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ASSESSING THE LONG-TERM
EFFECTS OF FOSTER CARE: A
RESEARCH SYNTHESIS

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**Assessing the Long-Term Effects of Foster Care:
A Research Synthesis**

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Preface

This report reviews the findings of twenty-seven foster care studies published between 1960 and 1990. Its focus is on outcomes: the impact that foster care has had on the adult lives of former foster children. The authors begin with an historical sketch of foster care in the United States that illustrates the ongoing tension between child protection and family preservation. They then follow with an appraisal of the studies they review; some studies are more useful than others, given that they have comparison groups, large sample sizes, and low attrition rates. They then discuss the findings of these studies as they pertain to adult self-sufficiency, behavioral adjustment, family and social supports, and personal well-being. In general, adults who used to be in foster care fare poorer than adults in the population at large; however, this does not necessarily mean that foster care impairs one's chances for a good life; it could instead indicate that children who enter foster care are already destined for a difficult adulthood and that interventions like foster care are inadequate to alter this destiny. The report concludes with a summary of the findings; a discussion of the factors associated with foster care outcomes (e.g., age at placement, time in care), and suggestions for future research.

I. FOSTER CARE AND FOSTER CARE STUDIES

CHAPTER 1. INTRODUCTION

The history of foster care services is marked by dramatic shifts in emphasis. These shifts have been primarily a function of the ongoing and inherent tension between the need to assure the safety and well-being of children and the need to recognize and support parental rights and responsibilities. Initially viewed as a more or less permanent solution to the problem of what to do with children whose natural families were unable to provide proper care, long-term foster care came to be seen as a problem itself. This changing view, coupled with substantial increases in out-of-home placements (particularly in foster family care) in the 1960s and 1970s, led to passage of the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272), which sought to improve efforts to prevent placement and to move foster children into permanent homes expeditiously (permanency planning).

In more recent years concern about the fruits of permanency planning has grown. This concern has grown out of reports of increasing reentry rates in foster care, negative outcomes for children returned home, erosion of earlier policy and program commitments to adoptive placements for special-needs children, recognition of the high proportions of foster care adolescents who "age out" of the system each year, and evidence of the overrepresentation of former foster children among adult populations with problems.

These trends in expectations and outcomes of foster care demonstrate how very difficult it is to design policies and programs when the goals of child protection and family preservation are in conflict.

This report provides a comprehensive and critical review of the impact of foster care on the children served. Its specific objectives are to

- * Provide a framework for the critical assessment of trends in programs and policies which have evolved;

- * Identify what is known and where there are gaps in knowledge concerning the impact of foster care;
- * Develop recommendations for future data collection and research;
- * Provide recommendations for program and policy development.

To meet these objectives, we have conducted a review of foster care research of the past three decades. Chapter 2 gives a brief history of the foster care program in this country. This historical perspective provides a context for understanding current conflicts in policy and practice.

Chapter 3 describes the conceptual framework that organizes and focuses our search of the foster care literature and the processing of findings. This framework, includes four main features. The first distinguishes different stages in the foster care system (input, process, output, and outcome) and the relationships between those stages. The second feature describes the types of research studies (descriptive, trend analysis, and evaluative).

The third and perhaps most important feature of the conceptual framework is its focus on outcomes. The position taken here is that the most important questions to be asked about foster care concern its long-term impact on the children who receive it. Is a child's ability to function as an adult impaired or enhanced as a result of the time spent in foster care? Adult functioning is divided into four critical outcomes: adult self-sufficiency, behavioral adjustment, family and social support systems, and overall well-being. This focus on outcomes also guides our search through the much larger body of research describing the determinants of placement, experience in placement, and discharge status. From an outcomes perspective, the relevance of these descriptive, input- and process-oriented studies is the identification of factors that might influence long-term outcomes.

The final feature of the conceptual framework is an attempt to differentiate the foster care experience along several lines, including the type of placement, antecedents to placement, and characteristics of the child. Although the major function of this review is to sort through these

differentiating factors to decide which are important, we needed to make some distinctions a priori to better focus our study.

An outcomes perspective requires that one start at the end. Only a limited number of studies have looked at the long-term functioning of foster care residents. They vary significantly in design, sample size, use of comparison groups, population, and quality. In Chapter 3 we describe the search strategies used to identify studies, present an overview of the studies themselves, and critique the research methodologies they use. A more detailed description of the individual studies is provided in an appendix to this report.

Chapters 4-7 (Section II) present the findings from the studies. These chapters are organized around the critical outcomes identified in Chapter 3. Chapter 4 looks at issues of adult self-sufficiency, including educational attainment and intellectual ability, employment and economic stability, and residential status and housing. Chapter 5 examines adult behavioral adjustment as reflected in reported criminal behavior and chemical dependency. In Chapter 6 results are reported for those studies which looked at family and social adjustment, including marriage and parenting, involvement with the biological and foster families, relationships with peers, and community involvement. Chapter 7 reports results on overall well-being (mental and emotional health, physical health, and life satisfaction).

Each of these chapters first focuses on reported outcomes, some explicitly utilizing comparisons, some not. Studies of adult populations who fail to function adequately by society's standards (the homeless and those on welfare, for example) are then introduced to determine if former foster children are overrepresented in their ranks.

Chapters 8-10 (Section III) focus on summarizing and extrapolating from the research reviewed in the previous chapters. An integration of the outcome findings is provided in Chapter 8 followed in Chapter 9 by the identification of factors that might influence these outcomes. The final

chapter returns to the earlier methodological critique of the studies to suggest approaches to the formulation of research and policy which might lead to more definitive answers to questions about the treatment and protection of children whose own families and communities are unable to care for them.

CHAPTER 2. FOSTER CARE IN THE UNITED STATES: A BRIEF HISTORY

To fully understand the present state of the foster care system requires some appreciation of its origins and evolution. More extensive histories are provided elsewhere (see for example Kadushin and Martin, 1988; Laird and Hartman, 1985). The intent here is to provide some background on major developments and shifts in the program's history which help explain current goals and the policies and practices that flow from these goals.

Some major milestones in the evolution of foster care services in this country are identified in Figure 2.1. The origins of the current system can be traced to Charles Loring Brace, who established the Placing Out System of the New York Children's Aid Society in 1853. The primary orientation of this program was child placement, with the main goal being the protection of the community rather than protection of the children being placed. The program involved the placement of eastern, largely urban vagrant children whose behavior (violence, robbery, prostitution) was viewed as a threat to the public, in western, largely rural areas of the country. In that era, placement at such distances resulted in a complete severance of the child's ties with family and community of origin. Placements were viewed as more or less permanent, although no formal attempt was made to encourage adoption. The Society retained control of the child's custody and could remove the child from the foster home. Nor was any attempt made to work with birth parents toward reunification, despite the fact that a fair number of the children had one or even two living parents.

The placing-out approach grew and spread so that by 1923 there were thirty-four states in which such State Children's Aid Societies had been established. An estimated 100,000 children from New York City alone were placed between the years 1854 and 1929 (Kadushin and Martin, 1988).

Criticisms of the placing-out system began shortly after its inception. Potential for mistreatment of the children was obvious to anyone willing to look from the child's perspective. While anecdotal information was cited, none of this criticism appears to have been based on any

Figure 2.1

Milestones in the Evolution of Foster Care

1853	Charles Loring Brace, The Placing Out System, N.Y. Children's Aid Society; 100,000 children placed 1854-1929
1886	Charles Birtwell, Boston Children's Aid Society
1909	First White House Conference on Children
1924	Theis, "How Foster Children Turn Out"
1930	Trotzkey, <u>Institutional Care and Placing Out</u>
1959	Maas & Engler, "foster care drift"
1966	Casey Family Program
1974	Seattle Homebuilders Program
1978	Indian Child Welfare Act
1980	Adoption Assistance and Child Welfare Act; 303,500 children in foster care
1983	Festinger, <u>No One Ever Asked Us</u> ; 276,000 children in foster care
1990	Fanshel, Finch & Grundy, <u>Foster Children in a Life-Course Perspective</u> ; 340,000 children in foster care

systematic investigation of the outcomes of placement. Accusations by the New York Prison Association in 1876 that midwestern prisons were filled with former wards of Charles Brace's program led Brace to sponsor a series of studies to investigate the allegations. These studies, however, while indicating that only a limited number of children were maltreated or turned out poorly, left "much to be desired in terms of their objectivity, the nature of sampling methods employed, and the somewhat haphazard way in which they were obtained" (Kadushin, 1974, p. 398).

Beginning in 1886, under the leadership of Charles Birtwell, the Boston Children's Aid Society pioneered a new approach to foster care, which was much more oriented to the needs of the child and the potential and importance of the biological family. The foster parent-foster child relationship was designed to become "a means through which the child [was] ultimately restored to the family" (Kadushin and Martin, 1988, p. 350). More preventive services were also stressed to avoid placement altogether for some children. This approach to foster care gained acceptance over the "rescue" approach of Charles Brace and was affirmed by the First White House Conference on Children in 1909.

The use of institutional placements versus family settings for children has been debated since the inception of Brace's placing-out family foster care system. With the closing to children at the end of the nineteenth century of mixed almshouses, where all types of dependent populations were housed together, foster family care became the preferred placement alternative. This position was also embraced by the 1909 White House Conference on Children.

It is noteworthy that this early shift from institutions to foster families and the increased emphasis on family preservation over child saving were not prompted by systematic study. No significant studies of the effectiveness of foster care were undertaken for some twenty-five years following publication of the last Brace-sponsored studies (Wolins and Piliavin, 1964). However, two significant studies published in 1924 and 1930 reported results which did not appear to support these

policy and program changes. How Foster Children Turn Out (Theis, 1924) reported results of interviews with approximately two-thirds of a sample of 797 children who at one time had been placed in foster care. This study was generally supportive of foster care and its child-saving function.

A 1930 study by Trotzkey addressed the relative merits of foster family care and institutional care. It compared 1,214 foster children with 2,532 children in institutional care, concluding that both types of care were needed and were relatively successful. Thus, given Trotzkey's findings, one could not claim that foster care was the only appropriate out-of-home placement. Following the studies by Theis and Trotzkey, no other significant research on foster care was performed for twenty-five years (Lindsey, 1991b).

The proportion of children in substitute care of all kinds appears to have peaked in the early 1930s. With the passage of the Social Security Act in 1935, the proportion declined dramatically. Most of this decline, however, was the result of decreased use of institutional placements. Foster family care levels remained relatively stable until 1960, when they began to rise significantly.

The 1960s and 1970s produced a series of studies which served as an indictment of the foster care program, the earliest and perhaps most influential being Maas and Engler's Children in Need of Parents (1959). These studies (or their interpretations by others) portrayed the foster care system as a kind of limbo or purgatory into which children were cast, never to emerge. Among the identified problems were "foster care drift," a term suggesting that children aimlessly floated through foster care for extended periods of time without purpose or direction. Foster care placement was viewed as unstable by virtue of its open arrangement and by the movement of children from placement to placement while in foster care. It was argued that the goal of family reunification was largely ignored, and that with little or no parental visiting occurring in most cases and virtually no services provided to the family of origin, family ties were effectively severed with the placement of the child in foster care. Adoption, a chance for a stable home for some children, was not adequately

developed as an option, was pursued with only a small proportion of children, and was achieved for even fewer. Foster care, which had come to be viewed as a more or less permanent solution for children whose families could not provide adequate care, now came to be viewed as the problem.

This analysis and interpretation of foster care resulted in the passage of two major pieces of legislation: the Indian Child Welfare Act of 1978 (P.L. 95-608) and the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96-272). These statutes and the resulting regulations are the major forces shaping foster care programs and services today.

The basic thrust of P.L. 95-608 and P.L. 96-272 was to ensure that families were not needlessly broken up and that there would be better monitoring to assure that children were either returned to their original homes or soon placed in alternate, permanent homes. P.L. 95-608 dealt with the specific problem of high placement rates of Indian children in non-Indian homes, by increasing the authority of tribal courts to determine the placement of community children. Under P.L. 96-272, a clear hierarchy of possible outcomes for children in placement was defined. In order of preference, placement goals were set as (1) reunification; (2) adoption; (3) guardianship; and (4) long-term foster care. Foster care came to be viewed as a temporary placement that was used while plans were made for a permanent solution. In effect, foster care placement was viewed as the least desirable alternative and perhaps a consequence of the failure to achieve permanent placement.

Following publication of the Maas and Engler study, most members of the child welfare community drew negative conclusions about the potential value of foster care, particularly as an extended placement option. Joseph Reid, executive director of the Child Welfare League of America, and Jim Casey, founder and president of United Parcel Service, however, responded by initiating a program designed to improve foster care rather than redefine its role and reduce its use. The Casey Family Program was based on the assumption that neither return home nor adoption was not a viable

option for some, if not many, children, and it was therefore necessary to provide quality foster family care.

The Casey Family Program is not radically different from foster family services as conventionally practiced throughout the United States, but it does include significant enhancements. The program serves "hard to place" children who have been in a large number of prior placements. Staff tend to be paid higher-than-average salaries and have smaller caseloads. As a consequence there is less staff turnover than occurs in most agencies. The program has devoted considerable resources to a longitudinal study of the children it serves. This study (Fanshel, Finch, and Grundy, 1990) is one of the twenty-seven foster care studies reviewed below.

Another prominent follow-up study ran counter to the prevailing negative views of foster care (Festinger, 1983). In this retrospective study, Festinger concluded that there was little evidence to support the bleak prognosis often made for foster care children and that as young adults "they are not so different from others their age."

There has always been, and will always be, a tension in the child welfare field between "child saving" and "family preservation." In recent years the emphasis has shifted from child-saving programs like foster care to the family preservation movement as both a philosophy for child welfare and as a set of formal programs and procedures. Family preservation goals are articulated under "reasonable effort" language in P.L. 96-272; however, funding and specific programs have been slow to follow in the public sector. Major initiatives have been funded by the private sector, with the Homebuilders Program in Seattle serving as a primary model. Programs remain relatively small, serving an estimated five thousand children nationwide (Nelson, 1990). Interest in family preservation has grown as these programs have been touted as a solution to the high and rising costs of out-of-home placement. More programs to preserve families are likely to develop, even though some experts have begun to raise questions about the possible detrimental effects of maintaining

children in or returning more children to their biological families (see, for example, Barth and Berry, 1988). In addition, recent evaluations have raised serious doubts about the ability of these programs to prevent placement (Schwartz and EuClaire, 1985; Yuan, 1990).

With the implementation of P.L. 96-272 in 1980, when the foster care caseload peaked at slightly over 300,000, the number of children in foster care dropped to a low of 276,000 in 1985. Since then the numbers have steadily climbed and are now well over the 300,000 mark (U.S. House of Representatives, Select Committee on Children, Youth, and Families, 1989). With this growth in caseloads and the strong appeal of family preservation as an alternative, foster care is once again under fire. As we consider new policy and program initiatives, it is particularly critical to determine what we really know about the foster care experience and its long-term effects on the children served.

CHAPTER 3. CONCEPTUAL FRAMEWORK AND THE IDENTIFICATION AND VALUATION OF FOSTER CARE STUDIES

CONCEPTUAL FRAMEWORK

A crucial though often overlooked step in the review of research is the development of a guiding strategy. This strategy should identify the specific questions that the review is trying to address and whether the review is exploratory or built around specific testable hypotheses or research questions. It should also provide guidelines for selecting and differentiating studies and specify important parameters of the population or problem being studied that may influence the comparability or external validity of the studies reviewed (Light and Pillemer, 1984, p. 12).

The conceptual approach described in this chapter is intended to fulfill these functions. It differentiates stages in the delivery of foster care and the functions of research studies. This organization becomes the basis for the format used in the subsequent chapters of this book. The rationale for focusing on outcomes is also explained in this chapter. This orientation becomes an additional organizing principle and filter for screening the findings of the research studies reviewed. The chapter concludes with a discussion of factors that differentiate the population of foster care residents and the foster care experience. These differentiating factors are important since they may influence comparisons across studies and generalizations from the findings of specific studies. This differentiation also helps to focus the search for studies of value for the current review.

Stages in the Delivery of Foster Care

The conceptual framework utilized in this review divides the foster care process into four stages: inputs, process, outputs, and outcomes. This is a general differentiation commonly used in evaluation and program design, which takes on specific meaning within the context of foster care services. Inputs refer to the contextual and environmental factors that determine the mandate for action, flow of resources, and identification of needs and target populations. Of particular concern in

the context of foster care are the numbers of children at risk of placement, placement rates, characteristics of those placed and not placed, and the impact of legislation and regulations. Process focuses on what happens to those who enter the system. In the foster care system process covers type of placement services received, placement stability, time in care, and administrative activities designed to affect this experience (e.g., case review).

Although outputs can sometimes be difficult to distinguish from outcomes, the differentiation is critical here. Reunification with biological parents (output) should not be achieved at the expense of the child's basic well-being and subsequent functioning (outcome). While reunification may be justified as a goal on the assumption that children will be better off with their biological parent(s), other motives influence this decision (e.g., family preservation, parental rights), and not all families of origin are able or willing to assume their responsibilities. Within the context of foster care services, outputs can best be thought of as discharge destinations (i.e., reunification, guardianship, adoption, independent living). Outcomes refer to more long-term effects such as foster care recidivism; abuse/neglect recidivism; child development; and later functioning and adjustment as a child, adolescent, and adult. Outcomes, therefore, reflect the impact of the other three stages upon the foster care child.

Types of Research Studies

Within each of the four stages described above, the review identifies three types of studies that provide information relevant to a comprehensive assessment of the impact of foster care. These are (1) descriptive studies, (2) trend analyses, and (3) evaluative studies.

Descriptive studies focus on the characteristics of programs and populations and make no attempt to discern trends or causal relationships. Trend studies place these descriptors in a time context. Evaluative studies are defined broadly for purposes of this review to include correlational

studies which attempt to identify determinants of placement, experiences in foster care, discharge status, and subsequent adjustment and functioning.

Focusing on Outcomes of Foster Care

Data collection activities in social services naturally focus on questions of "Who was served?" and "What services did they receive?" Such input and process questions are important in determining if monies were properly spent (Newman and Turem, 1974). The field has experienced much more difficulty integrating data collection around short- and long-term effects of programs and services (Fischer, 1976). These difficulties arise from both conceptual and practical problems. In one author's work with a state agency attempting to develop an evaluation system for a case review unit, it came as a major revelation to most of the staff that case review should ultimately be judged in terms of its contribution to the achievement of permanent placements for children rather than by the timeliness, content, or numbers participating in the reviews. And indeed permanent placement is of value only in that it contributes to the final outcome--a well-functioning adult. Foster care itself was once viewed as an outcome (Kadushin and Martin, 1988), the result of an intervention designed to rescue a child from an abusive or neglectful home and assure his or her continuing safety. Long-term foster care was a solution, not a problem. The notion of foster care as essentially a planning process or step toward a permanent placement for children is relatively new and one with which the field is still struggling (Maluccio, Fein, and Olmstead, 1986).

While conceptual problems exist in developing an outcome orientation to foster care services, more pragmatic barriers also remain to be surmounted. Even with a clear understanding of the need to monitor outcomes, obtaining follow-up data on cases discharged months or even years ago can be difficult and costly. Although the federal government stopped collecting any data on children in foster care in 1975, current plans to revive data collection activities to build a national data base would fall far short of providing outcome data.

Despite these difficulties, considerable progress has been made as reflected in both the numbers and quality of outcome studies that have been conducted in the social work field (Fischer, 1976). The 1980 Adoption Assistance and Child Welfare Act is output/outcome oriented in its focus on permanent placements for children. This legislation also embodies the perspective of foster care as a planning process rather than an end-state solution. There would even appear to be some agreement about the use of basic standards and uniformity in outcome measurement emerging in child welfare programs (McDonald et al., 1989). However, as will become clear in the review that follows, considerably more attention is still focused on characteristics of children coming into foster care (inputs), the services they receive and time in foster care (process), and where they go at discharge (outputs) than on what happens to children after they leave the foster care system (outcomes).

Foster care will always retain a child-saving function designed to provide immediate relief from abuse or neglect. While in care, children should not be allowed to drift from year to year or placement to placement, nor should they suffer further unnecessary trauma from abuse or neglect. Permanency in their living arrangements is clearly desirable. However, the efficacy of a foster care placement must ultimately be judged by its long-term impact on the child's ability to function as an adult. Client and service typologies abound; lists of child, family, and community characteristics are endless, as are the possible descriptors of the child's experience in foster care. The position taken here is that the only relevant criterion for sifting through these descriptors is to judge them by their importance in achieving desired outcomes for the children served by the foster care system.

Factors Relating to Adult Outcomes

Part of the purpose of this review is to identify input, process, and output variables that have been found to be related to outcomes. In attempting to integrate and compare findings from outcome studies, however, it is necessary to have some a priori criteria that help identify when appropriate comparisons across studies can be made and to determine how a particular study's findings might

generalize to other settings and populations. This is especially true in foster care, where there exists a wide range in the types of families and children for whom this intervention is used, as well as in foster care placement and discharge experiences. For example, the effects of foster care would be expected to be minimal in the case of an infant who is voluntarily placed in foster care for several weeks while awaiting adoption. A sexually abused child removed from the home at age seven who remains in foster care until age eighteen represents an entirely different phenomenon.

These two extreme examples help to identify the important a priori differentiating factors of relevance to this research review. The stages in the delivery of care can be used to organize these differentiating factors. With respect to inputs, we would expect three factors to be of major importance: age at first placement, special needs and/or disabilities of the child, and type of abuse or neglect. Time in out-of-home placement and type of placement are expected to be the primary process variables. Outputs are represented by the permanency planning goals available to children in foster care: reunification, adoption, guardianship, and long-term foster care. Currently, reunification and adoption are favored as goals for children; they are expected to provide greater support for young adults than are guardianship and long-term foster care.

The input differentiating factors describe the context in which the foster care experience occurs. Process and output differentiating factors describe significant variations in the foster care experience of children. These differentiating factors serve two functions for this research review. First they help provide a tighter definition of the topic of study, permitting a prioritization of studies. Applying these differentiating criteria in assessing the impact of foster care, we can say that the primary focus in this review is on the extreme end of the continuum--those children spending significant time in long-term foster care who eventually "age out" of the system. In looking at outcomes for these individuals, one must differentiate the paths by which they came into placement

(type of abuse/neglect) and conditions which may create additional challenges to their long-term adjustment (special needs or disabilities).

Second, the specified differentiating factors serve as hypothesized predictors of outcomes. Subsequent chapters will involve a search for evidence supporting or refuting these hypotheses and for alternative differentiating factors.

IDENTIFICATION AND VALUATION OF FOSTER CARE STUDIES

Identification of Research Studies

Light and Pillemer (1984, pp. 32-39) describe four options for choosing studies for literature reviews: (1) use every available study, (2) stratify by study characteristics, (3) use only published studies, or (4) use a panel of experts. In this review, the first option has been taken. An attempt has been made to include every available outcome study, published and unpublished, whose results have been reported in English. Light and Pillemer describe the advantages of such an approach: it avoids the problem of choosing among studies and it "has scientific merit" when one wants to explore all that is known in a particular area (p. 32). Its disadvantages include using studies that are seriously flawed, locating every study, and dealing with studies that are substantively different from the others in the review (e.g., those that were carried out before or after a major change in the foster care program).

The following strategies have been used to address these potential disadvantages. The methodology of each study is described briefly, and its limitations are discussed. Explicit criteria have been developed for judging the methodological adequacy of the studies and their relative merits. Efforts have been made within each chapter to clarify the scope and boundaries of the review and the criteria for differentially weighting the importance of different studies.

Reasonable efforts have been made to locate all research studies of foster care outcomes completed within the past thirty years. Various sources of studies were utilized: bibliographical references in books, articles, and reports; the card catalog at the University of Kansas; computer searches of PsychLit and Dissertation Abstracts; a review of reference materials such as Social Work Abstracts and of the contents pages of recent journals; and personal contacts with experts in the field. Materials that were available within the library system of the University of Kansas or from faculty and students of the School of Social Welfare were accessed with relative ease. In addition, many

publications were requested through the library's interlibrary loan services or from the organizations or offices which published the reports. Most relevant citations were found. In some cases, the only information available on a piece of research was the reference made to it in another document; this material is included on a few occasions.

As stated above, the literature review focused on work completed within the last thirty years, from 1960 to 1990. Although most of the studies pertain to foster care in the United States, the review is not limited to this country. Documents have been included from other countries whose foster care delivery system is considered similar enough to that of the United States for the studies to be relevant and helpful.

Critical Outcomes

Ultimately, the use of foster care is evaluated according to its long-term effects on the recipients of the care--do we provide children a valuable service when we offer out-of-home care, or do we make a bad situation worse? Assessment of these effects may begin while the child is in care, but eventually it necessitates an examination of the adult lives of former foster children, with a particular interest in their ability to function as productive members of their communities. For this is what we ask of families, including substitute families: that they produce adults who are willing and able to live stable, relatively independent, reasonably happy lives and who can contribute to society as a whole.

Four categories of human functioning are used to assess the quality of life after foster care: (1) adult self-sufficiency, (2) behavioral adjustment, (3) family and social support systems, and (4) sense of well-being. These are ordered in what seem to be the current priorities of Western culture, as revealed in professional and colloquial expressions of concern and allocation of resources. The ordering also has a logical flow which suggests that one's functional level in the first category will

impact upon the second, and so on. The specific indicators chosen for review within each category are necessarily limited to what was chosen for study by the various investigators.

Adult self-sufficiency refers to the person's capacity to support himself or herself at a basic level. Included in this classification are accomplishments in education, employment and economic well-being, and adequacy of housing.

The category of behavioral adjustment explores such indications of the degree of personal stability as the use of alcohol and drugs and criminal behavior.

The level of family and social support and functioning is assessed through examinations of marital stability, parenting behavior, involvement with natural and/or foster families, interactions with peers or friends, and integration into the life of the community. The fourth outcome category explores the former foster children's general sense of well-being, mental and physical health, and satisfaction with their lives.

Identified Studies

A limited number of studies have explored the adult lives of former foster children. Most of these have focused on people who have left care within five years of the investigation, although some do extend beyond this time. In the review we have also included several studies that do not actually follow subjects into adulthood but at least report on older samples who are in their late teens at the time of the study or follow-up. These studies are most relevant to educational attainment or intellectual ability and have little relevance to more long-term adjustments such as marriage and parenting. Most of this research has been published within the last fifteen years.

The twenty-seven studies which are most central to the work of this report are described in detail in the appendix. In these descriptions an attempt has been made to provide consistent information on factors critical to the internal and external validity of the studies. However, not all

research is consistent in its reporting of the methodologies employed or characteristics of the samples. Missing information is noted, and the implications are discussed.

In Table 3.1, we have attempted to provide methodological information for each study describing sample size, selection criteria, and attrition; tracking procedures (retrospective or prospective); basis for comparison; outcome measures; follow-up period; and procedures for collecting data. External validity is most affected by the characteristics of the children served and their foster care experience. When available in the original study, information describing the child's age at placement; gender; type of abuse or neglect experienced; presence of any special needs or disabilities; duration of placement; and type of discharge describing the individual studies is provided in the Appendix describing the individual studies.

Methodological Critique

We found twenty-seven studies conducted over the past thirty years that report on the situation and functioning of former foster care residents who were in their late teens or early adulthood at the time of the studies. In twenty-two of these studies the subjects were seventeen or older at follow-up. The other five studies, which look at younger subjects, are primarily useful for their description of characteristics that are likely to affect adult functioning, primarily educational attainment and intellectual ability.

Of the twenty-seven studies that form the core material for this review, sixteen were done in the United States, five in England, three in Scotland, and one each in Australia, France, and Canada. Most of these studies (twenty-four) are retrospective. Only nine employ a comparison group; however, three provide significant, comparable descriptive statistics for other groups. Sample sizes vary considerably. Fifteen studies have fewer than one hundred subjects in the foster care group; however, four studies have over five hundred. Most of the subjects were in early adulthood (late teens and early twenties) at the time of the study. In two studies the oldest subjects were in their

Table 3.1
Studies of Outcomes of Foster Care

Source	Type of Study	Characteristics of Sample	Outcomes Studied	Data Collection	Dropout Rate
J. McCord, W. McCord, & E. Thurber. 1960. "The Effects of Foster Home Placement in the Prevention of Adult Antisocial Behavior." <u>Social Service Review</u> , 34, 415-419.	Prospective, with comparison group	N = 38 (19 in out-of-home) Ages: early 30s Selection criteria: Follow-up of an earlier delinquency prevention study in Massachusetts. Of 24 removed from their homes as young adolescents, data were available on 19, who became subjects. Matched comparison group was drawn from remaining sample (N=236).	Criminal behavior, alcoholism, mental health.	Observation of children and families.	21% dropout
H.S. Maas. 1963. "The Young Adult Adjustment of Twenty Wartime Residential Nursing Children." <u>Child Welfare</u> , 42, 57-72.	Retrospective, no comparison group	N = 20 Ages: 19-26 years Selection criteria: Placed at least 1 year as preschool children for their safety by parents in British wartime residential nurseries; average stay over 3 years.	Living arrangements, employment, leisure-time interests, education, and family life, Thematic Apperception Test.	All subjects interviewed; 14 observed with families; parents of 18 interviewed; records of collateral agencies.	78% dropout (Appears that first 20 successful contacts were used)
E.G. Meier. 1965. "Current Circumstances of Former Foster Children." <u>Child Welfare</u> , 44, 196-206.	Retrospective, no comparison group	N = 66 Ages: 28-32 years Selection criteria: Adults who as children had experienced 5 or more years of foster home care in Minnesota, who had not been returned to their own families during their childhoods, and who were discharged from guardianship between 7/1/48 and 12/31/49. Attempted to use all eligible males and a random sample of eligible females.	Social effectiveness and sense of well-being; includes family life, living arrangements, economic/employment history, community involvement.	Interviews and questionnaires; phone calls or letters from those who refused to participate in full study.	20% dropout

Table 3.1, (Continued)

Source	Type of Study	Characteristics of Sample	Outcomes Studied	Data Collection	Dropout Rate
M.E. Allerhand, R.E. Weber, & M. Haug. 1966. <u>Adaptation and Adaptability: The Bellefaire Follow-up Study</u> . New York: Child Welfare League of America.	Retrospective, no comparison group	N = 50 Ages: 18 years average Selection criteria: All boys discharged from Bellefaire in Cleveland between 1/58 and 6/61. Must have been in care at least 6 months.	Adaptability (intrapsychic balance and total role fulfillment) and adaptation (interpersonal and cultural role fulfillment).	Agency records; interviews with subjects, their parents, and psychotherapist if currently in treatment. Interviews held 1-2 years after discharge: 1959-63.	4% dropout
T. Ferguson. 1966. <u>Children in Care--and After</u> . London: Oxford Univ. Press.	Prospective, no comparison group; normative data provided	N = 203 Ages: 18-20 years Selection criteria: Youth in care of the Children's Department of Glasgow, Scotland, until the age of 18; left care between 1961 and 1963.	Educational achievement, health, employment and economic history, criminal behavior, family life and relationships, recreation.	Agency records, school teachers' reports, interviews with subjects every 6 months for 2 years after discharge from care. Data collected 1961-65.	1% dropout
L.L. Heston, D.D. Denney, & I.B. Pauly. 1966. "The Adult Adjustment of Persons Institutionalized as Children." <u>British Journal of Psychiatry</u> , 112, 1103-1110.	Retrospective, with comparison group	N = 97 (47 in placement) Ages: 21-50 years Selection criteria: Subjects placed in foundling homes in Oregon; 25 born to schizophrenic mothers in state psychiatric hospitals; average stay over 2 years.	MMPI scores, socioeconomic status, psychosocial disability, psychiatric diagnosis.	Interviews, record reviews	27% dropout
L.N. Robins. 1966. <u>Deviant Children Grown Up: A Sociological and Psychiatric Study of Sociopathic Personality</u> . Baltimore: Williams and Wilkins.	Retrospective, with comparison group	N = 491 (401 in placement) Ages: 27-53 years Selection criteria: 524 former child guidance clinic patients, 16% of whom had lived in foster homes and 16% in orphanages for 6 months or more prior to their referral to the clinic.	School problems and achievement, marital history, adult relationships, military service, job history, history of arrests and imprisonments, financial dependency, geographic moves, history of deviant behavior, physical and psychiatric diseases, alcohol and drug use, intellectual level, cooperativeness, willingness to talk, frankness and mood.	Interviews	21% dropout

Table 3.1 (Continued)

Source	Type of Study	Characteristics of Sample	Outcomes Studied	Data Collection	Dropout Rate
H.S. Maas. 1969. "Children in Long Term Foster Care." <u>Child Welfare</u> , 48, 321-333, 347.	Retrospective, no comparison group	N = 422 Ages = ? Selection criteria: Follow-up of children who had been studied by Maas and Engler in the late 1950s; all had been in foster care for at least 3 months in 1 of 9 counties in the U.S. as of 4/1/57. Eight of the 9 original counties participated in this study.	Disposition from care and length of time in care.	Original study: agency records; collected data in 1957-58. This study: agency staff completed questionnaires in 1967.	23% dropout
E.A. Frommer & G. O'Shea. 1973a. "Antenatal Identification of Women Liable to Have Problems in Managing Their Infants." <u>British Journal of Psychiatry</u> , 123, 149-156. 1973b. "The Importance of Childhood Experience in Relation to Problems of Marriage and Family-Building." <u>British Journal of Psychiatry</u> , 1, 123, 157-160.	Retrospective, with comparison group; prospective, with comparison group	N = 89 (45 "separated" at time 1) Age = N/A Selection criteria: Study of the impact of early separation (before age 11) on women's later experiences with parenting; all married British-born first-time pregnant women attending antenatal clinics in London.	Feelings toward the child and husband, physical and mental health, expected financial impact of having a baby, behavior of the infant.	Interview and observation	28% dropout at time 1; 32% at time 2
S.E. Palmer. 1976. <u>Children in Long Term Care: Their Experience and Progress</u> . Canada: Family and Children's Services of London and Middlesex.	Retrospective, no comparison; limited normative data	N = 200 Ages: 18-21 years Selection criteria: Children who had been in the care of 2 Children's Aid Society agencies in Toronto, Canada, and the C.A.S. in London, England. They were at least 3 years of age when they left their families; minimum of 5 years in care ending when they reached majority (or up to age 21 if still in school); did not have physical or mental condition severe enough to keep them from leading a normal life; not from a distinct cultural background.	Social progress (improvement in behavior, performance, and emotional problems and academic progress).	Agency records. Date of data collection not given; probably early 1970s.	46% dropout

Table 3.1, (Continued)

Source	Type of Study	Characteristics of Sample	Outcomes Studied	Data Collection	Dropout Rate
S.N. Wolkind. 1977a. "A Child's Relationship after Admission to Residential Care." <u>Child Care, Health, and Development</u> , 3, 357-362. 1977b. "Women Who Have Been 'In Care'— Psychological and Social Status during Pregnancy." <u>Journal of Child Psychology and Psychiatry</u> , 18, 179-182.	Retrospective, with comparison	N = 534 (36 placed in care) Age: N/A Selection criteria: First-time pregnant women attending obstetric clinic in London; study of background factors affecting future maternal role; separated at least 3 months before age of 16.	History of housing or social problems, presence of psychiatric and chronic physical disorders.	Interviews	5% dropout
D. Fanshel & E.B. Shinn. 1978. <u>Children in Foster Care: A Longitudinal Investigation</u> . New York: Columbia University.	Retrospective, no comparison group	N = 624 Ages = 5-17 years Selection criteria: Had entered New York City's foster care system during 1966 and were in care at least 90 days; newborn-12 years of age at entry; this was their first entry into care. Used an age and gender quota system.	Status changes experienced by children; changes in their personal and social adjustment.	IQ and projective tests, behavioral ratings and developmental profiles, teacher assessments, and reports from parents, subjects, caseworkers. Data collected 1966-1971. (Not all data were collected for all subjects.)	Potential sample = ? Final sample = 624
T. Harari. 1980. "Teenagers Exiting from Foster Family Care: A Retrospective Look." Ph.D. dissertation, University of California, Berkeley.	Retrospective, no comparison group	N = 34 Age: 17-23 years (19.8 average) Selection criteria: Turned 18 by 2/78, had left care as adolescents between 1/74-6/78, had been in care a minimum of 1 1/2 years, not diagnosed as mentally retarded, still living in northern California.	"Current life experience," interpersonal affect and self-esteem scales from Jackson personality inventory.	Interviews	60% dropout
M. Fox & K. Arcuri. 1980. "Cognitive and Academic Functioning in Foster Children." <u>Child Welfare</u> , 59, 491-496.	Retrospective, no comparison group but standardized tests used	N = 163 Ages: 5-18 years Selection criteria: All children in care of Children's Aid Society of Pennsylvania in 1978.	Cognitive and academic skills; grade level.	Standardized tests including Wechsler Intelligence Tests and Wide Range Achievement Test.	0% for intelligence tests; 14% for WRAT-Reading; 65% for WRAT-Arithmetic

Table 3.1, (Continued)

Source	Type of Study	Characteristics of Study	Outcomes Studied	Data Collection	Dropout Rate
J. Triseliotis. 1980. "Growing Up in Foster Care and After." In J. Triseliotis, ed., <u>New Developments in Foster Care and Adoption</u> . London: Routledge & Kegan Paul.	Retrospective, no comparison group	N = 40 Ages: 20-21 years Selection criteria: Scottish study of subjects born in 1956-57 who had spent 7-15 years in a single foster home before the age of 16.	Educational achievement, employment history, family life, living arrangements, contact with foster family, coping ability, sense of well-being, criminal behavior, and perceptions of social workers.	Interviews with former foster children and their foster parents, 1976-77.	32% dropout
J. Kraus. 1981. "Foster Children Grown Up: Parameters of Care and Adult Delinquency." <u>Children and Youth Services Review</u> , 3, 99-114.	Retrospective, no comparison group	N = 491 Ages: 27-28 years Selection criteria: All former wards of the state of New South Wales, Australia, born 1951-52, and discharged at age 18 into situations other than the care of their family or relatives; averaged 9.3 years in care.	Criminal activity	Criminal and welfare records.	None
R. B. Zimmerman. 1982. <u>Foster Care in Retrospect</u> . New Orleans: Tulane Studies in Social Welfare, Vol. 14.	Retrospective, no comparison group; limited normative data	N = 109 Ages: 19-29 years Selection criteria: Former foster children in New Orleans who entered care between 1951 and 1969, had been in a foster home for at least a year, and had not been adopted; only 1 child from any one family.	Educational achievement, financial status, life satisfaction, family life and relationships, social support, views regarding fostering experience, employment, health, history of mental illness or antisocial behavior.	Interviews. March-April, 1980.	64% dropout
T. Festinger. 1983. <u>No One Ever Asked Us: A Postscript to Foster Care</u> . New York: Columbia University Press.	Retrospective, no comparison group; normative data provided	N = 277 Ages: 22-26 years Selection criteria: Young adults who had been discharged from foster care in the New York metropolitan area in 1975, who had been in care continuously for at least the preceding 5 years, and who were 18-21 years old at discharge.	Well-being, family life and relationships, personal problems, social support, educational achievement, employment, finances, health, drug/alcohol use, criminal behavior, use of formal help-providers, perceptions of fostering experience.	In-person and phone interviews, questionnaires. Data collected 5/79-4/80.	54% dropout

Table 3.1, (Continued)

Source	Type of Study	Characteristics of Study	Outcomes Studied	Data Collection	Dropout Rate
S. Frost & A.P. Jurich. 1983. "Follow-up Study of Children Residing in The Villages." <i>The Villages, Topeka, Kans.</i>	Retrospective, no comparison group	N = 95 Ages: ? Selection criteria: Former foster children who had lived in group care at the Villages in Topeka, Kansas, for at least 6 months.	Educational achievement, employment, social support, legal history, financial status, overall functioning level, satisfaction with care.	Personal and telephone interviews, questionnaires. 1982-83.	46% dropout
M.A. Jones & B. Moses. 1984. <u>West Virginia's Former Foster Children: Their Experiences in Care and Their Lives as Young Adults</u> . New York: Child Welfare League of America.	Retrospective, no comparison group; limited normative data	N = 328 Ages: 19-28 years Selection criteria: Young adults who had received foster care in West Virginia for at least 1 year after 10/1/77 but before 1/1/84, and who were at least 19 years of age on 1/1/84.	Living arrangements, employment/finances, social support, family life and relationships, evaluation of care received, education, health, legal history, alcohol/drug usage, life satisfaction.	Personal and telephone interviews. Questionnaires, data collected in 1984.	48% dropout
E.R. Rest & K.W. Watson. 1984. "Growing Up in Foster Care." <u>Child Welfare</u> , 63, 291-306.	Retrospective, no comparison group	N = 13 Ages: 19-31 Selection criteria: Former foster children who had been in the care of Chicago Child Care Society, who had entered care at the age of 6 or younger and reached maturity within the agency's program, and were discharged as independent functioning adults between 1966 and 1981.	Perceptions of experience of care and the impact of this on current life, employment, family life and relationships, self-concept.	Interviews, 1981	Not reported

Table 3.1, (Continued)

Source	Type of Study	Characteristics of Study	Outcomes Studied	Data Collection	Dropout Rate
J. Triseliotis & J. Russell. 1984. <u>Hard to Place: The Outcome of Adoption and Residential Care</u> . London: Heinemann.	Retrospective, with comparison group	N = 84 (40 in residential care, 44 adoptees) Ages: mean of 24 years for adoptees and 22.8 for residential care. Selection criteria: Children who had been in the care of public child welfare agencies and 1 private placement agency in Scotland, who had either been adopted or else placed in a residential facility, and who were in their 20s at the time of the study. All were from very disadvantaged backgrounds. Adoptees: 2-10 years old at the time of placement in adoptive homes; residential care: placed in 1 or more residential establishments by age of 10 and stayed there until at least 16 years old.	Employment, living arrangements, mental health problems, educational achievement, financial status, family life and relationships, health, criminal behavior, alcohol use, social support, coping capability, life satisfaction. Contrasts with biological families.	Agency records; interviews and questionnaires, 1978-80.	47% dropout
A. Dumaret. 1985. "IQ, Scholastic Performance, and Behaviors of Sibs Raised in Contrasting Environments." <u>Journal of Child Psychology and Psychiatry and Allied Disciplines</u> , 26, 553-580.	Retrospective, with comparison groups	N = 104 (35 adoptees, 48 own home, 21 foster care) Ages: ? Selection criteria: French study of the offspring of 28 mothers from a disadvantaged background who had abandoned their children with "a view to adoption."	IQ, school performance and behavior, job history and status (for older subjects).	Tests of subjects (in school), None questionnaire to teachers, records. Most of testing done in schools. Neither mothers nor children knew they were being studied. Unclear how the job history data were collected (probably record reviews).	None
D.K. Runyan & C. Gould. 1985. "Foster Care for Child Maltreatment: Impact on Delinquent Behavior." <u>Pediatrics</u> , 75, 562-568.	Retrospective, with comparison group	N = 114 foster children = 106 comparison Ages: average of 14 years Selection criteria: Maltreated children in 6 central North Carolina counties who had been in foster family care a minimum of 3 years. Controls were matched to maltreated children who were provided services in their own homes.	Juvenile delinquency	Abstracting of cumulative files maintained by social service agency, juvenile courts, and schools.	?

Table 3.1, (Continued)

Source	Type of Study	Characteristics of Study	Outcomes Studied	Data Collection	Dropout Rate
D. Quinton, M. Rutter, & C. Liddle. 1986. "Institutional Rearing, Parenting Difficulties, and Marital Support." In S. Chess & A. Thomas, eds., <u>Annual Progress in Child Psychiatry and Child Development, 1985</u> . New York: Brunner/Mazel.	Prospective, with comparison group	N = 81 ("ex-care" group) = 41 (control) Ages: 21-27 years Selection criteria: Two groups of British women first studied as children in the mid-1960s. First group were girls who had been residents in 1 of 2 children's homes. Comparison group were same age as ex-care group, never had been in care, lived with families in same geographic area and had had school behavior assessed at same age with same questionnaire.	Overall style of parenting, effectiveness and consistency of control, parental sensitivity to the child's needs, expressed warmth toward and criticism of the child.	Interviews with women and spouses, and direct observation of mother-child interactions.	14% dropout ("ex-care" group) 20% dropout (controls)
D. Fanshel, S.J. Finch, & J.F. Grundy. 1990. <u>Foster Children in Life Course Perspective</u> . New York: Columbia University Press.	Retrospective, no comparison	N = 106 106 were interviewed Ages: Early 20s to mid 30s; average = 24 years. Selection criteria: All former foster children who had been in placement with the Casey Family Program 1966-1984, and who had been discharged by 12/31/84. Included divisions in Washington, Idaho, Montana, California, and Oregon.	Personal and social functioning as adults.	Agency records. Interviews with 106 subjects living in Washington state.	41% dropout
R. Barth. 1990. "On Their Own: The Experiences of Youth after Foster Care." <u>Child and Adolescent Social Work</u> , 7, 419-440.	Retrospective, no comparison group	N = 55 Ages: 17-26 years Selection criteria: Youth who had left foster care in the San Francisco Bay area and Sacramento more than 1 year but less than 10 years prior to the study and who were at least 16 years old at the time of emancipation. All youth had been on their own for at least 1 year.	Employment, contact with foster parents and birth relatives, education, life skills, health, substance use, criminal activity, housing, income.	Interviews, typically in the youths' homes (24% by phone), lasting 1 to 3 hours.	25% dropout

Note: All Ns are final sample sizes, after attrition had taken place.

fifties. The reason for placement, type of placement, and time in care varied significantly across studies. However, in ten of the studies, subjects had spent most of their adolescent years in placement and had been discharged as independent adults. Most of the studies were designed to look broadly at the effects of foster care and include multiple outcome measures. Some, however, focused only on one or two outcomes, such as criminal activity, parenting skills, or attitudes. Data collection most often involved face-to-face interviews. Attrition was a significant problem for most studies, particularly the retrospective ones. Nonresponse rates were generally between one-third and one-half.

The number of studies, and the high degree of variability between them, make comparisons between studies and integration of findings difficult. Drawing conclusions from the findings of these studies is further complicated by the quality of the research and general lack of comparison data. In an attempt to impose some order on the studies themselves, we have rated the design of each study. Five criteria were considered in judging the adequacy of the study designs and analyses: (1) basis for comparison of outcomes; (2) age of respondents; (3) sample size; (4) attrition of subjects; and (5) time period in which the study was conducted. The rationale and categories for each criterion are discussed in the following sections. A summary of the methodological criteria for the studies is provided in Table 3.2.

Control Group. Ten of the 27 studies included a comparison group in their study design. The inclusion of a comparison group is, arguably, the most important criterion in determining the utility of a study. While other criteria are important to the internal and external validity of a study, the lack of a basis for comparison makes it virtually impossible to interpret the findings regardless of how well other aspects of the study were planned and implemented. Many of the studies provide detailed and rich descriptions of the well-being and functioning of former foster care children, but provide no basis for assessing whether these observations are "normal" or "exceptional." The use of a comparison group strengthens the research design by providing some basis for comparison;

Table 3.2

Study Strengths and Weaknesses

Study	Control Group	Age at Time of Study	Sample Size	Attrition	Date of Study
McCord, McCord, and Thurber (1960)	+1	+1	-1	+1	-1
Maas (1963)	-1	0	-1	-1	-1
Meier (1965)	-1	+1	0	+1	-1
Allerhand, Weber, and Haug (1966)	-1	-1	0	+1	-1
Ferguson (1966)	0	-1	+1	+1	-1
Heston, Denney, and Pauly (1966)	+1	+1	0	+1	-1
Robins (1966)	+1	+1	+1	+1	-1
Maas (1969)	-1	-1	+1	+1	-1
Frommer and O'Shea (1973a; 1973b)	+1	0	0	0	0
Palmer (1976)	+1	0	0	+1	0
Wolkind (1977a; 1977b)	+1	0	0	+1	0
Fanshel & Shinn (1978)	-1	-1	+1	+1	0
Harari (1980)	-1	0	0	-1	+1
Fox & Arcuri (1980)	0	-1	+1	+1	+1
Triseliotis (1980)	-1	0	0	0	+1
Kraus (1981)	-1	0	+1	+1	+1
Zimmerman (1982)	-1	0	+1	-1	+1
Festinger (1983)	0	0	+1	-1	+1
Frost & Jurich (1983)	-1	0	+1	0	+1
Jones & Moses (1984)	-1	0	+1	0	+1
Rest & Watson (1984)	-1	0	-1	-1	+1
Triseliotis & Russell (1984)	+1	0	0	0	+1
Dumaret (1985)	+1	-1	-1	+1	+1
Runyan and Gould (1985)	+1	-1	+1	0	+1
Quinton, Rutter, and Liddle (1986)	+1	0	0	+1	+1
Barth (1990)	-1	0	0	+1	+1
Fanshel, Finch, and Grundy (1990)	-1	0	+1	0	+1

however, defining an appropriate comparison group is not a simple matter. In a rigorous evaluation of the independent effects of foster care, one would like the comparison group to be equivalent to the treatment (foster care) group, with selection to the treatment group determined through a random process. Although none of the studies reviewed here employs random assignment to foster care to generate a control group, there is considerable evidence that actual placement decisions may approximate a random process, or at least a process which cannot be readily defined and predicted on the basis of a child's characteristics (Mech, 1970; Fanshel and Shinn, 1978; Costin, Bell, and Downs, 1991). There are two major alternatives to foster care: the family of origin and adoption. These groups represent the most frequently used source for comparison groups in the studies reviewed. While logical arguments could be made that children who are placed and remain in foster care for an extended time represent more "severe" cases than abused or neglected children who remain with their families or those who are ultimately adopted, the available evidence is not clear-cut. It would also be possible to provide some statistical control for other factors which could be plausibly linked to the placement decision and influence adult outcomes (e.g., type and severity of abuse or neglect, age at placement, gender), thereby strengthening the design and one's confidence in drawing comparisons.

In the absence of a comparison group, it is possible to collect data from other sources that help interpret the outcomes achieved by former foster care children. Festinger's (1983) study, which provides comparative data from general and specific population surveys, is an excellent example of this type of approach. A similar basis for comparison is provided in those studies which utilize standardized tests like the MMPI (Heston, Denney, and Pauly, 1966) or intelligence tests (Fox and Arcuri, 1980; Dumaret, 1985).

In scoring the studies in Table 3.2 on this criterion, studies that incorporate a control group are scored "+1." Those without a control group but which make use of some normative data or standardized tests are scored "0," while those providing no basis for comparison are scored "-1."

Age at Time of Study. While the length of the period between the foster care experience and the study in itself does not affect the quality of a study, it does determine the usefulness of a study for purposes of this review. Since our primary focus is the adult functioning of former foster children, several studies of foster children as children were excluded altogether from the review. Of those included, the ages of the subjects varied significantly. Since some outcomes in late adolescence, like educational level, are highly predictive of future adult functioning and self-sufficiency, studies involving subjects in their late teens were included. They were, however, scored the lowest at "-1." Studies with subjects in their twenties were scored "0," and those subjects who were thirty or older were scored "+1."

Sample Size. Studies should include enough subjects to provide confidence in the point estimates describing attributes of the population (e.g., income level, job status, use of drugs). Comparison studies require large enough samples to achieve reasonable levels of statistical power. Since not all studies included a comparison group, the reviewed studies were compared with respect to the number of foster care subjects only. Also, since attrition was significant in many studies, we consider the final sample, excluding dropouts. Using rather arbitrary cutoffs reflecting the distribution of sample sizes in the studies, those with less than thirty were scored "-1"; thirty to ninety-nine subjects, "0"; and those with one hundred or more foster care subjects were scored "+1."

Dropout. As noted above, loss of subjects was a major problem for most of the studies. Any nonrandom reduction in sample size can introduce sample bias. Rather than how much reduction occurred, the critical issue is how respondents differed from nonrespondents. None of the studies were able to adequately address this problem. In the absence of more detailed information, we assume that the greater the proportionate reduction in sample size, the greater the possibility that the respondents are not representative of the larger population from which they were drawn. Points on this scale were rather arbitrarily drawn to represent the range of sample-reduction rates observed in

the studies. Scoring was as follows: 50 percent or larger = "-1"; 30 to 49 percent = "0"; less than 30 percent = "+1."

Date of Study. It could be argued that studies today of adults who experienced foster care ten or twenty years ago have little relevance to current foster care programs. This same argument would of course apply to a prospective longitudinal study initiated now when its results are reported in ten or twenty years. The logic of this argument, however, is faulty. It is based on an assumption that the program in question is in such a state of flux that future or past programs of the same name bear little resemblance, or that populations served by these programs have changed dramatically. Even if such a state of change existed, it is likely that a well-designed longitudinal study would provide useful information of relevance to current programs. We would also argue that the care of children outside their original homes has not shifted dramatically in recent years. Instead, as outlined in the first chapter, the history of foster care in this country has been marked by a gradual evolution and the accommodation of sometimes conflicting goals and values.

We would agree, however, that one major milestone in the history of the foster care program is relatively recent and should be taken into account in evaluating the usefulness of the identified studies. This event is the enactment of P.L. 96-272, the Adoption Assistance and Child Welfare Act of 1980. This piece of legislation marked a major step in the evolution of the foster care program from being viewed as a relatively permanent solution to the need for out-of-home care for children to a temporary, planning process leading to permanent placement. Studies published after 1980 are therefore scored highest at "+1," followed by those in the decade of change leading to P.L. 96-272, 1970 to 1980 (scored "0"). Pre-1970 studies are scored "-1."

Scores for the twenty-seven studies on each of the five criteria are presented in Table 3.2. This table is intended to provide summary information which permits some direct comparison of the studies. In subsequent chapters the findings of these studies with respect to each outcome are

discussed. At the beginning of each section focusing on a specific outcome, we provide a more detailed critique of the specific studies which provide information on that outcome. Since most studies focus on a limited number of outcomes, the number of studies addressing any one outcome is reduced, making the task of interpreting findings across studies somewhat easier.

SECTION II. FINDINGS

OVERVIEW

In the following chapters we present the findings of the twenty-seven studies dealing with critical outcomes of foster care. Two different means are used to present these findings. First, the actual outcomes are described, such as the number of school grades completed. Second, the relationships between the outcomes and variables describing the foster care experience which preceded these outcomes will be reviewed, for instance, the correlation between the number of grades completed and the time in care. This look "backwards" provides a vantage point from which the infinite number of variables describing the children who come into foster care and their experience while in the system and immediately upon leaving it can be sorted to determine which factors should demand the attention of policymakers, administrators, service workers, and volunteers. It is hoped that this approach will allow the reader to evaluate the general functioning of former foster children, to identify specific characteristics of the children served, and to identify aspects of foster care that contribute to or detract from its effectiveness.

CHAPTER 4. ADULT SELF-SUFFICIENCY

Achieving adult self-sufficiency is an expected goal in Western society. The potential role and responsibility of foster care in preparing children and particularly adolescents for adult self-sufficiency has become more widely recognized in recent years. This can be seen in special state and federal initiatives to provide transitional services and experiences designed to enable adolescents in foster care to achieve independence (Barth, 1990).

In this chapter we examine three indicators of the potential for and achievement of self-sufficiency: education, employment and economic well-being, and housing. Education is generally viewed as a key factor in predicting adult self-sufficiency. Almost all studies of former foster children reveal that their average level of educational attainment is below the average of other citizens of comparable age in their state or country. These studies provide information on both the levels of education achieved by the time the children left care and the education they pursued after discharge. In addition, several studies include data on the intellectual capabilities and learning problems of former and current foster children.

Employment and economic well-being provide a more direct measure of adult self-sufficiency. Most of the studies identified here report employment and financial status. Few, however, provide a basis for comparison which would permit conclusions concerning the relative functioning of former foster children.

Information on the adequacy of housing and the makeup of former foster children's households is somewhat sketchier than the other self-sufficiency indicators. Within several of the studies, however, are some relevant findings: proportions of subjects living in various living arrangements, satisfaction with housing, number of changes in residency, and adequacy of physical surroundings.

Several studies of homeless persons include references to portions of this population who have been recipients of out-of-home care. Such studies are revealing in a different manner than are the foster care outcome reports. They estimate the proportion of former foster children among the total population of the homeless. It then becomes possible to determine whether former foster care recipients are overrepresented in the homeless population. Six such homeless investigations are described later in this chapter.

EDUCATIONAL ATTAINMENT AND INTELLECTUAL ABILITY

Educational Outcomes Achieved While in Foster Care

If children do not receive a formal education while they are in care, they leave ill-equipped to attain adult self-sufficiency. Several studies included in this review provide information regarding educational achievement at the point of discharge from care or while in care; only one, however, uses a comparison group (Dumaret's). The findings of most of these studies suggest that children enter foster care behind in their educational achievement and do not catch up while in care.

Dumaret's (1985) French study compares similar subjects raised in adoptive homes, foster homes, and those provided services in their own homes. Dumaret included three degrees of school failure: slight (repeating a grade); serious (repeating the same class twice or being placed in a special education class for mentally retarded children within a normal school system); and exclusion from the normal school system, such as placement in an institution for the mentally retarded. Combining all three degrees of failure, he found the following rates of school failure in primary and secondary schools: for adopted subjects, 17.1 percent; for mother-reared subjects, 66.6 percent; and for subjects in foster homes or institutions, 100 percent. The differences between the three groups were significant ($p < .001$), and these differences persisted throughout their school years. Among the twenty-one foster children in Dumaret's study, "scholastic success [was] extremely rare" (p. 564);

only a couple completed primary schooling; three obtained technical diplomas; and one earned a professional certificate.

One-third of the former foster children who had been in placement with the Casey Family Project (Fanshel, Finch, and Grundy, 1990) were behind their age-appropriate grade levels when placed, and the same proportion were behind when they left Casey care. Barth (1990) found that more than half (55 percent) of the youth aging out of foster care left without a high school degree. Festinger (1983), in her study of former foster children in the New York City area, found that at discharge, 35 percent had not completed high school, 65 percent had attained a high school degree, and 25.7 percent had attended college. Barth and Festinger do not provide comparison data at discharge; however, Festinger does provide comparison data for her sample's educational levels at follow-up (see below). Relevant comparisons at discharge are difficult to make because of varying ages at discharge for the foster care subjects.

Other measures of academic performance indicate that foster children, while in school, function at a level that is below average and/or below their capacity. Allerhand, Weber, and Haug (1966) reported that, of the thirty-three subjects who were attending school full-time, only eleven were at their appropriate grade levels. Twenty-two of the forty-one who were receiving any form of schooling had an average grade of "C" or better. Palmer (1976), in her Canadian-English study, concluded that subjects were functioning below their full potential. Fanshel and Shinn (1978) reported that most of the children in their study were performing below a normal level for their age at all three of their measurement times. The subjects experienced no improvement while in care.

Sixty-four percent of the children in Fox and Arcuri's (1980) study were in the expected grade for their chronological age. Twenty-one percent were one grade behind, 2 percent were two grades behind, and 11 percent attended special education classes; 2 percent were a grade ahead of the expected level. However, contrary to the findings reported in the previous studies, the authors

suggested that this pattern is similar to that reported for low-income children in the 1971 National Health Survey of School Achievement.

Educational Outcomes Achieved after Foster Care

Most of the studies of former foster children provide information regarding the educational attainment of their adult subjects and some comparative data. The Scottish studies by Triseliotis (1980) and Triseliotis and Russell (1984) provide a direct comparison for judging the achievements of study subjects. Triseliotis (1980) found that almost all Scottish children who had been placed in family foster care ended their education at the age of fifteen, which was the age at which they were no longer required to attend. The author indicated that this seemed to be in keeping with the expectations of the foster parents. Ferguson (1966), in another Scottish study, also discovered that most of his subjects (85 percent) left school at age fifteen. In contrast, Triseliotis and Russell (1984) found that 50 percent of youth who had received care in institutions and 70 percent of those who had been adopted stayed in school beyond the compulsory age. Thus the institutionalized and adopted subjects achieved better educational outcomes than did the foster family care subjects.

Four studies compare the educational level attained by their adult subjects with a norm; all of them find that the former foster children remained behind. The median education for Palmer's (1976) subjects was nine years compared to ten years for London children overall. Zimmerman (1982) reported a median of less than eleven years, which she stated was low compared with both the general population of New Orleans and minority groups of the same age. Festinger (1983) reported that men from foster care tended to have completed less education than males nationally but for females there were no sizable differences. When compared with residents of New York City only, both males and females had completed less education. Also, in all subgroups compared to New York City residents, "whether male or female, whether black, Hispanic, or white, the proportion from foster care with a

college degree was smaller" (p. 238). Jones and Moses's (1984) sample median was 11.5 years, a full year behind the average for citizens of the same age in West Virginia.

The remainder of the studies which address educational outcomes are descriptive and do not provide comparison data. However, relevant census data make some comparisons possible. Taken together these studies portray adults with foster care experience as lagging behind the general populace in their levels of education.

Four of the five American descriptive studies reported that a majority of their foster care subjects graduated from high school, but their rates of graduation fall below those of the general populace. Frost and Jurich (1983) report that 63 percent of their sample graduated from high school, with 22 percent still in school working towards their diploma. Census data, however, indicate that in 1980 80 percent of the 18 to 24 year olds in Kansas were high school graduates (U.S. Bureau of the Census, 1980b, Table 66). Likewise Jones and Moses (1984) report that 63 percent of their sample graduated from high school, with about 10 percent still working towards a degree. Again, the graduation rates of the general populace are higher, at 72 percent for the 18 to 24 year olds in West Virginia in 1980 (U.S. Bureau of the Census, 1980e, Table 66). Festinger reports at least 66 percent of her study subjects graduated from high school, but the average for 18 to 24 year olds in New York in 1980 was 78 percent (U.S. Bureau of the Census, 1980d, Table 66). Rest and Watson (1984) report 12 of 13 subjects (92 percent) having graduated from high school, which is far more than the 1980 Illinois average of 76 percent for 18 to 24 year olds (U.S. Bureau of the Census, 1980a, Table 66), but this finding is suspect due to Rest and Watson's quite small sample size. Zimmerman (1982) reported that less than half (44 percent) of her subjects graduated from high school, 11 percent of whom only attended special education classes. In contrast, 73 percent of the 18 to 24 year olds in Louisiana in 1980 had graduated from high school (U.S. Bureau of the Census, 1980c, Table 66).

These five American studies also report levels of college education, with anywhere from 8 percent to 61 percent of their samples having earned at least some college credits. Starting at the low end of the range are the Jones and Moses subjects, of whom only 7 percent obtained some college credits and less than 1 percent graduated. Zimmerman reported rates of 11 percent with some college hours and 2 percent with college degrees. Frost and Jurich reported rates of about 6 percent and 2 percent. Festinger reported rates of 34 percent with college credits and 5 percent with degrees. Finally, Rest and Watson, with their suspect sample size, reported 61 percent of their subjects having at least some college credits. For comparison the Current Population Reports reported that 23 percent of American 25 to 34 year olds had bachelor degrees in 1987 and an additional 19 percent had some college credits (U.S. Bureau of the Census, 1990, Table 1). Thus the subjects in the studies by Jones and Moses, Zimmerman, and Frost and Jurich achieved relatively low levels of college education, the subjects in Festinger's study achieved normal levels of college education, and those in Rest and Watson's study achieved high levels. To round out this description of college level education, Barth (1990) reported that 73 percent of his sample obtained some further training or schooling after exiting foster care. However, "only 43 percent of those who had not finished high school at the time of leaving foster care had participated in subsequent education or training" (p. 426).

Although the educational picture for foster care children is not entirely bleak, there is cause for alarm. Many of the adult subjects of these studies failed to complete high school, an accomplishment considered basic to attaining self-sufficiency in the United States. In those studies in which the data are given, the proportion of adult subjects who had not earned either a high school diploma or the G.E.D. ranged from a low of 8 percent in Rest and Watson's small sample to a high of 56 percent found by Zimmerman; in between are a 15 percent rate for Frost and Jurich's young men and 27 percent for the Jones and Moses sample. A further concern of the Zimmerman group is that 30 percent of her subjects had dropped out of school before they reached high school.

Those who are graduating may not be reaching high enough standards to compete as adults. Zimmerman reports that 10 percent of her subjects earned a "D" or "F" average in high school, 25 percent in middle school, and 28 percent in high school (by which time many of her subjects had dropped out of school). Forty-seven percent had repeated one grade and an additional 20 percent had repeated more than one; grade repetition was not found to be related to GPA or the number of different schools attended. Among the Jones and Moses sample, 41 percent did fairly well, 14 percent passed at a minimal level, and 6 percent failed.

As might be expected, several studies show that their subjects are more likely to pursue vocational or job training than college degrees. Forty-two percent of the males and 29 percent of the females studied by Jones and Moses had received some form of vocational or job training, as had 59 percent of Festinger's subjects, one-third of Zimmerman's cohort, nearly 30 percent of Harari's (1980) participants, and about 7 percent of the Frost and Jurich sample. Triseliotis and Russell reported that 30 percent of their Scottish adoptees and 20 percent of those subjects who had been in residential care had earned an educational certificate beyond that which is roughly equivalent to the American high school diploma (the "Higher" or "A" certificate); the vocational programs in which the subjects participated required two to six years of part-time education. Owing to a lack of appropriate comparison data, it is difficult to interpret these findings accurately. However, a study in 1987 reported that only 2.3 percent of American 25 to 34 year olds had earned a degree in vocational training (U.S. Bureau of the Census, 1990, Table 1). Naturally, participation rates exceed graduation rates, yet the very high participation rates of foster care subjects and the very low graduation rates of the general populace suggest that former foster children are proportionately more likely to select vocational training.

Three studies queried former foster children regarding their feelings about the education they received while they were in care. Jones and Moses report that 38 percent of their respondents felt

that they had not attained the educational level they had expected or planned to attain; a higher percentage of Festinger's subjects (44) felt this way, while two-thirds of those studied by Fanshel, Finch, and Grundy expressed regrets about having failed to accomplish more than they did. About one-fourth of the Festinger group felt dissatisfied with the amount of education they received while in care, and 26 percent reported dissatisfaction with the quality of that education. Although many of the subjects pursued further education or training after discharge from care, only 37 percent of Festinger's subjects felt that they had been prepared while in care to do so.

Intellectual Ability

Six of the studies described in this chapter reported the IQ levels of current and former foster children. Two of the six provided a direct comparison group in the research design. Dumaret's (1985) French study compared five groups of subjects: children who had been adopted and reared in a privileged social environment (A); a sample of their classmates matched for socioeconomic status (A*); children whose mothers originally had planned to place them for adoption but who actually remained in their natural families in a disadvantaged social environment (B); a sample of their classmates matched for socioeconomic status (B*); and children whose mothers originally had planned to place them for adoption but who actually were removed from their homes after a family breakup and were reared in foster care (C). At the time of the IQ testing, the mean ages of the subjects were: A and A*: nine years, three months; B and B*: eleven years; and C: eleven years, nine months. Over one-third of the A's (and, therefore, of the A* group) and one B subject were enrolled in private schools; one-third was greater than the national average of French children attending private schools.

Dumaret presents highly detailed findings involving multiple comparisons on several IQ and scholastic performance measures. Many comparisons show significant differences, and the consistent

pattern is for the A group (adopted/privileged) to outperform the B group (own home/disadvantaged) which, in turn, outperforms the C group (foster care).

Dumaret made several additional observations about the data. (1) The scores of the C's (foster children) were similar to those found in other studies of children in care in France: mean IQ's in the 80-90 range, with verbal IQ's often more than ten points lower than performance IQ's. (2) Some B's may have had a disadvantage on the tests because their mothers came from a bilingual tradition, which could have resulted in the children's having a poorer grasp of the French on the tests. (3) It is probable that the subjects were not randomly distributed among the A, B, and C groups; a priori selection probably was involved. (4) If the four C subjects with IQ's of under 53 are dropped from the analysis, there are no significant differences between the B and C groups. Dumaret suggests that such a modification in the C group would seem reasonable: foster or institutional care of these four probably was not responsible for their low IQ's, while their mental deficiencies may have been a determining factor in their placement.

Heston, Denney, and Pauly (1966), comparing adults who had spent at least three months (mean = at least 24.7 months) in a foundling home during their childhood with adults who had not had this experience, found no difference between the mean IQ scores of the two groups (99.3 and 98.4).

The remainder of the studies which provide IQ scores for subjects while in care or at discharge consistently show below-average scores. The New York City subjects of Festinger's research had an average IQ of 93.6 while in care, while Zimmerman's sample had a mean IQ of 84. The mean IQ scores of the children in the Fanshel and Shinn study (1978) at Time I (near the time of admission into care) were as follows: for infants (ages zero to two), 91.71; for toddlers (two to five years), mean full-scale IQ was 88.61; and for school-aged children (six and older), mean full-scale IQ

was 92.04. The authors noted that only the toddlers' score was below that of the standardized population.

The youth in the Fox and Arcuri study, ages four years, eleven months, to eighteen years, one month, had a mean IQ of 90.18. Their mean scores on the Wide Range Achievement Test (WRAT) were 95.51 on reading and 88.50 on arithmetic; the difference between the scores on the two tests was significant ($t=5.20$, $p < .005$). In addition, each achievement test mean was significantly different from the IQ mean.

Several authors also reported that some of their participants had been diagnosed as having a learning problem of some kind. In Festinger's study, 32 percent of the males and 20 percent of the females discharged from family foster homes had moderate to severe learning problems, as did 28 percent of the males and 6 percent of the females discharged from group settings. Zimmerman states that 5 percent of her sample had attended only special education classes in school.

In the 1978 Fanshel and Shinn investigation, a majority of the children were identified by their teachers as having at least one learning problem that had a major influence on their school performance: 66 percent at Time I, 73 percent at Time II, and 76 percent at Time III. The types of problems included intellectual capacity problems (about one-quarter of the subjects); difficulty with comprehension (about one-third); little motivation to learn (30 percent); major problems with anxiety or acting out (32 percent); inability to follow class routines and excessive demands for attention (25 percent); and poor work-study habits (34 to 43 percent of the students [at various times]).

EMPLOYMENT AND ECONOMIC STABILITY

Thirteen of the studies reviewed report outcome measures of employment and/or financial self-sufficiency. Most of these studies do not provide employment rates of that portion of the general population that is comparable to the ex-care subjects, however, so interpretation is difficult.

The only direct comparisons are provided in the work of Triseliotis (1980) and Triseliotis and Russell (1984). Triseliotis found that 80 percent of his Scottish former foster children had a steady work record, but many of the jobs held by them were of a precarious nature. Most were holding unskilled or semi-skilled positions which were similar to those of their parents; there had been little upward mobility. In the Triseliotis and Russell study, about 70 percent of the adoptees and 50 percent of the institutionalized foster care group were regularly employed. Thus, it would appear that the foster care and adoptive groups do relatively well, compared to those in institutions.

Within the year prior to the study, 28 percent of those receiving care in an institution in the Triseliotis and Russell sample had received public assistance, compared with 4 percent of the adoptees and 18 percent of Triseliotis's family foster care group; four of the eleven institutional-care respondents who benefited from public assistance had done so for over a year. About one-third of married, former institutional-care children received such assistance, as did only 2 percent of all British married couples with children in 1977; 28 percent of single subjects who had received care in institutions, compared to 6 percent of all British singles, received public assistance. With regard to receiving public assistance then, both out-of-home groups perform poorly relative to the group of adoptees.

Of all the studies reviewed, Festinger's (1983) study of former foster care subjects in New York City provides the most extensive employment and public assistance comparisons from other data sources. Excluding disabled respondents and those in school, unemployment rates were about 25 percent among males and 19 percent among females (when homemakers are counted among the employed). Without presenting comparison data, Festinger asserts that the nonwhite females and white males in her sample experienced levels of unemployment comparable to their counterparts in the general populace, but that black males and white females experienced proportionally higher rates of unemployment. However, the unemployment rate for New York males over sixteen years old in 1983

was only 8.9 percent and that for women was 8.1 percent (Statistical Abstract of the United States: 1985, Table 657 [referred to hereafter as SAUS]). Thus it appears that the subjects in Festinger's sample experienced proportionally high rates of unemployment.

In addition, 21 percent of Festinger's subjects were receiving public assistance at the time of the study; an additional 20.6 percent had received it in the past but were not current recipients. The average time these latter people received assistance was thirteen months, often starting just after their discharge from care. Those receiving assistance at the time of the study had been receiving it for about three years, on the average; most of them were unemployed or homemakers; ten of the fifty-seven had part-time employment, two were disabled, and five were full-time students.

Festinger claimed that though a higher proportion of her subjects received public aid than their counterparts in the general populace, the differences were not significant. However, this claim is difficult to evaluate, for Festinger does not report the data she used for the comparison. In 1983 in New York, 8.1 percent of the general populace received public aid in the form of AFDC or SSI (SAUS: 1985, Table 640), far less than the 21 percent of Festinger's sample. The magnitude of this difference suggests that it is in fact significant.

The remainder of the studies reporting findings on economic well-being are descriptive, and as such they provide a more in-depth description of the functioning of former foster care subjects. To interpret these studies, we will compare them with relevant economic data from the Bureau of the Census.

Barth (1990) reported that 75 percent of the respondents were employed, with most working full-time. This rate of labor force participation equals that of all men over sixteen in California in 1989 (SAUS: 1991, Table 636), which was 78 percent, but it is far higher than the labor force participation rate for women at that time, which was only 58 percent. In addition, Barth reports that most of the subjects' jobs were low paying and without benefits.

Jones and Moses (1984) reported that about 33 percent of their subjects were unemployed, with more men than women working full-time. Twenty-eight percent of Jones and Moses' respondents held no jobs since leaving high school. This unemployment rate exceeds that of the West Virginia adult population in 1983, which was 21 percent for men, 13 percent for women (SAUS: 1985, Table 657).

At post-discharge, seventeen (85 percent) of Maas's (1963) subjects were gainfully employed. Two others were married females with good employment histories, and one was a university student. Only four or five subjects had unstable job histories. Most of the respondents considered work to be important and a source of satisfaction. Eighty-one percent of the forty-three ratings on involvement and feelings of adequacy at work were "normal and above."

Allerhand, Weber, and Haug (1966) report that 26 of 50 former subjects (52 percent) in residential group homes had some means of self-support, and 22 more had attempted on their own to find jobs. In another residential group study, Frost and Jurich (1983) found that 54 percent of those former residents of the Villages group homes who were at least eighteen years old at follow-up were employed. This percentage rose to 64 percent when only those twenty-five years or older were counted. This labor force participation rate falls below that of men in Kansas in 1983, which was 79 percent, but exceeds the rate for women, which was 55 percent (SAUS: 1985, Table 657). Thus, it is comparable to that of the general populace. Harari reports that 50 percent of her subjects were employed. This labor force participation rate falls below that of young men (aged 20 to 24) in California in 1980, which was 68 percent, and it falls below that of women, which was 63 percent (U.S. Bureau of the Census, 1983, Table 67). Twenty-eight percent of those subjects who were employed also were enrolled in some form of schooling. These adults worked chiefly as salespersons, clerks, secretaries, and skilled laborers.

Ferguson (1966) reports that 7 percent of the total sample--8 percent of the men and 6 percent of the women (when homemaking is counted as employment)--were unemployed at the age of twenty; 2 percent of the females had never held jobs.

Fifty-nine percent of the men in Zimmerman's (1982) New Orleans sample of former foster children were employed, a figure lower than the 76 percent labor force participation rate for Louisiana men in 1981 (SAUS: 1982-1983, Table 628). Forty-eight percent of the women were employed, which equals the 48 percent participation rate for adult women in Louisiana in 1981. Among the men in Zimmerman's sample, three were disabled, four were in school or in job training, five were in prison, and only one was considered "able-bodied unemployed." Among the women, six were housewives with working husbands, two were disabled, one was in prison, and five were receiving AFDC.

Meier (1965), Zimmerman, and Jones and Moses cited findings regarding the "self-sufficiency" of young adults who had been in foster care. Sixty-one of the sixty-six former foster children (92.4 percent) who provided complete information to Meier either were self-supporting or else living within self-supporting family units. Zimmerman's subjects did not do quite as well; only 64 percent of her respondents were supported through their own or their spouse's employment. Jones and Moses found that 43 percent of their subjects earned their own money, and an additional 17 percent had working spouses or partners; 22 percent received at least part of their income from their natural parents, 18 percent, from foster parents, and 10 percent, from other relatives.

With regard to receipt of public assistance, Zimmerman reported that 26 percent of her respondents were receiving public support of some kind (SSI, AFDC, prison). This is high relative to the general adult populace in Louisiana, of whom in 1982 only 7.3 percent received public aid in the form of AFDC or SSI (SAUS: 1984, Table 653). Zimmerman also found that one-third of her respondents were living below the poverty level, including seven who were employed. Again, this

rate exceeds that of the general populace in Louisiana, of whom in 1982 only 19 percent lived below the poverty level (SAUS: 1982, Table 778). Harari found that 47 percent of her subjects received financial assistance, which surpasses the 9 percent of the 1980 California populace that received public aid in the form of SSI or AFDC (SAUS: 1980, Table 561).

Sixteen percent of the Jones and Moses sample from West Virginia received public assistance at the time of the study, with 50 percent having received it at some time. This rate is more than double the 7 percent of the West Virginia general populace who received public aid (either SSI or AFDC) in 1984 (SAUS: 1986, Table 645). In addition, 25 percent of the Jones and Moses sample received food stamps, and 38 percent of them, mostly women, had used them at some time. This rate is also double the 19 percent of the general West Virginia populace who received food stamps in 1984 (SAUS: 1986, Tables 29 and 203). SSI payments were received by 10 percent of the respondents.

Job satisfaction and the degree to which former recipients of out-of-home care felt that their income, regardless of source, was adequate, were reported by Triseliotis and Russell, Festinger, and Jones and Moses. Triseliotis and Russell state that 40 percent of their adoptees and twice that proportion of the institutional-care group expressed a great or fair amount of satisfaction with their current job. Over 75 percent of both groups felt that their take-home pay was at least adequate, and seven out of ten of all the subjects felt that their standard of living was fairly satisfactory or better.

The former foster children questioned by Festinger were, on average, moderately satisfied with the work they were doing. Although they stated that they were satisfied with their financial situations and with the amount of money they had to spend for basic things, 53 percent of them felt that their incomes were below or far below that of the average American.

Seventy percent of the Jones and Moses respondents who were working indicated that they were satisfied with their current job (most of the jobs were skilled or unskilled labor), even though many of them expressed a desire to advance themselves.

One further finding regarding employment is worth noting. Festinger found that, on the whole, former foster children did not feel prepared for employment when they left foster care.

RESIDENTIAL STATUS AND HOUSING

Residential and Housing Outcomes Achieved

Eleven of the foster care outcome studies include housing as a measure in their analyses. In this group are three of the better-designed studies, Quinton, Rutter, and Liddle (1986), Wolkind (1977a, 1977b), and Triseliotis and Russell (1984), which include direct comparison groups.

Quinton, Rutter, and Liddle reported that the British women in their study who had been Children's Home residents were living at the time of follow-up in worse social circumstances than a never-in-care comparison group. Forty-four percent of the former and 24 percent of the latter were living in intermediate or poor circumstances, with respect to their housing and amenities.

Wolkind's study of British primiparous women, found that those who acknowledged being separated from their parents in childhood were more likely to have housing difficulties during their first pregnancies ($\chi^2=7.11$, 1 d.f., $p < .01$), regardless of the reason for placing the child. This report did not differentiate foster care placements from other forms of separation. However, Wolkind did study the subsample of women who had been in care for at least one month. This subsample was more likely than women who had not been in care to have current poor housing conditions (44 percent vs. 26 percent, $\chi^2=4.79$, 1 d.f., $p < .05$).

Triseliotis and Russell reported on the proportion of their subjects who lived with family members. One-third of the adoptees lived with their adopted parents, including two of the subjects who were married, and 5 percent of them were living with siblings. Only 3 percent of the group who had been placed in institutions were living with their biological parents, but 21 percent were living with siblings or other relatives; many felt that they had nowhere else to go.

Festinger (1983) does not provide comparative data with regard to the quality of housing but does regarding mobility. She reports that compared to other New Yorkers their age, more foster care respondents who were living in New York City, regardless of ethnicity or type of placement, had moved at least once. Barth's (1990) sample also experienced severe housing problems, with 29 percent reporting that there was a time that they had no home or were moving every week or more frequently.

The five studies described above all suggest that finding stable housing is particularly difficult for ex-care subjects. On the other hand, Zimmerman (1982) reported that the housing pattern of her former foster children was roughly typical of that for New Orleans as a whole. Sixty-eight percent of her respondents lived independently: 49 percent lived in private rental housing, 12 percent in public housing, and 7 percent in homes they owned. Eighteen percent lived with relatives and 10 percent were in a correctional facility; the situations of the remaining people (5 percent) were unknown. She also noted that all of the single-parent heads of households were female (34 percent of the women).

The remaining studies provide descriptive information about housing, which can be compared to relevant state-level housing data. Jones and Moses (1984) report a low proportion of former foster children living independently. Only 35 percent of their respondents were heads of their own households, 5 percent were in jail, and 3 percent resided in residential or group care. This compares unfavorably to an adult imprisonment rate of 1 percent in West Virginia in 1983 (SAUS: 1986, Table 322), and a .3 percent admission rate into psychiatric hospitals in the United States in 1983 (SAUS: 1986, Table 170).

Meier's (1965) study, while dated, involved some of the oldest subjects; thereby providing a better assessment of potential long-term problems. She found that all of the women in her Minnesota study were the "mistresses of their own home," either as wives or as heads of households. Sixty percent of the men were married and living with their spouses. This figure is less than the 81 percent

of American men in 1966 who were married (SAUS: 1967, Table 33). One additional man in her study (3 percent) lived with his wife in the home of her parents. Twenty-three percent of the men in her sample were single and lived on their own, which exceeds the single rate among American men aged 25 to 29 in 1966--17 percent single (SAUS: 1967, Table 33). Two men (7 percent) lived with their former foster parents, one was in jail, and one was in the armed services. Meier added that 57 percent of the respondents were buying or already owned their own homes, a sign of a certain degree of stability. This stability was not shared by all of the subjects, however, for some of them reported having changed residences frequently since discharge; one had moved "about 200" times.

The subjects of Allerhand, Weber, and Haug (1966) were younger than those of Meier (average of eighteen years vs. thirty years), which may account for some of their differences. Seventy percent of these young men lived in their own homes or in some other independent situation. Twelve percent remained in foster or group homes, and 8 percent were living in some sort of institution. Eight percent were enrolled in schools or colleges away from home, and one respondent (2 percent) was in the armed services.

The three Scottish studies seem to reveal less independent living than the American ones. Ferguson (1966), for example, reported that two years after discharge (at age twenty), 27 percent of the males were in the armed forces or Merchant Marines. Thirty percent of the total respondents were living with their foster parents, 3 percent (all female) were living with their biological parents, and an additional 11 percent were living with other relatives. Eighteen percent of the women were living with their husbands, 11 percent of the sample had housing provided with their jobs, and 28 percent of the men and 16 percent of the women lived on their own.

Although Triseliotis (1980) does not provide details, he does state that 35 percent of his Scottish young people were living with their foster parents, while 25 percent were on their own. An additional 25 percent had "precarious" living arrangements: they moved frequently, some had

unsuccessfully attempted to live with their biological families, and they generally felt "rootless and drifting."

Thirty of Harari's (1980) thirty-four subjects left the homes of their foster parents when they exited from care, usually upon reaching the age of eighteen or becoming emancipated minors. For 27 percent of these, their first living arrangement was a shared apartment with a roommate; 27 percent of them moved in with a boyfriend or husband, 13 percent with relatives, and 3 percent with friends; 7 percent rented their own apartments, and 23 percent made some other type of arrangement. Sixty-three percent rated their first living arrangement as very good, 13 percent as somewhat good, 7 percent as neutral, 7 percent as somewhat bad, and 10 percent as very bad. During the first five years after leaving care, they had moved an average of 3.9 times, leading the author to term them "not extremely mobile" (p. 148).

Triseliotis and Russell found relatively high satisfaction with current housing among their subjects: 80 percent of the adoptees and 70 percent of the sample from institutions expressed this sentiment. Five percent of the former group and 12 percent of the latter stated that they were dissatisfied with their housing. Festinger reported that, on the whole, her respondents felt more positive than negative about their homes and neighborhoods, but that the level of satisfaction generally was moderate; those living in houses seemed to be more pleased than others.

The residences of those subjects in the Jones and Moses investigation who were interviewed in their own homes were assessed by the interviewers. Space, structure, furnishings, and housekeeping were evaluated. "Adequate" ratings were achieved by 70 to 78 percent of the households, while only 5 to 7 percent received "inadequate" scores.

Although Festinger found that most of her respondents (98 percent) had been discharged into their own care, they had not felt well prepared to undertake this responsibility. One-quarter of them stated that they had received "a lot" of preparation, 23 percent "some," 9 percent "a little," and 43

percent "very little" or "not at all." Harari reported that her subjects felt they had availed themselves of help from social services with housing significantly less often than they needed to ($p < .05$).

Homelessness among Former Foster Children

In the past eight years, several studies of homeless persons have revealed that a disproportionate number of them have spent some time in foster care during their childhoods. Six of these studies are described in part, the focus being on those findings that pertain to out-of-home care. Table 4.1 provides a summary of relevant information regarding these studies.

The first study of homeless adults to report findings regarding childhood out-of-home placement experiences was conducted by Crystal (1984) in New York City, in 1982–1983. Intake assessments were completed on 8,051 men and women (22 percent of the sample were women) applying for emergency shelter during that period. Crystal reports that 7.4 percent of the women and 2.8 percent of the men indicated that foster care or institutions were the primary living arrangement in which they grew up. Many more (actual number not indicated) reported that they had been in a foster home or institution for some part of their childhood.

In the spring and summer of 1985, Susser, Struening, and Conover (1987) interviewed 223 men, first-time users of New York City shelters, as well as a representative sample of 695 men already residing in those shelters. The authors found that 23 percent of the first-time shelter users had been placed in foster care, group homes, and/or other special residences before the age of seventeen. In the broader sample of current shelter residents, the authors found that 17 percent had been placed in similar settings before the age of seventeen.

Sosin, Piliavin, and Westerfelt (1990) conducted a two-wave longitudinal study of homeless adults in Minneapolis beginning in November 1985 and ending in May 1986. They interviewed 338 homeless adults (85 percent male) in a cross-sectional sample and 113 homeless adults (77 percent male) who were designated as recent arrivals to homelessness (current homeless spell less than

Table 4.1
Studies of Homelessness and Foster Care

Study	Type of Study	Characteristics of Sample	Data Collection	Response Rate	Foster Care Information
S. Crystal. 1984. "Homeless Men and Homeless Women: The Gender Gap." <i>Urban and Social Change Review</i> , 17(2), 2-6.	Cross-sectional	N = 8,051 for intake assessment study Ages: 67% < 40 Gender: Intakes: 77.7% male, 22.3% female Race: Not reported Selection criteria: Admission into a New York City shelter between Nov. 1, 1982, and Dec. 31, 1983.	1982-1983. Intake instrument used for psychosocial assessments in most NYC shelters; intakes took place soon after admission.	Not reported	Intakes: 7.4% of women and 2.8% of men had lived primarily in foster care or institutional settings as children; more (percentage unreported) had been in such settings for short amounts of time.
E. Susser, E. Struening, & S. Conover. 1987. "Childhood Experiences of Homeless Men." <i>American Journal of Psychiatry</i> , 144(12), 1589-1601.	Cross-sectional	N = 918 (223 male first-time users of shelters and 695 male longer-term shelter residents) Ages: Over 70% were under 40 years old Race: Over 70% were members of ethnic or racial minority groups Selection criteria: Men using New York City's municipal shelters for single adults. For longer-term resident, a weighted representative sample of shelter residents was chosen. The first-timers were interviewed as they entered the New York City shelter for the first time.	Spring and summer 1985. 52-page interview lasting on average 80 minutes.	Not reported	Before the age of 17, 17% of longer-term homeless and 23% of "first-timers" had been placed in foster care, group homes, and/or other special residences. There was an association between childhood placement and history of psychiatric hospitalization ($p < .001$) for both first-timers and longer-term residents.

(table continues)

Table 4.1 (Continued)

Study	Type of Study	Characteristics of Sample	Data Collection	Response Rate	Foster Care Information
M. Sosin, P. Colson, & S. Grossman. 1988. <u>Homelessness in Chicago: Poverty and Pathology, Social Institutions, and Social Change</u> . Chicago: University of Chicago, School of Social Service Administration.	Longitudinal	N = 536 from free-meal programs in Chicago (34% homeless, 66% domiciled) Ages: 66% ≤ 40 Gender: 70% male, 30% female Race: 69% black, 19% white, 9% Hispanic, 2% other Selection criteria: Individuals staying in shelters; on streets; short, nonpaying stays with friends or relatives; and those in treatment centers with nowhere to go later.	1986. Interviews of approximately 45 min. to 1 hour; subjects paid \$5.	81%	Homeless adults: 14.5% experienced foster care; domiciled adults: 7.2% experienced foster care.
E. Susser, S. Lin, S. Conover & E. Struening. 1991. "Childhood Antecedents of Homelessness in Psychiatric Patients." <u>American Journal of Psychiatry</u> , 148, 1026-1030.	Cross-sectional	N = 783 (three groups of homeless psychiatric patients in New York City, totaling 512; and 271 never-homeless psychiatric patients, also from New York City). Ages: Homeless patients: 64% < 40; never-homeless patients: 73% < 40. Gender: Homeless patients: 85% male; never-homeless patients: 62% male Race: Homeless patients: 55% black, 45% nonblack; never-homeless patients: 51% black, 49% nonblack Selection criteria: Inpatient status; homelessness defined as sleeping in shelters or public places from age 17 onward.	Data collected for first sample 1985, second sample 1987, third sample and never homeless, 1988-89.	Not reported for shelter samples; 96% for Bellevue; 86% for state hospital.	<u>Homeless sample</u> : > 15% experienced foster care; > 10% experienced group home placement; <u>Never-homeless sample</u> : 2% experienced foster care; 1% experienced group-home placement.

(table continues)

Table 4.1 (Continued)

Study	Type of Study	Characteristics of Sample	Data Collection	Response Rate	Foster Care Information
M. Sosin, I. Piliavin, & H. Westerfelt. 1990. "Toward a Longitudinal Analysis of Homelessness." <i>Journal of Social Issues</i> , 46(4), 157-174.	Longitudinal	<p>2 samples interviewed twice, six months apart (A and B)</p> <p>(A) cross-section N = 338 first interview N = 200 second interview</p> <p>Ages: 32.3 (mean)</p> <p>Gender: 85% male</p> <p>Race: 43% white, 26% black, 23% Native American, 8% other</p> <p>Selection criteria: homeless adults in Minneapolis, located through community agencies. Homeless = (1) staying at least 1 day but less than 7 days with friend or relative, aware situation was temporary; (2) living in selected boardinghouse less than 7 days, rent paid by welfare agency; (3) sleeping in temporary, free shelter; or (4) spent prior night in abandoned building, car, alley, doorway.</p> <p>(B) Recent arrivals N = 113 first interview N = 65 second interview</p> <p>Ages: 31.3 (mean)</p> <p>Gender: 77% male</p> <p>Race: 48% white, 25% black, 22% Native American, 5% other</p> <p>Selection criteria: same as above with additional criterion of being homeless this time for less than 14 days.</p>	1985-1986. Series of two 45-minute interviews: 11/85-3/86, 4/86-5/86. Subjects were paid for their time.	Response rate > 90%. Population hard to track. 41% attrition rate between rounds 1 & 2 for cross-sectional sample; 42% for recent-arrivals sample.	39% of cross-section had received some form of out-of-home care as children; 35% of the recent arrivals had.

(table continues)

Table 4.1 (Continued)

Study	Type of Study	Characteristics of Sample	Data Collection	Response Rate	Foster Care Information
S. Mangine, D. Royse, V. Weihe, & M. Nietzel. 1990. "Homelessness among Adults Raised as Foster Children: A Survey of Drop-In Center Users." <i>Psychological Reports</i> , 67, 739-745.	Cross-sectional	<p>N = 74</p> <p>Ages: 36 (mean)</p> <p>Gender: 90% male</p> <p>Race: 70% white, 28% black</p> <p>Selection criteria: Subjects chosen from drop-in center and soup kitchen.</p>	Winter and spring 1988.	Not reported	16% reported that they had been a ward of the state prior to age 18.

fourteen days in length). They report that 39 percent of the cross-section had been placed in a foster home, group home, or institution at some time before their eighteenth birthday. Thirty-five percent of the recent-arrivals sample had experienced at least one of those types of placement.

In a comparative study of 181 homeless persons (63 percent male) and 355 (74 percent male) poor, domiciled persons in Chicago free-meal programs in 1986, Sosin, Colson, and Grossman (1988) report that 14.5 percent of adults in their sample who were ever homeless and 7.2 percent of adults who had never been homeless had experienced foster care (foster home, group home, institution) prior to their eighteenth birthday.

Using data collected from seventy-four homeless persons (90 percent male) in Lexington, Kentucky, during the winter and spring of 1988, Mangine, Royse, Wiehe, and Nietzel (1990) determined that 16 percent had been "in foster care (a ward of the state) as a child (birth to 18 years old)" (p. 743). They report that this rate is four times the rate for the local, general, adult population, as estimated by Royse and Wiehe (1989).

Susser, Lin, Conover, and Struening (1991) compared three samples of homeless psychiatric patients (n=512) to a sample of never-homeless psychiatric patients (n=271) in New York City and found the rate of childhood placement to be substantially higher for the homeless group. Fifteen percent of the homeless group had experienced foster family care; 10 percent had experienced group-home placement. This compared to 2 percent who had experienced foster family care and 1 percent who had experienced group-home placement among the never-homeless sample. (Unfortunately, these authors did not report the combined proportion of individuals who had experienced foster family care or group-home care.)

Using only the state psychiatric hospital samples from the above study, Susser et al. compared those individuals who had been in out-of-home care with those who had not, relative to the experience of adult homelessness. They found that 79 percent of those patients who had been in foster family

care experienced homelessness as an adult, compared to 25 percent of those who had not been in foster family care. Eighty percent of those who had been in group homes were later homeless, compared to 25 percent of those who had not been in group homes. In logistic regressions predicting homelessness among these state hospital patients, a history of foster family care or group-home placement significantly predicted adult homelessness, even after controlling for age, ethnicity, gender, psychiatric diagnosis, and substance abuse history. Susser et al. suggest, however, that although childhood placement strongly predicts homelessness, it may not be a cause of homelessness. Placement may be a result of other childhood experiences such as the death of a parent, poverty, or abuse/neglect, which may themselves be causally related to homelessness. Consequently, placement would function only as a proxy for these other causes of homelessness. Nonetheless, the authors argue, intervention (with psychiatric patients) should include assessment of childhood experiences to determine the risk of homelessness.

SUMMARY: ADULT SELF-SUFFICIENCY OUTCOMES AND PREDICTORS

Educational Outcomes and Their Predictors

The studies reported above are fairly unanimous in their findings that the level of educational attainment of former foster children is below the average attainment of those citizens of comparable age in the same state or country. Excluding the Rest and Watson study, which has only thirteen subjects, the reported findings indicate that between 15 and 56 percent of the foster care subjects had not completed high school--a minimal requirement for those hoping to achieve adult self-sufficiency.

The foster children, while in school, functioned at a level that was below average and below their capacity. As might be expected, subjects were more likely to pursue vocational or job training than to attend college.

These findings cannot be interpreted to mean that low educational achievement is a result of the foster care experience. None of the studies were designed to answer this question. However, the Casey Family Project found that one-third of the subjects were behind grade level when placed and the same proportion were behind grade level at discharge. These findings and those reported by other researchers clearly indicate that the foster care experience, while not necessarily detrimental, does not succeed in compensating for early deficiencies in the lives of children.

In reviewing these findings and those of the following sections and chapters, one should keep in mind that successes do occur. Eight to 39 percent of the subjects (excluding Rest and Watson's study) in the reviewed studies had attended college. Nevertheless, the relatively poor academic performance of foster children, which has been confirmed by research such as that presented above, should be a concern for professionals and laypersons working with foster care children and for legislators and other policymakers. Education has been demonstrated to be associated with such important features of life as adult employment, well-being, and interpersonal involvement. Former foster children have rated it as one of the three most important areas for agencies to stress in discharge planning (Festinger, 1983), and improvements in education are being explored as part of the child welfare reform movement.

Our search for predictors of positive outcomes can inform this effort to bring about change. Findings regarding type of placement are mixed. Festinger (1983) found that youth discharged from family foster care completed more schooling than those from group settings. Triseliotis and Russell (1984), however, found both adoptees and subjects receiving institutional care to have completed more schooling than foster care children. Higher socioeconomic status of foster parents, better parenting on the part of foster parents, and a permissive foster home environment were all found to be associated with academic progress and increases in nonverbal IQ scores (Fanshel and Shinn, 1978;

Palmer, 1976). In addition, educational aspirations and expectations of foster children were similar to those of foster parents (Triseliotis, 1980).

Factors leading to placement are also associated with educational outcomes. Children who were physically abused before entering care achieved lower educational levels, whereas those placed because of the death of a parent achieved higher levels (Fanshel, Finch, and Grundy, 1990; Palmer, 1976). The younger the child at placement, the fewer years of schooling attained (Fanshel and Shinn, 1978).

With respect to within-placement factors, there was only weak support for the expected negative effects of multiple placements on educational achievement (Zimmerman, 1982; Palmer, 1976; Festinger, 1983), and no relationship was found between education and time in care (Fanshel and Shinn, 1978; Fox and Arcuri, 1980; Zimmerman, 1982) or discharge disposition (Fanshel and Shinn, 1978; Zimmerman, 1982). On the other hand, children who had only one long-term caseworker were more likely to make good academic progress (Palmer, 1976). No relationship between the amount of contact with the biological family during placement and educational achievement was found; however, the child's identifying with the foster family was a predictor of good academic performance (Festinger, 1983; Palmer, 1976).

Employment Outcomes and Their Predictors

To sum up, with regard to employment and economic stability, the studies reported here indicate that a majority (64 to 92 percent) of former foster children are self-supporting adults. However, it would appear that for many, perhaps even most, employment is steady but precarious. Unemployment rate estimates range from 25 to 41 percent for males and around 20 percent for females. One study estimates that as high as 28 percent of former foster children have never held a job. Although results across studies vary widely (from 4 to 47 percent), approximately 25 percent of former foster children appear to receive public assistance as adults.

Families, both biological and foster, appear to provide financial support for a significant proportion of adult former foster children. Comparison data are not available, but this situation does not appear to be greatly different from what one would expect to find for young adults in the general population.

Those discharged from foster family homes do better economically than those who resided in group settings, and adoptees do better than foster children (Festinger, 1983; Triseliotis and Russell, 1984). There is some evidence that identification with the foster family is associated with more positive economic outcomes (Palmer, 1976), whereas closeness and contact with the biological family were not associated with improved economic outcomes (Festinger, 1983; Triseliotis and Russell, 1984). Conflicting findings exist with regard to number of placements, and no association was found in any study between economic outcomes and either age at placement or caseworker activity.

Housing Outcomes and Their Predictors

The majority of the studies reported here indicate that most (roughly 60 to 70 percent) of the subjects were living independently in adequate housing. Jones and Moses (1984) diverge widely from this finding, reporting that only 35 percent of their subjects were living independently. The three Scottish studies generally reported lower levels as well. Sizable numbers of subjects were found to be still living with their foster parents or friends and relatives. Biological families, however, appear to provide minimal housing support.

This limited body of research suggested few predictors of poor housing outcomes. Those subjects who were adopted or resided in foster family homes appear to achieve more positive outcomes than those in group or institutional settings (Festinger, 1983; Triseliotis and Russell, 1984).

All of the studies of homeless persons cited in this report reveal significantly high rates of childhood out-of-home placement for homeless adults, ranging from 17 percent to 39 percent. They

leave unexplained, however, the process by which childhood placement and adult homelessness are linked. Piliavin, Sosin, and Westerfelt (1987) offer several explanations.

It may be that many young people put in foster homes and institutions have severe emotional or behavioral problems which, if not abated by these experiences, make them vulnerable to various adult problems and crises, including long-term homelessness. Alternatively, out-of-home care may itself be debilitating, leaving its recipients relatively less able to manage independently and conventionally as adults. Finally, young people who receive out-of-home care may have weak family ties, generated in part by the conditions necessitating care and augmented perhaps by the experience of foster care. As adults, these individuals would be likely to lack family support networks that could provide them major resources at times of economic crises. In such circumstances these individuals would be vulnerable to homelessness. (pp. 27-28)

Others have more explicitly faulted the foster care system for failing to adequately prepare youth leaving foster care for independent living. Demchak (1985) cites a New York State Supreme Court decision pertaining to former foster care youth. It was found that the state and city social service officials had failed to discharge their duties under state law to supervise foster care youth until the age of twenty-one and to prepare them to live independently. In addition, the court found that the youth had suffered irreparable injury because of their homelessness, including the potential for denial of public assistance because they lacked permanent addresses. Demchak notes that in New York City each year, over 1,700 foster care youth reach the age of eighteen and are discharged from foster care placements to independent living. She reports that New York City's Coalition for the Homeless found that 7,500 youth in the city who had aged out of care were living in public shelters, transit terminals, subways, and on the streets. Understanding the link between foster care and homelessness is clearly an urgent task.

CHAPTER 5. BEHAVIORAL ADJUSTMENT

Adult functioning can be judged not only by a person's attainment of self-sufficiency, but also by his/her avoidance of self-destructive or unlawful acts. In this chapter we focus on the more limited number of studies which have looked at behavioral maladjustment as evidenced by criminal behavior and chemical dependency among former foster care children.

CRIMINAL BEHAVIOR

Eleven of the twenty-seven studies reviewed provided information on criminal activity. The strongest of these studies in terms of overall methodological approach was that conducted by Quinton, Rutter, and Liddle (1986). Findings from this study may not readily generalize, since it had a relatively small sample and was restricted to British women; the small sample creates further limitations given the study's analysis of phenomena that occur infrequently, particularly for women.

Among the British women investigated by Quinton, Rutter, and Liddle, those who had been in care were more likely than their controls to have a criminal record. According to the self-reports, 22 percent of the former group and none of the latter had such records ($\chi^2 = 8.59, p < .02$). This rate of convictions for women who had been in care is higher than that of other reports.

Two other studies judged to be of moderate quality reported on criminal behavior. One of these studies (Triseliotis and Russell, 1984) included a comparison group but also had a relatively small sample ($N = 159$) and involved subjects in Scotland. The second study, by Festinger (1983), has a larger sample but significant dropout problems. Although Festinger does not include a specific comparison group, she does provide comparative rates for the U.S. general population and the New York City population. The relatively young age of the subjects of both of these studies and the study by Quinton, Rutter, and Liddle is less of a problem than it was in examining adult self-sufficiency,

since criminal behavior tends to decline with age. Group differences therefore are more likely to manifest themselves at earlier ages if they exist at all.

In two Scottish studies, Triseliotis (1980) and Triseliotis and Russell (1984) reported court appearances rather than arrests. Triseliotis and Russell found that 9 percent of the adoptees and 8 percent of the group receiving institutional care had juvenile hearings; there are no significant differences between these rates and those found by Triseliotis in the earlier study. However, more subjects in the later study had appeared in adult court: 27 percent of adoptees and 40 percent of those in residential care, versus 13 percent of the foster care group. Overall, 32 percent of the adoptees and 43 percent of the institutional-care group had appeared in juvenile or adult proceedings. Neither study provides rates by sex of the subject.

Festinger (1983) reported arrest and conviction rates obtained from the New York State Division of Criminal Justice Services, which lists adult offenses committed in that state. She found that, since discharge from care, 32.7 percent of her male subjects and 4.9 percent of the females had been arrested for either a misdemeanor or felony. All but one of the females had been arrested only once, while this was true for only half of the males. Sixty-eight percent of the males who had been arrested had been charged with at least one felony. After controlling for age and ethnicity, Festinger concluded that "the proportion of graduates from foster care who had been arrested was almost identical to the proportion of males with records of arrest in the general population" (p. 207).

Although there were problems with missing data regarding convictions, it appeared that about 38 percent of both males and females who were arrested were later convicted. The number of study subjects who were convicted was too small to permit comparisons with estimates from the general population.

Ferguson's 1966 study is one of the better-designed studies with respect to sample size and attrition. However, the date and setting (Scotland) may reduce its relevance to current practices in

the United States. While this study primarily focuses on adolescents in care, it does provide comparative reference data to better judge the significance of the outcomes. Ferguson found that, of the Scottish subjects who had been in care, 1 percent of the females and 6 percent of the males had been convicted of at least one crime while still in school (aged fifteen years or younger). This rate for males was higher than that reported for the general population of males in Glasgow. The rate of convictions increased between the ages of sixteen and eighteen to 4 percent of the females and almost 23 percent of the males. The conviction rate for a sample of Glasgow males who had left school at age fourteen, by comparison, was only 11.6 percent.

The conviction rate of the Ferguson sample declines between their eighteenth and twentieth years, to 3 percent of the females and 15 percent of the males. All told, by the time the respondents reached the age of twenty, 7 percent of the females and 31 percent of the males had been convicted of at least one offense; over half of these crimes had been committed between the ages of fifteen and seventeen.

The next cluster of studies addressing this outcome (Zimmerman, 1982; Jones and Moses, 1984; Barth, 1990; and Frost and Jurich, 1983) do not include explicit comparison groups or reference data. As such they are difficult to interpret, especially since age-specific data on arrest histories are scarce. However, arrest histories at age eighteen and during the whole life-course are available for comparison purposes.

Zimmerman reported that 28 percent of the males in her sample in New Orleans and 6 percent of the females had been convicted of crimes and served at least six months in prison; about half of these were in jail at the time of the study. National data suggest that between 20 and 25 percent of all men are arrested by age eighteen, and that 50 to 60 percent are arrested at some point in their lifetime. For women the rates are about one-fourth those of men (Blumstein et al., 1986, p. 36, Table 2). In addition, in 1981 only about 2 percent of the general adult populace of Louisiana

was imprisoned (SAUS: 1984, Table 320). Thus Zimmerman's subjects experienced high levels of arrest and imprisonment. An additional 14.8 percent of the subjects had spent a few hours or overnight in jail for minor offenses. Zimmerman created another variable which reflected, in part, criminal behavior. She categorized her subjects by their individual functioning levels, which included measures of adherence to the law, self-support, and taking care of their own children. She determined that 33 percent were functioning inadequately in one or more of these basic areas of societal expectation.

Forty-seven percent of the former West Virginia foster children investigated by Jones and Moses had been picked up or arrested by the police. This rate of arrest is comparable to those of men nationwide, as mentioned above. In addition Jones and Moses found that 11 percent of their sample had been arrested once and 26 percent more than once, while 10 percent were picked up but not arrested. Over half of those arrested were convicted, and over half of these went to jail; in all, 22 percent of the sample had been in jail.

The most recent study by Barth (1990) found slightly lower rates of involvement in illegal activity. Almost one-third (31 percent) had been arrested and 26 percent had spent time in jail or prison. Compared to national data, these rates are normal.

Frost and Jurich reported that of their subjects who were eighteen years of age or older, 9 percent had been arrested for felonies and 16 percent had been arrested for misdemeanors. They found that all of the felony arrests involved males, as did 9 of the 12 misdemeanor arrests. Thus 26 percent of the males had been arrested for felonies and 33 percent had been arrested for misdemeanors. This is high relative to national levels, for data compiled by Blumstein et al. (1986, p. 36, Table 2.1) suggest that around 15 percent of males are arrested for F.B.I. index offenses at least once during their lifetime. Overall, 14.5 percent of the subjects (male and female) had spent time in jail or prison, while eleven out of the forty-three males (26 percent) had spent time in jail or prison.

The remaining two studies that attempted to address criminal behavior as an outcome (Meier, 1965; Allerhand, Weber, and Haug, 1966) are dated, provide no basis for comparison, and contain samples that are too small to enable us to draw conclusions.

In summary, as with the general population, male foster care subjects engage in criminal behavior to a greater extent than do females. Furthermore, with the exception of Festinger's study, the available data suggest that male former foster children engage in criminal behavior as young adults more often than do young males in the general population or those placed in adoptive homes. Arrest rates reported in these studies vary from about 25 percent to over 40 percent, and rates of court appearances for former foster children were about 13 to 20 percent. Over half of those arrested are commonly convicted, while 14 to 22 percent of subjects were reported to have spent time in jail. Not all studies used the same measures, so few studies are included in each of the ranges reported here.

CHEMICAL DEPENDENCY

Alcohol Use

Four studies examined alcohol use: Robins (1966), Triseliotis and Russell (1984), Festinger (1983), and Barth (1990). In one of the best designed of the twenty-seven studies reviewed, Robins compared male subjects who had been given a diagnosis of alcoholism with those considered "well," in that they had no clinical diagnosis. The alcoholics reported a higher rate of having lived away from both parents than did those with no disease (76 percent vs. 39 percent, $p < .05$). However, not all of those who had lived apart from their parents had been placed in care; some subjects may instead have been hospitalized or lived with relatives for extended periods.

The percentage of subjects who drank alcoholic beverages was reported in two of the moderately well-designed studies. Triseliotis and Russell (1984) compared subjects cared for in

institutions with a sample of adoptees. Ninety percent of the former group and 81 percent of the latter drank. Triseliotis and Russell also compared their participants to the general population. They reported that their subjects had fewer alcohol-related problems than did the general Scottish population, but felt that this may be explained, at least in part, by the relatively young age of their subjects and the tendency for drinking problems to increase with age.

Festinger provided more details about the history of alcohol consumption of her subjects. Over 41 percent of the males and 28 percent of the females began drinking before the age of sixteen. Twenty-nine percent of the males and 12 percent of the females drank at least three times per week, and 62 percent of the males and 36 percent of the females had drunk enough during the month preceding the study to "feel high." When these subjects were compared with a group of former foster children discharged from care five years earlier, it was found that they did not differ significantly in the age at which they began drinking or the amount they drank, suggesting some stability in these findings. There also was no difference between the foster care subjects and the respondents in a general population study in the proportion who drank alcoholic beverages; however, it was found that blacks in the foster care group drank more frequently to handle tension and drank "too much" more often than did blacks in the general population.

One additional study is noteworthy. Barth found that the proportion of youth who reported drinking once a week or more (19 percent) was quite comparable to a random sample of high school students.

Conclusions are difficult to draw in this area. The Robins study offers the strongest evidence of increased risk of alcohol-related problems for ex-care subjects. Festinger offers limited support for this position but only for the subpopulation of blacks, while Barth's findings suggest that drinking is not a particular problem for foster care youth. Overall, the information available cannot support any firm conclusions.

Drug Use

Barth (1990) found that, contrary to results for drinking, the proportion of subjects reporting use of street drugs while in foster care (56 percent) compared unfavorably to the general population of high school students. In addition, this usage rate had not declined since leaving foster care.

Festinger (1983) reported that 81.2 percent of the males and 66.4 percent of the females in her study had used drugs of some sort in the year preceding the study; the drugs usually used were marijuana and cocaine; tranquilizers were seldom used. Thirty percent of the respondents had used drugs at least once or twice a week during the past year; almost 29 percent of the males and 14 percent of the females had used at least one drug practically every day. Forty-nine percent of the males and 65.4 percent of the females either never had used drugs or else had done so no more often than twice a month. Forty-three percent of the males and 29.3 percent of the females had begun their drug usage before the age of fifteen. No comparisons with the general population were provided.

This sample of former foster children discharged in 1975 compared unfavorably with a similar sample who had been discharged in 1970. More of the 1975 subjects had used drugs at least once a week during the year preceding the study (31.2 percent vs. 14.3 percent); and although about the same percentage used drugs and about the same amount of drugs was used, the 1975 group began their usage at a younger age and used drugs with greater frequency. These results suggest that problems related to drug use may be on the rise in the foster care population.

Although Harari (1980) did not provide specific proportions of her subjects who used alcohol or drugs, she did indicate that their usage had decreased since leaving care. Festinger reported similar findings: of her subjects who had ever used drugs, 45 percent had decreased their usage over the years, while 37.3 percent had increased usage.

Clearly the data regarding drug usage are even less conclusive than those described above regarding the use of alcohol.

SUMMARY: BEHAVIORAL OUTCOMES AND THEIR PREDICTORS

Data from the above studies indicate that arrest rates for male former foster children generally fall between 25 and 35 percent but may be well over 40 percent. Of those arrested, one-quarter to one-half are subsequently convicted. Arrest rates appear much lower for females, at approximately 10 percent. Relevant comparisons are difficult to find in the reviewed studies. While arrest and conviction rates, particularly for males, are higher than what one would expect in the general population, they may not be widely different once race and socioeconomic status are controlled for. With regard to criminal behavior, foster family care subjects fared better than those in group care or living with relatives.

There are several sources of evidence indicating that increased ties with family and community of origin are associated with higher criminal behavior. Discharge from foster care to the home of a family member was associated with convictions, as was discharge to independent living (Zimmerman, 1982). Increased family visits were associated with a return home and increased criminal activity (Triseliotis and Russell, 1984; Zimmerman, 1982). Boys placed in foster care whose fathers lived at home had a significantly higher rate of adult deviance (McCord, McCord, and Thurber, 1960). On the other hand, a positive adjustment in the foster care home was associated with positive adult behavior (Triseliotis, 1980; Zimmerman, 1982).

No consistent relationship is reported between the reason for foster care placement (e.g., type of abuse/neglect) and subsequent criminal behavior (Fanshel, Finch, and Grundy, 1990; Festinger, 1983; Kraus, 1981). Changes in foster care placement were associated with more criminal behavior (Ferguson, 1966; Kraus, 1981), but this was not true for time in placement (Kraus, 1981) or age at placement (Kraus, 1981; Triseliotis and Russell, 1984).

Clearly the potential for spurious associations exists here, and these results must be interpreted with caution. Several authors noted associations between adult criminal behavior and adjustment problems or behavioral problems while in care.

There is little solid evidence that alcohol or other drug use may be a particular problem for former foster children (relative to comparison groups). Some evidence suggests that drug-related problems may be on the rise, reflecting increases in the general population. The problems that do exist seem to decline as the subjects grow older. Those who lived in group settings seem to fare worse than either adoption or foster family care cases.

Alcohol and drug use was not found to be associated with age at placement or number of placements. On the other hand, there does appear to be a negative association between adjustment in foster care and level of alcohol consumption (Triseliotis and Russell, 1984).

CHAPTER 6. FAMILY AND SOCIAL SUPPORT

The ability to form and maintain supportive family and social relationships is important for two reasons. First, this outcome in itself indicates a person's general maturity, functioning, and integration in the community. Second, family and social support may influence a person's ability to remain self-sufficient, make healthy adjustments, and achieve overall well-being as an adult. As children, individuals in foster care suffered abuse and neglect, separation from parents and community, and instability in their home environment. Can they overcome these deficiencies in their adult lives? In this chapter we examine the outcomes achieved by former foster children in four categories of family and social support: marriage, parenting, relationship with one's extended family, and social relationships.

FAMILY LIFE

Marital Outcomes Achieved

Twelve of the twenty-seven studies included in this review report marriage, divorce, and cohabitation rates of the subjects. Only four studies provide some basis for comparing these rates to those of the general population or to a comparison group, so assigning meaning to the numbers is difficult. A further difficulty is the range in ages of the subjects; this variation reduces the possibilities for comparisons across studies.

Time since foster care is critical in judging a study's utility with respect to this outcome. Not surprisingly, the studies with the youngest respondents (Ferguson, 1966; Maas, 1963) reported the lowest marriage rates (13 and 15 percent, respectively). Meier (1965), with subjects in their late twenties and thirties, reported a marital rate of 93 percent. The median for the twelve studies is 30 percent, and the mean is 36.5 percent. The Meier rate might be seen as an outlier, for the next-

highest rate is 56 percent. It should also be noted that the Meier study is one of the older studies reviewed.

Cultural differences could also be expected to influence findings with respect to marriage. The three lowest rates were found in studies of subjects from Scotland and England (Maas, 1963; Ferguson, 1966; Wolkind, 1977a; 1977b).

On the basis of strength of research design, four studies are of particular interest and are the focus of the following discussion: Quinton, Rutter, and Liddle (1986), Wolkind (1977a and 1977b), Triseliotis and Russell (1984), and Festinger (1983). All four provide some basis for comparison. The oldest was published in 1977 and all others were published after 1980. All have moderate to large sample sizes; however, dropout is a serious problem for two of them (Triseliotis and Russell, and Festinger).

Using the criteria described in Chapter 3, the strongest of these four studies is that conducted by Quinton, Rutter, and Liddle. This study has no major flaws, and relative to the other studies, it has an exceptionally low attrition rate (14 percent for the foster care group).

Quinton, Rutter, and Liddle compared a group of British women, aged twenty-one to twenty-seven years, who had spent part of their childhood in a children's home (ex-cares) with a control group who never had been in care. The ex-care subjects were less likely than the controls to be in a stable cohabiting situation. Of those with children (60.5 percent of ex-cares and 36.6 percent of controls), 61 percent of the ex-cares and 100 percent of the controls were living with the father of all their children ($\chi^2 = 6.52$, 1 d.f., $p < .02$); 22 percent of the ex-cares and none of the controls lacked a male partner (Fisher's exact probability test, $p = .039$). The ex-cares were also more likely to have had substantial difficulties in sexual or love relationships (22 percent vs. 2 percent, $\chi^2 = 6.67$, 1 d.f., $p < .01$), to have broken up with one or more partners (38 percent vs. 7 percent, $\chi^2 = 12.7$, 1

d.f., $p < .001$), and to have married men who had psychiatric disorder, were criminals or addicts, or had difficulties in relationships (51 percent vs. 13 percent, $\chi^2 = 11.32$, 1 d.f., $p < .001$).

Another British study (Wolkind, 1977a; 1977b) was among the four best designs exploring marital outcomes. Compared to the Quinton, Rutter, and Liddle study, Wolkind has a smaller foster care sample and the study is older. The sample consisted of primiparous women in England, divided into two groups based upon whether they had experienced a separation from one or both of their parents during childhood. Women who admitted to a separation from their parents in childhood were less likely to have married than those who had not ($\chi^2 = 11.48$, 2 d.f., $p < .01$). These separations were of various types and durations, and were further subdivided into those occurring within a "stable" or a "disrupted" context; all subjects who had been placed in the care of the local authorities were considered to be in the disrupted group. Of those who had been separated from their parents, the ones within a stable context were more likely than the disrupted group to be married ($\chi^2 = 20.57$, 1 d.f., $p < .001$).

The major drawback of the study by Triseliotis and Russell (1984) is its high attrition rate (47 percent). In addition, Triseliotis does not report findings for the earlier study (1980) of foster care subjects, leaving only the adoption and institutional-care subjects from the later study for comparison. About one-half of all of the Scottish subjects of Triseliotis and Russell had been married at least once: 49 percent of those who had been adopted and 55 percent of those who had been placed in residential care. About 20 percent of those who had ever married had been separated or divorced: 24 percent of the adoptees and 18 percent of those in institutional care. Of those who had been divorced, 40 percent had remarried. All eighteen currently married adoptees reported that their marriages were stable; three had had marital problems in the past that had been cleared up. The group who had been cared for in institutions appeared to fare worse; however, the number of subjects was quite small. Of

this group who were married at the time of the study, five (28 percent) reported having marital problems; 32 percent expressed some dissatisfaction with their marriages.

The fourth study, Festinger (1983), is from the United States. It is comparable to the Triseliotis and Russell study in that it has a high dropout rate (54 percent), but it lacks a direct comparison group. Festinger does, however, provide comparison data from several other surveys. Marriage rates among her 1975 New York City sample were 30 percent (25 percent of the males and 47 percent of the females), with 23.8 percent married at the time of the study. Festinger compared these results with those of several national general-population studies and found that former foster children were less likely to marry than the general population--as much as 40 percent less likely in some cases; this was also true for the older (1970) foster care survey she used for comparative purposes. However, when compared to the general population in New York City, former foster children from the 1975 group were no less likely to marry, with one exception: black females who had been in foster care were less likely to marry than were black females in the New York City general population; this difference was smaller than the comparison with black females in the national surveys.

In addition to the subjects who were married, 17.5 percent were living with a partner at the time of the study; of these, there was a higher percentage of females than males. A total of 42 percent of the respondents were either married or living with a partner: 39 percent of the males and 60 percent of the females. These marriages or partnerships had lasted, on average, for over two years.

About one-quarter of Festinger's sample had been divorced or separated. She found no difference between the rate for her sample and that in general population surveys.

A fairly consistent picture emerges from the above four studies. Compared to the general population, or to persons who did not experience a separation from their biological family, former

foster children are less likely to form stable marriages. However, comparisons with more similar populations like adoptees (Triseliotis and Russell, 1984) show little difference. Festinger's comparison to the New York City general population also revealed little difference, but the high dropout rate of her study raises the possibility of positive bias. That is, the subjects she located might be expected to be more stable in general and in more stable relationships.

Two studies examining this outcome (Maas, 1963; Ferguson, 1966) are of little use because of the young age of the subjects. As one might expect, these studies report the lowest marriage rates at 13 and 15 percent.

At the other end of the spectrum, the study by Meier (1965) involves the oldest subjects (twenty-eight to thirty-two years old) and the highest reported marriage rate (93 percent). Compared with the general population, about the same percentage of Meier's male former foster children had been married, but a higher percentage of them had been separated from their spouses for various reasons (3.8 percent of the general population and 14.3 percent of the subjects). More female former foster children had been married than females in the general population (100 percent vs. 89 percent), and more also had been separated from their spouses (11.6 percent vs. 5.1 percent); however, more were living with a spouse at the time of the study than was the case in the general population.

None of the five remaining studies which furnish data on marital outcomes (Harari, 1980; Zimmerman, 1982; Frost and Jurich, 1983; Jones and Moses, 1984; and Rest and Watson, 1984) provide a direct comparison group in their design, and all have significant attrition problems. Rest and Watson had only thirteen subjects on which to base a marriage rate of 54 percent. Zimmerman produces a similar rate (56 percent) with her much larger sample ($N=170$); however, her attrition rate is the highest of this group, at 64 percent, and may lead to some positive bias. The remaining three studies produce marriage rates ranging from 21 percent to 32 percent. This range is probably a reasonable estimate of the marriage rate for former foster children in their twenties.

Two of the studies described above also included comparative data on marital satisfaction. Quinton, Rutter, and Liddle found that, of their respondents who had "spouses," the ex-care subjects were more likely than the controls to have marked marital problems (28 percent vs. 6 percent, $\chi^2 = 4.59$, 1 d.f., $p < .05$). Festinger reported marital satisfaction scores for her subjects that did not differ significantly from those derived from national population studies.

Parenting Outcomes Achieved

Eight studies included data regarding former foster children's experiences as parents Triseliotis and Russell (1984), Wolkind (1977a, 1977b), Meier (1965), Festinger (1983), Rest and Watson (1984), Zimmerman (1982), Frost and Jurich (1983), and Jones and Moses (1984). One additional investigation, that of Quinton, Rutter, and Liddle (1986), focused specifically on parenting abilities. This study was also the most rigorous of those that addressed parenting outcomes and will, therefore, be considered first and most extensively. This research, it will be remembered, involved a prospective comparison of women who had been in care in one of two British children's homes and women in the same geographic area who had never been in care.

Quinton, Rutter, and Liddle found that more of their subjects who had been in care had been pregnant than the control subjects (72 percent vs. 43 percent, $\chi^2 = 8.50$, 1 d.f., $p < .01$); more of the ex-cares had been pregnant by age nineteen (42 percent vs. 5 percent, $\chi^2 = 16.75$, 1 d.f., $p < .001$) and had a child (60 percent vs. 36 percent, $\chi^2 = 5.85$, 1 d.f., $p < .02$).

Quinton, Rutter, and Liddle noted that serious failures in parenting were evident only among the ex-care subjects. Nearly one-fifth of their children had been taken into care for fostering or placement in children's homes, and there was one case of infanticide. Eighteen percent ($N=5$) of the ex-care subjects and none of the controls had children placed in care or fostered (Exact test $p = .075$). Thirty-five percent of the ex-cares ($N=10$) and none of the controls had experienced some sort of transient or permanent parenting breakdown with at least one of their children (Exact test $p = .009$).

An overall assessment of parenting was completed for all subjects with children aged two or over; the assessment combined historical measures with an interview and observational measurement of current parental functioning. Because there were few control subjects with children at least two years old, the spouses of fourteen males who had been in institutional care were added to this group; a comparison of these wives with the controls generally produced similar findings. The assessment yielded three levels of parental functioning: (1) "poor"--any children currently separated from their mothers because of parenting difficulties, or marked lack of warmth shown to children, or low sensitivity to the children's needs, and difficulty in at least two out of the three areas of disciplinary control; (2) "intermediate"--no past history of parenting failure but some current problems, or vice versa; and (3) "good"--no mother-child separations of four weeks or more, no past history of parental breakdown, and no difficulty on any of the scales of current parental functioning.

The observational assessment of parenting in this study was based on seven different aspects of parenting: positive affect, negative affect, frequency of distress, frequency of control episodes, ignoring of child initiations, amount of child initiations, and amount of joint play. Thirty-five percent of the ex-cares and none of the controls fell into the lowest quartile on at least four of the seven areas; 11 percent of ex-cares and 71 percent of the controls were in the top quartile on at least one parenting area; and 13 percent of the ex-cares and 48 percent of the controls showed no areas of difficulty ($\chi^2 = 11.746$, 2 d.f., $p < .005$).

In the overall assessment (historical, interview, and observational) of parental functioning, 51 percent of the ex-care subjects had a poor parental rating (including the 18 percent whose children were in foster care or children's homes), as compared with 11 percent of the controls ($p < .01$); 23 percent of the ex-cares and 48 percent of the controls had a "good" rating. This difference between the two groups remained even when the comparison was restricted to interviewer ratings of current parenting: 40 percent of the ex-cares and 11 percent of the controls were rated as poor ($\chi^2 = 6.91$, 2

d.f., $p < .05$); 31 percent of the ex-cares and 48 percent of the controls showed good current parenting.

The authors looked into the possibility that early pregnancies were related to parenting problems in the ex-care group and found that this factor did not explain the difference between the two groups; the difference remained when controlling for age at the time of the first pregnancy.

The impact on parenting of having a supportive spouse also was explored by Quinton, Rutter, and Liddle. "Spouse" was defined as a man with whom the woman had a stable cohabitation of at least six months, such that the woman reported them as being an established couple with their own accommodation, though they were not necessarily legally married. The quality of parenting was significantly associated with the presence of a supportive spouse ($\chi^2 = 10.07$, 2 d.f., $p < .01$). Parenting was also associated with whether the spouse demonstrated psychosocial problems, including psychiatric disorders, criminality, chemical dependency, or long-standing problems in personal relationships ($\chi^2 = 14.53$, 2 d.f., $p < .001$). Half of the women with supportive spouses or spouses without psychosocial problems showed good parenting; this rate was as high as that in general population comparison groups.

The authors found that the ex-care mothers were more likely than the control mothers to be without a spouse (22 percent vs. 0 percent), and the ex-care subjects as a whole (including those without children) were more likely than the controls to marry men with problems (51 percent vs. 13 percent, $\chi^2 = 11.32$, 1 d.f., $p < .001$).

The data led the authors to conclude that a spouse's good qualities exerted a "powerful ameliorating effect" leading to good parenting (p. 191). It was clear that the ex-care females were less likely than the controls to have a supportive spouse (26.6 percent vs. 74.1 percent).

In an older British study, Wolkind (1977a; 1977b) compared primiparous women attending an obstetric clinic in London to determine the role of various background factors in predicting early

pregnancy. Teen pregnancy was believed to be a risk factor in determining adequate maternal role functioning. Thirty-six of the 534 subjects in this study had been separated from their birth family for at least three months before age sixteen. Wolkind reports that the primiparous women who had reported having had a separation from their parent(s) during childhood were more likely to be in their teens than those who had not had a separation ($\chi^2 = 7.90$, 1 d.f., $p < .01$). Of those who had experienced a separation, the ones whose separations had occurred within a disrupted context, which included those who had been in care, were more likely to be under the age of twenty than those who had been separated in a stable context ($\chi^2 = 10.29$, 1 d.f., $p < .01$).

Only two additional studies provide comparative data with regard to parenting outcomes. Festinger (1983) reported that similar percentages of ex-foster care women and women in the general population had given birth by age twenty-six.

Triseliotis and Russell (1984), in comparing adoptees with subjects who were placed in residential care, found no significant differences in overall birthrates or births to single mothers. Their sample, however, was small (twenty-one married adoptees and twenty-two married institutional-care subjects), and their results may not generalize to the United States, since their study was conducted in Scotland.

All of their respondents reported having a close relationship with their children. The institutional-care group had more anxieties about parenting than did the adoptees; 45 percent of the former made references to difficulties or uncertainties about relating to their children. The institutional-care subjects who were having difficulties with their own children were more likely to report that they had emotional problems during childhood ($p < .02$) and at the time of the interviews ($p < .0003$), that they had received psychological help within twelve months of the interviews ($p < .005$), and that they possessed a poor sense of well-being ($p < .006$). The lack of reported difficulties in parenting among the adoptees led the authors to conclude that a stable and caring

environment after separating from parents can prevent a person from having problems as a parent later.

The remainder of the studies provide considerable descriptive data but no comparative data. An issue of particular interest concerning these ex-foster care subjects is the need for placement of their own children in foster care. While Festinger reports that all subjects with children were asked "whether any of the children had ever been placed in foster care or relinquished for adoption" (p. 139), it is very difficult to ascertain the percentage who responded affirmatively to this question. Festinger decided to exclude males from any analysis of this outcome, arguing that the data for males were flawed since "unmarried males sometimes were not, or perhaps could not be, as certain as females about such basic facts as birth" (p. 140). With regard to the females she reports that

All but four of the 53 mothers were living with all of their children, and two of these four had at least one child with them. . . . Only one of the mothers had offspring in a foster home at the time of our contacts, although a few others had in previous years used foster care temporarily. (p. 144)

Twenty-nine percent of the males in Festinger's work had sired children, and about half of these were living with all of the children.

The study conducted by Meier (1965) is of some interest because of the relatively older age of her subjects (twenty-eight to thirty-two years). This age range makes possible a better assessment of their parenting capacity. Forty-one of the forty-two women in Meier's study had borne a combined total of 129 children. While it appears that it was known to the researcher which children were born to single mothers, the percentage of births to single mothers is not reported. Forty of the forty-one women with children were caring for their children in their own homes (115 of the 129 children); one woman had lost custody of her two children when she was divorced; two children had died; and ten children, born to seven single women, were in the care of another family, usually through adoption.

Thus, in contrast to Festinger's findings with a younger cohort, eight of the forty-one women with children (20 percent) had had a child placed out of home.

None of the children born in wedlock had been placed in foster care. However, two mothers, with six children among them, were felt to be in precarious situations that could result in the use of foster care in the future. On the whole, it was noted that the children looked happy, healthy, and well cared for. Meier reported that ". . . most of these mothers do better than they think they do" (p. 203); they expressed more doubts about their role as mother than was warranted by the children's actual behavior.

The Rest and Watson (1984) study has too few subjects to warrant attention here. Ferguson's 1966 prospective study achieved a very low attrition rate and provides good comparison data from other sources; however, the subjects are relatively young at follow-up, making it difficult to assess parenting outcomes in terms of child placement. Ferguson does note that the 11.5 percent single-mother rate for twenty-year-old females in his study compared with a rate of 6 percent for twenty-two-year-old women in Glasgow in 1964.

The remaining three studies, all published between 1982 and 1984, are of similar design and quality. All employ retrospective designs without comparison groups and provide little if any comparative data from other sources. Findings from such studies are purely descriptive.

Forty-six percent of the former foster children in Zimmerman's (1982) study (N=170) had children: 25 percent of the men and 72 percent of the women. Of these, 36 percent lived with their children in a legal marriage, 14 percent lived with their children and their partner, 32 percent lived with their children alone or with extended family members, 7 percent had children who lived with a parent other than the interviewee, and 11 percent had children who lived with their grandparents. None of the children of the participants had been placed in foster care.

Half of the children of the male subjects had been born out of wedlock. Five of the eight men with children were living with their children; two had children living with their ex-wives, and one had children living with their grandparents. All of the men reported that they saw and supported their children.

Of the twenty women with children, 30 percent were living with their husbands and children, 20 percent with their boyfriends and children, and 40 percent with their children alone or with extended family members. Zimmerman reported that all of the single-parent heads of households living with children were female (34 percent of the women and 16 percent of the total; in comparison, 41 percent of all black women nationally were single parents in 1978).

Forty-six percent of the subjects reported that their children had some sort of problem in areas such as health, education, and behavior. The homes and quality of care of seventeen subjects were evaluated; all of the children looked well cared for, but two parents lived in dangerous physical environments. Twenty-three percent of the parents reported grave concerns about meeting their children's physical needs; all of these lived below the poverty level. Twenty-seven percent of the parents said that they had grave concerns about their ability to provide adequate supervision for their children and/or to cope with their behavioral or emotional demands.

Zimmerman categorized her participants into three groups according to their individual functioning levels, as measured by their performance in three areas: adherence to the law, self-support, and caring for their own children. Sixty-seven percent were functioning at least adequately at the time of the study, while 33 percent were functioning inadequately in one or more basic areas of societal expectation. Subjects who had been married or divorced were functioning at a higher level than those who had never married ($p < .04$), and those who had common childbearing concerns were functioning better than those whose concerns were unusual or severe ($p < .02$).

Frost and Jurich (1983) found that 72 percent of their subjects had no children. More females than males had children (41 percent vs. 19 percent). All of the women and 55 percent of the men with children lived with their offspring.

Jones and Moses (1984) reported that 43 percent of their female respondents, 13 percent of the males, and 27 percent of the total had at least one child. Nineteen percent of those with children reported that their child was in foster care.

Extended Family Support Outcomes Achieved

This section of the chapter describes the adult relationships existing between former foster children and family members other than their spouses and children: natural parents, foster parents, siblings, and extended natural family members. Ten studies explored this area: Triseliotis and Russell (1984), Harari (1980), Zimmerman (1982), Festinger (1983), Frost and Jurich (1983), Jones and Moses (1984), Ferguson (1966), Triseliotis (1980), Barth (1990), and Palmer (1976). The findings are presented below, grouped by type of relationship.

Biological parents. Relationships between adult former foster children and their biological parents have been of particular interest and are examined in eight of the reviewed studies. The study by Triseliotis and Russell is particularly interesting in that it provides the only opportunity to compare subjects who spent extensive time as children in institutional care with subjects who were adopted. One-half of the institutional-care subjects of Triseliotis and Russell's investigation had been in contact with at least one parent at some time after entering care. By comparison, 27 percent of the adopted subjects (N=12) had established some form of contact with one or more members of their family of origin. Twenty percent of the institutional-care subjects had frequent contact with one or both parent(s) at the time of the study, whereas only three of the twelve adoptees had meaningful ongoing relationships with members of their biological families.

Most of the former institutional-care respondents felt forgiving and understanding toward their parents, assuming they had tried to cope but could not; one-quarter of them had negative feelings toward their parents for deserting or placing them. Those respondents who could remember life with their parents had few regrets about the separation. However, 90 percent of the institutional-care group wished that some aspect of their past experiences would have been different; they most frequently regretted the lack of family life, poor relationships, the lack of information regarding their families, and the absence of contacts with the community. Most adoptees did not express interest in obtaining more information about their families of origin.

While the closer ties with the biological family might appear positive for the institutional-care group, it should be remembered from previous chapters that these ties have been found to be negatively associated with other adult outcomes. In general, the natural families of the subjects were probably ill-equipped to provide material and emotional support to their children.

Five retrospective studies of adult former foster children provided additional descriptive information concerning relationships with biological parents (Harari, Zimmerman, Festinger, Frost and Jurich, Jones and Moses). With the exception of the Frost and Jurich study, the results of these surveys are quite similar. One-third to one-half of the subjects report that they are in contact with their biological mothers and about one-fourth to one-third are in contact with their biological fathers. Festinger provides the most detailed description and her results are quite close to those of Jones and Moses, Zimmerman, and Harari.

Eighty-three percent of the 186 subjects interviewed by Festinger were in touch with at least one member of their biological families. Over 48 percent maintained contact with their mothers, their fathers, or both; 22.1 percent had contact with their fathers and 35.8 percent with their mothers. Fifty-four percent were satisfied with the frequency of contact with their mothers, and 49 percent were satisfied with the frequency of contact with their fathers. Of those subjects who had stayed in

touch with their biological parents or other nonsibling relatives, 37.8 percent felt "very close" to them, 32.9 percent felt "somewhat close," and the remainder felt "not very close" or "not close at all." Males tended to feel closer to these relatives than did females; 44.7 percent of the males and 27.6 percent of the females reported feeling "very close" to their blood relations.

Festinger also discovered that 167 of her 277 participants had no contact at all with a particular family member. Thirty percent were satisfied with this situation, but 70 percent wanted some additional contact. Of those desiring additional contact, 34 percent wanted contact with their mothers, 70 percent with their biological fathers, and 46 percent with certain extended family members.

The contact rates reported by Frost and Jurich were considerably higher. Frost and Jurich asked their subjects how much contact they had with members of their natural families. Forty-two percent had contact three to four times weekly, while 13.5 percent had contact on a weekly basis; 23 percent were in contact monthly, and an additional 16 percent were in contact three to four times per year. Six percent had no contact with their natural families.

Siblings. Fewer studies obtained information concerning relationships with siblings. What is available is purely descriptive. In general it appears that sibling contact is much higher than contact with biological parents and, for many subjects, may be the only connection with the biological family.

Triseliotis and Russell reported that thirty-three of the forty subjects who had been placed in residential establishments also had at least one sibling placed in the same facility; 90 percent of these described their relationship as very close. Many continued these close sibling relationships into adulthood; 41 percent had frequent contact with their siblings at the time of the study.

Festinger found that 11.6 percent of her subjects either had no siblings or else were not aware of having any. Of those with siblings that they knew, 72 percent had lived with one or more of them during their placements; 91.5 percent had had contact with siblings during placement. At the time of

the study, 44 percent were in touch with all of their known siblings, 8.5 percent had contact with none of them, and the remainder saw some but not all of their siblings.

Jones and Moses found that 82 percent of their respondents who had siblings were in contact with them at the time of the study--a much higher percentage than were in contact with natural parents.

Thirty-three of Harari's thirty-four subjects reported that they had siblings. Of these, 76 percent saw their siblings at least monthly, and 13 percent saw them about twice a year. Similarly, 85 percent of Zimmerman's respondents stated that they had contact at the time of the study with at least one sibling, and 19 percent had contact with all of them.

Extended kin. Forty-two percent of the 186 subjects interviewed by Festinger were in touch with a relative other than their parents or siblings. Fifty-nine percent of those who maintained contact were satisfied with the frequency of this contact. Jones and Moses reported that 35 percent of their respondents had contact with at least one relative other than their parents and siblings, while about half of Triseliotis and Russell's institutional-care subjects had met such relatives. On the other hand, Harari indicated that few of her subjects had contact with extended family members.

Zimmerman asked her former foster children who they currently felt closest to; 3 percent named their grandmothers. When asked with whom they felt kinship ties, 36 percent indicated their natural family, while 19 percent mentioned their in-laws; 13 percent named a combination of natural, foster, and in-law family members.

Foster families. Harari suggested that her findings regarding foster family relationships should be interpreted with caution, for the subjects who agreed to participate often were located because their former foster parents knew and revealed their locations. This caution applies equally to all the retrospective studies, which constitute the bulk of the studies included in this review.

The one exception is the study by Ferguson, which employed a prospective design and achieved a very low attrition rate; however, the subjects in this study were quite young at follow-up (eighteen to twenty years old). Ferguson reported that at the time of follow-up, 27 percent of the male subjects and 34 percent of the females were living with their foster parents. Forty percent of the remaining males and 38 percent of the remaining females were in contact with them; 27 percent of the males and 23 percent of the females had no contact with members of their former foster families.

The retrospective studies, whose subjects were somewhat older, reported varying percentages of subjects who were still living with foster parents at the time of the study. Festinger's rate was lowest at 12 percent, while Harari reported that 21 percent had never left the foster home after discharge or had returned to the foster home. Triseliotis reported that 35 percent were living with foster parents and considered them family.

Clearly, foster parents remain important resources long after discharge. Both Barth (1990) and Festinger report that 89 percent of their subjects reported some contact with their foster or group-home parents since leaving care. Festinger found that 89 percent of those maintaining contact with their foster family had frequent contact. Of those former foster children who maintained contact with their last foster family, most felt very close to them.

Fifty-seven percent of Harari's subjects who had not continued to live with their last foster parents felt that they could count on them for support, while 27 percent felt they could not count on them, and 16 percent were uncertain. The perceived absence of support usually centered on money or other concrete issues. Of those respondents who had more than one foster home, 31.8 percent maintained contact with a foster parent other than the last one.

Palmer (1976) asked her respondents about the level of identification they felt with their foster families; identification was defined as feelings of belonging or affection. The majority indicated that

they felt a positive identification. Respondents seemed to identify more positively with foster families than with their biological families. There was no association between the levels of identification subjects felt with foster families and biological families. Festinger reported similar results in this regard.

Jones and Moses (1984) found that during the first year after discharge, excluding those subjects who continued to live with their foster families, 77 percent of the respondents had contact with their former foster parents. At the time they responded to the questionnaire, 72 percent of the subjects who had foster parents were in contact with them, and this contact typically occurred at least weekly. Thirty-eight percent were in contact with other people who, as children, had lived in the foster home. Forty-four percent of the respondents who had lived in group or institutional placements had contact with staff members from those settings. Triseliotis and Russell (1984) reported similar findings for subjects who had been in institutional care.

SOCIAL SUPPORT OUTCOMES ACHIEVED

This section describes findings which relate to the former foster children's general ability to establish and maintain relationships including friendships, involvement in organizations, and leisure-time activities. Nine studies provide descriptive information concerning this area, with only three offering comparative data. The nine studies are Quinton, Rutter and Liddle (1986), Triseliotis and Russell (1984), Festinger (1983), Maas (1963), Allerhand, Weber, and Haug (1966), Harari (1980), Zimmerman (1982), Frost and Jurich (1983), and Jones and Moses (1984).

While Quinton, Rutter, and Liddle found that the ex-care subjects were more likely to report poor social relationships than the controls (18 percent vs. 10 percent), these results were not statistically significant given the relatively small sample size (N=145). Similarly, 16 percent of the

adoptees compared to 28 percent of the institutional-care subjects in the Triseliotis and Russell study reported having moderate to severe difficulties making friends and mixing.

Festinger again provides rich descriptive data which she compares to results for the general population. In general, these results seem to contradict the findings of the two comparison studies cited above. Ninety-six percent of Festinger's subjects felt that there was someone to whom they could turn for help or advice, and 22 percent (more females than males) felt there were many such people in their lives. Thirty percent of the respondents were uncertain precisely whom they could count on for help. These former foster children were similar to the general population comparison group in the number of people they felt they could count on for help. However, the foster care cohort disagreed less than did the general population that "These days I really know whom I can count on for help."

Roughly 10 percent of the subjects (13.7 percent of the males and 6.1 percent of the females) felt that "no one cares much what happens to me"; black former foster children disagreed less than did the general black population with this statement. Festinger also reports that whites in the foster care and general population surveys had the same alienation scores; blacks had higher alienation scores than whites in both samples. Females who had been in foster care felt less alienated than females in the general population.

Forty-two percent of Festinger's respondents belonged to formal organizations, and all were pleased with their experiences in these groups; this level of involvement was similar to that found in the national general population survey used for comparison. Ten percent of the subjects attended church at least once a week, and an additional 42.4 percent attended infrequently; one-third never attended services, and 15.3 percent claimed no affiliation with a formal religion. Most were satisfied with their religion: 62 percent expressed some, much, or very much satisfaction in this area.

Festinger stated that the percentage of her subjects with a religious preference and the frequency of attendance of services were comparable to the figures from the general population survey.

Festinger also found that most of her subjects had four to five close friends; 65 percent of these had met some of their friends while in foster care. Seven percent of the respondents had no close friends; 36.5 percent wanted more friends, and one-quarter wished that people liked them more. She noted that her findings were similar to those of national general population surveys in the level of satisfaction with friends, the number of friends, frequency of contact with close friends, and the number who wished that people liked them more.

Most of Festinger's subjects were reasonably satisfied with their neighbors and knew one or more of them, although one-quarter of them had no contact with their neighbors. This data was comparable to that obtained in national surveys.

The remainder of the studies (Maas; Allerhand, Weber, and Haug; Harari; Zimmerman; Frost and Jurich; and Jones and Moses), which do not provide a basis for comparison, seem to agree that the majority of subjects have reasonable social support systems. Participation in groups is also high but not as high as other indicators of social support used. The lowest rate of group participation was noted by Jones and Moses. Only 30 percent of their respondents belonged to any group, and three-quarters of these were church-related. Seventy-eight percent had a religious preference, and significantly more women than men expressed a preference ($p = .05$); 61 percent attended church services, and 76 percent stated that church was important to them.

Taken together, these findings suggest that the majority of former foster children are able to form social relationships as adults that they find generally fulfilling. A significant minority, however, struggle in this area, and, Festinger's results notwithstanding, ex-care subjects appear to be at greater risk of poor social support and relationships, as evidenced by the findings of the more rigorous studies of Quinton, Rutter, and Liddle; and Triseliotis and Russell.

SUMMARY: FAMILY AND SOCIAL SUPPORT OUTCOMES AND THEIR PREDICTORS

Findings with regard to the ability of former foster care children to secure family and social support as adults are far from conclusive. Results from two of the better-designed studies that also provide a direct comparison group (Quinton, Rutter, and Liddle, 1986; Triseliotis and Russell, 1984) suggest that problems may exist in forming stable cohabiting partnerships, in fulfilling parenting roles, and in achieving integrated and supportive social relationships in the community. These risks seem to be heightened when the child follows a path that involves later entry into care (Fanshel and Shinn, 1978; Festinger, 1983; Jones and Moses, 1984), greater social and behavioral problems (Triseliotis and Russell, 1984), placement in group settings (Festinger, 1983; Triseliotis and Russell, 1984), and reunification with and emotional rejection by the biological family (Palmer, 1976; Zimmerman, 1982). As adults, these individuals are more likely to experience teen pregnancies, marriages with a nonsupportive spouse, and greater social isolation.

On the other hand, additional findings from these and other studies suggest that these risks may be ameliorated through nurturing and stable foster family care and adoption (Festinger, 1983; Triseliotis and Russell, 1984; Triseliotis, 1980; Zimmerman, 1982). Longer and stable placements were found to be associated with greater identification with the foster family and improved parenting outcomes as adults (Festinger, 1983; Jones and Moses, 1984; Palmer, 1976; Zimmerman, 1982).

CHAPTER 7. PERSONAL WELL-BEING

The final set of outcomes reflects the personal well-being of the former foster children. This chapter first describes findings on physical health. It then considers mental health and general well-being or life satisfaction.

PHYSICAL HEALTH OUTCOMES ACHIEVED

Less attention has been paid to this outcome area. Only seven studies of former foster children included data related to the physical health of these adults and, even within these studies, the topic receives minimal consideration. The studies are Wolkind (1976a, 1976b), Triseliotis and Russell (1984), Festinger (1983), Ferguson (1966), Barth (1990), Jones and Moses (1984), and Zimmerman (1982).

Wolkind's study is one of two that include a comparison group, but, it will be remembered, the out-of-home group contains only thirty-six subjects. The pregnant women who participated in this study were administered the Malaise Inventory, a questionnaire derived from the Cornell Medical Index, which pertained to a woman's usual health before pregnancy. The subjects who admitted to having been separated from their parents during childhood had significantly higher Malaise scores, indicating poorer health, than did those who were not separated ($t = 5.05, p < .001$). Of the first group, those whose separations had occurred within a disrupted context had higher Malaise scores than those whose separations had occurred within a stable context ($t = 2.33, 102 \text{ d.f.}, p < .05$).

Wolkind found that, among these same subjects, those who had been in foster care were more likely to describe their health as having deteriorated since pregnancy (31 percent vs. 13 percent, $\chi^2 = 7.05, 1 \text{ d.f.}, p < .01$) and to have had higher mean scores on the Malaise Inventory (6.26 vs. 3.82, $t = 4.43, p < .001$).

Triseliotis and Russell found no difference between the adoptees and those who received institutional care in their study of Scottish subjects. In general, their subjects considered themselves less healthy than did the subjects of the other investigations reported here. Seventy percent rated their health as good, and all except one of the others described their health as "average"; the health of one former institutional-care subject was described as "poor."

The Festinger and Ferguson studies do not include a control group but do provide comparative data from other sources. Both have relatively large samples; however, Festinger's retrospective design results in significant dropout and possible sample bias. Ferguson's study employs a prospective approach with very little attrition.

Ferguson questioned his Scottish subjects about their history of work days missed owing to illness. Between the ages of eighteen and twenty years, his subjects had missed fewer days of work as a result of illness than had the general population of the same age; only 2 or 3 of the 203 subjects had lost work time.

Of Festinger's New York City respondents, 79 percent reported having no particular physical or health troubles. Almost 85 percent described their health as excellent or good, and 1.8 percent described it as poor. Of the 21 percent who reported health problems, the severity ranged from serious to minor. There was no difference in the self-assessment of overall health between the former foster children (1975 cohort) and the general population of the country. These two groups did differ, however, on two particular symptoms: whites who had been in foster care had fewer upset stomachs than whites in the general population; and blacks who had been in foster care and whites who had been placed in group settings had more nightmares than the general population.

Festinger's subjects, discharged from care in 1975, reported health status information similar to that reported by the comparison subjects who had been discharged in 1970. The 1970 foster care cohort differed from the general population on one symptom: the whites who had been in foster care

had fewer health complaints than the general population sample. Festinger concluded that, overall, the former foster children and the population in general were similar with respect to their health and symptomatology.

Barth's subjects reported more health problems. Over four of ten (44 percent) had had a "serious illness or accident" since leaving foster care, with roughly one-fourth (24 percent) requiring hospitalization. Only half (53 percent) rated their health as very good or excellent.

Jones and Moses reported a rate of health problems that is quite similar to Festinger's; however, they do not provide comparison data for their study.

Finally, Zimmerman's retrospective survey does provide comparison data for this outcome area. Twenty-nine percent of the respondents rated their health as fair or poor, compared with 12 percent of the general population. The researcher points out, however, that the discrepancy between the rates for the former foster children and for the general population is probably less dramatic than it initially appears. Within the general population, 26 percent of those with incomes of less than \$5,000 and 17 percent of those with incomes between \$5,000 and \$9,000 rated their health as fair or poor; 36 percent of Zimmerman's subjects reported incomes of \$5,000 or less, and 25 percent reported incomes between \$5,000 and \$9,000. These findings seem to indicate that health status may be influenced more directly by income than by foster care history.

These findings suggest that adults who experienced foster care have poorer health than the general population, but their health status may be quite similar to that of other low-income populations. The scarcity of information on this outcome suggests the need for more research.

MENTAL HEALTH OUTCOMES ACHIEVED

Mental health is a widely studied outcome, with twelve different studies reporting findings regarding this area of functioning: Robins (1966), Quinton, Rutter, and Liddle (1986), Heston, Denney, and Pauly (1966), Wolkind (1977a, 1977b), Triseliotis and Russell (1984), Barth (1990), Harari (1980), Zimmerman (1982), Festinger (1983), Palmer (1976), Fanshel and Shinn (1978), and Maas (1963). These studies include five of the better-designed studies reviewed: Robins; Quinton, Rutter and Liddle; Heston, Denney, and Pauly; Wolkind; and Triseliotis and Russell. However, all but Robins's study were conducted outside the United States.

Although Robins's study is dated, it is one of the best designed of the twenty-seven studies included in this review. Also, the major focus of this study was the mental health of the subjects. Robins compared 524 former patients at child guidance clinics with 100 nonpatient subjects. The purpose of the investigation was to describe the "natural history" of the sociopathic personality (p. 1). Of the former child guidance patients, 28 percent of the males and 47 percent of the females had lived in an institution or foster home by the time they were referred for care. The author found that the proportion of these subjects later diagnosed as having a sociopathic personality did not vary significantly with the type of foster care received; however, children raised by both parents were more often well than other children ($p < .05$), and children for whom parents did not have legal responsibility were least often well.

For males, the rates of mental illness were not significantly different for those who had lived with both parents and those who had ever lived away from them. Of those who had been removed from their parents because of neglect, only those with a diagnosis of schizophrenia had a rate of illness higher than the well group (35 percent vs. 7 percent). However, for females, more with a diagnosis of hysteria than well females had been wards of the state (25 percent vs. 0 percent); 85

percent of those with hysteria, compared to 42 percent of the well females, had lived away from their parents at some time ($p < .05$).

A second methodologically sound study in this review also examined the mental health of study subjects. The findings of this study, and those reported twenty years earlier by Robins, are in agreement. Quinton, Rutter, and Liddle reported that while in care and at follow-up, those British female subjects who had been residents of Children's Homes evidenced greater mental disturbance than the controls. At the time of follow-up, the ex-cares were more likely than the controls to have a current psychiatric disorder (31 percent vs. 5 percent, $\chi^2 = 9.21$, 1 d.f., $p < .01$). They also were more likely to have a personality disorder, as evidenced by persisting handicaps in interpersonal relationships since their early teens or earlier (25 percent vs. 0 percent, $\chi^2 = 10.37$, 1 d.f., $p < .01$).

Three additional studies which examined mental health status also included control groups. Of these three studies, one (Heston, Denney, and Pauly) found no differences between groups. Two (Wolkind, and Triseliotis and Russell) found the ex-care group to be doing worse than the controls.

Wolkind discovered that women who admitted to a separation from one or more of their parents during childhood were more likely than others in the study to have seen a psychiatrist or to have received psychotropic drugs from general practitioners ($\chi^2 = 3.98$, 1 d.f., $p < .05$).

Triseliotis and Russell defined as "disturbed" those subjects who possessed two or more of the following four characteristics: (1) serious relationship problems with marital partners and friends, (2) psychiatric referral in adult life, (3) heavy drinking or drug use, and (4) criminal record, excluding automobile offenses. Significantly more of the institutional-care group compared to the adoptees were classified as disturbed (38 percent vs. 16 percent); one adoptee and seven institutional-care subjects met three or more of the criteria.

Four additional studies provided comparative data or used standardized tests to judge the mental health status of former foster care children. Barth found that the mean score on the Center for

Epidemiologic Studies Depression Scale (CES-D) was 36, which is higher than the cutoff score used to indicate the presence of depression. Harari used the Jackson Personality Inventory (JPI) as an adjustment measurement. According to the author, mean scores for self-esteem (males, 12.87, and females, 11.81) and for interpersonal affect (males, 10.87, and females, 14.46) "compare favorably with JPI normative samples" (p. 182). Zimmerman also reported that the rate of mental health problems seemed to be similar to that among low-income people in the general population. However, Festinger found that more former foster children had turned to mental health professionals for help than did individuals in the general population. Since leaving care, 47 percent of the respondents had gone to a professional for advice or counsel with personal problems. The largest sources of counseling were the clergy (18.8 percent) and social agencies (16.3 percent), usually the agency which had discharged them; 15.1 percent of the former foster children had used more than one source of help. Thirty percent of the subjects--37.7 percent of the women and 24.8 percent of the men--had used mental health and social agency contacts. Most who sought assistance felt they had been helped.

Of the remaining three studies which provide results bearing on mental health status, two (Palmer, and Fanshel and Shinn) do not provide data on the adult functioning of subjects. Under the conceptual framework of this review, however, mental health status while in care and at discharge is considered to be a possible predictor of adult outcomes and is discussed in Chapter 9, which describes factors associated with mental health outcomes.

The earliest report which addressed the issue of mental health is that of Maas, who retrospectively studied twenty young adults who, as preschool children in London during World War II, were placed for their physical safety by their parents in British wartime residential nurseries. The purpose of the investigation was to determine whether the subjects suffered "irreversible psychosocial damage" as a result of their separation from their families. Given the date of this study, its location, and the peculiar situation surrounding the placement of the children, it is not clear that findings

should be generalized or compared with those of other studies. The internal validity of this study also suffers from the small sample size, lack of a comparison group, and questionable selection criteria. It will only be noted here that Maas concluded that "at least from about age two, early childhood separation and preschool residential care are not themselves sufficient antecedents to a seriously troubled or troublesome young adulthood."

LIFE SATISFACTION ACHIEVED

Only five studies examined overall life satisfaction outcome: Triseliotis (1980), Triseliotis and Russell (1984), Festinger (1983), Zimmerman (1982), and Jones and Moses (1984). Of these studies, only the work of Triseliotis, and Triseliotis and Russell provide direct comparative data. Triseliotis and Russell reported that about 90 percent of their adopted subjects and 60 percent of those who had institutional care rated their feelings of well-being as good or very good, while the remainder rated their feelings as uncertain or poor. Sixty-one percent of the adoptees and 20 percent of the institutional-care group indicated that they were very happy with their present lives; 32 percent of the former and 47 percent of the latter stated that they were fairly happy.

These results can be compared with those from the earlier study by Triseliotis, which focused exclusively on foster home subjects. In that study he found that twenty-four of his respondents (60 percent) felt satisfied with themselves and with their lives; they had strong positive self-images, and most were satisfied with their growing-up experience. Six (15 percent) had some reservations about themselves, and ten (25 percent) felt dissatisfied with their lives and pessimistic about their futures. They attributed their negative self-images to their having been in care.

Festinger compared her findings regarding both the 1970 and 1975 samples of New York City former foster children with the findings of several general-population studies: a well-being study conducted at the Institute for Social Research of the University of Michigan; general population data

for New York City; and national surveys conducted by the National Opinion Research Center at the University of Chicago.

For those respondents who had been discharged from care in 1975, Festinger found that, with regard to self-esteem, the whites who had been placed in foster homes reported similar findings to those in the general population; white subjects who had lived in group settings compared less favorably to those in the general population. Her black respondents scored a little lower than the national subjects on the statement "I am a person of worth"; however, they had similar responses to other self-esteem questions, leading Festinger to conclude that their level of self-esteem was essentially the same as that of blacks in the general population. As a whole, her subjects were similar to those in the other foster care studies described here in their sense of happiness and their satisfaction with life as a whole, except that the whites who had lived in group settings scored lower than those placed in foster family care on both of these measures.

When the author compared former foster children who had been discharged from care in 1970 with the general population, she found very few differences. Although no significant difference was found between the two groups in their sense of well-being, whites who had lived in foster homes expressed more dissatisfaction with "life in the U.S. today."

In comparing subjects discharged in 1975 with those discharged in 1970, Festinger found that the older group felt less alienated. She suggested that this was not unusual, because younger adults generally have less employment security and lower earnings than older ones, and the change to independent living was more recent for the former. The older respondents expressed more satisfaction with "life in the U.S. today," but the groups were similar with regard to feelings of well-being and optimism. Festinger concluded that "no harmful effects [of foster care] emerged with the passing years. If anything, they seemed more settled and in control of various aspects of their lives than those who were more recently discharged" (p. 228).

The remaining two studies (Zimmerman and Jones and Moses) were purely descriptive, and the form in which the results were presented does not permit comparison with the results of Festinger. The results of these two studies, however, do appear to be in close agreement with each other, reporting that between 15 and 17 percent of their subjects were dissatisfied or unhappy.

It is difficult, and perhaps ill-advised to try, to form any opinions based on these sparse and conflicting findings. The Scottish studies and the U.S. study by Festinger do, however, suggest that subjects from group settings fare more poorly in this area than adoptees, those from foster family homes, and the general population.

SUMMARY: PERSONAL WELL-BEING OUTCOMES AND THEIR PREDICTORS

Relatively little research has been done on the effects of foster care on the adult outcome of physical health, making it impossible to draw conclusions or to even speculate about associations. However, several predictors of life satisfaction and general sense of well-being have been identified for ex-care subjects. The following subjects seem to fare better: those placed in foster family homes rather than group or institutional settings (Festinger, 1983; Triseliotis and Russell, 1984; Triseliotis, 1980); those who are placed at younger ages (Festinger, 1983; Jones and Moses, 1984), in stable homes, and for longer periods of time (Jones and Moses, 1984); and those who maintain contact with the foster family after leaving care (Festinger, 1983; Jones and Moses, 1984).

More attention has been paid to mental health outcomes, and the results suggest that the ex-care subjects fare poorly in this area. Contrary to other findings, type of placement is not a consistent predictor of mental health; nor is age at placement (Festinger, 1983; Palmer, 1976; Robins, 1966). Contact with the biological family was not found to be associated with better mental health outcomes, but greater contact with siblings was (Festinger, 1983; Palmer, 1976). School performance was also found to be a positive predictor of adult mental health outcomes (Festinger, 1983). Overall,

however, it appears that mental health problems are relatively stable and that the best predictor of problems in adulthood is the presence of emotional or behavioral problems as a child (Fanshel and Shinn, 1978; Festinger, 1983; Triseliotis and Russell, 1984).

SECTION III. SUMMARY AND CONCLUSIONS

CHAPTER 8. OUTCOMES ACHIEVED

One may be easily tempted to skip the prior chapters of this book and turn only to these summary chapters. However, the reader is strongly cautioned against such an approach. This summary of findings and the conclusions in the next chapter reflect the variations in the quality of the studies reviewed. The studies vary according to dates conducted, geographic location, sample size, attrition rates, and their inclusion of comparison groups. As is evident in the summation below, some findings involve substantial ranges. The earlier chapters of this book provide the context within which the findings of this chapter are to be considered. That context involves an understanding of the strengths and limitations of each of the studies as well as the basis on which those strengths and limitations have been determined. As the authors have attempted to do, readers are encouraged to weigh such factors carefully in their appraisal of adult outcomes for former foster children.

ADULT SELF-SUFFICIENCY

One of the most important functions of the foster care system is to prepare for independent living those individuals who age out of the system. The ability of individuals to be self-sufficient has much to do with their employability (and/or the employability of a spouse), which is, at least in part, a function of education. So for both individuals who leave the system to live independently as adults and those who leave the system to return home or go to other living arrangements, the most basic level of achievement is the eventual completion of high school.

Unfortunately, the studies reviewed here reveal that somewhere between 15 and 56 percent of formerly placed children did not complete high school or earn a GED, a rate which is higher than that found among individuals who were not in foster care as children. Adoptees were more likely to finish school than individuals who had been in residential institutions, who in turn were more likely to

finish high school than those who had been in foster family homes. Triseliotis and Russell (1984) suggested that the low rates of completion for foster family subjects may have reflected the foster parents' expectations. The median educational level attained by former foster children ranged between 9 and 11.5 years, approximately one year below the average level for the general population, as reported by some of the authors. This difference was reduced when former foster care children were compared to other low-income children. A few studies revealed that 8 to 40 percent of subjects had earned some college credit.

The school performance of individuals with a history of foster placement was below average and below their capacities, with substantial numbers of individuals behind their age-appropriate grade level, and with 20 to 50 percent having repeated a grade or grades in school. Fanshel et al. (1990) found that foster placement did not compensate for educational deficits: those behind at the time of placement were still behind at the time of discharge. One-third to one-half of the subjects who were asked expressed regrets about not achieving a higher educational level while in care, and they rated educational counseling as one of the three most important areas for agencies to stress in discharge planning.

Fourteen studies provided some measure of employment or self-sufficiency. Given the above educational outcomes, it is somewhat surprising that unemployment among former foster care individuals did not differ from rates in the general population. Unemployment rates for the respondents in the various studies ranged from 19 to 50 percent, the latter a finding in a sample of individuals formerly in a residential institution. A majority of former foster children were self-supporting (52 to 92 percent), although some had received public assistance at some point in their adult lives (4 to 50 percent). Again, those discharged from group homes or institutions had higher rates of public assistance than men and women their age in the general population of New York City. Despite similar employment rates, former foster children often had unskilled or semi-skilled jobs

without security, similar to the jobs held by their parents. There appears to have been little upward mobility.

Eleven studies examined the housing of sample members. Individuals who had been separated from their families were more likely to live in poor housing than individuals who had not been separated. Most people, however, were satisfied with their current housing. A majority of former foster care children were living independently, either alone or with a spouse. In those studies involving younger adults, roughly 20 percent were living with former foster parents or members of their biological family. One-half of the respondents, when asked in one investigation, reported that they had received either little or no preparation for discharge into independent living. Moves from one location to another occurred more often for former foster children than for people in the general population. One study (Harari, 1980) reported an average of 3.9 moves for subjects who had left care one to five years earlier.

Several studies of homeless persons have now revealed that a disproportionate number of them spent some time in foster care during their childhoods. Six of these studies were discussed in detail in Chapter 4. The proportion of homeless persons who reported they were in out-of-home placement as children ranges from 15 to 39 percent. Among a sample of psychiatric patients, former foster care children were much more likely to experience homelessness as adults, even after controlling for age, ethnicity, gender, psychiatric diagnosis, and history of substance abuse.

Researchers have been quick to point out, however, that the process by which childhood placement and adult homelessness are linked is not yet clear. It may be that the children came into care with severe problems, or that care created personal problems for them. Another possibility is that care was necessary because of family difficulties, and placement functioned to further weaken family ties which would have helped individuals avoid homelessness in adulthood. There is as well

growing recognition of the failure of the foster care system to adequately prepare persons for discharge to independent living.

Former foster children, nevertheless, have been able to provide for themselves for the most part, with only occasional governmental financial assistance. And this is in spite of poor academic performance, the failure to complete high school, and perhaps most important, the failure to receive adequate preparation for independent living. It is not surprising that homelessness looms ominously on the horizon for many.

BEHAVIORAL ADJUSTMENT

Investigators have examined both crime and substance abuse among former foster children. Eleven studies provided information regarding criminal behavior. Mirroring the general population, arrest rates for females (5 to 10 percent) are lower than the rates for males (25 to 40 percent). Those males who were formerly in placement appear to engage in crime more often than similarly aged males in the general population. For those males who were in placement, 22 to 33 percent were convicted of crimes; incarceration rates ranged from 14 to 22 percent.

The evidence regarding substance use among former foster children is mixed. Frequency and quantity of alcohol use appear to be higher among former foster children compared to the general population. In one study (Festinger, 1983) 29 percent of males and 12 percent of females reported drinking at least three times per week; blacks in the foster care group drank "too much" more often than blacks in the general population.

Drug use appeared to be high and on the rise for former foster children, as it is in the general population. Twenty-nine percent of the males and 14 percent of the females reported having used at least one drug practically every day.

It should not be too surprising that rates of criminal behavior and chemical dependency would be higher among former foster children. Both conditions have been noted as responses to poverty, and former foster children often come from poor families and live in poverty themselves. Future investigations of criminal behavior and chemical dependency among former foster care children need to partial out the effect of poverty from that of childhood placement.

FAMILY AND SOCIAL SUPPORT

The connections maintained by former foster children to family and other social supports are of particular interest to researchers. Families and others serve to buffer the effects of life's difficult problems. Separation from family members may not only cut off potential support, but it may also stunt a person's ability to form supportive relationships in other contexts. Further, the ability to form and maintain family and interpersonal relationships provides a strong measure of individual functioning.

In twelve studies which examined marriage rates, the mean median rate was 30 percent, with a range of 13 to 93 percent. The variation is a function, in part, of the differences in ages of subjects across studies as well as the time since discharge from foster care. The 93 percent rate was for a study with the oldest subjects and longest period since foster care. Nonetheless, comparative investigations showed that marriage rates for former foster children were substantially lower than those for the general population and for individuals who had not been separated from their parents. This was true even when investigators included cohabitating relationships.

Divorce rates did not appear to differ, although people who had been in care were more likely to have substantial difficulties in sexual or love relationships, and women were more likely to have married men with personal problems (psychiatric, criminal, relational, and alcohol and drug). Marital satisfaction was not found to vary, however, between those who had experienced foster care and those

who had not. Ninety percent of respondents reported being very happy or pretty happy with their partners, a percentage that did not differ significantly from that found in national population studies.

As parents, adults who were formerly in care were significantly different from those not in care as children. A common research bias was to focus on the women as parents; thus, most findings, with a few exceptions as noted, pertain to women. Researchers found separation from family to be linked to early pregnancies, and most respondents indicated they wished they had been older when their first child was born. One study (Ferguson, 1966) which examined nonmarital birthrates found a rate of 11.5 percent for former foster care women compared to a 6 percent rate for similarly aged women in Glasgow, Scotland.

While most women had children and were currently living with them, some reported that one or more of their children had been placed out of the home at some time (19 percent of women in one study). The women who had been in foster care as children were more likely to have been pregnant, more likely to have been pregnant at an earlier age, and more likely to exhibit serious failures in their parenting than control subjects. Based on the infrequency of parenting difficulties among a comparison group of adoptees, one researcher concluded a stable and caring environment after separation from one's family can ameliorate the effects of that separation on parenting abilities.

Those women who had never married were more likely to be functioning inadequately than those who had been married or divorced. In one study the quality of parenting was associated with the presence or absence of a supportive spouse and the presence or absence of psychosocial problems in the spouse. Unfortunately, those women who had been in care were less likely than the controls to have a spouse and to have one without problems.

One study (Frost and Jurich, 1983) which queried men about their parenting experiences found that they were less likely to have children than women, and less likely to be living with them

(about half of those who had sired children). Eighty-eight percent of the men rated themselves as excellent or good parents, similar to the 81 percent for women.

It appears that separation from one's family in childhood does not result in separation from that family in adulthood. About a dozen of the studies examined this issue. A majority of former foster care children reported that they were in contact with at least one family member: 82 to 94 percent. Two-thirds indicated they felt very close or somewhat close to their relatives. Contact with siblings was reportedly higher than contact with biological parents; about one-half reported current contact with mothers, one-third with fathers, and about 90 percent with at least one sibling.

Foster families apparently provide a great deal of affiliation for former foster children in their early adult years. Respondents reported high rates of contact with former foster parents: 63 to 89 percent had contact with at least one foster family member. Researchers reported that 12 to 35 percent of subjects were still living with their foster families. A majority of respondents reported that they felt they could count on their foster parents for support. Palmer (1976) found that respondents seemed to identify more positively with foster families than with their natural families. These results must be interpreted with caution, however, since in most studies, some of the subjects were located through their former foster families.

Respondents even continued contact with staff members from institutional settings. In one study (Jones and Moses, 1984) 44 percent reported contact with a staff member since discharge, and in another study (Triseliotis and Russell, 1984) 60 percent of those who had been in institutions indicated that they felt close or very close to their former houseparents.

The majority of former foster care children seem to have reasonable social support systems. Nine studies provided information on this area. Those placed in care as children were comparable to the general population in their number of friends, frequency of contact, level of satisfaction with friends, and familiarity with their neighbors. Some individuals did report poor social relationships

(18 percent) and moderate to severe difficulties in making friends and mixing with others. Once again, the variation was greatest between those subjects who experienced institutional care and those who were adopted. Most respondents identified four to five close friends, with only 7 percent indicating they had no close friends. These findings are similar to those for the national general population. Festinger (1983) noted that 42 percent of the sample belonged to formal organizations, also similar to figures for the general population. A majority of former foster care children stated a preference for religion and reported a frequency of attendance that was also comparable to the general population.

It does not appear that former foster care children have been rendered incapable of maintaining relationships with their families or of establishing relationships with others. Further, they find these relationships fulfilling. The fact that many more were able to maintain contact with their siblings than with their parents speaks to the importance not only of maintaining sibling units together in placements, but also of facilitating parent contact and visitation.

PERSONAL WELL-BEING

Physical health, mental health, and life satisfaction are areas of personal well-being, some of which have been assessed by investigators of former foster care children. Conclusions are difficult to draw from the mixed findings from the limited number of studies that examined physical health. Several studies, however, suggest that when compared to the general population, former foster children generally have poorer mental health, and those who were placed in group settings rather than foster family homes score lower on various measures of life satisfaction.

Seven studies of the adult health of former foster children have been conducted. Three of those studies suggest that former foster children have poorer physical health than the general population, a difference that, though reduced, seems to hold even after controlling for income.

Fifteen to 30 percent of subjects reported their health as fair or poor, compared to about 12 percent of subjects in comparison groups. Roughly a fifth of former foster children report having a health problem as an adult, and this rate seems to be higher among those who resided in group settings. A study completed in the 1960s, however, found that those individuals who had been in care missed fewer work days due to illness than those of the same age in the general population. One other study found no differences between the former foster care subjects and the general population. The other studies reporting health status provided no comparison data.

Mental health was the most widely studied outcome for former foster care children. However, because of the drastically varying measures of mental health used in the thirteen research studies examining this area, it is difficult to say anything beyond the general finding that former foster children as adults seem to exhibit problems in the area of mental health. They were more likely to be referred to and use psychiatrists than were adoptees or persons in the general population. In addition, current psychiatric disorders were more prevalent among former foster children both as adults and as children compared to study controls, although at least one study (Hesten, Denney, and Pauly, 1966) did not find any differences.

Individuals who had been in foster family care did not differ from adoptees in their satisfaction with life, but those who had been in group settings did. Adoptees and foster family home subjects more often reported well-being and happiness with life than did those from institutions. Individuals from group settings, particularly whites, reported less self-esteem, happiness, and satisfaction with life as a whole than did former foster home residents and persons in the general population.

What is interesting about the findings regarding personal well-being is that in spite of possibly poorer physical health and tentative indications of more difficulties in the area of mental health, former foster care children do not see life as any less satisfying than adults who were never separated

from their families as children. This may speak to how people form expectations or the tendency of people to adapt to their situations.

If, then, these are the outcomes for adults who spent some part of their childhood in a foster home, group home, or institution, what are the processes by which these outcomes are produced? In addition to providing information regarding the outcomes of foster care, the studies reviewed here provide some, albeit limited, ideas regarding those processes. Findings on this subject are summarized in the following chapter.

CHAPTER 9. FACTORS ASSOCIATED WITH FOSTER CARE OUTCOMES

In Chapters 4-7, an attempt was made within each chapter that focused on a specific outcome to identify the specific process variables which have been found to be associated with each of the outcomes. The process variables describe and differentiate the foster care children and their experience in care, identifying which children are at greater risk of negative outcomes and how the foster care experience itself may contribute to different outcomes. The function of this chapter is to look across the different outcomes in an attempt to provide an integrated perspective of the roles of specific process variables in determining outcomes.

Although most of the criteria which have been used to rank studies are still of importance, the presence of comparative data, which was of central concern in assessing outcomes, is of less concern here. Our main interest in this chapter is in what differentiates the foster care experience for foster care subjects. Comparisons with other groups are of less relevance.

Isolating effects is virtually impossible given the high correlations between the process variables of interest (e.g., time spent in care, type of placement, age at placement, reason for placement). We search therefore for patterns rather than independent effects. Identification of these patterns can be an effective means to policy and program change that could lead to improved outcomes.

TYPE OF PLACEMENT

As is true with all of the placement variables explored in this chapter, the findings regarding the association between type of placement and outcomes are not unidirectional. Nevertheless, positive outcomes appear to be more likely for children who have been placed in family foster care homes than in group or institutional care.

Subjects who had been in family foster care functioned better as adults than those who had spent all or part of their time in group settings: they completed more education (Festinger, 1983); they were less likely to have been arrested or convicted of a crime (Ferguson, 1966; Festinger, 1983; Jones and Moses, 1984); they were less likely to be dissatisfied with the amount of contact they had with their siblings at the time of the study (Festinger, 1983); they were less likely to have no close friends (Festinger, 1983) and they had stronger informal support networks (Jones and Moses, 1984); they moved less often in adulthood; they were less likely to be living alone, to be single-parent heads of households, and to be divorced (Festinger, 1983); they were less likely to report alcohol or drug problems (Jones and Moses, 1984); they had a higher level of satisfaction with the amount of money they had for basics and with their financial situations; they had less of a sense that their incomes were below that of the average American; they had a stronger feeling that their financial situation had improved in the past few years and a higher level of optimism about the future improvement of their situations; they assessed themselves and their lives more positively (Festinger, 1983); and they were more likely to be judged by interviewers as satisfied (Jones and Moses, 1984).

The positive findings for foster family homes over group homes regarding drug and alcohol use and marriage were stronger for women. Women who had been placed in family foster homes, as opposed to those who had spent all or part of their time in group settings, were also less likely to have become pregnant for the first time while still in their teens, and were less likely to be receiving public assistance (Festinger, 1983).

Men who had been in foster homes were less likely than those who had been in group settings to have been arrested; and of the men who had been arrested, those from foster homes had been arrested less frequently than the others (Festinger, 1983).

As stated above, there was some variation in the findings of the studies. Some outcomes favored group care over family foster care. Group settings seem to promote closer and more positive

contacts with biological families. Subjects who were placed in group settings were more likely to marry and men were more likely to have children of their own (Jones and Moses, 1984).

Overall, it appears that children who spend their time in care in family foster homes are functioning better as adults than those who spent at least part of their time in care in group or institutional settings. A few of the authors note that this may be due, at least in part, to the nature of problems the children have when they enter care; children with more severe emotional, physical, or mental problems may be more likely to be placed in group settings than in foster homes, and they are more likely than the others to leave care with such problems. The results of these studies suggest that group or institutional placements do not successfully ameliorate existing difficulties. If such amelioration is a goal of foster care, then more effort must be made to develop family foster home placements that can accommodate the special needs of these children.

REASON FOR ADMISSION

A wide variety of data regarding the association between the reason for admission into foster care and adult outcomes is presented in the studies included in this review. Because of this variety, as well as the differences across studies in the classifications of reasons for admission into care, conclusions are difficult to reach. However, some themes do begin to emerge. Before turning to differences, it should be noted that several studies found no relationship between reason for admission into care and the following outcome variables: IQ (Fox and Arcuri, 1980); overall picture of children's symptomatic behavior (Fanshel and Shinn, 1978); and the presence of serious health, social-emotional, and/or intellectual/learning problems (Festinger, 1983).

Several studies (Kraus, 1981; Fanshel and Shinn, 1978; Jones and Moses, 1984; Palmer, 1976) attempted to identify those children who were placed in care because of their own behavior,

versus those placed for their own protection. In general, these studies did not find this differentiation of reasons for placement to be associated with later outcomes.

A more fruitful differentiation of the reason for placement focuses on the behavior of the parent(s). In general, placement because of neglect, abandonment, or physical abuse, compared to placement because of mental illness, death, imprisonment, or physical illness of the caretaker, was found to be associated with the following negative outcomes: more criminal behavior (Fanshel, Finch, and Grundy, 1990; Festinger, 1983); feeling less close to one or both parents (Festinger, 1983); poorer sense of well-being (Festinger, 1983); and lower educational achievement (Fanshel and Shinn, 1978).

AGE AT PLACEMENT

Numerous studies investigated the relationship between the age of children at the time they entered care and their functioning as adults. The findings from these studies were highly variable and offered no convincing evidence that age at placement is a useful predictor of subsequent adult functioning. Most analyses failed to find significant relationships. For every finding that older children do better, there seems to be a contradictory finding.

One finding that does seem noteworthy comes from a single study. Festinger (1983) found that for the men who had been discharged from group settings, older age at the time of initial placement was associated with a stronger sense of well-being; however, for men discharged from foster homes, younger age at placement was associated with a stronger sense of well-being. This finding, coupled with the general finding that negative outcomes are associated with group rather than family settings, suggests that early placement in the right setting can be beneficial, and that early placement in the wrong setting may be damaging.

NUMBER OF PLACEMENTS

As is true with the other care variables examined in this chapter, the findings regarding the relationships between the number of placements a foster child has experienced and adult outcomes are not unanimous. However, this variable presents a clearer picture than the rest: fewer different placements while in care were associated with better adult functioning.

Living in fewer placements was found to be associated with better school achievement and more years of education (Palmer, 1976; Zimmerman, 1982); increased contacts with and feelings of closeness to foster families after discharge (Festinger, 1983); less criminal activity (Zimmerman, 1982); more informal social supports (Jones and Moses, 1984); increased life satisfaction (Jones and Moses, 1984; Triseliotis and Russell, 1984); greater housing stability (Meier, 1965); self-support (Zimmerman, 1982); and better caring for one's own children (Zimmerman, 1982).

It should be noted that analyses can be found for almost all of the above outcome variables which yielded no significant relationship with number of placements. The preponderance of evidence, however, points to higher numbers of placements being associated with less successful outcomes.

Fanshel, Finch, and Grundy (1990), as a result of their more recent study of former residents of the Casey Family Program, hypothesized a sequence of variables to be linked into a causal chain which ultimately determines the adult condition of people who had been in care when they were children. The number of living arrangements in which the children had resided prior to entering the Casey program was the first link in this chain; those foster children who had experienced multiple placements prior to their admission into the program seemed destined to poorer outcomes than those with fewer placements.

TIME IN CARE

Contrary to what one might expect given the current view of the "problem" of long-term foster care, available evidence supports the benefits of being in care for longer periods of time. Longer time in placement was found to be associated with a higher degree of life satisfaction (Jones and Moses, 1984), improved adult functioning (Zimmerman, 1982), better psychological functioning (Palmer, 1976; Fanshel and Shinn, 1978; Frost and Jurich, 1983), and less criminal activity (Kraus, 1981; Zimmerman, 1982).

Several studies provide insights into how or under what conditions time is associated with positive outcomes. Benefits are maximized when the long-term placement is in a normal, stable, foster family setting (Zimmerman, 1982). Under these conditions, the child develops greater emotional ties and identification with the foster family rather than the biological family, maintains contact with the foster family, and receives their support in adulthood (Festinger, 1983; Jones and Moses, 1984).

Stability of the foster care placement and adequacy of the home to which a child is returned are factors which seem to have some bearing on the effects of length of time in care. If children are returned to homes in which their needs are not sufficiently met, they may be harmed more in the long run than they would have been, had they remained in foster care. But long-term care may be beneficial only if the child is able to spend most of this time in a single, stable placement.

AGE AT DISCHARGE

Very few findings are reported that pertain to the relationship between the age at which a child is discharged from foster care and adult outcome variables. While not identical, age at discharge is highly correlated with time in care. Not surprisingly, the studies that addressed this

relationship found that older age at discharge was positively associated with adequate functioning as an adult (Zimmerman, 1982), with not having been convicted of a crime (Zimmerman, 1982), and with feeling more satisfaction with life as an adult (Jones and Moses, 1984).

DISPOSITION

Most of the authors who explored the relationship between adult functioning and the nature of the foster child's disposition from care studied the differences between children who were returned to their own homes and those who remained in some form of care until they aged out. A greater number of the study findings associated negative outcomes with returning home rather than remaining in care (Fanshel and Shinn, 1978; Ferguson, 1966; Zimmerman, 1982). In particular, those returned home seemed more likely to engage in criminal activity.

Consistent with the findings reported above regarding the "time in care" variable, subjects returning home were found to have stronger ties to their biological family than to the foster family.

CASEWORKER ACTIVITY

Only three studies reported associations between outcomes and the nature of the social services provided to the child. Only one of these studies (Fanshel and Shinn, 1978) is of reasonable quality and makes any serious attempt to explore this topic, but it does not follow subjects into adulthood.

In Fanshel and Shinn, the provision of services was variously conceptualized and operationalized to include the level of education of the worker, number of workers, skill of the worker, experience of the worker, type of placement agency (voluntary vs. public; religious vs.

secular), and amount of casework activity. The lack of substantial and consistent findings on any one of these variables makes it impossible to draw even tentative conclusions.

CONTACT AND CLOSENESS WITH BIOLOGICAL AND FOSTER FAMILIES

Eight investigations included data which were related to the impact of family relationships upon various outcomes. As with many of the other variables, the outcomes are mixed, making it difficult to draw conclusions. The summary of findings below begins with a description of the impact of the amount of contact the foster children had with their biological families during care and then examines closeness with biological and foster families. A few findings pertain to the relationship between these two types of families.

Several studies indicated that there was a positive relationship between a variety of outcomes and the amount of contact the foster children had with members of their natural family while in placement. As one might expect, greater contact with the biological family while the child was in placement was found to be associated with greater feelings of closeness and identification with the biological family (Festinger, 1983; Zimmerman, 1982). Greater contact also appears to be associated with lower levels of serious problems at discharge (Fanshel and Shinn, 1978). However, both positive and negative associations were found between contact with the biological family during placement and adult functioning (Festinger, 1983; Triseliotis and Russell, 1984; Zimmerman, 1982).

Findings regarding feelings of closeness or identification with the biological family also ranged from positive to negative but, more often than not, it was not associated with outcomes achieved as adults (Festinger, 1983; Palmer, 1976). On the other hand, associations between outcome variables and the subjects' relationships with their out-of-home care-givers generally were either positive or neutral in their effects on adult functioning. Increased closeness and identification with the foster parents during care was found to be related to good academic and social progress while in care

(Palmer, 1976); the absence of task, emotional, or behavioral problems at the end of care (Palmer, 1976); and greater sense of well-being and life satisfaction as adults (Festinger, 1983; Jones and Moses, 1984; Zimmerman, 1982).

SUMMARY

It is obvious that one must exercise extreme care in making any causal interpretations of the findings presented here. The likelihood of spurious correlation is high. On the other hand, these associations point to specific areas where further exploration might be fruitful.

Most of the findings are consistent with practice and policy knowledge supporting the use of foster family placement over group or institutional placement and stressing the need for stability in placement. Other findings, however, strongly contradict current thinking in the foster care field--that long-term foster care is harmful for the child. Several studies suggest that a stable long-term placement in a foster family home where the child is able to develop a strong identification with the foster family can actually lead to beneficial outcomes for the individual as an adult.

CHAPTER 10. NEXT STEPS

Having reviewed what we know about the adult outcomes of ex-foster care subjects and the factors associated with those outcomes, we are now ready to recommend the next steps in a research agenda designed to provide more definitive answers and to track progress in this program area.

Additional efforts to determine the long-term outcomes of foster care are needed for several reasons. First, foster care is, and will likely continue to be, a major service response for some children when family life becomes untenable. As a service response, long-term foster care should not be viewed as a failure. Like Jim Casey and Joseph Reid, the founders of the Casey Family Program, we believe that quality long-term foster care will continue to be the most desirable solution to the needs of a sizable number of children and their families. As shown in numerous studies reviewed here, an extended stay in foster care as a child does not necessarily condemn the individual to an unhappy and unproductive adult life and may lead to more desirable outcomes than reunification with parents. Given an ongoing need and positive rationale for the service, we must seek to optimize the chances for positive outcomes for foster care.

Second, the failure to achieve positive adult outcomes for a significant portion of ex-care subjects creates additional demands for more serious study of this area. While definitive conclusions cannot be drawn from the review of studies presented here, we believe that they do offer convincing evidence that former foster care subjects are at high risk of "rotten outcomes" as adults. These rotten outcomes are not simply a slightly diminished functioning or a failure to reach full potential, but involve a failure to meet minimal levels of self-sufficiency (homelessness, welfare dependency, etc.) and acceptable behaviors (criminal activity, drug use, etc.). A problem of this magnitude deserves additional attention. Perhaps transitional service programs for the adolescent foster care population can be reframed to provide support for those "at risk" of rotten adult outcomes rather than focus on the failure to preserve the family. Whatever strategy is employed, we believe the need is urgent.

Finally, although it is customary for research reviews to end with a call for more research, we believe that a particularly strong case can be made for research on the long-term effects of foster care. To some, the fact that twenty-seven separate studies were identified covering a thirty-year period might appear impressive. We would argue that this is a meager corpus, given the length of time the foster care program has existed and the high emotional and financial costs involved in the delivery of this service. Compare the results of the search presented here with those from a recent meta-analysis of the effects of anxiety on sport performance, which found fifty studies published between 1970 and 1988 (Kleine, 1990) or a recent meta-analysis of forty-six studies of intervention programs for juvenile delinquents (Izzo and Ross, 1990).

In judging the available research on the long-term effects of foster care, one must also take into consideration its quality. Overall we find the quality to be poor. Most of the research designs simply do not provide an opportunity for adequately answering the questions framed in Chapter 3 involving the long-term outcomes of foster care. The remainder of this chapter focuses on a critique of these methodologies and provides specific recommendations for future research.

DIRECT FOSTER CARE STUDIES

The major focus of this review were studies of the lives of subjects after leaving foster care; that is, the studies looked directly at the outcomes of foster care. These studies are listed in Table 3.1. These "direct" studies are to be distinguished from studies which, while reporting outcomes for ex-care subjects, have as their primary focus the examination of some problem area or population. The latter "outcome studies" are exemplified by the homeless studies, which are listed in Table 4.1 and are discussed further in the following section.

With respect to the direct studies of the effects of out-of-home care, the methodological critique in Chapter 3 identified five criteria: use of a control group, age of subjects when the study

took place, sample size, dropout rate, and date of the study. Three of these attributes are fairly obvious and require little further comment. In general, the more recently the study was conducted, the older the subjects, and the larger the sample, the more confidence we are able to have in the findings.

Sampling bias was a major concern in the majority of the direct studies. This is in large part a function of the designs used. Most studies employed retrospective designs, for which low response rate is an inherent problem. Of the retrospective studies, two (Kraus, 1981; Dumaret, 1985) achieved high response rates by utilizing record checks with relatively stable populations. Dumaret's study also involved a short period since foster care, as did Allerhand, Weber, and Haug's study (1966), which had a nonresponse rate of only 4 percent. The fifteen remaining retrospective studies for which rates could be calculated had nonresponse rates ranging from 20 to 78 percent. In contrast, the studies utilizing prospective designs (McCord et al., 1960; Ferguson, 1966; Quinton, Rutter, and Liddle, 1986) had attrition rates ranging from 1 to 21 percent.

The potential bias resulting from the high dropout rates in the retrospective studies makes them of little practical use. We believe that there is little to be gained from further retrospective studies unless steps can be taken to guarantee lower dropout rates. It is interesting to note that dropout rates associated with earlier studies (pre-1980) appear to be lower than those associated with the set of retrospective studies undertaken in the 1980s. The earlier studies also typically involved smaller samples. It is possible that these early studies devoted more resources to tracking down a smaller study group, or perhaps, as the population has become more transient, tracking has become more difficult.

A second criterion--whether or not the study provided a direct comparison group--not only is critical to the internal validity of the studies but also determines how the study findings can be used. In ranking studies with regard to this criterion, we differentiated three types: (1) single-sample

studies with no normative data; (2) single-sample studies with normative data; and (3) multisample comparison-group studies.

Single-sample studies, which overcome attrition problems (e.g., Allerhand, Weber, and Haug), can provide useful descriptive information. Proper planning and analysis of data from these studies can provide considerable insight into the causes of variations in outcomes within the foster care population. These studies are most useful in addressing the process questions which were summarized in the preceding chapter.

The introduction of normative data in single-sample studies, by use of standardized tests or results from other population surveys, is an attempt to ascertain the actual impact of the foster care experience on those placed in care. Such data, which we have ourselves added in our description of certain study findings, can be useful for providing a broad context for interpreting outcome findings. For example, it is difficult to know what to make of marriage rates for former foster care subjects without knowing what the rate is for the general population. If the rates for the two are the same we can conclude that this is not an area of concern with regard to the adult outcomes for former foster care subjects. However, if the rates differ, interpretation is extremely difficult owing to the large number of alternative explanations (e.g., poverty, race, geographic representation). Attempts at statistical control or matching to achieve equivalency in comparison data of this type are generally not convincing and too susceptible to manipulation and interpretation by the researcher or reader.

In Chapters 4 through 7 we presented a synthesis of findings on various adult outcomes. It is clear in these chapters that we have relegated the studies which do not provide a direct comparison group to a lesser role in describing the outcomes achieved. Although all the reviewed studies present findings on outcomes, this information is purely descriptive unless the study can additionally answer the question, "Compared to what?"

Eight of the twenty-seven reviewed studies can be described as multisample comparison-group studies, because they include a direct comparison group in the study design. Although most of the reviewed studies (62 percent) were done in the United States, five of the eight studies that include comparison groups were conducted in other countries. Thus, the potential for quasi-experimental designs exists, but this potential has not been fully exploited in past research, particularly in the United States.

Selection of a comparison group is critical in that it largely determines the conclusions that can be drawn from differential outcomes. The eight studies that include comparison groups have employed a variety of strategies in selecting the subjects for the comparison group. Several studies employed matching techniques. Heston, Denney, and Pauly (1966) used a two-factor design which looked at the effects of placement and psychiatric history of the mother. Frommer and O'Shea (1973a; 1973b) were interested in identifying factors which might be predictive of mothers having problems raising their children. Hypothesizing that the mother's out-of-home placement might be one such factor, the researchers identified users of antenatal clinics in London who had experienced such separations, and they chose controls from those reporting no separation. Controls were matched with the separated subjects by age, social class, and expected date of delivery. Quinton, Rutter, and Liddle (1986) were also interested in determining whether there is a continuity between adverse experiences in childhood and poor parenting behavior in adult life. Their study compared women who had been residents of one of two children's homes with subjects matched for age and living in the same general area of the inner city as children but who had never been admitted into care.

Other studies have employed more naturally occurring control groups without matching. Wolkind's (1977a; 1977b) research was very similar to Frommer and O'Shea's in that it examined factors affecting the future maternal role of first-time pregnant women. However, Wolkind's study did not match subjects but simply noted whether any of the women had been in placement as children.

Only 6.7 percent had experienced placement, but the large sample (N=534) yielded sufficient numbers for comparison purposes. Robins (1966) simply focused on all former patients of a child guidance clinic and noted whether they had been in placement.

When confronted with a confirmed situation of abuse or neglect, the social service system and family are faced with basically three alternatives: long-term placement (group or foster family), adoption, or maintaining the child in the family of origin. However, only three studies have patterned their research designs to directly model this decision point. Triseliotis and Russell (1984) compared adoptees with long-term residents in institutions, all of whom were from very disadvantaged backgrounds. Comparisons from an earlier sample of foster family subjects were also made (Triseliotis, 1980). Runyan and Gould (1985), in the only U.S study of this type, compared children placed in foster family care a minimum of three years with matched maltreated children who were provided services in their own homes. Dumaret's (1985) study provides the most complete group design comparing adoptees, foster care subjects, and subjects who remained in their own homes. All of the children were from disadvantaged backgrounds and had been placed at one time with "a view to adoption."

By providing a direct basis for comparison of the outcomes achieved by ex-care subjects, these eight studies are in the best position to assess the long-term impact of foster care. They further demonstrate that more rigorous designs can be successfully used in conducting research on foster care outcomes. The dearth of such research, particularly in this country, attests to the lack of attention that this question has received.

It should be noted that the current lack of uniformity in the treatment of abuse and neglect in this country, while deplorable from a policy and practice perspective, does provide a rich opportunity for the use of "natural experiments." Studies could be designed to take advantage of existing variation across geographic areas in the intervention and placement practices of agencies. In effect

we have an experimental opportunity when children experiencing the same basic conditions in basically identical family situations may be placed in foster care or adoptive homes, or left in their own homes, depending merely on where they live. The impact of this variation in placement interventions should be systematically investigated, so that we can begin to provide more uniform treatment based on evidence of the efficacy of our interventions.

While advocating the increased use of quasi-experimental designs that employ naturally occurring comparison groups (adoptees, in-home, and foster care placement subjects), we would also like to raise the possibility of employing even more rigorous research designs, which include random assignment. Although one may initially question the feasibility--even the ethics--of randomly assigning abused or neglected children to alternative placement settings, available evidence suggests that currently, these decisions may approximate a random process. The idiosyncratic nature of placement decisions and resulting inequalities in treatment of children and families are widely discussed and documented in the literature (Lindsey, 1991; Mech, 1970; Packman, Randall, and Jacques, 1986; Fanshel and Shinn, 1978; Costin, Bell, and Downs, 1991). Several recent evaluations of family preservation services have raised doubts about our ability to operationalize the concept of "imminent risk of placement" and ultimately to prevent placement (Nelson, 1990). If professionals and researchers in the field cannot identify children who are at risk of placement, and if there is no evidence that out-of-home placement is a function of the child and family's needs, can a strong argument be made against random assignment?

Clearly, no child who is at risk of harm should have that risk increased to satisfy a research agenda. Yet, available data suggest that the majority of children identified as being in need of placement do not get placed, regardless of the type of intervention provided by the protective service agency or family preservation program (Nelson, 1990). Barth and Berry (1987) have argued that children who remain in their own homes may be more poorly served than children who are placed in

foster care or adopted. Consistent with this perspective, we are seeing increasing numbers of children returned home only to return to the foster care system (Rzepnicki, 1987). Our reading of this situation is that we simply do not know the effects of our actions on the children in need of services. Isn't it time to embark on a line of research and service which will better inform our efforts?

The above discussion of the use of random assignment has focused on comparisons of long-term foster care versus in-home alternatives. We believe that fairly strong evidence exists of the benefits of adoption for this population of children. Adoptive placements appear stable and outcomes are generally positive (McDonald et al., 1989; Barth and Berry, 1988). The available evidence from the studies reviewed here, while meager, also suggests that these subjects fare well as adults. Given these results, adoption, when available as an option, should generally be pursued rather than long-term foster care. It is possible, however, that long-term care may be more desirable than adoption for special subpopulations of foster care children. For example, Festinger (1983) found that having a relative for a foster parent is better than being adopted by an unrelated family. It would be important to find out what the long-term outcomes of foster care placements with relatives are, compared to adoption.

INDIRECT OUTCOME STUDIES

In the presentation in Chapter 4 of self-sufficiency outcomes achieved by ex-care adults, we included findings from several studies of the homeless. These studies did not have as their primary purpose the investigation of long-term outcomes of foster care, but rather were focused on the problem of homelessness itself. The studies included information about out-of-home placement of the homeless subjects as possible predictors or risk factors which might explain the phenomenon of homelessness. Prior placement was but one such predictor and, as such, may not receive much attention in the reported findings of these studies. We were aware of these findings because two of us

have conducted extensive studies in this area and also share an interest in and knowledge of the child welfare field. Similar findings might be found with respect to any of the other outcome areas addressed in this review (e.g., unemployment, criminal behavior, chemical dependency, marriage, parenting and social relationships, and mental and physical health). A literature search of each of these areas, however, would be like looking for a needle in a haystack, since the focus was not specifically on the impact of out-of-home placement and many of the studies undoubtedly ignored this aspect altogether.

We wish to draw attention to these outcome-oriented studies as a potentially rich source of information on the impact of out-of-home placement. The findings from the studies presented in this review, while by no means conclusive, strongly point to foster care as a predictor of problems in adult functioning and self-sufficiency. Researchers who study adult populations with problems should be aware of this finding and investigate the role of out-of-home placement as a contributing or correlative factor.

Interpretation of findings from outcome-oriented studies that include information about the placement status of their subjects as children is relatively straightforward. Furthermore, such studies may provide rich information on the adult lives of ex-care subjects. The critical question, from the perspective of this review, is whether the ex-care subjects are overrepresented in the particular problem population under consideration. For example, the homeless studies reviewed found 15 to 35 percent of their subjects had been in out-of-home placement as children. Is this high or low? What is needed is an estimate of the percentage of former foster care children in the adult population. Charles Gershenson, currently with the Center for the Study of Social Policy, and longtime Director of Research for the Children's Bureau, estimates that approximately four million Americans (1 to 2 percent) have been in care at least once. This percentage would increase to about 4 percent if one

includes mental health and juvenile justice admissions. These numbers provide a clear picture of the dramatically higher risk of homelessness ex-care subjects face as adults.

SUMMARY

The majority of studies that have directly considered the adult experience of ex-care subjects have employed retrospective, single-group designs. These studies have the potential to describe this experience and to identify important predictors of variations in outcomes for the ex-cares. This information has important implications for the field, which should strive to achieve the most positive outcomes for all children in care. Methodological flaws, however, particularly attrition, have limited the utility of these studies. In addition, these studies cannot ultimately tell us if the ex-care subjects' lives are enhanced or further impaired by their experience in care.

Studies of foster care that provide a direct comparison group offer the best alternative for addressing gaps in our knowledge about the adult functioning of ex-care subjects. A handful of such studies have been done, thus proving that it is feasible. The majority of these studies have been conducted outside the United States, suggesting that this question has not yet received the attention that it deserves in this country. In pursuing additional studies of this type, researchers should look to the quasi-experimental designs employed in the studies described here, but they should also consider more rigorous designs that include random assignment. We believe that for a significant number of children, the decision to place them in foster care or leave them in their parents' home is currently arbitrary, and the consequences of this decision are largely unknown. We owe it to these children and to the thousands of children who will be in similar situations to search for the answers now.

APPENDIX. FOSTER CARE OUTCOME STUDIES, BY DATE

McCord, McCord, and Thurber (1960). The Cambridge-Somerville (Massachusetts) Youth Study was undertaken to investigate the effectiveness of a delinquency-prevention project. It included extensive observations of the behavior, child-rearing practices, and attitudes of the families of 255 relatively lower-class, urban boys during their childhoods. Initial data collection took place between 1937 and 1945, when the youth were nine to seventeen years old.

The prospective study reported by these authors was a follow-up of the earlier project. McCord, McCord, and Thurber attempted to evaluate the long-term effectiveness of foster home placement in preventing socially deviant behavior.

During the original initiative, twenty-four boys were removed from their homes at the instigation of the Cambridge-Somerville staff. They all were placed in foster care in their early adolescent years, and the placements were used as a "last resort" when other social service interventions failed to stop their unacceptable behavior.

Extensive information was available about the natural families of nineteen of these boys, and they became the subjects of this study. Of the other five boys, three had lived in foster homes during most of the Youth Study, and two had lived with stepmothers prior to their foster home placements; they were excluded because of the lack of information regarding their natural families.

From the remaining sample of 236 boys in the original study, nineteen were selected as a comparison group. Their early environments were similar to the "natural families" of the boys who later were placed in foster care. The two groups were matched on the following factors: whether the natural father was in the home; deviance or nondeviance of the mother and father; emotional attitudes of the mother and father toward the boy; and the mother's and the father's disciplinary techniques.

In 1956-57, when the subjects were in their early thirties, the authors conducted an inquiry into the degree of adult deviance among the subjects and the controls. "Deviance" included criminal behavior that resulted in a conviction for assault, larceny, sexual crimes, or public drunkenness;

alcoholism, as determined by two or more arrests--but not convictions--for public drunkenness, commitment to a mental hospital with a diagnosis of alcoholism, membership in Alcoholics Anonymous, or seeking help from a private agency for treatment of alcoholism; and psychosis, defined as the commitment to a state mental hospital with a diagnosis of schizophrenia, paranoia, or manic-depressive tendencies. Data were collected from the records of courts, mental hospitals, and social service agencies.

Specific information was not provided in this article regarding age of the subjects at placement in care or at follow-up, types of abuse or neglect experienced by the subjects, length of time in care, disposition from care, or special needs or disabilities.

Maas (1963). Maas retrospectively studied twenty young adults who, as preschool children in London during World War II, were placed for their physical safety by their parents in British wartime residential nurseries. The purpose of the investigation was to determine whether the subjects suffered "irreversible psychosocial damage" as a result of their separation from their families.

All of the subjects had been in residential care for at least one year, and all came from intact families without evidence of gross pathology. They had been placed in one of three wartime residential nurseries. Nursery N, located near London, had a low staff-child ratio (five to one) and encouraged the expression of the children's feelings. Nursery E was located in Wales, enrolled about twenty children with two staff members, and focused on firm discipline. Nursery S was the largest nursery, consisting of about forty-seven children who had been in day nursery school together in London while their mothers worked. They and four staff members, trained teachers, moved together to a residential setting, where the emphasis was on "faith in God, King, and denial, rather inspirational and repressive and quite possessive" (p. 61). Because of the need to locate another subject who had been placed in care in infancy, one person from a fourth nursery (O) was also included in the study.

Subjects included seven young adults who had been in Nursery N, seven who had been in Nursery E, five from Nursery S, and one from Nursery O. There were twelve males and eight females. They were 19 to 26 years old at the time of the study in 1960-61; one-half of them were 21 years old or younger. Five of the subjects had been separated from their parents in the first year of life (Ones); five, at about 2 to 2 1/2 years of age (Twos); five, at 3 to 3 1/2 years (Threes); and five, at 4 to 5 years (Four-Pluses). Their ages at placement ranged from two to sixty-one months, and they were selected so that there was at least one subject from each age grouping in each nursery.

The subjects had been residents of the nurseries for a range of twelve to fifty months; the mean time spent in care was just over three years. The younger the child was at placement, the longer the stay tended to be. All of the children returned to their families while they were growing up, but two of the Ones and one of the Four-Pluses spent four or more years in a boarding school, training school, or institution for deprived children subsequent to their wartime placements. One other Four-Plus, before returning home, finished the war years in other nonrelative placements. The remaining sixteen subjects grew up with their families without interruption after their wartime nursery school stays.

No control group was utilized, and Maas explains the rationale for this. First, he suggested that matched subjects would have been children who remained in London and experienced air raids; this experience would have made them very different from the nursery attenders. Second, parents who sent their children away may have been different from other parents with regard to their feelings about parental roles; matching for this characteristic would have required locating parents who had wanted to send their children away but could not for some reason, and there was no reasonable way to find such Londoners.

The subjects were interviewed, and fourteen of them were observed in interactions with various family members. Interviews centered on their living arrangements throughout their lives,

employment, leisure-time interests, education, and family life. They also were given the TAT (Thematic Apperception Test); five males and five females also completed the California Psychological Inventory, but Maas did not report their scores.

In addition, parents of eighteen of the subjects were interviewed; they were asked about the circumstances surrounding their children's leaving and homecoming and about their current adjustment. Records of collateral agencies--Children's Departments, medical facilities, etc.--were consulted; data from these sources basically confirmed the reports of the subjects. Based upon the material collected from all of the sources, ratings for each subject were assigned for the following areas: feeling life, inner controls, relationships with others, performance of key social roles, and intellectual functioning.

Meier (1965). Meier studied sixty-six former foster children who had grown up in Minnesota. The respondents were twenty-eight to thirty-two years old at the time of the study, had experienced five years or more of foster family care in their childhood, had not been returned to their own families while children, and were discharged from guardianship between July 1, 1948, and December 31, 1949. All of the eligible males (N=34) and a random sample of forty-eight of the eligible sixty-four females were included in the study sample; two of the eighty-two people had died, five were not located, and nine refused to participate.

Over half of the subjects had left home before the age of five. They had been in care for an average of eleven years and ten months, and the average age at discharge was eighteen years, one month. Complete information was collected from one black and sixty-five whites.

Data were collected from interviews with sixty-one subjects and questionnaires from five more. In addition, a limited amount of information was collected via phone calls or letters from subjects who had refused to participate in the full study. Their social effectiveness and sense of well-being were assessed and related to particular factors in foster family care (e.g., age at placement,

number of placements). Effectiveness and well-being were measured using variables pertaining to family life, living arrangements, economic/employment history, and community involvement.

Allerhand, Weber, and Haug (1966). A group of fifty boys who had been clients of Bellefaire, a residential treatment facility for emotionally disturbed children in Cleveland, Ohio, were located one to two years after discharge and agreed to participate in this study. The authors were interested in measuring their post-discharge adaptation and relating it to a variety of placement and care variables.

The potential subjects included all boys who had been in care there at least six months and had been discharged between January 1958 and June 1961; two of the fifty-two youth who met the criteria refused to participate. The mean age of the subjects at entry into care was just under thirteen years (range of five years, eleven months, to sixteen years, six months), and the average length of stay was 3 1/2 years (range of six months to 6 1/2 years).

Assessments of the subjects, using scales developed for the study, were made three months after admission, fifteen months post-admission, at discharge, and one to two years after discharge. Six major kinds of data were collected: "hard" or factual information, adaptability levels, casework variables, situational variables at follow-up, staff evaluations of the child's problems and progress while in care, and the child's actual role behavior.

Data were collected from agency records and interviews with the subjects, their parents or parent substitutes, and their therapists if they were still in treatment.

Ferguson (1966). This Scottish study sought to discover how a series of young people who had been in care in the Children's Department in Glasgow had fared after they left school and then left care at age eighteen. Included in the investigation were foster care youth who reached the age of eighteen between 1961 and 1963. They lived in a variety of types of placements: 16 percent with relatives or already-functioning guardians, 13 percent in residential homes, 56 percent boarded-out

with foster families after brief stays in residential facilities, 12 percent boarded-out directly, 2 percent in Training Hostels, and one in lodgings.

Of the 205 potential subjects (110 males and 95 females) who were approached, 203 agreed to participate. Twenty-six percent of the potential subjects entered care as infants, 38.5 percent between the ages of one and four years, 22 percent between five and nine, 12 percent between ten and fourteen, and 1.5 percent at age fifteen. The sources of data were agency file information, school teachers' reports, and interviews with the subjects every six months for two years after discharge.

Outcomes measured included scholastic achievement, health and recreation, criminal behavior, employment, family life, and migration to other communities. A couple of comparisons were made, first with a 1947 study of 1,349 Glasgow males who left school at age fourteen, and then with a study of 400 Glasgow females who left school at age fifteen in 1961.

Heston, Denney, and Pauly (1966). This retrospective study compares forty-seven adults who had been placed in foundling homes in Oregon with fifty adults who either were never in child care institutions or else had experienced less than three months of such care. The subjects were selected from the records of a previous study which had been designed to test the genetic contribution to schizophrenia by comparing children born to schizophrenic mothers with control children, where both groups had been reared apart from their biological mothers.

The subjects were divided into four groups: (A) twenty-five subjects born to schizophrenic mothers in Oregon state psychiatric hospitals and cared for in foundling homes pending adoption or other out-of-home placement; (B) twenty-two subjects born to parents with no known history of psychiatric disorder who were cared for in the same foundling homes; they were matched with subjects from group A for gender, type of disposition (adoption or foster home), and length of stay in the foundling home; (C) twenty-two subjects born to schizophrenic mothers in Oregon state psychiatric hospitals but not placed in foundling homes; most were reared in the homes of paternal

relatives; (D) twenty-eight subjects born to parents with no known psychiatric history and chosen to match group C, who had spent less than three months in foundling homes; most were reared by relatives. Participants in group A and B were known as the Institutional group, while those in C and D were named the Family group.

The subjects had been born between 1915 and 1945, and all apparently had been normal at birth. They had been separated permanently from their biological mothers after the first few postpartum days, were Caucasian, and eventually had been placed in homes where both parental figures were represented (except for a few who stayed in foundling homes for more than five years). The subjects were between the ages of 21 and 50 years when they were studied in 1964-65. The average age of the Institutional group was 34.1 years, and that of the Family group was 38 years. Thirty-five percent of the subjects were female and 65 percent male; the proportion was about the same for both groups.

The original sample of schizophrenic-mother subjects numbered seventy-four; sixteen of these were dropped from the study because of death, contact with their natural mother or her relatives, severe physical problems, or a lack of an appropriate control subject. Fifty-eight subjects not born to schizophrenic mothers were chosen to match those remaining from the original group; they were matched on the basis of gender, type of eventual placement (adoption, foster home, institution), and length of time in child care institutions. Of these 116 people, 14 had died in infancy or childhood and 5 could not be found. Attrition was not significantly different for the Institutional and Family groups.

All of those in the Institutional group had been admitted to foundling homes within the first few days of life. Fourteen subjects spent 3 to 12 months in the homes, thirteen stayed for 12 to 24 months, eight for 24 to 36 months, four for 36 to 48 months, one for 48 to 60 months, and seven remained more than 60 months. The average stay was 24.7 months. The authors state the these

figures underestimate the time spent in care, for ten people were known to have been readmitted to the same or other foundling homes, and several had lived in more than one foster home. Subjects in the Family group infrequently changed homes.

Follow-up data were collected via interviews with seventy-two subjects (thirty-three Institutionals and thirty-nine Families) and, for all participants, from records of hospitals, schools, police, the Veterans' Administration, and the armed forces. MMPI scores for seventy-eight subjects were derived from testing completed during interviews or from their records. Socioeconomic status was estimated at two points in time: the status of the first home in which the child was placed and the status at the time of follow-up. Each subject was also assigned a numerical score (range of 0-100) for the level of psychosocial disability; the scoring was based upon the Menninger Mental Health Sickness Rating Scale (MHSRS). A psychiatric diagnosis was made if indicated; the diagnoses used were schizophrenia, sociopathy, mental deficiency, or "neurotic personality disorder" (having a score on the MHSRS of less than 75 and a diagnosis other than the first three categories).

A companion study by Heston (1966) utilized the same data to differentiate outcomes for subjects born of schizophrenic mothers from those of subjects born to women without that diagnosis. This analysis found significantly more indications of psychosocial disability among the former group.

Robins (1966). Robins compared the adult status of 524 former child guidance clinic patients with that of 100 nonpatient subjects. The purpose of this longitudinal investigation was to describe the "natural history" of the sociopathic personality (p. 1).

The experimental group was chosen from among patients seen at the St. Louis Municipal Psychiatric Clinic between January 1, 1924, and December 30, 1929. They all had been under eighteen years of age at referral, had IQs of at least 80, and had histories of emotional or behavioral problems; omitted were patients with no social histories in their files and blacks (owing to their small number).

This selection process yielded a group of 524 former patients about 20 percent of all of the cases seen at the clinic during that time. Sixteen percent of them had lived in foster homes and 16 percent in orphanages for six months or more prior to their referral to the clinic; 9 percent had been placed in public correctional or private semi-correctional institutions, 1 percent in hospitals, and 1 percent in mental hospitals. Twenty-eight percent of the males and 47 percent of the females had lived in an institution or foster home by the time they were referred. Their median age at the time of referral was thirteen years, with a range of eighteen months to seventeen years of age. At the time of referral, 51 percent were at least one year behind in school performance.

The one hundred control subjects were selected from public elementary school records and were matched with the experimental group for race, gender, age, and neighborhood in which they lived during the 1920s. They were white, had IQs of at least 80, had attended St. Louis elementary schools for at least two years, had no record of expulsion from school or transfer to correctional institutions, and could not have repeated as much as a full year of elementary school. Former students meeting these criteria were chosen randomly from microfilm reels of school records until the selection quotas were filled.

The experimental group was 27 percent female, compared with 30 percent of the control group. The article did not provide information regarding the ages of the subjects at the time of the study. However, calculations using the ages at referral and the number of years between referral and follow-up suggest that the potential age range is from twenty-seven to fifty-three years of age, with a mean of about forty-four years. The controls had grown up in families with higher financial status than the others; their IQs appeared to be higher, but this may be a result of the use of different tests for the two groups. Two percent of the controls and 50 percent of the patients had appeared in juvenile court; an additional 10 percent of the former and 15 percent of the latter had police records as children.

An attempt was made to interview every surviving subject and at least one close relative of any subject who had died at the age of twenty-five or later. Four percent of the patients and 1 percent of the controls had died before the age of twenty-five; these twenty-three subjects were eliminated from the study, leaving a total target group numbering 601. Nine percent of the patients and 8 percent of the controls were known to have died after the age of twenty-five. Ninety percent of the total subjects--88 percent of the patients and 98 percent of the controls--were either located or else known to have died. Interviews were completed between 1955 and 1960 for 491 participants: 80 percent of the former patients and 90 percent of the controls. Four hundred sixteen (85 percent) of the interviews were with subjects themselves, and seventy-five were with relatives; forty-nine of the latter were with relatives of deceased subjects, and the rest, with relatives of living subjects.

One hundred ten of the target subjects were not interviewed: six were in mental hospitals and considered un-interviewable; fifty-two were not located; four were dead and no relative was available for the interview; five were located but not approached because they lived far away or were found too late for inclusion; and forty-three refused to participate. Initially, even more subjects had refused to be interviewed; 27 percent of these later agreed to be studied. Those subjects who initially had refused to participate differed from those who cooperated in several ways: they had completed fewer years of schooling, were less often engaged in professional occupations, were less likely to have American-born parents, and were more often St. Louis residents.

The interviews were based upon a structured set of questions. Areas that were covered included an evaluation of the childhood home, school problems and achievement, marital history, adult relationships with family members, other social relationships, military service, job history, history of arrests and imprisonments, financial dependency, geographical moves, history of deviant behavior, physical and psychiatric diseases, and alcohol and drug use. Interviewers evaluated the subjects on their intellectual level, cooperativeness, willingness to talk, frankness, and mood.

In addition to the interviews, information was collected from other sources. The records of a variety of organizations were reviewed: schools, courts and law enforcement agencies, probation and parole offices, reformatories and penitentiaries, the Social Service Exchange, credit rating bureaus, medical and psychiatric hospitals, the Armed Forces Record Center, the Social Security Administration, local welfare agencies, and coroners' offices.

Maas (1969). "Children in Long Term Foster Care" reports the results of a follow-up of Maas and Engler's 1959 study Children in Need of Parents. The original 551 respondents were a random sample of children in foster care in nine counties around the nation. They had been placed in either foster family care or institutions as of April 1, 1957, and had been in care for at least three months. The authors predicted that over half of the children would remain in care "for ten or so years," based upon the frequency of parental visits and the parents' plans regarding their children.

The 1969 article describes the findings of a follow-up investigation conducted in 1967, which tested the accuracy of the prediction of the original study ten years later. Agencies in eight of the nine initial counties agreed to participate in the follow-up by completing questionnaires pertaining to the dispositions of the former foster children. These agencies had cared for 480 of the original sample, and usable returns were received for 422 of them. Of these, 35 were still in care in 1967, and the disposition of 6 others was not known.

An additional investigation of twenty-five of "the most extreme cases of long-term care" was conducted; these subjects had been placed in care within the first two years of life and had remained in care until late adolescence.

Data were collected regarding (1) a variety of placement variables, such as length of time in care and parental visits and plans; (2) certain child and family variables, such as the nature of the family relationships and the child's physical and intellectual development; (3) agency factors, such as the level of treatment received and workers' relationships with family members; and (4) the nature of

the disposition of the case. The information was used to determine whether specific factors might predict length of time in care.

Frommer and O'Shea (1973a, 1973b). These authors participated in a project that attempted to identify at antenatal clinics in London, England, mothers who might be vulnerable for having problems with their children in the future. One of the variables which they studied was whether or not the mother had been separated from her own parent(s) when she was a child. The study included both retrospective and prospective methodologies.

All subjects were married, British-born, primigravidae women who were attending any one of three antenatal clinics of St. Thomas' Hospital's Department of Obstetrics during April-June 1969. Their expected delivery dates were between May and December of that year. The women were divided into two groups based upon whether they reported on an initial questionnaire that they had been separated from one or both parents before the age of eleven. "Separation" was operationalized as having had at least one parent die or having experienced an event which necessitated that the child or one or both of her parents sleep away from home. The data analysis did not separate out those women who had been "in care."

All separated subjects who agreed to participate were accepted into the study. Controls were chosen from those reporting no separations and were matched with the separated subjects by age, social class, and expected date of delivery. For the inquiry reported in the 1973b article, the women were further subdivided into those who had had more than one minor management problem with the infant during the first year of the child's life and/or had had marital problems, and those with no marital problems and at worst one minor infant-management problem.

A questionnaire to seek agreement to participate and to identify those women who had experienced separation from their parents was presented to all women who met the criteria (N=220). Nineteen women (9 percent) refused to participate in the project. Of the remaining 201 potential

subjects, 59 had been separated and 142 had not. Fifty-eight pairs of women were matched initially; 10 controls either moved or miscarried soon after matching, and most were replaced. Before the part of the study reported in the 1973a article was completed, 13 separated subjects and 14 additional controls dropped out, leaving 45 separated women and 44 nonseparated women in the project. Between the initial matching and the completion of the first phase of the study, a total of 20 controls and 13 separated women left the project; 15 of the former and 7 of the latter were considered refusers, leaving an overall refusal rate of 19 percent. (The presentation in the report of the numbers of subjects at various stages of the process was somewhat confusing; the information above is as accurate as is possible under the circumstances.)

The 1973b article presented a further follow-up of the 89 participants described above. However, only 79 of these women could be visited at that time: 40 of the original separated group and 39 of the controls. By this time in the project, it had been discovered that 23 of the control subjects actually had experienced a childhood separation and that the separations of 2 of the separated women had occurred after the age of eleven. Eight subgroups resulted from the divisions of the subjects in this second analysis. Among the 40 women originally in the separated group, there were separated women with problems (number not reported), separated women without problems (number not reported), nonseparated women with problems ($N=0$), and nonseparated women (i.e., separated after age eleven) without problems ($N=2$). Among the 39 women in the control group, there were nonseparated women with problems ($N=5$), nonseparated women without problems ($N=11$), separated women who originally had denied a separation experience with problems ($N=18$), and separated women without problems ($N=5$).

The first article presents the findings generated from a one-year (post-birth) follow-up. The women were interviewed antenatally when possible, and then when the infant was 2 to 3 months old,

6 to 7 months old, 9 to 10 months old, and 12 to 13 months old. The final analysis of the data included only those subjects seen for three or more postnatal interviews.

Women who were interviewed before their child's birth completed a questionnaire pertaining to their attitudes toward pregnancy, plans for the baby, their own health, and the expected financial impact of having a baby. The postnatal interviews included questions about the woman's feelings toward her child and husband, her state of subjective physical and mental health, housing, and behavior of the infant (sleeping, crying, feeding, temperament, and achievement of developmental milestones). In addition, the interviewer observed the mother's manner of coping with her baby.

The follow-up reported in the second article (1973b) involved an additional interview with seventy-nine of the subjects; the postnatal timing of this phase of the project was not reported. The participants were asked about problems they had had with their marriages or with their babies, the atmosphere in which they grew up, how their parents related to each other and to them, and the nature of their relationships with their fathers or father-substitutes.

Palmer (1976). Palmer examined the progress of children in long-term care, looking for associations between the progress they made and their experiences before and during care. The subjects (N=200) had been recipients of long-term care in one of three Children's Aid Society agencies, two located in Toronto, Canada, and one in London, England. The criteria for acceptance into the study were that the subject was age three or older at the time of placement; spent a minimum of five years (not necessarily continuously) in care, ending when the child reached majority; did not have physical or mental conditions so extreme as to prevent leading a normal life; and was not from a distinct cultural background (North American Indian, black, first-generation European).

All of those who met the criteria in London were included as subjects (N=70), as were 130 of the possible 300 Toronto children whose case files were not out of their offices being microfilmed. The author states that about 10 percent of London and 5 percent of Toronto cases lacked enough

information regarding the natural family to be accepted, but it is not clear whether these cases are part of the group of 200 subjects or of the original 370 cases.

The children's case files were examined to retrieve data regarding progress while in care, with "progress" being divided into two categories: behavioral, emotional, or task performance problems; and academic progress. Associations were sought between these areas and placement and background variables such as age at separation from parents, intelligence, gender, number of placements, experiences with the natural family, preparation for placement, parental contacts, placement with siblings, identification with natural or foster families, training of the worker, and socioeconomic level of the foster parents.

Wolkind (1977a; 1977b). Wolkind selected and studied a group of women whose background and social circumstances might predict "an increased risk of difficulties arising in their future maternal role" (p. 179). One of the background factors that he identified was the experience of having been in care as a child. The sample included all women over the age of sixteen, born in Britain, with a permanent address in an inner-London borough, who were expecting their first baby, and who were attending the obstetric clinic of a hospital in the borough during a one-year period.

Interviews were completed with 534 women; an additional 4 women refused to participate, and the author estimated that about 20 pregnant women in the borough were missed because they received prenatal care elsewhere. About 95 percent of the women who met the selection criteria were interviewed.

The interviews included questions regarding the women's childhoods, history of housing or social problems, their and their husbands' psychiatric and chronic physical disorders, their attitudes toward their health in pregnancy, and the circumstances surrounding any admissions to local-authority care that occurred before the age of sixteen and that lasted one month or more. Psychiatric disorders were identified based upon evidence of treatment from general practitioners or psychiatrists for any

form of psychiatric disturbance in the two years prior to the interview. The women also completed the "Malaise Inventory," a brief self-rating questionnaire from the Cornell Medical Index, in which they described their usual state of health prior to their pregnancies.

Thirty-six of the subjects (6.7 percent) described at least one episode of having been in the care of the local authority for at least one month. Thirteen of these had entered care before the age of five years; twenty-three had been in care for at least one year. The reasons reported for admission into care were family breakup, 33 percent; parental illness, 17 percent; "child" factors, 14 percent; parental death, 11 percent; homelessness, 3 percent; and unknown, 22 percent. The dispositions of placements were not described.

Fanshel and Shinn (1978). Children in Foster Care: A Longitudinal Investigation was a ground-breaking study of 624 children who entered New York City's foster care system during 1966 and who were in care at least ninety days. The full-time substitute living arrangements used by the subjects included family foster care homes, institutions for dependent or neglected children, group homes, and residential treatment centers for emotionally disturbed children. The subjects had never been in placement before, nor had they had a sibling in placement; they were no more than twelve years of age at the time of admission into care. In the study, 467 family groups were represented; 157 families had two children represented.

Quotas for age and gender were established, and subjects who met the criteria were accepted in order of appearance until the quotas were filled. The study included 75 infants (birth to six months), 100 toddlers (six months to two years), 175 preschoolers (two to six years), and 250 subjects in mid-childhood (six to twelve years). The percentage who were male was 50.6. Twenty-one percent were white Catholics or Protestants, 5 percent were Jewish, 31 percent were black Protestants, 11 percent were black Catholics, and 32 percent were Puerto Ricans or other

Hispanics. The subjects represented about one-fourth of the children admitted into care from January through August 1966.

The personal and social adjustment of the subjects, as well as the status changes they experienced, were studied over a five-year period, utilizing several forms of data collection: intelligence and projective testing, behavioral ratings and developmental profiles, teachers' assessments, parental reports, and the self-report of older children. Measurements were made at three points in time: within ninety days of entry, 2 1/2 years after entry, and 5 years after entry.

Fox and Arcuri (1980). In 1978, the Children's Aid Society of Pennsylvania (CAS) surveyed the school-aged foster children in its care, with a specific interest in the level of their cognitive and academic skills. The authors hypothesized that, due to the past experiences of the foster children, their functional levels would be below those of poverty-level children living with their own families. If this were not found to be the case, it might be evidence that "ameliorative influences" were operating in foster care settings.

Children under the care of CAS completed psychological testing at intake and at various intervals during their placement. The sample for this study consisted of all children seen for testing in 1978, a total of 163 children aged 4 years, 11 months, to 18 years, 1 month (mean of 9.6 years). There were 93 males and 70 females; 136 were black and 27 were white.

The children's placement ages ranged from newborn to 14.9 years, with an average age at placement of 4.3 years. On average, the participants had been in the care of CAS for 5.2 years; the time in care ranged from a few days to almost 16 years. Each subject had experienced between one and six placements, with the "usual history" involving two placements, one on an emergency basis and one long-term. Reasons for placement of the children included parental incompetence or unavailability, 69 percent; abuse or gross neglect, 27 percent; and the child's own behavior or medical problems, 6 percent; these percentages total 102, and the source of the error is not known.

Wechsler Intelligence Tests were given to all subjects; the authors acknowledged that these tests were biased in favor of white, middle-class children. Twenty-seven were administered the Preschool and Primary Scale, 133 took the Children-Revised version, and 3 were given the Adult scale. School achievement scores were obtained from the WRAT (Wide Range Achievement Test); 140 participants took the WRAT-Reading test (the skills of 23 were at the preprimary level), which measures word recognition, and 57 took the WRAT-Arithmetic test. Grade placement data were also collected.

Harari (1980). Harari conducted a study of former foster children in California who had not returned to their parents upon exiting from care, usually at the age of eighteen or upon becoming emancipated minors. The objectives of the project were to determine the perceptions of placement workers and teenagers/young adults of the importance of various offered, used, and needed foster care services; to conduct an assessment of the subjects' interpersonal affect and self-esteem; and to explore the extent to which the perceptions of foster care service providers can serve as predictors for post-foster care adjustment. There were three hypotheses: (1) that workers and teenagers/young adults will have different perceptions of services offered, used, and needed; (2) that these two groups will differ in their perception of the importance of various services; and (3) that certain perceptions may serve as significant predictors for post-foster care adjustment.

The subjects were thirty-four young people who had exited foster family care in a county in northern California as adolescents and did not return to their parents at that time. The initial sample included teenagers who had left foster family care, under the auspices of the welfare department, between 1974 and 1978; they had been in care for a minimum of 1 1/2 years and had never been diagnosed as mentally retarded. No control group of non-fostered adolescents was used.

About 259 adolescents who were eighteen by February 1978, had exited foster family care between January 1974 and June 1978; 85 fit the criteria described above and still lived in northern

California. These 85 potential subjects were sent letters requesting their participation; they were offered \$7.00 for an interview. Twenty-one letters were returned because the subjects had moved; 22 of the young people did not respond to the letter; 4 of them refused to participate; 38 agreed to participate. Of these 38, interviews were conducted with 34 subjects between July and November 1978; two potential subjects were found to be living in group care, one responded too late to be included, and one never confirmed an appointment time.

Of the respondents, 76.5 percent were women; 73.5 were white, 8.8 percent were black, 8.8 percent had Spanish surnames, 5.9 percent were Eurasian, and 2.9 percent were Asian. Their average age was 19.8 years, with a range of 17 to 23 years at the time of the interviews.

The participants had experienced an average of three placements each, the same number as the average for all California foster children. There was a range of one to eleven different foster placements. The average age of the children at entry into care was 10.3 years; 6 percent entered during the first year of life, 15 percent between the ages of 1 and 5, 18 percent between the ages of 5 and 10, 29 percent between 10 and 13, and 32 percent between 13 and 16.

The young people had been in care an average of 7.3 years; 8.8 percent were in care for 1 to 2 years; 26.5 percent for 2 to 4 years; 29.4 percent for 4 to 7 years; 14.7 percent for 7 to 11 years; 5.9 percent for 11 to 15 years; and 14.7 percent for 15 to 19 years. The reasons for leaving care were varied: 52.9 percent because they reached the age of eighteen or became emancipated minors, 17.6 percent because they married, 5.9 percent because they were placed with relatives, 2.9 percent because they quit school or vocational training, and 20.6 percent for other reasons (problems with foster parents, medical problems, assignment of a guardian, problems with a social worker, and joining the army).

The workers who were invited to participate in the study included all placement workers and their supervisors from the county being studied and workers who had moved to other positions or

departments but had been placement workers in 1974-78. Forty-seven placement workers and supervisors participated.

The interview schedule for subjects included both open and closed questions regarding perceptions of the foster care experience and current life circumstances. In addition, they completed three service list forms and two scales from the Jackson Personality Inventory (JPI). The service list asked how often each of ten foster care services was offered, used, or needed. The two JPI scales were Interpersonal Affect--the ability to be intimate and to show concern for others--and Self-Esteem--self-confidence in interpersonal situations. Each scale had twenty true-false questions.

Workers also completed three service list forms. They were asked how often the "typical child in foster family care" was offered, made use of, and needed each of ten foster care services.

Triseliotis (1980). The aim of "Growing Up in Foster Care and After" was to learn about the long-term foster care experience in Scotland as seen through the eyes of foster parents and former foster children. The current social and personal circumstances of former foster children were examined and related back to certain of their background characteristics and experiences. Outcomes that were studied included the nature of foster child-foster parent relationships, satisfaction with the fostering experience, educational achievement, employment history, family life, contact with the former foster family, living arrangements, coping ability, sense of well-being, criminal behavior, and perceptions of social workers.

Forty subjects out of a potential sample of fifty-nine participated in this project; all had been born in 1956 or 1957 and had spent seven to fifteen years each in a single foster home before the age of sixteen. They and their former foster parents were interviewed during 1976-77. They were twenty to twenty-one years of age at the time of the interviews and had spent an average of twelve years in a single foster home; many also had had other shorter placements.

Kraus (1981). Kraus's work is part of a broad ongoing investigation into the long-term effects of foster care in Australia. Long-term effects were defined as "those effects of fostering that manifest themselves in the personal and social functioning of former foster children as adults" (p. 100). This particular inquiry explored the relationship between adult criminal activity and two placement variables: length of time in care and number of different foster placements.

The sample consisted of all former wards of the state in New South Wales, Australia, who were born in 1951-52 and discharged from supervision upon reaching their eighteenth birthday into situations other than the care of their family or relatives. Because of the selection criteria, the author considered the sample to present a "higher social risk" than the population of ex-wards generally. Kraus deliberately "maximized the functional significance of foster care, because in this sample such care was not a transient episode but a transitional phase from dependence on natural family to social independence" (p. 101).

There were 246 males and 245 females in the sample; this group constituted 49.8 percent of all state wards whose supervision was terminated during 1969-70. They were twenty-seven to twenty-eight years old at the time of the study. Their time in care ranged from two months to just under 18 years; the mean was 9.3 years. For purposes of analysis, time in care was dichotomized between those who spent up to 8 years, 11 months in placement, and those placed for 9 years or more.

The subjects had between one and nine different placements each. Of those who had been in foster homes, 56 percent of the males and 54 percent of the females had been in one or two different homes; 33 percent of the males and 36 percent of the females had been in three to five homes; and 11 percent of the males and 10 percent of the females had six to nine placements. Seventeen of the wards had never been placed in a foster family home, and seven had an unknown history of placements.

Records of the former Child Welfare Department of New South Wales were used to obtain the birth cohort and relevant information regarding the length of state wardship under a "care and protection court order" and the number of foster placements during that period. "Foster placement" was defined as foster family care only, excluding group homes. Criminal records of the subjects from their eighteen birthday until December 15, 1979, were traced through the New South Wales Police, which had records for all of Australia and recorded all convictions except those for traffic and driving offenses.

The author noted a particular limitation of the analysis. There is a strong correlation between the variables of length of time in care, age of entering into care, and, to a limited extent, the reason for commitment into care. This confounding restricts the interpretation of findings of the study. Another limitation is imposed by the dichotomizing of data, which results in the loss of some data.

Zimmerman (1982). The purpose of Foster Care in Retrospect was to determine the current circumstances of young adults who had lived in foster homes in New Orleans, Louisiana, under the auspices of the Orleans Parish Department of Public Welfare, for all or part of their childhood. In addition, this descriptive, exploratory study sought feedback regarding the nature and quality of the foster care experience and the identification of factors in the total childhood experience that appeared to be related to the subjects' current functioning.

The initial sample was defined as those young adults currently eighteen to twenty-eight years of age who had been in foster care under the auspices of the above-named department for at least four months during their childhood; this produced a sample of 319 cases, which was reduced by choosing only one child from each family, rotating the birth order of the child chosen. Additional selection criteria were then added: the subjects had to have been in a foster home for at least one year, could not have been placed for adoption, and could not have been placed in a distant state that made the young person difficult to locate. This further reduced the potential sample to 170 subjects, 65 percent

of whom (N=109) were located. Forty-eight of these did not participate in the research: 20 refused; 7 were institutionalized or handicapped in some way; 8 were living out of state on their own; 2 had died; and 11 did not participate for other reasons.

Of the final sample of 61 subjects who were interviewed, 53 percent were male and 47 percent were female; 51 percent were 24 to 29 when interviewed, and 49 percent were nineteen to twenty-three years old; 66 percent were black and 34 percent were white. The average age at their first foster care placement was three to four years, with 63 percent entering under the age of six. Fifty-six percent of the subjects left care when they were fifteen to twenty-one years old; 26 percent, between the ages of three and eight; and 18 percent, between nine and fourteen.

Outcomes studied included the subjects' family life, living arrangements, educational achievement, employment/income, social supports, health, leisure time, criminal behavior, satisfaction with life, and voting behavior.

Festinger (1983). The goals of No One Ever Asked Us were twofold: to provide a detailed picture of certain aspects of the lives of a group of young adults who had been discharged from foster care upon or after reaching the age of majority, and to obtain their views on the foster care experience and what might be done to improve such care. Potential subjects were people who had been discharged from foster care in the New York City metropolitan area in 1975, who had been in care continuously for at least the preceding five years, and who were eighteen to twenty-one years old at the time of discharge.

Out of a potential sample of over 600, 277 people participated in the study; 186 were interviewed in person, 55 were interviewed by telephone, and 36 completed questionnaires. The data were collected between May 1979 and April 1980. Forty-two percent of the respondents were female and 58 percent were male; 52 percent were black, 28 percent were white, 19 percent were Hispanic, and 1 percent were Oriental. Thirty-five percent of the subjects were Protestant, 33 percent were

Catholic, 6 percent were Jewish, 10 percent were affiliated with a variety of other religious orientations, and 15 percent claimed no religious affiliation.

A wide variety of outcomes were examined, among them the respondents' sense of well-being, contact with kin and former foster families, personal problems, social and family support systems, educational achievement, financial status, employment history, condition of health, drug and alcohol usage, history of criminal behavior, use of formal help-providers, and perceptions of the foster care experience. Where possible, comparisons were made on these outcome variables with responses from people of the same age group who participated in three general population surveys.

Frost and Jurich (1983). This unpublished retrospective study was conducted in part to investigate the functioning of past residents of The Villages in Topeka, Kansas, in order to assess the impact of the care received in these group homes and to evaluate the effectiveness of this program. The Villages provide long-term residential surrogate family care for abused and neglected children between the ages of six and eighteen.

The potential subjects all had lived in group foster care at The Villages for at least six months and had graduated by October 1, 1982. Out of a population of 176 Village graduates, 96 persons participated in the research: 57 males and 39 females (the potential sample included 89 males and 87 females). Three past residents had died and six refused to be interviewed; the remaining graduates had not yet been reached when the report was written.

Twenty-six percent of the sample were between the ages of six and eleven when they entered The Villages; 34 percent were twelve to fourteen years old, and 40 percent were fifteen or older. Seventeen percent had had no prior placements, 32 percent had had one, 36 percent had had two or three, and 15 percent had had four or more. The following lengths of stay were found: 6 to 12 months, 20 percent; 13 to 24 months, 25 percent; 25 to 36 months, 22 percent; and over 37 months, 33 percent. Over half (53 percent) of the subjects had left care at the age of seventeen or eighteen;

27 percent were fifteen to sixteen years old at departure, 14 percent were twelve to fourteen years old, and 6 percent were six to eleven years of age. The reasons for leaving The Villages were varied: 41 percent graduated successfully from the program; 19 percent returned to their own homes; 16 percent were runaways; 15 percent were moved to a more structured environment; 8 percent entered foster care; and 1 percent was adopted.

Participants completed either a personal or telephone interview or a written questionnaire during 1982-83. In addition, information was collected from their files, from current and former Villages houseparents, and from the office support staff.

An interview rating scale was used to measure each subject's functioning level; the scale originally consisted of seven points (ranging from -3 to +3) but was later collapsed to create a three-point scale. The rating was based upon personal characteristics of the subjects, such as educational achievement, employment history and financial stability, relationship formation, criminal behavior, contact with welfare offices, and types of hobbies or other activities. The participants' scores on this scale were compared with certain placement variables, such as length of time in care and age at which they entered the system. The young people also were asked about their satisfaction with the care received.

This study included no control or comparison group. Tables which described the relationships between variables in terms of frequencies and percentages were included in the report, but significance levels had not been calculated; thus, the conclusions drawn were rather impressionistic. However, the report is preliminary, and further analysis of this and additional data is being conducted; this should result in a more revealing--statistically speaking--publication of findings in the near future.

Jones and Moses (1984). West Virginia's Former Foster Children explored the adjustment into the community and adult functioning of 328 former foster children. All of these young adults

had received foster care in West Virginia for at least one year after October 1, 1977, and all had been discharged prior to January 1, 1984, and were at least nineteen years old as of that date.

Out of a total of 629 possible participants, 328 were involved in the research; 89 percent of these had personal interviews, 7 percent were interviewed by telephone, and 4 percent completed questionnaires. They were between the ages of seventeen and twenty-eight, with a mean age of twenty years. Forty-eight percent were female and 52 percent were male; 92 percent were white and 8 percent were black. The questions to which they responded addressed approximately the same issues as were covered in the Festinger study (see above).

Rest and Watson (1984). "Growing Up in Foster Care" describes a small sample of adults who grew up in long-term foster care under the supervision of the Chicago Child Care Society. The Society serves an inner-city population and incorporates into its program supportive counseling services for its foster children. Potential subjects had entered the care of the Society at the age of six or younger, had reached adulthood within the agency's program, and were discharged as independently functioning adults between 1966 and 1981. Seventy people met these criteria, and thirteen of them were nonrandomly selected to participate in the study.

The participants were nineteen to thirty-one years of age; the median age was twenty-five. They had been out of care for an average of five years; the range was one month to twelve years. There were nine males and four females, eight blacks and five whites. There was no control group for this sample, described by the researchers as "small, accidental, and reflect[ing] the experience of only one agency" (p. 96).

All of the participants completed a two to three hour interview in 1981. Three areas were explored: their current functioning, the significance of the foster care experience in childhood and its influence on their present lives, and their judgments and conclusions about their experiences. Specific

outcome variables included educational and employment histories, nature of their family life, contact with kin, and self-concept.

Triseliotis and Russell (1984). The authors of Hard to Place initiated their research in order "to establish whether aspects of behavior, handicaps or difficulties are transmitted from one generation to the next in situations where children are separated from their families of origin at an early stage" (p. 15). They also were interested in more general long-term effects of discontinuities of care, early institutionalization, and placement moves on children who experienced different forms of substitute care. This study contrasted the experiences of a group of hard-to-place adoptees with a group of children placed in residential institutions.

The potential sample was drawn from past clients of social work departments and a large voluntary placement agency in Scotland. Selection criteria included having very disadvantaged backgrounds; if an adoptee, having been placed in the adoption home between the ages of two and ten; if formerly in a residential institution, having been placed in one or more residential establishments when under the age of ten and staying there at least until the age of sixteen; and if possible, being in one's twenties at the time of the interview. Ninety-one adoptees were in the original sample and forty-four of them were interviewed; they had spent an average of eleven years and eight months with their adoptive families before the age of seventeen. Forty out of the original sixty-eight potential institutional care subjects were interviewed, and they had lived for an average of eleven years in one or more institutions. Sixty-four percent of the adoptees and 38 percent of those who had been in institutions were male. The mean ages at the time of the interviews were 24 years for adoptees and 22.8 years for those who had lived in institutions.

Aside from interviews, most of which were conducted in 1978-80, data were collected from agency records; this was especially helpful for comparing the subjects' circumstances with those of their birth families. The authors compare their findings whenever possible with data regarding

former foster children in Scotland that were collected in 1979-80 by one of the authors (Triseliotis, 1980; see above). Outcome variables are similar to those of other studies: employment, living arrangements, mental health problems, education, financial status, health status, quality of relationships, family life, housing, criminal behavior, alcohol abuse, coping abilities, and satisfaction with life.

Dumaret (1985). The offspring of twenty-eight French mothers from a disadvantaged social background who had abandoned their children with "a view to adoption" were the subjects of this investigation. It analyzes the influence of different familial and social environments on IQ, school performance, and deviant behavior in school.

The major question of the study was "What are the medium- and long-term effects of the type of placement on the siblings or half-siblings adopted or remaining in their lower-class families or raised in institutions or foster families?" (p. 554). The major hypotheses were (1) early placement in adoptive families exerts positive effects on cognitive and social development and on school achievement; children who experience markedly different environments will have different IQs, school success, and behavior; and (2) children who live in stable families perform better than those in unstable families, even in a disadvantaged social background.

The participants included all of the offspring of twenty-eight mothers, each of whom had at least one child in both of the following groups: (1) abandoned at birth and adopted into environments of high socio-professional status, managerial and professional classes ("A" subjects described below); and (2) raised in their natural families of low socio-professional status, skilled or semi-skilled workers ("B" subjects below) or placed in foster families or reared in institutions ("C" subjects below).

The selection criteria resulted in three groups of subjects: A: children who were adopted and raised in a privileged social environment; B: children who remained with their natural families in a

disadvantaged social environment; and C: those who were removed from their original environment after a family breakup and raised under the care of the child welfare authorities.

The children in group A (N=35) had been born between 1962 and 1969; they had been abandoned before the age of one month (average age of eight days) and placed for adoption before the age of 7 months (average of 4.4 months) with parents of high socio-professional status. They were selected from lists of children registered for adoption by state social welfare agencies. Twenty-two of them were females and thirteen were males; six of them had North African fathers. Three sets of twins and thirty adoptive families are represented in this group.

The forty-eight children in group B were born between 1949 and 1970; twenty-eight of them were females. Nineteen of them were illegitimate at birth. Seven females and fourteen males were in group C; they had been born between 1953 and 1968. Thirteen of them were in care, one was in temporary care, five were wards of the state, one was under welfare protection, and one had been abandoned. Four of them had North African fathers.

All of the descendents of the twenty-eight women were found. Data were collected pertaining to each of these children between the years of approximately 1975-80 (the exact dates were not reported); neither the subjects nor their mothers knew that they were being studied. The types of data included the Collective Scale of Intellectual Level (ECNI)--Verbal, Performance, and Full IQs; the WISC--verbal, performance, and full IQs; the short version of the WISC; Rutter's behavior "B" scale for teachers; a teachers' questionnaire designed for this study which explored children's school adjustment and behavior; a review of school records; and information regarding the job status of the older subjects.

School-aged subjects were tested in their classrooms. Each A subject and a corresponding biological subject who was nearest to the A child in age were tested. The entire classes of these subjects took the ECNI. A and B subjects were given the full-scale WISC; two others per subject

from the subjects' classrooms, matched for social environment (socioeconomic status), were given a short form of the WISC. The teachers of the subjects and of the controls completed the behavior "B" scale and the study's questionnaire. The school testing was done over a period of three years; school records were explored through the 1977-78 school year. Additional follow-up for some of the B and C subjects was done over an additional two years in order to collect job history information.

Overall, IQ scores were obtained for 94 percent of the A's, 55 percent of the B's, and 95 percent of the C's. An index of scholastic success or failure was calculated for each A, B, and C subject from information derived from the school records. The teachers' "B" scale was completed for all but five of the school-aged children. The teacher's questionnaire was completed for all A and B subjects born after 1960; it included ratings of the degree to which each subject was gifted and of the level of their adjustment to school.

Runyan and Gould (1985). The authors of this article were interested in exploring the "iatrogenic" damage (damage resulting from the treatment received) done to child victims of maltreatment who were placed in foster care. Juvenile delinquency was used as the potential marker for this damage. A matched historical cohort design was utilized; the authors compared the rate of subsequent juvenile delinquency between children currently in foster care because they had been maltreated and maltreated children who were left in their own homes.

The potential subjects were maltreated children in six central North Carolina counties. "Maltreatment" was defined as the presence of a confirmed report of neglect or abuse by a parent or guardian in the cumulative social service record. The "treatment" cohort was defined as all children presently in unrelated family foster care who had been in care for at least three consecutive years. It included adolescents who had been in family homes for at least three years but who, at the time of the data collection, were hospitalized, incarcerated, or in group homes. Excluded were children whose social service or school records indicated that they either were severely mentally retarded or else had

IQ scores under 50 on either the Stanford-Binet or the Wechsler Intelligence Scale of Children-Revised (WISC-R). In the six counties, 114 foster children met the study criteria.

A comparison cohort was formed by systematically searching the records of the county departments of social services for maltreated children who most closely resembled the treatment subjects in terms of the date of report, age, the year in which they were confirmed as maltreated, the perpetrator of their maltreatment, and services provided in the home. Those who moved from the county or who later were placed in foster care were excluded from the group. The comparison cohort contained 106 youth; 69 of them matched a foster child by age at report, year of report, gender, and race; 19 matched by all of these factors except gender and/or race; 19 were selected by allowing the year of report to vary while matching for the child's current age; 8 foster children could not be matched owing to the inadequacy of the social service records. Because an earlier North Carolina study found that the type or severity of maltreatment bore little relation to the decision to place the child in care, no attempt was made to match the children by these maltreatment characteristics.

Data were collected by abstracting the cumulative files maintained by social service agencies, juvenile courts, and schools. The types of information collected included type of maltreatment(s) and the age of child at occurrence; type of social services provided by the county agencies; type, duration, and number of foster home placements; race, education, occupation, and marital status of the natural parent(s); observations of behavior by social service agency employees; nature, date, and outcome of all juvenile court hearings; and evidence of severe mental retardation.

Estimates of risk for delinquency were calculated for both of the groups by using an incidence-density measure: the risk of delinquency per year at risk after the child's eleventh birthday. This ratio was used to measure the relative risk of juvenile delinquency among children in foster care compared with their peers in home care.

At the time of the study, the average age of the foster care subjects was 14.09 years; that of the home care group was 14.07 years. Sixty-six percent of the foster group and 55 percent of the home care group were black; the rest of the subjects were white. Females comprised 48 percent of the fostered youth and 54 percent of those staying at home. There was a significant difference between the two groups in the percentage of youth who had experienced physical abuse: 9 percent of the foster care cohort and 22 percent of the home care cohort (Student's t-test, $p < .05$). They also differed in the percentage that had a history of prior maltreatment: 25 percent of those fostered and 9 percent of those not removed from their homes (Student's t-test, $p < .05$).

Participants who were in foster care had been placed in an average of 2.6 foster homes (median of 2); on average, 8.6 years had passed since the initial report of maltreatment. Thirty-two percent of the subjects had had only one placement, while 20 percent had had four or more; two had been in nine foster homes and one had been in eleven. The mean duration of the first home placement was 3.6 years.

Records of 77 of the 106 home care participants were complete enough to yield accurate information regarding the services they received in the home. The average number of visits in the first two months was 5.3, and the mean number of visits by six months was 8.25. Home services were provided for an average of twenty-two months ($N=60$).

Quinton, Rutter, and Liddle (1986). This prospective follow-up study explored the questions of whether there is a continuity between adverse experiences in childhood and poor parenting behavior in adult life. Related questions included how to interpret such a connection if it exists, how to explain the adequate functioning of some people who had disadvantaged backgrounds, and whether there are modifiable or reversible effects of adverse childhood experiences.

The methodology of this project combined retrospective and prospective research strategies to explore intergenerational links. On the retrospective side, admission into care was treated as the

dependent variable; the question asked was how often the parenting problems shown by these adults were associated with their experiences of adverse parenting themselves when they were children. A prospective approach was needed, in which admission into care was treated as an independent variable, to determine the likelihood that the experience of poor parenting in childhood would lead to parenting difficulties in the same individual when she was an adult.

The authors studied two groups of British women who had first been studied in the mid-1960s when they were children (Rutter, 1967). The first group comprised ninety-four girls who, in 1964, had been residents in one of two Children's Homes run as group cottages are run; they had been admitted because of a breakdown in parenting. Data from past studies with this sample were available to the current researchers; they included information regarding the girls' behavior at school and about the regimens of the cottages. The current sample was restricted to subjects who had been identified as "white" and who were twenty-one to twenty-seven years of age on January 1, 1978. Of the original ninety-four "ex-care" females, five had died by the time of follow-up. Eighty-one of the remaining eighty-nine subjects (91 percent) were interviewed, including one living in Germany and three living in Australia.

The comparison group consisted of young women who had also served as controls in a 1981 study by Quinton and Rutter. They had originally been selected because they were in the same school classes as children of mentally ill parents; according to the authors, this selection process did not seem to introduce relevant distortions or biases. These young women were the same age as the ex-care subjects, never had been admitted into care, were living with their families in the same general area in inner London, and had had their school behavior assessed at approximately the same age as the other cohort by means of the same questionnaire. They were followed to the ages of twenty-one to twenty-seven years in the same way as the ex-care subjects. Of the original fifty-one controls, forty-one (80 percent) were interviewed; five refused to participate, and five could not be located.

Data were collected through interviews with subjects and their spouses, using a nonschedule standardized approach. Topics covered included recall of childhood experiences, family, peer, and work experiences in later life, current circumstance and functioning and adjustment, parenting skills (assessed via responses in dealing with issues of control, peer relations, and distress), and the amount and nature of parental involvement in play. Summary ratings were assigned on the overall style of parenting, effectiveness and consistency of control, parental sensitivity to the child's needs, and the amounts of expressed warmth toward and criticism of the child. In addition, direct home observations were made of interactions between the mothers and their 2 to 3 1/2-year-old children.

The parenting index chosen for this study was the admission of a child into the care of a local authority because the parent was no longer able to cope with the task of child rearing. This index was selected because it met the following criteria: (1) it reflected severe and persistent parenting difficulties; (2) the difficulties it reflected were reasonably common in the general population; (3) the difficulties it reflected were known to increase substantially the risk that children will develop disorders of psychosocial development; and (4) the index was capable of being employed on an epidemiological basis both to identify families currently experiencing parenting difficulties and to identify individuals who have experienced similar problems as children.

Barth (1990). Targeted youth in the San Francisco Bay Area and Sacramento included those who were at least sixteen years of age at the time of emancipation. Youth who had been placed primarily in juvenile justice or mental health care or who were not emancipated as dependents were excluded.

The sample for this study, which contains fifty-five young adults, is described by the author as "very accidental in composition" (p. 423). The study employed multiple strategies, including posting flyers in public agencies, payment for interviews, and contacting foster parents, group care

providers, social workers, personal contacts, to identify eighty-five names of former foster youth who had left care between one and ten years ago. Almost 25 percent could not be reached.

The average age of the contacted youth was 21 years. The mean ages at entry into and exit from foster care were 12 and 17.6 years respectively. The majority were white (72 percent), with 13 percent black and 9 percent Latino. The typical youth in the study had been out of foster care for three years.

Data collection involved interviews, typically in the subjects' homes (24 percent were by telephone), lasting one to three hours. The interview schedule was designed to describe the experiences of former foster children across several life domains including employment experiences, continued contact with former foster parents and birth relatives, educational preparation, life-skills preparation received during foster care, health and health care use, substance use, criminal activity, and housing and income. Questions also ascertained their satisfaction with foster care and suggestions for foster care youth and social workers regarding preparation for independent living.

Fanshel, Finch, and Grundy (1990). Foster Children in a Life Course Perspective is a study of the experiences of 585 former foster children who had been placed for part of their time in care with the Casey Family Program. All persons who had been in the care of Casey homes--some as early as 1966--and discharged by December 31, 1984, were included in the projects. The homes were located in five different states: Washington, Idaho, Montana, California, and Oregon. A content analysis of case records was completed for all 585 subjects, studying the following areas: living arrangements since birth; factors leading to placement; and the adjustment of children at entry, during the placement, and at discharge.

The study included a subset of 106 subjects who were interviewed regarding their personal and social functioning. They all lived in one of two communities in Washington--Seattle or

Yakima--and had been out of the care of the Casey Family Program for an average of seven years.

Forty-five of the people interviewed (42 percent) were women and 61 were men.

The authors described the average child placed with the Casey Family Program as being older than the typical foster child and unlikely to be adopted or reunified with the birth family. Most have been permanently separated from their mothers and fathers for a variety of reasons. Many have experienced many different placements before their admission to Casey, and have several placements after Casey, as well. As a result, these children are considered at high risk of having developed dysfunctional psychological coping strategies.

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