

F F T A



Foster Family-based Treatment Association

Annotations of Research in Treatment Foster Care

Citation

Dozier, M., Peloso, E., Lindhiem, O., Gordon, M. K., Manni, M., Sepulveda, S., & Ackerman, J. (2006). Developing evidence-based interventions for foster children: An example of a randomized clinical trial with infants and toddlers. *Journal of Social Issues*, 62(4), 767–785.

Keywords

Evidence-based treatment, foster care, attachment, behavior, infants and toddlers

Research Questions

- Are time-limited interventions successful at improving regulatory capacities of young foster children?
- Is early intervention effective in improving or preventing regulatory issues typically following early caregiving disruptions?

Method

Subjects: The study sample included 60 infants and toddlers (ranging in age from 3.6 to 39.4 months old) in two mid-Atlantic states referred during their initial placement into foster care. Foster parent and birth parent (or proxy) permissions were obtained prior to participation. The study also included a comparison group of 104 typically developing children who had never been in foster care.

Design: The study was a randomized clinical trial. The 60 children were randomly assigned to one of two intervention groups following enrollment: Attachment and Biobehavioral Catch-up or Developmental Education for Families. Foster parents and birth parents were blind to condition.

Materials/Measures: Both interventions consisted of 10 sessions, individually administered in the foster home by experienced social workers or psychologists. The experimental intervention, Attachment and Biobehavioral Catch-up, was designed to strengthen children's regulatory capacities by working with the child and caregiver on aspects such as following the child's lead, increasing physical comfort, and supporting the child's affect expression and modulation. The control intervention, Developmental Education for Families, was designed to enhance cognitive development, particularly language. Two measures were taken for both groups: a twice-daily collection of saliva to assess the child's cortisol levels (involved in response to stress and anxiety), and a version of the Parent's Daily Report to assess problem behaviors.

Procedures: Measures were taken 1 month after the completion of either intervention. Foster parents were trained in collecting saliva samples and did so at two different times (upon waking and before bedtime) over a 2-day period. These samples were then assayed in a laboratory, and

the two groups were compared to each other and to the comparison group of children not in care. Parents completed their behavior report daily for 3 days at post-intervention assessments.

Results/Findings

Results from the cortisol measure showed that children in the Attachment and Biobehavioral Catch-up group had lower cortisol levels than the children in the Developmental Education for Families group and that the former group was more similar to the 104 children who had never been in foster care. Parents in the Attachment and Biobehavioral Catch-up group reported significantly fewer behavior problems for toddlers than for infants, but this was not the case in the Developmental Education for Families group.

Limitations

Limitations included a small sample size, a brief time frame, and relation to a specific age group of children in foster care.

Application to Practice

Children in foster care typically show a number of regulatory problems that are connected to both childhood and adult functioning, making them a high-risk group for long-term problems. However, there are few evidence-based interventions specifically aimed at foster children. This study shows preliminary evidence that, with early intervention aimed at regulation, it may be possible to improve the regulatory capacities of infants and toddlers in care, at a time when caregiving disruptions may potentially be most damaging.

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