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An Investigation of the Informed
Consent Being Rendered Under PL
94-142 on Behalf of Handicapped
Children in Foster Care

by Jane P. McNally

1981

Submitted to the Department of Special Education
and to the Faculty of the Graduate School of
the University of Kansas in partial fulfillment of the
requirements for the degree of Doctor of Philosophy

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RENDERED UNDER PL 94-142 ON BEHALF OF
HANDICAPPED CHILDREN IN FOSTER CARE


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Jane P. McNally

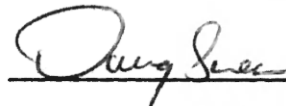
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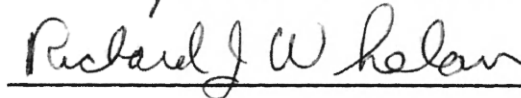
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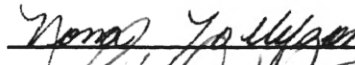
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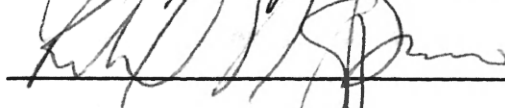

Chairperson













For the Department

Dissertation defended: July, 1981

ABSTRACT

The purpose of this investigation was to examine the level of accuracy and agreement of social worker and foster parent representatives of handicapped foster children with respect to their understanding of eight Local Education Agency (LEA) Team special education decisions. The accuracy and agreement of these representatives were examined under four quasi-experimental conditions of representative involvement: when both, neither, or either of the two representatives had been involved in the foster children's last IEP staffing. Subjects consisted of 96 sets of social workers and foster parents in two states, Kansas and Massachusetts. Procedures consisted of conducting face-to-face interviews with subjects in order to obtain their responses regarding the eight LEA Team decisions of: (a) classification, (b) eligibility, (c) program placement, (d) IEP goals, (e) IEP objectives, (f) responsibility for service delivery, (g) frequency of service delivery, (h) duration of service delivery. Three sets of survey instruments were developed and field tested for this study. Recordings of subject responses were obtained and scored for accuracy and agreement of the two sets of representatives.

The foster care representatives' responses were compared to those of a control group of natural parent subjects who were matched according to the LEA of the handicapped children under Condition 4, both representatives involved in the last IEP staffing.

Results showed significant disagreement between social worker and foster parent on five LEA Team decisions under the four conditions of representative involvement. Six significant results were obtained

with respect to social worker and foster parent accuracy under the four conditions.

Comparisons between the foster care representatives and the natural parent representatives revealed significant differences between the two groups in terms of the magnitude of their accuracy and their agreement across the eight LEA Team decisions.

The investigator concluded that the special education representation of the handicapped foster children examined in this study lacked the consistency in agreement and accuracy that is necessary for informed consent to be rendered on their behalf.

ACKNOWLEDGEMENTS

Because of the scope of this study, the assistance of numerous individuals was critical to its successful completion. Sincere appreciation is expressed to the following individuals for their contributions to this investigation:

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Special acknowledgement is due the members of the author's Dissertation Committee. Dr. Don Baer, Minor Advisor, was both helpful and supportive over the past four years. Dr. Richard J. Whelan and Dr. Richard Spano generously served as Committee Members, offering helpful critiques on

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DEDICATION

For E.B.S., whose patience and friendship endured even a doctorate,
For S.A.T., who prodded the author to keep at her "little work," and
For the late J.J.M. and E.M.M., whose love and nurturing made all the
difference, and who would have been amused and proud.

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CHAPTER 1

INTRODUCTION

BACKGROUND OF THE PROBLEM

In 1909, the first White House Conference on Care of Dependent Children presented figures estimating that some 176,000 children had been removed from or surrendered by their parents for alternative care and maintenance (Gruber, 1978). Figures for 1979 revealed that over 500,000 children in the United States were in foster care. Projected figures for the 1980's posit an even greater increase in the number of minor children who will be involved in foster placement (Horejsi, 1978).

Factors that precipitate removal of a child from the natural family are both myriad and complex, involving dynamics that effect the family unit and society at-large. The concept of the family as a self-sufficient entity is no longer a reality in American society today. The extraordinary stresses that stack the odds against the independent functioning of certain family units have been described again and again (Keniston, 1977). Research findings in the field of social welfare suggest that three factors were most frequently associated with the subsequent removal of a child from the natural family setting. These factors are: (a) mental illness of the parent, (b) neglect, abuse, or inadequate home conditions, and (c) divorce or desertion of the parent(s) (Fanshel, 1978; Ferleger, 1978; Gruber, 1978; Vasaly, ACYF, 1976). While today American families are generally subject to economic and psychological strain, such strain is felt most keenly by families that are poor, that are non-white, or that have handicapped children (Arkava, 1977; Glieman & Roth, 1978).

The presence of a handicapped child in a family creates additional economic and psychological strain upon the unit. It also increases the probability of the three above-mentioned high-risk factors that have been identified as necessitating removal of a child from the home. Thus, the handicapped child runs an increased risk of being removed from the natural family, either by voluntary action of the parent, or by court order.

Family stress and economic instability are not the only conditions, however, that have been instrumental in contributing to the increased numbers of handicapped children in foster care. Within the special education and mental health professions, the deinstitutionalization movement has been effective in calling for the removal of handicapped children from institutionalized environments and for the subsequent placement of such children within more normalized living arrangements (TASH, 1979; Wolfensberger, 1972). Recent Legislation such as the Developmental Disabilities Act of 1975, the Title XX social Security Act, Section 504, and PL 94-142 all have called for educational and living arrangements within the least restrictive environment. A significant number of professionals from the fields of special education, law, and social welfare have strongly supported service delivery models which facilitate integrated community living, viewing such models as preferable to the institutional model for delivery of services (Blatt, 1977; Blatt, Bogdan, Bilken & Taylor, 1977; Brown, Wilcox, Vincent, Dodd & Gruenwald, 1977; Gilhool, 1976; Larsen, 1974). Furthermore, recent court decisions such as Wyatt v. Ireland (1980) have upheld the concept of Least Restrictive Environment. As a result, parents of handicapped children have looked to the community and its

local agencies to provide less restrictive residential and educational services to their children. In many states, foster care - both family and group care - is being viewed as a service delivery model for replacing institutionalization, and for providing more normalized living or educational environments. Thus, the number of handicapped children in foster care may be expected to rise due to (a) the increasing numbers of families who are placed at additional risk by their handicapped child, and (b) the growing propensity of special education, mental health and legal personnel to view foster care placement as a viable alternative for providing residential and educational services within a less restrictive environment.

While special educators are looking to foster care as an alternative to institutionalization, research within the field of human services and child welfare has strongly suggested that foster care should not be considered a panacea for the ills of institutionalized living conditions (Fanshel, 1978; Garret, 1977; Goldsten, Freud & Solnit, 1973, 1979; Gruber, 1978; Kadushin, 1977). The problems associated with foster care are as extensive and elusive as are those associated with dysfunctional family life or with institutionalization. Recent studies (Murphy, Renee & Luchins, 1972; Tawney, 1974; Larsen, 1974) have shown that deinstitutionalization is most successful when the transition from institution to foster home or other alternative care arrangements is orderly. This means that deinstitutionalization must be planned and executed by all agencies and disciplines involved in the service delivery to the client. Indeed, unless such transition is well-executed, the special education, mental health, and social welfare personnel involved in delivery of services may subject handicapped children to placement within a structure

which is more rather than less restrictive. When multiple services to handicapped children are provided by different agencies, the quality of such services is dependent upon supervision, monitoring and assessment of each service component. Furthermore, the quality and impact of services is strongly affected by the degree of consistency between services and by the coordination of the various service components. Unless agencies work in a mutually cooperative manner to coordinate services, efforts to provide services to clients may be redundant at best, and counter-productive at worst. When multiple agencies representing different disciplines are involved in service delivery to one client, the risk of redundancy and counter-productivity is even greater.

A number of governmental and social service agencies have traditionally sponsored research investigations in order to determine the "state of the art" of child welfare policies, and to identify areas of concern. Research endeavors sponsored by the Child Welfare League of America (CWLA) and the Administration of Children, Youth and Families (ACYF) have identified several areas that are associated with foster care placement and that are particularly problematic. Two of the most frequently-cited problems associated with child welfare work are: (x) difficulties in permanency planning for hard-to-manage and/or handicapped children, and (x) social worker "burnout" or job turnover. Permanency planning refers to the child welfare practice of setting goals, objectives and timelines for the foster child's stay in foster care in order to prevent interminable "drift" in the foster care system. Problems with permanency planning and with social worker burnout impact upon the lives of the children whose daily well-being depend on the social welfare system (Arkava, 1977; Emlen, 1977; Fanshel & Shinn, 1978; Garret, 1977;

Gruber, 1978; Sherman, Neuman & Shyne, 1974; Vasaly, 1976). Handicapped children in foster care, however, live within the jurisdiction of two massive public service systems: social welfare and special education. The potential impact of these child welfare problems upon the rights of handicapped children in foster care to a free, appropriate, public education has yet to be seen.

Prior to 1977, handicapped children in foster care were subject to the rules, regulations and legal specifications of the social welfare system. With the advent of PL 94-142, handicapped children in foster care became subject to an additional set of rules, regulations and legal specifications. The passage of that Law now creates a unique situation in which two very different public systems are responsible for major and somewhat inter-linked services to a single child. Both of these systems will serve the best interests of handicapped children under their respective jurisdictions to the extent that both systems are able to plan and implement cohesive, unified public policy on behalf of their clients. Research within the last decade has shown clearly that public policy is most successful when all agents involved in affecting changes in policy work mutually and cooperatively. The need for mutual and cooperative involvement by agencies is critical not only in the planning stages of proposed change, but also in the implementation of such change. Studies such as the Rand Corporation's Change Agent Study on educational innovation (The Rand Corporation, 1975) and Egbert's assessment of Project Follow Through (Egbert, 1973) stress the need for careful, mutual and cooperative planning and implementation of educational innovation. In addressing the process of successful implementation of public educational policy, McLaughlin (1976) stated:

An important lesson that can be derived from the Rand Change Agent Study is that unless . . . the needs of the user are addressed and unless the . . . methods are modified to suit the needs of the user. . . the promise of new procedures is likely to be unfulfilled. (p. 180)

If PL 94-142 is to be successful legislation for meeting the needs of all handicapped children, agencies and organizations that are jointly responsible for serving handicapped children must plan policy, implement policy, and deliver services in a mutually adaptive and coordinated manner. To date, however, neither the social welfare system nor the special education system has established cohesive, unified public policy to meet the needs of handicapped children in foster care.

STATEMENT OF THE PROBLEM

In accordance with the mandates of the Rules and Regulations for Implementation of PL 94-142 in the Federal Register (August 23, 1977), State Education Agencies (SEAs) have developed Annual State Plans for implementing the Law on a state-wide basis. Since the publication of the Rules and Regulations, changes and adjustments have been made by SEAs in an attempt to comply with both the letter and the spirit of the Law. Among the changes and adjustments that have been made in a number of Annual State Plans over the past four years has been a change in the definition of "parent" for representation purposes of the handicapped child.

For the handicapped child residing in the natural family setting, the representative described as "parent" under PL 94-142 is the child's biological or natural parent. Once a child is placed in foster care, however, the functions and roles usually assumed by natural parents are assigned to a number of individuals. Thus, for the handicapped child in foster care, multiple levels of adult representation exist for various intents and purposes. For example, the representatives acting on behalf

of a handicapped child in foster care may be: a legal guardian, a legal custodian, a private social service agency which oversees foster care by virtue of contract agreements with the State, foster parents, natural parents, social worker, and other possible agents. The functions and roles of each of these representatives differ from state to state, according to the laws of the state in which the child resides.

With the passage of PL 94-142, the issue of who may act as rightful representative or "parent" on behalf of the handicapped child is of critical importance, particularly for the handicapped child in foster care. The due process safeguards mandated by the Law insure the right of due process for parents who act in a representative capacity for their handicapped child. Since minors are presumed incapable because of age of acting on their own behalf except in limited ways, parents have been given rights that are exercised on behalf of their child, including the right to an education (Turnbull & Turnbull, 1978). If, however, the child whose rights are safeguarded under PL 94-142 is residing in foster care, confusion may exist over who is to act as "parent" for the purpose of representing the child's right to a free, appropriate, public education. For example, the procedural due process safeguards mandated by PL 94-142 stipulate that parents must be notified of any impending action by the LEA. For the handicapped child in foster care with multiple representatives, which of the possible representatives shall be notified? The due process safeguards specify that parental permission must be obtained and documented before any action by the LEA occurs. If multiple representatives exist, which representative shall legally render permission for evaluation, for classification, or for placement? The due process safeguards insure the right to parental participation in special education

decision-making. If multiple representatives exist, which representative shall participate? Which representative shall render the final decision if disagreements arise among participating representatives? Which representative shall have the ultimate legal authority to appeal the LEA Team findings or recommendations?

The problem of responsibilities of multiple representatives has traditionally been addressed by state social service agencies. Within each state, the social service agency establishes the legal parameters for roles and responsibilities of those who represent the child in foster care. Yet, despite the existence of well-established state social service agency regulations, State Education Agencies, in revising their Annual State Plans, failed initially to work cooperatively with the state social service agencies in order to determine whether the proposed revisions of the State Plans might violate existing legal regulations. Two SEAs which initially failed to ascertain whether their revised regulations for child representation under PL 94-142 might violate previously-established state social service regulations for child representation were Kansas and Massachusetts.

In 1978, the Kansas State Department of Education revised its State Plan for Fiscal Year 1979 in regard to the definition of "parent." The previously-developed State Plan had reflected a more restrictive definition of "parent," specifying that only the natural parent or legal guardian could represent the handicapped child for special education purposes. The revised State Plan, beginning with Fiscal Year 1979, reflected a more permissive definition of representation for the handicapped child. Under the revised State Plan, those who were defined as acceptable representatives included:

1. Parent
2. Step-Parent
3. Foster Parent
4. Guardian
5. Person having legal custody of the child
6. Person legally liable for the child's maintenance, care or support, or
7. In the absence of any of the above, a relative or other interested person provided that the other interested person is not an employee of the State Board of Education or any local board involved in the education of the child. (Kansas State Department of Education, p. 75)

Likewise, Massachusetts' 1978 Regulations for Chapter 766 defined "parent" as:

Father, mother, guardian, person acting as a parent of the child or surrogate parent who has been appointed in accordance with the Division procedures. A student who is 18 years of age or older may act on his/her own behalf in place of the parent. (Massachusetts State Department of Education, p.2)

In both instances, each SEA found it necessary to work with the state social service agency on an ex post facto basis in order to reach mutual agreement regarding the more permissive definition of "parent" that had been included in their respective State Plans.

A simplistic approach to the basic issue of who is responsible for representing the handicapped child in foster care might be to appeal to Sec. 121a.514 of PL 94-142, the Provision for Surrogate Parents for handicapped children. This section of the Law delineates three situations in which a Surrogate Parent should be appointed to represent the child:

1. When no parent can be identified
2. When the public agency, after reasonable efforts, cannot discover the whereabouts of a parent; or
3. When the child is a ward of the state under the laws of the State.

Interpretation of this section of the Law, however, becomes more complex whenever a handicapped child in foster care is in the legal custody of the State but still remains under the legal guardianship of his or her natural parents. Such a situation is not uncommon in child welfare practices. It is not unusual to find children in foster care in a limbo status, adrift in the foster care system, still under the legal guardianship of an inactive parent, but residing in foster care without the formal protection of guardianship of the State. Another difficulty in interpretation and implementation of the Surrogate Parent Provision is the basic issue of appointing still another possible representative to the already massive list of potential representatives for special education purposes. Such a situation has already been disclosed in one state where an emotionally disturbed adolescent of 17 years of age was brought to court to be tried as an adult. The child had been in foster care in the custody of the State, yet the natural parents held legal guardianship. The SEA began the process of appointing a Surrogate Parent to represent the child's right to education and treatment. In such a situation, the child was not considered under PL 94-142 to be of age to represent his own interest for special education services, yet was facing judicial proceedings as an adult. The state social service agency had responsibility of custody, yet the parents had legal authority over their minor child. The appointment of still another representative merely compounded the existing confusion regarding legal responsibilities for representing the child's right to a free, appropriate, public education (Kentucky, 1980). These examples point up the problems that ensue in implementing public policies that have not been carefully planned and thoughtfully executed by the major agencies that are affected by such policies.

There were other shortcomings that were precipitated by the fact that both SEAs and state social service agencies were compelled to back-track in order to reach mutual agreement on the issue of rightful representatives of handicapped children in foster care. One of the shortcomings was that the after-the-fact agreements in both states were eventually reached only after considerable negotiation. Additionally, in Massachusetts, the responsibility for overseeing foster care by the State was shifted, in a governmental reorganization, from the Department of Public Welfare to a newly-created agency, the Division of Social Services. Negotiations between the Massachusetts SEA and the state social service agency were not reached until February of 1981, four years subsequent to the passage of PL 94-142, and nine years after the passage of the Massachusetts state law, Chapter 766, a local precursor of PL 94-142. In both Kansas and Massachusetts, the SEAs and the state social service agencies dealt only with the issue concerning which of the multiple representatives would be allowed legal rights of representation for the child to the LEA. Neither system, the SEAs nor the state social service agencies, worked cooperatively to share valuable professional information that would have been useful in addressing the implications surrounding the issue of representation of handicapped children in foster care. For example, the state social service agencies have been keenly aware of the difficulties in permanency planning for handicapped children. Likewise, both state social service agencies possessed documented evidence of the high rate of social work turnover. Similarly, the SEAs were well aware of the type and amount of information that LEAs typically share with parents after formal educational evaluation and assessment have been conducted. Furthermore, the SEAs were in an ideal position to

provide the state social service agencies with the most up-dated inservice training regarding the role and function of the child's representative during an IEP Team staffing. Planning together in a mutually cooperative manner might have afforded both the SEAs and the state social service agencies an opportunity to share these bodies of information. It also would have allowed them to examine the implications of implementing public policy that impacts upon the lives of children who are subject to the problems of both systems.

Despite this prime opportunity, neither the SEAs nor the state social service agencies initially probed the deeper issues concerning representation of handicapped children in foster care for special education purposes. As was discussed previously, child welfare practice routinely faces the problems of child drift in the foster care system and the constant burnout and turnover of case workers. Neither the SEAs nor the state social service agencies initially considered the impact of multiple foster placements upon the handicapped child's representation to the LEA. Similarly, neither agency considered the impact that the opposite extreme, life-long foster placement with no permanency planning undertaken, might have upon the special education representation of the child. Neither the SEAs nor the state social service agencies in either state initially took into account the possible effect that serial assignment of two or three social workers per year might have on the consistency of representation of handicapped children in foster care. Neither the SEAs nor the state social service agencies in either state initially attempted to assess the impact that an average of two foster placements per year might have upon the informed consent of the handicapped child's foster parent representatives. In brief, neither the SEAs nor the state

social service agencies in either state initially addressed the possibility that multiple placements from one foster home to another and multiple social worker assignments to a single case might effect the efficient and consistent transmittal of educational information that is the sine qua non of informed consent on the part of the handicapped child's representative. To date, no research has been conducted to investigate whether allowing multiple individuals to act on behalf of handicapped children in foster care enhances his or her actual representation to the right of a free, appropriate, public education. No empirical data have been obtained to ascertain which of the representatives are most frequently participating in the child's IEP Team staffings. Likewise, no research exists to suggest whether state social service agencies should authorize any one or several of the possible agents to represent the rights of handicapped children in foster care to the LEA. It was to these needs that the present research endeavor was addressed.

PURPOSE OF THE STUDY

The primary purpose of this study was to compare the IEP-generated information base of the representatives of handicapped children in foster care with that of the representatives of handicapped children in their own homes. The secondary purposes of this study were as follows:

1. To determine the relationship of frequent foster placements and frequent social worker assignments to the accuracy of the IEP-generated information base of the representatives of handicapped children.
2. To obtain descriptive data on handicapped children in foster care, on their foster parents, and on their social workers. These data were utilized in order to

determine whether variables identified in social welfare research as problematic in child welfare would be manifested in the present subject sample.

3. To assess the effectiveness of the Kansas and Massachusetts SEAs' permissive definition of "parent" for purposes of representation of handicapped foster children under PL 94-142.

In order to operationalize the study, survey interviews were conducted in two states, Kansas and Massachusetts. Subjects consisted of social workers and foster parents of handicapped children, and a control sample of natural parents of handicapped children. Because of the complexity of this research, an extended explanation of the purpose and of the broad components of the study is provided as follows:

1. Descriptive Research

Because the term "handicapped" has enjoyed broad interpretation in the social welfare literature, much of the existing research on handicapped children in foster care consists of at least some subjects who do not meet the specifications of "handicapped child" as established by PL 94-142. Thus, research is sorely needed to obtain demographic information about the population of children in foster care who meet the specifications of Sec. 121a.5 of PL 94-142.

Additionally, this investigation conducted descriptive research in order to determine:

- (a) Who, from among the multiple permissible representatives, was actually representing this population of handicapped children to the LEAs.

(b) What were the perceptions of the two most frequent permissible representatives, the social worker and the foster parent, regarding the responsibility for representing the handicapped child to the LEA. That is, the study sought to document whom these representatives identified as being responsible for representing the handicapped foster child's rights to a free, appropriate, public education.

2. Quasi-Experimental Research

Four quasi-experimental conditions were established as independent variables for this portion of the research. These quasi-experimental conditions reflected the four possible patterns of involvement of the social worker and foster parent in the IEP process:

- (a) Cases in which neither the current social worker nor foster parent were present at the IEP Team staffing.
- (b) Cases in which either the current social worker or foster parent were present at the IEP Team staffing.
- (c) Cases in which both the current social worker and foster parent were present at the IEP Team staffing.

This component of the research was designed to investigate whether the four quasi-experimental

conditions of involvement created a significant difference on the dependent measures of:

- (a) The degree of accuracy of the social worker's and foster parent's knowledge; and
- (b) The level of agreement between social worker's and foster parent's knowledge

regarding eight LEA Team decisions:

- (a) Classification
- (b) Eligibility
- (c) Program placement
- (d) IEP Goals
- (e) IEP Objectives
- (f) Responsibility for service delivery
- (g) Frequency of service delivery
- (h) Duration of service delivery

Control procedures were utilized to determine whether those foster children whose two representatives were both involved in the IEP process exhibited significantly different degrees of agreement and accuracy than did the natural parent representatives of handicapped children residing in their own homes.

RESEARCH QUESTIONS

In order to conduct this investigation, the following research questions were formulated:

1. What is the frequency with which two of the permissible representatives, social worker and foster parents, are actually serving as representatives for handicapped

children in foster care for special education decision-making?

2. Whom do the social worker and foster parent subjects of this investigation identify as begin responsible for representing their handicapped client/foster child for special education purposes?
3. What are the demographic variables of age, sex, ethnic background, placement history and handicapping conditions of the children who are represented by the social worker and foster parent subjects of this investigation?
4. What are the demographic variables of age, sex, education, foster parenting and natural parenting history of the foster parent and natural parent subjects of this investigation?
5. What are the demographic variables of professional education, non-handicapped and handicapped child caseload count, professional employment history, and history of client contact of the social worker subjects of this investigation?
6. What is the effect of the four quasi-experimental conditions of representative involvement upon the representatives' accuracy and agreement of knowledge regarding the LEA Team decisions on:
 - (a) Classification
 - (b) Eligibility
 - (c) Program placement
 - (d) IEP Goals

- (e) IEP Objectives
 - (f) Responsibility for service delivery
 - (g) Frequency of service delivery
 - (h) Duration of service delivery?
7. What are the differences in accuracy and agreement of representatives when comparisons are made between the responses of representatives under Condition 4 (both representatives involved in the IEP process) and the responses of a control group of natural parent subjects, both of whom had been involved in the IEP process, on:
- (a) Classification
 - (b) Eligibility
 - (c) Program placement
 - (d) IEP Goals
 - (e) IEP Objectives
 - (f) Responsibility for service delivery
 - (g) Frequency of service delivery
 - (h) Duration of service delivery.

HYPOTHESES

In order to test Research Question 6, the following hypotheses were generated:

Null Hypothesis 1

There will be no significant difference in the frequencies of agreement between social workers and foster parents on the dependent variables of (1) Classification, (2) Eligibility, (3) IEP Goals, (4) IEP Objectives, (5) Program Placement, (6) Program Responsibility, (7) Frequency of Services, (8) Duration of Services obtained under the four representative involvement conditions.

Null Hypothesis 2

There will be no significant difference in the rate of accuracy of social workers on the dependent variables of (1) Classification, (2) Eligibility obtained under the four representative involvement conditions.

Null Hypothesis 3

There will be no significant difference in the rate of accuracy of foster parents on the dependent variables of (1) Classification, (2) Eligibility obtained under the four representative involvement conditions.

Null Hypothesis 4

There will be no significant difference in the mean rate of accuracy of social workers on the dependent variables of (1) IEP Goals, (2) IEP Objectives, (3) Program Placement, (4) Program Responsibility, (5) Frequency of Services, (6) Duration of Services obtained under the four representative involvement conditions.

Null Hypothesis 5

There will be no significant difference in the mean rate of accuracy of foster parents on the dependent variables of (1) IEP Goals, (2) IEP Objectives, (3) Program Placement, (4) Program Responsibility, (5) Frequency of Services, (6) Duration of Services obtained under the four representative involvement conditions.

For each of the above Null Hypotheses, separate statistical analyses were conducted for each dependent variable. In order to test Research Question 7, the following hypotheses were generated:

Null Hypothesis 6

There will be no significant difference in the frequencies of agreement between the two sets of child representatives on the dependent variables of (1) Classification, (2) Eligibility, (3) IEP Goals, (4) IEP Objectives, (5) Program Placement, (6) Program Responsibility, (7) Frequency of Services, (8) Duration of Services obtained under the two type-of-representative conditions.

Null Hypothesis 7

There will be no significant difference in the rate of accuracy of social workers on the dependent variables of (1) Classification, (2) Eligibility obtained under Condition 4 when compared to the rate of accuracy of natural fathers obtained under Condition 5.

Null Hypothesis 8

There will be no significant difference in the rate of accuracy of foster mothers on the dependent variables of (1) Classification, (2) Eligibility obtained under Condition 4 when compared to the rate of accuracy of natural mothers obtained under Condition 5.

Null Hypothesis 9

There will be no significant difference in the mean rate of accuracy of the two sets of child representatives on the dependent variables of

(1) IEP Goals, (2) IEP Objectives, (3) Program placement, (4) Program Responsibility, (5) Frequency of Services, (6) Duration of Services obtained under the two type-of-representative conditions.

For each of the above Null Hypotheses, separate statistical analyses were conducted for each dependent variable.

DEFINITION OF TERMS

The following definitions of terms were established for the purposes of this investigation:

1. Handicapped Children

Those children evaluated in accordance with Sec. 121a.530-121a.534 and described in accordance with Sec. 121a.5-121a.6 of the 1977 Rules and Regulations for Implementation of PL 94-142 (See Appendix A).

Excluded from this definition are those children who are hard-to-place for foster care and/or adoption purposes unless such children also meet the criteria of the Sections as stipulated above.

2. Foster Children

(a) Those children who have been removed from their natural family setting through voluntary surrender or through court action. Such removal must have been accomplished by formal action, according to the laws of the State and the State must hold legal guardianship and/or custody of said children.

Excluded from this definition are children whose removal from the natural family unit has been accomplished by private arrangement, such as placement of the child with friends, relatives, etc., unless such arrangement has subsequently involved formal action according to the laws of the State.

(b) Those children who have been removed from the natural family setting as stipulated above and who now reside in:

- i. Foster family homes
- ii. Group foster care residences
- iii. Institutions for the mentally retarded and/or emotionally disturbed.

3. SEA and LEA

SEA refers to the State Education Agency. LEA refers to the Local Education Agency, that is, the local school district.

CHAPTER II

REVIEW OF THE LITERATURE

Since the implementation of PL 94-142 in 1977, considerable research has been conducted to investigate the nature and quality of parental participation in handicapped children's special educational needs assessment, program planning, and monitoring. To date, that research has not addressed issues relating to parental participation on behalf of handicapped children who reside in foster care.

This study was conducted in order to investigate and document the confusion that currently exists over who is to be considered legal representative for handicapped children in foster care for special education purposes. Additionally, the study attempted to document the impact that such confusion has had upon parent or representative participation and involvement. In the absence of research literature directly related to the purpose of this study, several related areas of literature are reviewed in this chapter which are pertinent to the study. They include:

1. The nature of the foster parent role
2. Problems associated with foster care:
 - (a) Definition of foster care
 - (b) Premanency planning
 - (c) Social worker "burnout" or job turnover
 - (d) Handicapped children in foster care
3. Planning and implementation of PL 94-142 and Chapter 766
 - (a) SEA assistance to state social service agencies
 - (b) The Surrogate Parent Provision of PL 94-142
4. Participation of natural parents in the IEP process

The Nature of the Foster Parent Role

In reviewing the professional literature regarding the foster parent role, one finds that analyses of foster parenthood are frequently

conducted from the theoretical framework of role theory (Fanshel, 1961; Jaffe & Kline, 1970; Kline & Overstreet, 1972; McCoy, 1962; Wolins, 1963). The central concepts of role theory were summarized by McCoy (1962):

People live and react to one another within organized societies; their behavior is defined by social norms; they learn these norms by occupying or observing a position and then perceiving, imitating and integrating the behavior patterns associated with that position; when these behavior patterns are enacted, they may be described as roles. (p. 253)

A more succinct definition of role is provided by Perlman (1968) who stated, "'Role' suggests simply that human behavior is socially patterned" (p. 41). Cottrell (1966) outlined three major factors which contribute to effective role functioning and role adjustment:

1. The degree of clarity with which that role is defined;
2. The compatibility of alternate role behaviors required of a person in a given status position; and
3. Satisfactory attainment of the goals highly valued in the subculture group.

In addressing the importance of the first factor identified by Cottrell, role clarity, Stein and Cloward (1959) suggested that whenever perceptions of role are obscure, individuals seeking to assume the role will have difficulties in adjusting to that role. Furthermore, the authors state:

Whenever the question is asked, 'What is expected of me,' or 'What is the proper way to behave in this situation,' there is an implicit problem of role definition. (p. 174)

In researching the extent of such role ambiguity, Kahn (1966) conducted a national survey of the labor force, interviewing 725 employed persons. He found that 35% of the survey sample were disturbed by lack of clarity about the scope and responsibilities of their jobs, and that

29% of the subjects were distressed by ambiguity related to what their co-workers expected of them. In the process of his study, the author identified the variety of forms that role ambiguity assumed in the subjects:

1. The person may be uncertain about the scope of his or her responsibilities, about what is expected of him or her by others, about what behaviors will be effective in meeting these expectations.
2. The organizational structure may be ambiguous. The worker may be unclear about who has a legitimate right to influence him or about the limits of his or her rightful authority over others.
3. Confusions may center around organizational rules and regulations, around conditions under which various sanctions might be applied, or around what the sanctions might be.
4. Ambiguity may exist concerning evaluation and performance criteria. Furthermore, ambiguity may exist regarding the employer's satisfaction with the employee's performance. (p. 343)

¹⁹⁶⁶ Kahn noted that common reactions to role ambiguity include anger, fear, anxiety and hostility, as well as feelings of futility and apathy. In his study, subjects who perceived a high degree of role ambiguity in their jobs frequently utilized withdrawal as a mechanism for coping with the perceived ambiguity. In contrast, the investigators found that those subjects who experienced frequent communication and performance feedback reported a lesser degree of role ambiguity in their employment.

Findings such as Kahn's are particularly appropriate to the analysis of roles within foster care. When a child is placed in foster care, the roles and functions of the natural parent are divided among a number of individuals, each of whom assume partial responsibilities on behalf of the child. Unless the scope of each individual's responsibilities is clearly delineated, role ambiguity is the inevitable result. As Kline

& Overstreet (1972) aptly stated, smooth functioning between individuals working in foster care is critical in a system in which the cooperation of individuals is the "medium for producing the service" (p. 3).

Several authors (George, 1970; McCoy, 1962; Wardell, 1966) suggest that nonattainment of goals by incumbents of a role probably results not by accident, but from ambiguity in the definition of the role. George (1970) stated:

The argument that each case in a foster situation must be viewed individually does not make any less compelling the need for definition of the various foster role attributes. (p. 73)

McCoy (1962) likewise believed that a role definition of foster parenthood was both timely and necessary. He identified three major benefits that might stem from a formulated definition of the foster parent role:

1. It would allow for identification and description of attributes and function, providing a conceptual framework.
2. It would permit analysis of similarities and differences between the role of the natural parent and the role of the foster parent.
3. It would provide information out of which predictor variables might be identified for selecting foster parents who are able to assume the role satisfactorily.

While the professional literature, then, acknowledges the usefulness of the role theory perspective on foster parenthood, it also reveals the lack of clarity in defining the foster parent role and the specific attributes of that role (Evans, 1975; George, 1970; McCoy, 1962; Taylor & Starr, (1967). As Kline & Overstreet (1972) have indicated:

The role of foster parents has been a subject of debate for decades and the persistence of the debate suggests the inherent complexity of the subject. Professional publications note confusion and

ambiguity among foster parents, foster children, natural parents and caseworkers concerning the powers, duties, and responsibilities of each of the individuals in the foster care system, the foster parents' relationship with the agency, and the nature of the helping process. (p. 217)

Ambiguity of foster parent role was acknowledged by Kaduskin (1967) who observed the lack of a clear-cut definition of the foster parents' relationship to the social service agency. He noted that foster parents are sometimes regarded as client, sometimes as colleague, and sometimes as paid employee. Charnley (1975) considered foster parents as "staff workers" who, together with the social worker, share the job of helping and rehabilitating the children. Glickman (1957) likewise viewed the foster parent role as having a more professional component, calling foster parents "professional parents" and describing their relationship with the social worker as that of a student's or experienced worker's relationship to a supervisor. Kline & Overstreet (1972), however, perceived foster parents as having primary and secondary roles. They viewed the foster parents' primary role as that of surrogate parents, and the secondary role as that of agency employee. Fanshel and Shinn (1978) viewed the foster parents' role as that of agent who has taken on responsibility for a total living arrangement of the child who is placed in their home. Others such as Lawder & Melican (1975) and Frey & Heinritz (1975) have reported that agencies have shown considerable ambivalence and vacillation in their views of foster parents, and have interchangeably considered them as clients, volunteers, employees or colleagues. Williston (1963, 1967) argued that foster parents' perceptions of their roles often differ from professionals' perceptions. He stated that foster parents often attempt to exercise exclusive jurisdiction over the child while perceiving the natural parent or social worker as unnecessary, or as a competitor.

Empirical documentation of the conflicting perceptions of the foster parent role have been provided by a number of investigators (Ambinder, 1962; George, 1970; Wolins, 1963). Ambinder (1962) examined differential perceptions of foster parents concerning their role and found that 25% of the subjects viewed their role as that of natural parents. Another 30% of the foster parent subjects perceived their role as that of task-oriented specialists. Wolins (1963) conducted a similar study, utilizing not only foster parents but also social workers and general community members as subjects. The purpose of Wolin's study was to explore the role perceptions of various individuals within the foster care system concerning the foster parent role. He found that 77% of the foster parent subjects compared themselves to the child's own parent or to an adoptive parent. The remainder of foster parent subjects (19%) viewed themselves in the role of relative. The distribution of responses of community members interviewed concerning the role of the foster parents was strikingly similar to that of the foster parents. Findings revealed that 75% of the community members interviewed perceived the foster parent as most like a natural or adoptive parent. Social worker subjects, however, showed a markedly different pattern of responses. Only 33% of the social worker subjects viewed the foster parent role as most like that of the child's natural or adoptive parent. Another 33% considered the role unique and refused to label an analogous role. The remainder were divided among the other possible responses. Wolins summarized the results as follows:

Clarity is lacking. The foster parent is sometimes seen as client, sometimes as an agency staff member, sometimes as a natural parent, a relative, a stepparent, or a professional parent, or he defies classification. (p. 15)

George's study (1970) also addressed the issue of perceptions of the foster parent role. This study was modeled after the Wolins study, and was conducted in England. Unlike the Wolins research, however, the George study did not survey the general community, but instead utilized only foster parent and social worker subjects. The results of the survey were similar to the findings of Wolins. The investigator found clear disagreement between foster parents and the social workers regarding their respective perceptions of the foster parent role. Foster parents were found to be more likely to view their roles as those of natural or adoptive parents. The George study findings, however, require caution in interpretation and comparison to the Wolins study since George refined and revised the Wolins survey instrument to obtain the respondents' role perceptions of both long-term and short-term foster parent roles. The findings reflect the fact that the foster parents were able to differentiate between the role of long-term and short-term foster parenthood. The responses indicated that the role of short-term foster parenthood was more frequently viewed as that of a relative, whereas the role of long-term foster parenthood was viewed more frequently as that of a natural or adoptive parent.

While the literature, then documents pervasive ambiguity in the foster parent role, there is also acknowledgement that divergent expectations do not permeate all aspects of foster care. Wolins' study showed, for example, that little confusion existed regarding the responsibility of foster parents for the daily care of the child or the responsibility of the agency to select the home. Major aspects of foster care which did show ambiguity and divergent expectations regarding the locus of responsibility were: (a) parental visiting, (b) disagreement

between natural and foster parents, (c) legal guardianship, and (d) the education of the foster child. The identification of these variables as significant contributors to role ambiguity in foster care is notable. The passage of PL 94-142 has precipitated and established new roles and responsibilities for representatives of handicapped children. As the literature review has documented, these new roles and responsibilities are now required of individuals for whom role ambiguity and lack of clarity already exist, social workers and foster parents of handicapped children in foster care.

PROBLEMS ASSOCIATED WITH FOSTER CARE

Definition of Foster Care

The purpose of foster care, as currently defined by the Child Welfare League of America, is to provide "substitute family care for a planned period for a child when his own family cannot care for him for a temporary extended period" (Gruber, 1978). Although the literature reflects a clear definition of foster care, many authors indicate that there are intrinsic contradictions and inconsistencies in a living arrangement that is intended to be temporary. In commenting on such contradictions, Perlman (1968) stated:

Foster parents are sought out for their capacity to love and nurture and care for children. Yet, they are not supposed to care too much nor love too much lest they be unable or unwilling to detach themselves from the child. . . .when the child is removed. (p. 15)

Other authors concur with Perlman's assessment of the dilemma of temporary parenthood. Pollak (1975) acknowledged the necessity for foster parents to provide nurturance for the foster child, but posited a notion of foster care that dichotomizes caregiver from "parent." He suggested that the difference between foster parenthood and real parenthood is so

great that the term "foster parent" is considered a poor choice of terminology. Wolins (1963) likewise had previously espoused a position that dichotomized nurturance and parenthood, stating:

It would be one thing to speak of fostering, of protecting, of nurturing a child through a period of parentlessness. It is quite another thing to attach to the notion of fostering the notion of parenthood. (p. 36)

A number of authors have identified what they consider to be the critical differentiating variables between natural and foster parenthood. Melican (1975) indicated that the term "foster parent" is misleading because the foster parent is restricted in this fostering and is deprived of full parental rights. Williston (1970) suggested that aspects of time limitations and physical care are the critical variables that differentiate foster parenthood from natural parenthood, and thus suggested that the terms "temporary parenthood" or "temporary home care" be used instead of "foster parenthood". Bigley (1968) stressed the fact that foster parents are neither clients nor professional colleagues, and proposed that the term "family life counselors" be substituted for the term "foster parents." George (1970) offered the term "foster care worker" as the most suitable substitute for "foster parent" since it avoids the work "parent," stresses care and nurturing, and can be qualified to describe different arrangements, such as group care.

Although the professional literature reviewed above presented the blurred, ambiguous expectations in the foster parent role, all of the literature was unanimous in placing the major locus of responsibility on the social service agency. Wolins felt that since the agency is the initiator of any interpersonal interactions that occur between foster parent, foster child and social worker, it is the agency's responsibility to make the parameters of each individual's responsibilities clear. Kline & Overstreet (1972) stated that sentiment more directly:

Role clarity has its inception in the agency. When the agency is unclear, inconsistent, or vague in its philosophy, program of services, policies and role definitions, it is literally impossible for the caseworker to perceive and define the reciprocal roles in the foster care system. (p. 222)

Frey & Heinritz (1975) indicated that agencies have the responsibility of clarifying job descriptions in order to enhance role performance. The authors suggested that these goals could be accomplished by offering required staff development programs for foster care workers and foster parents. George (1970) presented similar recommendations, and emphasized the need for increased training of foster parents. He noted that the functions associated with roles are learned or acquired through both incidental learning and through intentional instruction, and stated, "on both of these counts, role learning in foster care simply falls short" (p. 73).

Permanency Planning

Despite the ambiguity of definitions of foster care, the concept of foster care as a temporary rather than as a permanent placement is well accepted in child welfare theory. In order to facilitate the eventual permanent placement of foster children, child welfare personnel have recently adopted a practice known as permanency planning. A description of permanency planning has been afforded by Pike (1977):

Permanence describes intent. A permanent home is not one that is guaranteed to last forever, but one that is intended to exist indefinitely. . . .Foster care placements serve a needed purpose when they exist for a planned period of time. The planned period can be quite temporary while a permanent home is being arranged, either with the child's own or with adoptive parents. For the child who should remain with his foster parents until he is grown, the temporary placement can be made permanent by a formalized long-term foster care arrangement or foster care adoption. (pp. 1-3)

Thus, the practice of permanency planning consists of setting goals and objectives for the natural parent, foster child, foster parents and

caseworkers involved with these individuals. Timelines are established for attainment of the established goals and objectives and priorities for eventual placement are determined based on attainment or non-attainment of the goals and objects. Through the use of permanency planning, the individuals involved are aware of goals and objectives that must be met. Child drift from one foster home to the next is eliminated or at least lessened, and the foster child is afforded a greater sense of permanence and security.

Nevertheless, the actual implementation of permanency planning has not kept pace with the repeated urgings of child welfare personnel. That children in foster care still experience drift, moving from one foster home to another or remaining in one foster home indefinitely without provisions for permanent placement, is well-documented in the child welfare literature. In a study sponsored by the Child Welfare League of America, Maas & Engler (1959) found that if children were allowed to drift through the foster care system without permanent placement plans for one-and-a-half or two years, their chances of remaining in the foster care system permanently exceeded chance at the .01 level of probability. Jeter (1963) found that over 67% of children identified in her tracking study of public social service agencies were without the benefit of a plan, other than to continue the foster care, for their eventual placement.

A number of additional studies exist which have addressed the issue of child drift in the foster care system. The Child and Family Services of New Hampshire (1972) conducted a tracking study in four New Hampshire counties involving 316 identified foster children. Of those subjects, 90 had been in placement for two to six years and 138 subjects had been

adrift in foster placement without a plan for permanent placement for over six years. Another study, conducted by the Department of Social Services in Iowa (1973) disclosed that 24% of the children tracked in foster care had undergone three or more placements at the time of the survey, none of whom had permanent plans for placement. The investigators concluded that unless a plan for permanent placement is developed as part of the child's social service intervention at the time of intake, the child runs a high risk of spending a considerable part of his or her life adrift in the foster care system. Studies conducted by both Neuman & Shyne (1974) and Wiltse (1974) investigated the actual implementation of permanency plans developed for foster children. Both studies obtained findings indicating that even in those cases where the plans had been developed calling for a return of the children to their parents, less than 50% of those children had been restored to their homes or had been placed elsewhere for adoption two years after the development of the plan.

In Massachusetts, the Governor established a commission for the purpose of tracking and accounting for every child in foster care under the jurisdiction of the Department of Public Welfare (Gruber, 1978). The Gruber study revealed that 16% of the total children in foster care had experienced previous foster care placements. Handicapped children in this study constituted 40% of the total children in foster care. Of the handicapped children identified, 56% had been drifting in the foster care system with previous placements. In fact, the investigators found that 47% of the handicapped children had been placed between two and four times.

A broad research endeavor, sponsored by the Administration of Children, Youth and Families (A.C.Y.F.) (Vasaly, 1976), was conducted across five states: Arizona, California, Iowa, Massachusetts and Vermont. These studies utilized a sample of approximately 55,000 foster children who could be tracked in the state systems. Results disclosed that 59.7% of the foster children identified had, at the time of the investigations, already spent two to five years in foster care, drifting without permanency plans.

The implications of long-term drifting in foster care were unanimously manifested in each of the five above-mentioned A.C.Y.F. studies. First, in each of the five studies, the data showed that as the number of foster placements increased, the likelihood of adoptive placement decreased. That is, the longer the children had remained in foster care without permanent placement, the greater was the probability that the children would spend the better part of their lives within the foster care system. Second, the data from all five studies indicated that as the number of foster placements increased, so too did the reported incidence of emotional and behavioral problems in the children. Third, the investigators in each state found that a large number of the children (between 63% and 79%) had remained in one foster home throughout their stay in foster care. Nevertheless, the number of children in each state who had sustained multiple placements was quite high. Approximately 25% had been placed previously, and between 11.2% and 15.2% had been placed four or more times.

In commenting on the drift of children in the foster care system, Kadushin (1974) observed that lengthy stays in foster care place children in limbo with respect to their relationship with the natural parents. He stated:

The ties of natural parents to children become attenuated; the feeling of responsibility for the child not being actively exercised, atrophies; the parents reorganize their lives in a way that does not include the child, so that the child's return would mean disruption. All this encourages separation that is total except in legal terms. (p. 363)

Kaduskin noted that children in foster care often maintain merely legal ties with their natural parents. The lengthy separation from the natural parents reduces and diminishes the parent-child relationship. Thus, Kadushin concluded that if and when situations arise that necessitate the exercise of legal prerogatives on the part of the natural parent, such exercise is understandably devoid of personal investment in the child. Kaduskin's observation is critical to the research interests of the present study. As the literature has documented, children in foster care, and handicapped foster children in particular, experience prolonged stays in foster care. A high percentage of handicapped foster children drift from one foster home to another with no provision for permanent placement. If such drift and extended stays in foster care tend to diminish parent-child relationships, with only legal ties remaining, then such children are truly dependent upon other individuals to represent their best interests for special education purposes. The following section of the review of literature, however, suggests that representatives in the foster care system are neither trained nor are in professional situations which allow them to represent the handicapped child with the same investment as would a natural parent.

Upon examination of the literature, one finds that two major categories exist for explaining barriers to permanency planning and lack of accountability for service delivery to foster children: (a) institutional or agency characteristics, and (b) child characteristics. In addressing institutional barriers to permanency planning, Pike (1976) observed that

a number of variables in child welfare serve to maintain the status quo, perpetuating familiar practices rather than facilitating change. He identified these variables as:

Overburdened caseworkers; lack of commitment on the part of the agency and workers to change the characteristics of foster care practice; the absence of statutory authority or a poor statute upon which to seek termination of parental rights decisions; and lack of skills in preparing cases for courts. (p. 24)

Claburn, Magura & Resnick (1976) identified five variables that served as barriers to permanency planning. These are summarized as follows:

1. Legal problems, especially courts that were unwilling or unable to act on questions of custody.
2. Various agency problems such as insufficient staff, high staff turnover, poor attitudes among staff.
3. Child characteristics such as age, physical or emotional handicaps.
4. Lack of resources such as family support services or adoption resources.
5. Parental uncooperativeness.

Findings similar to those of the Claburn study (1976) were obtained from an investigation conducted by the Regional Research Institute for Human Services, researched by Emlen (1976). Results indicated, without exception, that nonclient variables had more effect on permanent planning decisions than did client variables such as age of the foster child, handicapping condition or parent-child bonds. In a follow-up report, Emlen (1977) identified several prerequisites for implementing permanency planning. First, social workers must have manageable caseloads to permit intervention on the case from the time the child first enters foster care. Second, the social workers must plan regular visits between parents and child, structuring

time-limited rehabilitation efforts for the parents. Third, the social worker must organize legal evidence for court action to terminate parental rights if consistent rehabilitative efforts for the parents have failed.

The issue of social worker caseload has consistently been identified in the literature as one of the most salient variables that serves as a barrier to permanency planning and effective service delivery to foster children. Guidelines for social worker caseload, established in 1975 by the Child Welfare League of America (CWLA), suggest that a full-time practitioner should be expected to provide service to no more than 20 to 30 children. In cases that involve child protective services, the CWLA has stated in its standards (1975), "If effective protective service is to be provided, a full-time practitioner is needed for every 20 families, assuming the rate of intake is not more than one new case for every six open cases," (p. 60). Despite these policy guidelines, the case loads in the majority of public agencies exceed such standards (Horejsi, 1979). Frequently, over-burdened case loads contribute to social worker burnout, high staff turnover, and a crisis-oriented approach to case work rather than a planned approach to practice which should be geared to preventing problems. Vasaly (1976) found that in some districts of Arizona, workers remained on the job for an average of only nine months; in Massachusetts, the public welfare worker attrition rate was found to be 29% per year.

Social Worker Burnout

Within the human service professions, documentation has accumulated over the last decade to suggest that employees of agencies or institutions often become less effective at their jobs as time goes on. In her study on human service worker burnout, Maslach (1976) presented a profile of

characteristics associated with burnout in the helping professional:

In general, burnout refers to a shift from empathy. . . .a desire to help, and a genuine concern with human problems to an attitude of cynicism, negativism, and self-centeredness. Burnout is caused in part by the stress and emotional demands on those who are continually and intimately involved with troubled people. . . .There is little doubt that burnout plays a major role in the poor delivery of health and welfare services to people in need of them. They wait longer to receive less attention and less care. It is also a key factor in low worker morale, absenteeism and high job turnover (for a common response to burnout is to quite and get out). (p. 16)

Harrison (1980) has suggested that a sense of competence and a feeling of efficacy are the results of being able to affect the environment and meet its challenges. When the caseworker loads are filled beyond the point of functionality, working conditions of social workers are antithetical to such a sense of competence and feeling of efficacy. Furthermore, the literature indicates that burnout among social workers has been demonstrated to have a negative effect upon the client, the child in foster care or the child receiving general child welfare services. For example, the Gruber study (1978) found the rate of social worker turnover to exceed 29% per year. The impact of such caseworker turnover was that 66% of the children in foster care in the state of Massachusetts had been seen by the same social worker for less than one year. Vasaly (1976) reported that in California, the state social service agency experienced enormous difficulties in bring together educational, legal, medical and diagnostic resources to social workers who had case loads of seventy in order assist these workers in making determinations that would affect the foster child.

Understaffing in social service agencies likewise contributes to higher case loads and high attrition rates among social workers. Gruber noted that in Massachusetts, hiring freezes imposed at the time of the

study perpetuated staffing patterns that reflected the above-mentioned attrition rate. In addition, the freezes left over 33% of the children identified as needing case worker assignment unassigned to any agency worker. Gruber (1978) aptly pointed out that children who had been placed in foster care without agency assignment, or who have remained for indefinite periods of time without a plan for permanent placement have virtually no recourse. For all intents and purposes, these children are adrift in the system, "destitute, neglected and betrayed" (p. i).

Handicapped Children in Foster Care

As has been discussed, institutional factors such as legal problems, insufficient staff, overburdened social workers, staff turnover and burnout play a significant role in thwarting the systematic development and implementation of permanency plans for children in foster care. Research also suggests, however, that client-centered variables impact upon the ability of an agency to place a child permanently and to prevent the drifting that has characterized foster children. There is evidence to support the fact that child differences necessitate specialized foster placements. Arkava (1977) conducted a comparative study in the state of Montana in which he examined 43 specialized foster homes that served developmentally disabled children. When compared to a control group of randomly sampled foster homes serving non-handicapped children, a number of statistically significant differences between the two groups were found. First, the child subjects in the specialized foster homes were younger than the non-handicapped children in the control group. Second, handicapped subjects experienced a higher rate of foster placement from one foster home to another than did the non-handicapped subjects in the control group. Sex differences were also observed across the two

groups. Sixty percent of the handicapped children were male compared to 50% of the non-handicapped foster children. Statistically significant differences were also found between the two groups of foster parent subjects in this study. The foster parents of the handicapped children spent significantly more time in such activities as preparing special foods, cleaning up spills and soils, and in dealing with disputes and disruptions. Similarly, the foster parents of handicapped children incurred greater expenses on foods, toys, appliances such as washing machines, homeowner costs and on baby-sitter costs. Finally, the foster parents of the handicapped children experienced significantly greater restrictions on their mobility and personal freedom compared with the foster parents of non-handicapped children.

Gruber (1978) also conducted comparative analyses of handicapped and non-handicapped foster children in Massachusetts. The most striking finding of this study was the fact that 40% of the total population of foster children in the state of Massachusetts were identified as disabled. An examination of the breakdown of subjects by disability categories revealed that a number of children (approximately 12.8%) were identified as "disabled" on the basis of such variables as failure to be toilet trained, small for age, etc. This in part accounts for the inflated incidence of handicapped children in foster care. Nevertheless, the remaining incidence of handicapped children (approximately 27.2%) is far in excess of figures estimated as the national norm, approximately 12% of a given population. Incidence figures were not the only differences that existed between the handicapped and non-handicapped children in the Gruber study, however. A second variable on which the two groups differed was that of agency auspices. Out of a total N of 2,345 foster children

identified state-wide, only 41 (1.7%) of the handicapped children had been assigned to agencies in the private sector. Thus, of the 938 handicapped foster children identified, only 4.37% were being served on a sub-contract basis by private agencies. This indicates that the handicapped foster children in the study were almost exclusively the responsibility of the state social service agency. Results similar to the Arkava study (1977) were obtained by Gruber in terms of sex differences. The non-handicapped foster children in the Massachusetts study were split equally between males and females, whereas nearly 65% of the handicapped foster children were males. Length of time in foster care was a fourth variable on which the handicapped and non-handicapped foster children differed. Approximately 65% of the handicapped children had been placed in foster care either voluntarily or temporarily as a result of specific acute family difficulties. Given this fact, their length of time in foster care would be expected to be shorter than the stay of children who had been placed by court order for chronic family problems. The findings, however, revealed just the opposite of such a supposition. In fact, the average length of time in foster care for the handicapped children was longer than that of all foster children in the study. Gruber concluded that "by the very fact that the child is handicapped, given current conditions, he [sic] is much less likely to be either returned to his [sic] biological family or placed for adoption" (p. 85). A fifth variable on which the two groups of foster children differed was on number of foster placements. Sixteen percent of the non-handicapped children had been placed previously compared to 56% of the handicapped children. Furthermore, 47% of the handicapped children had been placed two to four times.

Throughout the literature on foster children, child welfare personnel frequently cite the fact that a high incidence of "emotional problems" is typically reported in foster children at some time during their stay in foster care. The rate of reported emotional problems, however, tends to drop as the children become acclimated to their foster placement (Kadushin, 1974). Gruber's findings, nevertheless, revealed that approximately 67% of the handicapped children in foster care were reported to have emotional problems. This incidence figure far exceeds expected rates. Of these children, a substantially higher percentage had been moved from one foster home to another. Furthermore, these children were found to have problems which were moderate to severe when compared to the children reported to be experiencing emotional difficulties but who remained in their original foster home. These findings would suggest that a far greater number of children in foster care identified in this study were truly handicapped by virtue of their emotional problems as compared to children who remained in a single foster placement and who were reported to be experiencing emotional difficulties.

Of significance to the present investigation was Gruber's comparison of foster parent perceptions of handicapping conditions (1978). When foster parents were asked about the existence of handicaps in their foster children, 13.8% replied that the child did not have a problem in spite of the fact that the child had previously been identified as handicapped. Gruber noted that in the process of completing the survey questionnaire, the foster parents of handicapped children proceeded to describe the previously-unacknowledged disability in functional terms despite their disclaimer of the presence of a handicapping condition. Gruber concluded that the importance of this disparity between the

actual existence of a handicap and the erroneous assessment of the foster parent is the fact that although the "no problem" children do indeed have some handicapping condition, these disabilities and the children themselves are not seen as problems by the foster parents. Whether or not Gruber's interpretation is adequate in explaining this phenomenon, additional data from his investigation shed potential light on the issue. The study revealed that less than 25% of the foster parents interviewed had received preplacement training for dealing with their handicapped foster child. Seventy-five percent of the foster parents were unaware of the child's special needs prior to placement, 76.8% of the current foster parents did not know if the child had been evaluated for his or her handicapping condition, and 12.2% of the foster parents indicated that the social worker had not discussed the child at all prior to placement. In view of these data, it might well be argued that the foster parents simply had not been adequately apprised of the characteristics and special needs of the child they were about to receive and thus did not have a sufficient information base to identify their foster child as "handicapped."

A final comparative finding in the Gruber report addresses the basic inequities in the foster care system with respect to handicapped children. Gruber found that of the 96 severely developmentally disabled children in the sample, 18 currently had no social worker assigned to the case, even when the foster parent had requested one. In addition to this number, 29 children were without a social worker for at least 18 months. Foster parents of these children reported that they experienced serious difficulties in obtaining medical and educational services for these children, and expressed the need for professional intervention to

assist them in obtaining necessary services for their handicapped foster child. In such cases, Gruber noted, those children and foster parents who were most in need of service delivery were left without professional assistance of any type by the very agency which had brought the individuals together initially.

In addition to the institutional and child characteristics identified in the literature as barriers to permanency planning, foster parent characteristics are also documented as variables which are critical to eventual permanent placement of foster children. Several investigations have been conducted in order to determine predictor variables for successful matches between the foster child and the potential foster family. Of these studies, only a paucity has dealt with successful predictors for matching handicapped foster child and potential foster parent. Horejsi & Gallacher (1977) developed a set of guidelines for selecting foster parents for developmentally disabled children. Although no data exist to determine the predictive usefulness of the screening instrument, it is of note that the instrument consists of items for determining the foster parents' willingness of participate in orientation and training sessions to learn and practice behavioral technology. Likewise, the screening instrument contains items to ascertain the foster parents' ability to accept the underlying assumptions of normalization as well as their ability to appreciate the "dignity of risk."

Fanshel (1966) conducted a factor analysis of personality traits of foster parents who undertake the job of parenting handicapped children. Utilizing a rating instrument comprised of 40 items, Fanshel found that foster parents who had successfully parented handicapped foster children scored with high loadings on five variables:

1. The foster home had been described by the caseworker as being suitable for a mentally retarded child.
2. The foster home had been described by the caseworker as being suitable for a child with severe physical handicaps.
3. The foster home had been described by the caseworker as being suitable for an infant suffering from colic.
4. The foster home had been described by the caseworker as being suitable for a youngster who shows bizarre behavior.
5. The motivation of the foster mother for being a foster parent had been described by the caseworker as not being related to feeling less feminine if children are absent.

The first four variables listed above were positively loaded with the factor "Ability to take Care of a Handicapped Child." The last variable, however, was negatively correlated in this factor. The correlation matrix of the factor scores developed from the pooled ratings of caseworkers and the scale and index scores resulting from responses on the screening instrument administered to foster parents revealed the following patterns for Factor III, which Fanshel named "Ability to Care for a Handicapped Child":

1. The factor scores correlated significantly with the scale "Capacity to Cope with Problems of Foster Children ($r=.28$)"
2. The factor scores correlated significantly with the Index of Clan-Type Family ($r=.28$)
3. The factor scores correlated significantly with the Index of Permissiveness in Child Rearing ($r=.22$)

These findings would suggest that the foster parents who were successful in parenting handicapped foster children possessed the personal flexibility

to meet the demands of their family life as delineated by Arkava (1977). That is, they were able to cope successfully with the increased necessity to attend to spills, soils, disruptions, disputes, etc. Additionally, these foster families possessed extended families which probably served as support systems to offset the strain that the presence of a handicapped child in the family presented. Finally, as Fanshel suggested, these foster families were able to invest in a handicapped child without projecting the need for academic or developmental achievement upon the children. Fanshel cautioned, however, that interpretation of the findings should be guarded in terms of predictive validity of the factor clusters since the reliabilities of caseworker ratings reported in the study were low, ranging from .25 to .81 with a median of .50. The highest reliabilities across the eight factors developed in this study were achieved for the ratings of caseworkers on the factor under discussion, Factor III, the suitability of the foster home for various types of handicapped children. The median reliability for this cluster of variables was .73.

In summary, then, the literature on handicapped children in foster care reveals that an increasing number of foster children are indeed handicapped. Both institutional and child characteristics constitute factors which contribute to making the care of these children a heavier responsibility than that of caring for non-handicapped foster children. Handicapped children enter foster care at an earlier age, spend longer periods of time in foster care, and experience significantly more placements than do non-handicapped foster children. Furthermore, a review of this literature reveals that research conducted to date has been unsuccessful in developing reliable procedures for matching handicapped children to potentially-successful foster homes. The literature also

suggests that successful matches occur randomly rather than by virtue of predictive validity.

Additionally, literature on foster parent ambiguity presents a compelling rationale for foster parents' inability to meet the myriad of needs exhibited by this population of children. When this literature is examined against the literature documenting the highly specialized needs of this population, it is not surprising that foster parents whose role is already ambiguous experience extreme difficulty in parenting handicapped children.

Finally, the research suggests that overburdened social workers, unable to expend even minimal time equally across their assigned cases, experience frustration, feelings of impotence and anomie. The literature likewise lends support to the belief that such agency and administrative situations impact upon foster parents who frequently do not receive adequate social service support to carry out their enormous task. In extreme cases, social worker burnout has left agencies understaffed and this in turn has often resulted in lack of social worker assignment to cases which most need such support. Increased bureaucratic regulations of agencies frequently place foster parents in a position with maximal responsibilities and with minimal assistance. As Kadushin (1974) observed:

The foster parent enacts the parental role in day-to-day contact with the child, yet the foster parent does not have the full rights of the true parent. . . .in getting a child, foster parents find that they get an agency as well. The agency sets limits and advances directives as to how the foster parents are to behave toward the child - a situation not normally encountered by biological parents. The shared control and responsibility for the child is clearly set forth in instruction pamphlets issued to foster parents Limited control implies limited responsibility as well. (pp. 432-433)

With the passage of PL 94-142, foster parents of handicapped children not only get a child and a social work agency; they get an additional set of directives as to how they are to behave regarding the child's special education needs. The following section of the review of the literature will address the issue of implementation of public policy and its impact upon handicapped children in foster care.

Planning and Implementation of PL 94-142

Public Law 94-142, and its state precursor in Massachusetts, Chapter 766, are the products of years of political activity. As such, they lend themselves to political examination. In addressing the issue of public policy implementation, Lipski (1980) stated:

The study of policy implementation is based on the assumption that society is capable of constructing appropriate responses to changing needs. Policy implementation studies speak to questions of political leadership because they attempt to assess the relationship between executive, legislative or administrative action and policy as it is ultimately experienced by the public. (p. xi)

A number of authors have examined the process of policy implementation and its effects upon those workers who must carry out the new practices and procedures. Lipsky (1980) observed that in policy areas where the law is to be implemented, changes are required in the behavior of lower-level personnel. Furthermore, Lipsky noted that the work situations of public service personnel at the "street level" tend to constrain policy implementation in predictable ways. Weatherly (1980) pointed out that the implementation of PL 94-142 and Chapter 766 did not commence from equal footing either within or across states. He further suggested that PL 94-142 and Chapter 766 were superimposed on a social order characterized by substantial disparities in resources, wealth and power.

Basic disparities have already been alluded to in studies that were previously reviewed in this Chapter. For example, as Gruber (1978) found, handicapped children in foster care were nearly exclusively the responsibility of the state agencies, whereas non-handicapped children were frequently sub-contracted out to agencies within the private sector. The disparities between working conditions in the private and public sectors have been well-documented in the literature. State social service agencies typically employ less-highly-trained case workers, overload these workers with unmanageable caseloads, and create working conditions in which case workers are seldom able to provide adequate time to each case (Horejsi, 1979). Such situations do not support the social worker's efforts to safeguard the best interests of handicapped children as formal representative to the LEAs. This fact was confirmed by the Gruber study, inasmuch as 25% of the handicapped children in Massachusetts had not had formal evaluation for treatment or remediation of their disabilities. Given the additional finding that 15% of the handicapped children in the study possessed multiple handicapping conditions, the failure to insure that these children be referred for treatment cannot be attributed to the suggestion that these children possessed mild handicapping conditions which might have gone undetected. Furthermore, of the children whose disabilities had been evaluated, over 25% of the treatment plans had never been implemented. The formal legal responsibilities for overseeing and monitoring implementation for these children clearly reside with the case workers. Such data present serious doubts about the ability of social workers to assume the additional responsibilities of attending initial IEP staffings, annual review staffings and regular follow-up or progress conferences as would be expected of the

child's representative. In commenting on the working conditions of human service personnel, Weatherly (1980) stated:

Typically, personal and organizational resources are severely limited in relation to the tasks they are asked to perform, and the demand for their services is always as great as their ability to supply services, unless services are rationed or otherwise limited. To accomplish their required tasks, street-level bureaucrats must find ways of accommodating the demands on them and confronting the reality of personal and organizational limitations. They do this by routinizing, modifying goals, rationing their services, redefining or limiting the clientele to be served, controlling clients, asserting priorities and generally developing practices that permit them to process the work they are required to do in some way. Caught between the limitations of their work settings, the demands of their clients, and the formal expectations of their work roles, they characteristically experience considerable stress in the performance of their duties. (pp. 5-6)

Indeed, every state-wide survey or agency investigation reviewed in this Chapter concluded that social workers were currently unable to fulfill their assigned duties in even a minimal fashion, given the caseloads and child characteristics of clients assigned to them. Recommendations for additional staff were made in the state agencies of Arizona, California, New Hampshire, Massachusetts, Vermont and Iowa (Vasaly, 1976).

The literature suggests, however, that even if social worker caseloads were to be reduced, problems would still obtain in the practice of allowing social workers to represent handicapped children to the LEAs. The A.C.Y.F. Report across five states (Vasaly, 1976) concluded that in-service training programs were required in order to assist caseworkers in doing their child welfare jobs. Among the skills that investigators found to be deficient in case workers were:

1. Competent case recording techniques
2. Skills in developing case plans

3. Ability to identify special problems
4. Methods of problem solving
5. Ability to set short and long range goals
6. Ability to set time frames for achieving goals
7. Ability to review and revise case plans.

Lack of facility in these skills would suggest that case workers with such deficiencies are unprepared to serve as sole representatives of handicapped children, or, at best, are placed in a tenuous position as professional team members in the IEP process. To that point, a recent article on policy and practice in social welfare by Constable & Black (1980) pointed out the general unpreparedness of social workers in dealing with a law (PL 94-142) that is having such a profound effect on social welfare practice. Additionally, Constable & Black cited the fact that the introduction of the IEP also has begun to have an impact on social work practice since it represents an explicit and assessable agreement between the members of a multidisciplinary team and the parents. They stated:

The process of assessment demands the use of annual goals and terminal behavioral objectives which specify the desired behavioral outcomes needed to achieve the annual goals. Social workers are not generally accustomed to formulating objectives in this way. (p. 275)

In commenting upon the nature of PL 94-142 as an act which places service delivery as an entitlement, the authors state:

When clients have a right to an education which meets their individual needs, and procedural safeguards exist to guarantee this right, the entire direction of social work practice in schools is shifted. The shift, which affects every aspect of practice with handicapped children, may be initially interpreted as a simple increase in "procedures." However, only the development of practice models which are genuinely geared to client entitlements will make client accountability a reality. . . .The older models were felxible, individualized, and worked well in

many cases. The new models may seem bureaucratic, an unnecessary bother, and potentially dysfunctional because of their complexity. . . . If . . . social workers do not develop a clear and specified contribution to PL 94-142, their role could become quite limited and a chance to contribute to the upgrading of school services will have been missed. (p. 276)

It is clear from such statements which appeared in one of the most highly-respected social work publications, Social Service Review, from the University of Chicago, that the implementation of PL 94-142 has been initiated in a manner that has failed to consider the impact of this Law upon the practices of a discipline that would be intricately involved in the IEP process. Since 1977, SEAs have undertaken the task of implementing PL 94-142. Yet, state social service agencies, responsible for large numbers of handicapped children across the states, have been left to provide for their own inservice training as best they can. In Massachusetts, for example, the Division of Social Services (1982) developed guidelines for social worker involvement in the IEP process four years subsequent to the 1977 Rules and Regulations for PL 94-142, and seven years after the passage of the state precursor law, Chapter 766. Such a lag would suggest that the SEAs may have fallen short in playing a leadership role in providing technical assistance to state social service agencies in an orderly fashion and without undue delay. In fact, Weatherly (1980), in presenting an analysis of implementation of Chapter 766 in Massachusetts, suggested that the SEA's approach to implementation was to emphasize regulations of local compliance rather than to provide technical assistance. Subsequently, Weatherly noted, the SEA lacked the capacity to enforce its requirements, and it eventually relaxed them as regional offices became buried in forms which they lacked the staff to process. Although the responsibility for state social

service agencies' meeting the professional demands of PL 94-142 rests clearly with the agencies themselves, the literature reflects the sentiments of social welfare personnel that technical assistance has been either sorely delayed or not forthcoming.

In summary, then, it would appear that SEAs have, to date, been remiss in providing leadership for cooperative endeavors between themselves and state social service agencies. Furthermore, such failure has impacted upon a system that is already fraught with disparities in the manner in which handicapped children are served. As Weatherly (1980) suggested, "In the case of special education reform, the goal of educating all handicapped children is being carried out in such a way that serves some children better than others, and some not at all," (p. 8-9).

It would be erroneous, however, to suggest that PL 94-142 totally failed to anticipate the needs of handicapped children in foster care. Section 121a.514 of PL 94-142 stipulates that SEAs shall implement a process whereby Surrogate Parents are assigned to those handicapped children for whom the actual parents or legal guardians cannot be identified. The following section will review the literature on the surrogate parent provision.

The Surrogate Parent Provision of PL 94-142

PL 94-142, Section 121a.514 states that each public agency shall insure that the rights of a child are protected when:

1. No parent can be identified;
2. The public agency, after reasonable efforts, cannot discover the whereabouts of a parent, or
3. The child is a ward of the State under the laws of that State.

To date, no empirical investigations have been conducted to assess the

impact of the Surrogate Parent provision upon the actual representation of handicapped children.

Information disseminated by the U.S. Office of Special Education (1981) indicates that slightly more than one-half of the states have begun to implement the Surrogate Parent provision as mandated under PL 94-142. Of this number, approximately three-fourths of the states have developed plans by which surrogate parent appointment is administered from the state department level. The remaining states have developed plans which called for LEA administration and implementation of the Surrogate Parent Provision.

No empirical data exist to document the effectiveness of an SEA-administered surrogate parent program over a LEA-administered one. Of particular note for the present study, however, is the fact that the Department of Education in Massachusetts and the Massachusetts Division of Social Services reached mutual agreement regarding the assignment of surrogate parents in March, 1981, four years after the publication of the 1977 Rules and Regulations and seven years after the implementation data of Chapter 766. In a document dated April 3, 1981, the Division of Social Services established the following priorities for appointing a representative for a handicapped foster child for special education purposes:

1. The parent is the primary person to be considered as the child's representative;
2. An adult family member other than the parent;
3. The foster parent;
4. Big Brother/Big Sister, or other volunteer working with the child; and

5. Other volunteer trained by the Division of Special Education (Educational Advocate).

In reaching final agreement, the two agencies, the Division of Social Services and the Department of Special Education, acknowledged the potential confusion that the term "Surrogate Parent" has upon a situation that is already layered with multiple representatives and role ambiguity for each of the representatives:

Due to the emotional connotations of the term "parent" and also due to the expectations that the term creates for some children, the term "Surrogate Parent" is not used in Massachusetts; instead we refer to this role as Educational Advocate (Attachment A).

As can be seen from the prioritized ranking, however, in the absence of parental involvement or in the case of abandonment, the responsibility of representing the handicapped foster child rests with the foster parent.

The literature, then, has identified the difficulties inherent in an ambiguous foster parent role. Furthermore, research investigations have disclosed the frequency with which handicapped children in foster care experience placement after placement. Additionally, the literature has shown that social workers are unable to provide regular support to foster parents of handicapped children given the demands of their job. In view of these data, and the present unpreparedness of foster parents to assume the new role of educational advocate, the ability of foster parents to fulfill this role successfully is seriously called into question. In order to establish the current status of the parental role in the IEP process, the following section will review existing literature which addresses the nature, scope and success of natural parents' involvement in the IEP process.

Participation of Natural Parents in the IEP Process

The history of parental involvement in school matters is not subject to a single interpretation. Roper (1977) considered parents to have been the natural enemies of the school system throughout the history of American education. He stated:

In the eyes of educators, the parent was always wrong. Parents were a potential threat to the institution, in that they initially held the power to withhold clients and payment from the system. (p. 240)

Cronin (1977), taking the opposite stance, viewed parents and educators as having been allies throughout the history of American education. In discussing the lack of encouragement for parental involvement in European school systems, Cronin contrasted the willingness of American school systems to involve parents in school affairs. Cronin cited the trend of public schools to adopt formal courses in parenting skills as evidence of the schools' concern for parent-school alliance. He likewise noted the trend toward decentralization of school decision-making, as exemplified by such practices as school-site management budget decisions.

Despite the fact that the historical trend in American education has been exemplified by decreased parental participation and involvement in critical decision-making, this trend would appear to be shifting in recent years. This is particularly true in terms of the involvement of parents of handicapped children in the educational process of their children. McAleer (1978) cited the fact that within the not-too-distant past, virtually all contacts between school and parents were written. If the school requested a parent conference, it most always meant that the child was in trouble.

Such strained interactions between home and school are not conducive to successful implementation of educational programming for children, especially handicapped children. Authors such as Love (1970) and Friedman (1978) have identified the child's family, specifically his or her parents, as the most important element of an exceptional child's life. The role of the family in the child's special education process was discussed by Abrams & Kaslow (1977). These authors stressed the importance of including the parents in the educational process, particularly since such inclusion could help synthesize into a coherent whole all the information gathered by various professionals. Other authors viewed the role of parent involvement as more extensive than that of information-gathered or synthesizer. Kroth (1975, 1978) suggested that the critical reason for maintaining reduced class size for exceptional children is the increased time that it provides for teachers and parents to work together on implementing appropriate educational programming. Hobbs (1978) likewise has been an outspoken advocate for parental involvement, arguing that schools must recognize the ultimate responsibility of parents for the education of their children. He stated:

Schools often treat parents as nuisances, but actually they have to be central in any kind of intelligent programming for children. One of the great things about Public Law (4-142 is that it recognizes the importance of parents and brings them into the planning and programming every step of the way. Parents have to be recognized as special educators, the true experts on their children, and professional people. . . .have to learn how to be consultants to parents. (p. 495)

The recognition of parents as educators of their handicapped children was also acknowledged by a report of the American Institute for Research (1978), which stated, "In general, parents have an immediate understanding of the daily needs of their children." Similarly, in a review of the

research literature of early intervention programs, Roland and Perrone (1979) found that educators generally agree that the more active the involvement of parents in the educational process, the more effective the program for their children, whether the program be traditional, experimental, compensatory, or noncompensatory. Finally, McLoughlin, Edge & Strenecky (1978) suggest that increased parental involvement in the actual diagnosis and treatment of learning disabilities in their children will enhance the parent-professional exchange of information, encourage parents to grow in their role of team member, and will facilitate a trusting, productive relationship between the child's home and the school.

With the advent of PL 94-142, shared decision-making between parents and educators is no longer an option; it is a requirement (Hudson & Graham, 1978; McAleer, 1978; Turnbull, 1978; Turnbull & Turnbull, 1978). As representatives of their child's right to a free, appropriate, public education, parents have the right to a hearing in the event that they disagree with decisions concerning evaluation, placement and programming made by the LEA Team. The literature by Hudson and Graham (1978), McAleer (1978), Turnbull, (1978), and Turnbull & Turnbull, (1978) all expresses the unanimous sentiment that the right to such a hearing reflects the appropriateness for parents to be full participants in the IEP Team decision-making, rather than observers who attend the team meeting simply to be informed of decisions made by others regarding their child's educational needs and programming.

Despite the fact that the due process safeguards mandated by PL 94-142 insure maximum opportunity for parents to act as representatives for their children, the role of legal representative is a relatively

recent one for parents. This is particularly true when viewed against the long history of the adversarial relationship between parents and schools, as discussed earlier in this chapter. Since the 1977 implementation date of PL 94-142, research investigations have begun to show a repeated pattern that suggests that neither schools nor parents are prepared for the parental role of full team member. Adherence to the requirements of parental participation under PL 94-142 varies widely from one school district to another. Because this legislation is relatively recent, there has not yet been sufficient time to assess on a large-scale basis the extent of parental involvement in the IEP process nor the quality of such involvement. A small number of early studies are, however, available for preliminary consideration of the impact of PL 94-142 on parental involvement in the educational process of handicapped children. The following section of the literature review will discuss these studies.

Yoshida and Gottlieb (1977) developed a model that classified the degree of influence that parents may have on decisions made about their child during the IEP team meeting. This model represented a continuum, with active parental involvement in shared decision-making on one end of the continuum, and with passive parental observation (i.e. parents attend the meeting simply to gain knowledge about the IEP team decisions) at the opposite end of the continuum.

Utilizing this model, Yoshida, Fenton, Kaufman & Maxwell (1978) conducted survey research in the state of Connecticut to determine IEP Team members' perceptions of appropriate team functions for parents. Upon surveying a sample of 1,372 IEP team members as subjects, the investigators found that only two of the 24 team activities conducted

by the subjects were considered appropriate for parental participation by 50% or more of the professional educators surveyed. Of particular note was the fact that the two activities considered by the special educators to be appropriate for parental participation were related to information-gathering and sharing, as opposed to programmatic decision-making or placement decision-making. A study conducted by Gilliam & Goleman (1981) supports studies such as Yoshida's which suggests that parents are not participating as full team members in IEP staffings. Gilliam & Coleman surveyed 130 IEP participants in three Michigan school districts in order to determine which participants were most influential in team decision-making. Participants rank ordered the 15 participant roles most often represented in the IEP staffings. Subsequent to the staffings, post-rankings were obtained from the participants and ratings were obtained on participant contribution and participant influence. The findings revealed that those roles attributed high status before the staffings were not necessarily those considered to be influential after the staffings. The investigators concluded that the rankings support the French & Raven "expert power" theory. That is, that those individuals who have expertise and who offer hard data in terms of tests scores, diagnostic reports and cumulative records are regarded as most influential. The Gilliam & Coleman data revealed that parents were ranked approximately at the median level of importance in pre-staffing ratings but were ranked approximately in the bottom 17th percentile on contribution and in the bottom 20th percentile on influence in post-staffing ratings. Podany's study (1978) likewise generated findings that were consistent with the low rankings of parental contribution and influence obtained

from the Gilliam & Coleman study. Podany investigated parental perception of due process information, goal clarity, appropriateness of parental involvement in the IEP process, degree of participation in the IEP process and satisfaction with the IEP process in 52 sets of parents. Overall, when parents were asked to rate the appropriateness of their involvement in the IEP process, the degree of such involvement and their satisfaction with the IEP staffings, they rated appropriateness highest, satisfaction second and participation lowest. Thus, the parents in her study considered appropriateness of their involvement in the IEP process to be greater than the degree to which they actually participated. If, as Gilliam & Coleman suggest, ratings of contribution and influence are based upon the participants' ability to present "hard data," parental involvement may well be viewed by team members, including the parents themselves, as low in contribution and influence.

In addition to low level parent participation, the research literature also documents the fact that LEAs are not taking an aggressive posture in encouraging and facilitating parental participation in the IEP process. Furthermore, recent studies have found that even when parents are invited to participate, the LEAs have structured the IEP process in such a way that parents are not able to assume the role of full team members. For example, Andersen, Barner & Larson reported in a recent study (1978) that as many as 6% of the IEP's that they inspected at random had not even been signed by the parents and that several additional IEP's lacked written indication of parental approval. When such a notable number of parental signatures are lacking, one might safely infer that the LEAs involved in this study did not take seriously

the mandates that call for full parental participation. Goldstein, Strickland, Turnbull & Curry (1980) also found that LEA teams sometimes view parental participation in the IEP staffing as pro forma to previously-organized and developed IEP's. The investigators also suggested that many parents may prefer not to be involved actively in writing goals and objectives. Instead, they may prefer the role of reviewing a previously developed IEP with the opportunity to make additions or deletions. Additionally, the authors observed that individual preferences of the parents in this regard should be recognized. They noted that it should not be assumed that the most active involvement of parents in IEP development is always the goal for which to strive. Nevertheless the authors suggested that the mere presence of the parent at the IEP conference does not necessarily constitute true involvement.

A study conducted by Hoff, Fenton, Yoshida & Kaufman (1978) lends support to the proposition that presence alone does not insure full participation, and, further, that LEA assistance and facilitation does not necessarily insure parental understanding of decisions reached during the IEP process. Assuming that parental accuracy and agreement on the IEP information base was essential to their informed consent, the authors conducted a study of 20 sets of parents in an upper middle-class community in Connecticut to determine whether the parents possessed accuracy and agreement on four Team decisions: (a) eligibility, (b) placement, (c) program goals, and (d) review date. All 20 sets were parents whose children were being referred for initial evaluation. Despite systematic instruction during the staffing, the results were as follows. First, only 11 of the 20 cases represented situations in which both parents attended the IEP staffing.

Second, despite the investigators' encouragement and attempts to facilitate parental contributions during the staffing, at a two-week post-interview, 45% of the parents were unaware that decisions had been made at the IEP conference regarding eligibility. Third, 35% of the parents were unaware that a review date had been set, and only 50% of the parents were able to state clearly and accurately the IEP Team decisions regarding their child's placement. The authors stated that parents had not been informed by the LEA which decisions were mandated under Law, and the authors concluded that this may have contributed to the parent's lack of awareness that certain decisions had been articulated in the course of the IEP staffing. Similarly, the investigators found that upon commencing the IEP staffing, parents in the study were unaware of their right to introduce information at the staffing or to challenge information. The authors concluded:

Both parents and schools in this study assumed that parents, having witnessed the planning team, would understand fully the final planning team decisions. However, parents reported substantial misconceptions about special education decisions. These findings indicate that parents who have attended the planning team may be more informed about their child's learning handicap, but they are unaware of the special education program designed to meet their child's education needs. Informed parental consent is unlikely on the basis of parental participation in the planning team meeting alone. (p. 272)

Parents are not the sole team members who exhibit ignorance of their role and function. In a study by Fenton, Yoshida, Maxwell & Kaufman (1978), the authors suggest that professionals are equally uncertain of their own or of each other's roles as IEP team members. In surveying 1,478 IEP team members in the State of Connecticut, the investigators found that less than 40% of the teams sampled had a three-fourths majority who

recognized their responsibility to make specific decisions on 11 goals identified by the researchers as team responsibilities. Furthermore, the study disclosed noticeable disagreement about the team's duties among members within the teams. Stressing the need for school administrators to communicate team roles and responsibilities, the authors cited findings by Katz & Kahn (1966) who stated:

If group members have access to differing amounts and kinds of information, they are likely to perceive goals differently when they participate in joint decision-making activities. In contrast, access to the same information can increase common goal perceptions. (p. 543)

Such findings are particularly salient to the IEP staffings of handicapped children in foster care. As has been discussed previously, the social worker and foster parent representatives of these children come to the IEP staffing from a system which has frequently perpetuated role ambiguity. The literature documents the fact that before these representatives even begin their initial involvement with the LEAs, serious questions already exist regarding which representative is responsible for various intents and purposes. If, as Fenton, Yoshida, Maxwell & Kaufman (1978) indicate, less than 40% of their sample had a three-fourths majority who were able to recognize their responsibilities to make specified decisions, one would not expect that the representatives of handicapped foster children would fare better, given the ambiguity and role confusion that characterizes representatives of foster children.

Similarly, the comments of Katz & Kahn (1966) have direct relevance for the representation of handicapped foster children. If, as these authors suggest, it is critical that team members share the differing amounts and kinds of information that each brings to the staffings, the handicapped

child in foster care may be at a distinct disadvantage before the staffing even begins. Phillips, Haring & Shyne (1972) reviewed several research studies which indicated that serious inconsistency exists across social workers and agencies in regard to the information that is available prior to decisions that are crucial in the lives of the child clients. Horejsi (1979) reiterated these findings, stating:

Securing adequate and reliable information is time consuming; moreover, a high level of skill is needed to collect accurate information about. . . child behavior, mental and physical problems, potential problems in the extended family. . . Until greater public attention and support are given to funding and development of family support services, hiring and retention of well-trained social workers and reduction of caseloads to a more manageable level, poor. . . decisions will continue to be made to the detriment of the child. (p. 41)

As children move from one foster placement to another, it is not unusual for personal, educational, medical and health records and information to be lost or misplaced. Moreover, consistency in agency reporting is jeopardized as social worker burnout results in job turnover. The impact of these phenomena on decision-making on behalf of the child was noted in the Phillips, Haring & Shyne study:

There were indications that 47% of the placement decisions might have been altered if additional information had been available to the social worker. Given the seriousness of placement decisions, it is essential that such decisions be based on adequate and reliable information. Unfortunately, pressures, time limitations and the atmosphere of crisis pervasive in child welfare work preclude a systematic gathering of information. (p. 4)

In summary, then, the literature in this chapter has documented the fact that handicapped children in foster care enter foster care at an early age, spend longer periods of their lives in foster care, and experience more frequent re-placement than do non-handicapped foster children. The literature has presented a profile of a foster care system in which a high percentage of decisions made on foster children's

behalf are made on the basis of incomplete or inadequate information. Additionally, the research has shown that when decisions are made, they are most frequently made under crisis conditions, rather than as a result of careful planning. Research studies document the fact that handicapped children in foster care have, during the course of their stay in foster care, a significantly higher number of representatives due to their frequent placements and to the higher social worker attrition rates found in the public versus private sector. Against the backdrop of these findings, the present study sought to determine whether the variables identified in the child welfare literature as salient to placement problems likewise presented problems regarding the representation of these children for special education purposes.

CHAPTER III

METHOD

The purpose of the present study was to compare the degree of agreement and accuracy of social workers and foster parents to that of a control sample of natural parents on eight LEA Team decisions: (a) classification, (b) eligibility, (c) program placement, (d) IEP goals, (e) IEP objectives, (f) responsibility for service delivery, (g) frequency of services, and (h) duration of services. Additionally, the study sought to determine whether agreement and accuracy of social worker and foster parent representatives differed when neither, either, or both of these representatives were involved in the IEP process. In order to operationalize this study, the following design was utilized.

DESIGN

The research design for this study was quasi-experimental rather than experimental. Thus, only partial control was possible since random assignment of subjects to conditions was not possible (Campbell & Stanley, 1966). The design was based upon four different patterns of representative involvement in the IEP process:

Condition 1 included those cases in which neither the current social worker nor the current foster parent had been involved in the LEA Team staffing.

Condition 2 included those cases in which the current social worker had not been involved in the LEA Team staffing, but the current foster parent had been involved.

Condition 3 included those cases in which the current social worker had been involved in the LEA Team staffing, but the current foster parent had not been involved.

Condition 4 included those cases in which both the current social worker and the current foster parent had been involved in the LEA Team staffing.

Subjects were identified according to condition, and cases were selected until the cell numbers met specification, as described in the section Subjects. No further experimental manipulations were involved.

SETTING

The present study was conducted in two states, Kansas and Massachusetts. These states were selected on the basis of two criteria:

1. Both states had recently revised their SEA Annual State Plans to reflect a more permissive definition of "parent" for special education representation of handicapped children; and
2. The two states represented geographic diversity which was considered useful for purposes of generalization of findings. Kansas was considered to be representative of rural, less densely-populated areas, while Massachusetts was considered representative of more densely-populated urban area. In addition, the two states represented two different geographic regions of the country, midwest and East Coast.

SUBJECTS

Subjects for this study consisted of 96 social workers and 96 foster parents of handicapped children in foster care. Subjects from Massachusetts were employed by the Massachusetts Department of Public Welfare and by the New England Home for Little Wanderers. Kansas subjects were employed by the Kansas Social and Rehabilitative Services and by the Kansas Children's Service League. Subjects were selected on a case basis, that is, if social worker, foster parent and handicapped foster child respectively met the following criteria:

1. Both social worker and foster parent subjects in each case had agreed voluntarily and independently to participate in the study.
2. The children whom the social workers and foster parents represented must have been identified as handicapped in accordance with the provisions of PL 94-142 and/or Massachusetts Chapter 766. At least one IEP Team staffing must have been conducted on each child.
3. The handicapped children whom the social workers and foster parents represented must have been named wards of the State; that is, the children were in legal custody and under legal guardianship of the State.

In addition, a control group of 24 sets of natural parent subjects were employed in the study. This group consisted of natural parents of handicapped children residing in their natural family units. Selection of the natural parent cases was done at random on the basis of the following two criteria:

1. Natural parent cases were obtained from the LEAs of

the handicapped foster children in Condition 4 (both social worker and foster parent was involved in the IEP process). Matching by LEA was done to control for the variability of LEA Teams.

2. In each case, both natural mother and father had to have been involved in the IEP process.

The total N of cases utilized in this study was N=120. An N of 24 cases was assigned to each of the four conditions, 12 cases obtained from each of the two states, and an N of 24 sets of natural parent control subjects. Thus, the total N of interviews conducted for this study was N=240. Since the purpose of one section of this study was to gather descriptive information, specific information regarding the social worker, foster parent, natural parent and handicapped child subjects can be found in Chapter IV, Results.

INSTRUMENTATION

In order to obtain data for the study, three survey instruments were developed for interviewing social workers, foster parents and natural parents, respectively. The Social Worker Survey Instrument was comprised of three main components. These components consisted of questions regarding the following variables:

1. Foster Child Demographic Information
 - a. Age
 - b. Sex
 - c. Foster placement history
 - d. Ethnic background
2. Social Worker Demographic Information
 - a. Professional degree
 - b. Employment history

- c. Present caseload
- d. History of contact with case
- e. Responsibility for representation

3. LEA Team Staffing Decisions

- a. Child's classification/eligibility
- b. Program Placement
- c. IEP Goals/Objectives
- d. Program intensity

The Foster Parent Survey Instrument, likewise, was comprised of four main components. Components 1 and 3 were identical to those of the Social Worker Survey Instrument. Questions contained in Component 2 were specific to the foster parent and related to the following variables:

Foster Parent Demographic Information (Component 2)

- a. Age
- b. Foster parenting history
- c. Level of education
- d. Number of natural children residing within the household
- e. History of foster parenting with handicapped children
- f. Responsibility for representation

The Natural Parent Survey Instrument was comprised of three main components. Component 3 was identical to those of the Social Worker and Foster Parent Survey Instruments. Component 1 and 2 consisted of questions that were specific to the natural parents. These questions related to the following variables:

Natural Child Demographic Information (Component 1)

- a. Age
- b. Sex
- c. Ethinc background

Natural Parent Demographic Information (Component 2)

- a. Age
- b. Number of natural children residing in the home
- c. Number of additional handicapped children
- d. Level of education
- e. Responsibility for representation

Survey Instruments for social workers, foster parents and natural parents are shown in Appendix B.

Prior to the actual study, the survey instruments were field tested on a sample of 15 social workers, foster parents and natural parents in Kansas. This was done in order to insure that obtained discrepancies in subject responses were true informational disagreements and not a function of the survey items. Reliability between interviewer and observer was trained to a criterion of 90% to 100%. Once the initial reliability criterion had been achieved, the reliability of agreement between the researcher and the trained interviewers was obtained four times for the duration of the study: twice in Kansas and twice in Massachusetts. Reliability percentages for each section of the Survey Instruments and for the total Instruments are reported in the results section of this investigation (Chapter IV).

PROCEDURE

Procedures for Establishing Agency Cooperation

Because each case in this investigation necessitated obtaining large amounts of data on three individuals (social worker, foster parent and handicapped child), agency cooperation and agreement for participation was critical to this study. Prior to commencing the study, the investigator met with Directors of the agencies involved to explain demands of time that would be made of social workers and foster parents. Anonymity and confidentiality were assured the agencies, and written agreements of cooperation from the agencies were obtained. Letters of Cooperation are shown in Appendix C.

Selection and Training of Interviewers

Once agency cooperation was obtained, interviewers were selected in Kansas and Massachusetts. Since interviewers in Massachusetts were required to work independently and at a great distance from the investigator for most of the data collection, criteria for selection included: (a) knowledge of special education, (b) familiarity with the social service agencies that participated in the study, (c) ability to negotiate through large, bureaucratic systems. Two interviewers were selected for data collection in Massachusetts, and one was selected for data collection in Kansas. The investigator conducted a small number of interviews in each state. Procedures for conducting interviews were developed for use by interviewers. These consisted of step-by-step instructions and standardized questions that the interviewers were to utilize in order to obtain each datum for the study. The Procedures for Interviewers are shown in Appendix D. Training sessions were conducted in both states to prepare interviewers for data collection, and consisted of the following components:

1. Explanation and instruction regarding nature and purpose of the study.
2. Verbal explanations of Procedures for Interviewers.
3. Modeling of interview procedures by the investigator.
4. Direct observation and evaluation of interviewer performance of the first three interviews conducted by each interviewer.

Obtaining Voluntary Participation of Social Workers and Foster Parents

Since each case required the voluntary participation of both social worker and foster parent in order to be included in this study, the following procedures were followed. First, interviewers contacted

social service agencies and scheduled appointments with agency workers who had been identified as having handicapped foster children on their assigned case lists. Second, interviewers met with social workers and provided written and verbal descriptions of the study. Written overview descriptions are shown in Appendix E. If the social worker agreed to participate, interviewers left the social worker's office while the social worker made phone contact with the foster parents to ascertain whether voluntary participation would be rendered by them. If foster parents refused to participate, that case was discarded. If the foster parent agreed to participate, the social worker then inquired whether the foster parent would prefer to conduct the interview immediately over the phone, or whether a personal interview would be preferable. In instances where phone interviews were to be conducted, either immediately or at a later date, both the social worker and the interviewer documented in writing that foster parent consent had been verbally rendered for voluntary participation. In those instances where foster parents preferred personal interviews, foster parents themselves provided written agreement for voluntary participation.

Procedures for Conducting Social Worker and Foster Parent Interviews

Once foster parent agreement for participation had been obtained, the case was included in the study. If the foster parent interview needed to be conducted by phone, the following procedures were observed. First, the interviewer followed the step-by-step written Procedures for Interviewers, obtaining subject responses on each of the Survey Instrument items. Foster parent responses were recorded both manually onto the Survey Instrument and on tape, by means of

verbatim repetition of the responses given by subjects over the phone. Social worker interviews were conducted in person, and responses for each of the Survey Instrument items were both hand-recorded onto the Survey Instrument and tape-recorded.

Procedures for Conducting Natural Parent Interviews

Once the social worker/foster parent interviews for Condition 4 (both representatives involved in the IEP process) had been completed, it was possible to identify the LEAs on which the Natural Parent cases would be matched. Those LEAs were contacted and written Agreements of Cooperation were obtained (Appendix C). Cases were selected randomly on the basis of the criterion that both parents had been involved in the IEP process.

LEA personnel made contact with potential Natural Parent subjects to ascertain whether voluntary participation would be rendered. If parents indicated a willingness to participate, subsequent personal interviews were then scheduled. Interviewers conducted the Natural Parent interviews in a manner identical to that described above for Social Worker interviews. Both hand-recording and tape-recording of Natural Parent responses were obtained.

DATA ANALYSIS

Scoring Procedures

The written and taped responses obtained from case interviews were reviewed by the investigator and an independent scorer who was not associated with the experiment. The demographic data obtained from case interviews were transferred to computer summary sheets in preparation for computerized analyses. Rules for scoring the responses

from the quasi-experimental section of the research were developed for each of the eight dependent variables listed under Design. Rules for Scoring are shown in Appendix G.

The investigator and scorer proceeded item-by-item, rating each item on agreement/disagreement and on accuracy/inaccuracy in accordance with criteria established in the Rules for Scoring. Reliability percentages for scoring each section of the interviews ranged from 91.00 percent to 100.00 percent. The overall reliability percentage for scoring was 99.02 percent. Reliability percentages for scoring are shown in Appendix H. Scored data were key-punched and verified by the University of Kansas Computer Center, and submitted for computer analysis.

Statistical Analysis

Demographic data comprising Research Questions 1-5 were analysed by utilizing the Bio-med (BMDP) Statistical Packages for the Computer in obtaining frequencies, percentages, means and standard deviations. Statistical procedures for Research Questions 6-9 consisted of Chi-square analyses for homogeneity for Null Hypotheses 1-3 and 6-8. One-way ANOVA procedures were conducted for Null Hypotheses 4, 5 and 9. When statistically significant results were obtained from Chi-square analyses for homogeneity, post hoc phi coefficients or Cramer's contingency coefficients were obtained. When ANOVA F-ratio values for the group effects of the representative conditions were found to be significantly different from chance in respect to a particular dependent variable, the corresponding null hypothesis was rejected and the Newman-Keuls multiple range procedure was utilized on a post hoc basis to compare combinations of

the conditions means for that variable.

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CHAPTER IV

RESULTS

The purpose of the present study was to compare the degree of agreement and accuracy of social workers and foster parents to that of a control sample of natural parents with respect to the eight LEA Team decisions described in Chapter III, Method. These differences were examined under the four patterns of representative involvement, that is, when neither, either, or both of the child's current representatives had been involved in the last IEP staffing. Additionally, descriptive data were obtained on the social worker, foster parent, handicapped child and natural parent subjects in order to assist with interpretation of the analyses.

Since the study consisted of two parts, descriptive and quasi-experimental research, the results of the analyses will be presented in sequential order by research questions. Before presentation of the findings, reliability data of interviewers are shown and discussed as follows.

RELIABILITY DATA OF INTERVIEWERS FOR SURVEY INSTRUMENT

Procedures utilized to collect reliability data were discussed previously in Chapter III under Instrumentation (p. 71). The means and ranges of resulting reliability percentages are shown in Table 1 for each section of the three research instruments, and for the total percentages of all three instruments combined. As can be seen in Table 1, the overall mean reliability across sections of the three survey instruments was 97.5 percent. Overall range of reliability percentages across the three instruments was 98.5 to 100.00 percent.

DESCRIPTIVE RESEARCH

TABLE 1

Means and Ranges of Reliability Percentages Obtained by Scores for Social Worker, Foster Parent, and Natural Parent Survey Instruments

Instrument Section	SW Interviews		FP Interviews		NP Interviews		Total Interviews	
	Mean %	Range %	Mean %	Range %	Mean %	Range %	Mean %	Range %
Child Demographic Information	100.0	100.0 - 100.0	100.0	100.0 - 100.0	100.0	100.0 - 100.0	100.0	100.0 - 100.0
Respondent Demographic Information	100.0	100.0 - 100.0	100.0	100.0 - 100.0	100.0	100.0 - 100.0	100.0	100.0 - 100.0
LEA Team Decisions	90.0	86.5 - 100.0	100.0	100.0 - 100.0	100.0	100.0 - 100.0	95.5	86.5 - 100.0
Overall Instrument	94.6	86.5 - 100.0	100.0	100.0 - 100.0	100.0	100.0 - 100.0	97.5	98.5 - 100.0

Research Question 1: What is the frequency with which two of the permissible representatives, social workers and foster parents, are actually serving as representatives for handicapped children in foster care for special education purposes?

Results

The frequencies and percentages of cases in which both representatives, either representative, or neither current representative had been involved in the child's last IEP staffing are shown in Table 2. As can be seen in this table, the total number of handicapped foster children assigned to the social worker subjects in this investigation was 997. Of that number, only 33 children (3.30 percent) had been represented at their last IEP staffings by both their current social workers and foster parents. The pattern of representation for these children, in rank order, was: (a) neither of the current representatives had been involved in the last IEP staffing (50.65 percent), (b) only the current foster parents had been involved (42.52 percent), (c) only the current social workers had been involved (3.51 percent), and (d) both the current representatives had been involved (3.30 percent).

TABLE 2

Frequencies and Percentages of Handicapped Foster Children Represented by Both their Current Representatives, by Either Current Representative, or by Neither Current Representative at the last IEP staffing.

State	Both		SW Only		FP Only		Neither		Total	
	N	%	N	%	N	%	N	%	N	%
Kansas	18	4.30	17	4.06	202	48.32	181	43.30	418	100.0
Massachusetts	15	2.59	18	3.10	222	38.34	324	55.96	579	100.0
Total	33	3.30	35	3.51	424	42.52	505	50.65	997	100.0

The data in Table 2 represent not only the 96 cases of handicapped foster children subjects utilized in this investigation, but also the total caseloads of handicapped foster children assigned to the social worker subjects. In order to sample the reasons for non-involvement of social workers and foster parents, surveying was done for the 72 handicapped children cases in this study in which one or both representatives had not been involved in the last IEP staffing. Table 3 shows frequencies and percentages for social worker and foster parent non-involvement in the last IEP staffing for these cases. The data revealed that the highest-ranking reason for both social worker and foster parent non-involvement in both states was the assignment of a previous social worker or foster parent at the time of the last staffing. The combined percentage for this finding across both states was 41.66 percent. The second highest-ranking reason for both social worker and foster parent non-involvement was the failure of the SEA to notify these representatives. The combined percentage for this finding across both states was 38.88 percent.

Research Question 2: Whom do the social worker and foster parent subjects in this investigation identify as being responsible for representing their handicapped client/foster child for special education purposes?

Results

Frequencies and means of social worker and foster parent responses to this question are presented in Table 4. Findings revealed that of the 96 social workers, 90 (93.75 percent) identified themselves as solely responsible for representing their handicapped clients. Likewise, foster parents identified themselves as sole representative with high frequency (64.58 percent). Seventy-nine percent (79.17 percent)

TABLE 3

Frequencies and Percentages of Reason for Social Worker and Foster Parent Non-involvement in the last IEP staffing.

Reason	Social Worker		Foster Parent		Total*	
	N	%	N	%	N	%
<u>Kansas</u>						
Previous Social Worker/Foster Parent assigned	6	16.67	7	19.44	13	36.11
Had previous appointment	2	5.56	0	0.00	2	5.56
Not notified by LEA	12	33.33	4	11.11	16	44.44
FP had to work	0	0.00	3	8.33	3	8.33
Did not show	0	0.00	2	5.56	2	5.56
Total	20	55.56	16	44.44	36	100.00
<u>Massachusetts</u>						
Previous Social Worker/Foster Parent assigned	8	22.22	9	25.00	17	47.22
Had previous appointment	1	2.78	1	2.78	2	5.56
Not notified by LEA	10	27.78	2	5.56	12	33.33
FP had to work	0	0.00	3	8.33	3	8.33
Did not show	0	0.00	2	5.56	2	5.56
Total	19	52.78	17	47.22	36	100.00

*N = 72

TABLE 4

Frequencies and Means for Social Worker and Foster Parent Responses
to Individual Identified as Responsible for
Representation

Individual Responsible	Social Worker N	Social Worker \bar{X}	Foster Parent N	Foster Parent \bar{X}	Total N	Total \bar{X}
Self only	90	93.75	62	64.58	152	79.17
Social Worker & Foster Parent	4	4.16	32	33.33	36	18.75
LEA Special Education Director	2	2.08	1	1.04	3	1.56
LEA Team Psychologist	0	0.00	1	1.04	1	0.52
Total	96	99.99	96	99.99	192	100.00

of the total representatives sampled (N = 192) viewed themselves as solely responsible for representing the handicapped foster children for special education purposes. The data also suggest that neither of these representatives perceived representation to be a joint responsibility. Only four social workers indicated that the foster parents were jointly responsible with them as representatives of their respective handicapped clients/foster children, and only 32 foster parents (33.33 percent) acknowledged joint responsibility together with the social workers for representation purposes.

Because the number of social worker responses (94) and foster parent responses (94) resulted in identical frequencies on the first two variables in Table 4, a Chi-square test of independence was conducted to test the following hypotheses:

H_0 : The type of representative is independent with respect to the individual whom subjects identified as responsible for representation purposes

H_1 : The type of representative is not independent with respect to the individual whom subjects identified as responsible for representation purposes.

The 2 x 2 contingency table for this analysis is shown in Table 5.

TABLE 5

Chi-square Test of Independence for Social Worker and Foster Parent Responses with Respect to Identification of Individual Responsible for Representation

	Social Workers N	Foster Parents N	Total
Self	90	62	152
Both	4	32	36
	94	94	N=188

Chi-square, 3 df = 26.935, $p < .001$

The test for independence resulted in a Chi-square value of 26.9356 with 1 df, $p < .001$. Thus, the null hypothesis was rejected since type of representative was found not to be independent of the individual whom the social worker and foster parent subjects identified as responsible for representation purposes. The strength of this measure of dependence was tested with a post hoc phi test. The phi value obtained was .3785. Thus, despite the dependence of type of representative with choice of individual identified as responsible for representation, the predictive value of these variables one for the other was found to be weak. The results of this analysis suggest that both social worker and foster parent subjects viewed themselves as solely responsible for representing their handicapped client/child. Nevertheless, the data revealed that a statistically significant number of foster parents recognized the joint nature of responsibility for representing the special education needs of the children under their foster care.

Research Question 3: What are the demographic variables of age, sex, ethnic background, handicapping conditions and placement history of the children who are represented by the social worker and foster parent subjects of this investigation?

As was discussed in Chapter 1, demographic information is sorely lacking on the population of children in foster care who are labeled "handicapped" in accordance with the specifications of PL 94-142 for the term "Handicapped Child." The demographic data obtained on these children will be presented under sub-headings in the sequential order of each of the demographic variables listed in Research Question 3.

Results

Age Characteristics of the Handicapped Foster Children Sample.

Data obtained on the demographic variable of age is shown in Table 6. The mean age of the children across both states was nearly identical. The mean age of the children sampled was approximately 12 years.

Sex Characteristics of the Handicapped Foster Children Sample.

Differences in the frequencies of males and females were noted in both states. As would be anticipated in a sample of handicapped children, the percentage of males was almost twice that of females (63.43 percent vs. 36.46 percent) across both states.

Ethnic Background Characteristics of the Handicapped Foster Children Sample. Ethnic patterns were notably uniform across both states as shown in Table 6. Caucasian children predominated in this sample, outnumbering blacks by 4:1 in Kansas and by 3.5:1 in Massachusetts. Few Hispanic or Asian children were found in this sample (6.25 percent), and no Native Americans were among the children sampled in this investigation.

Disability Characteristics of the Handicapped Foster Children Sample. Data obtained with respect to the handicapping conditions of the foster children subjects are shown in Table 7. The highest-ranking disability category among the subjects in both states was mental retardation (41.67 percent), while deaf and hard-of-hearing, speech and language, and orthopedically handicapped each ranked lowest with only 1.04 percent of the subjects sampled. Children in foster care who were diagnosed as possessing emotional/behavioral disabilities ranked second-highest. However, 14.59 percentage points separated the first- from second-highest ranking categories. Absent

Table 6

Mean Age, Sex, and Ethnic Background Frequencies and Percentages for Handicapped Foster Children Subjects

State	<u>Mean Age</u>		<u>Sex</u>				<u>Ethnic Background</u>				
	Year	Month	Male		Female		Asian	Black	Cauc.	Hisp.	Nat. Amer.
			N	%	N	%					
Kansas	12	5	32	33.33	16	16.67	1	9	36	2	0
Massachusetts	12	1	29	30.21	19	19.79	0	10	35	3	0
Total	12	4	61	63.54	35	36.46	1	19	71	5	0
							1.04	19.79	73.96	5.21	0.00

Table 7

Frequencies and Percentages of Handicapping Conditions of Foster
Children Subjects

Condition	Kansas		Massachusetts		Total	
	N	%	N	%	N	%
MR	27	56.25	13	27.08	40	41.67
ED/BD	9	18.75	17	35.41	26	27.08
LD	1	2.08	12	25.00	13	13.54
DHH	1	2.08	0	0.00	1	1.04
S&L	1	2.08	0	0.00	1	1.04
ORTHO	1	2.08	0	0.00	1	1.04
SMH	6	12.50	2	4.17	8	8.33
ECEH/DD	2	4.17	4	8.33	6	6.25
Total	48	50.00	48	50.00	96	100.00

from the sample were children who were visually impaired or deaf-blind, two of the lower incidence handicapping conditions.

A statistical breakdown of handicapping conditions was conducted in order to determine the number of foster children who possessed one, or more than one handicapping conditions. Frequencies and percentages of primary and additional handicapping conditions are shown in Table 8. The results indicated that a high percentage of subjects (67.71 percent) were multiply-handicapped. Additionally, better than 5 percent of the children possessed four or more handicapping conditions. In rank order by number of handicapping conditions, the highest percentage was two handicapping conditions (45.83 percent), followed by one handicapping condition (32.29 percent).

Placement History Characteristics of the Handicapped Foster Children Sample. Data obtained with respect to these characteristics are contained in three separate tables: Table 9, Table 10, and Table 11. Table 9 shows that in both states, children sampled for this investigation had experienced as few as one and as many as nine foster placements. Throughout Table 9, the data from both states reflect a high degree of consistency of findings. For example, the data show that children who had experienced one-and-only-one foster placement were most frequent in this sample. In Kansas, 12 of the 48 children had had only one foster placement throughout their stay in foster care; in Massachusetts, 15 of the 48 children had experienced only one placement. Inspection of Column 4 of Table 9 suggests that number of foster placements, by rank order, is nearly identical across the two states. Children who had experienced one, three, or six foster placements constituted over half of the entire sample (57.29 percent).

TABLE 3

Frequencies and Percentages of Primary and Additional Handicapping
Conditions of Foster Children Subjects

State	<u>Number of Handicapping Conditions</u>									
	<u>One</u>		<u>Two</u>		<u>Three</u>		<u>Four</u>		<u>Five</u>	
	N	%	N	%	N	%	N	%	N	%
KS	16	33.33	18	37.50	10	20.83	3	6.25	1	2.08
MA	15	31.25	26	54.17	6	12.50	1	1.04	0	0.00
Total	31	32.29	44	45.83	16	16.67	4	4.17	1	1.04

TABLE 9

Placement Frequencies, Ranked Placement Frequencies, Mean Frequencies, and Mean Length of Time in Foster Placements

State	Number of Placements	Frequency	Ranked Placements by Frequencies	Mean Number of Placements	Mean Number of Social Workers	Mean Length in Foster Care (Years)
KS	1	12	1	3.77	4.29	7.57
	2	5	3			
	3	10	6			
	4	4	2			
	5	4	4,5,9			
	6	6	7			
	7	3	8			
	8	0				
	9	4				
Total	181	48				
MA	1	15	1	3.46	7.29	6.78
	2	4	3			
	3	9	6,4			
	4	6	2			
	5	3	5,9			
	6	6	7			
	7	2	8			
	8	0				
	9	3				
Total	166	48				
Total	347	96		3.61	5.79	7.17

At the time of this study, the mean number of placements experienced by the foster child subjects over the duration of their stay in foster care was 3.61 placements. Since the mean length of stay in foster care for these children was 7.17 years per child, the mean number of placements of these children amounted to approximately two foster placements per year. The data contained in Column 5 of Table 9 also suggest a high rate of change of the children's representatives. The data in this column reveal that the mean number of social workers assigned to the foster children subjects throughout their stay in foster care had been 5.79 social workers per child. This indicates that on the average, these children were assigned a new social worker each year (mean social worker assignment was 1.25 social workers per child per year).

Data were also obtained concerning the reasons for initial placement of these children within the foster care system. The five highest-ranking reasons for initial foster placement were tabulated and listed in Table 10. In both states, neglect ranked first as the reason for initial placement in foster care, and the combination of abuse/neglect ranked second. It should be noted that the categories "abuse/neglect" and "abuse" did not include sexual abuse, which was established in this study as a separate category. In both states, death of one parent ranked third as the reason for initial foster placement (11.45 percent).

The frequencies and percentages of the seven highest-ranking reasons that the children sampled had been re-placed in another foster care home after their initial placement are shown in Table 11. Data were tabulated for this table by calculating the total number of re-placements of the 69 children who had experienced more than one foster placement. Total N for re-placements in this sample was 320.

TABLE 10

Frequencies and Percentages of the Five Highest-Ranking
Reasons for Initial Foster Placement

Reason	KS		MA		Total	
	N	%	N	%	N	%
Neglect	16	33.33	15	31.25	31	32.29 ^{***}
Abuse/Neglect*	13	27.08	11	22.92	24	25.00
Abuse*	6	12.50	4	8.33	10	10.42
Parental Request	4	8.33	3	6.25	7	7.29
Parental Death	1	2.08	5	10.42	6	6.25
Total	40	41.67 ^{**}	38	39.58	78	81.25

*Excludes sexual abuse
 **Represents state-wide %
 ***Represents % of total cases

TABLE 11

Frequencies and Percentages of the Seven Highest-Ranking
Reasons for Subsequent Foster Placements

Reason	KS	MA	N	Total*	
					%
Foster Parent Request	57	54	111		47.23
Inadequate for Child's Special Needs	21	14	35		14.89
Neglect in Foster Home	19	14	33		14.03
Death of Foster Parent	12	15	27		11.47
Child was Institutionalized	12	7	19		8.07
LEA did not Offer Special Education Service	1	6	7		2.97
Foster Mother was Mentally Retarded	0	3	3		1.27
Total	122	113	235		100.00

*N=235 re-placements

However, since Table 11 reflects only the seven highest-ranking reasons for replacements, N for Table 11 represents 235 re-placements of the total 320. The highest-ranking reason for subsequent re-placements was foster parent request that the child be removed from the foster home. The second highest-ranking reason for re-placement was determination that the foster home was not adequate for meeting the children's special needs.

Table 11 contains several notable findings. First, in three instances, foster child subjects had been removed from a foster placement because, subsequent to that placement, the foster mother had been determined to be mentally retarded. Second, seven instances of removal from the foster home were precipitated because the LEAs in which the foster homes were located did not offer the special education service that the children needed. Thus, the children's total living arrangements had been changed in order to accommodate their special education needs. Third, although the lower-ranking reasons for re-placements are not shown in the table, the data revealed such reasons as: (a) alcoholism in the foster home, (b) sexual abuse in the foster home, and (c) foster parents' medical insurance did not cover what was (for unexplained reasons) an unsubsidized foster placement.

Research Question 4: What are the demographic variables of foster parent and natural parent education, age, foster parenting and natural parenting history of the foster parent and natural parent subjects of this investigation?

Results

Education Level of the Foster/Natural Parent Sample. Data obtained for this demographic variable are found in Table 12. It should be noted that in Column 2 of this table, the number of cases of foster parents differs from that of natural parents. This reflects the design of the

Table 12

Frequencies and Percentages of Foster Parent and Natural Parent Education

Representative	Total Cases	8th		8th		H.S.		1 yr. Coll.		B.A.		M.A.		Prof.	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%
<u>KS</u>															
Foster Parent	48	1	2.08	10	20.83	24	50.00	7	14.58	2	4.16	4	8.33	0	0.00
Natural Parent	12	0	0.00	0	0.00	0	0.00	0	0.00	6	50.00	5	41.67	1	8.33
<u>MA</u>															
Foster Parent	48	4	8.33	16	33.33	21	43.75	4	8.33	3	6.25	0	0.00	0	0.00
Natural Parent	12	0	0.00	0	0.00	9	75.00	0	0.00	1	8.33	1	8.33	1	8.33

study in which natural parent cases were selected as control cases and matched to the 24 foster cases under Condition 4. This condition represents the cases in which both social worker and foster parent were involved in the child's last IEP staffing. Differences between foster parents and natural parents were evident in the data, inasmuch as no natural parents possessed less than a high school education. On the other hand, 32.29 percent of the foster parents possessed less than a high school education. Similarly, only 9.38 percent of the foster parents had graduated from college, whereas 62.5 percent of the natural parents were college graduates or held advanced degrees.

Table 13 shows the calculations for mean age of foster and natural parents, together with the mean number of biological children residing in their homes. Again the data suggest differences between the two groups of subjects. Foster parents were found to be older than the natural parent control subjects for both states. The mean number of biological children did not differ between foster parents and natural parents. In Kansas, neither the foster parents nor the natural parents had handicapped children of their own. However, both foster parents and natural parents in Massachusetts had children of their own who were handicapped. Approximately one foster parent (1.04 percent of the total cases) and two natural parent subjects (8.33 percent of the total cases) had a child who was handicapped.

Data on foster parenting history were gathered and data concerning this variable are shown in Table 14. The data shown in Column 2 of this table revealed that foster parent subjects across both states had previously parented a mean number of 71 non-handicapped foster children and 33 handicapped foster children. As is noted in the table,

TABLE 13

Foster Parent and Natural Parent Mean Age
and Mean Number of Biological Children
Residing in Their Homes

State	Mean Age	Mean Number Biological Children	Mean Number Handicapped Children
<u>KS</u>			
FP	49	2	0
NP	34	3	0
<u>MA</u>			
FP	45	2	1.20
NP	33	4	2.36
Total			
FP	48	2	1.20
NP	33	3.5	2.36

TABLE 14

Mean Number of Previous Non-Handicapped and
Handicapped Foster Children per Case

State	Mean Number Non-Handicapped	Mean Number Handicapped	Total Mean Number
KS	42*	24*	34*
MA	29	9	20
Total	71	33	53

*Range = 270

however, the range for the foster parent subjects in Kansas is badly skewed, as one foster mother had foster parented 270 previous children.

Research Question 5: What are the demographic variables of professional education, non-handicapped and handicapped child caseload count, and history of client contact of the social worker subjects of this investigation?

Results

Professional Educational Characteristics of the Social Worker

Sample. Findings for the demographic variable of social worker professional education are shown in Table 15. The data suggest that the most common professional degree for social worker subjects in Kansas was the Bachelor of Social Work (B.S.W.). This constituted 68.75 percent of the Kansas sample. The most common professional degree for social worker subjects in Massachusetts was the Master of Social Work (M.S.W.), constituting 39.58 percent of the state-wide sample. As can be seen from Column 2 of this table, the recognized professional degree for social work practice, the M.S.W., was held by only 21.88 percent of the social worker subjects in this investigation. In Massachusetts, as many subjects possessed a bachelor degree other than the B.S.W. as possessed the B.S.W., whereas in Kansas, the ratio of B.S.W. degrees to other bachelor degrees was almost 3:1. In Massachusetts, one Spanish-speaking case worker was serving in a professional capacity with a high school diploma.

Caseload Characteristics of the Social Worker Sample. Table 16 contains data with respect to the total caseloads of the social worker subjects sampled in this study. Caseloads for the 48 social worker

TABLE 15

Frequencies and Percentage of Social Workers' Professional Degrees

State	M.S.W.		B.S.W.		B.A.		B.S.		H.S.		Total	
	N	%	N	%	N	%	N	%	N	%	N	%
KS	2	4.16	33	68.75	10	20.83	3	6.25	-	0.00	48	100.00
MA	19	39.58	14	29.17	7	14.58	7	14.58	1	2.08	48	100.00
Total	21	21.88	47	48.96	17	17.70	10	10.42	1	1.04	96	100.00

TABLE 16

Frequencies, Means and Percentages of Handicapped and
Non-Handicapped Foster Cases Currently Assigned

State	<u>Non-Handicapped</u>		<u>Handicapped</u>		<u>Total Cases</u>		<u>Percent of Handicapped to Total Caseload</u>
	N	Mean	N	Mean	N	Mean	
KS	2845	68	418	9	3263*	68	12.81
MA	1621	48	579	12	2200	45	26.32
Total	4466	57	997	10	5463*	57	18.25

*Range = 166

subjects in Kansas were greater than those of the social worker subjects in Massachusetts by a difference of 1063 cases, or, a mean of approximately 22 additional cases per social worker. The percentage of handicapped foster children cases from the total foster care caseloads differed markedly across the two states. In Massachusetts, the percentage of handicapped foster children cases was twice as great as that of the handicapped foster children cases in Kansas (26.25 percent versus 12.81 percent). Similarly, the percentage of handicapped children in the Massachusetts sample represents two times the estimated incidence figure of handicapped children predicted by federal funding norms.

In order to ascertain whether the caseload counts of social worker subjects constituted a representative sample of their usual caseloads, responses were elicited regarding the social workers' perceptions of their current caseloads. Subjects were asked to rate their current caseloads as typical, non-typical (higher than usual), or non-typical (lower than usual). Frequencies and percentages of the social worker subjects' responses are shown in Table 17. The mean number of cases per social worker in each state is shown in Column 1. Column 2 of Table 17 shows that a high percentage of social workers in both states (87.5 percent and 77.0 percent) indicated that their current caseloads were typical in number to those over the past year. Differences did exist across the two states, however. Social worker subjects in Massachusetts indicated that their current caseloads were low more than two times as often as did the social worker subjects in Kansas (20.83 percent versus 8.33 percent). Only a small percentage of social workers in both states (3.12 percent) indicated that their current

TABLE 17

Frequencies and Percentages of Social Worker
Responses Regarding Typical/Non-Typical Nature
of Caseloads

State	Mean Number	N	<u>Typical</u>		Non-Typical <u>Low</u>		Non-Typical <u>High</u>	
				%	N	%	N	%
KS	68	42	87.5	4	8.33	2	4.17	
MA	45	37	77.0	10	20.83	1	2.08	
Total	57	79	82.29	14	14.58	3	3.12	

caseloads were higher than usual.

Case Contact Patterns of the Social Worker Sample. Interviewers attempted to determine how frequently social workers were making contact with the foster cases utilized as subjects in this investigation. Because questions regarding job accountability can be answered with varying degrees of veracity, interviewers asked both the social worker and the foster parent subjects how much time had elapsed since social worker and foster parent had been in contact with one another. In each of the 96 cases in both states, foster parents possessed logs, diaries or calendar notations which documented their responses to the interviewer's question. Thus, the foster parent responses were considered to be true responses for the purposes of this study. In addition, reliability data were obtained to determine percentage of cases in which social worker responses were in agreement with those of the foster parents regarding time elapsed since last contact. Column 2 of Table 18 shows the mean number of days reported by social workers as having elapsed since contact was made on the case. The mean number of days reported by social workers in Kansas is badly skewed. This is due to the fact that one social worker reported that 14 months had elapsed since her last contact was made on the case. Had this case been discarded from the calculations, the actual mean number of days reported by social workers in Kansas would have been much lower than 20.35 days (i.e. 10.21 days).

Column 3 of Table 18 shows the frequencies and percentages of cases in which social worker responses were in agreement with those of the foster parents. Out of 48 cases per state, 31 cases in Kansas showed agreement between social worker and foster parent responses,

TABLE 18

Social Worker Responses to Time Elapsed Since
Last Contact with Case

State	Mean Number of Days	Reliable Responses		Number of "Within Last Week" Responses	
		N	%	N	%
KS	20.35*	31	64.58	18	37.50
MA	23.41	21	43.75	24	50.00
Total	21.88	52	54.17	42	43.75

*Range = 400

and 21 in Massachusetts showed such agreement. Thus, the reliability percentages for social worker/foster parent agreement regarding time elapsed since last contact was 64.58 percent in Kansas, 43.75 percent in Massachusetts, and overall reliability of 54.17 percent for the entire sample.

Many of the social workers in each state indicated that they had been in contact with the case within the last week. The percentage of "within the last week" responses was 37.50 from the Kansas sample, and 50.00 from the Massachusetts sample. Across both states, 43.75 percent of the social workers indicated that they had been in contact with the case within the last week.

Because discrepancies had been anticipated with respect to social worker/foster parent responses to the question concerning time elapsed since last contact, further inquiries were made to determine what type of contact was being made. That is, were social workers initiating contact with the case, were foster parents making contact with social workers for assistance with the case, etc. Results for the variable "type of contact" are shown in Table 19.

The data in Table 19 suggest a far greater level of agreement between social worker/foster parent responses than did the data in Table 18. Column 1 of Table 19 lists the eight different categories of "type of contact" that had been reported by social workers and foster parents. As can be seen in Column 2 and Column 3, only four instances of disagreement were disclosed in the 96 cases sampled across both states. Both of these disagreements were obtained in the Massachusetts sample. Column 4 shows the number of cases of social worker/foster parent agreement on "type of contact" across both

TABLE 19

Frequencies and Percentages of Social Worker
and Foster Parent Response Agreement Regarding the Type
of Last Social Worker Contact

Type of Contact	KS		MA		Total Agreement of Responses	
	SW N	FP N	SW N	FP N	N	%
SW Phone Call	13	13	11	11	24	100.00
FP Phone Call	8	8	7	6	14	93.33
Home Visit	15	15	21	20	35	97.22
Office Visit	3	3	4	4	7	100.00
Child Phoned SW	3	3	3	3	6	100.00
SW Letter	-	-	1	1	1	100.00
FP Letter	1	1	-	1	1	50.00
IEP Staffing	5	5	1	2	6	85.71
Total	48	48	48	48	94	97.92

states, together with the percentages of agreement. Out of 96 cases sampled, 94 cases showed agreement between social worker and foster parent. This represented a 97.92 percentage of agreement between the two representatives with respect to the type of contact that had last been made. Of note for this study is the fact that in at least six cases, the last contact made between social worker and foster parent had been at the child's last IEP staffing.

The final demographic variable examined for this study concerned the presence of IEPs in the foster children's case files. Because the investigator noted considerable lack of clarity on the part of social workers regarding the cases on which they were responding, it became evident early in the interviews that social workers were not familiar with the special education component of the children's social work treatment. An additional question was formulated to determine how many files involving handicapped foster children contained an IEP. Table 20 shows the results obtained from this question. As can be seen from Table 20, only 27.03 percent of the 418 files on the handicapped foster children included in this study from Kansas contained IEPs. Only 40.59 percent of the 235 foster children's files in Massachusetts contained an IEP. By "contained an IEP" is meant not only those cases in which the file contained an updated IEP, but also those cases in which an outdated IEP was present in the file. Despite this fact, the total number of cases in which any IEP was contained in the files was 348 across both states, that is 34.90 percent of all the cases of handicapped foster children assigned to the social worker subjects. When contrasted with the natural parent control sample, all 24 natural parent cases (100 percent) possessed a copy of the IEP that

TABLE 20

Frequencies and Percentages of IEPs Contained
in Social Work Case Files of Handicapped
Foster Children

<u>State</u>	<u>Number of Cases</u>	<u>Number of IEP's</u>	<u>% of IEP's in Files</u>
KS	418	113	27.03
MA	579	235	40.59
Total	997	348	34.90

had been developed at the child's last IEP staffing.

QUASI-EXPERIMENTAL RESEARCH

Research Question 6: What is the effect of the four quasi-experimental conditions of representative involvement upon the representatives' accuracy and agreement on knowledge regarding the LEA Team decisions on: (a) classification, (b) eligibility, (c) program placement, (d) IEP goals, (e) IEP objectives, (f) responsibility for service delivery, (g) frequency of service delivery, and (h) duration of service delivery?

This research question was answered in two ways. First, descriptive data were obtained in order to assess the magnitude of agreement/disagreement of social worker and foster parent responses across the eight LEA Team decisions. Second, comparative analyses were conducted to ascertain whether the agreement/disagreement and accuracy/inaccuracy responses of these two representatives differed significantly from chance across the eight LEA Team decisions.

The descriptive data for social worker/foster parent agreement are shown in Table 21a. As can be seen from these data, the total magnitude of agreement between social worker and foster parent subjects across the eight LEA Team decisions was low. Out of a total of 768 responses, only 161 responses reflected agreement between these two representatives. The LEA Team decision on which both social worker and foster parent subjects showed the greatest agreement was that of program placement (79.83 percent agreement). The two lowest-ranking variables with respect to social worker/foster parent agreement were frequency of service delivery and duration of service delivery, each of which reflected 4.17 percent agreement. The total mean number of agreement responses across the eight LEA Team decisions was 20.12, with a standard deviation of 21.794.

In order to determine whether the total magnitude of agreement

TABLE 21a

Frequencies and Percentages of Total Social Worker/Foster
Parent Agreement Across the Eight LEA Team Decisions

LEA Team Decision	Possible Responses N	Frequency of Agreement N	Total %
Classification	96	28	29.17
Eligibility	96	15	15.62
Program Placement	96	68	70.83
IEP Goals	96	10	10.42
IEP Objectives	96	4	4.17
Responsibility for Service Delivery	96	28	29.17
Frequency of Service Delivery	96	4	4.17
Duration of Service Delivery	96	4	4.17
Total	768	161	20.96
	Mean Number of Agreements	20.12	
	Standard Deviation	21.79	

differed significantly from chance, a Chi-square analysis was conducted. The results, shown in Table 21b, indicate that the Chi-square value obtained was 259.0052. The expected value for agreement/disagreement was 384. As the data revealed, the obtained frequency of agreements was significantly lower than would be expected by chance. The Chi-square value with 1 df was significant at the $<.001$ level of probability.

TABLE 21b

Comparison of Observed and Expected Frequencies
in Social Worker/Foster Parent Agreement Across
the Eight LEA Team Decisions

	O	E	O-E	(O-E) ²	$\frac{(O-E)^2}{E}$
Agreement	161	384	-223	49729	129.5026
Disagreement	607	384	223	49729	129.5026
Total	768	768			<u>Chi-square</u> = 259.0052*

For purposes of answering Research Question 6, four null hypotheses were generated. Because of the complexity of the study, each hypothesis consisted of several discrete statistical analyses. For the sake of clarity, each null hypothesis will be stated followed by the discrete analyses which comprise the testing of that null hypothesis. The analyses will be labeled, "Analysis 1.1," Analysis 1.2," etc.

Null Hypothesis 1

There will be no significant difference in the frequencies of agreement between social workers and foster parents on the dependent variables of: (a) classification, (b) eligibility, (c) IEP goals, (d) IEP objectives, (e) program placement, (f) program responsibility, (g) frequency of service delivery, and (h) duration of service delivery obtained under the four type-of-representative involvement conditions.

Results

Analysis 1.1. This analysis tested the agreement between the social worker and foster parent subject responses under the four type of representative involvement conditions with respect to the variable of the child's classification as determined by the LEA Team. A Chi-square analysis for homogeneity was conducted to test this analysis and results of the 2 x 4 contingency table are shown in Table 21c. The Chi-square value obtained was 21.782 with 3 df at the 0.0001 level of probability. Thus, the null hypothesis of no significant difference across the four type-of-representative involvement conditions was rejected. A Cramer coefficient was obtained as a post hoc follow-up procedure to test the strength of the dependency of these two variables. The resulting value was .226. Therefore, the results of Analysis 1.1 indicated that the frequency of disagreements between social workers and foster parents was ~~not~~ strongly related to the type-of-involvement conditions. Since the measure of dependency of the quasi-experimental conditions and the variable

TABLE 21c

Chi-square Analysis for Homogeneity
 For Social Worker and Foster Parent
 Agreement on Classification Under
 Four Representative Conditions

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree	4	12	0	12	28
Agree	20	12	24	12	68
	24	24	24	24	N=96

Chi-square, 3 df = 21.782, p 0.0001

of classification was weak, the investigator concluded that none of the four type-of-representative involvement conditions contributed more significantly than the others to the number of disagreements between social worker/foster parent representatives on this dependent variable.

Analysis 1.2. This analysis tested the agreement between social worker and foster parent responses under the four conditions with respect to the dependent variable of child's eligibility for special education services. A Chi-square analysis of homogeneity was conducted and results are shown in the contingency table of Table 22. The obtained Chi-square value was 17.936 with 3 df at the 0.0005 probability level. Thus, the null hypothesis of no significant difference was rejected. This suggests that the type-of-involvement conditions did affect the number of disagreement responses of the two representatives with respect to this variable. A post hoc Cramer coefficient was obtained with a value of .187. Thus, the investigator concluded that the correlation between type-of-representative involvement conditions and the number of social worker/foster parent disagreements for the variable eligibility was weak.

Analysis 1.3. This analysis tested the agreement between social worker and foster parent responses under the four conditions with respect to the variable of program placement. The contingency table for this analysis is shown in Table 23. The resulting Chi-square value with 3 df was 6.050 at the 0.1092 probability level. Thus, the null hypothesis was not rejected for the variable program placement. While this analysis did not yield statistically significant results, unlike the previous

TABLE 22

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on Eligibility

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree	0	10	2	3	15
Agree	24	14	22	21	81
	24	24	24	24	N=96

Chi-square, 3 df = 17.936, p 0.0005

TABLE 23

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on Program Placement

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree	19	13	20	16	68
Agree	5	11	4	8	28
	24	24	24	24	N=96

Chi-square, 3 df = 6.050, p 0.1092

TABLE 24

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on IEP Goals

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree	0	1	2	7	10
Agree	24	23	22	17	86
	24	24	24	24	N=96

Chi-square, 3 df = 12.949, p 0.0047

dependency was weak.

Analysis 1.5. This analysis tested the agreement between social worker and foster parent responses under the four type-of-representative involvement conditions for the dependent variable IEP objectives. Data obtained for this analysis were collected and scored in a manner identical to that for the dependent variable of IEP objectives, as discussed in Analysis 1.4. The results, shown in Table 25, indicated that statistical testing for this dependent variable was barely possible due to the extreme configuration of the disagreement frequencies. The obtained Chi-square value was 4.174 with 3 df at the 0.2433 probability level. The heavy distribution of disagreement frequencies resulted in a lowest expected value of 1.000. The frequencies of disagreements across the four conditions (92) exceeded those of the agreements (4) by a ratio of 23:1. Therefore, despite the fact that this analysis was not statistically significant with respect to relationship between quasi-experimental conditions and response agreement, the findings are of importance since they suggest that for this dependent variable, social worker and foster parent disagreements were nearly total, that is 92 out of the possible 96 responses.

Analysis 1.6. This analysis tested the agreement between social worker and foster parent responses under the four conditions with respect to the dependent variable of responsibility for service delivery. Data for this analysis were obtained by asking the social worker/foster parent who was responsible for delivering each of the

TABLE 25

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on IEP Objectives

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree	0	0	2	2	4
Agree	24	24	22	22	92
	24	24	24	24	N=96

Chi-square, 3 df = 4.174, p 0.2433

special education services recommended by the LEA Team, and obtaining subject responses. Subsequent scoring then determined whether the social worker and foster parent responses constituted an agreement. Table 26 shows the results of the Chi-square analysis that was conducted. The Chi-square value was 10.084 with 3 df at the 0.0179 level of probability. Thus, the null hypothesis of no significant difference between frequencies of agreement across the four conditions was rejected for the variable responsibility for service delivery. A post hoc Cramer coefficient was obtained, and was .105. Thus, the results of Analysis 1.6 suggest that type of involvement in the IEP staffings was strongly related to the frequency of disagreement between social worker and foster parent subjects. However, ability to predict which of the four types-of-representative involvement contributed to the greatest frequency of disagreements was weak.

Analysis 1.7. This analysis tested the agreement between social worker and foster parent responses under the four conditions with respect to the dependent variable of frequency of service delivery. As with Analysis 1.6, data were obtained by asking the social worker/foster parent how frequently the recommended special education services were to be delivered to the handicapped foster child as recommended by the LEA Team. Scoring then determined whether social worker and foster parent responses constituted agreement. The Chi-square analysis was conducted, and results are shown in Table 27. The value of Chi-square with 3 df was 2.087 at the 0.5546 level of probability. Thus, the null hypothesis was not rejected for the variable frequency of service delivery. As can be seen in Table 27, the configuration of the

TABLE 26

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on Responsibility for
Service Delivery

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree Agree	10	1	8	9	28
	14	23	16	15	68
	24	24	24	24	N=96

Chi-square, 3 df = 10.084, p 0.0179

TABLE 27

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on Frequency of
Service Delivery

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree Agree	2	1	1	0	4
	22	23	23	24	92
	24	24	24	24	N=96

Chi-square, 3 df = 2.087, p 0.5546

disagreement frequencies was extreme. This resulted in a lowest expected value of 1.000. The ratio of disagreements to agreements across all four conditions was 23:1. This suggested, first, that the four type-of-representative involvement conditions did not contribute to statistically significant differences in the frequencies of social worker/foster parent agreement for the dependent variable of frequency of service delivery. Second, the results reflected nearly total disagreements for the entire social worker/foster parent sample. Since 92 out of the possible 96 social worker/foster parent responses constituted disagreements rather than agreements, the findings of this analysis suggest that neither of the children's representatives agreed between themselves on the frequency with which the special education services were being delivered to the handicapped children.

Analysis 1.8. This analysis tested the agreement between social worker and foster parent responses under the four conditions with respect to the dependent variable of duration of service delivery. The results of this analysis are shown in Table 28. The obtained Chi-square value for this analysis was 4.174 with 3 df at the 0.2433 level of probability. The proportion of agreements to disagreements across the conditions was extreme (23:1) resulting in a lowest expected value of 1.000. The null hypothesis of no significant difference across conditions for the dependent variable duration of service delivery was not rejected. Thus, the results of Analysis 1.8 suggest that although the number of disagreements between social worker and foster parent responses was not dependent upon type of representative involvement, the frequency with which social workers and foster parents

TABLE 28

Chi-square Analysis for Homogeneity
For Social Worker and Foster Parent
Agreement on Duration of
Service Delivery

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Dis- agree Agree	2	0	2	0	4
	22	24	22	24	92
	24	24	24	24	N=96

Chi-square, 3 df = 4.174, p 0.2433

disagreed was notable with respect to the variable duration of service delivery.

The following section of this chapter will address the issue of social worker and foster parent accuracy on the eight LEA Team decisions. As with results obtained for social worker/foster parent agreement, total magnitude of the response accuracy was calculated. This was accomplished as follows. First, social worker and foster parent responses were scored individually, rather than as a pair, resulting in scores for each subject for every response required by each of the eight variables. For example, only one response each was required of social workers and foster parents for the variable classification. For the variable IEP goals, however, multiple responses were required, the number varying from case to case. Therefore, frequencies of accurate responses were obtained for each variable from the total possible responses required for that variable. Additionally, total natural parent response accuracy was calculated across the eight LEA Team decisions and was included in Table 29a for purposes of comparison. As can be seen in the table, the accuracy of both social worker and foster parent subjects was low. The variable on which both representatives exhibited greatest accuracy was that of program placement. On this variable, social workers exhibited 85.44 percent accuracy and foster parents exhibited 84.77 percent accuracy. Total accuracy across the eight variables was low for both representatives, ranging from 35.86 percent for foster parents to 53.20 percent for social workers. Combined mean percent accuracy for the two foster care representatives was 44.53 percent. When viewed against the total mean percent of natural parent response accuracy,

TABLE 29a

Summary of Social Worker, Foster Parent and Natural
Parent Response Accuracy Across the Eight LEA Team
Decisions

LEA Team Decision	Social Workers			Foster Parents			Total Foster Care Representatives			Total Natural Parent Representatives		
	Possible Responses	Accurate N	Accurate %	Possible Responses	Accurate N	Accurate %	Possible Responses	Accurate N	Accurate %	Possible Responses	Accurate N	Accurate %
Classification	96	77	80.21	96	33	34.38	192	110	57.29	48	34	70.83
Eligibility	96	34	35.42	96	23	23.96	192	57	29.69	48	42	87.50
Program Placement	151	129	85.43	151	128	84.77	302	257	85.10	84	79	94.05
IEP Goals	611	380	62.19	611	292	47.79	1222	672	54.99	242	232	95.87
IEP Objectives	2753	1518	55.14	2753	1000	36.32	5506	2518	45.73	862	760	88.17
Responsibility for Service Delivery	151	29	19.20	151	12	7.94	302	41	13.58	84	42	50.00
Frequency of Service Delivery	151	23	15.23	151	2	1.32	302	25	8.28	84	42	50.00
Duration of Service Delivery	151	23	15.23	151	2	1.32	302	25	8.28	84	35	72.29
Total	4160	2213	53.20	4160	1492	35.86	8320	3705	44.53	1536	1266	82.42

82.42 percent, the accuracy of the foster care representatives was indeed low.

In order to determine whether the total magnitude of social worker/foster parent accuracy differed proportionally from chance, a Chi-square analysis was conducted. The results, shown in Table 29b, indicate that the Chi-square value obtained was 99.532. The expected value for accuracy/inaccuracy was 4160. As the data revealed, the obtained frequency of response accuracy was significantly lower than would be expected by chance. The Chi-square value with 1 df was significant at the $<.001$ level of probability.

TABLE 29b

Comparison of Observed and Expected Frequencies
in Social Worker/Foster Parent Accuracy Across
the Eight LEA Team Decisions

	O	E	O-E	$(O-E)^2$	$\frac{(O-E)^2}{E}$
Accurate	3705	4160	-455	207025	49.766
Inaccurate	4615	4160	455	207025	49.766
Total	8320	8320			<u>Chi</u> -square = 99.532*

Null Hypothesis 2

There will be no significant difference in the rate of accuracy of social workers on the dependent variables of (a) classification, and (b) eligibility obtained under the four representative involvement conditions.

Results

Analysis 2.1. This analysis tested the accuracy of social worker responses under the four type-of-representative involvement conditions with respect to the dependent variable of classification. Data for this analysis were obtained by comparing social workers' responses concerning the foster child's disability classification with the classification determined by the LEA Team. Scoring then determined whether the social worker responses constituted accuracy. The results of this analysis are found in Table 29c. The Chi-square value for 3 df was 19.620 and was significant at the 0.0002 level of probability. Thus, the null hypothesis of no significant difference between accurate and inaccurate social worker responses across the four conditions was rejected for the dependent variable of classification. The post hoc Cramer coefficient was .204. Therefore, the results of Analysis 2.1. revealed that social worker responses regarding the handicapped foster child's special education classification were significantly accurate. However, the ability to predict which type-of-representative involvement pattern would

produce the greatest degree of accuracy for social worker responses on this dependent variable was low.

Analysis 2.2. This analysis tested the accuracy of social worker responses across the four conditions with respect to the dependent variable of eligibility. Data for this analysis were obtained by comparing the social workers' responses concerning the foster child's eligibility for special education services to the reasons stated in the child's IEP. Scoring then determined whether the social workers' responses were accurate. The results of this analysis are found in Table 30. The Chi-square value for 3 df was 18.398. This finding was significant at the 0.0004 level of probability. Thus, the null hypothesis of no significant difference between the social workers' accurate and inaccurate responses across the four conditions was rejected. The post hoc Cramer contingency coefficient was .192. The results of this analysis suggest that the inaccuracy of social worker responses was strongly related to the type-of-representative involvement conditions. This means that type-of-representative involvement strongly affected the number of social worker responses that were accurate as statements concerning the child's eligibility for special education services. However, the post hoc procedure revealed that ability to predict precisely which type-of-representative involvement pattern contributed most strongly to the number of inaccuracies was weak.

TABLE 29c

Chi-square Analysis for Homogeneity
For Social Worker Accuracy on Classification

	Condition 1	Condition 2	Condition 3	Condition 4	Total
	N	N	N	N	N
Accurate	14	23	16	24	77
Inaccurate	10	1	8	0	19
	24	24	24	24	N=96

Chi-square, 3 df = 19.620, p 0.0002

TABLE 30

Chi-square Analysis for Homogeneity
For Social Worker Accuracy on Eligibility

	Condition 1 N	Condition 2 N	Condition 3 N	Condition 4 N	Total N
Accurate	5	10	3	16	34
Inaccurate	19	14	21	8	62
	24	24	24	24	N=96

Chi-square, 3 df = 18.398, p 0.0004

Null Hypothesis 3

There will be no significant difference in the rate of accuracy of foster parents on the dependent variables of (a) classification, and (b) eligibility obtained under the four representative involvement conditions.

Analysis 3.1. This analysis tested the accuracy of foster parent responses across the four conditions with respect to the dependent variable of child's classification. Results are shown in Table 31. The Chi-square value for 3 df was 20.825 and was significant at the 0.0001 level of probability. Thus, the null hypothesis of no significant difference between foster parent accuracies and inaccuracies across the four conditions was rejected for the variable of classification. The Cramer contingency coefficient was found to be .217. Therefore, results of Analysis 3.1 indicated that the number of foster parents' inaccurate responses exceeded their accurate responses significantly with respect to the dependent variable of child's classification. The four type-of-representative involvement patterns resulted in statistically significant differences between foster parents' accurate and inaccurate responses. However, post hoc results revealed that it was not possible to determine precisely which of the four type-of-representative involvement conditions contributed most strongly to the significant differences for the dependent variable classification.

TABLE 31

Chi-square Analysis for Homogeneity
For Foster Parent Accuracy on Classification

	Condition 1	Condition 2	Condition 3	Condition 4	Total
	N	N	N	N	N
Accurate	4	14	2	13	33
Inaccurate	20	10	22	11	63
	24	24	24	24	N=96

Chi-square, 3 df = 20.825 p .0001

Analysis 3.2. This analysis tested the accuracy of foster parent responses across the four type-of-representative involvement conditions with respect to the variable of child's eligibility for special education services. Table 32 contains the results. The Chi-square value was 2.915 with 3 df at the 0.4048 level of probability. Consequently, the null hypothesis of no significant difference between accurate and inaccurate responses of foster parents across the four conditions was rejected for the variable of child's eligibility for special education services. These results indicate that the four type-of-representative conditions did not significantly affect the accuracy of foster parent responses with respect to the dependent variable of child's eligibility for special education services. That is, those cases in which both of the child's representatives attended the IEP staffing did not produce significantly more accurate foster parent responses for this variable than did those cases in which neither representative attended.

Null Hypothesis 4

There will be no significant difference in the mean rates of accuracy of social workers and foster parents on the dependent variables of (a) IEP goals, (b) IEP objectives, (c) program placement, (d) program responsibility, (e) frequency of service delivery, and (f) duration of service delivery obtained under the four type-of-representative involvement conditions.

Results

Responses for social worker/foster parent accuracy on the above

TABLE 32

Chi-square Analysis for Homogeneity
For Foster Parent Accuracy on Eligibility

Accurate	Condition 1	Condition 2	Condition 3	Condition 4	Total
	N	N	N	N	N
	4	7	4	8	33
Inaccurate	20	17	20	16	73
	24	24	24	24	N=96

Chi-square, 3 df = 2.915

six dependent variables were measured and analyzed as continuous rather than as dichotomous data. This type of measurement was utilized since the number of IEP goals, IEP objectives, types of recommended special education services, etc. differed across the 96 cases. The number of accurate responses for each of these variables was obtained from the total number of responses possible in each case. One-way ANOVA procedures were then conducted. Comparisons were made in regard to the social workers' and foster parents' rate of accuracy across the four type-of-representative involvement conditions for each of these dependent variables.

Analysis 4.1. This comparison tested the social workers' and foster parents' rates of accuracy on IEP goals under the four type-of-representative conditions. The results of an analysis of variance for the mean scores are shown in Table 33. The F -ratio for 3,92 df was 0.4319 which was not a statistically significant result. Therefore, the null hypothesis was not rejected for the IEP goals contrast and further statistical analysis of these scores was not performed. The investigator concluded that there was no significant difference in the mean rate of social workers' and foster parents' accuracy obtained under the four type-of-representative involvement conditions with respect to the variable of IEP goals.

Analysis 4.2. This comparison tested the social workers' and foster parents' rates of accuracy on IEP objectives under the four type-of-representative conditions. The results of an analysis of variance for the mean scores are shown in Table 34. The F -ratio for

TABLE 33

Analysis of Variance of Mean Social Worker
and Foster Parent Accuracy Scores on
IEP Goals Under Four Representative Conditions

Source	df	SS	MS	F
Group	3	0.0926	0.0309	0.4319
Error	92	6.5733	0.0714	

TABLE 34

Analysis of Variance of Mean Social Worker
and Foster Parent Accuracy Scores on
IEP Objectives Under Four Representative Conditions

Source	df	SS	MS	F
Group	3	0.8958	0.2986	2.0053
Error	92	13.6993	0.1489	

3,92 degrees of freedom was 2.0053. This result was not statistically significant. Thus, the null hypothesis of no significant difference was not rejected for the variable of IEP objectives. The investigator concluded that there was no significant difference in the mean rates of social worker/foster parent accuracy obtained under the four type-of-representative involvement conditions with respect to this dependent variable. The results of Analysis 4.1 and Analysis 4.1 suggest that the presence or absence of both or either of the child's two representatives at the child's IEP staffing did not significantly affect the rate of accuracy of their understanding regarding the child's IEP goals and objectives.

Analysis 4.3. This comparison tested the social worker/foster parent rates of accuracy concerning the foster child's program placement under the four quasi-experimental conditions. The source table for the analysis of variance of the mean scores is shown in Table 35. The F-ratio for 3,92 df was 0.2495, which was not a statistically significant result. Therefore, the null hypothesis of no significant difference was not rejected for the program placement contrast, and no further statistical analysis was performed. The results of this analysis suggest that the social worker/foster parent response accuracy did not differ significantly under the four quasi-experimental conditions with respect to the dependent variable of program placement. Therefore, the investigator concluded that the presence or absence of both or of neither of these two representatives at the child's IEP staffing did not significantly affect their rates of accuracy in their understanding of the special education programs or

TABLE 35

Analysis of Variance of Mean Social Worker
and Foster Parent Accuracy Scores on
Program Placement Under Four
Representative Conditions

Source	df	SS	MS	F
Group	3	0.0992	0.0331	0.2495
Error	92	12.1907	0.1325	

services recommended by the LEA Team.

Analysis 4.4. This comparison tested the social worker/foster parent rates of accuracy on the dependent variable of responsibility for service delivery under the four type-of-representative involvement conditions. The result of an analysis of variance of these scores are shown in Table 36. The F-ratio for 3,92 df was 3.1720 which was statistically significant at less than .02 level of probability. Therefore, the null hypothesis of no statistical difference was rejected for the responsibility for service delivery contrast, and the researcher concluded that there was a significant difference in the mean rates of social worker/foster parent accuracy on this variable under the four type-of-representative involvement conditions.

Analysis 4.5. This comparison tested the social worker/foster parent rates of accuracy on the dependent variable of frequency of service delivery under the four type-of-representative involvement conditions. The source table for the analysis of variance of the mean scores is shown in Table 37. The F-ratio for 3,92 df was 5.3710. This was a statistically significant result at the $p < .001$ level. Therefore the null hypothesis of no significant difference was rejected for the frequency of service delivery contrast. The investigator concluded that there was a significant difference in the mean rates of social worker/foster parent accuracy on this variable under the four type-of-representative involvement conditions. Post hoc procedures were utilized to determine which specific type-of-representative involvement conditions contributed most strongly

TABLE 36

Analysis of Variance of Mean Social Worker
and Foster Parent Accuracy Scores on
Responsibility for Service Delivery Under
Four Representative Conditions

Source	df	SS	MS	F
Group	3	0.9134	0.3045	3.1720*
Error	92	8.8307	0.0960	

* $p < .02$

TABLE 37

Analysis of Variance of Mean Social Worker
and Foster Parent Accuracy Scores on
Frequency of Service Delivery Under
Four Representative Conditions

Source	df	SS	MS	F
Group	3	2.5833	0.8611	5.3710**
Error	92	14.7500	0.1603	

** $p < .001$

to the frequency of accuracy of social workers and foster parents. These procedures will be presented and discussed after presentation of the results for Analysis 4.6, duration of service delivery.

Analysis 4.6. This comparison tested the social worker/foster parent rates of accuracy on the dependent variable of duration of service delivery under the four type-of-representative involvement conditions. The results of this analysis of variance of the mean scores are shown in Table 38. As can be seen in the source table, the F-ratio for 3,92 df was 5.3710. This was a significant finding at the .0019 level of probability. Thus, the null hypothesis of no significant difference was rejected for the duration of service delivery contrast. The investigator concluded that there was a significant difference in the mean rates of social worker/foster parent accuracy on this dependent variable under the four type-of-representative involvement conditions. The results of the post hoc procedures conducted for this analysis, for Analysis 4.5, and for Analysis 4.6 are presented as follows.

Since the F-ratios for the variables of responsibility for service delivery, frequency of service delivery, and duration of service delivery were statistically significant above chance probability, the Newman-Keuls multiple range procedure was used. Post hoc comparisons were made among the group means obtained for each contrast. All combinations of the group means under the four

TABLE 38

Analysis of Variance of Mean Social Worker
and Foster Parent Accuracy Scores on
Duration of Service Delivery Under
Four Representative Conditions

Source	df	SS	MS	F
Group	3	2.5833	0.8611	5.3710*
Error	92	14.7500	0.1603	

* $p < .001$

type-of-representative conditions were compared by utilizing the Newman-Keuls procedure.

The four type-of-representative conditions were as follows:

- (a) Condition 1: Neither of the current representatives had been involved in the last IEP staffing
- (b) Condition 2: Only the current foster parent had been involved in the last IEP staffing
- (c) Condition 3: Only the current social worker had been involved in the last IEP staffing
- (d) Condition 4: Both current representatives had been involved in the last IEP staffing.

The group means for the dependent variables on which statistically significant results were obtained across the four conditions are shown in Table 39. The results of the Newman-Keuls multiple range procedures indicated that the group mean comparison Condition Three versus Condition 4 ($C_3 - C_4$) was statistically significant for the variable responsibility for service delivery, given the critical difference of .2188 between the group means. The multiple range testing indicated that there was significantly more social worker/foster parent accuracy for the variable responsibility for service delivery when both representatives had been involved in the last IEP staffing than when only the current social worker had been involved.

For the dependent variable frequency of service delivery, two pair-wise comparisons were statistically significant. The first group mean comparison was Condition Three versus Condition 2 ($C_3 - C_2$). The critical difference for this comparison was .4167 between the

TABLE 39

Group Means for Responsibility for Service Delivery
 Frequency of Service Delivery and Duration of Service Variables
 Under Four Representative Conditions and
 Significance Levels from Newman-Keuls Multiple Range Procedure

Variable	Condition 1 \bar{X}	Condition 2 \bar{X}	Condition 3 \bar{X}	Condition 4 \bar{X}
Responsible for Service Delivery 1	0.0417	0.2083	0.0000	0.2188
Frequency of Service Delivery 2,3	0.0417	0.4167	0.0000	0.2083
Duration of Service Delivery 2,3	0.0417	0.4167	0.0000	0.2083

${}^1\bar{X}_3 - \bar{X}_4$ significant at .05 probability level

${}^2\bar{X}_3 - \bar{X}_2$ significant at .05 probability level

${}^3\bar{X}_1 - \bar{X}_2$ significant at .05 probability level

variable frequency of service delivery when only the foster parent had been involved than when only the social worker had been involved.

The second significant group mean comparison was Condition One versus Condition Two ($C_1 - C_2$). The critical difference for this comparison was .3750 between the group means. The results suggest that there was significantly greater occurrence of social worker/foster parent accuracy for the variable of frequency of service delivery when only the current foster parent had been involved in the last IEP staffing than when neither of the two current representatives had been involved.

For the dependent variable of duration of service delivery, the same two pair-wise comparisons were significant as were significant for the variable of frequency of service delivery. That is, the comparisons Condition Three versus Condition Two ($C_3 - C_2$) and Condition One versus Condition Two ($C_1 - C_2$). The critical differences were likewise identical, .4167 for the first comparison and .3750 for the second comparison. The results of the post hoc procedures for the variable frequency of service delivery indicated that there was a significantly greater occurrence of social worker/foster parent accuracy when only the foster parent had been involved in the last IEP staffing than when only the current social worker had been involved. Additionally, the results suggested that there was a significantly greater occurrence of social worker/foster parent accuracy when only the current foster parent had been involved in the last IEP staffing than when neither of the two representatives had been involved.

The following section of this chapter will present statistical

analyses identical to those presented above. However, these analyses were conducted on two groups: (a) the representatives of handicapped children in foster care who had both been involved in the last IEP staffing (cases under Condition 4) and (b) a matched control sample of natural parents of handicapped children who had both been involved in the last IEP staffing. Thus, the following comparisons involve two type-of-representative conditions. The N for these analyses was 48, that is, 24 cases constituting Condition 4 and 24 cases constituting the control sample, referred to as Condition 5. In order to test comparisons between the two conditions, one research question was formulated which in turn generated four null hypotheses. That research question is stated as follows.

Research Question 7: What are the differences in accuracy and agreement of representatives when comparisons are made between the responses of representatives under Condition 4 and the responses of the control subjects under Condition 5, on the LEA Team decisions of: (a) classification, (b) eligibility, (c) IEP goals, (d) IEP objectives, (e) program placement, (f) responsibility for service delivery, (g) frequency of service delivery, and (h) duration of service delivery?

Null Hypothesis 6

There will be no significant difference in the frequencies of agreement between the two sets of child representatives on the dependent variables of (a) classification, (b) eligibility, (c) IEP goals, (d) IEP objectives, (e) program placement, (f) responsibility for service delivery, (g) frequency of service delivery, and (h) duration of service obtained under the two type-of-representative conditions.

Analysis 6.1. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the variable of child's classification as determined by the LEA Team. A Chi-square analysis of homogeneity was conducted and results of the 2 x 2 contingency table are shown in Table 40. The Chi-square value with 1 df was .083. This finding was not statistically significant. Thus, the null hypothesis for no significant difference was not rejected. These results suggest that the representatives of handicapped children in foster care possessed no significantly greater agreement regarding the child's classification than did the natural parent representatives.

Analysis 6.2. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the variable of child's eligibility for special education services. A Chi-square analysis for homogeneity was conducted and the results of the analysis are shown in Table 41. The Chi-square value with 1 df was 24.125, which was significant at the 0.0000 level of probability. A post hoc phi value was obtained, since the null hypothesis of no significant difference was rejected. The obtained phi coefficient was .7089. Results of this analysis suggest that the agreements between natural parent representatives were significantly more frequent than were those of the social worker/foster parent representatives (p. 0.0000). Furthermore, the predictive value of this finding was fairly strong (.7098). As can be seen in Table 41, the relationship between the cases under Condition 4 and Condition 5 is nearly totally inverse. That is, the

TABLE 40

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Natural Father/Natural Mother Agreement on
Classification

	Condition 4 N	Condition 5 N	Total N
Disagree	12	13	25
Agree	12	11	23
	24	24	N=48

Chi-square, 1 df = 0.083

TABLE 41

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent
and Both Natural Parent Agreement
on Eligibility

Condition 4 N	Condition 5 N	Total N
3	20	23
21	4	25
24	24	N=48

Chi-square, 1 df = 24.125, p 0.0000

representatives of the foster children disagreed 21/24 times, while the natural parents agreed 20/25 times. This means that with respect to the variable of child's eligibility, one is able to predict with a moderate degree of accuracy the agreement between the natural parents by knowing the frequency of agreement of the foster care representatives.

Analysis 6.3. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the variable of IEP goals. Results are shown in Table 42. The Chi-square value with 1 df was 10.101 for this variable, and was statistically significant at the 0.0015 level of probability. Thus, the null hypothesis of no significant difference was rejected. The phi coefficient obtained was .4587. The results of Analysis 6.3 indicated that natural parent agreements were significantly more frequent than were those of the foster care representatives with respect to their understanding of the child's IEP goals. The statistical predictive validity for these variables, however, was weak.

Analysis 6.4. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the dependent variable of IEP objectives. The results of this analysis are shown in Table 43. The Chi-square value with 1 df was 7.111, which was statistically significant at the 0.0077 level of probability. Thus, the null hypothesis of no significant difference was rejected for this variable. The phi coefficient obtained was .3848. Therefore, the results of Analysis 6.4 indicated that the

TABLE 42

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Both Natural Parent Agreement on
IEP Goals

	Condition 4 N	Condition 5 N	Total N
Disagree	7	18	25
Agree	17	6	23
	24	24	N=48

Chi-square, 1 df = 10.101, p 0.0015

TABLE 43

Chi-square Analysis for Homogeneity
for Social Worker/Foster Parent and
Both Natural Parent Agreement on
IEP Objectives

	Condition 4 N	Condition 5 N	Total N
Disagree	22	14	36
Agree	2	10	12
	24	24	N=48

Chi-square, 1 df = 7.111, p 0.0077

agreement between natural parents was significantly greater than was the agreement between social worker and foster parent subjects with respect to their understanding the child's IEP objectives. However, the predictive value of the dependency between type of representative and frequency of agreement was found to be weak.

Analysis 6.5. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the variable of the child's program placement and services. The results are shown in Table 44. The Chi-square value for 1 df was 0.403, which was not a significant finding. As can be seen in Table 44, the frequency of agreements across both groups was fairly equal. Furthermore, on this dependent variable, the number of agreements exceeded the number of disagreements. Thus, the null hypothesis of no significant differences was not rejected. The results of Analysis 6.5 suggest that while the two groups of representatives did not differ significantly in their understanding of the child's program placement and services, both groups of representatives agreed far more frequently than they disagreed with respect to the child's special education program placement and services.

Analysis 6.6. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the variable responsibility for service delivery. The results of this analysis are shown in Table 45. The Chi-square value with 1 df was 11.077, which was significant at the 0.0009 level of probability. The phi coefficient obtained was .4803. Thus, the null

TABLE 44

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Both Natural Parent Agreement on
Program Placement

	Condition 4 N	Condition 5 N	Total N
Disagree	16	18	34
Agree	8	6	14
	24	24	N=48

Chi-square, 1 df = 0.403

TABLE 44

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Both Natural Parent Agreement on
Program Placement

	Condition 4 N	Condition 5 N	Total N
Disagree	16	18	34
Agree	8	6	14
	24	24	N=48

Chi-square, 1 df = 0.403

TABLE 45

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Both Natural Parent Agreement on
Responsibility for Service Delivery

	Condition 4 N	Condition 5 N	Total N
Disagree	9	0	9
	15	24	39
	24	24	N=48

Chi-square, 1 df = 11.077, p 0.0009

hypothesis of no significant difference was rejected. Results of Analysis 6.6 suggest that the two groups of representatives differed significantly in terms of frequency of agreement on the variable of responsibility for service delivery. In this analysis, the data indicated that social worker/foster parent representatives possessed significantly greater agreement than did the natural parents in terms of their ability to identify the individual responsible for delivering the special education services to the handicapped child. However, the correlation between type-of-representative and the rate of agreement/disagreement across the two groups of representatives was found to be weak.

Analysis 6.7. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with respect to the dependent variable of frequency of service delivery. The results of this analysis are found in the contingency table in Table 46. Computerized statistical analysis of these data was not produced, since, as is shown in the contingency table, the distribution of agreements/disagreements across the two type-of-representative conditions was so extreme as to produce no occurrences of agreement for either group. Although no testing for statistical significance could be conducted for this variable, it is notable that both foster care and natural parent representatives were in total disagreement among themselves with respect to this variable.

Analysis 6.8. This analysis tested the agreement between social worker/foster parent and natural father/natural mother responses with

TABLE 46

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Both Natural Parent Agreement on
Frequency of Service Delivery

	Condition 4 N	Condition 5 N	Total N
Disagree	0	0	0
	24	24	48
	24	24	N=48

Chi-square value not obtained

TABLE 47

Chi-square Analysis for Homogeneity
For Social Worker/Foster Parent and
Both Natural Parent Agreement on
Duration of Service Delivery

	Condition 4 N	Condition 5 N	Total N
Disagree	0	0	0
Agree	24	24	48
	24	24	N=48

Chi-square value not obtained

respect to the variable of duration of service delivery. The results of this analysis are shown in the 2 x 2 contingency table in Table 47. As was the case with the previous analysis, Analysis 6.7, the distribution of agreements and disagreements across the two type-of-representative conditions was extreme. No occurrences of agreement were present under either of the two conditions. Therefore, the Chi-square analysis for this contrast was not computed.

Analysis 6.9. This analysis tested the accuracy of social workers and natural fathers with respect to their responses to the variable of classification. The results of this analysis are shown in Table 48. The Chi-square value for 1 df was 6.857, which was significant at the 0.008 level of probability. However, the lowest expected value for this analysis was 3.000. Thus, interpretation of this analysis as a significant result is guarded and the investigator drew no conclusions regarding the effects of the two conditions on the accuracy of social worker and natural father responses with respect to the variable classification. For this reason, no post hoc testing was conducted. The most liberal conclusion that the investigator drew from the results of this analysis was that the number of accurate responses exceeded the number of inaccurate responses across both type-of-representative conditions by a ratio of 7:1.

Analysis 6.10. This analysis tested the accuracy of foster mother and natural mother responses with respect to the variable of classification. The results of this analysis are shown in the contingency table in Table 49. The Chi-square value with 1 df was 0.3759.

TABLE 48

Chi-square Analysis for Homogeneity
For Social Worker and Natural Father
Accuracy on Classification

	Condition 4	Condition 5	Total
	N	N	N
Accurate	24	18	42
Inaccurate	0	6	6
	24	24	N=48

Chi-square, 1 df = 6.857, p 0.008

TABLE 49

Chi-square Analysis for Homogeneity
For Foster Mother and Natural Mother Accuracy
on Classification

	Condition 4 N	Condition 5 N	Total N
Accurate	13	16	29
Inaccurate	11	8	19
	24	24	N=48

Chi-square, 1 df = 0.375

This was not a significant finding. Thus, the null hypothesis of no significant difference was not rejected. Results of Analysis 6.10 indicated that significant differences did not exist between the accuracy of the foster mother and natural mother responses with respect to the variable classification.

Analysis 6.11. This analysis tested the accuracy of social worker and natural father responses with respect to the variability of eligibility. The results of this analysis are shown in Table 50. The Chi-square value with 1 df was 0.949. This was not a statistically significant finding. Thus, the null hypothesis of no significant difference was not rejected. Results of Analysis 6.11 indicated that the social worker and natural father responses did not differ significantly with respect to accuracy on the dependent variable of child's eligibility for special education services.

Analysis 6.12. This analysis tested the accuracy of foster mother and natural mother responses with respect to the variable of eligibility. Results are shown in Table 51. The Chi-square value with 1 df was 20.493. This was statistically significant at the 0.0000 level of probability. Thus, the null hypothesis for no significant difference was rejected. A phi coefficient was obtained and was found to be .653. Therefore, the results of Analysis 6.12 indicated that foster mother and natural mother responses did differ significantly in terms of their accuracy with respect to the child's eligibility for special education services. Natural mother responses were significantly more accurate than were the foster mother responses

TABLE 50

Chi-square Analysis for Homogeneity
For Social Worker and Natural
Father Accuracy on Eligibility

Condition 4 N	Condition 5 N	Total N
16	19	35
8	5	13
24	24	N=48

Chi-square, 1 df = 0.949

TABLE 51

Chi-square Analysis for Homogeneity For
Foster Mother and Natural Mother
Accuracy on Eligibility

Condition 4 N	Condition 5 N	Total N
8	23	31
16	1	17
24	24	N=48

Chi-square, 1 df = 20.493, p 0.0000

(p. 0.0000). The post hoc coefficient revealed fair-to-moderate correlation between type-of-representative conditions and accuracy of responses for the variable of eligibility.

Analysis 6.13. This analysis tested the mean accuracy of the social worker/foster parent group against that of the natural parent group on IEP goals. Data for this analysis were obtained by calculating the number of accurate responses obtained for both groups out of the total number of possible responses. A one-way ANOVA procedure was utilized to test the difference in accuracy of the two groups of representatives on the variable IEP goals. Results are shown in Table 52. The F-ratio for 1,46 df was 209.4790, which was not a statistically significant difference. Thus, the null hypothesis of no significant difference between the foster care representatives and the natural parent representatives was not rejected for the dependent variable of IEP goals. These results indicate that the combined accuracy of the foster care representatives was not significantly greater than was that of the natural parent representatives for the dependent variable IEP goals.

Analysis 6.14. This analysis tested the mean accuracy of the social worker/foster parent group against that of the natural parent group on the dependent variable of IEP objectives. A one-way ANOVA procedure was utilized to test the difference in accuracy of the two groups of representatives on this variable. Results are shown in Table 53. The F-ratio for 1,46 df was 189.9143. This finding was not statistically significant. Thus, the null hypothesis of no

TABLE 52

Analysis of Variance of Mean Foster Care
and Natural Parent Representative Accuracy Scores
on IEP Goals Under "Both Involved" Conditions

Source	df	SS	MS	F
Group	1	17.8242	17.8242	209.4790
Error	46	3.9141	0.0851	

TABLE 53

Analysis of Variance of Mean Foster Care
and Natural Parent Representative Accuracy Scores
on IEP Objectives Under "Both Involved" Conditions

Source	df	SS	MS	F
Group	1	24.0833	24.0833	189.9143
Error	46	5.8332	0.1267	

significant difference between the accuracy of foster care representatives and that of natural parent representatives was not rejected for the dependent variable of IEP objectives. These results suggest that the combined accuracy of the foster care representatives was not significantly greater than was that of the natural parent representatives for the variable IEP objectives.

Analysis 6.15. This analysis tested the mean accuracy of the foster care group against that of the natural parent group on the dependent variable of program placement. The source table for this one-way analysis of variance is shown in Table 54. The F-ratio for 1,46 df was 94.0909. Thus, the null hypothesis of no significant difference between the accuracy of foster care representatives and that of the natural parent representatives was not rejected for the dependent variable of program placement. The results of Analysis 6.14 indicate that as a group, the foster care representatives were not significantly more accurate with respect to their understanding of the children's program placement and services than were the natural parent representatives.

Analysis 6.16. This analysis tested the mean accuracy of the foster care representatives group against that of the natural parent group on the dependent variable of responsibility for service delivery. The source table for the ANOVA procedure is shown in Table 55. The F-ratio for 1,46 df was 209.4790. This was not a significant result. Therefore, the null hypothesis was not rejected for the dependent variable of responsibility for service delivery. The data from this

TABLE 54

Analysis of Variance of Mean Foster Care
and Natural Parent Representative Accuracy Scores
on Program Placement Under "Both Involved" Conditions

Source	df	SS	MS	F
Group	1	18.7500	18.7500	94.0909
Error	46	9.1667	0.1993	

TABLE 55

Analysis of Variance of Mean Foster Care
and Natural Parent Representative Accuracy Scores
on Responsibility for Service Delivery
Under "Both Involved" Conditions

Source	df	SS	MS	F
Group	1	17.8242	17.8242	209.4790
Error	46	3.9141	0.0851	

testing suggest that the foster care representatives and the natural parent representatives were not significantly different on their rates of accuracy in identifying the person responsible for special education service delivery to the children.

Analysis 6.17. This analysis tested the mean accuracy of the social worker/foster parent group against that of the natural parent group on the dependent variable of frequency of service delivery. A one-way ANOVA was utilized to test the difference in accuracy of the two groups with respect to this variable. Table 56 shows the results. The F-ratio for 1,46 degrees of freedom was 189.9143. This was not a significant result. Therefore, the null hypothesis of no significant difference between the accuracy of foster care representatives and that of the natural parent representatives was not rejected. These results indicate that neither group of representatives differed from the other in their rates of accuracy with respect to the dependent variable of frequency of service delivery.

Analysis 6.18. This analysis tested the mean accuracy of the social worker/foster parent representatives against that of the natural parent representatives on the dependent variable of duration of service delivery. The source table for the one-way ANOVA procedures is shown in Table 57. The F-ratio for 1,46 df was 94.0909, and was not a statistically significant result. Therefore, the null hypothesis of no difference between the two groups with respect to their accuracy on the dependent variable was not rejected. The results of this analysis

TABLE 56

Analysis of Variance of Mean Foster Care
and Natural Parent Representative Accuracy Scores
on Frequency of Service Delivery under
Both Involved Conditions

Source	df	SS	MS	F
Group	1	24.0833	24.0833	189.9143
Error	46	5.8333	0.1268	

TABLE 57

Analysis of Variance of Foster Care
and Natural Parent Representative Accuracy Score
on Duration of Service Delivery Under
"Both Involved" Conditions

Source	df	SS	MS	F
Group	1	18.7500	18.7500	94.0909
Error	46	9.1667	0.1993	

indicate that neither group of representatives differed from the other in their rates of accuracy with respect to the dependent variable of duration of service delivery.

SUMMARY

This investigation sought to determine whether the four type-of-representative conditions produced significant differences in social worker/foster parent agreement responses. Additionally, the study sought to determine whether social workers and foster parents were significantly more accurate under any of the four type-of-representative conditions. The findings are summarized as follows.

Social Worker/Foster Parent Agreement

1. Results revealed that social workers and foster parents disagreed on a number of the eight LEA Team decisions. These were:
 - (a) Classification, significant at the 0.0001 level of probability
 - (b) Eligibility, significant at the 0.0005 level of probability
 - (c) IEP goals, significant at the 0.0047 level of probability
 - (d) Responsibility for service delivery, significant at the 0.0179 level of probability.

2. There were a number of LEA Team decisions on which social worker/foster parent disagreement, while not significant, was notable. These were:
 - (a) IEP objectives, on which they disagreed 95.83 percent
 - (b) Frequency of service delivery, on which they disagreed 95.83 percent; and
 - (c) Duration of service delivery, on which they disagreed 95.83 percent.

3. Strong social worker/foster parent agreement was not exhibited on any of the eight LEA Team decisions. However, the two foster care representatives did show moderate agreement (70.83 percent) on the variable of program placement.
4. The post hoc testing of the statistically significant results for social worker/foster parent agreement did not produce any results that reflected strong correlation between agreement and type-of-representative condition.
5. The data produced from calculating the magnitude of social worker/foster parent agreement revealed that as a group, social workers and foster parents were in agreement only 20.96 percent across the eight LEA Team decisions. Out of a total of 768 possible responses, the total number of agreements was only 161. Such data indicate that the disagreement exhibited by the foster care representatives across the eight LEA Team decisions was indeed pervasive.
6. When the total magnitude of social worker/foster parent agreements was compared to the total magnitude of disagreements, the results were statistically significant, reflecting greater disagreement at the less than 0.001 level of probability.

Social Worker and Foster Parent Accuracy

1. Findings revealed that social workers and foster parents were largely inaccurate in their understanding of the eight LEA Team decisions. The LEA Team decisions on which significant results were obtained were:
 - (a) Social workers on Classification, significantly accurate at the 0.0004 level of probability

(b) Foster parents, significantly inaccurate at the 0.0001 level of probability; and

(c) Social workers, significantly inaccurate at the 0.0004 level of probability.

2. The pooled social worker/foster parent responses were significantly accurate on several of the LEA Team decisions.

These were:

(a) Social worker/foster parent responses regarding responsibility for service delivery, significant at the 0.02 level of probability;

(b) Social worker/foster parent responses regarding frequency of service delivery, significant at the 0.001 level of probability; and

(c) Social worker/foster parent responses regarding duration of service delivery, significant at the 0.0019 level of probability.

3. While hypothesis testing of accuracy under the four quasi-experimental conditions produced only the above six statistically significant results, the magnitude of social worker and foster parent accuracy across the eight LEA Team variables without regard for conditions was extensive. Social workers were accurate only 53.20 percent of the time, and foster parents only 35.86 percent of the time. Total combined social worker/foster parent accuracy was only 44.53 percent.

4. When the magnitude of social worker/foster parent accuracy across the eight variables was compared to the magnitude of inaccuracy, the results revealed statistically significant

inaccuracy at the less than 0.001 level of probability.

5. The one LEA Team decision on which both social workers and foster parents exhibited a high degree of accuracy was program placement. Social workers were accurate 85.43 percent of the time and foster parents were accurate 84.77 percent.

Foster Care/Natural Parent Representatives' Agreement

1. Natural parent representatives agreed significantly more often than they disagreed on the following LEA Team decisions:
 - (a) Eligibility, significant at the 0.0000 level of probability;
 - (b) IEP goals, significant at the 0.0015 level of probability;
 - (c) IEP objectives, significant at the 0.0077 level of probability; and
 - (d) Responsibility for service delivery, significant at the 0.0009 level of probability.

Foster Care/Natural Parent Representatives' Accuracy

1. When the magnitude of total natural parent responses for accuracy were calculated without regard to the four type-of-representative conditions, the results revealed a high percentage of accuracy across the eight LEA Team decisions (82.42 percent).
2. When the total natural parent accuracy was compared to the total inaccuracy of these representatives, the results showed significantly greater accuracy at less than 0.001 level of probability.
3. Finally, when the total magnitude of natural parent accuracy across the eight LEA Team decisions was viewed against that of the foster care representatives', the extent of discrepancy

between the two sets of representatives was evident. Foster parents were accurate only 44.53 percent of the time, while the natural parent group was accurate 82.42 percent of the time. These results clearly show the difference in rates of accuracy between the two groups of representatives. The findings suggest that for a multitude of reasons, the two sets of representatives perform quite differently with respect to their level of agreement and accuracy on the eight LEA Team decisions. The implications of these results will be discussed in the following chapter, Discussion.

CHAPTER V

DISCUSSION

The practice of permitting multiple individuals to represent a single handicapped child for special education purposes has lacked empirical research. The empirical data obtained from social welfare research has documented the problems of maintaining consistency of service delivery to clients in foster care. Among the problems identified were, (a) frequency with which the children experience multiple placements or with which children drift in the foster care system, (b) high attrition rate of social workers, (c) the basic ambiguity of the foster parent role which frequently results in removal of the child to another foster placement, and (d) specific characteristics of the children that make them hard to place, either temporarily or permanently. This study examined the demographic characteristics of social worker, foster parent and handicapped foster child subjects to determine whether the characteristics documented in the social welfare literature also were applicable to this sample of subjects. Additionally, the study sought to determine whether the accuracy and agreement of social worker and foster parent subjects were greater under any of the four type-of-representative involvement conditions. These conditions were:

Condition One: Neither current social worker nor current foster parent had been involved in the last IEP staffing;

Condition Two: Current social worker had not been involved in the last IEP staffing, but current foster parent had been involved;

Condition Three: Current social worker had been involved in the last IEP staffing, but current foster parent had not been involved;

Condition Four: Both current social worker and current foster parent had been involved in the last IEP staffing.

Seven research questions were formulated, each of which generated multiple hypotheses that were tested by specific statistical analyses. The results obtained in this study will be discussed separately for each research question that follows.

Research Question 1: What is the frequency with which two of the permissible representatives, social workers and foster parents, are actually serving as representatives for handicapped children in foster care for special education purposes?

Discussion

The data obtained for Research Question 1 indicate that the handicapped foster children assigned to the social worker subjects of this study had not been afforded consistency with respect to their representation for special education services. Approximately half of the children in each state had not been represented at their last IEP staffing by either of their current representatives. The data suggested that for cases in which only one of the current representatives had been involved in the last IEP staffing, that representative was most frequently the child's foster parent. Only a minute percentage of the handicapped foster children assigned to the social worker subjects' caseloads had been represented at their last IEP staffing by both their current representatives.

The reasons for non-involvement of the representatives in the last IEP suggest that the highest-ranking reason across both states was the fact that either another social worker or another foster parent had been assigned to the foster child at the time of the last staffing. This finding supports the social welfare literature which has consistently identified social worker attrition rate and multiple re-placements as hindrances

to providing quality foster care service to children. The impact of these two problems was evident in the data. Of the cases in which one or both of the current representatives had not been involved in the last IEP staffing, 42 percent cited non-involvement because another social worker or foster parent had been assigned to the case at the time of the last staffing.

Also important for this research question was the documentation that the data provided with respect to scheduling and notification of the foster children's representatives that the IEP staffing was to be held. Fifty three percent of the cases in which one or both of the representatives had not been involved in the last staffing was attributable to failings on the part of the LEA. These included scheduling the staffing at a time that was inconvenient for the representatives and failure to notify the representatives of a previously-arranged staffing. Since multiple representatives exist in cases of foster care, confusion may well have existed over who was to be notified, or, more basically, over who was responsible for representing these children at IEP staffings.

Research Question 2: Whom do the social worker and foster parent subjects in this investigation identify as being responsible for representing their handicapped client/foster child for special education purposes?

Discussion

The data suggest that the social workers and foster parents themselves experienced difficulty in perceiving the joint nature of their responsibility for representing the handicapped foster children. Both groups believed themselves to be solely responsible for representation purposes. However, foster parents were significantly more aware of the

fact that the alternate representative (the social worker) shared this responsibility. The problem of role ambiguity which was cited so frequently in the social welfare literature (Kline & Overstreet, 1972) appeared to be evident for this sample of foster parents. For example, the foster parents cited themselves as being solely responsible, yet acknowledged the social service agency's authority over the foster child.

Notably absent from the findings of this study was any case in which a surrogate parent had been appointed as representative for the handicapped foster child. In both Kansas and Massachusetts, final administrative arrangements for implementation of the Surrogate Parent Provision of PL 94-142 had not yet been made as of the time of the data collection for this investigation.

Research Question 3: What are the demographic variables of age, sex, ethnic background, handicapping conditions and placement history of the children who are represented by the social worker and foster parent subjects of this investigation?

Discussion

The handicapped foster children subjects of this investigation were older than might be expected in comparison with the subjects of the Gruber (1978) study. The handicapped foster children whom Gruber investigated in Massachusetts were younger than the non-handicapped foster children tracked within the foster care system ranging in age from approximately three years to fiand and a half years. Consistency regarding mean age of the foster children (12 years) was noted across both state samples.

The distribution of male foster children to female foster children approximates the norm for a sample of handicapped children. That is,

male children who are handicapped would be expected to outnumber the female children who are handicapped by at least 2:1.

Ethnic backgrounds of the subjects approximated the general population norms. Blacks constituted approximately one-third of the sample. Hispanic and Asian children constituted an even smaller minority, six percent of the sample. Sampling from the larger urban areas in both states did not particularly increase the number of minority subjects for this study, since the sampling site which produced the greatest ethnic diversity was rural Kansas (Garden City). Although the ethnic sampling was consistent with the norm of the general population, the number of foster children belonging to ethnic groups is smaller than might be expected for a sample of handicapped children.

The findings regarding disability characteristics of the handicapped foster children revealed two major patterns. First, over 40 percent of the children sampled were mentally retarded. Against the accepted incidence figure of three percent for mental retardation in the general population, the sample of children investigated in this study was exceedingly high in incidence of mental retardation. However, the 40 percent figure is not surprising when evaluated against the data obtained for number of handicapping conditions. Sixty five percent of the children sampled across both states had two or more handicapping conditions. The presence of multiple disabilities may well have compounded the effects of any one of the existing disabilities, rendering the children at least functionally retarded for educational purposes. Thus, the figure of 40 percent may be inflated. On the other hand, the sample may well reflect the fact that retarded children have placed such additional stress upon

their family units that they have been placed in foster care in large numbers.

Data obtained with respect to foster placement history were even more extreme than would be expected. The handicapped foster children subjects had been in foster care for a mean length of 7.17 years. If, as Emlen (1972) suggested, one-and-a-half to two years in foster care is a strong predictor of the child's remaining in foster care permanently, the subjects sampled in this investigation face virtually no chance of moving from the foster care system either to their own homes or to permanent placements. The handicapped foster children subjects in this study experienced approximately two foster placements per year, and were assigned a new social worker approximately every year. These findings in and of themselves differentiate the handicapped foster child from the handicapped child in his own home, whose representatives would, under all circumstances, remain constant.

One particular problem associated with service delivery to this mobile population was disclosed during the data collection in Massachusetts. When handicapped foster children move from one foster home to another, a representative from the LEA which has just released the child is required to attend the LEA staffing in the receiving school district. Among the items that are "negotiated" during the IEP (Core) Staffing is that of fiscal responsibility for the handicapped foster child's special education services. Receiving LEAs do not perceive the incoming foster child as "their" responsibility. Thus they tended to look to the LEA which had just released the child for financial assistance for special education costs. This practice places the handicapped child in foster care at a

distinct disadvantage by comparison to handicapped children residing in their own homes. Since the handicapped children in foster care have no permanent, consistent representative acting on their behalf, the quality and quantity of their special education services may well be jeopardized by expedient fiscal negotiations conducted by the releasing and receiving LEAs.

Reasons for initial foster placement as found in the results of this study confirmed the fact that handicapped children are high-risk for abuse and/or neglect. However, the data obtained concerning reasons for subsequent foster placements suggest either that foster parents had little understanding of the demands that would be made on them by taking a handicapped foster child into their home, or, that the foster parents did not have the back-up or support services that were required to maintain a successful foster placement. Almost 50 percent of the subsequent re-placements across both states were made at the request of the foster parents. These results support the findings of Arkava (1977) who documented the difference between the demands made by handicapped and non-handicapped foster children.

Of special note were two findings with respect to reasons for subsequent foster placements. First, three of the 96 cases involved children who had initially been placed with a foster parent who, after foster placement had been made, was found to be mentally retarded. Additionally, one of the foster parents interviewed as a subject for this investigation was mentally retarded. The advisability of placing a handicapped foster child in the legal custody of a mentally retarded foster parent would appear to be questionable in view of the demands that these children make upon the personal, social, emotional and economic resources of foster parents.

The second notable finding with respect to reasons for subsequent foster placements involved a case sampled in Kansas in which a child's entire living arrangement was changed because the LEA in which the foster home resided did not offer speech therapy with the frequency which the child required. This situation would appear to be a failure on the part of the LEA to comply with both the spirit and the letter of PL 94-142. Additionally, this situation exemplifies the plight of the handicapped child in foster care: none of the child's representatives appealed the LEA's refusal to provide the necessary special education services. The state social service agency exercised a familiar prerogative by removing the child from the foster home. However, no representative assumed responsibility for representing the child's right to a free, appropriate, public education.

Research Question 4: What are the demographic variables of foster parent and natural parent education, age, foster parenting and natural parenting history of the foster parent and natural parent subjects of this investigation?

Discussion

The comparative findings for foster parent and natural parent education suggest that across both states, natural parents had received more formal education than had the foster parent subjects. Similarly, differences in age were found between foster and natural parent groups. Foster parents in both states were older than natural parent subjects by a mean of 15 years. The findings with respect to age of the foster parent subjects support Gruber's research. (Foster parent subjects in Gruber's Massachusetts study were in their mid-to-late 40's). One foster mother who was 68 years old had previously parented 270 foster children. Numerous

foster parents were currently parenting more than one foster child. One foster home in Massachusetts had 15 handicapped foster children currently residing in the house. This home, however, was not licensed as a group foster care home.

In summary, the foster parent subjects of this investigation show similar demographic profiles to foster parent subjects examined by major social work researchers (Fanshel, 1978; Gruber, 1978; Horajsi, 1980). Foster parent subjects in this investigation tended to be less well-educated, middle class, older parents in comparison to natural parent subjects. The natural parent subjects were, by comparison, younger than the foster parents in this study. Likewise, they were better educated, and came from middle-class to upper-middle class backgrounds. None of the natural parents were parenting a foster child.

Research Question 5: What are the demographic variables of professional education, non-handicapped and handicapped child caseload count, and history of client contact of the social worker subjects of this investigation?

Discussion

Seventy eight percent of the social worker subjects of this investigation did not possess the standard professional degree for social work practice, the M.S.W. Lack of professional preparation had been identified in the social welfare literature as a high-risk factor for "burnout" (Maslach, 1978; Weatherly, 1980). Indeed, the lack of professional preparation for dealing with the demands of their jobs may well have placed these social worker subjects in jeopardy of job-related stress. Social worker caseloads were found in this investigation to be extraordinarily

high. Across both states, the mean number of total cases assigned the social worker subjects was 57. This exceeded twice the number recommended by the Child Welfare League of America, which is 20 cases per social worker. Reduction in state funding was experienced across both states over the period of time that data collection occurred for this study. The subsequent reduction in social worker staff that occurred between the start and completion of data collection may well have contributed to the overburdening caseloads of the social worker subjects. Nevertheless, social worker subjects in both states indicated that their caseloads were typical by way of comparison to caseloads they had been assigned during the previous year.

In view of the inflated caseloads of the social worker subjects, the data obtained regarding length of time since the last contact with the foster care case is not surprising. Social workers who had a mean of 57 foster cases would not be able to make meaningful contact with their cases with frequency greater than once a month. The investigator interviewed several social workers in Massachusetts who documentably lied in response to length of time that had elapsed since last contact with the case. Whether the low reliability percentages between social worker and foster parent responses to this inquiry were due to social worker inaccuracy or to lack of veracity on the part of social workers, approximately 44 percent of the social workers indicated that contact had been made on the case "within the last week." This suggests that the social worker subjects were at least aware of the fact that more frequent contact should be expected on cases involving handicapped children. One social worker in Kansas reported that 18 months had elapsed since she had

made contact with the handicapped foster child in question.

Finally, anecdotal information may be helpful in interpreting the demands made on the social worker subjects in this investigation. The working conditions under which many of the social workers labored were exceedingly less than desirable. During data collection in Massachusetts, one stabbing incident occurred in the Department of Public Welfare Office, and two incidents of theft occurred involving social worker's purses. The noise within the large, unpartitioned areas assigned as "offices" was prohibitive of normal tone of conversation. The lack of privacy for both social workers and clients was notable. Interviewers for this study were warned by social worker supervisors not to go unaccompanied to lavatories for safety reasons. The investigator herself witnessed the stabbing incident that occurred on the second day of data collection in Massachusetts. Case files were dilapidated and routinely piled on empty desks, chairs and floor areas. Documents that awaited placement within the clients' files were often piled loosely on any available surface including window sills. These conditions no doubt contribute at least in some part to loss of information, and thus, to lack of consistency in service delivery to clients. Working conditions such as these foster demoralization and cynicism. An example of this may be evidenced in the fact that one social worker refused to grant an interview with the investigator unless the investigator would, "make it worth my while." In the midst of such an environment, decisions have been made regarding the total living arrangements and special education services of handicapped foster children.

Research Question 6: What is the effect of the four quasi-experimental conditions of representative involvement upon the representatives' accuracy

and agreement on knowledge regarding the LEA Team decisions of (a) classification, (b) eligibility, (c) program placement, (d) IEP goals, (e) IEP objectives, (f) responsibility for service delivery, (g) frequency of service delivery, (h) duration of service delivery.

The effects of the four representative involvement conditions upon social worker/foster parent agreement and accuracy yielded 10 significant results. The dependent variables on which significant results were found are listed and discussed below.

Results

Classification. A significant number of disagreements were found between social worker and foster parent subjects under the four conditions for this variable. The factor which contributed most strongly to these results was the non-categorical approach to service delivery in Massachusetts. As will be discussed under subsequent results, some social workers and many foster parents in Massachusetts could not apply a label or disability classification to the child's handicapping condition. Instead, these representatives offered a functional definition of the handicapping condition. As can be seen in the Rules for Scoring (Appendix G) functional definitions were acceptable for classification purposes if they matched the disability which they described. In many cases, however, functional definitions were not consistent with the handicapping condition as identified by the LEA Team.

Accuracy of social worker responses on this variable and inaccuracy of foster parent responses on this constituted two of the 10 significant results. These results were obtained by two separate analyses. Thus, not only were social workers significantly accurate regarding classification; foster parents were found to be significantly inaccurate. This

would suggest that the significant result concerning social worker and foster parent disagreement on this variable is attributable to inaccurate foster parent responses and to accurate social worker responses. Thus, social workers appeared more able to "read between the lines" of the non-categorically-stated IEP information and attach an accurate disability label. Foster parents, however, lacking such professional expertise, were not able to differentiate between IEP information that might be labeled mental retardation, learning disabilities, or language disabilities. When inaccurate foster parent responses were made on this variable, the inaccuracy most often reflected a less stigmatizing disability category, e.g. learning disabilities rather than mental retardation. Results for the responsibility for service delivery variable showed that the social worker/foster parent pooled accuracy responses were significantly greater for those cases in which the foster parent had been present at the IEP staffing together with the social worker than for those cases in which the social worker alone represented the child at the IEP staffing (Condition 4 versus Condition 3). The significant accuracy of foster parents in this investigation suggests that these foster parents would have been able to contact the special education personnel for assistance in dealing with their handicapped foster child since the foster parents were able to identify these individuals with a high degree of accuracy.

IEP Goals. Significant disagreement was found between social worker and foster parent subjects on the variable IEP goals. From the investigator's perspective, the quality of the IEP goals as formulated in the IEPs themselves contributed to foster parent and social worker disagreements in many cases. No significant difference was found between the

pooled social worker/foster parent rates of accuracy and the four quasi-experimental conditions of involvement.

Frequency of Service Delivery. Significant accuracy was found between the pooled social worker/foster parent rates of accuracy and the four representative involvement conditions. Greater accuracy was found in those cases in which the foster parent alone was involved in the IEP staffing than in those cases in which the social worker alone was involved in the IEP staffing. Thus, it would appear that foster parent responses contributed to the significant accuracy for this variable. Significant accuracy was also found in those cases in which the foster parent alone represented the handicapped foster child at the IEP staffing than was found in those cases in which neither social worker nor foster parent had been involved in the IEP staffing.

Eligibility. Neither foster parent nor social worker subjects in this study appeared to agree on the concept of "eligibility for services." Significantly more disagreements existed between the two representatives with respect to this variable. The level of disagreements between social worker and foster parent subjects was attributable, in great measure to the finding of significant inaccuracy of the social worker subjects. The majority of social worker subjects responded to inquiries regarding the child's eligibility with statements such as, "He's eligible because the school district says he's eligible", or, "He's eligible for special education because he's got learning disabilities." These responses were not considered to be accurate statements for this variable by virtue of the criteria established in the Rules for Scoring (Appendix G). Only a small minority of either social worker or foster parent subjects could

state that the child was eligible for special education services due to instructional, behavioral, material/equipment, or teacher-pupil ratio needs beyond those that could be met in the regular classroom.

Responsibility for Service Delivery. A statistically significant number of disagreements were found between social worker and foster parent subjects regarding this variable. The investigator views the results for this variable, responsibility for service delivery, as critically important in their implications for handicapped children in foster care. If foster parents are able to identify the individuals who deliver special education services to their handicapped foster children, the foster parents may then consult with these special educators, drawing on their expertise for assistance in dealing with the handicapped foster child in the home setting. This may prove particularly useful in situations where social service agencies default on consistent service delivery to the foster parents, leaving them to care for and manage the handicapped foster child without agency assistance. Since this investigation documented the lengthy time spans that elapsed between social worker and foster parent contacts, foster parent accuracy would appear to be an important finding for this investigation.

Duration of Service Delivery. Significant results for this dependent variable were identical to those for the variable frequency of service delivery. That is, greater accuracy was found in those cases in which foster parents alone were involved in the IEP staffing than in those cases in which social workers alone were involved in the IEP staffing. Additionally, greater accuracy was found in those cases in which the foster parent alone represented the handicapped child at the staffing than was

found in those cases in which neither social worker nor foster parent was involved. The investigator concluded that, for the above two variables, presence of the foster parent was more critical at the IEP staffing than was social worker presence in terms of accuracy. Likewise, it was concluded that the presence of foster parent alone at the IEP staffing produced greater accuracy on these variables than did the presence of neither of the two representatives. That is, "better one than none."

Research Question 7: What are the differences in accuracy and agreement of representatives when comparisons are made between the responses of representatives under Condition 4 and the responses of the control subjects under Condition 5, on the LEA Team decisions of , (a) classification, (b) eligibility, (c) IEP goals, (d) IEP objectives, (e) program placement, (f) responsibility for service delivery, (5) frequency of service delivery, and (h) duration of service delivery?

This portion of the research investigated comparative differences that existed between the foster care representatives and the natural parent representatives with respect to their accuracy and agreement on the LEA Team decisions. The results showed that natural parent representatives agreed significantly more often than did the foster parent representatives on the three Team decisions of (a) eligibility, (b) IEP goals, and (c) IEP objectives. These findings are important since they suggest that the two groups of children represented by these subjects are not being served equally well in terms of the representatives' ability to agree on information regarding the children's special education needs. Significant differences were also found between the two groups of representatives on the variable responsibility for service delivery. This was the only variable in which the foster parent representatives were able to agree

among themselves more frequently than were the natural parent representatives. Significant results were obtained in the comparison of social worker/natural father accuracy on the variable of classification. However, statistical analysis resulted in a lowest expected value of 1.000, and interpretation of this comparison was not warranted for that reason. As with the previous significant results, the natural mother subjects were more accurate than were the foster mother subjects with respect to their understanding of the children's eligibility for special education services. These findings suggest, then, that the foster parent representatives in this investigation did not respond with agreement nor with accuracy regarding the handicapped children's special education needs. The results did not provide strong correlation for determining which of the four foster parent representative conditions afforded maximum agreement and accuracy for social workers and foster parents with respect to the LEA Team decisions. The results did show, however, that significant differences did indeed exist between the accuracy and agreement of the foster parent representatives and that of the natural parent control group. The total magnitude of accuracy and agreement of the foster care subjects differed significantly from that of the natural parent subjects across all eight dependent variables. When these findings are considered against the demographic data obtained on the foster care representatives, the results suggest that the variables identified in the social work literature as being problematic most certainly had some degree of impact upon the ability of the subjects to be sufficiently knowledgeable, and to be sufficiently in agreement with one another, to render informed consent on behalf of the handicapped children whom they represented.

LIMITATIONS

Four major sets of limitations can be noted for this study which may have influenced the results that were obtained. These are listed as follows:

- (1) Sample size
- (2) Generalizability of the findings
- (3) Timing of the investigation
- (4) Interpretive nature of the variables on which data were obtained.

Sample Size

Sample size may have affected the quasi-experimental component of this investigation in the following respects. The total number of interviews conducted for this investigation was 240. While this number would appear to be adequate, the breakdown of number of interviews by cases resulted in an N of 12 cases per cell under each of the four quasi-experimental conditions. As was reported in the Results Chapter (Chapter IV), a number of Chi-square analyses produced results that had lowest expected values below the suggested number, five. A larger subject sample might have resulted in Chi-square distributions that would not have been so deviant from a normal distribution. Similarly, several of the tests could not be computed mathematically because of the extreme disproportion of inaccurate versus accurate responses. A larger sample of subjects might have minimized the impact of individual differences upon the amounts of within-group variance for some dependent variables.

Generalization of the Findings

Subject sampling was conducted in a manner that attempted to produce maximum generalization of results, given the limitation of matching that

was required by the design. The two states do reflect sampling diversity in terms of geography and in terms of urban versus rural factors. The similarity of the data obtained from each of these states was notable. Clear patterns existed in the demographic data obtained on social worker, foster parent, handicapped child and natural parent subjects in each of the two states. Additionally, similarities were found across both states on the variables with respect to social worker and foster parent accuracy/inaccuracy, agreement/disagreement. The similarities that were found across the two states suggest that the variables associated with handicapped children in foster care may well be fairly uniform across states. However, the investigator acknowledges that only two of the 50 states were utilized for sampling purposes. Therefore, conclusions drawn on the basis of results obtained in this study are still subject to empirical investigation for purposes of generalization to the remaining 48 states.

Timing of the Investigation

The specific period of time during which data collection for this investigation was undertaken may well have affected some of the results of this study. Data collection occurred from January of 1980 to July of 1980. During the week immediately following the final day of data collection in Massachusetts, the Massachusetts Department of Public Welfare, from which most of the Massachusetts sample for this study was drawn, relinquished responsibility for foster care to the newly-created Division of Social Services. A number of administrative and organizational changes were initiated by the Division of Social Services, many of which have the potential for enhancing the working conditions of social workers and foster parents. Nevertheless, the mere establishment of the new social

service agency does not guarantee that the problems upon which this investigation focused have been eliminated. The research literature reviewed for this investigation disclosed the fact that administrative organization in the human service agencies must address the impact of the proposed structural changes upon the "street level bureaucrats" if those changes are to be effective. The extensive problems associated with social worker caseloads, social worker skill improvement, and foster parent training cannot be eliminated easily nor rapidly. Provisions must be made for systematic remediation of such problems.

Another issue that must be addressed with respect to the timing of this investigation is that of the implementation of the Surrogate Parent Provision of PL 94-142. At the time of data collection across both Kansas and Massachusetts, neither state had initiated implementation of this mandate. Thus, it is not known whether earlier implementation of the Surrogate Parent Provision would have affected the results of this study in terms of the accuracy and consistency of information-sharing between the social service agency, the foster parent and/or the Surrogate Parent.

Interpretative Nature of the Variables Investigated

The social worker and foster parent subjects in this investigation were questioned regarding eight LEA Team decisions made on behalf of their handicapped client/foster child. Inquiries made of social workers and foster parents did not necessitate their having to respond on the basis of memory alone. On all but one variable (program placement) subjects were free to use the IEP or other LEA Team documents in order to assist them in their responding. They were also free to consult their own files or records. Nevertheless, the information on which

the subjects were questioned may have been highly interpretive, given the general functioning of LEA Teams during staffings. For example, the research literature documented the fact that parent participation in LEA Team staffings is less than that of a full team member. Parents frequently function as information-gatherers or as passive observers to a process in which professionals engage in educational jargon or technical language. The extent to which parents fully grasp the technical language used in formulating such IEP components as goals, objectives, rationale for eligibility, etc., frequently depends upon their familiarity with the technical language, or the extent to which the Team leader makes a concerted effort to "translate" the technical information. The variability of parental familiarity with technical language, the variability of IEP Team function, and the compounding effects of both of these factors were not under experimental control in this investigation. Thus, some social worker or foster parent subjects may have possessed familiarity with technical language used in the staffings, others may not. Some may have lacked such expertise, but their deficits in this respect may have been mitigated by careful explanations made by the Team leader. Still others may have lacked both expertise and team assistance. In brief, the measurement of accuracy and inaccuracy, agreement and disagreement utilized in this study could not control for this within-group variability.

It should be noted that the results obtained from the comparison of foster cases under Condition 4 (both representatives involved) and natural parent cases under Condition 5 were indeed controlled for Team variability.

The investigator matched the natural parent control cases according to the variable of LEA Team from which the foster cases under Condition 4

were drawn. That is, the LEA Teams that conducted the staffings for cases under both conditions were identical. However, the investigator had no way of providing control for the factor of parental expertise in dealing with technical language.

Despite the fact that only partial control was possible for the within-group variability, the demographic data obtained on the handicapped foster children, social worker and foster parent subjects provide ample documentation for inferring that the disagreement between representatives, and the inaccuracy of the representatives' responses with respect to the eight LEA Team decisions may well have been related to problems associated with the foster care system.

CONCLUSIONS/SUMMARY

The findings obtained in this investigation have serious implications for the special education representation of handicapped children in foster care. First, the sample of children examined in this study were found to be older than the norm for foster children, and more seriously handicapped than is usual in a sample of handicapped children. Furthermore, these children had experienced numerous re-placements from one foster home to another. The interaction of all of these factors places these children at serious risk for inconsistency in the transmittal of information that is vital for their special education needs to be met. Unless consistency can be insured for these subjects, and for other handicapped foster children whose personal and foster placement histories are similar to those of the subjects, it can be inferred that handicapped children in foster care have a limited degree of

informed consent being rendered on their behalf for special education purposes.

It should be stated that the findings of this investigation do not constitute an indictment against foster parents of handicapped children. The lack of agreement between social worker and foster parent, together with the lack of accuracy of both representatives as found in this study reflect a larger problem. This investigation did not address the day-to-day care and management of the handicapped foster children subjects, and it may well be that these children's daily care and maintenance are far greater than would be afforded them in an institutional setting. Nevertheless, the study did document the serious breakdown in transmittal of information that occurred as the handicapped foster children moved from one placement to another and as their social worker was constantly replaced by a new case worker. Unless SEAs and LEAs that are administering the Surrogate Parent Programs across the states insure thorough and consistent transmittal of information, the Surrogate Parent Provision of PL 94-142 may run a high risk of perpetuating the same inconsistency that has been documented in this study.

Second, the caseloads and general working conditions of the social worker subjects in this investigation were extreme in both quality and quantity. The demands made upon these subjects were found to be prohibitive of quality social work service delivery to foster care clients. Given these findings, the prognosis for improved working conditions is contingent upon the investment that is made by social service agencies in insuring accountable, quality service delivery. Such investment requires professional expertise and funding.

At the present time, both state and federal governmental interest in making such an investment would appear to be questionable, at best. Without state and federal investment in making the social welfare system work efficiently and effectively for clients, the working conditions disclosed in this investigation are likely to be perpetuated. This will have a serious impact upon the lives of handicapped foster children who desperately need consistency and quality advocacy for their general and educational well-being.

Third, the foster parent demographic data obtained in this investigation documented the lack of professional support afforded foster parent subjects by the social service agencies. The educational and professional preparation that is required of foster parents in meeting the many needs of their handicapped foster children must be provided foster parents if they are to be successful in their foster parenting. The data revealed that foster parent request ranked first among the reasons for subsequent removal of the handicapped children subjects from the foster home. Unless foster parents are trained and provided consistent support, the probability is high that they will continue to request removal of more difficult-to-manage foster children from their homes. This trend would have even more severe effects upon the lives of handicapped foster children than would the frequent turnover of social workers, since change in foster parent involves a total re-arrangement of a child's life.

Fourth, the results of the quasi-experimental analyses suggest that a high frequency of disagreement existed between social worker and foster parent responses on numerous variables. The

accuracy of social worker and foster parent responses was low in terms of these representatives' ability to evidence understanding of the eight LEA Team decisions that had been made on behalf of the handicapped foster children whom they represented.

Therefore, the findings of this research investigation suggest that handicapped children in foster care are at a distinct disadvantage in terms of their special education representation compared to handicapped children in their own family units. Likewise, the findings of this study suggest that handicapped children are at a distinct disadvantage in terms of their general foster care as compared to non-handicapped children in foster care. As a group, these children were discovered to be without the level of recourse found in groups of handicapped children and in groups of non-handicapped foster children. The level of informed consent being rendered on their behalf under PL 94-142 is, therefore, seriously questionable. Unless the factors identified in this research as problematic are addressed and remediated, handicapped children in foster care will in all likelihood continue to be, in Gruber's words, "adrift in foster care, destitute, abandoned, and betrayed."

IMPLICATIONS FOR FUTURE RESEARCH

A basic question underlying this research investigation was, "What is the effectiveness of multiple representation of handicapped children in foster care for insuring informed consent on behalf of this population of children?" Since completion of data collection, Kansas and Massachusetts have initiated implementation of the Surrogate Parent Provision of PL 94-142. Thus, several issues pertaining to

multiple representation and the Surrogate Parent Provision lend themselves to further empirical investigation. These issues are listed and discussed below.

Administration of Surrogate Parent Programs

As was discussed in previous chapters, the implementation of Surrogate Parent Programs may be undertaken at either the SEA level or the LEA level. No empirical documentation exists at this time to ascertain whether one method of implementation is comparatively more effective than the other. Research is needed to determine what specific administrative, personal, and/or performance variables contribute to successful implementation of this provision.

Replication of the Study Utilizing Surrogate Parent and Social Worker Subjects

Replication of the present study might be conducted in order to determine whether Surrogate Parents or social workers maintain greater, lesser, or equal consistency of information with respect to the handicapped children's special education needs and services. In instances where current foster parents have been officially appointed as surrogate parent, replications would reveal whether the training that should accompany such appointment is actually taking place. Additionally, the effects of this training upon the surrogate/foster parent responses could be investigated. Finally, in those cases where the appointed surrogate parent is yet an additional representative over and above the social worker and foster parent, research might investigate the accuracy and agreement that exist across all three representatives of the handicapped foster children.

Social Welfare Practice With Handicapped Foster Children

Results obtained from this investigation revealed that the handicapped foster children subjects had experienced a high rate of re-placements from one foster home to another. Because consistency in the transmittal of information is critical for informed consent, the special education needs of these subjects would be best served if a single set of representatives could be maintained over time. The permanent placement of handicapped children in a single foster home would enhance consistency in the transmittal of information. Thus, it is important that the potential foster home be carefully investigated in order to provide a suitable match for foster family and handicapped foster child. Fanshel's study (1978) conducted a factor analysis of foster mothers' personality characteristics in order to predict successful match between handicapped child and foster home. Additional research is still needed, however, to identify variables other than personality characteristics that might contribute to the successful matching of handicapped foster children and foster parents.

Similarly, this investigation documented the high rate of social worker attrition that occurred among the social worker representatives of the handicapped children. Research is still needed to address the issues of incentives that might be provided social workers in order to lessen "burnout" and thus maintain consistency for the clients whom they represent, handicapped foster children.

Finally, research endeavors might be undertaken to examine social welfare accountability for service delivery to handicapped children in foster care. Since multiple services are provided to

these clients, the research might explore the factors that enhance coordination of multi-disciplinary personnel in providing services to a single handicapped child in foster care, to the foster child's foster family, and to the foster child's natural family.

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APPENDIX A
DEFINITION OF THE TERM "HANDICAPPED CHILDREN"

APPENDIX A

For purposes of this research, the term "handicapped children" shall be used in accordance with that term as defined in Sec. 121a.5 of Public Law 94-142, which reads:

Handicapped Children

Used in this part, the term "handicapped children" means those children evaluated in accordance with Sec. 121a.530-121a.534 as being mentally retarded, hard to hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, deaf-blind, multi-handicapped, or as having specific learning disabilities, who because of those impairments need special education and related services.

APPENDIX B
SURVEY INSTRUMENTS

PRELIMINARY INFORMATION FORM

FOR SOCIAL WORKERS

Date: _____

Check one: (1) SW; (2) FP; (3) NP CONTROL GROUP MOTHER;
(4) NP CONTROL GROUP FATHER

RESEARCH QUESTION #1

- (1) Total number of SPED cases assigned: _____
- (2) Number of cases Condition A (N-N): _____
- (3) Number of cases Condition B (N-I): _____
- (4) Number of cases Condition C (I-N): _____
- (5) Number of cases Condition D (I-I): _____
- (6) This is a case Condition E (I-I): _____ (Check)

CRITERIA FOR INVOLVEMENT: Attended the CORE/PLACEMENT staffing AND
the IEP staffing.

EXCLUDED IN THIS DEFINITION: Attended either the CORE/PLACEMENT
staffing or the IEP, but did not attend
BOTH staffings.

INTERVIEWER CHECK OFF: SW INTERVIEW

SW NAME: _____

AGENCY: _____

CASE NUMBER: _____

FREQUENCY COUNT: "I" FOR CORE BUT NOT FOR IEP: _____

"I" FOR IEP BUT NOT FOR CORE: _____

INTERVIEWER CHECK OFF: NP CONTROL GROUP INTERVIEW

FREQUENCY COUNT: "I" FOR CORE BUT NOT FOR IEP: _____

"I" FOR IEP BUT NOT FOR CORE: _____

LEA: _____ (For NP CONTROL GROUP ONLY)

INTERVIEW FORM
FOR SOCIAL WORKER

ETHNIC CODE FOR HANDICAPPED CHILD

Circle one:

(A) Asian; (B) Black; (C) Caucasian; (H) Hispanic/Spanish-speaking;
(NA) Native American

IEP's PRESENT

Total number of SPED Cases: _____

Total number of SPED Cases on which IEP is contained in SW File: _____

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

DATE: _____ # OF INTERVIEW: _____
INTERVIEWER: _____ CONDITION: (CIRCLE ONE) A, B, C, D
AGENCY (CIRCLE ONE) MDPW, NEHLW, MMH, SRS ()
SOCIAL WORKER: _____
REASON FOR N: SWN: _____
FPN: _____
NA: CONDITION = _____

Child's sex: M F
Child's D.O.B.: _____
Age of child at time of interview: _____
LEA: _____
Date of first foster placement: _____
Date(s) of subsequent foster placement(s): _____

Main reason for initial foster placement: _____

Main reason for subsequent foster placement(s): (1) _____
_____ (2) _____ (3) _____
_____ (4) _____ (5) _____

For Social Worker Interview Only

SW Professional Degree: _____
Length of time employed at present job: _____
of cases presently assigned: _____. Is this # typical _____.
of cases presently open involving handicapped children: _____

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

Date of last contact with clients in this case: _____.

of SW assigned to this case since first foster placement: _____.

Type of contact: (1) Home visit; (2) Phone call, SW initiated;
(3) Phone call, FP initiated; (4) Letter, SW
initiated; (5) Letter, FP initiated; (6) Other -
specify: _____.

For Foster Parent Interview Only

Age: _____.

How many foster children have you parented other than this child: ____.

What was your highest level of education: _____.

Do you presently have any of your own children living with you:

(1) YES (2) NO (State ages): _____.

How long have you lived in your present location: _____.

Did your former location fall within the same school district as the
school district your foster child now attends? (1) YES (2) NO

Have any of your previous foster children been handicapped?

(1) YES (2) NO

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

Who is responsible for representing this child for special education purposes? _____

- 1) Is this the first school year in which this child has been enrolled in a special education program?
(1) YES (2) NO
- 2) If "NO," when was the last annual review meeting held regarding this child's special education placement/programming? (Date) _____
- 3) Did the local school district (Core Team) notify YOU of the annual review staffing?
(1) YES (2) NO
- 4) Did YOU attend the last annual review staffing?
(1) YES (2) NO
- 5) Did the Social Worker/Foster Parent (Circle one) attend?
(1) YES (2) NO

- 1) Who gave written consent for this child to be placed initially in special education programs?
(1) Present Social Worker
(2) Present Foster Parent
(3) Former Social Worker
(4) Former Foster Parent
(5) Other: _____
- 2) Who gave written consent for continuation in special education programs at the time of the last annual review?
(1) Present Social Worker
(2) Present Foster Parent
(3) Former Social Worker
(4) Former Foster Parent
(5) Other: _____
- 3) Did the person who gave written consent for placement attend the initial placement staffing?
(1) YES (2) NO

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

- 4) Did the person who gave written consent for continuation at the time of the last review staffing attend the staffing?
(1) YES (2) NO

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

I. CLASSIFICATION

1) According to the school district Team (Core), what is the child's major handicapping condition?

2) According to the school district Team (Core), does this child possess additional or secondary handicapping conditions?

(1) YES (2) NO

If "YES," what are these handicapping conditions?

II. ELIGIBILITY

1) According to the school district Team (Core,) why is this child eligible for special education services?

III. IEP GOALS/OBJECTIVES

According to the school district Team (Core), what are the goals/objectives that have been established for this child in the Individual Education Plan?

(A) ACADEMIC/COGNITIVE:

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

(B) SOCIAL:

(C) MOTOR:

(D) SELF-HELP:

(E) BEHAVIORAL/MANAGEMENT:

(F) VOCATIONAL:

(G) SPEECH/LANGUAGE:

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

(H) SPECIALIZED/ADAPTIVE SKILLS:

IV. IEP GOALS/OBJECTIVES, INTERPRETATION

Using the goals and objectives that you have just given, please tell us what you understand each of the goals/objectives to mean:

(A) ACADEMIC/COGNITIVE:

(B) SOCIAL:

(C) MOTOR:

(D) SELF-HELP:

(E) BEHAVIORAL/MANAGEMENT:

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

(F) VOCATIONAL:

(G) SPEECH/LANGUAGE:

(H) SPECIALIZED/ADAPTIVE SKILLS:

V. INTENSITY OF SERVICES:

According to the school district Team (Core), what are the special education services/programs that this child requires?

(A) EDUCATIONAL/INSTRUCTIONAL:

(B) MANAGEMENT:

(C) SPECIALIZED MATERIALS/EQUIPMENT:

SURVEY INSTRUMENT - SOCIAL WORKER/FOSTER PARENT

(cont.)

(D) TRANSPORTATION:

According to the school district Team (Core), who will deliver these services? How often? For how long?

VI. PROGRAM PLACEMENT:

According to the school district Team (Core), what type of special education placement best meets the needs of this child?

SURVEY INSTRUMENT - NP CONTROL GROUP

Date: _____ LEA (n/N): _____

Interviewer: _____ Condition: E CONTROL-NP MOTHER _____
E CONTROL-NP FATHER _____

Child's sex: M F

Child's D.O.B.: _____.

Age of child at time of interview: _____.

Age of parent at time of interview: _____.

Parent's D.O.B.: _____.

How many children do you have other than this child: _____.

Are any of your other children enrolled in special education:

(1) YES (2) NO

If so, how many: _____.

What is your highest level of education: _____.

How long have you lived in your present location: _____.

Did your former location fall within the same school district as the school district your child now attends: (1) YES (2) NO

Who is responsible for representing this child for special education purposes? _____

SURVEY INSTRUMENT - NP CONTROL GROUP

(cont.)

- 1) Is this the first school year in which this child has been enrolled in a special education program?
(1) YES (2) NO
- 2) If "NO," when was the last annual review meeting held regarding this child's special education placement/programming?
(Date) _____.
- 3) Did the local school district (Core Team) notify YOU of the annual review staffing?
(1) YES (2) NO
- 4) Did YOU attend the last annual review staffing?
(1) YES (2) NO

- 1) Who gave written consent for this child to be placed initially in special education programs?
(1) I did
(2) My husband/wife did
(3) Both my husband/wife and I did
- 2) Who have written consent for continuation in special education programs at the time of the last annual review?
(1) I did
(2) My husband/wife did
(3) Both my husband/wife and I did
- 3) Did the person who gave written consent for placement attend the initial placement staffing?
(1) YES (2) NO
- 4) Did the person who gave written consent for continuation at the time of the last review staffing attend the staffing?
(1) YES (2) NO

SURVEY INSTRUMENT - NP CONTROL GROUP

(cont.)

I. CLASSIFICATION

- 1) According to the school district Team (Core,) what is the child's major handicapping condition?

- 2) According to the school district Team (Core), does this child possess additional or secondary handicapping conditions?

(1) YES (2) NO

If "YES", what are these handicapping conditions?

II. ELIGIBILITY

- 1) According to the school district Team (Core), why is this child eligible for special education services?

III. PROGRAM PLACEMENT

- 1) According to the school district Team (Core), what type of special education placement best meets the needs of this child?

SURVEY INSTRUMENT - NP CONTROL GROUP

(cont.)

IV. IEP GOALS/OBJECTIVES

According to the school district Team (Core), what are the goals/objectives that have been established for this child in the Individual Education Plan?

(A) ACADEMIC/COGNITIVE:

(B) SOCIAL:

(C) MOTOR:

(D) SELF-HELP:

(E) BEHAVIORAL/MANAGEMENT:

SURVEY INSTRUMENT - NP CONTROL GROUP

(cont.)

(F) VOCATIONAL:

(G) SPEECH/LANGUAGE:

(H) SPECIALIZED/ADAPTIVE SKILLS:

V. IEP GOALS/OBJECTIVES, INTERPRETATION

Using the goals and objectives that you have just given, please tell us what you understand each of the goals/objectives to mean:

(A) ACADEMIC/COGNITIVE:

(B) SOCIAL:

SURVEY INSTRUMENT - NP CONTROL GROUP

(cont.)

(C) MOTOR:

(D) SELF-HELP:

(E) BEHAVIORAL/MANAGEMENT:

(F) VOCATIONAL:

(G) SPEECH/LANGUAGE:

(H) SPECIALIZED/ADAPTIVE SKILLS:

SURVEY INSTRUMENT - NP CONTROL GROUP

(cont.)

V. INTENSITY OF SERVICES:

According to the school district Team (Core), what are the special education services/programs that this child requires?

(A) EDUCATIONAL/INSTRUCTIONAL:

(B) MANAGEMENT:

(C) SPECIALIZED MATERIALS/EQUIPMENT:

(D) TRANSPORTATION:

According to the school district Team (Core), who will deliver these services? How often? For how long?

APPENDIX C
LETTERS OF COOPERATION

Reply to:
Kansas City Area Office
Gateway Center - Suite 417
North and State Avenue
Kansas City, Kansas 66101
Phone: 371-6700-Ext. 352



STATE OF KANSAS

JOHN CARLIN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

ROBERT C. HARDER, SECRETARY

October 1, 1979

STATE OFFICE BUILDING
TOPEKA, KANSAS 66612

Ms. Jane P. McNally
Department of Special Education
377 Haworth Hall
University of Kansas
Lawrence, Kansas 66045

Dear Ms. McNally:

This letter of cooperation is written to you upon your request dated September 26, 1979.


Your letter was very explicit concerning the nature and purpose of the proposed research. This agency is willing to participate in the research project by granting you permission and cooperation for interviews with appropriate foster care social workers.

We believe that this research project is an important one if it will lead to improved knowledge of the problems of handicapped children and to the improvement and development of needed educational services.

We have been continually concerned about having these educational services available for foster care children.

Best wishes for obtaining the needed funding.

Sincerely yours,


(Ms.) Hilde E. Farley, ACSW, JLSW
Chief of Social Services

HEF:wal

cc: Mr. Wann
Dr. Broadnax
Ms. Snow

Attachment



STATE OF KANSAS

JOHN CARLIN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

October 3, 1979

STATE OFFICE BUILDING
TOPEKA, KANSAS 66612

HARDER, SECRETARY

Faith M. Spencer, Director
Topeka Area

Reply to: Topeka Area SRS
Box 1424
Topeka, KS 66601

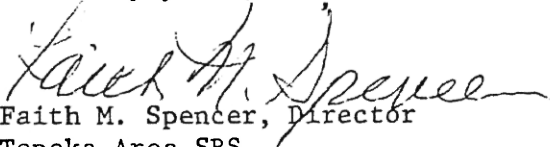
Ms. Jane McNally
The University of Kansas
School of Education
Haworth 377
Lawrence, Kansas 66045

Dear Ms. McNally:

As per telephone conversation and letter the Social and Rehabilitation Services Office in Topeka and Lawrence will be happy to work with you in your research project; however you need to know:

1. SRS does comply with federal and state confidentiality and privacy laws.
2. Staff time is extremely limited, so
3. Mr. Ted Mintun is the Chief of Social Services and you will need to work through him.

Sincerely yours,


Faith M. Spencer, Director
Topeka Area SRS

FMS:om

cc: Ted Mintun



STATE OF KANSAS

JOHN CARLIN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

HARDER, SECRETARY

STATE OFFICE BUILDING
TOPEKA, KANSAS 66612

M. A. Semonick
Area Director

Oct. 2, 1979

Parsons Area Office
Social & Rehab. Services
P. O. Box 914
Parsons, Ks. 67357

Jane P. McNally
Department of Special Education
377 Haworth Hall
The University of Kansas
Lawrence, Ks. 66045

Dear Ms. McNally:

I am responding to your request for assistance in a research project which you are submitting to the Bureau of Education for the Handicapped.

Our agency is most willing to participate in the project and you may be assured of full cooperation from our social service workers.

We support your efforts and feel the benefits derived will be extremely helpful to the Social Work profession.

Sincerely,

A handwritten signature in cursive script that reads "Robert A. Mikel".

Robert A. Mikel, LMSW ACSW
Social Service Chief

RAM:ra

To:
SRS Office
1157
Ks. 67401
913-833-8111

STATE OF KANSAS
John Carlin, Governor



STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

State Office Building
TOPEKA, KANSAS 66612
ROBERT C. HARDER, Secretary

October 3, 1979

Division of
Regional Rehabilitation

Re: Doctoral Project

Division of
Social Services

Division of
Mental Health
and Retardation

Ms. Jane P. McNally
Department of Special Education
377 Hayworth Hall
University of Kansas
Lawrence, Kansas 66045

Division of
Children and Youth

Dear Ms. McNally:

Division of
Administrative Services

I have received your letter of September 26, 1979 regarding your doctoral project. We agree that the project has potential significance in the delivery of service to handicapped children and the compliance to P.L. 94-142.

Alcohol and Drug Abuse
Section

The Salina area will cooperate with your research by agreeing for you to interview our placement service workers. I would request that prior to initiating your contract with our staff, you notify me of your schedule to be in the Salina agency.

State Office
Economic Opportunity

We look forward to assisting you with your project.

Sincerely,

Michael R. Cloutier

Michael R. Cloutier, M.S.W.
Chief of Social Services

MRC:EW



STATE OF KANSAS

JOHN CARLIN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

TC HARDER, SECRETARY

STATE OFFICE BUILDING
TOPEKA, KANSAS 66612

October 9, 1979

Jane P. McNally
Department of Special Education
377 Haworth Hall
The University of Kansas
Lawrence, Kansas 66045

Dear Ms. McNally:

We are in receipt of your letter dated 9-26-79 giving an explanation and overview of your research project relating to handicapped children who are in foster care.

You will have our cooperation to participate in this project, along with permission to interview the social workers assigned to the case.

I feel this is a worthwhile project and will be of special benefit to the field of Social Work, as well as to the field of Special Education.

Sincerely,

A handwritten signature in cursive script that reads "Velma A. Butler".

Velma A. Butler
Chief of Social Services

VAB:bz



STATE OF KANSAS

JOHN CARLIN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

October 5, 1979

ERIC HARDER, SECRETARY

STATE OFFICE BUILDING
TOPEKA, KANSAS 66612

Garden City Area Office
2701 North 11th
Garden City, Kansas 67843

Ms. Jane McNally
SPED - Haworth Hall 377
University of Kansas
Department of Special Education
Lawrence, Kansas

Dear Ms. McNally:

We have reviewed your proposal related to conducting **research interviews** with Social Workers within our agency. We are granting **permission** for the interviews and whatever specifics are necessary to **complete your** project.

Sincerely,

(Mrs.) Verlene Kunz
Social Services Chief

VK:1mm

APPENDIX D
PROCEDURES FOR INTERVIEWERS

PROCEDURES FOR CONDUCTING THE INTERVIEWS

STEP ONE: INTRODUCTION

Pull the "Overview of the Study" form. Go over major points of the study with SW/FP.

STEP TWO: VOLUNTARY PARTICIPATION

- (a) Pull "Voluntary Participation" form.
- (b) Have SW read the form.
- (c) Ask SW if he/she has any questions.
- (d) Obtain signature on Voluntary Participation form.

STEP THREE: IDENTIFICATION OF POTENTIAL CASES

SAY: Do you have a list of the cases that are presently assigned to you? If so, would you pull that list. Now, go down the list and jot down the cases that fit this description:

All cases in which the child is presently enrolled in special education programs, or in which the child is receiving special education services, or in which the child is considered to be a 766 case.

SAY: Now, all of these cases involve a child who is enrolled in or who is receiving special education under 766, is that correct?

- (a) Take a count of these cases.
- (b) Pull Research Question #1 form.
- (c) Enter this count under: Total number of SPED cases assigned, on the form.

STEP FOUR: SORTING OF CASES

SAY: Now we need to break these cases down into 4 different groups. Would you check the files one by one as we go along so that we can be sure we're getting the right kind of cases for each of the 4 groups.

- (a) Give the SW enough room to place the piles of files.
- (b) Pull Research Question #1 form. Take tally.

SAY: First, would you go through the files and pull those

cases in which YOU did not attend CORE staffing and the IEP staffing - AND - in which the present foster parent did NOT attend the two staffings.

We're looking for cases in which neither YOU nor the present foster parent attended the last CORE and IEP staffings on the child.

- (a) Let the SW know that there could be many reasons for not attending the staffing on a case; e.g., this case wasn't assigned to the SW, the former foster parent attended, the former social worker attended, etc.
- (b) List these cases as pile A.

SAY: Now, these are cases in which NEITHER you nor the present foster parent attended the last CORE and IEP staffings, is that correct?

Next, would you go through the files and pull those cases in which YOU did not attend the last CORE and IEP staffings, but the present foster parent DID attend both staffings.

- (a) List these cases as pile B.

SAY: Now, these are cases in which YOU did NOT attend the last CORE and IEP staffings, but the present foster parent DID attend, is that correct?

Next, would you go through the files and pull those cases in which you DID attend the last CORE and IEP staffings, but the present foster parent did NOT attend the staffings.

- (a) Let the SW know that there could be many reasons for the parent's not attending the staffing on a case; e.g., the child resided in another foster home at the time of the last staffings, etc.
- (b) List these cases as pile C.

SAY: Now, these cases are cases in which YOU attended the CORE and IEP staffings, but the present foster parent did NOT attend both staffings, is that correct?

Next, would you go through the files and pull those cases in which BOTH you and the present foster parent attended the CORE and IEP staffings.

(a) List these cases as pile D.

SAY: Now, these are the cases in which BOTH you and the present foster parent attended both the CORE and IEP staffings, is that correct?

Fine. Now we're ready to select the two cases we'll need for the study.

Take counts for Research Question #1.

(a) Take a count of the numbers of cases which fail to meet the "I" criterion because representative was involved in one or the other staffings, rather than for BOTH staffings.

Prioritize cases as follows:

FIRST: All cases of condition D.
SECOND: All cases of condition A.
THIRD: All cases of conditions B or C.

Ask SW to leave the piles in tact until the next step, obtaining the Team (CORE, IEP) reports.

STEP FIVE: OBTAINING THE TEAM (CORE, IEP) REPORTS

SAY: Now, in order to ask the next questions, we need to be sure that we have correct information on this child's special education services and programs. For this section, we need to have access to the Team (CORE) report and the IEP report. It's NOT necessary for us to have the child's identity revealed to us. We don't need names or addresses.

We would be happy to reimburse the Agency for a xerox copy of the report - or even pertinent sections of the report - that are necessary for us to do the survey. If you would make a copy of the reports for us, and then ink out all the names and identifiers, that would be fine for our purposes. As far as we are concerned, we would PREFER to deal with anonymous data. If you would like to handle this in any other way, we'd be happy to do so. The important thing for our purposes is that we have documented correct information so that we can score the responses on this questionnaire.

- (a) If you obtain the inked out report, write SW name and case # on it.
- (b) If you obtain "cut and paste" portion, BE SURE that EACH portion is identified with SW name, date, agency and case # on it.
- (c) Pull "Report Awareness" form.

STEP SIX: SOCIAL WORK INTERVIEW

SAY: Now, I'm going to begin the interview itself. I'll be asking you several different types of questions. I don't want ANY names. For the purposes of this study, there will be times when it will be necessary for you to look at information in the file. At other times, we won't be looking for information contained in the file.

- (a) Demographic: "Reason for N" - if case is Conditions A, B or C there is non-involvement of one of both parties. List reason WHY.

SAY: What was the reason that you did not attend IEP staffings on this case?

- (b) Social Worker Interview Only:

SAY: These next questions are to help us get a better picture of the demands of your job.

- (c) Research Question #2: If SW has difficulty answering -

SAY: Who is responsible to attend the CORE and IEP staffings on this child in order to give permission for special education services?

- (d) Probe Questions for determining actual representation:

SAY: These next questions are to help us get a better picture of the people with whom the school districts have been dealing on this case.

- (e) Probe Question #5: Circle the person who is the ALTERNATE representative, NOT the person being interviewed. STOP****
- (f) **** Skip to IEP Goals/Objectives, p. 6. Fill in

- goals/objectives.
(g) Pull "Quality of IEP Report" form.

SAY: Now, I need to ask you several questions to see how well the school district has informed you of this child's special education problems. For the next TWO questions, you can refer to any information in the files to provide the answers.

(h) Ask Classification questions.

(i) Eligibility Question -

SAY: Now, I need to find out whether the information the school district provided was sufficient to help you know the educational needs of this child.

(i) Ask Eligibility Question. ***TAPE RECORD THIS ANSWER***
If SW has trouble with this -

SAY: The Team gave the child a disability label (MR, LD, Multiply Handicapped, etc.), because the child was eligible for special education services. WHY was the child eligible for services?

DO NOT DO ADDITIONAL PROMPTING IF THIS DOESN'T SUFFICE.

SAY: Now, we'll go to questions on the Goals and Objectives from the IEP that we copied down a few minutes ago. Now we will need to know whether the school district provided sufficient information to help you understand the special needs of the child.

- (j) Ask IEP Goals/Objectives Interpretation Questions.
(k) Pull "Guidelines for IEP Interpretation" form.
(l) *****RECORD THIS ANSWER*****
(m) Intensity of Services:

SAY: The next questions we need to ask will give us a better picture of how well the school district provided information about the specifics of the child's special education services. ***RECORD THESE RESPONSES***

(n) Ask Intensity of Services questions, A-D ONLY.

SAY: Now, we need to go back over those services and find out who will deliver those services to the child.

(o) Ask "who will deliver these services?"

SAY: Now, we need to find out how often the child will receive those services.

(p) Ask "how often will the child receive _____"

SAY: Now, we need to find out for how long the child will receive those services.

(q) Ask, "When the child receives _____ instruction, for how long a period of time does the (Professional) work with him?"

SAY: This is the last question of the interview.

(r) Ask Program Placement Question.
(Look for administrative model - e.g., self-contained; resource room; itinerant; work-study, etc.).

STEP SEVEN: COMPLETION OF CASE IDENTIFICATION FORM

SAY: Because this interview involves anonymous data, it's important that we have some way of tracking down the case in the event that something needs to be added or clarified at a later date. We have a form which will be kept here by the Agency, which will identify the case to YOUR workers only. This was the (FIRST, SECOND) case we used here, so we identify the case by number. Would you write the name of the case on the appropriate line so that if we have to contact you later, you'd be able to identify which case we used for this study. I'm not interested in knowing the name, and I'll be happy to move away while you write the name of the case.

Would you please do the same for a second copy which the Director will hold in his/her files as a backup.

FOR SECOND CASE, REPEAT PROCESS FROM STEP SIX ONWARD

STEP EIGHT: FOSTER PARENT INTERVIEW PREPARATION

SAY: From this point on, we have all the information we need from you. At this point, we need to ask the same questions of the foster parent. As I mentioned earlier, we DON'T want the identities of the parties revealed to us. There are several ways that the Agency has agreed would be acceptable for us to obtain the answers from the foster parent.

The first way would be for me to step out of the room while you place the call to the foster parent, indicating that you've just participated in a study being conducted by the University of Kansas, with which the Agency has agreed to cooperate. If the foster parent would be willing to participate, the interview would be shorter than yours, since we already have obtained much of the factual information. I'd then come back into the room, obtain a statement of voluntary participation from the foster parent and you would witness the verbal statement from the foster parent. A witness is necessary to document the fact that an anonymous person has really agreed to participate. Then we'd conduct the interview and finish our work with you.

(a) If this isn't agreeable, go to BACKUP #1.

SAY: Another way of obtaining the interview would be for YOU to conduct the interview with the foster parent while I step out of the room. While this is agreeable to the agency, we ARE aware of the fact that you need to get back to your work, and we would prefer NOT to have another person do our work for us. Another problem with this way of obtaining the information is the fact that our interviewers have been trained to run through the interview process to make it as brief as possible. If this is the only way that is agreeable to you, we'd see it as a second-best way of obtaining our data.

IF: Foster parent is not home when either interviewer or SW places call -

SAY: It's very important for us to reach this foster parent, especially because we've used so much time in getting the first half of the data from you. We'd depend on YOU to place the initial call for us. Can we reschedule within the next few days to get the second half of the data? Otherwise, the first half that we have just obtained from you is worthless to us.

- (a) Reschedule - either later in the day or within the next two days.

IF: Foster parent interview must be mailed, follow mailing procedures.

STEP NINE: FOSTER PARENT INTERVIEW

This is conducted exactly as the SW interview, with the exception of the places which are starred.

TAPE RECORDINGS are not possible over the phone. Copy foster parent responses VERBATIM.

APPENDIX E
WRITTEN OVERVIEW DESCRIPTION OF THE STUDY

OVERVIEW OF THE STUDY

The University of Kansas, Department of Special Education, is presently doing a research study to investigate who is representing handicapped children in foster care. The type of representation that is of particular interest for this study is representation for special education services which the child is presently receiving.

In recent years, national law has established specific guidelines and procedures that school districts must follow in order to insure that the rights of handicapped children be represented in terms of the child's right to an education. Among the many guidelines and changes that have been established is permission for persons other than the natural parent to represent the child, to make decisions regarding the child's education.

What this study will attempt to do will be to find out how carefully school districts have been sharing information with social workers and foster parents of handicapped children in foster care. Because many states, including Massachusetts and Kansas, have given the foster parent permission to consent to special education services on behalf of the handicapped foster children in their care, this study will ask routine questions regarding decisions that the IEP (Core) Team has made regarding special education services to the child. The study will investigate with whom the school districts have been dealing regarding handicapped children in foster care - the social worker, the foster parent or both representatives.

In essence, this study will involve interviewing social workers in person and foster parents, either by phone call initiated by the social worker or by mailed interview. The identities of the foster child and of the foster parent are NOT to be revealed to the interviewer. Such information is NOT necessary for the purposes of this study. Furthermore, the identity of the social worker is for coding purposes only, and social worker identity will NOT be associated with the results of the study. Thus, all information given regarding specific cases will be given totally anonymously, and the identity of the social worker will be strictly confidential.

APPENDIX F

AGREEMENT OF VOLUNTARY PARTICIPATION



THE UNIVERSITY OF KANSAS

School of Education
Bailey Hall
Lawrence, Kansas 66045

DATE: _____

Dear _____

The University of Kansas and the Department of Special Education support the practice of protection for human subjects participating in research. The following information is provided so that you can decide whether you wish to participate in the present study. You should be aware that even if you agree to participate you are free to withdraw at any time.

This study is concerned with examining representation of handicapped children who are in foster care, specifically in terms of representation for these children's right to a free, appropriate, public education. The study is an attempt to gather information from the two most frequent representatives of foster children, the social worker and the foster parent.

You will be asked to take part in an interview (approximately 15-20 minutes in length) regarding handicapped children in foster care. You will be asked to supply information regarding handicapped foster children on your present case list. This information will in no way be associated with the child; the child's identity will not be revealed. Information which you will be asked to supply fall under the following categories: demographic information, (age, sex, date of birth, number of foster placements, etc.), demographic information on the social worker (professional degree, number of cases presently assigned, number of handicapped children presently assigned, etc.), information regarding adult representation of the child for special education services (who was notified by the local school district, who participated in the various special education processes necessary in order for the child to receive special education services, etc.). This information will be identified only by code numbers and will not be reported with any facts that might reveal the identity of either the child in question or with you, as the social worker assigned to the case.

Your participation is solicited, but is strictly voluntary. Do not hesitate to ask any questions about the study. Be assured that

your name will not be associated in any way with the results of the study. Your cooperation is very much appreciated.

Jane P. McNally

Signature of Person agreeing to participate in the study

APPENDIX G
RULES FOR SCORING

RULES FOR SCORING
SOCIAL WORKER/FOSTER PARENT/NATURAL PARENT RESPONSES
TO SURVEY INSTRUMENTS

I. CLASSIFICATION

General Guidelines

1. Accept any response that is identical to the classification category stated in the child's IEP, e.g. "Mental Retardation," "Emotional Disturbance," etc.
2. Accept any response that reflects a functional definition of the disability category stated in the child's IEP, e.g. "He has a problem seeing," would be accepted for "Visually Impaired," or "He acts out in school, at home, everywhere he goes he acts out," for "Emotional Disturbance."
3. Do not accept any response that is ambiguous or that could apply to multiple disability categories, e.g., do not accept "Slow Learner," since under specific circumstances this label could apply to Learning Disabilities, Mental Retardation, or to neither.

II. ELIGIBILITY

General Guidelines

1. Accept any response that indicates the child's inability to function full time in the regular classroom due to:
 - (a) Specialized instructional needs
 - (b) Specialized materials needs
 - (c) Smaller teacher-pupil ratio
2. Do not accept any response that merely reiterates the disability category, e.g. "He's eligible for special education because he's learning disabled."

III. PROGRAM PLACEMENT

General Guidelines

- 3.1 FOR KANSAS SAMPLE ONLY: Accept any response that indicates an understanding of service delivery administrative organization, e.g. "He spends two hours a day in the special education classroom," or "He spends part of the day in the special education class and part of the day in the regular class."
- 3.2 FOR MASSACHUSETTS SAMPLE ONLY: Accept any response that reflects

SCORING RULES, (cont.)

the 766 protocol determined by the Core Team, e.g. accept "He spends more than half of his time in the special class, and the rest of the time in the regular class," for the 60 percent protocol. Do not accept "He spends more than half of his time in the special class," for the protocol for substantially separate service delivery.

Do not accept any response that is clearly inconsistent with the protocol rankings, e.g. do not accept, "He spends a fair amount of time with the special education teacher," since this response does not quantify "fair amount" nor does it specify whether time spent with the special education teacher was within a special class or whether time spent with the special teacher was on an itinerant basis.

IV. IEP GOALS

General Guidelines

1. If IEP does not contain Goal statements, discard the variable for scoring purposes, together with any social worker/foster parent or natural father/natural mother responses for that variable. Score the variable as: 0/0.
2. Accept any response that approximates the essence of the Goal statement, e.g. accept, "This means that they want him to learn more reading words that he can recognize without having to sound them all out," for, "Increase number of sight words by 30%."
3. Do not accept any response that merely identifies the domain of instruction or service delivery, e.g., do not accept, "They want him to read better," for, "Increase number of sight words by 30%."

V. IEP OBJECTIVES

General Guidelines

1. If IEP does not contain Objectives statements, discard the variable for scoring purposes, together with any social worker/foster parent or natural father/natural mother responses for that variable. Score the variable as: 0/0.
2. Accept any response that approximates the essence of the Objective statement, e.g. accept, "This means that they'll work with him using flash cards to bring up his sight words," for, "Flash card drill for increasing rate of sight word identification."
3. Do not accept global responses that indicate that the child will receive specialized services, e.g., do not accept, "They're going to give him extra help in that," for, "Flash card drill for increasing rate of sight word identification."

SCORING RULES, (cont.)

VI. RESPONSIBILITY FOR SERVICE DELIVERY

General Guidelines

1. Accept any response that identifies the professional by name, e.g., accept, "Mrs. Smith."
2. Accept any response that identifies the professional's teaching domain, e.g., accept, "The L.D. teacher," or, accept, "The regular classroom teacher."
3. Do not accept any response that is global, e.g., "The school district is responsible for delivering these services," nor, "The Special Education Cooperative (Collaborative) is responsible for getting these services to him."

VII. FREQUENCY OF SERVICE DELIVERY

General Guidelines

1. Accept any response that quantifies the number of times per week that the service is delivered, e.g. accept, "He goes to the special education room every morning," or, accept, "Five times a week." Response must coincide with statement on the IEP.
2. Do not accept any response that contradicts the quantified statement concerning frequency of service delivery found in the IEP.

VIII. DURATION OF SERVICE DELIVERY

General Guidelines

1. Accept any response that quantifies the length of time that the child receives special education services when these are delivered, e.g., accept, "About a half hour each time," or, accept, "Thirty minutes per session."
2. Do not accept any response that contradicts the quantified statement concerning frequency of service delivery found in the IEP.

APPENDIX H
RELIABILITY PERCENTAGES FOR SCORING

Mean and Range Reliability Percentages Obtained by Scorers
for Social Worker, Foster Parent, and Natural Parent
Responses Concerning the LEA Team Decisions

LEA Team Decision	Scorer 1		Scorer 2		Total *	
	Mean %	Range %	Mean %	Range %	Mean %	Range %
Classification	91.00	86.50 100.00	100.00	100.00 100.00	93.50	86.50 100.00
Eligibility	100.00	100.00 100.00	100.00	100.00 100.00	100.00	100.00 100.00
Program Placement	100.00	100.00 100.00	100.00	100.00 100.00	100.00	100.00 100.00
IEP Goals	100.00	100.00 100.00	100.00	100.00 100.00	100.00	100.00 100.00
IEP Objectives	100.00	100.00 100.00	100.00	100.00 100.00	100.00	100.00 100.00
Responsibility for Service Delivery	100.00	100.00 100.00	100.00	100.00 100.00	100.00	100.00 100.00
Frequency of Service Delivery	99.80	97.50 100.00	100.00	100.00 100.00	98.65	97.50 100.00
Duration of Service Delivery	100.00	100.00 100.00	100.00	100.00 100.00	100.00	100.00 100.00
Total	98.00	98.00 100.00	100.00	100.00 100.00	99.02	98.00 100.00

*N=240