

Foster Family Characteristics and Behavioral and Emotional Problems of Foster Children: A Narrative Review*

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The purpose of this article is to review the literature on the foster family characteristics that are thought to contribute to the behavioral and emotional problems of foster children. The review is shaped by an understanding of the personal and familial factors associated with children's problem behaviors in the general population. These factors include parenting, the family home environment, family functioning, marital functioning, family demography, child temperament, parents' mental health, and social support. Limitations within the existing research on these foster family characteristics are noted, and suggestions for future research are provided.

Despite trends away from out-of-home placement (Department of Health and Human Services, Children's Bureau, 1997; Pecora, Whittaker, Maluccio, Barth, & Plotnick, 1992), the number of children removed from their homes and placed in foster care is large and increasing. In 1982 there were 262,000 children in care. In 1996 507,000 children were in foster care, and 725,000 children were served by the foster care system at some time during that year (Tatara, 1998).

Many children in foster care have significant behavioral and emotional problems (e.g., Heflinger, Simpkins, & Combs-Orme, 2000; Pilowsky, 1995), and many of them are at risk for developing additional problems because of a history of child abuse and neglect, family poverty, or parental mental health problems (e.g., Blumberg, Landsverk, Ellis-MacLeod, Ganger, & Culver, 1996; Courtney, Piliavin, & Wright, 1997; Department of Health and Human Services, Children's Bureau, 1997; Horwitz, Simms, Farrington, 1994; Rosenfeld et al., 1997; Schmidt-Tieszen & McDonald, 1998; Stein, Rae-Grant, Ackland, & Avison, 1994; Takayama, Wolfe, & Couiter, 1998). In addition to familial risk factors for behavioral and emotional problems, foster placement itself may be a risk factor for such problems (e.g., adjustment to a new family, placement disruptions). However, the link between foster care placement and child problem behaviors is not well established, and the causal direction of this relationship is unclear (Fanshel, Finch, & Grundy, 1990; Fanshel & Shinn, 1978; Pardeck, 1984; J. Rowe, Cain, Hundleby, & Keane, 1984).

Foster Families

In 1996, approximately three fourths of the children in foster care were placed with foster families (Adoption and Foster Care Analysis and Reporting System, 1997, Table 08-C), the remainder being in other types of care, such as residential or group

homes. On a day-to-day basis, foster families are the front-line service providers for these children and form the foundation of substitute care services in the United States. As Fanshel and Shinn (1978) observed, "We can think of no greater influence on the well-being of foster children while they are in care than those who directly minister to their needs" (p. 496).

Foster family services are increasingly crucial because federal and state resources for child welfare services have not kept pace with the critical needs of foster children. Hiring freezes, low pay, and difficult working conditions have led to caseworker shortages, less experienced and educated caseworkers, high case-loads, and high burnout and turnover rates among caseworkers (Department of Health and Human Services, Children's Bureau, 1997; Department of Health and Human Services, National Center on Child Abuse and Neglect, 1995; General Accounting Office, 1995). Also, a large proportion of foster children with behavioral and emotional problems who are referred for mental health services to treat urgent needs do not receive such services (Blumberg et al., 1996; Risley-Curtiss, Combs-Orme, Chernoff, & Heister, 1996). This proportion of children with behavioral and emotional problems might increase in the near future because of recent efforts to move children quickly through the foster care system. The Adoption and Safe Families Act of 1997 focuses on the importance of quickly reuniting children with their families, if appropriate, or placing them for adoption. Thus, children who remain in state care for more than a few years (e.g., "unadoptable" or "special needs" children) will become increasingly more challenging, as a group. This might place increased demands on foster families in terms of the care they must provide for these children.

Given the pivotal role of foster families, it is important to understand aspects of the foster family that exacerbate behavioral and emotional problems in foster children, as well as aspects of the foster family that might prevent or ameliorate future problems. However, the foster family research in these areas has never been reviewed critically and synthesized. Furthermore, foster family research has not built sufficiently upon what is known about how family life affects children's social and emotional adjustment. Research on children and families in the general population has identified a number of family factors that likely contribute to children's social and emotional adjustment. These include parenting, the family home environment, family func-

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tioning, marital functioning, family demography, personal temperament, parents' mental health, and social support. The foster family research literature needs to be reviewed critically, synthesized, and better linked to the larger body of research on children and families if it is to provide the best possible basis for practice with foster families and children. That is the purpose of this article.

This review has been crafted to support the needs of practitioners who work with foster families and children in state care, practitioners who provide preservice training for potential foster families, and researchers who study foster care or alternative socialization environments for at-risk children and youth. Because this review focuses on family foster care and children who are in state care, its contents and implications are most relevant for professionals who have backgrounds or interests in family studies, child development, social work, and human services.

Bronfenbrenner's (1989) ecological framework and Belsky's (1984) model of the determinants of parenting are used as organizing frameworks. Both of these perspectives suggest that parenting is a central, proximal socialization influence in children's development and that both child and parental characteristics shape parenting. Although Bronfenbrenner's framework is broader in scope, both models suggest that parenting and children's development are influenced by other family relationships and by relationships and conditions within the community and society. Because this review is focused on the influences of the foster family on foster children, salient aspects of the foster family, of foster parents, and of foster children are identified and examined for their association with children's social and emotional maladjustment. Clearly, Bronfenbrenner's framework suggests that other aspects of the child's ecological context besides the foster family potentially influence development. These other factors might include the foster child's biological family, relations with caseworkers and social service agencies, rulings by the judicial system, and cultural or subcultural beliefs regarding substitute care. Although these factors are beyond the scope of this review, some of them might be important to consider in future work on the socialization of foster children.

In the current review, our goals are: (a) to identify rates of foster families with problems in identified areas of socialization importance, such as parenting beliefs, marital quality, and parental depressive affect; (b) to determine if and how these specific aspects of foster family functioning are related to the behavioral and emotional problems of foster children; and (c) to identify differences that might exist across various caregiving environments (e.g., kin and nonkin foster families). As a context for this review, methodological strengths and weaknesses of the literature are identified so that future research can be improved.

The studies included in this review were located through a comprehensive search of the literature. Electronic searches were performed on Social Work Abstracts (1977–March, 1999), PsychINFO (1977–April, 1999), Sociological Abstracts (1986–December, 1998), and Medline (1976–May, 1999). In conducting this search, the terms *foster*, *foster family*, *foster parent*, *foster mother*, and *foster father* were paired with a wide variety of key words and phrases, such as *temperament*, *social support*, and *functioning*. A comprehensive list of these key words can be obtained from the authors. From primary study reference lists, other citations from 1965 through the present were found and included. In total, the search uncovered 34 empirical studies that focused on children's psychosocial functioning in family foster care (see Table 1). This search was limited to published studies

involving primary data collection for the years, databases, and key words enumerated above.

Methodological Overview

What is known about foster parents and families is limited by the modest number of studies and by limitations in the samples, designs, and measures employed. We provide an overview of these issues so the reader can be in a better position to judge the substantive results and the strengths and limitations of the existing literature.

Samples

Most samples in this literature are relatively small. Of the 34 studies reviewed, 17 included fewer than 53 families, and 23 included fewer than 100 families (see Table 1). Such small samples make it possible to detect only large relationships among variables or differences between groups. Another way of stating this concern is that the power of the statistical analyses employed will most likely be low with samples this small. This should be remembered where research failed to detect statistically significant relationships between variables or differences between groups.

Many samples were selected from unspecified populations or are of unknown representativeness because of low response rates or the absence of comparative information about the nonparticipating eligible foster parents. This makes it difficult to determine the generalizability of results, even in the limited number of studies in which these populations were clearly defined.

In addition to cautions about small sample size and limited generalizability of results to sampled populations, four important populations of foster families are underrepresented in this literature. First, the majority of studies excluded foster fathers or did not distinguish between foster fathers and mothers in reporting results. This is unfortunate, because the available results suggest that: (a) many foster fathers are involved in the care of foster children (Cautley, 1980); (b) both foster mothers and fathers influence the outcomes of foster children (Cautley, 1980; Green, Braley, & Kisor, 1996; Marcus, 1991; Walsh & Walsh, 1990); and (c) foster mothers and fathers differ in important ways, such as in temperament, emotional involvement with foster children, and other characteristics that predict foster children's outcomes (Cautley, 1980; Cautley & Aldridge, 1975; Green et al., 1996; Jones, 1975; Tinney, 1985).

Second, only a handful of studies examined the functioning of kin foster families and compared their functioning to that of nonkin foster families. Although only recently has kinship care been considered a viable placement for some children, this lack of research is unfortunate, given the dramatic recent increase in kinship care (Hegar & Scannapieco, 1999) and research that has raised questions concerning the quality of kinship foster homes relative to nonkin homes (e.g., Berrick, 1997; Gaudin & Sutphen, 1993; Gebel, 1996; Lewis & Fraser, 1987).

Third, few studies sampled foster family applicants (for an exception, see Cautley, 1980, and for an earlier exception, see Wolins, 1963). Most of what is known is based on families approved to care for children in state custody. This gap makes it difficult to understand the needs of foster family applicants, which in turn makes it difficult to identify gaps in the preapproval screening and training to ensure the approval and retention of effective foster families.

Finally, most of what is known about foster families is based

Table 1
Summary of Studies of Foster Families (n = 34)

| Study | Sample | Characteristic Assessed | | | | | | | |
|--|--|-------------------------|------|--------|---------|--------------|-------------|---------------|----------------|
| | | Parenting | Home | Family | Marital | Demographics | Temperament | Mental Health | Social Support |
| Berrick, 1997 | 61 families (32 nonkin, 28 kin) | X | X | X | | | | X | |
| Cautley, 1980; Cautley & Aldridge, 1975 | 115 families | X | | | X | X | | | |
| Campbell et al., 1980 | 50 families (25 "best" and 25 "worse") | X | | X | | X | | X | |
| Cohon & Cooper, 1993 | 36 families | X | | | | X | | | |
| Colton, 1988 | 24 homes (12 families and 12 residential) | X | X | | | | | | |
| Dando & Minty, 1987 | 80 families | X | | | | X | | | |
| Doelling & Johnson, 1989, 1990 | 51 families | | | X | | X | X | | |
| Fanshel, 1966 | 101 families | X | | | X | X | | | |
| Fanshel & Shinn, 1978 | 152 families | | X | X | | X | | | |
| Fanshel et al., 1990 | Unknown number of families; 585 children and longitudinal follow-up on 106 of these children | X | | | | | | | |
| Festing, 1994, 1996 | Unknown number of families, 210 foster children (149 in nonkin families, 40 in kin families, 21 in group care) | X | | X | | | | | |
| Gaudin & Sutphen, 1993 | 40 families (9 nonkin and 31 kin) | | X | | | X | | | X |
| Gebel, 1996 | 193 families (111 nonkin and 82 kin) | X | | | | X | | | |
| Gillis-Arnold et al., 1998 | 193 families (44 adoptive and 149 nonadoptive) | X | | | | | | | |
| Green et al., 1996 | 40 families | | | X | | X | X | | |
| Guerney & Gavigan, 1981 | Unknown number of families; 157 foster parents | X | | | | X | | | |
| Hanson & Tavormina, 1980 | 34 families | X | | X | | X | | | |
| Jord, & Rodway, 1984 | 70 families | | | X | | | | | |
| Kufeldt et al., 1995 | Unknown number of families; 40 foster children | | | X | | | | | |
| Lee & Holland, 1991 | Unknown number of families; 29 foster parents | X | | | | | | | |
| Lewis & Fraser, 1987 | 60 families (30 nonkin and 30 "specific") | X | | X | | | | | |
| Lipton, 1997 | 71 families (45 nonkin and 26 nonfoster) | | | | | X | | X | |
| Marcus, 1991 | 52 families | X | | | | X | | | |
| O'Hara et al., 1998 | 52 families | | X | | | X | | | |
| Ray & Horner, 1990 | 14 families | | | X | | | | | |
| J. Rowe et al., 1984 | 200 families (145 nonkin and 55 kin) | | | X | | X | | | |
| D. C. Rowe, 1976 | 60 families | X | | X | | X | | | |
| Seaberg & Harrigan, 1997 | 124 families | | | X | | X | | | |
| Simms & Horwitz, 1996 | 28 families | | X | | | X | | | |
| Smith, 1994 | 38 families | X | | | | X | | | |
| Soliday et al., 1994 | 29 families | X | X | | | X | | | X |
| Touliatos & Lindholm, 1977, 1981; Lindholm | 472 families | X | X | | | X | | | |
| Wallace & Belcher, 1997 | 23 families | X | X | | | | | | |
| Walsh & Walsh, 1990 | 51 children (39 in families, 12 in other types of care) | | | X | | X | | | |

on single, point-in-time (cross-sectional) samples. Such samples probably overrepresent foster families with longer service. Those with longer service may be more effective foster parents (Dando & Minty, 1987; Doelling & Johnson, 1989, 1990). This makes it difficult to understand the unique needs of foster families who stop fostering earlier in their career, as many do (Hurl & Tucker, 1995; Rhodes, 1998). Consequently, it is difficult to identify the postapproval training, support, and supervision necessary to ensure and retain effective foster families.

Research Designs

As noted, the vast majority of studies about foster families used cross-sectional designs (i.e., single point-in-time designs) in conjunction with mailed questionnaires, telephone interviews, or in-home interviews. There are only three longitudinal studies of foster families (Cautley, 1980; Cautley & Aldridge, 1975; Fanshel et al., 1990; Fanshel & Shinn, 1978). Cross-sectional surveys make it difficult to determine causal order. Also, in the

absence of longitudinal research, little is known about changes in foster families over time and how such changes influence the behavioral and emotional outcomes of foster children.

Another important design limitation in this literature is the virtual absence of comparison groups. Only one of the studies reviewed used a non-foster family control group as a basis of comparison (Lipton, 1997). This makes it difficult to determine whether and how foster families differ from relevant nonfoster families. It also makes it difficult to determine whether family variables influence the behavioral and emotional outcomes of children in the same way in foster and nonfoster families. This latter consideration is especially important because the unique, usually temporary, relationship between the foster family and the child clearly precludes generalization from what is known about the effects of families on children's behavioral and emotional functioning without careful replication. Also absent in designs have been comparisons between children in care with and those without serious behavior problems. These comparisons are needed (and need to be longitudinal) to address the relative causal influence of preexisting child characteristics and problems.

In lieu of comparison groups, some studies used standardized scales that permit comparison to nonfoster normative samples. Such research can provide critical information, but the extent to which normative samples are relevant as a basis for comparison to foster families needs to be considered carefully.

Measures

A strength of this literature is that a wide range of foster family factors have been assessed, and these are summarized in the following. Also, the majority of studies used at least one standardized measure with preexisting information about reliability, validity, or, in some cases, normative data. However, excluding demographic characteristics, the vast majority of these studies assessed fewer than three variables, making it difficult to determine the independent and interactive effects of different variables and the relationships among variables. Also, few of the measures were used in multiple studies, limiting our ability to aggregate and compare results across studies. In addition, only a few of these studies reported information concerning the reliability or validity of standardized measures as used with foster family samples, although the available results are encouraging (e.g., Cautley, 1980; Green et al., 1996; Kufeldt, Armstrong, & Dorosh, 1995; Seaberg & Harrigan, 1997). Finally, and of particular importance, many studies that used standardized measures with normative data failed to report information concerning the proportions of foster parents or families in the clinical range on these measures.

Although most studies used at least one standardized measure with known psychometric properties, many studies used study-designed measures without reported evidence of reliability, validity, or normative data. Also, in some studies, idiosyncratic and ill-defined constructs were measured. These limitations necessitate caution concerning the accuracy of the findings, making it difficult to compare across studies and to determine the extent to which these samples contain foster families with more problems than comparable populations.

Substantive Review

With these limitations in mind, we now turn to the review of what is known about the functioning of foster families and the correlates of such functioning. Because of the central focus

of parenting in children's lives, we first discuss parenting, the general quality of the home environment, family functioning, and marital functioning (relevant in two-parent foster families). Next, we discuss individual characteristics of foster parents and children, including demographic characteristics, temperament, mental health, and the availability and use of social support. In each section, research from the general population is summarized first to provide a context, and then the research on family foster care is reviewed.

Parenting

General Population

Focusing on research conducted with samples of families in the general population, Rothbaum and Weisz (1994) examined the association between parenting and child-youth externalizing problem behaviors (i.e., emotional or psychological distress turned outward, including aggressive and delinquent behavior). Analyzing data from 47 studies, they reported an average effect size of .24 (i.e., disrupted parenting was related to higher levels of externalizing problems in children). In this study, this "effect" represented an average correlation coefficient. Forty-six percent of the effects were different from zero. Rothbaum and Weisz examined different aspects of parenting and found no significant differences across aspects (approval, guidance, motivational strategies, coercion, synchrony, restrictiveness). Effects were stronger when the measure of parenting relied on observations or interviews, as opposed to questionnaires, and when the measure tapped combinations of parental behaviors rather than single dimensions. Stronger associations were found for sons than daughters and for older than younger children.

In terms of specific parenting behaviors, children's positive social and emotional adjustment is associated with: (a) higher levels of parental acceptance (Barnes & Farrell, 1992; Maccoby & Martin, 1983; Scaramella, Conger, & Simons, 1999); (b) lower levels of harsh discipline (Dishion, Patterson, Stoolmiller, & Skinner, 1991; Harold & Conger, 1997; Lamborn, Mounts, Steinberg, & Dornbusch, 1991); (c) higher levels of monitoring (Barber, Olsen, & Shagle, 1994; Baumrind, 1991; Herman, Dornbusch, Herron, & Herting, 1997; Scaramella et al., 1999); (d) lower levels of intraparental inconsistency (Patterson, 1982; Scaramella et al., 1999); (e) lower levels of intrusive psychological control (Barber, 1996; Fauber, Forehand, Thomas, & Wierson, 1990; Garber, Robinson, & Valentiner, 1997); and (f) lower levels of parent-child conflict (O'Keefe, 1994; Shagle & Barber, 1993).

Foster Families

The majority of foster parents view their primary role as a parent or substitute parent (Jones, 1975; Le Prohn, 1994; Tinney, 1985), and 21 studies examined different dimensions of foster parenting. Discipline and control have been examined most often (Berrick, 1997; Campbell, Simon, Weithorn, Krikston, & Connolly, 1980; Cohon & Cooper, 1993; Colton, 1988; Fanshel, 1966; Fanshel et al., 1990; Gebel, 1996; Gillis-Arnold, Crase, Stockdale, & Shelley, 1998; Hampson & Tavormina, 1980; Lee & Holland, 1991; Lewis & Fraser, 1987; D. C. Rowe, 1976; Smith, 1994). Others have assessed empathy (Gebel, 1996; Gillis-Arnold et al., 1998; Lee & Holland, 1991; Marcus, 1991); developmental expectations (Fanshel, 1966; Gillis-Arnold et al., 1998; Lee & Holland, 1991); role clarity (Lee & Holland, 1991);

quality of parent-child interactions (Fanshel, 1966; Marcus, 1991; Wallace & Belcher, 1997); parenting stress (Soliday, McCluskey-Fawcett, & Meck, 1994); parenting satisfaction (Smith, 1994; Soliday et al., 1994); attachment (Festinger, 1994; Marcus, 1991); acceptance (Guernsey & Gavigan, 1981; D. C. Rowe, 1976); and overall parenting (Cautley & Aldridge, 1975; Dando & Minty, 1987; Fanshel, 1966; Touliatos & Lindholm, 1981).

These studies provide some information about the percentage of foster parents with problematic parenting strategies (using information from general population findings to establish the normative criteria). Fanshel (1966), based on a sample of 77 foster mothers, found that foster mothers had more negative attitudes toward child-rearing than a normative group on 12 of 23 subscales of the Parental Attitude Research Instrument (PARI; Fostering Dependency, Seclusion of the Mother, Breaking the Will, Martyrdom, Strictness, Deification, Avoidance of Communication, Suppression of Sex, Ascendance of Mother, Intrusiveness, Acceleration of Development, and Dependency of the Mother); more positive attitudes on 7 subscales (Encouraging Verbalization, Fear of Harming the Baby, Irritability, Suppression of Aggression, Rejection of Homemaking Role, Approval of Activity, and Comradship and Sharing); and no statistically significant difference on 4 subscales (Marital Conflict, Excluding Outside Influences, Equalitarianism, and Inconsiderateness of Husband). Based on a sample of 106 former foster children, Fanshel et al. (1990) found that 25% of the children reported that they were physically punished severely while in foster homes.

Soliday et al. (1994), in a study of 29 foster mothers, reported that 14% of mothers were above the 75th percentile in the Child Domain of the Parenting Stress Index and that 3% were above the 75th percentile on the total index. Wallace and Belcher (1997) found that 18% of 27 foster children were in "at-risk" homes, based on results of the Nursing Assessment Feeding Scale, a measure of the quality of parent-child interactions, and that 18% of 11 children were in "at-risk" homes based on the Nursing Assessment Teaching Scale, a measure of the quality of parent-child interactions within the context of a teaching task. Dando and Minty (1987) found that 13% of foster parents were rated by workers as "barely adequate," the lowest rating on a 3-point scale rating the overall adequacy of foster parents. Similarly, Touliatos and Lindholm (1981) found that most of the parents were judged to be adequate or good parents. Six months and 1 year postplacement, Cautley (1980) found that workers rated 1% of the mothers less than adequate; however, Cautley found that researchers rated 7% of the mothers and from 14 to 18% of the fathers as less than adequate. Thus, it seems that approximately 15% of foster parents manifest potentially poor or troubled parenting.

Foster children's social and emotional adjustment. Foster children's general social and emotional adjustment seems to be associated with: (a) parental acceptance (Festinger, 1994; Walsh & Walsh, 1990); (b) authoritative parenting style (Smith, 1994); and (c) affinity for children as a motivation for fostering (Walsh & Walsh, 1990). Foster children's externalizing problem behaviors seem to be associated with insecure attachment to the foster parents (Fanshel et al., 1990; Marcus, 1991) and excessive physical punishment while in foster care (Fanshel et al., 1990). Foster children's internalizing problem behaviors (defined as distress that is turned inward, such as depression, anxiety, and withdrawal) are associated with poorer overall treatment by the foster

family (Fanshel et al., 1990); parental annoyance (Smith, 1994); lower levels of parental acceptance; insecure attachment to foster mothers; and a lower-quality parent-child relationship (Marcus, 1991). Cautley (1980) provided the only longitudinal findings in her study of 115 new foster parents. Improved child ratings over time by parents and social workers were associated with foster mothers' preplacement experience in caring for children other than her own and foster mothers' skill in handling a hypothetical incident in which a child broke a toy in anger.

Foster family functioning. Two studies provided results pertaining to the association between parenting and foster family functioning. Campbell et al. (1980) found that physical discipline and disagreements about discipline between parents were more likely in foster homes rated "worst" than in those rated "best." By contrast, D. C. Rowe (1976) found no statistically significant correlation between coercive methods of discipline and workers' ratings of the success of foster homes. However, Rowe found that foster parents' acceptance of foster children's behavior was related to higher levels of success of foster homes as rated by workers using an 8-item study-designed scale.

Foster parents' history and preparation for fostering. Dando and Minty (1987) found that mothers motivated by wanting to nurture children were rated by workers as less adequate foster parents as compared with foster parents reporting all other motives. They also found that those with more difficult childhoods were rated as more adequate foster parents.

Cautley (1980) found that foster mothers who were better prepared by workers for placement demonstrated greater skill in handling children's behaviors and that mothers who better differentiated among children were more successful foster mothers. Fathers whose own fathers were more affectionate and more sensitive, who were more child centered in anticipating difficulties in foster parenting, and who had more positive attitudes toward workers' supervision were rated as more successful foster fathers. The opposite was true of fathers whose parents were more religious. In addition, as noted previously, mothers' and fathers' familiarity with child care was related to greater overall success in foster parenting, as was their ability to handle several hypothetical behavior problems common to children.

Differing caregiving environments. Lewis and Fraser (1987) found that foster parents in regular foster homes, compared to those in "specific" foster homes (i.e., relatives, friends, or other members of a family's or child's support network recruited to foster a specific child), reported more use of time-out (55% vs. 25%), point systems (55% vs. 29%), and discussing problems (32% vs. 10%) as parenting strategies. Also, Gebel (1996) and Gaudin and Sutphen (1993) found more positive attitudes toward physical punishment and lower levels of empathy toward children's needs among kinship caregivers. Gaudin and Sutphen found that kinship caregivers had less appropriate developmental expectations and attitudes toward parent-child roles. Finally, Berrick (1997) did not find statistically significant differences in discipline strategies between a sample of 28 kin and 33 nonkin foster parents. Colton (1988) found that the controls and sanctions used in family foster homes were superior to those used in residential foster homes.

Home Environment

General Population

General population research on the association between the quality of the child's home environment and his or her socioe-

motional adjustment exists because of the widespread use of an instrument called the Home Observation for Measurement of the Environment (HOME; Caldwell & Bradley, 1984). In many ways, the HOME addresses parenting, but from a much broader perspective than most of the research that focuses on parental behaviors or the general quality of the parent-child relationship. It addresses the child's environment beyond what parents or children say or do. Conceptually, five aspects of the home are assessed: sustenance, stimulation, support, structure, and surveillance (Bradley, 1998).

In general, children who live in safe and stimulating home environments seem to manifest fewer problem behaviors, particularly externalizing problems (Bradley, 1994, 1998; Bradley et al., 1998; Klebanov, Brooks-Gunn, Chase-Lansdale, & Gordon, 1997). Although Mun, Fitzgerald, von Eye, Puttler, and Zucker (1999) did not find a significant direct effect for the quality of the home environment, they reported that home environment quality was associated with maternal psychopathology (lower) and children's temperament (greater attention focus and less reactive).

Foster Families

Nine studies examined the quality of the physical environment or socioemotional climate of foster homes. Of these nine studies, seven employed small samples and in-home observations (Berrick, 1997; Gaudin & Sutphen, 1993; O'Hara, Church, & Blatt, 1998; Simms & Horwitz, 1996; Smith, 1994; Wallace & Belcher, 1997) or interviews (Colton, 1988). One of the nine had a moderate-size sample and used caseworker assessments (Fanshel & Shinn, 1978), and the remaining one was a large national study that used foster care workers' reports (Lindholm & Touliatos, 1978).

Physical environment. Lindholm and Touliatos (1978) found that 99% of foster homes were judged "comfortable and safe," most foster children had rooms of their own, and 98% of homes had a reasonable degree of privacy for foster children. By contrast, Simms and Horwitz (1996) found that 54% of homes had three or four children in addition to the foster child, 14% of homes were "cluttered and disorganized," 71% of homes had televisions on during the interview, 35% of homes had dark internal lighting, 57% of homes were not owned, and 50% of homes were in low-income neighborhoods. Berrick (1997) examined too many indicators to detail here, but in general, Berrick found a significant percentage of homes with characteristics that would raise concerns, such as unsafe physical qualities in the home and neighborhood and relatively poor-quality environments. The quality of the environment seems to be worse in kinship homes than in nonkin homes (Berrick, 1997) and in residential foster homes than in family foster homes (Colton, 1988).

Socioemotional climate. Simms and Horwitz (1996) found that 21% of homes had parents who engaged in no or minimal interactions with the foster children during the interview, despite interviewer requests for such interactions. Based on the HOME inventory, the percentage of foster families who fell in the at-risk category ranged from 0% (O'Hara et al., 1998) to 15% (Wallace & Belcher, 1997) to 18% (Simms & Horwitz, 1996).

Studies by Smith (1994) and Fanshel and Shinn (1978) are especially notable, because they examined the relationship between the quality of the home environment and foster children's social and emotional adjustment. In a cross-sectional survey, Smith found that the overall HOME score correlated negatively with internalizing and externalizing problems. Also, variety of

stimulation correlated positively with prosocial behavior. In a longitudinal study, Fanshel and Shinn found that higher scores on the intellectual qualities of the Home subscale were associated with fewer social and emotional problems of foster children, even when controlling for preplacement characteristics of foster children, days in care, and number of placements.

Based on total HOME scores, the following family demographic characteristics were associated with better-quality environments: (a) fewer children in the home (Smith, 1994); (b) higher levels of maternal education (Smith, 1994); (c) greater income (Simms & Horwitz, 1996; Smith, 1994); (d) being Caucasian rather than African American (Simms & Horwitz, 1996; Smith, 1994); (e) being married rather than unmarried (Simms & Horwitz, 1996; Smith, 1994); and (f) being unrelated as a foster parent rather than being kin (Gaudin & Sutphen, 1993). In addition, family foster homes seem to have better environments than do residential foster homes (Colton, 1988). When family demographic variables were considered simultaneously, income was most strongly associated with HOME scores (Simms & Horwitz, 1996).

Family Functioning

General Population

Although many studies have researched family functioning in the general population, few have examined the association between family functioning—using established measures of whole-family functioning—and children's problem behaviors. The studies that exist suggest that family cohesion is associated with fewer child or youth problem behaviors (Barber & Buehler, 1996; Gfeller, 1994; Graber, Brooks-Gunn, Paikoff, & Warren, 1994; Thompson, Merritt, & Keith, 1993), whereas family conflict seems to be associated with increased problem behavior, even when controlling for marital conflict (Brody, Stoneman, McCoy, & Forehand, 1992; Jaycox & Repetti, 1993; Shagle & Barber, 1993).

Foster Families

Family functioning has been assessed in foster families in two ways. First, it has been measured using standardized scales designed to measure aspects of functioning general to all families. Second, it has been measured using study-designed single- and multiple-item scales that measure general family functioning as well as aspects of family functioning unique to foster families. The former is referred to here as *general family functioning* and the latter as *foster family functioning*.

General family functioning. Six studies examined general family functioning, and each used standardized scales. These scales include the Family Assessment Device (FAD; Seaberg & Harrigan, 1997); the General Functioning subscale of the FAD (Green et al., 1996); the Index of Family Relations (Berrick, 1997); the Conflict subscale from the Family Environment Scale (FES; Doelling & Johnson, 1990); the Family Assessment Measure (Kufeldt et al., 1995); and the Family Adaptability and Cohesion Scale (Lewis & Fraser, 1987).

There is little information about the percentage of foster families with problematic family functioning. Based on the scant existing data, the range seems to be between 7% and 35%, depending on the particular aspect of family functioning being considered (Berrick, 1997; Kufeldt et al., 1995).

We were unable to find any study that examined the asso-

ciation between foster family functioning, assessed using standard measures, and foster children's social and emotional adjustment. However, there is some research that has examined associations between selected aspects of the foster care experience and foster family functioning. Based on these few studies with relatively small samples, family functioning seems to be unrelated to: (a) foster placement success, as measured using the Conflict subscale from the FES (Doelling & Johnson, 1990); (b) kin versus nonkin placement (Berrick, 1997; Lewis & Fraser, 1987); and (c) race (Seaberg & Harrigan, 1997).

Foster family functioning. Ten studies measured foster family functioning using researcher-developed assessments (Campbell et al., 1980; Doelling & Johnson, 1989, 1990; Fanshel & Shinn, 1978; Festinger, 1994; Jordan & Rodway, 1984; Ray & Horner, 1990; D. C. Rowe, 1976; J. Rowe et al., 1984; Walsh & Walsh, 1990). Most studies provided evidence of adequate interrater or internal consistency reliability of the measures used (Doelling & Johnson, 1989, 1990; Jordan & Rodway, 1984; D. C. Rowe, 1976; J. Rowe et al., 1984; Walsh & Walsh, 1990), but only D. C. Rowe presented evidence supporting the validity of the measure used.

From 5% to about 16% of foster families seem to fall in a potentially problematic range of foster family functioning (Doelling & Johnson, 1989; Fanshel & Shinn, 1978; Festinger, 1994; D. C. Rowe, 1976; Walsh & Walsh, 1990). However, using workers' overall ratings of foster families as either "more effective" or "less effective"—a measure distinctly different from those used in other studies—Jordan and Rodway (1984) found that 37% of foster families were rated as less effective, in contrast to 63% rated more effective.

Two studies are notable, because they examined the relationship between foster family functioning and foster children's social and emotional adjustment. Walsh and Walsh (1990) found that higher levels of foster family functioning were related to higher levels of overall functioning of foster children. Similarly, Festinger (1994) found that higher levels of foster family functioning were related to lower levels of behavioral and emotional problems in foster children.

Another possible outcome of foster family functioning is placement disruptions, which are important because they may exacerbate existing behavioral and emotional problems or lead to the development of such problems (Fanshel et al., 1990; Fanshel & Shinn, 1978; Pardeck, 1984; J. Rowe et al., 1984). Walsh and Walsh (1990) found that lower levels of foster family functioning were related to placement disruptions. However, this apparent relationship might be spurious, in that both might be caused by the behavioral and emotional problems of foster children. This complexity in mapping the causes and consequences of foster children's social and emotional problems indicates the need for longitudinal research.

Several possible general correlates of foster family functioning have also been examined. Walsh and Walsh (1990) examined 75 predictors of foster family functioning using a sample of 51 foster families. Five of these 75 factors were uniquely related to higher levels of foster family functioning: role comfort, affinity for children as a motivation for fostering, stress tolerance, foster father's provision of a strong male role model, and child-centeredness of the foster family. Demographic circumstances and motivation for fostering seem to be unrelated to foster family functioning (J. Rowe et al., 1984; Walsh & Walsh, 1990).

Marital Functioning

General Population

Historically, most researchers have adopted a fairly global approach to examining the connections between marital functioning and children's social and emotional adjustment. This global perspective is best illustrated by conceptualizing marital functioning as including both satisfaction and frequency of conflict. Defining marital dissatisfaction in fairly broad terms, Reid and Crisafulli (1990) reviewed literature on marital relations and child externalizing problem behaviors in married families using meta-analytic techniques. Based on 33 studies and 80 effect sizes, the average effect size was .16. As the literature developed, this global approach to conceptualizing marital functioning was criticized, because several researchers began finding that interparental conflict (often referred to as marital conflict) has a stronger effect on youth adjustment than does global marital satisfaction (Cummings, Davies, & Simpson, 1994; Jouriles, Barling, & O'Leary, 1987; Jouriles et al., 1991; Katz & Gottman, 1993).

Focusing solely on interparental conflict, Buehler et al. (1997) recently conducted a meta-analysis of 348 effects from 68 studies. Both married- and divorced-parent families were included in the review (although parents' marital status was ultimately unrelated to effect size). The average effect size was .32. When separated by specific adjustment measure, the associations between interparental conflict and child externalizing, internalizing, and total composite were .39, .31, and .21, respectively. The average effect size was stronger for overt marital conflict and problem behaviors (e.g., verbal or physical aggression) than for the frequency of disagreement and problem behaviors (.35 compared with .19). The average effect size was similar for sons and daughters.

Foster Families

Little is known about the marital functioning of married foster parents. Although dated, there is some evidence that foster parents have similar levels of marital conflict as other parents (Fanshel, 1966). Fanshel also found that marital tension, as reported by foster mothers, was associated negatively with community integration and, contrary to expectation, with several problematic attitudes toward child-rearing measured using subscales of the PARI (i.e., Breaking the Will, Excluding Outside Influences, Deification, and Suppression of Aggression). Marital conflict correlated positively with the Irritability and Rejection of the Homemaking Role subscales and correlated negatively with Equalitarianism and Intrusiveness.

Cautley (1980) had mothers and fathers separately rate the extent to which major decisions were made democratically. Husbands who reported more democratic decision-making were rated by researchers as more successful foster parents, whereas wives who attributed more influence to their husbands were rated as more successful foster parents. Importantly, we were unable to find any studies that examined the association between the marital functioning of foster parents and foster children's social and emotional adjustment, indicating an area of needed research.

Demographic Characteristics

General Population

The general population research documents that children who live in poor families tend to have higher levels of social

and emotional problem behaviors than do children who live in families with adequate economic resources (Chase-Lansdale & Brooks-Gunn, 1995; Hanson, McLanahan, & Thomson, 1997; McLanahan, 1997; Pagani, Boulerice, & Tremblay, 1997; Sameroff & Seifer, 1995). Parents' education (particularly mothers') also seems to be associated inversely with children's problem behaviors (Chase-Lansdale, Gordon, Brooks-Gunn, & Klebanov, 1997; Pagani et al., 1997). Although not as definitive as the effects of socioeconomic factors, some evidence suggests that children who live with single parents or children who are African American or Hispanic American have higher levels of problem behaviors than do children who live with two parents or who are European American (Dodge, Pettit, & Bates, 1994; Guerra, Tolan, Huesmann, VanAcker, & Eron, 1995; McLanahan, 1997; Simons, 1996).

Foster Families

Foster family economic well-being. It is difficult to characterize the economic well-being of the foster families in the reviewed studies. Even though income was reported in 13 studies, the publication dates of these studies range from 1966 to 1997, making it difficult to evaluate income level. Even if this were not the case, these studies reported income in a variety of idiosyncratic ways, making it difficult to aggregate and compare across studies (e.g., mean income, percentage with incomes above or below idiosyncratic levels, etc.). However, to some extent, economic status may be inferred from type of employment, and seven studies provided such information. In general, these studies reported a wide range of occupations within studies, including professional, technical, or managerial (Campbell et al., 1980; Cautley, 1980; Lindholm & Touliatos, 1978; D. C. Rowe, 1976; Seaberg & Harrigan, 1997); skilled or semiskilled (Campbell et al., 1980; Cautley, 1980; Fanshel & Shinn, 1978; Guernsey & Gavigan, 1981; Lindholm & Touliatos, 1978; D. C. Rowe, 1976; Seaberg & Harrigan, 1997); or unskilled (Campbell et al., 1980; Fanshel & Shinn, 1978; Gaudin & Sutphen, 1993; Lindholm & Touliatos, 1978; Seaberg & Harrigan, 1997).

Foster parents' educational attainment. The majority of foster parents in 12 of the 17 studies reporting education had at least a high school education (Cautley, 1980; Cohon & Cooper, 1993; Doelling & Johnson, 1989, 1990; Gaudin & Sutphen, 1993; Gebel, 1996; Green et al., 1996; Guernsey & Gavigan, 1981; Lindholm & Touliatos, 1978; Seaberg & Harrigan, 1997; Simms & Horwitz, 1996; Smith, 1994; Soliday et al., 1994). Considerable variation existed within these studies, in that at least eight included parents with less than a high school education (Fanshel, 1966; Gebel, 1996; Hampson & Tavormina, 1980; Lindholm & Touliatos, 1978; Marcus, 1991; Seaberg & Harrigan, 1997; Simms & Horwitz, 1996; Walsh & Walsh, 1990), and at least nine reported parents with some college education (Cautley, 1980; Cohon & Cooper, 1993; Fanshel, 1966; Gebel, 1996; Lindholm & Touliatos, 1978; Marcus, 1991; Seaberg & Harrigan, 1997; Simms & Horwitz, 1996; Soliday et al., 1994). Three of these nine studies also included parents with graduate degrees (Cohon & Cooper, 1993; Lindholm & Touliatos, 1978; Seaberg & Harrigan, 1997).

Foster parents' marital status. Six of the 16 studies reporting marital status had 94 to 100% two-parent families (Cautley, 1980; Dando & Minty, 1987; Fanshel, 1966; Green et al., 1996; J. Rowe et al., 1984; Lindholm & Touliatos, 1978). Five studies included 71 to 85% two-parent families (Doelling & Johnson, 1989, 1990; Hampson & Tavormina, 1980; O'Hara et al., 1998;

Seaberg & Harrigan, 1997; Smith, 1994), and in the remaining five studies 46 to 68% were two-parent families (Cohon & Cooper, 1993; Gaudin & Sutphen, 1993; Gebel, 1996; Lipton, 1997; Simms & Horwitz, 1996).

Race. Three of the 14 studies reporting race had 88% or more White foster parents (Cautley, 1980; Guernsey & Gavigan, 1981; Lindholm & Touliatos, 1978). However, the remaining 11 studies included substantial percentages of African American foster parents, ranging from 28 to 58% of parents (Cohon & Cooper, 1993; Fanshel, 1966; Fanshel & Shinn, 1978; Gebel, 1996; Hampson & Tavormina, 1980; Lipton, 1997; Marcus, 1991; Seaberg & Harrigan, 1997; Simms & Horwitz, 1996; Smith, 1994; Soliday et al., 1994). Two studies also had Hispanic parents (Fanshel & Shinn, 1978; Simms & Horwitz, 1996) and Asian foster parents (Lipton, 1997) in their sample.

We were unable to find a study that examined the relationship between the demographic characteristics of foster families and foster children's social and emotional adjustment. Thus, future research on family foster care needs to examine the effects of family demography in more detail.

Temperament

General Population

Temperament refers to the way in which an individual characteristically behaves (Chess & Thomas, 1996). Individual differences in emotionality are central when defining the temperamental qualities of a child (Martin, 1999). Temperamental characteristics identified in infancy and toddlerhood are moderately stable across childhood and early adolescence (Guerin & Gottfried, 1994a, 1994b). However, Guerin, Oliver, and Thomas (1999) state that the linkages between childhood temperament characteristics and adult personality characteristics seem to be fairly weak (see Newman, Caspi, Silva, & Moffitt, 1997, for an exception).

Although small in magnitude, both concurrent and over-time associations have been reported between temperament (particularly lack of control, low adaptability, and high reactivity) and child and adolescent behavior problems and school-related difficulties (Barron & Earls, 1984; Bates, Pettit, Dodge, & Ridge, 1998; Caspi, Henry, McGee, Moffitt, & Silva, 1995; Garrison & Earls, 1987; Guerin, Gottfried, & Thomas, 1997; R. W. Robins, John, Caspi, Moffitt, & Stouthamer-Loeber, 1996; Rothbart, Ahadi, & Hershey, 1994; Sanson & Rothbart, 1995; Sanson, Smart, Prior, & Oberklaid, 1993).

In addition to the direct effects of temperament on child problem behaviors, some theorists have suggested that congruence between the child temperament and caretaker parenting style is important (Chess & Thomas, 1996). Lerner (1993) reviewed some of the theoretical underpinnings and implications of this "goodness of fit" hypothesis and provided preliminary, although not definitive, data on the potential usefulness of this formulation.

Foster Families

Green et al. (1996) and Doelling and Johnson (1990) examined foster child and parent temperament using the Dimensions of Temperament Scale. These authors found that inflexible foster parents paired with foster children who had negative mood, low sleep rhythmicity, or low eating rhythmicity had worse family functioning. Family functioning seemed to suffer

when fathers and children were mismatched on mood (Green et al., 1996). Doelling and Johnson (1990) found less successful placements for mothers with higher "activity levels during sleep" (interpreted by the authors as an indicator of restlessness or anxiety), mothers with more unrealistic expectations of children's sleep activity levels, and mothers paired with children having more negative moods than expected. We were unable to find any studies that examined the association between foster children's temperament and their social and emotional adjustment. Again, this is an important topic for future research because, theoretically, children's temperaments may be particularly salient in foster families where there is inherent boundary and role ambiguity.

Parents' Mental Health

General Population

Existing research with samples from the general population documents a robust association between parents' depressive affect (with the mother's affect assessed most frequently) and a broad array of indicators of child maladjustment (Brody et al., 1994; Coyne, Downey, & Boergers, 1992; Dodge, 1990; Downey & Coyne, 1990; Hammen et al., 1987; Harrington, 1993; Jacob & Johnson, 1997; Kurdek, 1998; Mun et al., 1999). There is some evidence that maternal depressive affect is more strongly associated with child internalizing problem behaviors than with externalizing behaviors (Davies, Dumenci, & Windle, 1999; Hops, Sherman, & Biglan, 1990). Dadds (1987) describes families with a depressed parent or parents as characterized by lack of coherence and agency and by heightened emotional dysregulation. In addition to providing a difficult environment for family functioning, these characteristics tend to impair parenting (Cummings & Davies, 1994). Socially, depressed parents are less skilled and responsive to intimates, including their children (Hops et al., 1990; Segrin, 1990). They also exert less effort in social interaction, which does not match well with the demands of parenting (Downey & Coyne, 1990; Factor & Wolfe, 1990; Field, 1995). On top of this, the perceived helplessness and hostility that are part of depression may interfere with depressed parents' ability to be warm and consistent with their children (Cohn, Matias, Tronick, Connell, & Lyons-Ruth, 1986; Coyne et al., 1992).

Although most researchers have focused on parental depressive affect, some have also suggested that maternal antisocial personality characteristics are related to children's problem behavior (L. N. Robins & Rutter, 1990; Simons, 1996). In addition, maternal anxiousness and negativity are related to children's problem behaviors (Bates, Bayles, Bennett, Ridge, & Brown, 1991).

Foster Parents

Surprisingly little is known about the mental health of foster parents. Perhaps researchers have not examined mental health problems among foster parents, on the assumption that those with such problems are not approved to foster. Only three studies were found that examined the mental health of foster parents. Campbell and colleagues (1980) reported that foster parents in 16% of workers' "worst" placements had "psychiatric problems," but that none of the parents in the "best" placements had such problems; apparently, the presence of psychiatric problems was determined subjectively by workers. Berrick (1997), using

the Duke Health Profile, found that both kin and nonkin foster parents were in the "healthy" range compared to normative samples on all subscales and that there were no differences between kin and nonkin parents. Lipton (1997), using the Global Severity Index of the Brief Symptom Inventory, found that foster parents had fewer symptoms than did biological parents. We were unable to find any studies that examined the association between foster parents' mental health and foster children's social and emotional adjustment, again indicating an important area for future research.

Social Support

General Population

The issue of children's social support and their social and emotional adjustment is complicated and has not been researched in the general population in any great detail. There seem to be two ways of looking at how social support might influence how children deal with stress and chronic adversity. The first is direct support from support-givers to children. Potential support-givers include members of the immediate family (i.e., parents, siblings); kin; teachers; other adults (i.e., coaches, ministers, neighbors); and peers. Based on their comprehensive review, Barrera and Li (1996) concluded that "during preadolescence and early adolescence, parents (particularly mothers) are greater sources of support than peers" (p. 315). This shifts a bit during middle adolescence, with peers becoming increasingly more important sources of social support, particularly in terms of enhancing self-esteem. A balance between peer and parent support returns during late adolescence and early adulthood, when parents provide more support, relatively speaking. Barrera and Li reviewed seven studies that compared the relative effects of family support and support from peers and found that the strongest protective associations against youth problem behaviors favored family support rather than peer support.

Theoretically, a second way in which social support may come into play is through indirect influence. In this case, social support provided to the primary caretaker may influence the child's well-being. However, most research suggests that social support provided to parents is unrelated to child maladjustment, particularly when other important familial factors, such as parenting quality and parental depressive affect, are controlled (Dunst, Trivett, & Cross, 1986; Klebanov et al., 1997). Spousal support (rather than support provided from kin and friends), on the other hand, may reduce children's problem behavior by improving marital quality and parenting (Cutrona, 1996; Simons & Johnson, 1996).

Foster Families

Soliday and colleagues (1994) and Gaudin and Sutphen (1993) assessed social support reported by foster mothers. Neither study reported information concerning the proportion of mothers with inadequate social support. Mothers who reported higher community support were more satisfied with parenting, and those who reported more intimate support had lower levels of parenting stress (Soliday et al., 1994). Although the sizes of social networks were similar, kinship foster parents reported more instrumental and affective support than did nonkin foster parents (Gaudin & Sutphen, 1993). However, we were unable to find any studies that examined the direct or indirect effects of

social support perceived by foster parents on foster children's social and emotional adjustment.

Conclusions

Foster families provide almost exclusive care for a large and increasing number of children in substitute care, many of whom have behavioral or emotional problems or are at risk for such problems. One of the goals of this review was to identify if and how characteristics of these foster families influence the well-being of foster children in their care. A large body of research on children and families in the general population has identified a number of family factors that likely contribute to children's social and emotional adjustment. These include the quality of parenting, the quality of the home environment for caregiving, the quality of general family functioning, the quality of marital functioning (in families with two parents), elements of family demography, the interplay between child temperament and parental capacity to adapt to temperamental variability, parents' mental health, and the availability of needed social support.

The limited available evidence suggests a link between foster parent and family characteristics and behavioral and emotional problems of foster children. However, given the long history of family foster care and the millions of children placed with foster families over the years, it is startling how little is known about how foster parents and families vary on these important dimensions. Not only is little known about how foster families affect the behavioral and emotional functioning of foster children, but because there has been so little longitudinal research, it is unclear which aspects of the foster family exacerbate children's poor functioning, which ameliorate existing difficulties, and which prevent adjustment problems from developing. It is also not known which aspects of foster family functioning promote positive social outcomes in foster children. The effects of foster children's behavior on foster family functioning, parenting, and marital quality have also not been examined. Future research needs to address these various developmental possibilities.

In addition to examining the link between foster parent and family characteristics and behavioral and emotional problems in foster children, a second purpose of this review was to estimate the rate of foster families with problems in these various areas of socialization importance. The limited evidence available indicates that the vast majority of approved foster parents and families do not have clinical problems in the areas reviewed. However, there is reason to believe that a proportion of approved foster parents and families (approximately 15–20%) have problems in their home environment, family functioning, and parenting. In several key areas—parental mental health, marital conflict, social support, and temperament—we simply do not know what, if any, proportion of foster parents have significant limitations.

The third goal of this review was to identify differences that might exist across caregiving environments, particularly in terms of kin and nonkin environments. Again, research that includes the type of caregiving environment as a conditionalizing factor is limited. Existing research suggests few differences between kin and nonkin environments. However, given that so little research has been conducted with this comparative focus, given that the number of kin caregivers has increased in recent years, and given the possibility that some of the debilitating characteristics of foster children's birth families might also be shared by

their caregiving relatives, there is a great need for additional research.

Behavioral and emotional problems of foster children are undoubtedly influenced by factors other than those discussed in this review. For example, many foster children enter care with behavioral or emotional problems developed in the context of their family of origin or based in genetics. In addition, foster parent and family characteristics not reviewed in this article may be linked to the behavioral and emotional problems of foster children. Also, characteristics of the foster care system, such as shortages in services, might indirectly influence the behavioral and emotional problems of foster children. Nevertheless, on a day-to-day basis, foster families are the front-line service providers for the children in family foster care, and clearly we need to understand better how these families influence the behavioral and emotional problems of the foster children placed in their care.

Behavioral and emotional problems are not the only outcomes of importance for foster children; other aspects of well-being, as well as safety and permanency, are also of critical importance (Altshuler & Gleeson, 1999). However, many of the children in foster care have significant behavioral and emotional problems or are at risk for developing such problems. Thus, it is vitally important to better understand how foster families and other fundamental participants in the foster care system contribute to the prevention and amelioration of behavioral and emotional problems in foster children.

There are a number of methodological improvements that would significantly enhance the quality of our knowledge in this area. First, probability sampling methods should be used to ensure the generalizability of results, and information should be provided about nonresponse and nonresponse bias to better understand potential sample biases. Second, larger samples should be used to ensure adequate statistical power and more accurate estimates of rates of clinical problems. Third, greater attention should be given to foster fathers, kinship care families, and foster family applicants because of their central role in fostering and because of our lack of knowledge about these key family foster care providers. Fourth, basic demographic characteristics of foster parents and families should be reported to ensure a clear picture of the type of parents and families sampled and to facilitate comparisons across studies. Fifth, more longitudinal research and a greater use of relevant non-foster family comparison groups are needed to examine issues of causality and to better understand changes over time. Sixth, to ensure adequate measurement of the constructs of interest, there should be a greater use of psychometrically sound standardized measures with relevant norms, and basic psychometric information (e.g., internal consistency reliability) should be reported for foster parents and families. Seventh, when standardized measures with relevant norms are used, rates of parents or families in problematic ranges should be reported. Finally, although family foster care has many unique characteristics that need to be considered in the design of research, future family foster care research would benefit theoretically and methodologically from greater attention to the substantive results and research methodology used in the general population literature on children and families.

Foster parents and families play a pivotal role in the social and emotional adjustment of the children placed in their care. Clearly, a more intensive and methodologically sound program of research is needed in this area to best serve foster children,

the foster families who play the central role in their care, and the families from whom these children have been removed.

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