



Problem behavior among older youth in foster care: Examining gender

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ABSTRACT

Youth in foster care are at-risk for maladjustment yet little is known about social resources that may buffer their involvement in problem behavior. Using a random sample of older foster care youth ($N = 188$), the present study examined the associations between clinical (externalizing Axis I diagnoses) and non-clinical (aggression, substance use) indicators of problem behavior, risk factors (placement instability, maltreatment history, psychiatric hospitalizations, stressful life events, and violence exposure), and protective factors (warmth and acceptance (W&A) from biological parents, foster parents, and peers) for males and females. Males were higher on aggression and Axis I diagnoses but were similar to females on substance use. Several risk factors were significantly correlated with youths' problem behavior, whereas only peer W&A was associated with females' substance use. Moderating hypotheses were partially supported, particularly for females. Discussion highlights the importance of context in relation to risk and problem behavior among youth in foster care.

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1. Introduction

It is widely recognized that older youth in foster care are at-risk for difficulties in adjustment (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Lawrence, Carlson, & Egeland, 2006; Ryan & Testa, 2005), particularly in relation to involvement in problem behavior such as aggression and substance use (e.g., Aarons et al., 2008; Buehler, Orme, Post, & Patterson, 2000; Cusick & Courtney, 2007; Vaughn, Ollie, McMillen, Scott, & Munson, 2007). Increased problem behavior during adolescence is likely temporary (Moffitt, 1993; Moffitt & Caspi, 2001), with boys engaging in more problematic behavior than girls (Farrington, 2004). However, consistent involvement in problem behavior during adolescence has been associated with maladjustment that continues into adulthood (Moffitt & Caspi, 2001, 2005).

Moffitt and Caspi (2001) posit that negative family environments that include harsh punishment and inadequate parent–child bonding likely exacerbate at-risk children's involvement in problem behavior that, in turn, sets the stage for involvement in problem behavior during adolescence and into adulthood. Given that a majority of youth in foster care experience abuse and/or neglect in their homes of origin, it is likely that these youth are at greater risk for involvement in problem behavior (Bergen, Martin, Richardson, Allison, & Roeger, 2003; Thornberry, Ireland, & Smith, 2001). Moreover, the experience of foster care itself may increase youths' involvement in problem behavior after they leave care (Lawrence et al., 2006).

Several researchers have begun to systematically examine problem behavior among youth in foster care, with findings indicating that youth in care have higher rates of involvement in problem behavior than their agemates not in care (e.g., Cusick & Courtney, 2007; Ryan & Testa, 2005). Vaughn et al. (2007) examined substance use among older foster care youth and found that almost half had used alcohol or an illicit substance in the past six months and a third met the criteria for a substance use disorder. With a similar sample of older youth in foster care, Courtney et al. (2001) found that 71% of youth in their sample had committed at least one delinquent act while in care and 25% of youth had committed seven or more delinquent acts. Once discharged from care, many of the youth continued to engage in delinquent acts, resulting in incarceration for a large number of the males (27%) and many of the females (10%).

In a subsequent study that included a comparison sample of youth with no prior experience of foster care, Cusick and Courtney (2007) found that youth in foster care had higher rates of involvement in problem behavior on 10 indicators of misconduct that included property damage, theft, violent behavior, and drug dealing. Further, whereas boys in foster care offended more often than girls in foster care, a greater proportion of girls in foster care offended more often than girls not in foster care. The findings from Courtney et al. (2001) and Cusick and Courtney (2007) provide a valuable account of problem behavior among youth in foster care and underscore the importance of examining potential correlates of such behavior (Ryan & Testa, 2005).

1.1. Risk factors and problem behavior

Researchers have elucidated several risk factors associated with problem behavior among youth in foster care. There is evidence that

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prior maltreatment and placement instability have some association with youths' involvement in problem behavior (Aarons et al., 2008; Barth et al., 2007; Iglehart, 1993; McMillen et al., 2005; Rubin, O'Reilly, Luan, & Localio, 2007; Ryan & Testa, 2005; Taussig, 2002). For instance, physical abuse experiences have been associated with clinical levels of externalizing problem behavior among older youth in foster care (McMillen et al., 2005). Others have found relations between placement instability and involvement in problem behavior, with some studies reporting that youths' involvement in problem behavior is associated with subsequent placement instability (Aarons et al., 2010; Barth et al., 2007; Chamberlain et al., 2006; Leathers, 2006) and other studies reporting that placement instability is associated with youths' subsequent involvement in problem behavior (Aarons et al., 2010; James, 2004; Newton, Litrownik, & Landsverk, 2000; Rubin et al., 2007).

Furthermore, there is some evidence that risk factors for problem behavior among foster youth differ for boys and girls (Aarons et al., 2008; Lemmon, 2006; Postlethwait, Barth, & Guo, 2010; Ryan & Testa, 2005). For example, Ryan and Testa (2005) found that delinquency rates were higher among females with three or more substantiated reports of maltreatment compared to females with only one substantiated report of maltreatment. Age of entry into care, placement instability, and type of abuse were not significantly related to the number of delinquent acts for females. However, Aarons et al. (2008) did find associations between placement changes and externalizing behavior problems for females. Conversely, for males, age of entry into care (older youth) and placement instability, but not maltreatment history, were associated with more delinquent acts (Ryan & Testa, 2005).

Although less studied, there is evidence that psychiatric hospitalizations may be a risk factor for behavioral problems among youth in care. Piotrkowski and Baker (2004) found that psychiatric hospitalization predicted the occurrence of "very serious" emotional and behavioral problems among adolescent boys who resided in a residential treatment facility. To date, however, researchers have not examined the relation between psychiatric hospitalization and girls' involvement in problem behavior. Additionally, there is scant research on another potential risk for foster care youth: exposure to community violence.

Community violence is an important contextual issue to address when examining youths' involvement in problem behavior, especially among youth with a history of maltreatment (Lewis et al., 2010). Notably, researchers have reported that among maltreated youth, those who resided in high crime neighborhoods were found to be at greater risk for involvement in problem behavior as compared to maltreated youth who resided in low crime neighborhoods (Jaffee, Caspi, Moffitt, Polo-Tomás, & Taylor, 2007; Lynch & Cicchetti, 1998). The moderating role of gender was examined in the Jaffee et al. (2007) study, with results indicating that the effects of violence exposure on problem behavior did not differ for boys and girls (aged 6–7 years). The relation between violence exposure and externalizing behaviors also did not differ between boys and girls from an urban sample of at-risk youth referred to various counseling programs (Youngstrom, Weist, & Albus, 2003). These findings differ from findings among community samples of older youth, in which exposure to community violence is typically associated with more aggressive behaviors for males but not females (Schwab-Stone et al., 1995, 1999). A more recent study by McKelvey et al. (2011) may provide an explanation for this difference as they found that the relationship between violence exposure and externalizing problems was moderated by family conflict for males but not for females.

Collectively, the literature reviewed above illustrates the importance of context when examining problem behavior among older youth in foster care. It should be noted that many youth in foster care are confronted with a variety of risk factors that together may have a synergistic effect on their involvement in problem behavior. This is in accord with the position that risk tends to co-occur and can potentially exert a greater influence on individuals' adjustment in combination rather than singularly (Cicchetti, 2006; Rutter, 1990). Among the risk and resiliency

literature, for example, there is evidence that resiliency (defined as low levels of problem behavior) among maltreated youth was more likely when risk was low, i.e., fewer risk factors, but not when risk was high (Daining & DePanfilis, 2007; Jaffee et al., 2007). Accordingly, when examining risk and resiliency, it is important to assess the interactions between individuals and their environment (Rutter, 2006) including personal characteristics of the youth, such as age and gender (Daining & DePanfilis, 2007). For instance, older youth tend to be more resilient than younger youth (Daining & DePanfilis, 2007). Further, risk factors need to be examined in relation to protective factors to elucidate the contexts in which positive adaptation is present (Cicchetti, 2006).

1.2. Protective factors and problem behavior

One potential protective factor against youths' involvement in problem behavior is the quality of their relationships with others. Research among community samples of youth has consistently shown the positive effects of family relations on adolescents' involvement in problem behavior (e.g., Lanza, Huang, Murphy, & Hser, 2013; Youngstrom et al., 2003). For instance, higher levels of parental warmth, responsiveness and support have been associated with fewer deviant behaviors and less drunkenness and sexual risk taking among youth (Barnes, Farrell, & Banerjee, 1994; de Haan, Prinzie, & Deković, 2012; Lanza et al., 2013). Other researchers have found that less conflict with family was associated with lower levels of concurrent substance use among adolescents, particularly for girls (Skeer et al., 2011).

Research has also clearly identified the importance of the peer group in relation to adolescent problem behavior such that low peer warmth is associated with greater involvement in misconduct (e.g., Greenberger, Chen, Beam, Whang, & Dong, 2000). Research has also found the influences deviant peers have on foster youth as they exit the foster care system (i.e., age out: Shook, Vaughn, Litschge, Kolivoski, & Schelbe, 2009). Shook et al. (2009) found in their study youth aging out of foster care, that youth with more deviant peer affiliation reported higher levels of substance abuse and arrests, and were more likely to possess a diagnosis of antisocial personality disorder. However, Braciszewski and Stout (2012) importantly demonstrate that the literature is mixed on the influence of peers on substance for youth in care.

The nascent body of research that has examined relationship-quality with others and problem behavior among youth in foster care has found similar associations as those found in community samples of adolescents. In one study, Taussig (2002) reported that greater support from parents, teachers, and classmates was associated with youths' decreased problem behavior six years later (when the youth were 13 years to 18 years of age). Further, Legault, Anawati, and Flynn (2006) examined the associations between adolescents' relationship-quality with their foster parents and peers and adolescents' aggressive behavior, and found that greater relationship-quality with foster parents and peers was associated with lower levels of aggressive behavior. Likewise, Traube, James, Zhang, and Landsverk (2012) found that caregiver connectedness was associated with decreases in substance use.

Findings with regard to type of foster home and youths' involvement in problem behavior are mixed. For example, several cross-sectional studies indicate that youth in kin foster homes evidenced fewer behavioral problems compared to youth in non-kin foster homes (Berrick, Barth, & Needell, 1994; Keller et al., 2001), whereas Mennen, Brelsilver, and Trickett (2010) did not find differences by placement type on young adolescents' problem behavior. Further, longitudinal evidence indicates that changes in problem behavior over a two-year period did not differ by placement type (Vanderfaillie, Van Hoen, Vanschoonlandt, Robberechts, & Stroobants, 2013). Vanderfaillie et al. (2013) did find that supportive parenting behaviors were associated with fewer problem behaviors over time, conferring the belief that supportive and caring relationships can enhance resiliency among youth in foster care (Schofield & Beek, 2005). These limited findings suggest that youth in care may benefit directly from positive relations

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