

Abstracts:
Problembelastung von Pflegekindern
(gesundheitliche, psychiatrische und psychologische Probleme)

2006 – 1997

Review

AN: 2005-04910-007

TI: Psychosocial Treatment of Children in Foster Care: A Review.

AU: Racusin,-Robert; Maerlender,-Arthur-C-Jr.; Sengupta,-Anjana; Isquith,-Peter-K; Straus,-Martha-B

SO: Community-Mental-Health-Journal. Vol 41(2) Apr 2005, 199-221.

IS: 0010-3853

PT: Journal; Peer-Reviewed-Journal

AB: A substantial number of children in foster care exhibit psychiatric difficulties. Recent epidemiological and historical trends in foster care, clinical findings about the adjustment of children in foster care and adult outcomes are reviewed, followed by a description of current approaches to treatment and extant empirical support. Available interventions for these children can be categorized as either symptom-focused or systemic, with empirical support for specific methods ranging from scant to substantial. Even with treatment, behavioral and emotional problems often persist into adulthood resulting in poor functional outcomes. We suggest that self-regulation may be an important mediating factor in the appearance of emotional and behavioral disturbance in these children. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

→ **auch bei "Therapeutische oder präventive Interventionen"**

AN: 2001-16348-001

TI: Foster family characteristics and behavioral and emotional problems of foster children: A narrative review.

AU: Orme,-John-G; Buehler,-Cheryl

SO: Family-Relations:-Interdisciplinary-Journal-of-Applied-Family-Studies. Vol 50(1) Jan 2001, 3-15.

IS: 0197-6664

PT: Journal; Peer-Reviewed-Journal

AB: The purpose of this article is to review the literature on the foster family characteristics that are thought to contribute to the behavioral and emotional problems of foster children. The review is shaped by an understanding of the personal and familial factors associated with children's problem behaviors in the general population. These factors include parenting, the family home environment, family functioning, marital functioning, family demography, child temperament, parents' mental health, and social support. Limitations within the existing research on these foster family characteristics are noted, and suggestions for future research are provided. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 1997-03688-005

TI: Foster care: An update.

AU: Rosenfeld,-Alvin-A; Pilowsky,-Daniel-J; Fine,-Paul; Thorpe,-Marilyn; et-al

SO: Journal-of-the-American-Academy-of-Child-and-Adolescent-Psychiatry. Vol 36(4) Apr 1997, 448-457.

IS: 0890-8567

PT: Journal; Peer-Reviewed-Journal

AB: Provides an overview of the pediatric, developmental, and psychiatric needs of the 500,000 children now residing in the American foster care system. Child and adolescent psychiatrists, pediatricians, a child welfare researcher, a social worker, and a psychologist developed a consensus paper from their experience with child welfare and a review of the literature in their respective fields.

Being in foster care was found to be a defining experience in these children's lives. They are at risk in myriad ways, including being poor, having chronic health deficits, experiencing the trauma of abuse and neglect, and suffering from a full range of emotional challenges. Evolutionary developments in foster care such as therapeutic foster homes, kinship care, and changes in Medicaid funding will continue to alter the system. Foster children are a huge reservoir of unmet pediatric and psychiatric needs; research on them is spotty at best. Child and adolescent psychiatrists need to meet the challenges these youngsters present and advocate for them. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2005-12558-010

TI: Exploring Out-of-Home Placement as a Moderator of Help-Seeking Behavior Among Adolescents Who Are High Risk.

AU: Unrau,-Yvonne-A; Grinnell,-Richard-M-Jr.

SO: Research-on-Social-Work-Practice. Vol 15(6) Nov 2005, 516-530.

IS: 1049-7315

PT: Journal; Peer-Reviewed-Journal

AB: Objective: This study investigated foster or group care placement as a predictor of help-seeking behavior among adolescents who were at high risk for physical and mental health problems. Method: Data from the 1985 to 1986 wave of the Adolescent Health Care Evaluation Study were used to compare three groups of adolescents: (a) 136 that had experienced placement, (b) 136 that were randomly selected from the larger sample, and (c) 136 matched to the placement group on key variables. Results: Adolescents who experienced placement had more physical and mental health problems compared to the random and matched groups. However, foster or group care placement was associated with help-seeking behavior only for two problems: depression and conduct disorder. Conclusion: Understanding the impact of placement on help-seeking behavior 20 years ago fills a critical gap in the current literature and provides an anchor point for examining foster care policy and programming today. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2005-09534-001

TI: Need for and actual use of mental health service by adolescents in the child welfare system.

AU: Shin,-Sunny-Hyucksun

SO: Children-and-Youth-Services-Review. Vol 27(10) Oct 2005, 1071-1083.

IS: 0190-7409

PT: Journal; Peer-Reviewed-Journal

AB: Although foster youth are at increased risk of mental illness, little is known about need for and actual use of mental health services by adolescents in the child welfare system. Analyzing a random sample of 113 foster youth in a large Midwest state, the author found that foster youth experienced severe mental health problems such as depression, anxiety and loss of behavioral/emotional control. In this study, need for services, as measured by the presence of a mental health problem, was only partially related to mental health services received. Logistic regression analyses indicated that four factors including anxiety, child abuse history, poor psychological well-being, and time in care were significantly related to mental health service use. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

TI: Relationship Between Entry into Child Welfare and Mental Health Service Use.

AU: Leslie,-Laurel-K; Hurlburt,-Michael-S; James,-Sigrid; Landsverk,-John; Slymen,-Donald-J; Zhang,-Jinjin

SO: Psychiatric-Services. Vol 56(8) Aug 2005, 981-987.

IS: 1075-2730

PT: Journal; Peer-Reviewed-Journal

AB: Objective: This study examined the relationship between initiation of outpatient mental health service use and level of child welfare involvement. Methods: Three levels of child welfare involvement were examined: in-home care and no child welfare services beyond an initial investigation, in-home care and additional child welfare services, and placement in out-of-home care (foster care). Longitudinal data were collected for a subsample of children (N=3,592) aged two through 14 years who were enrolled in the National Survey of Child and Adolescent Well-Being, a nationally

representative sample of children undergoing investigation for abuse or neglect. Event history analysis was used to model relative risk of initiation of mental health service use over time. Results: Hazard functions revealed a large increase in onset of mental health services immediately after the time of the initial contact with child welfare, varying by level of child welfare involvement and leveling off by three months after the initial contact. The multivariate Cox proportional-hazards model indicated that compared with children who were placed in out-of-home care, those in in-home care who did not receive any further child welfare services were about one-third as likely to use mental health services and those in in-home care who received additional child welfare services were one-half as likely to use mental health services. Other covariates in the model predicted mental health service use, including being older, being Caucasian, having a history of maltreatment (specifically, physical abuse, physical neglect, or abandonment), being uninsured, and need for mental health services, as measured by the Child Behavior Checklist. Conclusions: Contact with child welfare functions as a gateway into mental health services for children in child welfare, even when need for such services is controlled for. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2005-07659-003

TI: Characteristics and Trajectories of Treatment Foster Care Youth.

AU: Hussey,-David-L; Guo,-Shenyang

SO: Child-Welfare. Vol 84(4) Jul-Aug 2005, 485-506.

IS: 0009-4021

PT: Journal; Peer-Reviewed-Journal

AB: Using cross-sectional analyses in conjunction with dynamic modeling (hierarchical linear modeling), the authors profiled 119 treatment foster care youth and constructed behavioral change trajectories for a subset of 97 children. Children generally showed improvements in internalizing and critical pathology problem domains but remained the same on measures of externalizing behaviors and total problem score. The number of previous out-of-home placements was positively associated with increased levels of psychiatric symptomatology and served as the most robust predictor for modeling treatment response trajectories across problem domains. Placement instability places the well-being of children at heightened risk, therefore, accurate assessment of child need and risk in relation to caregiver capacities is critical. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2005-07657-003

TI: Youths Living Away From Families in the US Mental Health System: Opportunities for Targeted Intervention.

AU: Pottick,-Kathleen-J; Warner,-Lynn-A; Yoder,-Kevin-A

SO: Journal-of-Behavioral-Health-Services-and-Research. Vol 32(3) Jul-Sep 2005, 264-281.

IS: 1094-3412

PT: Journal; Peer-Reviewed-Journal

AB: This study examines the clinical characteristics of youths who lived away from families at the time of admission to specialty mental health services, and investigates the association between type of nonfamily living situation and admission to residential versus outpatient programs. Of 3995 youths sampled from 1598 mental health programs in the United States, 14% lived away from their own families, either in foster care, group care settings, or correctional settings, or were emancipated. As a group, youths living away from families were more seriously emotionally disturbed and more likely to receive treatment in residential care programs. Youths who lived in foster care were more likely to be admitted to outpatient programs, while youths who lived in group care settings or correctional settings were more likely to be admitted to residential care programs, controlling on demographic and clinical characteristics. Targeting resources to enhance the availability and therapeutic capacity of foster care may facilitate community living, and decrease time spent in institutional settings. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2005-07217-003

TI: A comparison of mental health problems in kinship and nonkinship foster care.

AU: Holtan,-Amy; Ronning,-John-A; Handegard,-Bjorn-Helge; Sourander,-Andre

SO: European-Child-and-Adolescent-Psychiatry. Vol 14(4) Jul 2005, 200-207.

IS: 1018-8827

PT: Journal; Peer-Reviewed-Journal

AB: Objective: Knowledge of the emotional and behavioural problems of children in kinship foster care is scarce. No data on such problems in European countries have been published. This study compares child psychiatric problems and placement characteristics of children living in kinship and nonkinship foster care. Methods: A total of 214 children in kinship and nonkinship foster care, aged 4-13, participated in the study. The Child Behavioral Checklist (CBCL) was completed by their foster parents and demography and placement information was collected. Results: Of the nonkinship group, 51.8 % scored above the borderline on the CBCL Total Problem score, as did 35.8 % of the kinship group. The kinship group had fewer previous placements, were more often fostered within their local community and had more contact with their biological parents. Kinship foster parents had lower social status, in terms of educational level. Variables significantly related to high level of the CBCL Total problems score were male gender and location of foster home outside community of birth family. Positive outcome was significantly associated with placement within the child's own community, which in turn was related to kinship placement. Conclusions: Placement in kinship foster care should be considered as a viable possibility. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

→ auch bei „Vergleichende Studien“

→ auch bei „Besondere Formen der Pflege“

AN: 2005-06750-003

TI: The Physical, Developmental, and Mental Health Needs of Young Children in Child Welfare by Initial Placement Type.

AU: Leslie,-Laurel-K; Gordon,-Jeanne-N; Meneken,-Lee; Premji,-Kamila; Micheltore,-Katherine-L; Ganger,-William

SO: Journal-of-Developmental-and-Behavioral-Pediatrics. Vol 26(3) Jun 2005, 177-185.

IS: 0196-206X

PT: Journal; Peer-Reviewed-Journal

AB: The American Academy of Pediatrics recommends comprehensive assessments for children entering foster care. These children may be placed with biological parents, kin, or in nonrelative foster care. It is not known whether health-related needs differ by placement. Chart abstractions were conducted of child welfare and medical records of 1542 children, ages 3 months to 5 years 11 months, admitted to San Diego's sole emergency shelter/receiving facility from April 1, 1998, through June 30, 1999, for investigation of alleged maltreatment. Children were discharged to three placement types: biological parents (28.5%), kinship caregivers (28.4%), or nonrelative foster parents (43.1%). Overall, 86.7% of children studied demonstrated physical, developmental, or mental health needs, with more than half displaying two or more problems. More than half of the children had a "Suspect" score on the Denver-II; 70.3% of children with "Suspect" scores were found to have delay on a developmental evaluation. Almost one tenth of the sample were diagnosed with one or more mental health conditions. Few differences were found for physical, developmental, or mental health concerns by placement. Results suggest that young children placed with biological parents or in kinship care have similar needs to those of children placed with foster parents. This study confirms the importance of comprehensive assessments for young children removed from their homes, regardless of placement. It also illustrates a need for standardized assessment criteria, particularly for developmental and mental health status, and for collaborative care models for all young children entering the child welfare system, regardless of their placement following investigation. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-22523-002

TI: An exploration of the health and social wellbeing needs of looked after young people--a multi-method approach.

AU: Fleming,-Paul; Bamford,-David-R; McCaughley,-Niav

SO: Journal-of-Interprofessional-Care. Vol 19(1) Jan 2005, 35-49.

IS: 1356-1820

PT: Journal; Peer-Reviewed-Journal

AB: This study, which was undertaken in Northern Ireland, aimed to identify how the promotion of the health and social wellbeing of looked after young people could be enhanced using a four-stage triangulated research design employing qualitative and quantitative elements. Stage 1 sought to identify relevant health issues from a representative sample of case files and found low uptake of statutory medical assessments, relatively few physical health problems and higher levels of mental health and behavioural problems including self-esteem and self-image issues. Stage 2 sought to ascertain, through two focus groups, the views of those caring for looked after young people--foster

carers and residential social workers. Findings showed that both groups perceive themselves in a health promoting role with the main issues encountered being the need for support in issues such as sex education and access to sources of help and aids to health promotion. Stage 3 sought to listen to the needs and concerns of the young people and their parents through a series of semi-structured interviews. These revealed the need of parents for involvement with their child's care and identification of the social worker as holding primary responsibility for health. Young people had positive views of health, identified stressors and perceived that too much help was given in relation to health issues; social workers were preferred for discussion of sensitive subjects. It was concluded that the multiple needs of young people give excellent opportunities for the development of interdisciplinary working in the context of multi-sectoral involvement to support effective health promotion interventions. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2005-04308-006

TI: Correlates of the Randolph Attachment Disorder Questionnaire (RADQ) in a Sample of Children in Foster Placement.

AU: Cappelletty,-Gordon-G; Brown,-Melissa-Mackie; Shumate,-Sarah-E

SO: Child-and-Adolescent-Social-Work-Journal. Vol 22(1) Feb 2005, 71-84.

IS: 0738-0151

PT: Journal; Peer-Reviewed-Journal

AB: This study examined mental health and attachment problems in children in foster care. This study also obtained data concerning the validity of the Randolph Attachment Disorder Questionnaire (RADQ). Children were selected according to length of time in placement and age and screened for mental health symptoms using the Child Behavior Checklist and the RADQ. The findings showed that children in foster care have reported symptoms within the range typical of children not involved in foster care. The conclusion is that the RADQ has limited usefulness due to its lack of specificity with implications for treatment of children in foster care. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2005-04154-005

TI: Developmental, Cognitive, and Neuropsychological Functioning in Preschool-aged Foster Children: Associations with Prior Maltreatment and Placement History.

AU: Pears,-Katherine; Fisher,-Philip-A

SO: Journal-of-Developmental-and-Behavioral-Pediatrics. Vol 26(2) Apr 2005, 112-122.

IS: 0196-206X

PT: Journal; Peer-Reviewed-Journal

AB: Although young children in foster care are at high risk for developmental delays and subsequent academic, social, and behavioral difficulties, many do not receive services for delays. We sought to explicate the types of developmental delays observed in young children (ages 3-6 years) in foster care and how placement and maltreatment experiences for these children were associated with such delays. Physical growth, neuropsychological functioning, executive functioning, language, and general cognitive functioning were compared for a sample of 99 foster children and 54 nonmaltreated, same-aged children from comparable socioeconomic status backgrounds. The foster children showed developmental lags on measures of height, head circumference, visuospatial functioning, language, and general cognitive functioning. A history of neglect was negatively associated with functioning in a number of domains; surprisingly, the number of maltreatment types experienced was positively associated with functioning. Placement history was generally not associated with scores in the various developmental domains. We discuss the need to screen and evaluate preschoolers and possible methods for doing so. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-22221-011

TI: Prevalence of Psychiatric Disorders Among Older Youths in the Foster Care System.

AU: McMillen,-J.-Curtis; Zima,-Bonnie-T; Scott,-Lionel-D-Jr.; Auslander,-Wendy-F; Munson,-Michelle-R; Ollie,-Marcia-T; Spitznagel,-Edward-L

SO: Journal-of-the-American-Academy-of-Child-and-Adolescent-Psychiatry. Vol 44(1) Jan 2005, 88-95.

IS: 0890-8567

PT: Journal; Peer-Reviewed-Journal

AB: To estimate the lifetime and past year prevalence rates of major psychiatric disorders in a sample of older youths in the foster care system, to examine the timing of disorder onset and system entry, and to explore variations in past year prevalence rates. Using the Diagnostic Interview Schedule for DSM-IV, interviews were conducted with 373 17-year-old youths (90% of those eligible) in one state's foster care system between December 2001 and June 2003. Sixty-one percent of the youths qualified as having at least one psychiatric disorder during their lifetime; of these youths, 62% reported onset of their earliest disorder before entering the foster care system. In addition, 37% of youths met criteria for a psychiatric disorder in the past year. The number of types of maltreatment experienced was the most robust predictor of psychiatric disorder among several maltreatment variables. There were no differences in prevalence rates for youths in kinship care and those in nonkin foster families. Older youths in the foster care system have disproportionately high rates of lifetime and past year psychiatric disorders. Results support recommendations for initial and periodic mental health assessments for these youths and mechanisms to continue mental health services for young adults transitioning out of the foster care system. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-15559-005

TI: Vision Status Among Foster Children in NYC: A Research Note.

AU: Festinger,-Trudy; Duckman,-Robert-H

SO: Social-Work-in-Health-Care. Vol 38(4) 2004, 77-81.

IS: 0098-1389

PT: Journal; Peer-Reviewed-Journal

AB: A summary of the results of research on the vision status of foster children. Results indicate that the vision screenings being provided at mandated annual physical examinations are not sufficiently identifying children's vision dysfunctions. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-18611-007

TI: Reactive attachment disorder in maltreated toddlers.

AU: Zeanah,-Charles-H; Scheeringa,-Michael; Boris,-Neil-W; Heller,-Sherryl-S; Smyke,-Anna-T; Trapani,-Jennifer

SO: Child-Abuse-and-Neglect. Vol 28(8) Aug 2004, 877-888.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Objective: To determine if Reactive Attachment Disorder (RAD) can be reliably identified in maltreated toddlers in foster care, if the two types of RAD are independent, and to estimate the prevalence of RAD in these maltreated toddlers. Methods: Clinicians treating 94 maltreated toddlers in foster care were interviewed regarding signs of attachment disorder at intake in an intervention program. Results: Using categorical and continuous measures, both types of RAD can be reliably identified in maltreated toddlers. Both continuous scores and categorical diagnoses indicated that a substantial minority of maltreated young children do exhibit signs of attachment disorders sufficient to meet criteria in DSM-IV and ICD-10. The two types were moderately convergent and at times co-occurred in the same child. Prevalence of RAD in this high-risk sample was 38-40%. Indiscriminate/disinhibited RAD was identified in children with and without an attachment figure. Within this maltreated group, toddlers whose mothers had a history of psychiatric disturbance were more likely to be diagnosed with attachment disorders. Conclusions: RAD may be reliably identified in maltreated toddlers. Emotionally withdrawn/inhibited and indiscriminate/disinhibited types of RAD are not entirely independent. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-17755-005

TI: Using the Strengths and Difficulties Questionnaire (SDQ) multi-informant algorithm to screen looked-after children for psychiatric disorders.

AU: Goodman,-Robert; Ford,-Tasmin; Corbin,-Tania; Meltzer,-Howard

SO: European-Child-and-Adolescent-Psychiatry. Vol 13(Suppl2) 2004, II25-II31.

IS: 1018-8827

PT: Journal; Peer-Reviewed-Journal

AB: Background: Child psychiatric disorders are common among children in foster and residential care, but often go undetected and therefore untreated. Aims: To assess the Strengths and Difficulties

Questionnaire (SDQ) as a potential means for improving the detection of child psychiatric disorders in the community. Method: SDQ predictions and independent psychiatric diagnoses were compared in a community sample of 1,028 looked-after 5-17 year olds from a nationwide English survey. Results: Multi-informant SDQs (parents, teachers, older children) identified individuals with a psychiatric diagnosis with a specificity of 80% and a sensitivity of 85%. The SDQ prediction works best when SDQs have been completed by both carers and teachers. When it is only possible to have one adult informant, carers and teachers provide information of roughly equal predictive value. By contrast, self-reports by 11-17 year olds provide little extra information when there is already an adult informant. Conclusion: Using multi-informant SDQs as a regular screening measure for looked-after children could potentially increase the detection of child psychiatric disorders, thereby improving access to effective treatments. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

TI: Multimodal treatment for ADHD among youths in three medicaid subgroups: Disabled, foster care, and low income.

AU: dosReis,-Susan; Owens,-Pamela-L; Puccia,-Karen-B; Leaf,-Philip-J

SO: Psychiatric-Services. Vol 55(9) Sep 2004, 1041-1048.

IS: 1075-2730

PT: Journal; Peer-Reviewed-Journal

AB: Objective: This study compared the use of treatments for attention-deficit hyperactivity disorder (ADHD) among three distinct subpopulations of Medicaid-insured youths who have very different mental health needs and patterns of service use: those with federally documented disability, those in foster care, and those in families with low income. Methods: This one-year, cross-sectional study of community mental health services used administrative data. Individuals who were younger than 20 years, who were continuously enrolled in one Mid-Atlantic state Medicaid program, and who had two or more medical encounters associated with an ADHD diagnosis in 1998 were identified (N= 1,296). Measures of the use of mental health services were the number of different classes of psychopharmacologic medications, the psychopharmacologic regimen, and the combined use of pharmacotherapy and psychotherapy treatments (multimodal treatment). Results: Use of multiple psychopharmacologic agents was greater in the disabled and foster care groups compared with the low-income group. Significantly fewer mental health provider visits, but greater use of stimulant treatment only, were observed in the low-income group compared with the other groups. Youths in the disabled group were significantly more likely than youths in the low-income group, but not more likely than youths in the foster care group, to receive multimodal treatments. Children in foster care were significantly more likely than those in the other groups to use a substance abuse service. Conclusions: Among a cohort of Medicaid-enrolled youths with ADHD, co-existing psychiatric disorders and complex psychopharmacologic treatments were more common in the disabled and foster care groups than in the low-income group. Youths with disabilities were significantly more likely than youths in the low-income group to receive multimodal treatment. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

→ auch bei "Vergleichende Studien"

AN: 2004-16142-008

TI: Use of Mental Health Services Among Older Youths in Foster Care.

AU: McMillen,-J.-Curtis; Scott,-Lionel-D; Zima,-Bonnie-T; Ollie,-Marcia-T; Munson,-Michelle-R; Spitznagel,-Edward

SO: Psychiatric-Services. Vol 55(7) Jul 2004, 811-817.

IS: 1075-2730

PT: Journal; Peer-Reviewed-Journal

AB: Objective: This study examined lifetime, 12-month, and current mental health service use among older youths in the foster care system and examined variations in mental health care by race, gender, maltreatment history, living situation, and geographic region. Method: The Service Assessment for Children and Adolescents, the Child Trauma Questionnaire, and the Diagnostic Interview Schedule were used in interviews with 406 youths in Missouri's foster care system who were aged 17 years. Results: Ninety-four percent of the youths had used a mental health service in their lifetime, 83 percent used a mental health service in the past year, and 66 percent were currently receiving a mental health service. Lifetime rates for inpatient psychiatric care (42 percent) and other residential programs (77 percent) were exceptionally high. A quarter of the youths received mental health services before they entered the foster care system. Among youths who received residential services, half did not receive community-based services before receiving residential services. After the analyses controlled for need, predisposing characteristics, and enabling characteristics, youths of color were

less likely to receive outpatient therapy, psychotherapeutic medications, and inpatient services, and they were more likely to receive residential services. Youths who had been neglected and youths in kinship care were less likely to receive some types of services. Geographic differences in service use were common and sometimes mediated the effect of race on service use. Conclusions: The child welfare system was actively engaged in arranging mental health services for youths in the foster care system, but the system was unable to maintain many youths in less restrictive living situations. The variations by race and geography indirectly indicate quality concerns. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-15771-007

TI: Outpatient mental health services for children in foster care: A national perspective.

AU: Leslie,-Laurel-K; Hurlburt,-Michael-S; Landsverk,-John; Barth,-Richard; Slymen,-Donald-J

SO: Child-Abuse-and-Neglect. Vol 28(6) Jun 2004, 697-712.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Objective: To determine factors influencing the use of outpatient mental health services provided by mental health professionals (OMHS) for children in foster care using a national probability sample in the United States. Method: As part of the National Survey of Child and Adolescent Well-being, detailed survey data were collected on 462 children, ages 2-15, who had been in out-of-home care for approximately 12 months at the time of sampling. A multivariate logistic regression model was used to determine how clinical need, as measured by a Total Problem, Externalizing, or Internalizing Scale T-score of 64 or greater on the Achenbach Child Behavior Checklist (CBCL), and non-clinical factors affected OSMHS use. Results: Over half of the children in the sample received at least one OMHS. Need, older age, and history of sexual abuse history all positively predicted OMHS. A history of physical neglect negatively predicted OSMHS. African-Americans used fewer services than children of Caucasian ancestry at all values on the CBCL. This finding was particularly salient at lower levels of CBCL scores; at higher levels, the discrepancy in the use of services diminished but the proportion of children receiving services remained lower for African-American children. Conclusions: This national study confirms previous findings regarding the use of mental health services based on regional data. Limitations in the use of services imposed by non-clinical factors, specifically, age, race/ethnicity and type of abuse, need to be examined in order to address implicit and explicit policies and practices that may result in inequitable distribution of services. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-16981-006

TI: Mental Health Need and Access to Mental Health Services by Youths Involved With Child Welfare: A National Survey.

AU: Burns,-Barbara-J; Phillips,-Susan-D; Wagner,-H.-Ryan; Barth,-Richard-P; Kolko,-David-J; Campbell,-Yvonne; Landsverk,-John

SO: Journal-of-the-American-Academy-of-Child-and-Adolescent-Psychiatry. Vol 43(8) Aug 2004, 960-970.

IS: 0890-8567

PT: Journal; Peer-Reviewed-Journal

AB: Objective: This study assessed the relationship between the need for and use of mental health services among a nationally representative sample of children who were investigated by child welfare agencies after reported maltreatment. Method: Data were collected at study entry into the National Survey of Child and Adolescent Well-Being and were weighted to provide population estimates. Results: Nearly half (47.9%) of the youths aged 2 to 14 years (N = 3,803) with completed child welfare investigations had clinically significant emotional or behavioral problems. Youths with mental health need (defined by a clinical range score on the Child Behavior Checklist) were much more likely to receive mental health services than lower scoring youth; still, only one fourth of such youths received any specialty mental health care during the previous 12 months. Clinical need was related to receipt of mental health care across all age groups (odds ratio = 2.7-3.5). In addition, for young children (2-5 years), sexual abuse (versus neglect) increased access to mental health services. For latency-age youths, African-American race and living at home significantly reduced the likelihood of care. Adolescents living at home were also less likely to receive services, whereas having a parent with severe mental illness increased (odds ratio = 2.4) the likelihood of service use. Conclusions: Routine screening for mental health need and increasing access to mental health professionals for further evaluation and treatment should be a priority for children early in their contact with the child welfare system. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2004-11061-009

TI: Are foster parents reliable informants of children's behaviour problems?

AU: Tarren-Sweeney,-M.-J; Hazell,-P.-L; Carr,-V.-J

SO: Child:-Care,-Health-and-Development. Vol 30(2) Mar 2004, 167-175.

IS: 0305-1862

PT: Journal; Peer-Reviewed-Journal

AB: Clinicians and researchers primarily measure behavioural and emotional problems of children in foster care from carer-report checklists. The present study examines one indicator of reliability for foster parent checklist reports: interrater agreement between foster parents and teachers. Estimates of interrater agreement of foster parent and teacher responses on the cross-informant scales of the Child Behaviour Checklist (CBCL) and the Teacher Report Form (TRF) were obtained for 47 children in long-term foster care, aged 5-11 years. The estimates included calculations of agreement for continuous measures of problem behaviour, as well as for categorical determinations of clinically significant behaviour. Correlations of CBCL and TRF mean raw scores for the total problems ($r = 0.71$) and externalizing ($r = 0.78$) scales exceeded those described in prior studies of parent-teacher agreement, while correlation for internalizing scores ($r = 0.23$) was similar to that found previously. Discrepancies between these and prior findings are discussed. For children in long-term foster care, foster parents or teachers may be used as informants for total problems, externalizing problems, and social-attention-thought problems. The reliability of data on internalizing symptoms is less certain. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2004-10947-010

TI: Mental Health of 'Looked After' Children: A Needs Assessment.

AU: Blower,-Aileen; Addo,-Ama; Hodgson,-Jessica; Lamington,-Linda; Towlson,-Kate

SO: Clinical-Child-Psychology-and-Psychiatry. Vol 9(1) Jan 2004, 117-129.

IS: 1359-1045

PT: Journal; Peer-Reviewed-Journal

AB: This article describes a combined quantitative and qualitative approach to assessing the need for mental health services of looked after children. We interviewed 48 children and young people who were accommodated by one local authority in foster care, children's homes and residential schools. Fifty-six per cent of our sample were suffering from significant psychological morbidity. Forty-four per cent had a definite, probable or resolving diagnosis of at least one psychiatric disorder with impaired psychosocial functioning. Self-esteem was preserved to a variable extent across different domains. In most cases, problems in psychological development had been identified at a young age and the majority had previously been assessed, and some treated, by the local psychiatric service. Most of the participants had strategies for managing distress, made good use of available support networks and were happy with the level of care they were receiving. We concluded that a majority of children and young people looked after by our local authority suffer from chronic and disabling mental health problems despite early recognition of their difficulties, attempts at solutions and supportive care settings. The need we identified was not for improved recognition of mental health problems, but ... (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2003-99643-004

TI: Mental health services utilization by maltreated children: Research findings and recommendations.

AU: Staudt,-Marlys-M

SO: Child-Maltreatment:-Journal-of-the-American-Professional-Society-on-the-Abuse-of-Children. Vol 8(3) Aug 2003, 195-203.

IS: 1077-5595

PT: Journal; Peer-Reviewed-Journal

AB: Many maltreated children have, or are at risk for, emotional and behavioral disorders. Some of these children need mental health services but do not receive them because of service delivery and use barriers. Knowledge about the factors related to service utilization is needed to increase access to and use of services. Studies on mental health services utilization by maltreated children in foster care or otherwise monitored by child protective services are reviewed to ascertain service use correlates. Children in foster care had higher use rates than comparison groups of Aid to Families With Dependent Children not in foster care. Need and nonneed variables predicted service use. Race was the most consistent nonneed predictor. Future research needs include the development of conceptual

models to guide research on service access and use. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2003-02557-006

TI: Mental health problems and sexual abuse among adolescents in foster care: Relationship to HIV risk behaviors and intentions.

AU: Auslander,-Wendy-F; McMillen,-J.-Curtis; Elze,-Diane; Thompson,-Ron; Jonson-Reid,-Melissa; Stiffman,-Arlene

SO: AIDS-and-Behavior. Vol 6(4) Dec 2002, 351-359.

IS: 1090-7165

PT: Journal; Peer-Reviewed-Journal

AB: Adolescents in foster care present with multiple psychosocial and mental health problems that individually are associated with increased risk for HIV infection. However, few studies have examined empirically the interrelationships among these problems and HIV risk behaviors in this population. This study examined the sexual abuse histories and mental health problems among 343 youths (aged 15-19 yrs) in foster care to determine their association with HIV-risk behaviors and behavioral intentions. Results indicated that 25% reported internalizing behaviors (withdrawn, somatic complaints, depressed) and 28.3% reported externalizing behaviors (delinquent and aggressive behaviors). Of the sample, 37% reported some form of prior sexual abuse. Multivariate analyses using simultaneous entry of variables indicated that controlling for demographic variables and behavioral intentions, externalizing behaviors showed the strongest relationship with HIV-risk behaviors. Likewise, in the multivariate model, it was most strongly associated with behavioral intentions. Moreover, there was a significant race-by-gender interaction, with White females engaging in more risky behaviors than their male counterparts and youths of color. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2002-18923-005

TI: Developmental delay in young children in child welfare by initial placement type.

AU: Leslie,-Laurel-K; Gordon,-Jeanne-N; Ganger,-William; Gist,-Kristin

SO: Infant-Mental-Health-Journal. Vol 23(5) Sep 2002, 496-516.

IS: 0163-9641

PT: Journal; Peer-Reviewed-Journal

AB: Estimates of developmental delay in children in out-of-home foster care range from 13-62%. Overlooked in these studies are comparisons of developmental delay differentiated by a child's initial placement type (i.e., biological parent, kinship care, or nonrelative foster care) following evaluation for possible abuse and/or neglect. The developmental status of children residing in these different placement types warrants further scrutiny by clinicians and policy makers, especially due to the recent trend towards family preservation efforts and the growing use of kinship care. Data were collected on 798 children, ages 3-36 months, who were admitted to San Diego's sole emergency shelter/receiving facility from April 1, 1998 through June 30, 1999 for investigation of alleged maltreatment. Children admitted received a physical exam and developmental screening using the Denver Developmental Screening Test (Denver11). Sixty two percent of children (491) scored "suspect" on the Denver Developmental Screening Test II (Denver-II). Results suggest that young children placed in kinship care are as likely to be developmentally delayed, based on the Bayley-II, as those children placed in nonrelative foster care. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2002-17962-006

TI: Chaos and trauma in the lives of adolescent females with antisocial behavior and delinquency.

AU: Chamberlain,-Patricia; Moore,-Kevin-J

SO: Journal-of-Aggression,-Maltreatment-and-Trauma. Vol 6(1) 2002, 79-108.

IS: 1092-6771

PT: Journal; Peer-Reviewed-Journal

AB: Female adolescents entering the juvenile justice system have complex and serious problems in multiple areas of adjustment. Literature is reviewed on the prevalence and form of antisocial behavior in girls and on the long-term implications of such problems in adolescence. Risk factor characteristics, including family fragmentation, physical and sexual trauma, mental health problems, official arrest and self-report offending histories of a population of girls referred for out-of-home placement because of repeated and chronic juvenile offending are presented. In addition, with the exception of sexual trauma histories, these sample characteristics are compared to a similar sample of chronically offending boys. A treatment approach is described and pilot data are presented on its feasibility. Implications for

designing empirically-based, gender-related treatment models are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 2002-04044-005

TI: Delivery of vision care to children in foster care placement in New York City.

AU: Duckman,-Robert-H; Festinger,-Trudy

SO: Journal-of-Optometric-Vision-Development. Vol 33(2) Sum 2002, 116-125.

IS: 0149-886X

PT: Journal; Peer-Reviewed-Journal

AB: There are currently more than 30,000 children in foster care placements in New York City. When they enter the "system," they are given a complete physical examination, one component of which is a visual screening. The authors investigated the ability of these visual screening examinations to identify those children with visual problems. In about 1.5 yrs, 351 children between the ages of 6 and 12 yrs received comprehensive vision examinations. Visual acuity at distance and near, with and without corrective lenses, ocular motor status, refractive status, ocular health status, vergences, accommodation, and stereoscopic vision were quantified wherever possible. The results are discussed for prevalence data, degree of the problem (mild, moderate, or severe), whether the problem was newly identified or had been identified previously, and if not previously identified, the likelihood that it was present 1 yr earlier (at the time of their last physical examination). (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2002-01875-002

TI: Foster children's behavioral disturbance and detachment from caregivers and community institutions.

AU: Leathers,-Sonya-J

SO: Children-and-Youth-Services-Review. Vol 24(4) Apr 2002, 239-268.

IS: 0190-7409

PT: Journal; Peer-Reviewed-Journal

AB: Explored how experiences in substitute care are related to behavioral disturbance among young adolescents in non-relative foster care. A model was defined in which placement movement, group placement, and inconsistent or decreasing parental visitation were expected to be correlated with weak informal social controls such as caregiver attachments and involvement in schools and churches. Through weakened attachments and community involvement, these experiences in care were expected to be associated with behavioral problems. This correlational model was tested in a random sample of 199 urban foster children (aged 12-13 yrs at the time of selection). Structured telephone interviews conducted at a single point in time with foster parents and caseworkers were the primary source of data. Some results are consistent with the study hypotheses, but the results varied for boys and girls. Fewer symptoms of conduct disorder were found among boys with stronger attachments to their foster families and girls with higher school achievement and investment. Additionally, placement movement was indirectly associated with severity of conduct disorder for both boys and girls. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2002-12269-005

TI: Coping alone: Examining the prospects of adolescent victims of child abuse placed in foster care.

AU: Browne,-Deborah

SO: Journal-of-Youth-and-Adolescence. Vol 31(1) Feb 2002, 57-66.

IS: 0047-2891

PT: Journal; Peer-Reviewed-Journal

AB: Attempts to highlight the problems young people in foster care face. A group of 21 young people (aged 12-19 yrs) were interviewed and were asked to complete the Frydenberg and Lewis Adolescent Coping Scales. Their social workers provided information on their past history both in care and prior to coming in to care. It emerged that the young people who had experienced physical and/or sexual abuse were significantly more likely to be/have been involved in problem, or Crisis, foster placements. Additionally these young people displayed less adaptive coping strategies than the young people who had not been abused. The most significant differences indicated that the victims of abuse were more likely to try and cope with stressful situations by themselves, while the other foster adolescents were significantly more likely to find support from their friends. Case studies, with reference to the teenager's own accounts, help to illustrate how a history of abuse can complicate the already difficult fostering processes, and can also affect the long-term coping abilities of the victims. The

consequences of these issues are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-05870-003

TI: Identifying the psychological needs of foster children.

AU: Garwood,-Molly-Murphy; Close,-Wendy

SO: Child-Psychiatry-and-Human-Development. Vol 32(2) Win 2001, 125-135.

IS: 0009-398X

PT: Journal; Peer-Reviewed-Journal

AB: Recent research has pointed to the increased risk of pathology for children placed in foster care. In response, the Child Welfare League of America has advocated for routine assessment of the psychological needs of children in foster care. A model for standardized psychological screening for all foster children shortly after placement is described. Interdisciplinary relationships between medical and psychological staff are stressed. Typical referral questions are outlined and suggestions for a testing battery that covers cognitive, behavioral, and emotional realms are given. Issues and problems inherent in testing this population are discussed, but the importance of psychological screening of this at-risk population is emphasized. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2002-18670-005

TI: Emergency room use among a foster care sample: The influence of placement history, chronic illness, psychiatric diagnosis, and care factors.

AU: Almgren,-Gunnar; Marcenko,-Maureen-O

SO: Brief-Treatment-and-Crisis-Intervention. Vol 1(1) Sum 2001, 55-64.

IS: 1474-3310

PT: Journal; Peer-Reviewed-Journal

AB: Despite the physical, mental, and social health risks of foster children, relatively little attention has been paid to how they interact with emergency medicine. To address the need for more empirical research on this topic, the authors tested whether demographic characteristics, chronic health conditions, psychiatric disorders, and placement factors predicted emergency room use among children in Washington State's foster care system in fiscal year 1999. Medicaid claim records and Child Welfare administrative records for 8,716 children were used to extract data on the dependent variables of interest. Contrary to findings with general pediatric samples, the results showed that psychiatric conditions were the strongest predictors of emergency room use, followed by some chronic health problems. Children diagnosed with personality disorders or depression were 9.5 and 5.4 times more likely to be seen in the emergency room than children without a psychiatric diagnosis. Possible explanations for these findings are explored and implications for the health care and child welfare systems are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-17425-019

TI: Violence exposure among school-age children in foster care: Relationship to distress symptoms.

AU: Stein,-Bradley-D; Zima,-Bonnie-T; Elliott,-Marc-N; Burnam,-M.-Audrey; Shahinfar,-Ariana; Fox,-Nathan-A; Leavitt,-Lewis-A

SO: Journal-of-the-American-Academy-of-Child-and-Adolescent-Psychiatry. Vol 40(5) May 2001, 588-594.

IS: 0890-8567

PT: Journal; Peer-Reviewed-Journal

AB: Describes the amount and nature of violence exposure and examines the relationship between violence exposure and distress symptoms among 472 children (aged 6-12 yrs) in foster care. Violence exposure and distress symptoms were evaluated in interviews, conducted between July 1996 and March 1998, of 300 children from Los Angeles County living in out-of-home placement. Interviews were successfully completed in 91% of eligible children. The majority of children (85%) reported having been a witness to violence, and 51% had been a victim of violence during their lifetime. Of these youths, 54% and 41%, respectively, reported having been exposed to such violence in the past 6 mo. Girls, victims of assaultive violence and weapon related violence, and those reporting exposure to mild violence were more likely to have higher levels of distress symptoms than those without such characteristics, after age was controlled for. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-11575-004

TI: Sticks and stones can break your bones: Verbal harassment and physical violence in the lives of gay and lesbian youths in child welfare settings.

AU: Mallon,-Gerald-P

SO: Journal-of-Gay-and-Lesbian-Social-Services:-Issues-in-Practice,-Policy-and-Research. Vol 13(1-2) 2001, 63-81.

IS: 1053-8720

PT: Journal; Peer-Reviewed-Journal

AB: Utilizing the narratives of 54 youths and 88 child welfare professionals, this article explores the experiences and lives of gay and lesbian youths in child welfare agencies in three cities-New York, Los Angeles, and Toronto-who have been subject to verbal harassment and physical violence within those systems. The author additionally explores the multiple layers of verbal harassment and violence in both the youths' families and in the foster care system, offering recommendations to social work practitioners interested in creating gay and lesbian affirming environments. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

→ auch bei **“Besondere Formen der Pflege”**

AN: 2001-11313-008

TI: Untangling the impact of sexual abuse on HIV risk behaviors among youth in foster care.

AU: Elze,-Diane-E; Auslander,-Wendy; McMillen,-Curtis; Edmond,-Tonya; Thompson,-Ron

SO: AIDS-Education-and-Prevention. Vol 13(4) Aug 2001, 377-389.

IS: 0899-9546

PT: Journal; Peer-Reviewed-Journal

AB: Investigates the interrelationships among childhood sexual abuse, other types of child maltreatment (emotional and physical abuse and neglect), emotional and behavioral problems, and HIV risk behaviors in a sample of 167 adolescents (aged 15-19 yrs) participating in an independent living preparation program in 1 midwestern county. Lifetime and recent (last 2 mo) HIV risk behaviors assessed included several categories of sexual risk taking behaviors (5 lifetime and 8 recent) and 3 items assessing use of unclean needles for iv drug usage, piercing, or tattoos. 33% of the Ss identified as white and 67% as youths of color. 59 Ss (33%) reported some form of sexual abuse; 21 reported unwanted touching, with no unwanted intercourse, and 38 reported unwanted intercourse. Multivariate analyses demonstrated a significant relationship between the severity of sexual abuse and Ss' recent HIV risk behaviors, after accounting for the contribution of other childhood trauma and emotional and behavioral problems. The findings support the need for HIV prevention programs targeting sexually abused youths. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-07473-008

TI: Mental health services for youths in foster care and disabled youths.

AU: dosReis,-Susan; Zito,-Julie-Magno; Safer,-Daniel-J; Soeken,-Karen-L

SO: American-Journal-of-Public-Health. Vol 91(7) Jul 2001, 1094-1099.

IS: 0090-0036

PT: Journal; Peer-Reviewed-Journal

AB: Examined the effects of youths' medical assistance aid category on mental health services provided to them. Medical histories of 15,507 youths (aged 0-19 yrs) were gathered. Results show that the prevalence of mental disorders among youths enrolled in foster care was twice that of youths receiving supplemental security income (SSI) and nearly 15 times that of other youths receiving other types of aid. Rates of mental health service use were pronounced among foster care youths aged 6-14 yrs. attention deficit hyperactivity disorder (ADHD), depression, and developmental disorders were the most prevalent disorders. Stimulants, antidepressants, and anticonvulsants were the most prevalent medications. It is concluded that youths enrolled in foster care and youths receiving SSI use far more mental health services than do youths in other aid categories. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-07448-001

TI: Foster children and ADHD: Anger, violence and institutional power.

AU: Karnik,-Niranjan-S

SO: Journal-of-Medical-Humanities. Vol 21(4) Win 2000, 199-214.

IS: 1041-3545

PT: Journal; Peer-Reviewed-Journal

AB: Explores ways in which foster children and attention deficit hyperactivity disorder (ADHD) intersect as social and medical categories. Through the method of interpretive biography based on the official case file, the author shows how the experiences of violence and ADHD become linked in the child's life through the emotion of anger. In this way, it is possible to see how the power dynamics of the medical, educational, and welfare systems lock the diagnosis with its embedded meanings into the child's life. It is also possible to see how counter forces like a caring foster family can challenge medical and welfare authorities. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-03201-009

TI: Children and youth in foster care: Disentangling the relationship between problem behaviors and number of placements.

AU: Newton,-Rae-R; Litrownik,-Alan-J; Landsverk,-John-A

SO: Child-Abuse-and-Neglect. Vol 24(10) Oct 2000, 1363-1374.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Examined the relationship between change in placement and problem behaviors over a 12-mo period among a cohort of foster children. The sample contained 415 youth, and was part of a larger cohort of children who entered foster care in San Diego, California and remained in placement for at least 5 months. The Child Behavior Check List was used to assess behavior problems. Every change of placement during the first 18 mo after entry into the foster care system was abstracted from case records. Results suggest that volatile placement histories contribute negatively to both internalizing and externalizing behavior of foster children, and that children who experience numerous changes in placement may be at particularly high risk for these deleterious effects. Initial externalizing behaviors proved to be the strongest predictor of placement changes for the entire sample and for a sub-sample of those who initially evidenced problem behaviors on at least one broad-band CBCL scale. Findings also suggest that children who initially score within normal ranges on the CBCL may be particularly vulnerable to the detrimental effects of placement breakdowns. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

→ **auch bei „Zusammenbrüche von Pflegeverhältnissen“**

AN: 2001-03151-006

TI: Children in foster care: Factors influencing outpatient mental health service use.

AU: Leslie,-Laurel-K; Landsverk,-John; Ezzet-Lofstrom,-Roxanne; Tschann,-Jeanne-M; Slymen,-Donald-J; Garland,-Ann-F

SO: Child-Abuse-and-Neglect. Vol 24(4) Apr 2000, 465-476.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Examined factors influencing outpatient mental health service use by children in foster care. Detailed survey and administrative data were collected on 480 children who entered long-term foster care in San Diego County from May 1990 through October 1991. These data were linked with claims data from Medicaid and San Diego County Mental Health Services information systems. A Poisson regression model was used to determine whether the following factors influenced outpatient mental health service use: age, race/ethnicity, gender, maltreatment history, placement pattern, and behavioral problems as measured by the Achenbach Child Behavior Checklist (CBCL). Except for maltreatment history, all independent variables included in the multivariate regression model were statistically significant. The total number of outpatient mental health visits increased with age, male gender, and non-relative foster placements. Relative to Caucasians, visits were lower for Latinos, and Asian/Others, but comparable for African-Americans. Concerning maltreatment history, differences were only found in one category; children experiencing caretaker absence received fewer visits compared to children who did not experience caretaker absence. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-13616-003

TI: Using the CBCL to determine the clinical status of children in state custody.

AU: Heflinger,-Craig-Anne; Simpkins,-Celeste-G; Combs-Orme,-Terri

SO: Children-and-Youth-Services-Review. Vol 22(1) Jan 2000, 55-73.

IS: 0190-7409

PT: Journal; Peer-Reviewed-Journal

AB: Reviews information on past use of the Child Behavior Checklist (CBCL) to describe the clinical status of children in state custody and the results of a recent study of a representative statewide

sample. The sample included a random sample of 254 children (aged 2-18 yrs) in state custody, including those in foster care, kinship care, group residential facilities, and state institutions. One third of the children in state custody were reported as having significant behavior problems. The narrow band scales reflecting greatest difficulties included Aggressive, Delinquent, and Withdrawn behavior. The youngest teenage group was significantly more likely to have Internalizing problems in the clinical level, and those living in family homes were more likely to have scores in the non-clinical range than those in foster homes or group placements. Implications for policy makers, caseworkers, and researchers is discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-12232-003

TI: Help-seeking steps and service use for children in foster care.

AU: Zima,-Bonnie-T; Bussing,-Regina; Yang,-Xiaowei; Belin,-Thomas-R

SO: Journal-of-Behavioral-Health-Services-and-Research. Vol 27(3) Aug 2000, 271-285.

IS: 1094-3412

PT: Journal; Peer-Reviewed-Journal

AB: This study describes help-seeking steps and service-use patterns for school-age children in foster care. It also examines how these access indices are moderated by sociodemographic, enabling, and child disorder factors. Two home interviews and a telephone teacher interview were conducted using a sample of 302 randomly selected children (aged 6-12 yrs) in foster care. The majority of children (80%) were given a psychiatric diagnosis, and 43% of the foster parents perceived a need for mental health services for the child. In the past year, about one-half of the children had received mental health (51%) and special education services (52%). Age and ethnicity, foster parent education, placement history, level of monthly benefits, number of caseworker visits, and disorder characteristics were related to help-seeking steps and mental health service use. Strategies to improve access to mental health services for children in foster care should include interventions at the caregiver and system levels. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-07782-008

TI: Behavior problems, academic skill delays and school failure among school-aged children in foster care: Their relationship to placement characteristics.

AU: Zima,-Bonnie-T; Bussing,-Regina; Freeman,-Stephanny; Yang,-Xiaowei; Belin,-Thomas-R; Forness,-Steven-R

SO: Journal-of-Child-and-Family-Studies. Vol 9(1) Mar 2000, 87-103.

IS: 1062-1024

PT: Journal; Peer-Reviewed-Journal

AB: Examined the level of behavior problems, academic skill delays, and school failure among school-aged children in foster care. The authors also examine how behavior problems are associated with academic problems, and explore how these outcomes are related to children's placement characteristics. Foster parent and child home interviews, as well as teacher telephone interviews were conducted from a random sample of 302 children (aged 6-12 yrs) living in out of-home placement. Interviews included standardized screening measures. Results showed that 27% of the children scored in the clinical range for a behavior problem, and 34% were rated as having at least one behavior problem in the classroom. 23% of the children had severe delays in reading or math, 13% had repeated a grade, and 14% had a history of school suspension and/or expulsion. Behavior problems by foster parent report were related to child suspension and/or expulsion from school, but were not associated with severe academic delays or grade retention. Placement characteristics were only sometimes related to these outcomes. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-03027-006

TI: Children placed in long-term foster care: An intake profile using the Child Behavior Checklist/4-18.

AU: Armsden,-Gay; Pecora,-Peter-J; Payne,-Vincent-H; Szatkiewicz,-James-P

SO: Journal-of-Emotional-and-Behavioral-Disorders. Vol 8(1) Spr 2000, 49-64.

IS: 1063-4266

PT: Journal; Peer-Reviewed-Journal

AB: Foster-care programs are beginning to use standardized assessment methods consistently as part of program and case planning, as well as for documenting the clinical status of children in care. A number of studies have now been published that describe the psychosocial functioning of children in foster care using the Child Behavior Checklist (CBCL). This article reports findings on intake CBCL

scores for 362 4-18 yr olds in long-term family foster care in order to document psychosocial functioning. These CBCL scores are compared with scores reported for other samples of children in family foster care and residential treatment. Overall rates of serious behavior problems for children in care are estimated from the available data. 50% of the Ss with behavioral problems were also performing poorly in school. In addition, the Ss tested with the CBCL showed similarities of scores to other children in foster care but lower scores than children in residential treatment studies. The implications of the findings for clinical and program planning and future research using the CBCL are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-00878-003

TI: Positive reaction to disclosure and recovery from child sexual abuse.

AU: Gries,-Leonard-T; Goh,-David-S; Andrews,-Mary-Beth; Gilbert,-Jeri; Praver,-Frances; Stelzer,-Dalia-Naierman

SO: Journal-of-Child-Sexual-Abuse. Vol 9(1) 2000, 29-51.

IS: 1053-8712

PT: Journal; Peer-Reviewed-Journal

AB: Examined the relationship between sexually abused children disclosing such abuse, recanting disclosures, and emotional health. 21 individuals (aged 6-18 yrs) attending psychotherapy who were in foster care because of child sexual abuse completed the Child Behavior Checklist (T. M. Achenbach, 1991), the Trauma Symptom Checklist for Children (J. Briere, 1996), the Angie/Andy Cartoon Trauma Scales--Long Form (F. Praver et al, 1996), the Child Depression Inventory--Short Form (M. Kovacs, 1992), and the Disclosure Data Sheet. Therapists classified Ss according to current level of disclosure regarding past abuse and degree of support offered by significant others. Findings show that Ss who were in an actively disclosing stage exhibited significantly less externalizing behavior problems than did non-disclosing Ss. Those who were fully disclosing without recantation showed significantly lower dissociation than did all other Ss. Ss who recanted with or without redisclosure showed significantly more posttraumatic stress symptomatology. Reactions to disclosure of foster parents were the most salient with respect to current functioning. Children who received full support from foster parents showed significantly lower depression scores than did those who received only partial support. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2001-17666-002

TI: Psychotropic medication use among children in foster care: Relationship to severe psychiatric disorders.

AU: Zima,-Bonnie-T; Bussing,-Regina; Crecelius,-Gia-M; Kaufman,-Aaron; Belin,-Thomas-R

SO: American-Journal-of-Public-Health. Vol 89(11) Nov 1999, 1732-1735.

IS: 0090-0036

PT: Journal; Peer-Reviewed-Journal

AB: Explored level of psychotropic medication use and its relationship to severe psychiatric disorders among school-aged children in foster care. Home interviews with 302 foster parents and children (aged 6-12 yrs) and 266 follow-up clinical evaluations were conducted. 13% of the children had taken psychotropic medication in the previous year, and 52% of those whose clinical status merited a medication evaluation had not received medication in the previous year. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-08359-005

TI: Lost for words.

AU: Cross,-Melanie

SO: Child-and-Family-Social-Work. Vol 4(3) Aug 1999, 249-257.

IS: 1356-7500

PT: Journal; Peer-Reviewed-Journal

AB: Considers why communication problems and emotional and behavioral difficulties often occur together and then reflects on the implications of undetected communication problems for the care of "looked after" children. A small-scale study of 6 children (aged 10-15 yrs) placed with an independent child care organization was undertaken. All the children had Statements of Special Educational Need and there were no indications that they had any communication difficulties. Some subtests of the Clinical Evaluation of Language Fundamentals (E. H. Wiig 1988) were used in order to assess the children's ability to construct sentences and to understand language. There was also informal assessment of conversational and narrative skills. It was found that of the 6 pupils assessed, 5

seemed to have some kind of communication difficulty which had not been previously diagnosed. The author notes that since communication problems impact on emotional and educational development, suggestions of ways to identify speech and language difficulties in school-age children are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-02418-003

TI: Foster parents' understanding of children's problematic attachment strategies: The need for therapeutic responsiveness.

AU: Tyrrell,-Christine; Dozier,-Mary

SO: Adoption-Quarterly. Vol 2(4) 1999, 49-64.

IS: 1092-6755

PT: Journal; Peer-Reviewed-Journal

AB: Foster mothers' (FMs; aged 28-70 yrs) and biological mothers (BMs; aged 18-47 yrs) were interviewed regarding their understanding of children's insecure attachment strategies and their knowledge of foster care issues. In addition, parent sensitivity was assessed and case workers in the foster care system reported on FMs' effectiveness. Parents and children (aged 6 mo-5 yrs) were videotaped during a 15-min free play session. As expected, FMs reported significantly more attachment-related difficulties with their foster children than BMs reported with their natural children. FMs were not significantly different from BMs in their understanding of attachment strategies, knowledge about foster care issues, or sensitivity. Case workers' reports of foster parent effectiveness were significantly related to foster parents' knowledge about foster care issues but were not significantly related to parents' understanding of attachment strategies. The authors discuss the importance of sensitivity to attachment issues among foster parents. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1999-15267-002

TI: Foster youth and dating violence.

AU: Jonson-Reid,-Melissa; Bivens,-Lisa

SO: Journal-of-Interpersonal-Violence. Vol 14(12) Dec 1999, 1249-1262.

IS: 0886-2605

PT: Journal; Peer-Reviewed-Journal

AB: Examined the prevalence of dating violence among youth in foster or group care, their experiences as perpetrators and victims, their continued participation in abusive dating relationships, their witnessing violence in family of origin, and their desire for prevention and intervention services. 85 adolescents participating in a presentation on dating violence completed a survey based on that developed by L. Bergman (1992). Results show that 48% reported involvement in some type of dating violence and 60% reported witnessing violence in their families of origin. 37% of girls and 11% of boys reported being victims. 16% of boys and 15% of girls reported inflicting harm. Ss reporting being victims were more likely to report inflicting violence. 19 of the 29 Ss who experienced dating violence continued to date the same person and 2 reported a new relationship with violence. Of the 29 youth who reported dating violence, 7 reported their experiences to an adult. About 70% of the youth expressed a desire for more information, and 68% expressed a willingness to participate in a class or program to learn how to prevent dating violence. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1999-13984-006

TI: Abnormal involuntary movements in neuroleptic-naive children and adolescents.

AU: Magulac,-Mark; Landsverk,-John; Golshan,-Shahrokh; Jeste,-Dilip-V

SO: Canadian-Journal-of-Psychiatry. Vol 44(4) May 1999, 368-373.

IS: 0706-7437

PT: Journal; Peer-Reviewed-Journal

AB: Determined the prevalence of and identify risk factors for abnormal involuntary movements in a well-characterized community sample of neuroleptic-naive children and adolescents. The Abnormal Involuntary Movement Scale (AIMS) was administered to 390 Ss aged 3-17 yrs who were in foster care. Additional instruments were used to assess intellect and behavior problems. 12.6% of Ss had at least 1 rating of "mild" movements on AIMS; these included 4.1% with at least 2 ratings of "mild" or 2 of "moderate" severity. Significant risk factors for movement disorder were younger age, lower IQ, and more severe behavior problems. The abnormal movements were usually orofacial, and the affected Ss were generally unaware of these movements. The base prevalence of abnormal involuntary

movements must be considered in children and adolescents assessed for medication to determine the true rate of motor side effects. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1999-05493-004

TI: Children birth to three entering the state's custody.

AU: Reams,-Redmond

SO: Infant-Mental-Health-Journal. Vol 20(2) Sum 1999, 166-174.

IS: 0163-9641

PT: Journal; Peer-Reviewed-Journal

AB: Children entering the state's legal custody are a high-risk group. They have experienced not only maltreatment of some form and usually separation from attachment figures, but often have also witnessed domestic violence, been exposed prenatally to alcohol and/or drugs, or been in attachment relationships with substance-abusing and/or mentally ill parents. This paper presents data on the developmental and mental health status of 144 of these children (aged <48 mo), including diagnoses using the Diagnostic Classification: 0-3. Over half the children received referrals for additional needed developmental or mental health services. The importance of assessing these children early in their time in foster care is emphasized. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1999-03648-009

TI: Sexually and physically abused foster care children and posttraumatic stress disorder.

AU: Dubner,-Allison-E; Motta,-Robert-W

SO: Journal-of-Consulting-and-Clinical-Psychology. Vol 67(3) Jun 1999, 367-373.

IS: 0022-006X

PT: Journal; Peer-Reviewed-Journal

AB: Considerable debate exists regarding the possible relationship between child abuse and posttraumatic stress disorder (PTSD). In this study, 3 groups of foster care children were compared. The groups included 50 sexually abused, 50 physically abused, and 50 nonabused foster care children. Participants completed the Child Post-Traumatic Stress Reaction Index, the Childhood PTSD Interview, and the Modified Stroop Procedure (MSP), which included sexual abuse and nonsexual abuse stimuli. The MSP has not been previously used in child abuse research. Results indicated that sexually and physically abused children demonstrated PTSD at a high level. The MSP discriminated between the sexually abused children with PTSD and those without PTSD. Responses to the MSP sexual abuse stimuli resulted in significantly longer color-naming times than responses to nonsexual abuse stimuli. Preadolescents demonstrated more severe PTSD than early adolescent children. (PsycINFO Database Record (c) 2005 APA, all rights reserved) (journal abstract)

AN: 1999-01085-001

TI: Psychotropic medication treatment patterns among school-aged children in foster care.

AU: Zima,-Bonnie-T; Bussing,-Regina; Crecelius,-Gia-M; Kaufman,-Aaron; Belin,-Thomas-R

SO: Journal-of-Child-and-Adolescent-Psychopharmacology. Vol 9(3) 1999, 135-147.

IS: 1044-5463

PT: Journal; Peer-Reviewed-Journal

AB: This study described the level of psychotropic medication use and patterns of such treatment among school-aged children in foster care. Structured survey interviews were conducted in the foster homes of 302 randomly selected 6-12 yr olds, who were living in foster care for 6 mo or more and placed from 3 county service areas. Follow-up mental health assessments using the existing system of care format were completed in 255 children. 16% of these children in foster care were found to have taken psychotropic medication during their lifetime. The most common class of medication used in the past year was stimulants (62%). Children who were older, from Caucasian and biracial backgrounds, and who lived in a group home were more likely to have taken psychotropic medication in the past year. Among children who received a clinician diagnosis of a severe psychiatric disorder for which medication is an accepted component of care, boys were more likely to received medication treatment than girls. Sociodemographic characteristics and placement history variables may be influential in the level of psychotropic medication use among this population. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1998-12195-003

TI: Mental health problems of children in foster care.

AU: Clausen,-June-Madsen; Landsverk,-John; Ganger,-William; Chadwick,-David; Litrownik,-Alan
SO: Journal-of-Child-and-Family-Studies. Vol 7(3) Sep 1998, 283-296.
IS: 1062-1024

PT: Journal; Peer-Reviewed-Journal

AB: Compared the rates of mental health problems in children in foster care across 3 counties in California. 267 children, aged 0-17 yrs, were assessed 2-4 mo after entry into foster care using a behavioral screening checklist (the Parent Report Form of the Child Behavior Checklist [CBCL]), a measure of self-concept and, in 1 county, an adaptive behavior survey. Results indicated consistently high rates of mental health problems across the 3 counties. Behavior problems in the clinical or borderline range of the CBCL were observed at 2.5 times the rate expected in a community population. Fewer children fell within the clinical range on the self-concept measure. No significant differences in rates between the 3 county foster care cohorts were observed, despite the different demographic characteristics of the counties. On the adaptive behavior scale, the mean scores for children in foster care were more than 1 standard deviation below the norm. Findings suggest that the most important mental health screening issue with children in foster care is to identify what specific mental health problems need to be addressed so that the most effective treatment services can be provided. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1998-11149-005

TI: The relationship between problem disclosure, coping strategies and placement outcome in foster adolescents.

AU: Browne,-Deborah-C

SO: Journal-of-Adolescence. Vol 21(5) Oct 1998, 585-597.

IS: 0140-1971

PT: Journal; Peer-Reviewed-Journal

AB: Adolescence has been described as a period where normal developmental stresses are dealt with depending on past experiences and current demands. Foster care inherently brings with it many additional stresses which must be dealt with at a period where many young people find even normal developmental tasks overpowering. This study examines problem disclosure and coping strategies in 21 foster adolescents (aged 12-19 yrs). Results indicate that teenagers who have experienced crisis foster placements were significantly more likely to disclose concern over parent and authority control over their lives. Additionally, these young people seemed more likely to use non-productive coping strategies when dealing with everyday problems. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-02420-001

TI: "I was taken": How children experience removal from their parents preliminary to placement into foster care.

AU: Folman,-Rosalind-D

SO: Adoption-Quarterly. Vol 2(2) 1998, 7-35.

IS: 1092-6755

PT: Journal; Peer-Reviewed-Journal

AB: Little is known of how children experience removal from parents and placement into foster care. This paper presents results of a qualitative study of the removal and placement experiences of 90 inner-city children (aged 8-14 yrs) in foster care. Children's focus groups, in-depth semi-structured interviews, projective tests, questionnaires and standardized scales were used to obtain a phenomenological picture of S's pre-care and in-care lives. S's narratives portray a progression of traumatizing events ensuing from the placement process. According to the Ss, removal from their homes was generally handled clumsily. The Ss reported multiple losses which continued to increase in number as they were suddenly separated from their last remaining supports, their siblings. They encountered a progression of risk factors including a lack of information, the resulting terror of the unknown and an absence of acknowledgment of their feelings of pain and loss. The narrative from a wellhandled placement of a 10-yr-old female, suggests guidelines for future interventions. Developmental and practice implications are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1997-38543-001

TI: Mental health services for children in out-of-home care.

AU: Anonymous-; Connors,-Margaret-M; Fribourg,-Anne; Gries,-Len; Gonzales,-Mayu

SO: Child-Welfare. Vol 77(1) Jan-Feb 1998, 29-40.

IS: 0009-4021

PT: Journal; Peer-Reviewed-Journal

AB: Presents a summary of the empirical research documenting the risk factors and high incidence of psychopathology among children in out-of-home care even when compared with children with similar backgrounds of deprivation. Children in care have mental health needs that are qualitatively and quantitatively different from the general population of children and require specialized mental health services. A framework and guiding principles for mental health service delivery are described that are consistent with the clinical needs of children in care and the child welfare goal of permanency. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 2000-03541-006

TI: Meeting the psychiatric needs of children in foster care.

AU: Phillips,-Jeannette

SO: Psychiatric-Bulletin. Vol 21(10) Oct 1997, 609-611.

IS: 0955-6036

PT: Journal; Peer-Reviewed-Journal

AB: Ascertained 18 social worker's views about the mental health of a clinical sample of foster children and determined whether the children judged to have mental health needs were referred for treatment. Out of a sample of 44 children, 80% of the children were considered to require treatment from a child mental health professional, but only 27% had received any input. The reasons given for not referring for treatment were placement instability, inadequate child mental health resources and insufficient local authority funding. The author states that the provision of consultation services to allocated social workers and the availability of child mental health professionals at local authority reviews should be considered. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

1996 – 1987

AN: 1996-21030-001

TI: Psychopathology among children placed in family foster care.

AU: Pilowsky,-Daniel

SO: Psychiatric-Services. Vol 46(9) Sep 1995, 906-910.

IS: 1075-2730

PT: Journal; Peer-Reviewed-Journal

AB: Reviews 13 studies, published 1974-1994, on the prevalence and types of psychopathology among children in family foster care. The prevalence of psychopathology among children in family foster care is higher than would be expected from normative data, even when this population is compared with children who have backgrounds of similar deprivation. The only apparent trend in psychopathology in this population is the predominance of externalizing disorders, such as disruptive behavior disorders. A combination of social, psychological, and biological factors may render children in family foster care highly vulnerable to psychopathology. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1996-06345-003

TI: Health care utilization by children entering foster care.

AU: Risley-Curtiss,-Christina; Combs-Orme,-Terri; Chernoff,-Robin; Heisler,-Alice

SO: Research-on-Social-Work-Practice. Vol 6(4) Oct 1996, 442-461.

IS: 1049-7315

PT: Journal; Peer-Reviewed-Journal

AB: Studied the referral completion status of 291 children (aged birth to 18 yrs; 86.9% Black) entering foster care and the ability of selected factors to explain the completion of those referrals. Although Ss had multiple health problems, their needs continued to go unmet. Overall, fewer than 50% of the urgent and nonurgent referrals were accomplished, with 61% of urgent and almost 40% of nonurgent referrals not completed during the time between Level I and Level II assessments (i.e., number of days a worker had to compete a referral). Younger Ss had a greater proportion of their needs met than did older Ss. Two variables that accounted for 9% of the variance in referral completion were identified: age and amount of time between Level I and Level II assessments. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1996-05919-008

TI: The mental health of children in foster care: A comparison with community and clinical samples.

AU: Stein,-Eleanor; Evans,-Barrie; Mazumdar,-Rupak; Rae-Grant,-Naomi

SO: Canadian-Journal-of-Psychiatry. Vol 41(6) Aug 1996, 385-391.

IS: 0706-7437

PT: Journal; Peer-Reviewed-Journal

AB: Examined whether the psychiatric profile of children in foster care is more similar to clinical or community profiles. Caregiver and teacher ratings of Diagnostic and Statistical Manual of Mental Disorders-III-Revised (DSM-III-R) externalizing and internalizing symptoms were collected for 248 children in foster care (FC), 654 children assessed at a children's mental health center (MHC), and a community sample of 1,751 Ss. Ss were 4-16 yrs old. FC Ss approximated the numbers and types of symptoms of the MHC Ss. Coming from a family on social assistance, having a parent with a criminal history, and being of the male gender were correlated with higher externalizing and internalizing symptom scores independent of group membership. Group membership accounted for less than 5% of the variance in psychiatric symptom scores. The authors conclude there is a need for more attention to the mental health of children in foster care, and that treatment should be designed keeping in mind high-risk histories. (French abstract) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1996-05521-002

TI: Type of maltreatment as a predictor of mental health service use for children in foster care.

AU: Garland,-Ann-F; Landsverk,-John-L; Hough,-Richard-L; Ellis-Macleod,-Elissa

SO: Child-Abuse-and-Neglect. Vol 20(8) Aug 1996, 675-688.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Examined predictors of utilization of mental health services among children and adolescents in foster care. Of particular interest was whether the type of maltreatment was related to utilization of services. Ss were 662 children aged 2-17 yrs who were in foster care for at least 5 mo. Service utilization, demographic, and behavioral data were collected through interviews with the Ss' caretakers. Types of maltreatment data were collected from Child Welfare case records. 56% of the Ss had received mental health services. Children removed from their homes due to sexual and/or physical abuse were more likely to receive services than were those who were removed due to neglect and caretaker absence. Clinically significant behavior problems were associated with greater likelihood of receiving services, except for Ss of the sexually abused group who were very likely to receive services regardless of their behavior problem score. Sexually abused youth also received a higher number of outpatient visits than did neglected youth. It is suggested that youth who have experienced active types of maltreatment are more likely to receive mental health services than are those with passive types of maltreatment, even when the effect of severity of mental health problems is controlled. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1995-34506-001

TI: Behavior problems of sexually abused children in foster care: A preliminary study.

AU: Thompson,-Ronald-W; Authier,-Karen; Ruma,-Penney

SO: Journal-of-Child-Sexual-Abuse. Vol 3(4) 1994, 79-91.

IS: 1053-8712

PT: Journal; Peer-Reviewed-Journal

AB: Two studies measured foster parents' perceptions about the behavior problems of sexually abused children in their care. The 1st was a large survey of 300 foster parents in a midwestern state who rated problem behaviors for frequency and annoyance. Results showed that foster parents should expect seductive and promiscuous behavior, physical aggression, school problems, alcohol and drug use, and suicide threats. Younger children may present different problems, including bed wetting, fears, nightmares, eating problems, and clinging behavior. The 2nd study used a sample of 73 foster parents who attended training sessions to complete a standardized behavior inventory to rate sexually abused children in their care. Results showed that the children had problems with school, clinging behavior, and aggressive behavior, along with problems with social skills, immaturity, and antisocial behavior. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1995-14818-001

TI: Psychiatric disorders of children "in care": Methodology and demographic correlates.

AU: Stein,-Eleanor; Rae-Grant,-Naomi; Ackland,-Susan; Avison,-William

SO: Canadian-Journal-of-Psychiatry. Vol 39(6) Aug 1994, 341-347.

IS: 0706-7437

PT: Journal; Peer-Reviewed-Journal

AB: Examined psychiatric symptoms and disorders in 148 foster children (aged 4-16 yrs), using scores on the Standardized Clinical Information System questionnaire. Informants included the children, their teachers, and their caretakers. 92% of the children had been maltreated. Caretakers exhibited significant dysfunction, including substance abuse, criminal behavior, and psychiatric histories. Mean externalizing and internalizing scores for the sample were significantly elevated above the norm on youth, caretaker, and teacher reports. 41-63% of the children scored in the pathological range for 1 or more disorders. Conduct disorder was the most common disorder. Temporary wards and children with a history of having been abused had more elevated scores. Results indicate that children in foster care have significant psychiatric morbidity reflective of the extreme adversity and maltreatment they have experienced. (French abstract) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1994-34757-001

TI: Impact of developmental problems on young children's exits from foster care.

AU: Horowitz,-Sarah-McCue; Simms,-Mark-D; Farrington,-Raymond

SO: Journal-of-Developmental-and-Behavioral-Pediatrics. Vol 15(2) Apr 1994, 105-110.

IS: 0196-206X

PT: Journal; Peer-Reviewed-Journal

AB: Investigated the relationship of physical and developmental problems identified in 272 children (aged 1 mo to 7 yrs) in substitute care and the likelihood of their remaining in care. Results indicate that children in foster care commonly showed developmental delays (53%). Further, those Ss who were older at entry into care and non-White and who had developmental problems identified were 1.93 times more likely to remain in foster care. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1993-02938-001

TI: Emotional disturbance in fifty children in the care of a child welfare system.

AU: Thompson,-A.-H; Fuhr,-Deanna

SO: Journal-of-Social-Service-Research. Vol 15(3-4) 1992, 95-112.

IS: 0148-8376

PT: Journal; Peer-Reviewed-Journal

AB: 50 Canadian children (aged 6-18 yrs) in out-of-home placements were administered the Eysenck Personality Questionnaire (EPQ), Children's Depression Inventory, and the Child Behavior Checklist to obtain an estimate of the proportion showing psychopathology. Each S's social worker's opinion on the presence or absence of psychopathology and need for mental health services was also determined. 72% of the Ss were rated by their social workers as displaying emotional disturbance, with 56% recommended for counseling. Test results showed psychopathology rates in the 60-80% range. Native Americans were overrepresented in the sample but showed no meaningful differences in psychopathology levels. The sample was characterized by disorders that were relatively enduring and difficult to treat, rather than by those expected in reaction to adverse social conditions. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1991-25486-001

TI: Health beliefs and practices of foster parents.

AU: Cain,-Charles-E; Barth,-Richard-P

SO: Social-Work-in-Health-Care. Vol 15(2) 1990, 49-61.

IS: 0098-1389

PT: Journal; Peer-Reviewed-Journal

AB: Investigated how foster parents (FPs) and social workers contribute to the routine health care of foster children (FC) by interviewing 100 FPs with a minimum of 2 yrs' experience. Ss had to have at least 2 FC for a minimum of 6 mo with 1 child at least 6 yrs of age. 54% of the FPs believed FCs were likely to have more health problems than most other children living with their parents. FPs reported that agency health care management practices were uneven and often incomplete. Suggestions for how social workers can improve coordination for routine health care for FC are given. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1991-24811-001

TI: Reported hyperphagia in foster children.

AU: Demb,-Janet-M

SO: Child-Abuse-and-Neglect. Vol 15(1-2) 1991, 77-88.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Compared 10 foster children (aged 19-101 mo) with hyperphagia (HP) with 190 other foster children referred for mental health evaluations. Physical and behavioral characteristics of the 10 HP Ss were detailed. HP Ss were neither obese or failure to thrive. HP Ss showed an excessive appetite for food, a driven quality to their eating, an apparent lack of satiety, and frequent eating to the point of vomiting or gastric pain if food intake was not limited externally. All HP Ss had psychiatric disorders. HP appears to be a marker for significant psychopathology. (French & Spanish abstracts) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1990-20683-001

TI: Family characteristics and measures of behavior in foster and nonfoster children.

AU: Hulsey,-Thomas-C; White,-Roger

SO: American-Journal-of-Orthopsychiatry. Vol 59(4) Oct 1989, 502-509.

IS: 0002-9432

PT: Journal; Peer-Reviewed-Journal

AB: Compared behavior scores of 65 maltreated children (aged 4-8 yrs) in foster care with those of a homogeneous group of children who had never been in care. Children's behavior was assessed using the Child Behavior Checklist. Parents and foster parents also completed a questionnaire on family characteristics. Mean scores for foster children were significantly higher than those for controls. After controlling for group differences in family structure and stability, differences in behavior scores between groups were not significant. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1990-04567-001

TI: Excessive water drinking: A marker of caretaker interaction disturbance.

AU: Accardo,-Pasquale-J; Caul,-Jefferies; Whitman,-Barbara-Y

SO: Clinical-Pediatrics. Vol 28(9) Sep 1989, 416-418.

IS: 0009-9228

PT: Journal; Peer-Reviewed-Journal

AB: Examined 11 children (mean age 3.27 yrs) in foster care who were excessive water drinkers to determine whether this behavior could serve as a marker for parent-child problems and inadequate nurturance. Structured family interview revealed that the parent-child interaction patterns were rejecting and both overprotective and overindulgent. The family adaptational styles tended to be chaotic and rigid, and the family cohesion styles disengaged or separated. An illustrative case report of a 32-mo-old girl is presented. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1989-37733-001

TI: The Foster Care Clinic: A community program to identify treatment needs of children in foster care.

AU: Simms,-Mark-D

SO: Journal-of-Developmental-and-Behavioral-Pediatrics. Vol 10(3) Jun 1989, 121-128.

IS: 0196-206X

PT: Journal; Peer-Reviewed-Journal

AB: Describes a community-based multiagency and multidisciplinary clinic developed to perform comprehensive evaluations of preschool children in foster care. 113 children, aged 1 mo to 6 yrs old, were seen during the 1st 2 yrs. Behavioral problems were found in 39% of the children, and chronic medical problems in 35%. 61% of the children were delayed in one or more portions of the developmental assessment, and 60% of these Ss were not involved in any community educational or therapeutic program. Because of the high mobility of this population, continuity of care by social workers, foster parents, and physicians was hard to achieve. The evaluation model facilitated the identification of children in need of additional services, enhanced cooperation between community agencies, and provided a site for monitoring Ss' status and progress. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

→ **auch bei "Entwicklungsverläufe von Pflegekindern"**

AN: 1988-14880-001

TI: Mental health care for foster children in California.

AU: Klee,-Linnea; Halfon,-Neal

SO: Child-Abuse-and-Neglect. Vol 11(1) 1987, 63-74.

IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Assessed the health care needs of foster children in California, using questionnaire and interview data from 154 program administrators, social workers, foster parents, and health care providers. Results show that although all counties cared immediately for foster children who were injured, abused, or ill, only 1 county performed routine mental health evaluations; in most counties, less than one third of children ever received such evaluations. Ss considered mental health problems as more severe than medical problems and identified 4 major barriers to appropriate therapy. It is recommended that (1) all foster children should receive comprehensive mental health evaluations and (2) procedures for immediate and ongoing care with consistent providers sensitive to foster children's needs should be included in case management plans and covered by improved payment mechanisms. (French abstract) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

→ **auch bei "Politische Belange"**

AN: 1988-14872-001

TI: The medical and psychosocial needs of children entering foster care.

AU: Hochstadt,-Neil-J; Jaudes,-Paula-K; Zimo,-Deborah-A; Schachter,-Jayne
SO: Child-Abuse-and-Neglect. Vol 11(1) 1987, 53-62.
IS: 0145-2134

PT: Journal; Peer-Reviewed-Journal

AB: Screened 149 abused and neglected foster children (aged from 10 days to 17 yrs 11 mos). Results indicate that Ss had a much greater incidence of chronic medical conditions, were likely to weigh significantly less and be significantly shorter than the general population, required significant amounts of medical subspecialty care, had a high incidence of developmental delays and major deficits in adaptive behavior, and had a large number of behavioral problems often associated with psychiatric disorders. Results are discussed in terms of the development of a regional model to effectively manage the health care needs of foster care children. (French abstract) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1988-07783-001

TI: Rituals of undoing in abused and neglected children.

AU: Rosenthal,-Kenneth

SO: Child-and-Adolescent-Social-Work-Journal. Vol 4(3-4) Fal-Win 1987, 226-236.

IS: 0738-0151

PT: Journal; Peer-Reviewed-Journal

AB: Addresses the psychopathological consequences of abuse and neglect for the child victim. The symptoms of the child are explained as ritualistic attempts to undo the vulnerabilities of shame, hunger, and helplessness. Practice considerations, parent strategies, and psychotherapeutic approaches are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

1986 – 1977

Reviews

AN: 1986-09989-001

TI: Health care delivery to foster children: A study.

AU: Moffatt,-Michael-E; et-al

SO: Health-and-Social-Work. Vol 10(2) Spr 1985, 129-137.

IS: 0360-7283

PT: Journal; Peer-Reviewed-Journal

AB: Assessed the health status of 900 1-18 yr old children in foster care through a review of 257 medical charts and an examination of a subsample of 35 children. Although major handicapping conditions among the children were well cared for, prevention, the care of minor conditions and of emotional problems, and overall coordination of care were found to be lacking. Ways in which health-care delivery to foster children can be improved are outlined. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1987-10352-001

TI: Psychological disorders among foster children.

AU: McIntyre,-Anne; Keesler,-Thomas-Y

SO: Journal-of-Clinical-Child-Psychology. Vol 15(4) Win 1986, 297-303.

IS: 0047-228X

PT: Journal; Peer-Reviewed-Journal

AB: The prevalence of psychological disorder, the topology of symptom syndromes manifested, and relative risks for disordered status and individual syndromes were determined for 158 children (aged 4 yrs 1 mo to 18 yrs 9 mo) in foster care. Child Behavior Checklist (CBCL) ratings by foster parents were employed to determine clinical status. Nearly half the population manifested evidence of psychological disorder. The full spectrum of syndromes tapped by the CBCL was represented. Relative risks associated with foster status were from almost 2 to over 32 times greater than for home-reared children. Regional cultural phenomena and sociohistorical events were hypothesized to explain discrepancies with lower rates reported previously. The need to make foster care a therapeutic intervention in addition to a temporary care-giving arrangement is discussed. (7 ref) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1983-00944-001

TI: Some aspects of identity problems in foster families.

AU: Sprey-Wessing,-Thea; Portz,-Peter

SO: Journal-of-Comparative-Family-Studies. Vol 13(2) Sum 1982, 231-235.

IS: 0047-2328

PT: Journal; Peer-Reviewed-Journal

AB: Explores the problems with identity establishment encountered by foster children and foster parents. Part of the maturation process of children involves the integration of their personality and ego-functions dependent on the healthy establishment of identity. Since the foster child cannot take on the role of a biological child (as in adoption), an identity confusion often occurs and manifests itself in feelings of insecurity with respect to status in the foster family, feelings of inferiority, problems of loyalty between foster and biological parents, and anxiety about losing their biological parents entirely. Likewise, foster parents often experience an identity confusion, manifested in decisions about the foster child's education, the tenuous relationships with the welfare agency and the child's natural family, and the possible difference in social class between the child's biological family and themselves. In a study of 104 German foster parents, the authors found that individuals were motivated to become foster parents by an attachment and appreciation for children in need, a political or religious belief, or the desire to improve their parenting abilities. (Spanish & French abstracts) (15 ref) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1978-29437-001

TI: The health status of foster children.

AU: Swire,-Margaret-R; Kavalier,-Florence

SO: Child-Welfare. Vol 56(10) Dec 1977, 635-653.

IS: 0009-4021

PT: Journal; Peer-Reviewed-Journal

AB: Assessed the health status and medical care needs of 668 children in 8 foster care homes in New York City, and examined the relationship between the cost of the care, the health needs of the Ss, and the structure and functioning of existing medical care programs provided by the agencies that assume responsibility for the children. The assessment consisted of a developmental examination for infants and children under 6 yrs old; psychological testing for school age children; psychiatric evaluations for a randomly selected subsample of Ss over 6 yrs; a complete medical history and physical examination of all systems; vision, audiometric, and dental screening tests; and a laboratory workup. Results show the following: (a) 29% of the preschool Ss tested for developmental delays were judged to be "abnormal" or "questionable" in the areas of personal-social, language, and fine or gross motor abilities. (b) 70% of the Ss screened by a psychiatrist were rated as having moderate to severe mental impairment. (c) 45% of the Ss had at least one chronic problem. (d) Ss of all ages were found to be less healthy than youngsters from other pediatric populations representing different social, cultural, and economic strata. (52 ref) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

1976 – 1967

AN: 1975-26301-001

TI: School experiences of foster children.

AU: Canning,-Rebecca

SO: Child-Welfare. Vol 53(9) Nov 1974, 582-587.

IS: 0009-4021

PT: Journal; Peer-Reviewed-Journal

AB: An exploration of the educational experiences of a total of 25 elementary, junior high, and high school students revealed serious problems of adjustment to the school environment. In addition to disclosing patterns of defensive reaction, ways in which insensitive handling by school personnel aggravated adjustment problems are discussed. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1974-01309-001

TI: Children who have been "in care": An epidemiological study.

AU: Wolkind,-Stephen; Rutter,-Michael

SO: Journal-of-Child-Psychology-and-Psychiatry. Vol. 14(2) Jun 1973, 97-105.

IS: 0021-9630

PT: Journal; Peer-Reviewed-Journal

AB: Conducted an epidemiological study of psychiatric disorder among 10-11 yr olds in 2 communities. A strong association was found in boys between antisocial disorder and a history of a short period in foster-care or in a children's home. This association was much less evident in girls. At the time of study, years after the period "in care," most of the Ss were living in large families characterized by parental discord. It is suggested that it is this long-term family disturbance which leads to the antisocial disorder rather than the short period of care per se. Findings also suggest the need for preventive treatment for families seeking short-term placement "in care." (16 ref.) (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1972-02696-001

TI: Persistence of mourning in the foster child as related to the foster mother's level of maturity.

AU: Walker,-C.-William

SO: Smith-College-Studies-in-Social-Work. Vol. 41(3) Jun 1971, 173-246.

IS: 0037-7317

PT: Journal; Peer-Reviewed-Journal

AB: Investigated the association between persistence of mourning in 26 foster children and the foster mother's level of functioning. Findings strongly suggest that the foster mother's functioning affects the child's manner of coping with grief and his interpersonal relationships. Children living with the "need-bestowing" foster mothers were less expressive of feelings about loss, especially anger, more passive and submissive in their interpersonal relationships, and less invested in school and family tasks. Fantasies of these children revealed that they were less able to cope with feelings about loss and more prone to feel depression, incompetence, and a sense of rage. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

1966 – 1917

AN: 1949-00814-001

TI: Psychiatric problems amongst evacuated children.

AU: Scott,-W.-Clifford-M

SO: British-Journal-of-Medical-Psychology. 21 1948, 171-174.

IS: 0007-1129

PT: Journal; Peer-Reviewed-Journal

AB: The statistical portions of the report are based on the diagnosis of 100 children living in foster homes who were examined as outpatients, and 100 who had to be admitted to Special Hostels because of the severity of their disturbances. The conclusion drawn is that more psychiatrists should interest themselves in child psychiatry. (PsycINFO Database Record (c) 2005 APA, all rights reserved)

AN: 1949-00811-001

TI: Conclusions from psychiatric work with evacuated children.

AU: Alcock,-Theodora

SO: British-Journal-of-Medical-Psychology. 21 1948, 181-184.

IS: 0007-1129

PT: Journal; Peer-Reviewed-Journal

AB: Depression, associated with mourning, is very common in children temporarily or permanently without families. Although good foster homes are to be preferred to hostels, good foster homes are so few that better methods must be found for bringing up children in group homes. Living in an institution is most damaging to children under 5. There exists in adults an impulse of hostility, often deeply unconscious, to children who are not actually or emotionally their own. (PsycINFO Database Record (c) 2005 APA, all rights reserved)