didn’t know how to play either. At, you know, at noon time, he watched TV for an hour, at 1:00 you did this, at 2:00 you did this. He, he didn’t have any idea what it was to just go play, and him and my husband developed
such a bond, that, it’s up to this day, when we go visit them or they come to our house, nobody else exists for those two.

She also had a five year old who had been parentified since he took care of his 18 month old and 3 month old siblings:

He thought it was his fault if the baby cried, at five, he would get up in the morning, wa—, get up, wash himself, brush his teeth, get dressed, fold his pajamas on his bed, make his bed, and come out to the kitchen. I think he would have made breakfast for himself if he could have reached anything, he was so detached from being a child and having, wanting any emotion let in, it was scary, because when he did want emotion, it was huge outbursts.

She also had an experience with a set of three siblings where they had a negative experience with both their mother and their father. They were distant from her and her husband, so their past experience might explain why:

They were beaten by their father and held under water as a discipline tactic. So, they did not react to him very well at first, until they knew he was safe, they, they definitely, and their mother had abandoned them, so I think that’s why they were so distant.

When these siblings came to her house, they kept to themselves for the first couple of days. Another foster mother’s statement about how foster children are affected by their previous experiences attests to this example as well: “Cause they don’t know how to treat you, like, they don’t know, they don’t know if you’re gonna hit ‘em or, or whatever
happened to them.” Even though a foster parent might come into the situation with certain strategies to help children get used to their new living arrangement, there are still a lot of issues the children are going through and foster parents need to keep that in mind when creating a relationship with their foster children.

One foster parent also told a story about how the youngest boy of the set of siblings who were beaten by their father figured out that her husband was safe. The youngest boy asked for her to help him take a bath. This was before he had told her about the abuse by the father and how he used water as a discipline tactic.

I said, ‘Okay, can I wash your hair?’ And he said yeah, and I went to pour water over his head, and he absolutely lost it. Not realizing his dad used to hold him under water, so I was like, ‘Okay, okay,’ and he was like, ‘I want (Foster Father),’ for some reason, he had figured out in those couple of days that he was safe.

In addition, some past experiences of the foster child affected the mealtime rituals of the foster parents and their families. One foster parent stated:

The 13 year old boy we had, never had dinner at a table. Never sat down for dinner, his mother didn’t cook. It was always take-out, uh, they didn’t make good food choices, so the first thing was, we ate dinner at night all together.

In this instance, mealtime was the time for everyone to talk about their day and relax together. Also, the first dinner with the new foster child is also the time to lay down some of the rules of the house so that they know what the boundaries are. Mealtime was a place, especially for the foster children, to feel a sense of security and safety as well as
consistency. For some participants, mealtime was a ritual and a time for everyone to eat together. By having this ritual, foster children were able to get used to a routine, allowing them to trust their surroundings as well as their foster parents.

Another aspect of previous experience in regards to the foster parent is the reason why the foster parent became a foster parent in the first place. One foster parent stated:

I didn’t become a foster parent with the idea that I wanted to adopt children. I really became a foster parent because um, in my trajectory of life, I said, you know, I have a home, and I know that children need a place in this interim when they’re separated from their parents and they need a safe place to be and I have a home and I have love, you know.

For another foster parent couple, they went into foster care only to foster children temporarily. However, their first placement made them rethink their reason temporarily:

We had said when we went into it, we were never gonna adopt. We were only gonna foster. And I think I fell in love with them the day they walked in.

She discussed further along how no other foster child she has taken care of has had that same effect on her.

A foster father also stated his reason for being a foster parent:

I really wanna do this. I really wanna be a foster parent, I wanna be able to continue to provide good examples for kids and a lot of these kids need to know that good things are out there in the community, not just bad things, so.
Another foster parent had the intention of fostering only school age children, but then she received a ten month old and “We never intended to foster younger children, just school age children, so when we did get her, it was almost, it was almost, instantly, I was her mommy.” She actually ended up adopting this child.

Another aspect of the foster parent experience that is related to age, gender, and previous experience, is creating and maintaining a relationship with foster children.

Creating/Maintaining the Relationship

The strategies and activities foster parents do when foster children come to their home and what foster parents do to keep their relationship with their foster children once they are reunited with their biological parents or adopted also appeared to affect the attachment process for foster parents.

Several participants use “ice breakers” so that the foster child will feel more comfortable. These activities seemed to help in the attachment process because the children were able to become more comfortable around their foster parents, allowing boundaries to be fall and a relationship to be created. For example, one foster mother met her foster child on a lunch outing with her and her caseworker:

She was very quiet and tough, and “You’re not gonna get me to talk” kind of person, and um, I told her I was a hairdresser and that changed it right away. Um, ‘cause you could tell she wanted to get her hair done and so, that was kind of like the ice breaker with her.
A foster father stated that he would try to make the foster children feel as comfortable as possible and find out what their favorite food was, what they liked to do, what they were interested in, etc., “Inevitably, all the boys loved to play baseball, so we would get the whiffle ball and bat out, set the teams up, and you know, and made sure they hit, and whatever it was, was a homerun.” Other activities that they did included anything where the foster children could feel successful. He also invited the foster children into family discussions to help them feel more comfortable with everyone. If someone was quiet, he would bring them into the conversation and vice versa, “If somebody’s really noisy, which was more our problem, you just say, ‘It’s time, let somebody else talk.’ And things like that.”

Another foster mother talked about a few activities that she did with the new foster children. For example, the first thing they did was go to the supermarket. She asked the foster children to show her what they like to eat and she showed them something she likes to eat, and then they try one new thing. Another activity that the whole family did was, every other weekend, they would visit their father’s parents. The new foster children are brought on this get together at least by the second week they are there and they get to meet everyone in the family.

Another foster mother talked about the relationship climate she tried to create, “Listening to them. Encouraging them to talk, not to divulge, but just to, to talk and feel easy to talk, we’re not you know, criticizing and uh judging. I think that was the most important thing.”
Another foster mother discussed how she would spend lot of time with her foster children as a family as well as individually. She also talked about how Friday was their movie night and there always was a game night during the week. On weekends, they would hike or walk and spend time together. She also talked about how everyone in the family would go to an event or activity that someone in the family was doing, “We’re a family, so if one kid’s got swim, we’re all going to swim lessons and you know, if the other one’s going to gymnastics then we’re all heading out there, and, you know, they like it.”

Another foster parent talked about creating a relationship through modeling behaviors. They also used mealtimes as a way to create a relationship since that was the time when the family was together and would talk about the highs and the lows of the day. He tried to develop a personal relationship with each child in a sibling group:

I always like to take each one of ’em out, individually and kind of develop that little personal relationship with them, you know, and say, ‘Hey, this is what we have in common’ and that type of, or that type of situation.

Another foster parent would hold the children if they were crying when they first came in. She had an interesting conversation with one of her foster children that helped ease him into his new living arrangement:

He was like, ‘I just wanna go home.’ I’m like, ‘Well do you know why kids come to stay with me?’ And he’s like, ‘No.’ And I was like, ‘Well, they come to stay with me because no one can hurt you here,’ and he was like, ‘Hmmmm…’, so that
was kind of good, like I think it helped him calm down, like, ‘Okay, no one’s gonna hurt me here.’

She also used to take the new foster children out to dinner when they first arrived, but one of her foster children was so scared of being in public most likely due to the fact that her birth mother never took her out, she decided to stay at the house the first night the foster children arrived.

Another foster parent said that she and her husband look for cues from the foster children. “Do they want to talk? Do they not want to talk? Do they need some space? Can we give that to them?” For their 13 year old foster child, they gave him space for the first twenty four hours and then the next night told him to come to the dinner table so they could lay out the rules and expectations.

For another foster mother, she met her foster children before they moved in with her. She was able to transition them into her home. First, she and the foster children did outdoor activities in the community, then they came to her home for dinner, then there was a sleep over to see how it went, and then they moved in with her. The creating of the relationship between foster parent and foster child sets the tone for the rest of the relationship. In this case, the foster children are slowly integrated into the life of the foster parent. For other foster parents, their foster children are brought to them within twenty four hours’ notice. The icebreakers and activities the foster parents do with their foster children create an opportunity for foster children to open up and let down their boundaries. The participants pointed out that these boundaries are usually put up because of the foster child’s past experiences of trauma as well as multiple placements. Foster
children let those boundaries down when they were comfortable and trusted their foster parents, which also made it easier for the foster parents to attach.

Participants also had mixed feelings about continuing to maintain their relationships with their foster children after they left them. They also had mixed feelings about how important maintaining the relationship post-placement is to the attachment process.

The yes part of it would be, if they’re in foster care and the, and the foster family who has them is willing to do that because you wanna see, you wanna make sure that the transition in between foster families is showed and that, um, even though you may not even know the foster family, to give them the perception that these are good friends of ours and you’ll always be in good hands.

A foster father discussed how maintaining a relationship with the children is dependent on their new family. In his experience, some of his foster children have moved to different states and some, he and his wife do not know where they are, but they try to keep a connection wherever possible. He also talked about how older children might benefit from a maintained connection because “all the community connection that that child could have would be excellent.”

A foster mother discussed her reason for maintaining the relationship by saying, “They played a really important part in my life, uh for that year that they were with me.” She also states that kids need to know that adults care. Another foster mother agreed
along the lines of “I think kids can not have enough people in their life that they can depend on and go to.”

For another foster mother, maintaining the relationship depends on the situation and who the foster children are with and whether those parents, foster, adoptive, or biological parents, are okay with maintaining the relationship. In regards to her first set of three foster children, they were adopted by their grandparents who:

They thought it was important that the kids learn that every time you love somebody, it doesn’t have to end, that it can change, but not end. But they were very limited, allowing our contact from the beginning because they were trying to bond to them and they were still holding onto us.

The lesson from this statement that relationships change, but do not end, is significant for foster children who experience multiple placements as well as trauma. Bowlby (1982a) stated that children will behave in a certain way, usually with fear, after they are moved several times from place to place because they do not want to be hurt again. The system, in a way, teaches these children that relationships are temporary, even though that is not the intention. The foster parents and the new parental figures are modeling the way relationships work, and for some children, learning that relationships change but do not end can help them through their new placement. By being open to a new relationship, the foster parents can attach to their foster children more easily.

The third property of this theme is the ways in which foster parents maintain a relationship with their former foster children. Several foster parents who do maintain a
relationship with their former foster children state that they keep in touch through Facebook, phone calls, home visits, and letters. For example, one foster parent had family dinner on Saturday’s and her former foster child came and visited her on Saturday’s. Another foster parent kept in touch with his foster kids usually on the phone and sometimes through cards and letters. One of his former foster children was planning to visit for Thanksgiving.

A single foster mother also kept in touch with her previous foster children through phone calls:

I just found (Foster Child)’s wallet that he had thrown in a fit of anger, that flew behind the refrigerator, and our refrigerator’s I a very um, very difficult spot and I—long story short, I finally got this wallet and I was so thrilled and like that would come up in conversation.

Another foster mother stated that her previous foster daughter found her on Facebook and used that to keep in contact:

I have a foster child now who left my home who has found me on Facebook and keeps sending me messages. Now, I know her family isn’t totally comfortable with that contact, so I don’t accept her as a friend. I do answer, like she says, ‘How are you?’ Or, ‘Am I gonna get to see you?’ And I say, ‘Gee, I really don’t know. How’s school?’ You know, I try to redirect it to something positive, but I try to keep connections.
Another foster mother stated that most her former foster children who have been reunified still come up and spend time with her current foster child and babysit. She also keeps in touch via phone calls and Facebook and she invites them over for dinner.

For another foster mother, Facebook and phone calls are also used. For her, there are monthly conversations and she states, “it’s always nice to hear from them and they know I want to hear from them, so it’s nice. And now they’re married or, you know, and raising children.” She makes sure she remembers her former foster child’s birthdays and birthdays of their children. She also stated, “I think the connection mostly, is that, you know, they wanna know that you’re thinking about them.”

One of the reasons that foster parents give for not maintaining the relationship is due to the birth parents. One foster parent stated that “A lot of the birth parents when they get the kids back, they want to kind of forget that it ever happened, you know, that they ever lost their kids, and of course we’re a constant reminder.”

A foster father also stated that maintaining a relationship when the foster child is moving to a permanent home is not necessarily a good idea because, “It’s probably best for that permanent family to, you know, just take that, take their uh permanent family and just kind of um, move on and, and uh create their lives together at that point.” Another foster father also stated that keeping a connection might not be a good idea because of interfering with the new foster family, not just a permanent placement:
I try to keep the connection, and I believe in keeping somewhat of a connection, not necessarily too strong of one because you don’t want to interfere with the new foster family, or the biological family, um, unless, it’s like a resource situation.”

He also talked about how, with younger children, it might not be positive for them to maintain the relationship:

I don’t think it works well to have multiple moms and multiple dads and, and I think there, just, that family adopted that child needs to find the rhythm of that family, and I think they’ll do best in that situation.

Even though foster parents might not have been able to maintain a relationship with their foster children, they were still hurt and going through losing someone special in their lives. This leads into the next theme, the language of attachment.

**The Language of Attachment**

Throughout the interviews, the intensity of the attachment experience and the way foster parents described their feelings about attaching, or not attaching, to their foster children, appeared to have a specific language. The actual words that the foster parents use to describe their relationship with their foster children appeared to be important in describing the feelings that foster parents have about attachment.

Some participants called the attachment process “automatic” and “instant.” One foster mother stated:
It's an instant attachment. It doesn't matter where they come from, it's almost like, they're yours automatically and you love them to death no matter what happened or what kind of behaviors they have or what they do or what they say, or, you automatically just love them.

Another way the foster parents' language manifests is when describing the relationship with their foster children. For example, one foster mother had a foster daughter who was defiant and had some behavioral issues and she stated that “she has totally grown on me now.” She also talked about why she adopted one of her foster children:

I already love her, like she’s, she’s been with me a year and I know that I can, you know, take care of her and advocate for her and, so I should keep her, so I did and I felt so relieved when I kept her.

Another foster parent also discussed her relationship with any foster child that comes into her home and why she wanted foster parents to be open:

I love them, so um, I’m always accepting of any foster child and uh, then you get to know them more and more and you get to really like them, they become part of your family. You’ve gotta be open, in terms of your home, so that you can attach to a child.

Another foster parent used the phrase, “fell for” when referring to her foster child: “Like with (Foster Child), we fell for him. We fell totally in love with him.”
language shows that the relationship between foster parent and foster child consists of love, not just caring.

For one foster mother, she was scared about what was going to happen with her foster child so much so that she had bad dreams. In remembering this experience, she stated, “I was so scared. I don’t think I could stand losing her.”

Foster parents also used the words “hard” and “tough” when referring to creating and maintaining a relationship with certain foster children. For example, one foster parent stated that, “It’s hard to parent a child that doesn’t want to accept any type of affection or parenting.”

Another foster parent labeled her relationship with her foster daughter as an older sister relationship. “I used to tell her that, that I’m not here to be your mother, I’m really not. I’m not gonna let you do stupid things, though. Um, I’m going to give you advice.”

One single foster mother called her relationship with her first foster children a “tumultuous relationship. However, the caveat being that um, we formed a really tight relationship.”

Another feeling participants often described throughout the interviews was the “I’m not going to give up” attitude. This referred to their persistence in loving and protecting their foster children. For example, when one foster mother found out one of her foster children was sexualized and could be a predator, she said:

But I said, you know, ‘I don’t, my husband and I aren’t willing to just give up on him,’ I mean, we had already, we had already attached to him. We, I mean, his
reactive attachment disorder, we had it at, we had it, I mean, we had everything laid out, we had rules, we had um, the morning routines.

In this case, the attachment experience was tough on the foster parents. This couple was forced to move their foster child to a new home because of his sexualized behaviors. Even though they attached to him and they had the morning routines down to counteract RAD, they had to give up. As foster parents, who want to help make a difference, they were forced to break this relationship.

Another foster parent also had the mantra of never giving up. She looked at foster children as children, who no matter what behaviors, issues, or problems they have, “they can change, they can attach, they just don’t know how and it’s too bad.” For the participants, they were the people in the foster child’s life that helped them learn how to attach and create long-lasting, healthy relationships. The attachment experience of foster parents is tough when a child does not want to attach or does not know how to.

The second property of this theme is the names foster parents used to label their relationship with their foster children. For one foster parent, she had her foster children call her whatever they wanted, “They call me whatever. But they usually, after like a month or two, they just call me mom.” She also recalled a foster mom who had her foster children call her “Nan” because she is older and because when they go home, they can still have their Nan.

One foster father had his foster children call him and his wife, “Uncle” and “Auntie.” His reasoning was much like Nan from the other foster parent:
They have a mom and dad, and um, they might be, you know, in some cases we became their mom and dad, but in other cases we didn’t want to um usurp that um, from them, so, and figured, they always can have us as an auntie and an uncle.

Another foster father talked about how multiple moms and dads could be confusing for a child, so having nicknames can help the parents still stay in their foster child’s life and can help the foster child learn about the different kinds of relationships that can form. As was stated previously, relationships don’t end, but they do change.

Most of the foster parents in the interviews used words like “tough” and “hard” when describing their experiences of watching their foster children leave.

One foster parent called the situation “tough” when the Department of Children, Youth, and Families (DCYF) came to her house to bring her foster child to his father’s house. As her foster child was leaving, she was waving goodbye along with her daughters, “I turn around, I’m like balling ‘cause I’m like, ‘cause you know, once he’s like in the case worker’s car, I know he’s not coming back in.” She went on to say,

I don’t know, like, you can’t help but love them. They’re these little kids who never did anything wrong as far as like, in the grand scheme of things, like, all kids do bad things as far as like write on walls or something, but it’s just, these kids, like, have such a rough start in life, such a crappy life, so, it’s kinda tough ‘cause I think, you get attached and you love ‘em but there’s also that, well, I’m
scared that they won’t be treated right again, you know? I guess, you kinda always want to protect ‘em and you can’t once they leave. So, that’s tough.

Another foster parent also talked about their experience with letting the foster children go. In this case, the word “bother” was used as a descriptor of attachment rather than tough or hard:

When I see every kid leave, you know, it would bother me. You hope that whether their life at home is gonna get any better, or they’re gonna be back in foster care, or could I have done something different? You know, to make them realize that this is the way it’s supposed to be, you know.

Another foster mother disclosed that letting her foster child go to another home was the hardest thing for her:

It was the most difficult thing because we kept him for an additional, we actually at that point, had him for two, two and a half weeks and then, we kept him for two more weeks until they could find a placement for him.

In addition, a foster mother described the letting go process really hard and difficult for two of her foster children:

It was really hard, and G-d, the two of us stood in the drive way when I brought him to his new home and cried our eyes out, it was horrible, but it’s difficult. The two year old, the little boy who came to us at almost two, and then left us when he was four, that was another situation that was really hard, like I just had a horrible time letting that little boy go.
Another foster mother discussed what happened when she had to let her first set of siblings go to their grandparents' house:

When I realized that the grandparents were gonna adopt them, which we said would be first option, you know, family adoption, I died. They were with me eight months. The day they left my house, I cried my heart out. I cried for a month every time I walked by their room.

Obviously, the attachment experience for this foster mother became hard when her foster children were adopted by their grandparents.

Another foster parent talked about the letting go process and how it is necessary for foster parents to let go and be okay with the outcome of any foster child’s situation. According to him, a lot of foster parents are not happy with court decisions when the child is sent to their birth parents:

You know, they had a level of support here, but now they’re going back into the situation and it hasn’t improved, and what are they, and I think of the hardest things for foster parents to do is, you know, it’s about the kids and yet they go home at a lower level of care and you have to be okay with that.

For some foster parents, some foster children cases are so hard to go through that they end up taking a break from foster parenting. One foster parent said that she was so attached to her foster child that left because of his sexualized behaviors that she and her family had to stop fostering while they reflected on the experience and on whether or not
they could handle fostering again. This leads into the next theme which is barriers to attachment.

**Barriers to Attachment**

For several foster parents, there were barriers to attaching to their foster children, including how hard for them it was to let go of their foster children, behavioral issues the foster children have, and foster parents' state of mind with certain age groups.

One foster father disclosed that he did guard himself from becoming too attached to a foster child:

I don’t say I’m guarded about it, but I think uh, I do stay and keep that part of my heart detached a little bit from uh fully accepting them in as a family member as much as you uh you would with a child that you were going to, you knew were going to try and adopt, so it um, but my approach is always to make as big a difference in their life as you can in the period of time that they’re here and provide with them, provide for them the things they probably lacked in their lives.

One foster mother also talks about how she guards herself from attaching too much because of the birth parents and foster parents are supposed to help the children reunify with their birth parents:

You have to treat them like your own, and you do, but there’s a part of you that like, if you don’t hold back a little bit as far as that, like you’ll get so involved and you need to think, like you have to treat ‘em like your own and they live with you and stuff, but, in regards to their parents, like, you’re still not their parents.
She went on to say that reunification is the first option, so for the first year, that is the goal for the foster child, so you can’t be working against the birth parents. “I think there’s a part, emotionally, you have to kinda hold back to not get too attached because otherwise it just kills you when they leave.”

Barriers to attachment also appear when the child has been moved multiple times to multiple placements. One foster mother discussed her experience with one of her foster children who had been uprooted from her previous foster parent to live with her siblings:

She so desperately wanted to attach to me, and I had to keep somewhat of a distance because I knew that they weren’t going to stay and I didn’t want her to go through that again, so it’s hard. It’s like you wanna give love, but you can’t, you don’t want to make it so painful again for them, it was a very thin line to walk with them.

Another way the barriers of attachment manifest is with behavioral issues that foster children have. One foster mother, for example, stated that it took a while for her to warm up to her foster child because of her standoffish and aggressive behavior. “It’s definitely easier to attach to the kids that aren’t as I don’t know, defiant, I guess. Yeah, or destructive.” However, she does state, “But eventually, they all win you over. Even if it takes ‘em like a few weeks to do it.”

Another foster mother also talked about how her foster child’s behavioral issues at 11, were making her really think about adopting her or not based on what might happen
in her teenage years. Another reason why she was not willing to adopt and attach that way to foster children was, because, as of the interview, she was a single foster parent:

I had a lot of home damage, I’ve been hit, I’ve, you know, uh, and I just don’t see how that would work in the future. Like, I’m a single person, you know, and um, and I think you need that help, like I really think you need some back up when you have a kid that intense.

Another barrier for her is the feeling she thinks one is supposed to have in order for a parent-child, mom-daughter relationship to be formed, “I’m attached to her in a, in a caring, loving way, but not like that bond that you, I think, you’re supposed to feel as a parent and a child.”

In the case of adoption and attaching that way, she said this was a barrier in that all the services she received would not be available to her anymore. Therefore, she would not be able to protect and keep her foster daughter safe.

For another foster mother, a barrier to attachment was the foster child’s perception of why she was fostering. Her foster daughter thought that she was a foster parent for the money, so when they had a conversation about the facts of how much foster parents receive, this helped break that barrier and helped the child trust her foster parent, which in turn, allowed for their relationship to solidify.
Other Themes

Along with the other themes already discussed, there were some themes that less than half of the foster parents talked about, but were still interesting to note. These other themes are: the other kids in the family and children’s rights.

Other Kids in the Family

There are two properties of this theme. The first property is that other children in the foster family affected the process of attachment because some foster parents saw them as the welcoming committee. For example, one foster mother received a child who was at a similar age as her biological son, so they were able to hang out and play videogames together.

Another foster mother was able to recruit her daughter to help make the new foster child feel at home when she received a call from the agency who said that she could have a foster child in her home that night. However, she did not have enough time to buy a bed that day, “So I call home to (Foster Child), my oldest daughter and I’m like, ‘(Foster Child), can you sleep on the couch tonight? I need a bed.’ She’s like, ‘Sure.’” In regards to the welcoming committee role of her biological and adoptive daughter, she stated:

‘Cause they’ll all be playing or something or out on the swings or something and then they can talk and it’s not like there’s an adult there, you know, and if I’m cooking they’ll all, they could play a game or something and, so it’s kind of, the other kids help a lot.
One foster father stated, "Some of the key players really were our, our other kids." He also talked about how he had to get everyone on board about the foster care aspect of the home life. For example, his biological son would begin to get annoyed that his foster brother would be allowed to get away with something and he would not be able to get away with the same thing. He also said that he would have a conversation with his biological son that would go like this:

"(Biological Child), you’ve been with us for how many years?” “Uh, 10.” “And (Foster Child) has been with us how long?” “3 months.” “Alright, so there are things we expect of you that we don’t expect of him,” but he had, he had to buy into the plan or he would begin to resent (Foster Child).

According to him, once his kids were on board, they helped his job become easier and they became the welcoming committee for every new foster child that came into their house.

Another foster mother found her adoptive children to be models for the new foster children because they showed the new foster children that this was a safe home and they made them feel more comfortable. She stated:

When (Foster Child) and (Foster Child) moved in with us, (Adopted Child) was so excited, she even wanted to sleep in their room with them. And I think that was a huge comfort to them because I think kids just naturally relate to each other and if, you know, they see that (Adopted Child) is here and healthy and happy and
safe, you know, that they know that they’re kind of gonna be safe too and hopefully healthy and happy.

The second property of this theme is that some foster parents had to think about the fostering process’ effects on their biological and adopted children. For one foster mother, she had to protect her son from her foster child. After her foster child was placed in another home due to his sexualized behavior, she still maintained a relationship with his new foster parents. At one point, they asked her to do respite with this foster child because they had a wedding to go to, so she asked her biological son if they could have him over for the duration of the winter, “He said, ‘No mommy,’ he said, ‘he’ll hurt me,’ and that’s when I realized how bad, and it wasn’t something that was obvious though, it was, you know, little things, like when they went to school together.”

Another foster mother also had to think about the effect of having different children in and out of the house on her children. When, for example, one of her foster children left their home, it affected her biological daughter and adopted daughter, “This is like their friend, you know, that they’ve been playing with for months and that has lived with us for months, you know, you eat meals together and everything else.”

Another foster mother also had to explain to her biological daughter why her foster daughter was treated differently. For example, her foster daughter had more doctors’ appointments and missed school a lot, so her biological daughter in a way, resented that and did not understand why she was being treated differently. When her biological daughter asked questions about her foster sister being in the doctor’s office all night, she told her:
It's because they were looking at her brain because there's abnormal activity.

Like, it's not a cake walk, you know? And, but how do you explain that to a seven year old?

Children’s Rights

Another theme that was interesting, but not found in a majority of the foster parent interviews was children’s rights. In the foster care system, children do not have rights at all. Their voices need to be heard, and in some cases, the foster parents can be a great asset for the child to have their voice heard. Another foster parent states that children in the foster care system do not have enough rights, “The rights are completely given to the parents and not the kids.” She also goes on to say:

Somebody needs to stand up for the rights of the children because parents come in and out of their lives like a revolving door and it messes the kids up and they pay for it for the next seventy, eighty years of their lives.

The behavioral issues children exhibit because of the trauma they experience and the relationships between them and their biological parents are experienced by their foster parents. These behavioral issues are barriers to attachment for the foster parents. However, if foster parents and foster children had a louder voice in the foster care system, changes could be made so that helps them both as well as their relationship with each other.

These results will be examined more thoroughly in regards to the three research questions in the next chapter.
CHAPTER IV: DISCUSSION

The purpose of this study was to explore the attachment experience of foster parents with their foster children. There were three research questions that were explored. As a result of the study, it was found that foster parents have a unique attachment experience because of the nature of and the impermanence of foster care and because of the people and networks involved in the foster parent-child relationship. The themes that were found in the data reinforced this idea. In order to discuss the meaningfulness of the findings in the context of past and future research, the research questions will be examined.

Research Question 1: What is the experience of attachment?

Based on the results, the experience of attachment for foster parents is complex. For those whose foster child leaves for their biological home or another foster home, it was often very hard on the foster parents. Even though foster care is temporary and agencies encouraged some of the foster parents not to attach, it happened anyway. The foster parents in this study attached to their foster children just as much as their foster children attached to them.

Language of Attachment

Some foster parents described their experience of attachment as “instant” and “automatic.” Other foster parents described their experience of attachment as “hard” and “tough” when their foster child had difficult behavioral issues.
Other participants had their foster children call them different names so that when they would be moved to another home or adopted by someone else, they could always have “Auntie” and “Uncle.” This helped teach the children that relationships can change, but that they don’t end. It also allowed for the new foster parents or adoptive parents to create their own relationship with the children and not feel that the foster parents were intruding on their relationship.

The statements of letting go and moving on also helped answer the question about the experience of attachment. Clearly, the foster parents were attached to their foster children and it was “hard” to see them leave. One foster parent even said that she “died” when her foster children had to leave.

The experience of attachment for these foster parents appears to be very real. It occurs, even if foster care agencies do not want it to and want to discourage it from happening. These children are living with these foster parents and are being taken care of by them, so it is easy to see how the foster parents come to love and care for these children. They become attached to them, so obviously it is hard, as a foster parent, to see these children go to another home.

**Creating/Maintaining the Relationship**

Along with the language of attachment, the process through which the foster parent/foster child relationship is created and maintained is important to the attachment process in foster care. In order to understand the experience of attachment, it is important to understand how the relationship between the foster parents and their children was
generated and sustained. This theme sheds light on the types of activities foster parents
did with their children that helped them create a bond.

Most of the participants in the current study state that they let their foster children
lead the development of the relationship. This confirms earlier findings that this focus on
the child is essential to developing healthy attachment relationships in foster care.
(Dozier et al., 2009).

Several of the participants reported that they let the children talk when they were
comfortable and did not push them to disclose anything they did not want to. Some foster
parents also had specific rituals, such as game nights and movie nights that would allow
the foster children to become more comfortable and relaxed in the home. By giving the
foster children space to take control of the situation, foster parents were able to break
boundaries that the children put up when entering their home. Once the boundaries were
dropped, the foster parents were able to create a sturdy bond with their foster children. By
creating a sturdy bond with the children, the foster parents were able to teach the children
and model for them what long-lasting, healthy relationships were. Foster parents also
were able to help their foster children with the trauma they were going through.

When it came to maintaining the relationship, the experience of attachment
differed according to the stance and choices of the new foster parents, adoptive parents,
or the biological parents. Some participants wanted to maintain the relationships they had
established with their foster children, but the new parental figures in the new setting or
the representatives of the foster care system would not allow it. This was because either:
the foster children were reunited with their biological parents and the biological parents
did not want to remember or be reminded that their children were placed in foster care, or because the new parents wanted the children to bond to them and keeping contact with the foster parents could get in the way of that.

Most of the foster parents who participated stated that if the foster children and the new parents wanted them to stay in the picture, they would maintain the relationship. One foster parent talked about how one of her foster children's parents did not know about contact between them, so she was very careful about what she said and did. For example, she did not accept her former foster daughter’s friend request, but she did answer her messages. If the relationship is maintained, most foster parents keep contact with phone calls, e-mails, letters, and Facebook. Some foster parents still have their former foster children come over and have dinner and babysit their children. Most foster parents wanted to keep a relationship with their foster children if that bond was healthy for the child. One foster parent said that she keeps a relationship with her foster children because they played a significant part in her life and she also thought that foster children need as much support as they can get. Other foster parents pointed out how the new parental figures in the child’s life sometimes guarded against maintaining a relationship because it intervened with their new relationships. Attachment, in the foster care system is impacted by various people including social workers, therapists, doctors, other foster parents, and biological parents.
**Previous Experiences**

Children in the foster care system often have experienced a variety of both failed and abusive relationships. Participants felt that these previous experiences had a direct effect on the quality of their attachment to their foster child. Several foster parents noted that their foster children had a harder time attaching to the foster fathers than the foster mothers. Past experiences with abusive men was often mentioned as a barrier to attachment between foster children and foster fathers.

Another experience that presented problems with foster parent attachment was the “parentification” of a foster child. Some foster children had no idea how to behave like a child because they have had to become the parent in their own home. They were so used to taking care of their younger siblings, so they do not know how to be a child themselves. One foster parent stated that her foster child was so “parentified”, that it was hard to create a relationship because he did not want any parenting at all. In this case, the experience of attachment was a difficult one.

Sometimes the quality of attachment experience foster parents have is rooted in the reasons that foster parents choose to become foster parents. Most participants stated that they wanted to help the children and make a difference in children’s lives. This was their state of mind and their goal when they took children in. This finding reaffirms previous research on the effect of foster parents’ state of mind and the attachment relationship between foster parent and foster child (Dozier et al., 2009).
Another factor that affected foster parents’ states of mind was the choice they made in becoming a foster parent in relation to their intention to solely foster parent or to adopt a child in their home. Some foster parents decided to only foster, but then with certain placements, almost or actually did change their minds. Some foster parents decided to only adopt, while others decided to foster while keeping the adoption idea in the air. With certain goals in mind, they were able to create boundaries for attachment and this affected their experience of attachment. For example, one foster parent keeps the idea of adoption in mind, but makes sure the children know that she will be in their lives in whatever capacity is possible, even if adoption is not on the table.

**Research Question 2: What are the barriers of forming an attachment?**

Many barriers to attachment emerged in the interviews with foster parents. The data analysis revealed that foster parents’ attachment experience was often affected by the nature of the system, the conflicting needs of adoptive, foster, and biological parents, the previous experiences of both the foster children and foster parents, the nature of the support they received, and other issues.

**Maintaining the Relationship**

Even if foster parents attached to their foster children, there was an issue of new foster parents, adoptive parents, and biological parents that became a barrier to attach. As was mentioned previously, some foster parents had to break their attachment to their foster children because the new foster parents, adoptive parents, or biological parents did not want that relationship to interfere with their relationship.
Previous Experiences

Previous experiences are also barriers to attachment because some children do not want to create a relationship or bond to their foster parents because of the experiences they have had before. In this case, previous placements affect the openness of some foster children. If foster children have been moved from home to home, foster parents in this study have said that they do not want to be hurt again, so these multiple placements create a boundary and a barrier of attachment. This was also seen in the literature on how multiple placements and children’s behaviors affect their relationship with foster parents (Ryan, Testa, & Zhai, 2008; Golding, 2008; Bowlby, 1982; Wotherspoon, O’Neill-Laberge, & Pirie, 2008).

Also, if foster children had negative previous experiences with men or male figures in their life, they seemed to be more distant from their foster fathers than their foster mothers. This is a barrier to attachment because the foster child is not attaching to the foster father. One foster parent spoke about how her husband tried so hard to create a relationship with their foster daughter, but their foster daughter did not want to have anything to do with him.

Support

Within the theme of support is the property of the network. Some foster parents were told by the agency that they fostered through to not become attached to their foster children. The policy is that foster parents are supposed to stabilize the child and help them be reunified with their parents. This is a barrier to attachment because attachment is
already being shoved out of the picture. Still, attachment between foster parent and child happens.

**Barriers of Attachment**

This theme manifested in the data in various ways. Some foster parents disclosed that they guarded themselves from becoming too attached because they did not want to be hurt themselves when the child would leave and because reunification is the first option. Other foster parents talked about the other themes that were already discussed in regards to this research question. One reason that did come up, aside from the aforementioned themes, was the reason of behavioral issues. One foster parent found it hard to attach to her foster child because of her standoffish and aggressive behavior. Other foster parents talked about the difficulty of behavior with their foster children. Another barrier of attachment for one foster parent was the lack of services. As a foster parent, she is receiving help with her foster child from Spaulding, but once she adopts her foster child, she no longer will be able to call them for help. As a result, she doesn’t think she can keep her child safe and protect her the way she should be protected.

**Research Question 3: What policies affect attachment?**

In the literature, the mindset of foster parents affected their ability to attach to their foster children. The data showed that the foster parents’ experience of attachment and their mindset were affected by policies and regulations that were employed by the agencies they worked with.
Policies and Regulations

Some foster parents mentioned the main goal of reunification as a barrier to attachment. One foster parent noted that she was told by her agency to not attach to her foster daughter because of her foster daughter’s attachment issues, however, the therapist she was going to was encouraging her to do attachment activities with her foster child. This was confusing and it was clear that this affected her relationship with her foster daughter.

The main goal of reunification also affected attachment for some foster parents in that they had to keep in mind their role in the foster care system. Some foster parents stated that they have to keep in mind that they are there to stabilize the child and help them understand the situation of where they are and help them reunify with their biological parents. One foster parent stated that foster parents have to be okay with their foster children going to their biological parents, even if the level of care is lower:

Because, there’s always a bond with that birth child, uh, with the child and their birth parents. And that’s a good thing, um, and if they can make it work, that’s the best thing. Even if the care, you know, isn’t, isn’t as good. And that’s a hard, that’s a hard statement to swallow for a lot of foster parents.

Emergent Theory: Foster Parent Ecology

During the content analysis process, including reading through the interviews, member checking the themes, and comparing the themes to the literature, a grounded theory emerged. This new theory adds to Bronfenbrenner’s Ecological Theory because Bronfenbrenner focused his theory on children and their development rather than foster
parents specifically (White & Klein, 2007). By interpreting the data through each theory described in Chapter 2, the researcher was able to observe the emergence of a foster parent ecology.

   Grounded Theory (Burck, 2005) was the methodological theory that allowed the voice of foster parents to emerge during the course of the research and provided a framework through which those voices could merge into a new explanation of foster parent attachment. Symbolic Interaction Theory (White & Klein, 2007) helped the researcher interpret the data and view attachment through the foster parent point of view, to put language and symbolism to use in interpreting the perceptions of the foster care attachment process. The third theory, Ecological Theory (Swick & Williams, 2006), allowed the researcher to consider the external and internal forces that surround the foster parent as instrumental in shaping the attachment experience.

   The most significant finding of this study was the ecology of the foster parent/foster child relationship. This compliments Bronfenbrenner’s system of Human Ecology (Bronfenbrenner, 1977). Microsystems, exosystems, macrosystems, mesosystems, and chronosystems comprised social workers, case workers, therapists, doctors, other foster parents, biological parents, and agencies who have set rules and expectations all deeply affecting the attachment experience for foster parents. Thus, the foster parent and their foster child appear to exist within a specific human ecology where systems and individuals comprise the various influences on their attachment experience.

   Bronfenbrenner’s Ecological Theory (Swick & Williams, 2005) focuses on the different areas that surround individuals that help them grow into healthy adults. The
ecology of the child can help them grow and flourish or hinder them to wither. The
researcher saw this idea also manifest in the data in regards to the relationship between
foster parent and child. The ecology around this relationship can help it grow or hinder it.
In the same way that children in the system are deeply affected by the system, its
individuals, regulations, politics, intentions, and legalities, so is the experience of the
foster parent around the issues of attachment.

As was mentioned before, some foster parents did not attach to their foster child,
or at least were guarding against attachment based on what the caseworkers said about
the child and the goal for the child. There were some foster parents who had to break the
attachment with their foster children because the caseworkers did not adhere to the
therapist or doctor’s recommendation that the child should be placed in a specific kind of
home. For example, one foster parent had to have her foster child moved to another home
because the child was sexualized and the doctor recommended that he be in a home with
no young children before the placement, but he came to her house anyway. The
attachment relationship in this case and in others like it changes, and it hurts the foster
parents and the children. They form a bond and then, because of a lack of communication
or miscommunication between the team members, the child must be moved.

Based on the data, the team members fit the microsystem category, the policies
and laws affecting the foster care system fit the exosystem, and the time the foster child is
in the home is the chronosystem. The mesosystems of this ecological relationship occur,
for example, when therapists and doctors make recommendations for the child to the
caseworker. More research needs to be done concerning the macrosystem and the culture
and ideas of what foster care is. Some foster parents discussed the ideas of foster parents as glorified babysitters, for example. This could be taken further to find out other ideas and conceptions of foster care, foster parents, and foster children that affect the relationship between foster parent and child.

Bendtro (2006) states, "The different spheres of influence in the child's world also impact one another. Ideally, the family, school, and peer group all work in harmony to provide positive support and instill solid values. But when they operate in conflict, this 'dis-ease' translates into distress for the child" (Bendtro, 2006, pp. 163-164). For the purposes of the new theory, the different spheres of influence in the attachment relationship between foster parent and child impact one another. When all influences are working together, the relationship between foster parent and child can grow and develop healthily. However, if all the influences on this relationship are pushing and pulling in different directions, the relationship between foster parent and child will shrivel. The foster parents' personal accounts of their relationships in the data show that the attachment relationship was affected by the different systems at play in the foster care system and when these different systems were on the same page, the attachment relationship was more likely to flourish. When these different systems were contradicting each other, the relationship was stressed.

This analysis suggests that a future comprehensive research analysis of foster care in regards to this foster parent/child relationship ecology is needed. It appears that this is a unique ecological system that hinders and facilitates the attachment experience in foster parents and their foster children.
**Strengths of the Present Study**

This research gave voice to foster parents who struggle with intense emotions and feelings surrounding the process of attachment in foster care. The researcher was able to focus on the topic because of the research design and methodology. The Grounded Theory approach along with a qualitative design allowed for close analysis of the data and interpretation of the findings. The voice of foster parents is an important aspect of the foster care system and they need to be heard. This study allowed for this to happen. By reading literature, analyzing the data, and member checking the themes, the researcher was able to expand on an existing theory.

Another strength of this research is that it shows and opens many doors for future research. The voice of foster parents is complex and there is much more research to be done.

**Limitations**

The study had several limitations. The sample was very limited and was located in one region of the United States. The themes and information from the data are important, but they are only a stepping stone for future research. Another limitation is lack of generalizability. Generalizability is the ability of a study's findings to be applied directly to a larger population and for inferences to be made about the foster parent population in general. A sample size of ten does not allow for this. It was a limited sample in a small, largely rural state that may not represent the experience of foster parents across the United States. However, using grounded theory, a significant group of themes emerged
that definitely warrant further study of this topic. The experience of these foster parents is significant and further research should be done on a larger sample size.

**Recommendations for Future Research**

The present study focused on foster parents, but most of the people interviewed were foster mothers. Future studies should try to recruit foster fathers to participate so that the information obtained about foster fathers and the relationships with their foster children comes directly from them. Future research should include quantitative designed approaches to test the significance of the emergent themes characterized above. This would help with a larger sample size, increased significance, and increased generalizability. The foster parents in this study are experiencing attachment in a unique way and that unique way needs to be talked about and studied.

Future research should also replicate these findings and really flesh out the theory of the ecology of the foster parent and foster child relationship. There are several paths future research could follow in this area including; research on the macrosystem of the foster parent and child relationship and the culture that is perceived by foster parent, foster child, and those outside of the foster care system, and research on the exosystem of the foster parent and foster child relationship and what specific policies and legislation affect foster parents.

**Policy Recommendations**

The data of this study shows that there is a conflict between the goal of foster care and the relationship-forming process of being a foster parent. Although this is a small
sample size, there are potential implications for possible changes in the system. Future resources should be conducted to verify and repeat these findings.

First, policies should be reformed to include increased support and training for foster parents. Increased support helps foster parents understand their foster child’s behaviors and attitudes and helps ease stress about the difficulty of taking information from the trainings and applying it. With increased support, foster parents can help create a healthy attachment experience with their foster child. Increased contact with foster parents who have had similar issues reduces the isolation foster parents feel when dealing with sensitive issues such as the attachment experience.

Increased support should be easy-to-get-to and convenient for foster parents so that they have the opportunity to go to the meetings. There should also be multiple ways for foster parent support groups to meet. For example, meetings should not only be face-to-face at a certain place and time. Other ideas for support group interaction could be Skype, telephone trees where foster parents can call other foster parents about certain issues, behaviors of their foster children, and advice, e-mail, and chat. One foster parent talked about the various formats of support groups and how that could help foster parents who are unable to attend two hour meetings that are also far away from their job and/or home.

Second, policies should incorporate increased foster parent voice in the decisions made for and about their foster children. They should have increased ability to advocate for their foster children’s needs. Participants in this study talked about how they feel invisible when it comes to advocating for their foster children. This affects their state of
mind and in turn their attachment relationship because the foster parents felt lost and confused about their role as foster parent. One foster parent talked about how she encountered the term “Stranger Care.” An agency used that term instead of foster care to distinguish between family foster care and foster parents who were not related to the foster children. The foster parent felt that the grandmother who wanted to adopt her foster child was more of a stranger because she had not seen this child since she was two years old. So, to this foster parent, she felt that her role and identity was compromised by this new term. This affected her attachment relationship not only because adoption by a family member was possible, but also because her role of foster parent was changing. This affected her state of mind in that she was confused and frustrated by the label of “Stranger Care.”

Policies should allow foster parents to be another voice for their foster children because of their interaction with them. Foster parents are the ones who are taking care of the children while the biological parents are fulfilling their permanency plan. Foster parents are the ones who are taking their foster children to doctor’s and therapist’s appointments, feeding them, making sure they have all their needs met, etc. There should be more voice for them so that their children are able to be heard. If foster parents are to have more authority to advocate for their foster children, there should be training classes for them to take in order to do so. Advocacy for children is an important aspect of the foster care system because foster children do need to have their voices heard. Parents, including foster parents, can be great advocates for the children because of their role in their children’s lives. However, advocating effectively is important, therefore, classes
should be offered on how to advocate for the child in court, in the doctor’s office, in the agency’s office, etc.

Third, policies should increase communication between everyone. One foster parent talked about this increased communication and how it would be beneficial for her as a foster parent and for her foster children:

You’re trusting who you’re working with and then they, the kids that are with you, know that also and they know they can trust people if they see you trust them, especially if they, if they connected with you, you can, and they, they trust you then, they see who you’re, who you connect with, and who you’re comfortable with so I think, and that’s healthy relationships too, I mean that’s just a whole big circle. You need to close the circle, close the circle, you know, and that’s how you do it, so.

When the different pieces of the puzzle of the foster care experience are on the same page, the attachment relationship is smoother and healthier than when the pieces of the puzzle conflict one another.

**Conclusion**

Clearly, the foster parent experience of attachment is complex. The relationship is not just mother-child and/or father-child. There are so many people involved in this relationship; caseworkers, resource workers, therapists, doctors, schools, other foster parents, and biological parents. Each facet plays a part in the creating of the bond between foster parent and child. When the different people of the network work together, the relationship between foster parent and foster child can flourish. However, if the
different people in the network are misaligned and in conflict, that relationship can
wither.

The current literature shows that children in the foster care system have more
behavioral and psychological issues (Ryan, Testa, & Zhai, 2008; Marcellus, 2010;
Lindem & Dozier, 2007). One way to help foster children in the system with these
issues is to give resources to foster parents and give a voice to foster parents. Some of the
participants in this study felt invisible in the foster care system, but they are the people
that are in the foster child’s life every day while the biological parents are following the
permanency plan. The foster parents, due to their place in the foster child’s life along
with their required training, know more about the needs of the child than anyone else
More research needs to be done and policies need to change, but this hopefully, this study
will serve as a stepping stone for future studies and policies.
REFERENCES


Child Welfare Information Gateway. (2009b). Reasonable efforts to preserve or reunify
families and achieve permanency for children: Summary of state laws. Retrieved from


http://www.dhhs.nh.gov/dcyf/adoption/fosterparent.htm


Lindhiem, O., & Dozier, M. (2007). Caregiver commitment to foster children: The role of


CONSENT FORM FOR PARTICIPATION IN A RESEARCH STUDY

THE ATTACHMENT EXPERIENCE OF FOSTER PARENTS

My name is Taylor Cohen and I am a Graduate Student in Child Advocacy and Family Policy at the University of New Hampshire.

PURPOSE

The purpose of this study is to analyze the attachment experience of foster parents in New Hampshire.

PARTICIPATION

As a participant in this research, you will be asked several questions about your experience as a foster parent and how you bond with your foster children. This interview is expected to last at most 30 minutes. If you feel uncomfortable answering a specific question, you do not have to answer it. You will not be disqualified from participating if you do not answer every question. Also, the fact that you did not answer a question will not be addressed in the research.

RISKS

There are a couple of possible risks from participating in this research. The first risk that may occur is that the questions can bring out emotional answers. The second risk is that, as a foster parent, you work very hard and have various stories to tell. Disclosure can be hard to do. If you feel emotionally tired and weak after the research, you are encouraged to reach out to the New Hampshire Foster and Adoptive Parent Association and your local foster parent support group. This research is supposed to be helpful, but not at the expense of your emotional well-being.

BENEFITS

The benefits of this research are that the information you give can help reform the foster care system and foster care programs so that all involved are benefiting from it. Information from this study can also help change trainings and future foster parents with their experience as foster parents.

COSTS

This study will not cost anything to participate in.
COMPENSATION

There will be no compensation given for participating in this study.

WITHDRAWAL OPTIONS

Your consent to participate in this study is entirely voluntary, and your refusal to participate will involve no prejudice, penalty, or loss of benefits to which you would otherwise be entitled. If you consent to this study, you are free to stop your participation in the study at any time without prejudice, penalty, or loss of benefits to which you would otherwise be entitled.

CONFIDENTIALITY

The researcher seeks to maintain the confidentiality of all data and records associated with your participation in this research. Identifiable information will be kept confidential. All data will be kept in the Department of Family Studies for one year and then shredded. If necessary, pseudonyms will be given so that you will not be identified in the results and the research. This interview is going to be tape recorded so that the research can have the interview and access it for more accurate information. Interviews will also be transcribed and you will be coded so that your name does not appear on the transcription. Once the research is done, the tape recordings will be destroyed. You should understand that the researcher is required by law to report certain information to government and/or law officials (e.g., child abuse, threatened violence against self or others, communicable diseases).

CONTACT INFORMATION

If you have any questions regarding this study, you can contact me, Taylor Cohen, at tda22@unh.edu and/or my advisor, Dr. Malcolm Smith at Malcolm.smith@unh.edu to discuss them.
If you have questions about your rights as a research subject you can contact Dr. Julie Simpson in UNH Research Integrity Services, 603-862-2003 or Julie.simpson@unh.edu to discuss them.

I, _____________________________ CONSENT/AGREE to participate in this research study

_____________________________ Date
Signature of Participant
APPENDIX B: INTERVIEW QUESTIONNAIRE

THE ATTACHMENT EXPERIENCE OF FOSTER PARENTS

QUESTIONNAIRE

Part I: Basic Information

1. Gender: M______ F______

2. How old are you? ____

3. How long have you been a foster parent? __________

4. How many foster children have you had? __________

5. How many foster children do you have currently? __________

6. What are the ages of your foster children? __________

7. How long have they stayed with you? How long have they been with you?

Part II: Foster Parent Training

8. What kind of foster parent training have you had, if any? How long is/was it? Do you have to have training every few years or only once?

9. What did you learn from the training? What is the most useful piece of information you got from the training pertaining to creating the relationship(s) with your foster children?

10. What would you add to the training in regards to your experiences with your own foster children?
Part III: Attachment

11. I’d like you to describe your relationship with your foster children. What kind of relationship do you have with them? Does your relationship with one foster child differ from another? How so? Why do you think this is?

12. How do you create a relationship with a new foster child? Are there go-to ice-breakers you do in order to get to know them and for them to get to know you? If they decline to participate or to get to know you, what do you do?

13. How do you maintain a relationship with a foster child? Do you keep in contact with your foster children when they are reunited with their birth family or if/when they are moved to another family? Do you think this is a good idea? Why or why not?

14. Have you ever had a foster child that is permanently detached? When you realized they were permanently detached, how did you react? What did you do?

15. Do certain foster children react differently to you than to your spouse? How so? Why do you think this happens? What do you do about it? Do they ever change how they interact with you?

16. What do you think needs to happen to the foster care system?
University of New Hampshire

Research Integrity Services, Service Building
51 College Road, Durham, NH 03824-3585
Fax: 603-862-3564

22-Feb-2011

Cohen, Taylor
Family Studies, Pettee Hall
Babcock Hall, 116
6827 Altamira Street
Miami, FL 33146

IRB #: 5072
Study: The Attachment Experience of Foster Parents in New Hampshire
Approval Date: 18-Feb-2011

The Institutional Review Board for the Protection of Human Subjects in Research (IRB) has reviewed and approved the protocol for your study as Expedited as described in Title 45, Code of Federal Regulations (CFR), Part 46, Subsection 110.

Approval is granted to conduct your study as described in your protocol for one year from the approval date above. At the end of the approval period, you will be asked to submit a report with regard to the involvement of human subjects in this study. If your study is still active, you may request an extension of IRB approval.

Researchers who conduct studies involving human subjects have responsibilities as outlined in the attached document, Responsibilities of Directors of Research Studies Involving Human Subjects. (This document is also available at http://www.unh.edu/osr/compliance/irb.html.) Please read this document carefully before commencing your work involving human subjects.

If you have questions or concerns about your study or this approval, please feel free to contact me at 603-862-2003 or Julie.simpson@unh.edu. Please refer to the IRB # above in all correspondence related to this study. The IRB wishes you success with your research.

For the IRB,

Julie F. Simpson
Director

cc: File
    Smith, Malcolm