ATTRIBUTION STYLES AND THE RELATIONSHIP

TO BURNOUT IN FOSTER PARENTS

By

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CHAPTER I

INTRODUCTION

Background of the Problem

All would agree that if a child is in danger, one must step in and attempt to protect this child. Children can be placed in dangerous situations due to neglect, abuse, severe financial hardships, or current life circumstances for the caretaker(s), to name a few. Foster care placement is one option designed to promote the safety of children; however, it is an undertaking that is not fully understood by all. Philip Zimbardo (prologue Maslach, 1982) exemplified the challenges and rewards of helping others, which may include foster care when he wrote:

People helping people. People unable to make it on their own. People wanting to help others cope, to survive, to adapt, to adjust, to make it. It is a reaching out and a making contact. It is the human connection. It brings a sense of fulfillment to the givers, to the sharers of their talents and energies. It brings relief, help, direction, new beginnings to those who take that hand being offered. When it works, this human drama is a joy to behold. When it doesn't work, it can be comic, but all too often it is tragic (p. xiii).

In the United States an extensive child welfare system has been developed and implemented. It is widely known that child welfare agencies are designed to protect

children and place them in homes in which their lives may not be as chaotic and dangerous. Ideally these children are placed in a loving, supporting, and emotionally nurturing environment. Foster care serves as a temporary placement in order to allow the caregivers and/or the child to address issues necessary to provide a safe and nurturing home environment for the child. Often, these children are placed in foster homes of relatives, those who may want to adopt, those who are unable to have children, or simply those that desire to help others in need.

As there are various types of foster parents, there are also several types of foster placements, two of which will be addressed in this study. A child may be placed in a general foster home- a home in which a member of the community accepts a child for placement. Often this person is one that has had no prior contact with the child.

The child may also be placed in a kinship foster care placement. Kinship care emerged as recently as the late 1980's and is the fastest growing funded service by the child welfare system (Gleeson & Craig, 1994). A kinship placement generally occurs when a relative or close family friend accepts the child into their home. Almost all states (48 and the District of Columbia) give preference to a relative when considering placement for a child. Nineteen states and the District of Columbia define kin as broadly as someone with emotional ties with the child such as godparents or family friends (Geen, 2000). Kinship placements are of interest for various reasons. One possible advantage to kinship placement is that the child is placed in a home with someone that they already know and the child's transition may not be as upsetting. In addition, the foster parents are likely to be of similar background due to familial ties and may also have previous knowledge of the child's upbringing that may be lacking in general foster

care. In either placement, if a child is in state custody, the state assumes responsibility for ensuring the child's well-being regardless of whether a relative or unrelated person is providing daily care of the child (Geen, 2000). With caseworkers and agencies designed specifically for this type of intervention, it appears that the solution is simple-if a child is in danger, remove them from their home and place them in a safe environment, such as foster care.

There are, however, many obstacles that may impede the foster care system. One that is of interest in this study is that the number of foster children entering the system is rising, yet the number of foster parents is declining. The Child Welfare League of America (1998) reported that the number of children in out-of-home placements increased by 44%, from 280,000 to 486,00, in the nine-year period between 1986 and 1995, with an estimated 75% of these children in foster families. In contrast, the number of foster parents declined from 147,000 in 1985 (with 280,000 children in the system) to 142,374 in 1995 (with 486,000 children in the system).

These growing numbers may lead to an exhausted system as well as an overload on foster parents. This overload may lead to resistance, resentment, or even burnout. Burnout is a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment that may present among individuals who do some type of "people work" (Maslach, 1982). It has been investigated in a number of arenas; however, foster parents as a population have not received much attention.

Research to date has been conducted regarding burnout of individuals as it pertains to their profession. Even though foster parents may or may not be employed outside of their home, foster parenting qualifies as a "job" for numerous reasons. Maslach and Leiter

(1999), leading researchers in the field, point out that there are six key areas for any employees' happiness. Foster parenting brings with it every threat to burnout that the researchers state those "working" may face. One of these areas is a manageable caseload. Although most foster parents receive some training, it is possible that the behaviors exhibited by their foster child are seen as something that they cannot manage. Others factors include a sense of control, fairness in the workplace, and shared values. Foster parents are often faced with situations over which they have little control such as court intervention. Also, situations may arise in which they feel that they are being treated unfairly by the foster care system or they may feel their values are not being considered when it comes to caring for these children. The final two points are opportunity for awards and a feeling of community. Denby, Rindfleisch, and Been (1999) found that foster parents are most satisfied when their relationship with agency social workers and other personnel consists of respect, a sharing of information, and positive regard. They stated that an effort should be made in order to reconceptualize foster parents as paraprofessionals for the work that foster parents do with their foster children.

Maslach (1982) writes that when an individual begins to feel the effects of burnout he or she may wish that other people would "get out of my life and just leave me alone." Perhaps this is what is occurring in foster care and those who currently foster may be choosing to select out of foster care due to their increasing levels of burnout. Individuals may be becoming overwhelmed by emotional fatigue, as well as feeling a sense of depersonalization regarding the children that they house. In addition, many of the rules and regulations imposed on these foster parents may lead to a sense of decreased personal accomplishment.

Similarly, a foster parent may not feel a sense of autonomy in his or her dealings with their foster child. Foster parents are informed that their foster children may be returned to their biological homes in the immediate or very near future. Their homes and way of life may be examined by outside sources. Foster parents may also be fingerprinted, subject to a physical examination, be required to have current CPR/First Aid certifications, provide several positive character references, and have reliable transportation (DHS Internet Development Team, 2000). Foster parents must also show that they have adequate space to house the child. They may be required to have a minimum number of hours of training prior to licensure, which may vary by state (DHS) Internet Development Team, 2000). Once foster parents receive the child into the home they are not only sharing their homes with children, they are also subject to sharing their homes with the child welfare system via home visits and general observation. Such a continual monitoring of performance may contribute to a lessened sense of autonomy that could lead foster parents to question their own ability or react to others in a manner that would otherwise not be typical for them.

Maslach (1982) reports that burnout may be a result of extensive personal contact with other people in situations that are often emotionally charged. For those that have worked with foster parents, children, or foster care workers, it is sensed that emotionally charged situations are not uncommon. Often disagreements arise regarding "parenting issues," discipline, and availability of the caseworker to name a few. In addition to possibly being found at the center of delicate situations involving the court system, the foster parent may have to deal with any emotional or behavioral difficulties that the child brings into their home, some of which they may be ill equipped to handle.

Whether it be emotional or physical, a burden that exceeds the person's ability to handle it is the hallmark of burnout (Maslach, 1982). This burden may come via coping with the ambiguous nature of their role, the intrusion of others such as the child or child welfare system into their homes, and issues of loyalty, in which the child brings with him/her one set of rules but the values and rules previously set by the foster family are different (McFadden, 1996). Although the foster parents are most likely informed that they will only be offering a temporary placement, a sense of loss may be felt when the child leaves as a well as an overriding sense of concern for the well-being of the child without their supervision.

While the sense of loss may be felt by all parents, in foster care situations this aspect is often eminent and out of the control of the foster family, for various reasons. Maslach (1982) reports that whatever the reason, not perceiving control over important outcomes in one's job adds to the emotional strain of the helping relationship. In addition, this sense of helplessness may lead to increased frustration and anger as well as feelings of failure and ineffectiveness. The "job" of the foster parent is to protect and care for the child, however some foster parents may experience this responsibility more negatively than others. The research is still unclear as to why some individual may feel the effects of burnout to a greater degree than others.

A model that attempts to answer the 'why' questions of behavior is attribution theory. It appears that a common theme in attribution research and the basis for much study deals with how people explain the events and circumstances that occur in their lives. Attribution theorists have asserted that future behavior is in part determined by an individual's perception of the cause of past events (Weiner, Nierenberg, and Goldstein,

1976). Heider (1958) introduced the foundation for attribution theory when he stated that individuals are "naïve psychologists" that attempt to explain the causes of others' behaviors. Several theories of attribution have been introduced in the literature (Heider, 1958; Abramson, Seligman, and Teasdale, 1978). The model of attribution according to the reformulation of the learned helplessness model proposed by Abramson et. al (1978) will be utilized in this study. Missing in the original model were the dimensions of chronicity and generality of helplessness and depression (Peterson & Seligman, 1984), which have been addressed in the reformulation. Attribution style, according to Abramson et. al (1978), can be examined in relation to three continuums- internal vs. external factors, stable vs. unstable factors, and specific vs. global factors.

The internal versus external dimension examines whether an individual believes that an event occurred because of something within themselves or something about the situation. Abramson et. al (1978) report that individuals attribute outcomes to internal factors when they believe that outcomes are more or less likely to happen to themselves than to others. Likewise, if an individual believes that an outcome is as likely to happen to themselves as to relevant others, they make an external attribution for that outcome.

The stable versus unstable dimension and the global versus specific dimension assists in predicting the chronicity and the generality of helplessness, respectively. Stability refers to the idea that an event occurred because of something that will remain constant over time (stable) or because of a more transient cause (unstable). The third dimension, globality, refers to an individual's explanatory style regarding whether or not the cause of an event will affect many areas of the individual's life (global) or only affect the event that is currently being played out (specific).

The hallmark of the original model of learned helplessness, as well as the reformulation, is that individuals need to feel control over the events of their life (Peterson & Seligman, 1987). If this control is not felt, helplessness and/or depression may result. This is similar to Maslach's (1982) assertion that individuals who do not perceive control over important aspects of one's work may be at a higher risk to negatively encounter the emotional strain of the helping relationship. No studies were found examining attribution styles of foster parents and minimal information was found regarding attribution theory and burnout. However, more information will be provided later regarding general themes of attribution present in available literature.

A brief overview of this model is important as this model is the basis for the Attributional Style Questionnaire by Peterson, Semmel, von Baeyer, Abramson, Metalsky, & Seligman (1982). This questionnaire was developed to examine how people explain the events that are occurring around them and will be used in this study.

Studies are needed in order to understand which type of attribution style may be most negatively affected by the strain that foster care can bring with it, as current literature regarding these characteristics in foster care is scarce. In sum, it may not actually be the situation that foster parents are placed in that leads to possible burnout; it may be the perceptions of the situation in which they are placed that make a difference.

Statement of the Problem

Numerous studies have been completed regarding basic demographics of foster parents; however, few have been carried out regarding motivational factors that influence the well being of these foster parents. With an increase in the need of foster parents and a

decrease in available foster homes, many researchers are looking for reasons why once willing individuals are now denying continued placement. Further, it is apparent that individuals react differently to both positive and negative situations. One possible explanation for this may be in the differences in attribution styles that people possess. Not all foster parents are burning out. An exploration of which attribution style(s) is most related to burnout will be a helpful addition to the literature.

The implications of identifying attribution styles that may lead to burnout are wide ranging. By identifying such styles, one may be able to seek intervention at an earlier stage and avoid the lasting effects that burnout could have on personal as well as professional responsibilities. This information could possibly lead to an increased participation among foster parents and may be a useful screening tool for those who are involved in recruitment. Not only may this be helpful in identifying individuals that may need additional support in a given area related to their attribution style, this information may be a valuable guide in developing appropriate education for these foster parents in regards to teaching stress management techniques. Also, it may be an aid in helping foster parents intensify the positive effects that they may experience by sharing their lives with these children.

The following research questions will be addressed in this study:

Question #1: Is there a relationship between attribution style of foster parents and their reported degree of burnout?

Question #2: Is there a difference in attribution style between those willing to continue accepting placements and those not willing to continue accepting placements?

Question #3: Is there a difference in level of burnout between those willing to continue accepting placements and those not willing to continue accepting placements?

Question #4: Do foster parents involved in kinship placements differ in their level of burnout from those who are involved in general foster care placements?

Question #5: Do foster parents involved in kinship placements differ in their attribution style from those who are involved in general foster care placements?

Definition of Terms

Foster Care

<u>General Foster Care</u> or traditional foster care is care for a nonrelated individual who is a ward of the court and is in need of temporary placement due to a variety of possible factors such as parental abuse or neglect. These individuals are neither parents to the child nor are they professional caregivers (McFadden, 1996).

<u>Kinship foster care</u> is becoming increasingly utilized for a number of reasons: the increasing number of children in placement, the declining number of available nonkin foster families, and the increased awareness of kin as a resource (Child Welfare League of America, 1994). For the purpose of this study, it is defined an as out-of-home placement with relatives of children who are in the custody of state and local child welfare agencies (Scannapieco, Hegar, and McAlpine, 1997).

Burnout

Emotional Exhaustion is a response to a situation in which an individual becomes emotionally overly involved, overextends himself or herself, and feels overwhelmed by the emotional demands imposed on him or her by other people (Maslach, 1982). In this study, emotional exhaustion will be measured by the emotional exhaustion scale of the Maslach Burnout Inventory (Maslach & Jackson, 1986).

<u>Depersonalization</u> is demonstrated by one distancing him or herself from others. Depersonalization can result in a negative view of others such as developing a negative opinion toward others, expecting the worst from them, or even actively disliking the other person (Maslach, 1982). Depersonalization will be measured by using the depersonalization scale of the Maslach Burnout Inventory (Maslach & Jackson, 1986).

<u>Reduced personal accomplishment</u> is the third aspect of burnout. Maslach (1982) states that this may occur as one begins to feel distress or guilt about the way they have thought about or mistreated others. These individuals may sense that they are turning into the very type of person that they themselves previously disliked. She states that providers begin to have a "gnawing sense of inadequacy" about how they are relating to others and this may result in a self-imposed verdict of "failure." This component will be measured using the reduced personal accomplishment scale of the Maslach Burnout Inventory (Maslach & Jackson, 1986).

Attribution Style

<u>Internal versus External</u> refers to the degree in which the ascribed cause of a situation is internal to the individual or is thought to be caused by some aspect of the external

environment. When individuals believe that outcomes are more or less likely to happen to themselves than to relevant others, the outcomes are attributed to internal factors (Abramson et. al, 1978). On the other hand, if one were to make an external attribution for an outcome this individual may believe that the same outcome is as likely to happen to himself or herself as it is to relevant others (Abramson et. al, 1978).

<u>Stable versus Unstable refers</u> to the degree of temporal consistency of the cause (Weiner, 1986). A stable condition is one that is thought of as recurrent or consistent, whereas unstable factors are transient and short-lived (Abramson, et. al, 1978).

<u>Global versus Specific</u> attributions were also addressed by Abramson and colleagues (1978). They report that a global attribution style is one in which global factors predict that an expectation will occur even when the situation changes. Alternatively, an attribution to specific factors would predict that the expectation need not necessarily recur when the situation changes.

<u>Composite Positive minus Composite Negative-</u> This study will examine attribution style along this dimension. Research has shown that the most reliable and valid aspect of the Attribution Style Questionnaire is found when researchers look at attribution style along this continuum. The questionnaire derives scores for how individuals respond to both positive and negative events. By taking the score an individual receives on the positive events and subtracting the score the same individual receives on the negative events, one will learn if they respond in more predominantly positive or negative ways to various events they may encounter.

Significance of the Study

Children need adults who are willing to care for them. Even though the type of home that these children will enter may differ, one thing remains the same. Foster parents are willing to give their time, their space, and their attention to a child who is unable to remain safely in his/her previous home; at least they are initially. Burnout may lead to many of the behaviors that resulted in the child's removal from their own home such as alcoholism or interpersonal conflicts. For example, alcohol and drug abuse are factors in the placement of more than 75% of the children who enter care (Child Welfare League of America, 1998). Some foster parents are continually challenged by their foster children as well as the rules and regulations imposed on them by the child welfare system and also by their own personal beliefs and values. Burnout may be playing a leading role in the decline in the number of foster parents, and if so, it is important to recognize those who have a tendency to more strongly feel such effects. Burnout has many negative effects that accompany it, however, Maslach (1982) notes that perhaps the most devastating result of burnout is "a permanent hardening of the human heart." This study attempts to look at what type(s) of attribution styles are more likely to weather the storm of foster parenting.

The information received in this study may help caseworkers and child specialists in the retention and selection of foster parents. Addressing burnout can help to protect children from the real or perceived threat of harm that may come from high levels of burnout in others. Foster care is a complex, but very important aspect affecting the lives of many children and adults alike.

Assumptions and Limitations

Several basic assumptions are present in the current study. The first assumption is that foster parents voluntarily accept their foster children. Foster parents can decline a placement and it is assumed that all placements were made without coercion. The second assumption that underlies this study is that burnout is a negative state. The literature surrounding burnout tells of many negative consequences such as fatigue, interpersonal difficulties, and increased illness (Acker, 1999). It is assumed that if these symptoms are present they are perceived as unwanted. The final assumption is that attribution styles vary among different foster parents in that each will experience the opportunity of being a foster parent differently.

Several possible limitations of this study must also be addressed. The population will be drawn from different counties within one region in one state. It is possible that resources such as availability of case managers and educational opportunities for foster parents vary by region or by state. A second limitation is that self-report measures will be utilized and willingness to report an accurate level of burnout may vary by attribution style or other personal characteristics. In addition, influences other than foster care may contribute to current levels of burnout that the foster parent may not be aware of. Finally, although the qualifications needed to become a foster parent are very diverse, lack of certain foster parent qualifications in the given region may influence the reasons that certain types of placements are not made.

This study will attempt to look at how the subscales of burnout are related to attribution style of foster parents. It will explore how the type of foster placement may affect burnout and it will look at the willingness to continue accepting future children by attribution style and current level of burnout. Finally, this study will examine whether or not the two types of foster care (general or kinship) vary in their overall attribution style. The remaining chapters will provide relevant empirical literature related to the variables addressed in this study. The instruments used as well as the population under investigation will be described in detail.

CHAPTER II

REVIEW OF LITERATURE

The present study will explore the relationship of attribution styles as they relate to the subscales of burnout experienced by foster parents as well as their willingness to continue placements. The first section of this literature review will look at two different but similar types of foster care, namely general and kinship foster care. The next section will examine burnout as it relates to individuals in helping professions. Studies will be reviewed as they pertain to social workers, medical workers, and day care workers, as these are roles that individuals may unofficially fill throughout their time as foster parents. Finally, a summary of the literature related to attribution theory in generally and more specifically the reformulation of learned helplessness model by Abramson, Seligman, and Teasdale (1978) will be presented.

Foster Care

Much of the current literature has focused on characteristics of children in foster care, as well as basic demographics of foster parents. However, there is little literature available regarding personality factors that may contribute to the declining number of foster homes. In other words, why individuals are withdrawing their homes from the foster care pool? Placement in foster care is intended to provide a safe environment in which many of the risk factors such as parental neglect and/or abuse can be removed from the child's life. In a recent study, children living in non-relative foster care were more likely to say they were "loved" and "safe" than those living in group care, and an even higher number of children reported always feeling loved in kinship care (Wilson & Conroy, 1999).

Children enter foster care for a number of reasons. According to the Child Welfare League of America (1998), of the children that entered foster care in 1990: 50% entered for protective services reasons, 21% because of parental condition or absence, 11% because of the child's state or delinquent offenses, 2% because of the child's disability or handicap, 1% because of relinquishments of parental rights, and 13% for other state reasons (including a parent/child relationship or family interaction problem, an adoption plan, deinstitutionalization and unwed motherhood). This same organization reports that children in foster care are three to six times more likely to than those not in foster care to exhibit emotional, developmental, and behavioral problems such as depression, school difficulties, and impaired social relationships. Children are entering the system with more complicated needs than ever before, and foster parents must be prepared to meet these needs.

Placements are most often temporary with re-unification of the child and biological parents the ultimate goal. The average length of stay varies by state. In the state in which the current study is being conducted the largest number of children remained in foster care 1-5 months (23%), with the next highest being 6-11 months (17%) and 12-17 months (13%) (U.S. Department of Health and Human Services, 1997). However, time in placement can greatly deviate from the given averages.

Although foster parenting can be a very personally rewarding experience for various reasons, it can also be an experience filled with numerous stressors. Several factors have been identified as possible answers to the decreasing number of foster parents including the growing number of women entering the workforce and the lack of rewards and supports for the job (Pecora, Whittaker, Maluccio, Barth, and Plotnick, 1992). Carbino (1991) reported that foster parents fear having abuse allegations brought against them and that some may fear what the introduction of a child might do to their current family system. The family system must be open to resources needed to care for the child, licensing requirements, child welfare monitoring, the foster children and possibly their biological parents entering and exiting the home, and most importantly must attempt to ensure protection of the child (McFadden, 1996).

McFadden (1996) reports on the crises of accession, dismemberment, and demoralization in relation to foster families. The crisis of accession occurs with the introduction of a foster child into the family. Each time a child leaves the family, regardless of reason for exit, the crisis of dismemberment occurs. Finally, the crisis of demoralization occurs when foster parents feel they have failed in their endeavor, when a placement is disrupted, or when allegations regarding abuse or licensing complaints surface. With all of the above listed possibilities that could negatively influence an individual's decision to become a foster parent or to continue to foster, the question remains as to why some foster parents continue to undertake such a fulfilling yet complex endeavor, and others do not.

Denby, Rindfleisch, and Bean (1999) studied the predictors of foster parents' satisfaction as well as their intent to continue fostering. Using survey methods they

conducted an ex post facto study consisting of 809 active, licensed foster homes- 539 of which returned the surveys and qualified for the study. They investigated issues such as motivation to become a foster parent, willingness to continue to remain a foster parent, stress, role ambiguity, conflict, foster parenting experiences (opinions about fostering in general and specifically about oneself as a foster parent), role clarity, and training, as well as an exploration into demographic variables of the foster parent.

It was found that nearly one half of the foster mothers were between the ages of 41 and 60 years of age. A majority were married (56%), and a near even split of the mothers were African American (50%) and Caucasian (45%). The foster fathers' demographics were very similar to those of the mother's. One third of the foster mothers completed high school and another third attended some level of high school, with the majority of the foster fathers either completing partial or all requirements for their high school diploma. The income for a large part of the sample (45%) was \$29,999 or less annually.

It was found that predictors such as "agency red tape" and "dealing with a foster child's difficult behavior" were predictors of lower levels of satisfaction while an increase in the foster mother's age and the social worker showing approval for a job well done predicted an increase in the level of satisfaction. It was found that overall satisfaction with fostering exerted the greatest influence on the foster parent's intention to continue fostering, and dealing with "difficult behavior" and "being treated like one who is need of help oneself" as significant correlates of the decline in the intent to continue. The authors report that an important implication of their study is that an effective screening protocol that would highlight applicants who possess the qualities that are

thought to best predict foster parent satisfaction and the likelihood of continuing to foster is warranted.

This screening device may also be beneficial when placing children with relatives, as it is possible that some of the characteristics that led to a negative display by the biological parents may also be present in the relatives or close friends of these individuals. Previously under utilized, this form of placement is growing, and is generating much research. In the late 1970s and 1980s, more children were entering the system and states began to consider kin a possible option (Geen, 2000). Geen 2000 points out that around this same time two laws were passed that resulted in an increase in the use of kin as foster parents. The Indian Child Welfare Act of 1978 stated that a child should be "within reasonable proximity to his or her home..." and that the aim of the state should be to place the child with "a member of the Indian child's extended family...." The second influential law was the Adoption Assistance and Child Welfare Act of 1980. This law stated that when placing a child in foster care, the state should obtain the "least restrictive, most family-like setting available located in close proximity to the parents home, consistent with the best interests and special needs of the child." In 1997 the Adoption and Safe Families Act (ASFA) was developed and acknowledged the possibility of kin as foster parents and indicated that "a fit and willing relative" was able to provide a permanent living arrangement without termination of parental rights at the discretion of the state (Geen, 2000). It appears that many states have chosen this option.

Kinship care occurs at many levels. Boots and Green (2000), report that there are private kinship care families that are not associated in any way with the child welfare system. There are those that the system is aware of but are not receiving services, and

there are also families that are caring for children in state custody and are continually affiliated with the child welfare system. The latter type is one on which the present study will concentrate. Boots and Green (2000) also report that the types of relatives that can provide foster care for children vary by state. Of the 50 states in which they studied, 26 stated that a relationship to a child by blood or through marriage to a blood relative was mandatory to constitute kinship care, 20 included a number of other categories such as neighbors, godparents, and other adults who have close familial ties, and the remaining four states did not have a formal definition of kinship foster placement. Most literature available to date concentrates on family members as caregivers.

As with traditional or general foster care, most completed studies of kin as foster parents resulted in information regarding the characteristics of the caregivers. The marital status of most kinship caregivers is single while this is not generally the case for general foster parents (Berrick, Barth, & Needell, 1994). Berrick et. al (1994) also report that general foster parents are more likely to own their own home and have a higher income than kinship caregivers, with general foster parents also reporting being in significantly better health. In addition, Berrick et. al (1994) reported that 91% of kinship caregivers had received no formal training during the year prior to their study and that the levels of agency monitoring were below that of traditional foster care. In this same study it was found that the kinship caregivers expressed that they were committed to the children in their care and would care for them as long as needed but the majority were not willing to adopt the child as they were already related to them.

In a study conducted by Beeman and Boisen (1999) it was found that approximately 83% of caseworkers agreed that kinship foster parents are motivated to provide care by

their strong belief in keeping their family intact and 63% agreed that kinship foster parents provided care because of family expectations. In addition most workers agreed that children were better off being placed with relatives than with others (76.8%), that kinship children exhibit a stronger sense of belonging than those in general foster care (69.7%), that kinship foster care can be beneficial in identity formation of the foster child (92.1%), and that family ties are better preserved in kinship foster care (74.5%). The workers in this study cited some advantages as well as disadvantages of having kin care for these children. The kinship foster parents often acted as facilitators of family interaction as they were able to speak with the biological parents about the child's adjustment to foster care as well as teach the child ways to deal with future relationships with their biological family. However, this relationship with the biological family can also interfere in the workers dealings with the kin (Beeman & Boisen, 1999). The authors note that many of the professionals surveyed expressed neutral opinions regarding kinship foster care and this could possibly be due to a reluctance to take a stance, lack of experience, or some other factor that is unknown.

Scannapieco, Hegar, and McAlpine (1997) researched the differences and similarities among general and kinship foster care providers. They found that the two did not differ in income, employment, or education. They did however find that the race of the caregivers differed significantly as 49% of kinship caregivers were African American compared with only 25% of general foster caregivers. This study also supported findings that general foster care providers are more often married (82%) than kinship providers (64%). When social service records were reviewed, it was found that significantly more

services were provided to general foster parents with respect to transportation, crisis intervention, and parent education.

Another possible difference between kin and general foster parents is the requirements for licensure. Geen (2000) reports that all but 3 states allow kin to receive foster care payments regardless if the child is eligible for federal funds, however the requirements needed to qualify for payments vary within these states. In 30 states, the same licensing requirements apply to both kinship and general foster parents in order to receive foster care payments. Among those thirty states, 19 allow for lesser standards to be met to qualify, but will also reimburse at a lower rate. The number of kinship foster parents available to care for these children increase as the requirements placed upon them decrease. This may be why we are seeing an increase in the utilization of kinship placements.

Burnout

Over the past 25 years researchers have been attempting to explain the phenomenon of burnout (Perlman & Hartman, 1982). Although burnout is not presented in the field of mental health as a DSM-IV diagnosis, it continues to attract empirical studies, it is described theoretically, and is discussed extensively by individuals in both the mental health profession and those in the general public (Farber, 2000). Burnout not only comes from many years of experience, but is also felt by young practitioners at the start of their careers (Azar, 2000). Freudenberger (1974) stated that burnout was to fail or to become exhausted because of excessive demands on energy, strength, and resources. The number of definitions provided by researchers goes beyond the scope of this paper, however, in

current literature the one definition that is most commonly used was presented by Christine Maslach (1982). She states that burnout is a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment felt by those who work closely with others.

The first component of burnout to be addressed, emotional exhaustion, is characterized by a feeling of fatigue, one that leaves an individual feeling as if all of his/her resources are have been utilized. It has been referred to as "compassion fatigue" in which feelings of frustration and tension arise as these individuals begin to feel as if they can no longer give of themselves to others (Cordes & Dougherty, 1993). Another component, depersonalization, may occur when an individual begins to see others not as they are, but as someone or something else that they must deal with in order to accomplish their goals for the day (Cordes & Dougherty, 1993). Lastly, a diminished sense of personal accomplishment may arise from burnout. Cordes and Dougherty (1993) explain that this component can be likened to imagining if one were "bailing out of a leaky boat and realized that the boat may sink." Maslach (1982) wrote that often individuals begin to feel negatively about themselves and prescribe a self-imposed verdict of "failure" in what they are doing.

Given what we know about the current state of foster care, it is important to examine how this phenomenon and related effects may be negatively affecting those who are taking responsibility for foster children. Maslach (1982) cautions that it is reasonable that someone chooses an occupation in which they can receive satisfaction through their work, however, using a helping relationship to do so can have some negative consequences. This can be demonstrated via foster care. A child cannot provide for the

needs of the foster parent. Not only may this parent feel a great deal of emotional strain; this strain may interfere with the care of the child. For example the foster parent may not be getting the attention, affection, or sense of accomplishment that he/she wants from the child and frustration may result. This frustration is likely to be expressed in hostility toward the client (child) and may be accompanied by depression (Maslach, 1982).

Several of the negative consequences that those experiencing burnout may feel are physical exhaustion, insomnia, increased use of drugs and alcohol, and marital and family problems as individuals perceive the stress from the environment around them as some form of personal dysfunction (Maslach, Jackson, & Leiter, 1996). Maslach (1982) states that when the caregiver is having difficulty interacting with people he/she may look to him/herself for the answer rather than identifying the situational cause. We can then place blame on either ourselves or another person without identifying that the actions taken may be due to the situation or environment in which we are in.

Burnout also manifests itself in attitudinal terms. Those experiencing burnout may see others in a more negative light. Maslach (1982) reports that a marker of burnout is a shift in an individual's view of other people and often this shift is from positive and caring to negative and uncaring. She states that often those experiencing burnout begin to view others in more derogatory and negative terms. The caregiver "may begin to develop a low opinion of their capabilities and their worth as human beings and this feeling is often turned inward in those experiencing burnout." Pines (2000) states that for those who are highly motivated, burnout sets in when they feel as if the work that they are doing does not give their life a sense of meaning with the key ingredient of this being an understanding of why individuals have chosen their work.

Role conflict and/or ambiguity also play a large part in the phenomenon of burnout. Role ambiguity is associated with an individual's need for certainty and predictability which is especially true in regard to one's goals and the means in which this individual accomplishes them (Cordes & Dougherty, 1993). Often foster parents are not clear of their role because they do not possess legal guardianship for the child or children; yet, they are solely responsible for the day to day needs of these children. Foster parents who do not have any prior relationship with the child may feel even more ambiguity because they lack information regarding the child's history.

Another idea that has been reported to lead to burnout is when one carries responsibly in their work but lacks a sense of control (Kalter, 1999). This can be a consequence of having no direct input on policy or being told what to do and how to do it with no flexibility in their work (Maslach, 1982). Working with foster children involves factors that present special risks for burnout as the worker (foster parent) often has less control over whether or not the child continues treatment (Azar, 2000) than the biological parent or the foster care system would.

Burnout has been studied regarding several helping professions. Sonneck and Wagner (1996) studied the effects of burnout on physicians. They report that the suicide rate of doctors exceeds by two or three times that of the general population. They report that the extensive amount of time that physicians apply to their work can lead to isolation and depression and ultimately burnout. They report that burnout is a specific health risk that may contribute to the suicide risk of physicians. In their study, these authors found that especially in young doctors, a high score on depersonalization characterized burnout. Yet, the authors report that the physician is still able to remain productive even though

their level of exhaustion is high. As a result, the quality of their work is impacted and is reflected by complaints from the public stating that doctors are only interested in the disease, but not the patient. The authors state that burnout is not *the* answer to the increased number of suicides among doctors, but it is something to be considered (Sonneck & Wagner, 1996).

Social workers are another population in which burnout has been studied. Social workers may experience role conflict and feel as if the organizational limits that are imposed on them interfere with their job satisfaction. Acker (1999) found that social workers that were working with severe mental illness appeared to be correlated positively with the emotional exhaustion and depersonalization subscales of the Malsach Burnout Inventory, yet no correlation was found with job satisfaction and reduced sense of personal accomplishment. They report that it is possible that social workers did not report a reduced sense of personal accomplishment because of their realistic expectations of working with severely mentally ill individuals. This study also found that younger more inexperienced social workers were more likely to leave their jobs than those who were older and more experienced. The author points out an important limitation to their study. She states that because she had no information regarding nonrespondents it is possible that the agencies that refused participation were those in which the workers were the most burned out and dissatisfied with their job. It is possible that these agencies did not want the negative feelings associated with burnout exposed.

Burnout in day care workers is also an area that has received attention. McMullen and Krantz (1988) report that numerous factors such as unavailability of resources and/or supervision, benefits, and low wages create a stressful environment on a day to day basis.

They describe the process that a day care worker (much like that of a foster parent) undergoes in the following way. As a result of the emotional and physical needs expressed by children, the caregiver's emotions are drained to the point of exhaustion. The authors report that in order to defend against this exhaustion the workers become detached therefore reducing the quality of care they provide. This scenario illustrates Maslach's (1982) definition that includes three components to burnout.

McMullen and Krantz (1988) attempted to discover why some day care workers are burning out and others are not. Their study looked at learned helplessness, burnout and self-esteem. They found that both emotional exhaustion and depersonalization were significantly related to learned helplessness and to self-esteem, however, no significant differences were found regarding personal accomplishment or self-esteem and helplessness. The authors report that caution should be taken with respect to this type of population. They reported that it appeared that individuals showed reluctance to complete the self-report formats utilized in this study and that the group thought to be at highest risk for burnout self-selected out of the study, possibly weakening the magnitude of the results. Yet, the question remains, why do some burnout and others do not?

One of the biggest questions surrounding the phenomenon of burnout is that of is underlying causes (Pines, 2000). In fact, Perlman and Hartman (1982) stated that regarding information presented in the burnout literature, "Research is lacking which studies attribution for success or failure on the job."

Attribution Theory

McMullen and Krantz (1988) state that, "In effect, the process of burning out transforms the 'helper' into the 'helpless'." This is fitting as much of the work that has been done in the field of attribution stems from the reformulated model of learned helplessness described by Abramson, Seligman, and Teasdale (1978). Weiner (1986) reports that, regarding attribution, an examination of control is important as it enables investigators to explore how this feeling of control (or lack of) can lead to depression, maladaptive stress reactions and many other undesirable psychological states. A major contributor to the field of attribution and attribution theory was Fritz Heider. Heider (1958) writes:

Man wants to know the sources of his experience, whence they come, how they arise, not only because of intellectual curiosity, but also because such attribution allows him to understand his world, to predict and control events involving himself and others. (p.146)

He asserts that individuals are "naïve psychologists" who seek to explain the causes of behavior. Heider (1958) reported that attributions for both personal and impersonal events clarify many of our daily happenings that in turn determine much of our understanding of, and reaction to, the environment. He defines attribution as "the linking of an event with its underlying conditions."

Attribution can be defined along three continuums of internal vs. external factors, stable vs. unstable factors, and global vs. specific factors. The locus of causality (internal vs. external) is based on work by Rotter (1966). This locus of causality refers to the degree to which a cause is determined to be internal to the individual or is believed to be

caused by some external aspect of the environment. Individuals with an internal locus of control expect that they themselves have more control over events and may be less influenced by the actions of others. Individuals with an external locus of control may believe that the outcome of a situation is often out of their control and may be due to luck or fate. Abramson et. al (1978) report that because the self is something that an individual always has with them, attributing a cause of a negative event to an internal factor often has a more negative connotation as the cause of this situation is seen to be due to something in the individual.

The next dimension to be addressed is the stable vs. unstable dimension. A stable condition is one that remains consistent over time, and example of which would be an individual's eye color. An unstable cause may be illustrated by changes in the weather, as this is something that can be seen as variable. Abramson et. al (1978) state that attributing a negative cause to a stable event may lead to chronic deficits as this may imply to the individual that he or she will also lack the ability to control a similar situation in the future.

Abramson, Seligman, and Teasdale (1978) proposed globality as a third dimension in attribution style. Previous research concentrated on the locus of causality and stability; however, these researchers were interested in how this "helpless" type of behavior could be generalized across various situations. This dimension refers to the range across which the attributed cause is relevant. A cause is global if it is seen by the individual to affect the person across a number of situations. For example, if an individual performs poorly at a job interview and adopts a global attribution or explanatory style, it is likely that this individual will believe that he/she will perform poorly at all interviews. On the other

hand, if this same individual were to adopt a more specific approach, he/she may acknowledge that his/her performance at this interview was poor, yet may realize that he/she can be more effective if better prepared for the next interview.

The reformulation describes certain roles that individuals with different explanatory styles may take on. It is reported that internality of such causal beliefs affects an individual's self esteem as those with an internal style are more likely to exhibit lowered self-esteem following a bad event than those with an external explanatory style (Peterson & Seligman, 1984). Peterson and Seligman (1984) report that the stability of causal perceptions affects the chronicity of helplessness in that if an event is explained by a cause that is believed to persist (stable) then depression will be more likely to persist. Finally, these authors state that the globality of the causal beliefs is influential in the pervasiveness of the deficits that may accompany a bad event such. For example, if one feels that a global factor has caused the bad event then helplessness may tend to be present in a wide array of situations. An integrated example of these three dimensions is shown in Table 1. Peterson and Seligman (1984, p. 349) demonstrated the above using explanation (attribution) styles for the event of "My checking account is overdrawn."

The original research on learned helplessness (Overmier & Seligman, 1967) was done in an animal laboratory using dogs. The animals in this study were placed in boxes in which shocks could be received by way of electrified floors. One group consisted of dogs that were unable to escape shock, while it was possible for those in the other group to escape. For the group in which escape was possible "escape training" was utilized. It was found that after several training sessions those that had received training would actively attempt to escape the shock, while those in the other group whimpered but made

no attempt at escape. Even when the barrier was removed and escape was simple, the dogs in the "helpless" group passively continued to receive shock.

Table 1

An Example of the Three Dimensions of Attribution Styles

	Explanation					
Style	Internal	External				
Stable						
Global	"I'm incapable of doing anything right"	"All institutions chronically make mistakes"				
Specific	"I always have trouble figuring my balance"	"This bank has always used antiquated techniques"				
<u>Unstable</u>						
Global	"I've had the flu for a few weeks, and I've let everything slide."	"Holiday shopping demands that one throw oneself into it"				
Specific	"The one time I didn't enter a check is the one time my account gets overdrawn"	"I'm surprised-my bank has never made an error before"				

As learned helplessness was originated on the use of animals, many were looking for a model to explain how this phenomenon could be explained with humans. As a result, Abramson, et. al (1978) proposed their reformulation of the theory of learned helplessness using human behavior as their basis. They report that the cornerstone of the

reformulation is learning that outcomes are uncontrollable may result in three deficits: motivational, cognitive, and emotional. This assertion will be explained in present as it may relate to burnout. The authors state that a motivational deficit may be demonstrated by a reduction in voluntary responses as a consequence of perceiving outcomes as uncontrollable. As previously mentioned, one will experience burnout if they sense a lack of control over a situation producing a sense of "helplessness." If an individual feels as if his/her efforts to help a child will not result in a desirable outcome, this individual may no longer attempt to display the helping behavior.

A second aspect regarding learned helplessness is cognition. This component states that exposure to an uncontrollable event is not sufficient to classify an individual as helpless, rather, the individual must come to expect that such outcomes are no longer under his/her control (Abramson, et. al, 1978). In relation to burnout, one may experience an event that is out of his/her control, however, burnout may not occur unless one expects that he/she will no longer have any influence on future outcomes.

The final aspect deals with emotion. The learned helplessness hypothesis states that a possible outcome of learning that an event is uncontrollable is depression (Abramson, et. al, 1978). Maslach (1982) reports that in regards to burnout, those who feel depression may begin to experience a decrease in their sense of personal accomplishment-one of the three key components that contribute to burnout.

The majority of research available regarding attribution, or explanatory styles, centers on depression. A depressive style has been reported in which depressed individuals are more likely to exhibit a much more internal, stable, and global attribution style for bad events than nondepressed individuals (Raps, Peterson, Reinhard, Abramson,

& Seligman, 1982; Peterson & Seligman, 1984). If an individual makes an internal attribution for negative events, according to the reformulated model, the resulting depression is believed to stem from a loss of self-esteem (Peterson, Semmel, von Baeyer, Abramson, Metalsky, & Seligman, 1982). If the individual explains the outcome in terms of constant or nontransient factors, it is believed that the depressive symptoms are to be long lasting. Lastly, if the individual makes a global attribution for a bad event the depression is believed to be more pervasive (Peterson et. al, 1982). It is important to note that explanatory styles are not sufficient to determine deficits, but rather, they are risk factors for demonstrating such deficits (Abramson, et. al, 1978).

No literature was found regarding attribution style with foster parents, however, one study attempted to explain attrition rates in workers using attribution styles of insurance agents. Seligman and Schulman (1986) tested the reformulated model of learned helplessness by comparing those with a "pessimistic" (internal, stable and global for bad events) explanatory style with those with an opposing "optimistic" (internal, stable and global for positive events) explanatory style. They examined if those with a "pessimistic" or negative explanatory style would be more predisposed to give up as the rejection inherent in selling life insurance may more profoundly impact this style. In addition they introduced the two explanatory styles into the workplace to examine if either style was more likely to impact performance on the job. Explanatory style was measured using the Attribution Style Questionnaire (Peterson, et. al, 1982). It was believed that more self-esteem deficits and response initiation deficits would be present with those that held the negative style and these deficits would be sustained for longer than those with the optimistic or positive explanatory style. The authors found that those

with a positive explanatory style sold more insurance than those who held a negative style. It was found that explanatory style significantly predicted first year survival as well as productivity for the second half of the year, but not the first half. In addition, those with a positive explanatory style were two times more likely to remain on the job than those with a negative style one year following the start of the study. Because this study was done in a natural work setting, the authors report that they lost some of the control that can be afforded in a laboratory setting. They report that continued future research in naturally occurring settings may help to provide a more clear picture of the process of "giving up in the workplace" (p.838).

Peterson and Seligman (1984) reported that because self-report questionnaires such as the ASQ may seem impersonal while studying attribution, they used causal explanations from 300-word excerpts taken verbatim from individual therapy sessions with individuals presenting for depression. Transcripts were used from the beginning, middle, and end of the therapeutic process and were blindly rated on the dimensions of internality, globality, and stability and averaged across explanations offered within the same excerpt. It was found that the explanatory styles for each patient (n=4) were ordered in a manner to strongly support the model with the most internal, global, and stable explanations offered in the beginning session and those that were the least internal, stable, and global offered at the concluding session. These results suggest that the use of the ASQ produces results similar to those of more involved case studies.

This study although completed with a relatively different population, demonstrated many of the same essential qualities of the current study. For example, the pessimistic and optimistic styles were defined in the same manner that the composite scores for both

positive and negative events will be in this study utilizing the Attribution Style Questionnaire. In addition, it looked at productivity as well as retention (similar to addressing those dropping out of foster care).

Drawbacks of the reformulated model of learned helplessness have also been pointed out. For example, the helplessness reformulation does not make mention of antecedents to an individual's style (Peterson & Seligman, 1984). It is possible that feelings of helplessness cause an individual to adopt a certain explanatory style rather than the style preceding the feelings of helplessness. Wortman and Dintzer (1978) state that unless it is possible to specify the conditions under which an attribution will be made, the model lacks predictive power and becomes circular.

Although some have questioned Abramson et. al's (1978) reformulation (Wortman & Dintzer, 1978), it has been used in numerous studies producing consistent results, influencing the way researchers have looked at attribution and learned helplessness. In sum, both the old and the reformulated model of learned helplessness help to explain why individuals react to situations in different manners. In addition, the reformulated model attempts to explain how and why the explanation of uncontrollability transfers to new situations (Greer & Wethered, 1984).

Summary

Despite an overflowing system and periodic attention drawn to the negative outcomes of foster care, foster care remains a poorly studied and poorly understood social service program (Courtney, 1995). The number of foster parents is declining while the number of foster children is increasing. This study attempts to examine if the declining

number of foster parents may be related to the burnout phenomenon. However, it is apparent that not all individuals "burn-out." It is possible that an exploration of the type of individual that is most likely to burnout may aid in both screening and retention of foster parents. Attribution style is only one way to examine how individuals may view the foster care experience. However, it is one way that has yet to be studied.

CHAPTER III

METHOD

Participants

The current study employed 55 foster parents from a midwestern urban area. The participants were active foster parents and were recruited via a mailing list provided by the child welfare agency in each county included in the study. In order to control for confounding variables, participants did not qualify for this study if they had more than one type of placement currently in their home (i.e. general and kinship). In order to address coverage error, questionnaires were mailed out to all active kinship and general foster parents in the given region. Approximately 567 questionnaires were mailed. Seven questionnaires came back return to sender and three were returned incomplete leaving a total of 557. Fifty-five questionnaires were returned with a response rate of approximately 10%. It is acknowledged that this response rate is low. From previous conversations with child welfare supervisors, the return rate was expected to be somewhat low, however, the actual return rate was surprisingly low. Steps were taken to increase responses including numerous phone calls and consultations with supervisors of the child welfare agencies and follow up post cards to all foster parents. The number of counties sampled was continually increased in an attempt to increase the number of respondents, however, all attempts were unsuccessful. Upon further exploration with

child welfare supervisors it was suggested that it is possible that the participants did not believe that an "outsider" would be able to help them as they have seen little results with the information they have provided to individuals within the agencies themselves.

In order to examine if the sample that participated in this study was representative of the foster parent population in the given region, the researcher made numerous attempts with various individuals within the region to obtain basic demographics on this population. It was discovered that demographic information kept in these counties is on the children and the information received on the foster parents was too minimal to be descriptive of the counties as a whole. When compared to previous studies, the demographics of this study were similar to those previously reported. Denby et. al (1999) reported that approximately one half of the foster mothers in their study were between the ages of 41 and 60. Forty-nine percent of the mothers in this study met the same criteria. Additionally, fifty-six percent of the foster parents were married in both the current and the Denby et. al (1999) studies and this same percentage mirrored results found in the Scannapieco et. al (1997) study. Annual income was similar in that 45% of the Denby et. al (1999) study earned \$29,999 or less annually compared with 36% of the current population sampled. Berrick et. al (1994) found that general foster parents overall averaged a higher income than kinship foster parents and this was found in the current study as well. One significant difference was found in that the race of the current sample was predominately Caucasian, while other races were more fully represented in the Scannapieco et. al (1997) and the Denby et. al (1999) studies.

Ages of participants in this study ranged from 24 to 77 years of age. Years as a foster parent ranged from 1 month to 42 years. The majority (74.6%) of foster parents

have been fostering for 5 or fewer years, with 16.4% of foster parents fostering for 5-10 years and 7.2% fostering for more than 10 years. The type of foster care was fairly evenly split (40% kinship and 60% traditional). Race was predominately Caucasian and gender was predominately female, (89.1% female). In addition, the majority of foster parents were currently married (67.3%) and working outside of the home (76.4%) with the majority (51%) making over \$40,000 per year combined income. Levels of education varied from some high school to degrees beyond a master's degree with the majority of individuals having some college or completing a college degree (54.5%). All but 7.3% of the population had completed high school. As willingness to continue placement was one of the primary interests of this study, participants completed a Likert-type scale rating their willingness to continue placement and were also asked to list their reason for likely discontinuing placements, if they so indicated. It was found that 45.4% of the sample indicated they were somewhat likely or very likely to continue placements and 34.6% of the sample indicated they were somewhat unlikely or very unlikely to continue to offer placements. Approximately 20% of the sample endorsed that they were unsure if they were going to continue to offer placements. The free responses solicited from those that were somewhat or very unlikely to continue placement, resulted in seven categories: having a foster child was too physically/emotionally draining (30%), the "system" was too difficult to work within (20%), their own age was becoming a factor (15%), concerns related to biological family (10%), the foster parent only wanted a certain child (10%), they did not have enough room in their home (10%), and having a foster child resulted in too much of a financial strain (5%). Demographics for age, race, and willingness to continue placement are demonstrated in Table 2.

Variable	Frequency	Percentage	
Age	. <u></u>		
20-30	6	10.9%	
31-40	14	25.5%	,
41-50	20	36.4%	
51-60	11	20.0%	
61-70	3	5.5%	
71-80	1	1.8%	
Race			
African American	7	. 12.7%	
Asian American	· · 1	1.8%	
Caucasian	41	74.5%	
Native American	6	10.9%	
Hispanic	0	0%	
Willingness to Continue		· · ·	
Very Likely	17	30.9%	
Somewhat Likely	8	14.5%	
Unsure	11	20.0%	
Somewhat Unlikely	5	9.1%	
Very Unlikely	14	25.5%	

Demographic Information

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Instruments

Demographic Questionnaire

Demographics such as age, gender, race, years of experience as a foster parent, level of education, income, and marital status were collected, as well as the number of children currently living in the home (biological and foster). The demographic questionnaire also consisted of questions designed to assess the type of placement that the participants were providing as well as the foster parent's willingness to continue foster placement, if an opening in their home should occur. The question was scored on a Likert type scale of 1 (very likely to continue) to 5 (very unlikely to continue). Those who answered with a 4 (somewhat unlikely to continue) or a 5 (very unlikely to continue), were asked to provide a brief explanation for why they believe they will no longer continue to foster.

Maslach Burnout Inventory (MBI)

The Maslach Burnout Inventory (Maslach & Jackson, 1986) was designed to measure burnout in the three aspects of emotional exhaustion, depersonalization, and reduced personal accomplishment. The MBI is the leading measure of burnout currently being used (Maslach, Jackson, & Leiter, 1996). Maslach, Jackson and Leiter (1997), report that their initial research on burnout involved field observations of employees in a wide variety of human service professions, interviews, and surveys. They believe burnout is an individual stress experience embedded in social relationships that involves the person's conception of both self (personal accomplishment) and others (depersonalization).

The MBI consists of 22 items that are divided into three subscales. Each of the three subscales is computed separately and a total score is not calculated. The inventory takes approximately 10-15 minutes to complete and is self-administered. The test form is labeled MBI Human Services Survey rather than the Maslach Burnout Inventory in order to minimize the reactive effects of personal beliefs and expectations related to burnout (Maslach, Jackson, & Leiter, 1997).

The questions are designed to assess the three dimensions in regards to the individual's relationships with others. Burnout is measured on a continuum from a low degree to a high degree of burnout. The term "recipients" is used to describe those for whom the individuals in the human service position provide services, such as foster children in this study. The items are presented in the form of statements about personal beliefs ("I don't really care what happens to some of my recipients"). The participants are then asked to rate their answer on a 7-point scale ranging from 0 (never) to 6 (everyday). As several of the questions on this inventory refer to an individual's feelings about their "work" or "job", the researcher requested and received permission from the publishing company to modify the questionnaire. The modification consisted of replacing the words "work" or "job" with "foster parenting" and "recipients" with "foster child/children."

Internal consistency was estimated using Cronbach's coefficient alpha. The reliability coefficients for the subscales are as follows: .90 for Emotional Exhaustion, .79 for Depersonalization, and .71 for Personal Accomplishment (Maslach, Jackson, & Leiter, 1997). Leiter & Durup (1996) report that the test-retest reliability of the Maslach

Burnout Inventory has shown to be stable over time with correlations ranging from .50 to .82 over a time frame of three months to one year.

Convergent validity was examined in three ways. First, individuals' MBI scores were compared with behavioral ratings from a person who knew the individual well. The validity was also examined by looking at various job characteristics and experienced burnout. For example, with a sample of public contact employees it was found that when caseload increased scores increased on emotional exhaustion and depersonalization and decreased on personal accomplishment (Maslach & Jackson, 1984.) Finally, the MBI scores were correlated with measures of various outcomes that have been hypothesized to relate to burnout. The MBI manual does not give the full extent of the correlations.

Attributional Style Questionnaire (ASQ)

The Attributional Style Questionnaire (Peterson, Semmel, von Baeyer, Abramson, Metalsky, & Seligman, 1982) is a self-report instrument that was designed to measure the way in which an individual ascribes causal explanations for both good and bad events. The ASQ has been used predominantly as a research tool to study depression, however, Tennen and Herzberger (1986) have illustrated that it can be applied to research on topics such as achievement motivation, self-esteem, responses to aversive life events, and parental behaviors, to name a few. The questionnaire consists of 12 different vignettes. Half of these vignettes are designed to assess explanations for good events and half are designed to measure explanations for bad events. Participants are asked to generate a cause for a given scenario such as "You become very rich" or "You can't get all of the work done that others expect of you," and then rate the cause along a seven point scale.

Each scenario has four questions. The first question is one that will allow the participant to clarify within themselves what the major cause of the event was; this question is not scored. The remaining three questions produce explanatory styles for good and bad events among each of the three causal dimensions (internal vs. external, global vs. specific, and stable vs. unstable). For each question (dimension) the participant is asked to rate the situation on a 7-point scale that will determine the direction of each of the three dimensions being measured.

The scales show considerable intercorrelation within good events and within bad events. Peterson et. al (1982) reported the psychometric properties of the ASQ when used with 130 undergraduates. The internal reliability of each subscale was estimated using Cronbach's coefficient alpha. The internal consistency of the ASQ was found to range from .44 to .69 with a mean reliability of .54. However, when placed in overall composite scores, reliabilities of .75 for good events and .72 for bad events were found. As a result, Peterson and Seligman (1982) suggest that investigators would be well off to place each individual's results into overall composite scores. In a meta-analysis completed by Sweeney, Anderson, and Bailey (1986), the authors report that the literature regarding the use of composite scores is supportive. They found the internal, stable, and global dimensions for negative events was supported in the literature as a whole, as well as finding the appropriate negative correlation for internal, stable, and global styles for positive events.

A composite score for explanations of bad events (CoNeg) is obtained by summing the participant's score on the three dimensions for the bad event. In addition, a composite score for good events (CoPos) is obtained by summing the participant's scores

for the good events. Finally, a full-scale score (CPCN) is derived by subtracting the composite score for bad events from the composite score for good events.

The CPCN is one of the most reliable and valid means to predict outcomes (Peterson, et. al, 1982). The scores can range from minus 18 to positive 18. For this study, the composite score will be utilized to classify those with a more negative style (internal, stable, and global for bad events) and those with a more positive style (internal, stable, and global for positive events). Those scoring on the negative end of the axis will be classified as having a more negative attribution style while those scoring on the positive end will be classified as having a more positive attribution style.

The measure was developed on 145 introductory psychology students. Upon initial analysis it was found that 3 of the 12 events produced low variance in ratings and itemtotal correlations and they were rewritten to compose the current 12 hypothetical situations (Peterson, et. al, 1982). A correlational approach has been used in order to demonstrate the criterion validity of the ASQ. In an unpublished manuscript, Peterson, Bettes, & Seligman (1982) report that college students were asked to write about the two worst events that have happened to them within the past year and then complete the ASQ. The individuals provided responses that could be coded along the dimensions represented in the ASQ. The results indicated that correlations between the spontaneous explanations and the relevant scales on the ASQ ranged from .19 (p<.10) to .41 (p<.001) with the locus and composite scores demonstrating the strongest association. A second study demonstrated construct validity for the ASQ in that both spontaneously generated attributions and theoretically relevant symptomatology were tapped when the ASQ was given to a patient population. Depressed individuals' explanations for seeking treatment

and for experiencing symptoms correlated with a composite score for negative events on the ASQ, and both attribution measures correlated with depressive symptoms measured by Beck's (1967) Beck Depression Inventory (Tennen & Herzberger, 1986).

Procedures

Self-report data were obtained from active foster parents in a midwestern urban area. The supervisor of the child welfare agency in each county used was contacted in order to assess their willingness to have their agency participate in the study. Upon consent, the researcher visited each supervisor, explained the nature of the study, and left all materials with the supervisor. Each agency then placed printed labels on the outside of each packet and mailed out the packets from their agency to add an additional level of confidentiality so that the researcher did not have access to the names of the foster parents. Envelopes with prepaid postage were included and addressed to the researcher to assure that each agency did not have individual information for each of the foster parents in their county. Each individual received a packet with a letter describing the study (Appendix A), an informed consent form (Appendix B), a demographic questionnaire (Appendix C), the Maslach Burnout Inventory, and the Attributional Style Questionnaire. The order of questionnaires in each packet was counterbalanced. Approximately two weeks following the initial visit, the researcher made a follow-up call to each supervisor in order to assess if they had any questions or concerns regarding the study. Approximately one month following the distribution of the original questionnaires, reminder postcards were created and distributed in the same fashion as the original questionnaires.

The statistical analyses for the following research questions are stated below.

- Question #1: Is there a relationship between attribution style of foster parents and their reported degree of burnout?
- Question #2: Is there a difference in attribution style between those willing to continue accepting placements and those not willing to continue accepting placements?
- Question #3: Is there a difference in level of burnout between those willing to continue accepting placements and those not willing to continue accepting placements?
- Question #4: Do foster parents involved in kinship placements differ in their level of burnout from those who are involved in general foster care placements?
- Question #5: Do foster parents involved in kinship placements differ in their attribution style from those who are involved in general foster care placements?

Research question #1 was answered using a multiple regression analysis with the variables of attribution style and the three subscales of burnout. Research question #2 was answered using a one way Analysis of Variance (ANOVA) in which the composite attribution style was the dependent variable with the participants' willingness to continue placement as the independent variable. A one way ANOVA was also run for research question three. For question three each subscale of burnout was the dependent variable and willingness to continue the independent variable. T-tests were run for research

questions four and five looking at differences between burnout and type of foster care and attribution style and type of foster care, respectively.

CHAPTER IV

RESULTS

Introduction

The purpose of this chapter is to present the results of the statistical analyses utilized in this study. The aim of this study was to examine the attribution styles of foster parents and how these styles relate to levels of burnout in kinship and traditional foster parents as well as current willingness to continue placements for foster children. The data was derived from participants' scores on the Maslach Burnout Inventory (Maslach & Jackson, 1986), the Attribution Style Questionnaire (Peterson, Semmel, von Baeyer, Abramson, Metalsky, & Seligman, 1982), and a Likert-type scale on a demographic questionnaire. Examples of each questionnaire are listed in the Appendices. The procedure included obtaining data via mail-out surveys. The population was provided by child welfare agencies in one midwestern area. Confidentiality was maintained as the service directly mailed out inventories without the researcher having access to the names of any individuals.

A regression analysis was performed to test for the relationship between attribution styles and the subscales of burnout. A one way analysis of variance (ANOVA) was run to examine the differences between attribution style and willingness to continue placements and also level of burnout and willingness to continue placements. T-tests

were used to look at level of burnout and type of foster care as well as attribution style and type of foster care.

Table 3 represents the descriptive statistics for each of the three measures; the MBI, the ASQ, and the Likert-Type willingness to continue question.

Table 3

Means and Standard Deviations of the Maslach Burnout Inventory, The Composite Score for the Attribution Style Questionnaire, and Willingness to Continue

Scale	N	Min.	Max	Mean	SD
Maslach Burnout Inventory					
Emotional Exhaustion	55	.00	42.00	13.64	10.36
Reduced Personal Accomp.	55	19.00	48.00	40.38	5.96
Depersonalization	55	.00	12.00	2.72	3.20
Attribution Style Questionnaire					
Composite Score	55	-2.50	14.83	4.36	3.80
Willingness to Continue	55	1.0	5.00	2.84	1.58

For the variables of emotional exhaustion and depersonalization the lower the number means the lower the chance of an individual feeling overextended and/or

exhausted from being a foster parent or the lower the chance they will be unfeeling and impersonal with their foster children.

The third subscale of burnout is reduced personal accomplishment. This subscale is reverse scored and those that have a higher score fall into the lower range of reduced personal accomplishment and are less likely to have an impersonal response towards their foster children.

Internal consistency for the MBI and each of the subscales of burnout was estimated by using Cronbach's coefficient alpha. The reliability coefficients for each of the subscales were as follows: .85 for Emotional Exhaustion, .64 for Decreased Personal Accomplishment, and .17 for Depersonalization. As with much of the literature reported measuring the reliability of the subscales Emotional Exhaustion had the highest reliability coefficient and Depersonalization was the lowest. The low reliability coefficient for depersonalization may be due to the fact that only five items are loaded into this scale compounded by the relatively low number of respondents in this study. The reliability coefficient for the full scale was .662.

The possible range for the Attribution Style Questionnaire is from -18.00 to 18.00. Those that score on the lower end of the continuum are likely to have a more negative attribution style. Finally, those who score a higher number on the Willingness to Continue Placement Scale (5=Very unlikely to Continue) are less likely to continue placements than those that score on the lower end.

Research Questions

Research Question One

Is there a relationship between attribution styles of foster parents and their reported degree of burnout?

This question was evaluated using standard multiple regression examining attribution style and each subscale of burnout. The relationship was found to be significant, R=. 382, F(3,51) = 2.897, p = .044. Approximately 15 % (R square = .146) of the variability in attribution style was accounted for by this predictor set. The results of the regression analysis are shown in Table 4.

Table 4

	R	R^2	F	Sig.
Regression	.382	.146	2.897	.044*

Regression Analysis for Subscales of Burnout and Attribution Style

Predictors: EE, DEP, PA

The relationships between emotional exhaustion and attribution style as well as reduced personal accomplishment and attribution style were found to be insignificant. However, a significant inverse relationship was found between depersonalization and attribution style. This inverse relationship suggests that as individuals endorse a more positive attribution style, they demonstrate a decreasing degree of depersonalization. Alternatively, as attribution styles become more negative, depersonalization may increase. It is important to note the results obtained from this given population resulted in a range restriction. Surprisingly, 91% of the responding sample endorsed an attribution style that was positive (range = -2.50 to 14.83). Very few (9%) of the population endorsed a negative attribution style. Table 5 displays the Pearson product moment correlation coefficients.

Table 5

Pearson Product Moment Correlations

	CPCN	EE	DEP	PA	
CPCN	1.0	a r 1 a			
EE	.026	1.0			
DEP	326	.390	1.0		
РА	.170	215	216	1.0	

CPCN= Overall Composite Score for Attribution Style, EE = Emotional Exhaustion, Dep. = Depersonalization, PA = Reduced Personal Accomplishment

Research Question Two

Is there a difference in attribution style between those willing to continue accepting placements and those unwilling to continue accepting placements?

This question was evaluated using a one way analysis of variance. No variable was found to be significant, F (4,50) = 1.065, p= .384. The results suggest that there is no difference in attribution style of foster parents based on willingness to continue placement. Seventeen individuals stated that they were willing to continue placement (attribution style mean of 4.61 and standard deviation of 3.56), 8 were somewhat likely (mean of 2.42, SD of 2.40), 11 participants were unsure (mean of 5.95, SD of 3.98), 5 were somewhat unlikely (mean of 4.00, SD of 4.94), and 14 participants were very unlikely to continue accepting placements (mean of 4.05, SD of 4.22). The possible range of scores for this questionnaire is -18 to 18 and for this administration the range was -2.5 to 14.83.

Table 6

One-Way Analysis of Variance Comparing Willingness to Continue Accepting

Placements and Attribution Style of Foster Parents							
Source	SS	<u>df</u>	MS	<u>F</u>	p		
Between Groups	61.239	4	15.310	1.065	.384		
Within Groups	718.803	50	14.376				
Total	780.042		i.				

Dependent Variable = CPCN

Research Question Three

Question #3: Is there a difference in level of burnout between those willing to continue accepting placements and those unwilling to continue accepting placements?

With the variables of willingness to continue placement and the three subscales of burnout, this sample resulted in no significant relationships using a one-way ANOVA between depersonalization and willingness to continue placement, F (4, 50) = .767, p = .552. No significant results were found with respect to reduced personal accomplishment and willingness to continue placement, F (4, 50) = .554, p= .697. A significant difference was found with respect to emotional exhaustion and willingness to continue placement, F (4, 50) = .554, p= .697. A significant difference was found with respect to emotional exhaustion and willingness to continue placement, F (4, 50) = 3.227, p = .020. Follow-up Scheffe' tests revealed no significant differences. However, due to the restricted range of responses and the small sample size, the relationship between those very likely and those very unlikely to continue placement with regard to emotional exhaustion bears further attention as the difference between the two variables approached significance at p = .059.

The number of participants stating that they were willing to continue placement in this study was seventeen. For emotional exhaustion, individuals who were willing to continue had a mean score of 10.18 and a standard deviation of 5.95. The depersonalization subscale resulted in a mean of 2.59 with a standard deviation of 3.08, and personal accomplishment resulted in a mean of 41.00 and a standard deviation of 5.70. Eight individuals stated they were somewhat likely to continue. The scores for this category are as follows: emotional exhaustion- mean of 13.25 and standard deviation of 10.43, depersonalization- mean of 1.75 and standard deviation of 1.67, and personal

accomplishment had a mean of 40.00 and a standard deviation of 5.61. The eleven participants who stated they were unsure if they were willing to continue accepting placements scored as follows: emotional exhaustion- mean of 12.91 and standard deviation of 8.99, depersonalization- mean of 2.00 and standard deviation of 2.65, and personal accomplishment- mean of 40.82 and standard deviation of 1.92. Five individuals stated they were somewhat unlikely to continue accepting placements. Their scores were as follows: emotional exhaustion- mean of 7.00 and standard deviation of 11.89, depersonalization- mean of 4.0 and standard deviation of 5.10, and personal accomplishment- mean of 42.8 and standard deviation of 1.92. Finally, 14 individuals stated they were very unlikely to continue accepting placements. Their scores were as follows: emotional exhaustion- mean of 1.92. Finally, 14 individuals stated they were very unlikely to continue accepting placements. Their scores were as follows: emotional exhaustion- mean of 21.00 and standard deviation of 12.11, depersonalization- mean of 3.57 and standard deviation of 3.65, and personal accomplishment- mean of 38.64 and standard deviation of 7.74. The maximum and minimum ranges for all subscales are listed in Table 3.

Willingness to continue was also looked at in relation to many other factors such as age, race, number of other children in the home (biological/step and foster), years as a foster parent, type of foster care, level of education, and employment outside of the home. No variables were found to be significant.

One-Way Analysis of Variance Comparing Willingness to Continue Accepting

DV	SS	DF	MS	<u><u> </u></u>	p
Emotional Exhaust	ion				
Between Groups	1189.85	4	297.462	3.227	.020
Within Groups	4608.88	50	92.178		
Total	5798.73	54			
Depersonalization					
Between Groups	31.86	4	7.966	.767	.552
Within Groups	519.05	50	10.381		
Total	550.91	54			
Personal Accompli	shment		•		
Between Groups	81.33	4	20.333	.554	.697
Within Groups	1833.65	50	36.673		
Total	1914.98	54			

Placements and Subscales of Burnout

Research Question Four

Do foster parents involved in kinship placements differ in their level of burnout from those who are involved in general foster care placements?

No significant differences were found for emotional exhaustion, depersonalization, and personal accomplishment when compared to type of foster care using an independent sample t-test as shown in Table 8. The results suggest that individuals who are involved in kinship foster care placement do not significantly differ from those who are involved in general foster care with regards to their level of burnout.

<u>T-Test for the Comparison of the Subscales of Burnout of Kinship and General Foster</u> <u>Parents</u>

Source	N	Mean	SD	Std. Error of the Mean	` t	df	p
Emotional Exhausti	ion						
Kinship	22	13.737	11.280	2.405			
General	33	13.576	9.883	1.721			
Equal Variance assu	umed				.053	53	.958
Depersonalization							
Kinship	22	3.273	3.330	.709			
General	33	2.364	3.101	.540			
Equal Variance ass	umed				1.035	53	.305
Personal Accomplis	shment						
Kinship	22	39.046	6.966	1.485			
General	33	41.273	5.095	.887			
Equal Variance ass	umed				-1.370	53	.177

Research Question Five

Do foster parents involved in kinship placements differ in their attribution style from those who are involved in general foster care placements?

The results from this sample did not reach significance regarding differences

between the attribution style of kinship and general foster parents as shown in Table 9.

Source	N	Mean	SD	Std. Error of the Mean	t	df	р
Positive-Negative Composite Score							
Kinship	22	5.106	3.59	.7661			
General	33	3.836	3.91	.6802			
Equal Variance assu	med				1.19	53	.238

T-Test for the Comparison of Attribution Styles of Kinship and General Foster Parents

Summary

Chapter Four presented a summary of the statistical analyses used to examine the areas of interest in this study. The results of this study may suggest that in this given population, an inverse relationship exists between depersonalization and attribution style. Although significant, this result should be interpreted with caution due to the restricted range of attribution style that individuals endorsed during this administration. The results also suggest that the burnout subscale of emotional exhaustion and willingness to continue placement are significantly related. The remainder of the analyses resulted in accepting the null hypotheses. Possible conclusions drawn from the analyses will be discussed in the following chapter.

CHAPTER V

SUMMARY, DISCUSSION, IMPLICATIONS AND LIMITATIONS, AND RECOMMENDATIONS

This chapter consists of four sections. The first section will review and summarize the purpose of the study as well as participant selection. The next section will include results obtained from the current study as well as a discussion of the findings. The third section will discuss the implications for theory and practice that this study may have for future researchers, social service workers, and foster parents including its limitations. The final section will include recommendations for future study.

Summary

The purpose of this study was to examine the attribution styles of foster parents (both kinship and traditional) and how these styles may relate to the subscales of burnout as well as their willingness to continue placement. Current research is reporting that the number of available foster homes is decreasing while the number of children in need of placement is increasing (CWLA, 1998). In many situations it is imperative that children be placed in an environment other than their biological home, and foster homes have been a resource for these children. Without this valuable resource children in need of such supervision or those responsible for their well being may be hard pressed to find alternatives. In addition, if those who are continuing to foster are being affected

emotionally by their role as foster parents (i.e. experiencing burnout), the children in their homes may not receive the support that they otherwise could have benefited from. The aim of this study was to look at only a small number of factors that may be contributing to the declining number of foster parents.

The participants in this study were 55 active foster parents from one midwestern region. After obtaining consent from each area supervisor the subjects received packets informing them of the study and requesting their participation. The participants were either active kinship foster parents or active traditional foster parents. Overall composite attribution scores were looked at for the individuals, as this is the most reliable predictor of attribution style. All were asked to complete the ASI, a demographic questionnaire including a Likert-type question regarding their willingness to continue placement, and a modified MBI.

Discussion

A regression analysis, one-way analysis of variance tests, and t-tests were performed to test for significant relationships or differences between various groups. A significant difference was found with respect to the predictor set comprised of the subscales of burnout and attribution style. Upon further evaluation, it was revealed that an inverse relationship existed in this sample between depersonalization and attribution style, which may have contributed to the significance in the predictor set. No significant differences were found with respect to attribution styles and foster parents' degree of reported burnout with respect to emotional exhaustion or reduced personal accomplishment. The finding of significance with respect to attribution style and depersonalization appears to

support theory. One may hypothesize that as an individual begins to perceive the events occurring around them as negative, the individual may tend to depersonalize those in their environment. This is an alarming thought in relation to foster parenting. The world of foster parenting has some inherent stressors such as adapting to a new child in the home, learning a new system in which the foster parents now must function, and assuming the day to day responsibility for the well-being of a child that has been removed from his or her biological home for one or more reasons. As frequently occurs when depersonalization increases, a foster parent may adopt a more callous or uncaring attitude towards their foster child and put a significant strain not only on the foster parent and the foster child, but on an integral network of relationships involved in fostering.

No significant differences were found between willingness to continue accepting placements and attribution style. However, a significant difference was found between willingness to continue placement and the burnout subscale of emotional exhaustion. It appears that as individuals endorse a higher degree of emotional exhaustion, they may also endorse a higher degree of unwillingness to continue placement. As Cordes and Dougherty (1993) reported, if one feels that all of their resources have been utilized, then they may feel as if they can no longer give themselves to others. It may be hypothesized that if those that become emotionally exhausted are those who choose to discontinue placement, early intervention may contribute to reduced symptoms. As a result, the retention rate of foster parents may increase if these symptoms can be targeted and dealt with appropriately.

Kinship and traditional foster parents revealed no significant difference in their levels of burnout or their attribution style. This was somewhat expected because it is not

uncommon for those who accept kinship placements to have little or no contact with the given child prior to the child's arrival at their home. Perhaps those who offer to become foster parents tend to have the same attribution style so there would not be a significant difference between the two types of foster parents. Further, if the attribution styles are not significantly different, and one were to assume that attribution styles are related to burnout then one may assume that burnout levels would not be found to differ significantly. In summary, one might assume that in the current study, kinship and traditional foster parents have a relatively equal level of burnout (or lack of) as well as similar attribution styles.

Implications and Limitations

The implications for foster parents can be either very positive or somewhat worrisome. If this sample is a representative sampling of the foster parent population in general, it appears as if burnout is not effecting their lives with the exception of emotional exhaustion and willingness to continue placement. It is important to consider the high number of individuals that did not respond to the questionnaires. Among many other things, one possible reason could be their lack of faith in the "system." As one supervisor told me, "They (the foster parents) may be thinking, 'We've already tried, this won't help" with regards to providing information about fostering to an unknown researcher. If this sample, for some reason, underrepresented their current level of burnout, it would be very unfortunate. Unacknowledged emotional strain or difficulties relating to the children in their homes could become problematic not only for the foster parents, but for the children as well. Many of these children have already been hurt by adults that did not handle emotional difficulties in appropriate ways. On the other hand,

it may be hypothesized that those who choose to foster children have effective coping styles and don't feel many of the strains of fostering that others are able to verbalize.

Unfortunately, this study may not have created a welcome environment to voice such feelings. The researcher was unknown to the participants and the topic was somewhat sensitive. For example, foster parents may have been concerned that if they were open regarding the levels of distress they were currently feeling, the placement of their current foster child may have been jeopardized. This possible fear was expressed with the author's interactions with an individual foster parent in that she was concerned that the current research was too personal and that the questionnaires appeared to pertain to neither burnout nor attribution style. Further, a relatively similar number of foster parents endorsed that they were willing to continue versus those that were unwilling to continue. Is it possible that acknowledging that they are unwilling to continue feels less threatening than acknowledging negative perceptions or emotional strain? Alternatively, it is possible that the current research did not encompass all factors that are contributing to the decreasing number of foster parents.

The low response rate also deserves further attention as the low number increased the effect size of the study, thereby decreasing its power. As with all studies, the results of this study are only generalizable to this sample of midwestern foster parents in the continental United States. Further study needs to be completed to explore if this population is representative of the foster parent population at large as well as to determine influences that may have caused a low response rate. During numerous conversations with county and regional supervisors, I was informed that the low response rate was not uncommon. Several of the supervisors expressed the same general theme

encompassing the idea that the foster parents may believe that things have not changed for them in the past despite them voicing their opinions. After all, why should foster parents believe that a student would be able to change, must less improve, their current situation? Although this may be common for this population, it may have affected the outcome of this study as those who may be experiencing higher levels of burnout or those who have a more negative attribution style may have chosen not to respond to the questionnaires.

The implications for social service workers leads to the need for further exploration of why the number of foster parents is steadily declining. It is hypothesized that this research touched the foster parents in different ways. Many individuals included hand or typewritten notes to the researcher. Some notes included messages of frustration centering on not feeling as if they have been heard in the past. Some notes were expressing gratitude to the researcher for attempting to learn more about foster parenting and the current state of the foster care system. Finally, another note was written stating that the researcher was not asking the right questions to find out about the current stressors of foster care. This last example may be exactly what needs to be addressed in the current system. It was not possible to follow up with what the right questions would be as confidentiality was assured and the researcher did not have access to that individual's information. With such a dramatic decline in the number of foster parents, perhaps our first priority should be to determine what the "right questions" are.

The implications for Counseling Psychology are many. Those in the field of mental health continually see the results of unhealthy coping styles. If an adult is experiencing burnout, Maslach, Jackson, and Leiter (1996) state that common difficulties that could

arise from burnout are physical exhaustion, insomnia, increased use of alcohol, and marital and family problems. If this adult is also a foster parent, the foster child may be significantly affected by such behaviors. If the results of this study are representative of the general population, mental health professionals may take comfort in the suggestion that foster parents are not "burning out." They must, however, consider other alternatives for the decline in the number of foster parents willing to continue their participation in foster care. As it is possible that we may see these individuals in treatment, as well as the children, it is important to consider not only the varying stressors of being a parent, but the possibility of increased stressors that go along with being a foster parent.

Future researchers have much to consider if investigating this issue further. If the response rate of this study is typical, as reported by child welfare workers, it is important to investigate other avenues for data collection. From hand written notes received in this study, it appears that some foster parents want to be heard. This was also demonstrated by several foster parents who called the researcher after receiving the follow-up post card to confirm that the researcher received their information (even though no identifying information was placed on the forms). Still others chose not to respond regardless of the number of attempts. Possibly an in depth ethnographic study incorporating the views of a smaller number of foster parents may provide a broader scope of information.

It appears that, in this sample, there is not a certain attribution style that will guide one in evaluating an individual for the chance of burnout. Further, this sample endorsed a more positive attribution style than expected. Perhaps, this is due to the perceived sensitivity of the questionnaires, as reported by one participant, and a resultant

unwillingness on the part of those with a more negative attribution style to complete the surveys. As burnout and unwillingness to continue placement could appear to be events that stem from negative perceptions, it is reasonable to assume that a sample such as this will not demonstrate high levels of either.

The foster parents sampled represented a relatively young (with regard to years of foster parenting) group. It is possible that they had not reached the same level of burnout that those who have been fostering longer may reach. The results were obtained from one point in time. A longitudinal approach may be beneficial in assessing burnout and attribution style as well as willingness to continue over time. The results suggest that a significant number of foster parents endorsed that they are unwilling to accept another placement, but it appears from this study that unwillingness to continue is not due to either their attribution styles or their current levels of burnout.

Another limitation that should be addressed is the representativeness of the sample studied. There were no Hispanic respondents and the study was limited to one midwestern area. Numerous attempts were made to obtain basic demographics on the population within the given region; however, demographics such as those presented in this study are kept for the children in foster care, but not kept in aggregate for the foster parents. The information that the researcher was able to obtain was too minimal to make any significant comparisons within this sample and the population as a whole, however, as previously noted the current study is reflective of previously reported findings.

A final limitation deals with the questionnaires that were utilized. The results were obtained via participant self-report. In addition, no previous studies were found utilizing these questionnaires with this population, however those in helping professions such as

social work have been studied. Also, the MBI was modified by the researcher. The term (or similar terms) of "work" was replaced with "foster parenting," and although it appears as if this would not have significantly affected the results of the administration, it should be noted as well as the low reliability coefficient obtained from the Depersonalization subscale. Likewise, the Likert type question used to assess willingness to continue has not been validated by previous studies. Finally, relatively few studies have been printed using the attribution style questionnaire with various populations and due to the relatively low reliability of the individual subscales, composite scores were used making it possible that relevant information was lost in not interpreting each individual scale. Also, even though the ASQ has been validated, the unscored free responses for good and bad events may have elicited different responses than if the situation had been real or immediate.

Recommendations For Further Research

As a result of this study, the following recommendations are made:

- Due to the relatively inexperienced foster parenting population obtained in this study, it may be beneficial to interview foster parents at various stages in their fostering career to assess for additional causes for the declining number of those willing to participate.
- 2. Due to the vulnerability foster parents may feel by receiving instruments in the mail from an unknown source, qualitative data obtained from personal interviews may be helpful. These interviews may be key in determining reasons for the declining numbers, including a further exploration of attribution style and level of burnout.

- Results of this study suggest an inverse relationship between attribution style and depersonalization. Further exploration of underlying causes and possible consequences is warranted.
- 4. As the Attribution Style Questionnaire was designed with the model of learned helplessness and depression, it may be interesting to research how foster parents endorsing negative attribution styles score on a depression measure.
- 5. The present study looked at foster parents in one midwestern area. A replication of this study with parents of other types (i.e. biological) would allow for a broader description of this unique population.

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APPENDIXES

APPENDIX A

WRITTEN INSTRUCTIONS TO PARTICIPANTS

Dear Participant,

My name is Kellie Courtney and I am doctoral student at Oklahoma State University. I am conducting a study as part of my degree requirements and have chosen foster parents as my population to study. I have worked closely with foster parents over the last few years and am very interested in the effects that fostering may have on each of you. The purpose of my study is to learn more about foster parents and their experiences. Your participation in this study will assist others in better understanding individuals who accept foster placements as well as educating those that may be involved in the future placements of children. I have chosen to study foster parents because I feel that those individuals who volunteer their time in this manner have much to offer. I have already learned a great deal from those that I have worked with, but I would like to take this opportunity to take a closer look at who volunteers and how they view their experience. Because of the nature of this study, it is important that only foster parents who provide placement for one type of foster child (kinship/relative OR traditional/non-relative) participate. Enclosed in each packet you will find one informed consent form, a demographic questionnaire, and two additional questionnaires. Please do not write your name or any identifying information on any of these forms. Please read and retain the informed consent form first. This form is yours to keep for future reference. Returning the questionnaires in the enclosed return envelope will serve as your consent to participate in this study. Please fill out each form in the packet completely, leaving no answer blank. Your answers will be confidential and no one, including myself, will make any attempt to identify you in any way. The results of my study will be reported as group results and no individual's responses will be reported. The risks of participation in this study are no more than those experienced in daily activity, however, if at any time you wish to withdraw from this study, you are free to do so without any penalty. Should you choose to complete the questionnaires, please return them to me in the enclosed envelope within 10 days. After you have finished completing the forms, please place all of the forms except the informed consent back into the packet and seal the packet before returning it to me. If you have any additional questions after completing the enclosed information, please feel free to contact myself at the number provided in the informed consent, or my advisor, Dr. John S. C. Romans. Thank you for your time and assistance in this project.

Sincerely,

Kellie B. Courtney M. Ed.

APPENDIX B

INFORMED CONSENT

Informed Consent

Thank you for your participation in this study. This study is being completed in an attempt to gain more information regarding foster care and how different people that offer different types of foster care placement experience it. In addition, I am interested in learning how those who are currently providing foster care services feel about continuing to accept placements in the future.

During the course of this study, you will be asked to complete two questionnaires as well as a demographic form in which you will provide some basic background information about yourself. Each of the two questionnaires provided will take approximately 15 minutes to complete. One questionnaire is designed to assess how you currently feel about your experience with foster care. The other questionnaire will look at how you generally respond to various situations.

Your responses will be held in strict confidence and will be destroyed after all analyses have been completed and the study has been concluded. No attempt will be made to identify you- please do not put your name or any identifying information on any of the forms. No one will know your individual responses. Information obtained from this study will be reported as group data with no indication of an individual's response. Your participation in this study is voluntary and if you wish to withdraw from the study at any time you are free to do so without any penalty.

Please follow the instructions as they are listed on each questionnaire. Answer each question to the best of your ability and do not leave any question unanswered. Upon completion, please put all of your completed work in the packet provided except for the informed consent form and the letter describing the study, seal the packet, and then return it to me in the envelope provided. The consent form and the letter describing the study are yours to keep for future reference. Return of the packet will be considered consent for participation.

If you have any questions about this study, please contact me, Kellie Courtney at 405-744-6040, or Dr. John S. C. Romans of Oklahoma State University at 405-744-6350. If you have any questions regarding your right as a research participant, please contact Sharon Bacher of Oklahoma State University's Institutional Review Board at 405-744-5700. To obtain information regarding the results of this study, please contact me or Dr. Romans at the numbers listed above.

I have read the above consent and voluntarily agree to participate in this study.

Signature:

Date:

APPENDIX C

DEMOGRAPHIC QUESTIONNAIRE

Demographic Questionnaire

Please provide the following information and when applicable mark the answer that most accurately reflects you.

Age:	Gender: M F			
Race:	Marital Status:			
(1) African American	(1) Never married, living alone			
(2) Asian, Asian American	(2) Never married, cohabiting			
(3) Caucasian	(3) Currently married			
(4) Hispanic	(4) Currently separated			
(5) Native American, American Indian	(5) Divorced, living alone			
(6) Other (Please specify)	(6) Divorced, cohabiting			
How many years have you been an active for	oster parent?			
	care or general foster care? (Please circle one)			
Number of children currently living in your	home full-time? Foster Biological/Step			
Are you employed outside of your home? _	Number of hours per week			
Level of Education:	Income: (combined household)			
(1) Some high school	(1) Under \$10,000			
(2) High school diploma	(2) \$10,000 to \$19,999			
(3) Some college	(3) \$20,000 to \$29,999			
(4) College degree (BA/BS)	(4) \$30,000 to \$39,999			
(5) Some graduate work	(5) \$40,000 to \$49,999			
(6) Completion of masters degree	(6) Over \$50,000			
(7) Other				

(Please specify)

On the following scale, please rate your current likelihood to accept another foster care placement if an opening were to occur in your home

1	2	3	4	5
Very	Somewhat	Unsure	Somewhat	Very
Likely	Likely		Unlikely	Unlikely

If you answered with a 4 or 5, please briefly indicate your reasoning

APPENDIX D

IRB APPROVAL FORM

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VITA

Kellie Courtney Crowe 2

Candidate for the Degree of

Doctor of Philosophy

Thesis: ATTRIBUTION STYLES AND THE RELATIONSHIP TO BURNOUT IN FOSTER PARENTS

Major Field of Study: Counseling Psychology

Biographical:

Personal Data: Born in Belleville, Illinois, the daughter of Terry and Pat Courtney.

Education: Graduated from Belleville Township High School West, Belleville, Illinois, May 1993; received Bachelor of Science degree in Psychology from Illinois State University, May 1996; received Master of Education degree in Community Counseling from the University of Oklahoma, May 1998. Completed the requirements for the Doctor of Philosophy degree at Oklahoma State University in September 2002.

Experience: Masters Practica; University of Oklahoma, Counseling Psychology Clinic, Norman, OK, Cleveland County Youth and Family Center, Norman, OK. Doctoral Practica; Stillwater Domestic Violence, Stillwater, OK, Family and Children's Service, Inc., Tulsa, Oklahoma, Substance Abuse Treatment Center, Department of Veterans Affairs Medical Center, Oklahoma City, OK. Work Experience; Pauls Valley Day Treatment, Pauls Valley OK, Family and Children's Service Family Sexual Assault Treatment Program, Tulsa, OK, Graduate Assistant, Oklahoma State University, Stillwater, OK. Doctoral Internship; Wilford Hall Medical Center, Lackland Air Force Base, active duty Air Force, American Psychological Association approved predoctoral residency, San Antonio, TX, 9/01-9/02.

Professional Memberships; American Psychological Association, Society for Air Force Psychologists.

Oklahcma State University Institutional Review Board

Protocol Expires: 4/4/02

Date : Thursday, April 05, 2001

IRB Application No ED0195

Proposal Title: ATTRIBUTION STYLES AND THE RELATIONSHIP TO BURNOUT IN FOSTER PARENTS

Principal Investigator(s) :

Kellie Courtney 434 Willard Stillwater, OK 74078 John Romans 325 EE Willard Stillwater, OK 74078

Reviewed and Processed as: Expedited

Approval Status Recommended by Reviewer(s) : Approved

Signaty

Carol Olson, Director of University Research Compliance

Thursday, April 05, 2001 Date

Approvals are valid for one calendar year, after which time a request for continuation must be submitted. Any modifications to the research project approved by the IRB must be submitted for approval with the advisor's signature. The IRB office MUST be notified in writing when a project is complete. Approved projects are subject to monitoring by the IRB. Expedited and exempt projects may be reviewed by the full Institutional Review Board.