Introduction

Why do some poor families lose their children to foster care placement while others who reside in the same neighborhood continue to live with their children? What role does the quality and quantity of social relationships play in this outcome? While social scientists have been generally concerned about child and family outcomes, little attention has been paid to the application of a sociological perspective to children in foster care (Wildeman & Waldfogel 2014). It is important to apply a sociological lens to this phenomenon (Wildeman & Waldfogel 2014) because children and families in foster care are mostly poor (Chand 2000, Eamon & Kopels 2006, Simms, Dubowitz & Szilagyi 2000) This study, therefore, is intended to bring attention to the outcomes of poor families specifically those involved in the foster care system.

*Why Study Foster Care*

Social scientists have applied a sociological perspective to numerous aspects of social life including the study of work, organizations and bureaucracies, the environment, the criminal justice system, health and their implications are far-reaching (citations). Thus, it is unfortunate that The experiences of families in the foster care system continues to be an understudied area for sociologists. Wildeman and Waldfogel’s (2014) analysis of four decades (1972-2012) of publications in the top three journals in sociology found that research published on foster care ranged from 3.3-0.2 percent. One would have expected that research on foster care to be more prevalent today for at least three reasons.

Research on foster care from a sociological perspective should be conducted for three reasons. The removal of children from families and their temporal or long-term placement into the foster care system disrupts the social institution of family. This is a social problem which affects about 500,000 children annually (HHS 2014) and should receive more attention since the most prevalent reasons for foster care placement are as a result of parental abuse or neglect (Pecora & Studies 2005, Simms et al. 1999, Szilagyi 1998) or caregiver incompetence of varying proportions (Takayama, Wolfe & Coulter 1998). As a consequence, children in foster care are often more apt to becoming victims of other social problems than children who reside with their birth families.

Secondly, more attention should be paid to the networks of families in foster care because the quality of kinship ties are influenced by the presence of psychological and mental stressors, such as eviction, that develop when the social network of young persons who are placed in foster care or face divorce is disrupted (Perry 2006). The consequences of foster care placements are long lasting for both parents and children (citation). Thus, a sociological perspective on this issue is particularly relevant.

Lastly, poor families are not homogeneous. Although the families involved in the foster care system are often poor (Chand 2000), not all poor families are involved. In fact, the influence of factors such as poverty creates an environment whereby poor families, specifically African American children, are more likely to be placed into foster care since they are vulnerable and more likely to display the characteristics that contribute to foster care placement (Derezotes and Poertner 2005). The disproportionate representation of African American children in foster care is the result of disproportionate need and social disadvantage (Dettlaff and Rycraft 2008, Hill 2006). It is therefore important to understand what behaviors, attitudes, or resources that are available to some poor families but are absent or minimized in others. This study attempts to look at this issue through a comparative method of African American families – those involved in the foster care and those who are not.

Literature Review

*Social Relationships and Low Income Families*

At least since Durkheim (1897), the theory of social integration reveals that there are consequences and benefits associated with one’s relationships. This theory states that the extent to which one is attached to others matter for mental and physical well-being (Durkheim 1897, Falci & McNeely 2009, House, Umberson & Landis 1988). In other words, isolation from one’s social networks and contacts has consequences.

Although definitions of social networks vary, scholars concede that social networks provide families with physical and socio-emotional assistance and can include relationships with family, relatives, friends, and acquaintances. An early definition of a social network states that it is “a set of ties linking members of a social system” (Barnes 1969:54). Social network has also been described as “the actual set of links of all kinds among a set of individuals” (Mitchell 1973:22) and consists of a set of persons in a reciprocal or interdependent relationship (Specht 1986).

According to some scholars, social networks continue to change in society. In *Bowling Alone*, Putman (2000:19) argued that social capital, defined as “social networks and the norms of reciprocity and trustworthiness that arise from them” has dangerously declined in America over the last few decades. Although analyses by Coleman (1988) and Ross et al. (2001) offered support for Putnam’s argument that social capital was on decline in disadvantaged neighborhoods, Kim (2010) found that social support and social ties mediated the effect of living in a disadvantaged neighborhood on depression and mental health. Networks can be blood or non-blood related and involves “a social relationship” of “extended famil[ies]” which includes persons who are connected by “blood, marriage or self-ascribed association.” This goes beyond “marital dyad, the nuclear family of parents and dependent children, or one-parent households,” (Johnson 2000:625). Dimensions of social networks can be both structural and functional (Miller-Cribbs and Farber 2008). The structural aspect of social networks include the number of persons in one’s social network who provide support while the functional aspect includes the nature and quality of support given and received from one’s social network (Levendosky et al. 2004, Miller-Cribbs and Farber 2008). Functional support also involves emotional support, informational support, material support (Harknett 2006, Hawkins 2010, Levendosky et al. 2004, Miller and Darlington 2002), and is provided by various members of one’s social network.

The presence or absence of these networks have great consequences for families. Stack (1974), whose work challenged the “tangle of pathology” and cycle of poverty belief about poor families (Aldous 1969, Bernard 1966, Moynihan 1965), found that low-income black families used social networks to mitigate the consequences of their economic marginality and to navigate their community environment. In addition, the type of networks created were a result of the strategies, mechanisms, and resilience to barriers faced by black women (Stack 1974). In their research on low-income mothers, Dominquez and Watkins (2003) observed that social support and networks can work together to promote or inhibit quality of life and mobility of mothers. Moreover, African Americans living in poor neighborhoods experience social isolation, lack resources (Tigges, Browne and Green 1998), and environmental stressors influence parents’ ability, specifically poor mothers, to use available social support (Ceballo and McLoyd 2002).

Social isolation, a lack of support, and conflictual relationships with members of one’s social network have been identified as contributors to the risk of child maltreatment and neglect (Beeman 1997, Corse, Schmid & Trickett 1990, Crittenden 1985, Gracia & Musitu 2003). These factors affect the quality of one’s relationship. On one hand, while the quality of social relationships has been found to be an important distinguisher between non-maltreating and maltreating mothers (see Beeman 1997), others have found that the quality and quantity of one’s social support is a significant predictor in the financial, psychological (Harknett 2006, Henly, Danziger & Offer 2005), and emotional well-being (Brown & Gary 1985) among adult Americans, as well as some immigrant parents in the United States (Turney & Kao 2009). Moreover, an association was found between families’ perceptions of the availability of social support as well as economic hardship and likelihood of being in poverty (Henly, Danziger & Offer 2005).

Several comparative studies have been conducted concerning differences in consequences of social support networks. For instance, in their study comparing poor blacks with non-poor blacks and whites, Tigges et al. (1998) found that poor blacks were disadvantaged on nearly all measures of social isolation used. They were more likely to live alone, had weaker connections to mainstream society, less likely to have “discussion partners”, and were less likely to have close ties (Tigges, et al. 1998:54). Brown and Gary (1985) found that there was little difference between the social and support networks of non-married and married African American women. On the other hand, findings of other studies have demonstrated that poor single mothers tend to be more socially isolated than married mothers and receive less assistance from their social networks (Pearlin and Johnson 1977, Weinraub and Wolf 1983).

Comparative studies that include both non-negligent and negligent mothers found that compared to non-negligent mothers, mothers who were negligent had weaker social support and were more likely to be dissatisfied with the dependability of their networks (Gaudin & Pollane 1983). Moreover, the relationships of neglecting mothers were fraught with conflict, mistrust, and discord (Beeman 1997). Through reciprocal agreements, however, some persons can mobilize others to participate in their social network (Stack 1974).

Methods

This study used a comparative case design (George & Bennett 2005, Neuman 2011) to address the research questions. I conducted open-ended qualitative in-depth interviews (Merriam 2002) to capture the respondents’ perspectives and experiences, and ethnographic techniques (Burawoy 1991) of data recording – field notes – to create a systematic way of collecting and recording observations of family visits and details about the neighborhoods in which respondents lived. These notes contributed additional data to the information gathered during the structured interview with families.

*Participants*

To participate in this study, interviewees had to belong to one of two groups. In group one, persons had to meet the following criteria: (1) 18 years of age or older, (2) self-identify as African American or Black, (3) gave birth to children who are 18 years and under at time of interview; (4) at some point had children placed into foster care, and (5) live in Erie County, New York. The second group of respondents had to meet the following requirements: (1) 18 years of age or older, (2) self-identify as African American or Black (3) have children 18 years and under presently, (4) did not have children placed into foster care at any time, and (5) live in Erie County, New York. Group one will subsequently be referred to as Foster Care Families (FCF) and group two will be referred to as Non-Foster Care Families (NFCF).

*Characteristics of Respondents*

The sample size consisted of 41 respondents. Six (15%) of the respondents were male while 36 (85%) were female. Thirty eight identified as African American, one person self-identified as biracial (black/Puerto Rican), and one self-identified as a person of West Indian descent. These two individuals are included in the sample because they first identified as black in the preliminary screening and were phenotypically black when I met them. The age range was 20 to 61 years (mean age 38). Sixty-one percent (n=25) of the respondents identified as single or never married, fifteen percent (n=6) divorced, twelve percent (n=6) were separated, and about 10 percent (n=4) were married. About fifty percent (n=24) identified as giving birth to one to three children under the age of 18, while 38 percent (n=15) gave birth to more than three children (that is, between 4 and 6 children). Fifty-one percent (n=24) of respondents gave birth to or fathered their first child between the ages of 19 and 29 and 38 percent (n=16) reported having their first child at 18 years of age or under. The average age of respondents when they had their first child was twenty-two years. Seventy-one percent (n=29) of respondents made $15,000 and under in the previous year, 10% (n=4) made between $15,001 and $20, 000 in the previous year, 15 percent (n=6) made between $20, 001 and $35, 000, and five percent (n=2) of respondents made over $35,000 in the previous year.

**Foster Care Families** (FCF). The nineteen respondents of the group FCF consisted of 17 (89%) women and two (10%) men. The age range was 20 to 61 years (mean age 40). Forty-four percent (n=7) persons had their first child between the ages of 19 and 29 while an equal amount (44 %) had their first at the age of 18 or younger. In addition, 11 (58%) of the respondents had given birth/fathered more than three children. A little more than half of the respondents (n=13) identified as single and/or never married, two were married, and two were divorced. Sixty-three percent of respondents (n=12) made $15, 000 or under the previous year. More specifically, 11 percent (n=2) did not work nor filed taxes the year prior, 32 percent (n=6) made $10, 000 and under the previous year, 21 percent (n=4) made between $10, 001 and $15, 000, and 32 percent (n=6) made about $15, 001 and above. Sixty-three percent of (n=10) respondents had a grade 12 or less educational achievement, 26 percent (n=5) had some college education, 16 percent (n=3) had an associate’s degree and five percent (n=1) had a bachelor’s degree.

Non-Foster Care Families (NFCF). The twenty-one respondents of NFCF consisted of 18 (86%) women and four (14%) men. The age range was 20 to 58 years (mean age 35). Fifty percent (n=12) of the respondents identified as single or unmarried, followed by 19 percent (n=4) who were separated and 19 percent (n= 4) who were married, respectively. “Age at first child” for the respondents ranged from 16 to 32. Fifty-seven percent (n=12) had their first child between the ages of 19 and 29 while 33 percent (n=7) of the respondents had their first at the age of 18 or younger. In addition, 19 percent (n=4) of the respondents had given birth/fathered more than three children while 86 percent (n=18) had between one and three children at the time of interview. One respondent (5%) claimed to make more than $35, 000 the previous year, nine (43%) made below $10, 000 while 8 (38%) made between $10, 001 and $15, 000. In terms of educational attainment, thirty-eight percent (n=8) of respondents reported achieving a Grade 12 or less education, followed by some college but no degree (n=12).

Interviews were conducted at an agreed location – such as the homes of the respondent or local library - to ensure confidentiality. Data collection took place during December 2011, March – August 2011, and May – July 2012. The respondents resided within the urbanized area of the Buffalo-Niagara New York metropolitan area and lived in the 10 of the predominantly black zip codes in the City of Buffalo.

The in-depth, semi-structured interviews lasted between 45 and 70 minutes. After each interview, I wrote full field notes that contained observational and analysis sections within 48 hours of the interview. The interview questions were intended to capture the experience of the family with the child welfare system (FCF), attitudes and beliefs pertaining to marriage, and relationships and having children. It also included questions to respondents about social networks and social ties, parent management skills, neighborhoods, and perspectives of the neighborhood and its relation to raising children. I also collected demographic information on the parents such as gender, age, race, religion, educational attainment, physical and mental history, types of income, total number of children, and number of children in foster care.

Findings

*“That’s My Backbone”: Essential Components of Social Relationships*

When asked which of her relatives and friends are actively involved in her life and the lives of her children, Michelle responded:

they all are…that's my backbone, that’s my family for my kids, so like you know when I go to work, I work 42 hours, my daughter and my son goes across the street until I come home. And that's my mom, my sister is there and my brother he comes over, like now today my baby didn't go to school so he's across the street by my mom’s; but my mom is gone and my sister is gone, and he has my son so, while I’m doing the interview, so they all there for me.

As a single mother, Michelle depended on her family’s assistance. Families such as Michelle’s provided social support and social leverage (de Souza Briggs 1998, Dominguez & Watkins 2003) which allowed them to cope with the daily stressors of life, facilitating her ability to raise successful children. Michelle also socialized and relied upon close friends. When asked with whom she spent the most time with, Michelle explained:

… it just depends on, well you know, when you go to school and stuff, go to college, like my one girlfriend, she's in research so I don't get to see her much but we often talk over Facebook or something, and…I’ll say out of all I have three here that I can go with, we go out, have dinner, movies…once a week, twice a week, yeah so you’ll see me eating somewhere like Mondays I go out with friends, we go out to the Boston hotel.

Michelle’s narrative illustrates essential components of social relationships typical of the relationships described by NFCF respondents such as support from social networks. In part, because of these relationships, Michelle has not lost her children to foster care, nor has she been involved with any agencies. These relationships positively impact the health and well-being of individuals (Biblarz & Gottainer 2000, Denuwelaere & Bracke 2007, House, Umberson & Landis 1988); this impact echoes in the respondents’ perspectives concerning social isolation and social integration. However, although these relationship, both kinship and non-kinship networks, are relied upon by the urban poor to mitigate economic and other personal troubles (Hannerz 2004 [1969], Miller-Cribbs and Farber 2008, Stack 1974) this has been influenced by poverty (Desmond 2012, Miller-Cribbs and Farber 2008, Smith 2007) among other factors.

While respondents in FCF stressed the importance of social relationships these same relationships were also often riddled with conflict. Moreover, these respondents, especially those whose children were involuntarily placed into foster care, encountered life events that along with these tumultuous social relationships, resulted in the placement of children into the foster care system. Some of these parents, as a result, had their parental rights terminated. Davina, a 42 year-old mother of eight, embraced both aspects of voluntary and involuntary placement of children into the foster care service. When her first son was born she asked her grandmother to raise the child because of her addiction to illegal drugs and alcohol. She then explains that the placement of the following six children consisted of both voluntary and involuntary placement. After the placement of her first son:

The kids kept coming bam, bam, bam, bam and every time they came I was doing drugs. It was like a cycle you know but he [her husband] wouldn’t let me get an abortion. So, in our mind we thought we was going to get clean and it never happened and instead of me putting them through it or not wanting to put them through it cause I seen how other people would try to take care of their kids and be hooked on drugs and alcohol and the kids always wind up not being taken care of, you know, I just didn’t want that and I knew I couldn’t have an abortion so I just knew the best thing to do was not try to play with my life or theirs because I just didn’t know what would happen and I didn’t want that, I mean, I just didn’t want that so I just gave them up

*So you also called [CPS] and gave them up?*

Yea

Davina indicates that she placed them in foster care and signed away her rights, she then continues:

I was using drugs with them, of course they came out toxic and then once that happened then CPS get involved and they wouldn’t let them come home. They gave us this list of things to do and we had to go to you know out-patient, we would have to do this and do that and it never worked out and then they went into foster care. I knew it [the list] was never going to happen so I told him the best thing to do is just to give them up for adoption, the families that had them in foster care, we could, could we leave them with them since they was with them and that’s what we did

*Is there someone you could have turned to for assistance?*

No, there was nobody to turn to, no. My grandmother raised me and she was raising my son. I definitely couldn’t give her no more, the kid’s father, hell, he was just as worse as me.

Davina explains that her relationship with her relatives has always been complicated. Davina exemplifies two issues; while she is an example of the complexities observed in the lives of the members of FCF, she also illustrates the functioning (or non-functioning) of essential components of social relationships – networks and support – and their ability to influence the well-being of families. This is in accordance with researchers who have found that some low income families sometimes experience noncooperation from their networks especially during times of intense need (Miller-Cribbs and Farber 2008, Smith 2007). Indeed, it might even be better to be isolated than to deal with the complexity and hardships that results from emersion in relationships with family and friends (Rainwater 1970, Smith 2007).

*“Now These are Friends, They’re our Family”: Interactions within Social Networks*

To analyze the impact of social networks, I asked respondents about the persons they interacted with – relatives, friends, and neighbors – and the frequency of such contact. I also inquired about the overall size of their networks, regardless of whether they interacted or not with these persons. As Beeman (1997) concluded in his work, I, too, found that there were noteworthy differences in how these different groups of parents perceived their network relationships. Both group of respondents in my study discussed the importance of social networks and attested to its importance, however, contrary to Beeman (1997), I found that size and intimacy levels of respondents and their social networks varied within and between the two groups.

While participants of both groups stressed the importance of their social networks and that receiving support from members of these networks was crucial in their lives, there were some differences in how these interactions played out. First, the parents/guardians who had not been involved in foster care were more likely to indicate and discuss their reliance on the members of their social network. In poor families, reliance and the expectation of reciprocity was a given, especially if this support could not be found within the marketplace (Dominguez & Watkins 2003). Second, I found that these parents/guardians spoke about their social networks with greater intimacy, as in the case of Shemon, a divorced father of two who stated, “Nowadays aint nothing promise so every chance you get, you know, it’s important. Family, family is the foundation you know.” Likewise, Michelle talked about her family and friends as being her “backbone,” while for Binta there was no distinction - friends were family and family were friends.

Those not involved in the foster care system talked more freely about their reliance on their social networks. If family members were not available as in the case of Michael, of NFCF, then friends and the “village” would suffice. Michael’s family network member includes only his mother. He explained that his family “doesn’t deal well” and “I really don’t [interact with them] because I’m doing other things and I had a bad reputation with people really don’t wanna be bothering me for a long time; so I left it like that….So the only person I really interfere with is my mother really.” Since this relationship with his mother is not intimate, Michael therefore supplements his network with a best friend, members of his local organization, and persons from the neighborhood. He explained, “I usually take the village [approach], I do things kinda differently, and I’m not your typical guy and thing.

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Michael established a support group which provides emotional and physical support to single fathers in the neighborhood. The director, Angela provides support, mentoring, and friendship to Michael’s daughters as well as a cousin who sometimes spends time with his girls. Michael relayed that his network is centered on those able to provide support to his daughters as well as persons that he may be able to assist, like those of his father’s support group. He also gave a few examples of when he went outside of his social network and sought the help of the ‘village’ in raising his children. He would seek advice when necessary from the “village,” which were mainly strangers. Michael’s example could be that of a disposable tie (Desmond 2012) and this method of seeking support outside of one’s network was not typical of other respondents of NFCF. Instead of a network of family and friends, weak ties, for example, strangers in the neighborhood and coworkers provided sufficient support to assist in the raising of their children.

For the most part, NFCF respondents indicated that they frequently interacted with several family members and these networks. These networks appear to aid in alleviating stressful and other debilitating situations (Kim and McKenry 1998). While previous literature focuses on poor families in general, these networks though sometimes contentious, provided much needed resources in order to adequately take care of children,

Although many respondents in FCF discussed having friends and family members within their social networks, they indicated that their social networks paled in comparison with those who had not been involved in foster care (NFCF). In instances when respondents interacted with family members, the relationships were often complicated.

Among the parents/guardians whose children were placed into foster care (FCF), two respondents – Jacqui and Thea – had very close/intimate relationships with members of their social networks, however the specific circumstances concerning their foster care placement cases prevented the members from their social network from being able to assist in averting placement of the children into foster care. Jacqui who was charged with neglect and kidnapping when she returned to the U.S. after fleeing with her children to a Caribbean island explained that her friends and mother were aware of her daughter’s molestation and some even encouraged her to flee to this island – which she did. Thea, on the other hand, explained that her mother’s history with the foster care services prevented her from being able to assist Thea when the foster care agency placed her children into care. In Thea’s case, her boyfriend's issues with the law resulted in the temporary loss of her children to foster care. Her mother was available and willing to assist in caring for her grandchildren but because of her mother’s previous case with the foster care services with Thea’s sister, her mother was unable to assist.

The remainder of FCF respondents framed the discussion of their interactions with the members of their social network differently than the members of NFCF. For example, Hanniah, a mother whose two children had been placed into foster care, explains that she could not depend on her family. In fact, she did not even want her family members, particularly her sisters to know that her children were taken into foster care. Hanniah stated:

I couldn’t rely on my mother, my father, my sister, my brother because at the time my mother was all sick, my father was working, my sister was working, my brother was working.

Although Hanniah lived next door to her parents, unequal reciprocity and tensions within the family made reliance on these family members difficult (Dominguez and Watkins 2003).

Similarity, another respondent, Shana whose daughter passed away from leukemia and whose son was in foster care, spoke of the complicated relationship she had with her family:

My parents, my dad I tried to get involved with him, I tried to rationalize with him but he spoke so nasty to me, he told me he wished he didn’t have any kids, when I asked him for a paternity test. I remember a long time ago my mom used to be real nasty to me when I was growing up not to call her mom one time she told me just call her Denise. I wanted a maternity test, she said no I just have to trust her, she refused to get the maternity test and I thought that was kind of strange being that I didn’t have to prick you or anything like that, just a little simple swab, you know.

These family tensions came at a cost. Shana was unable to depend on her family when her son was taken from her and placed into foster care. In fact, at the time of the interview, her son was in non-kinship care although Shana’s family lived in the same city as she did. She stated that though she knew many people, they were ‘associates” not friends.

*“Imma stick to myself because when I was growing up everything wasn’t about family”: Differences in the Structure of Social Networks*

The structural characteristics of network relationships can include size and density among other characteristics (Beeman 1997). In terms of network size, I found that there were differences in the size of the social networks of the two groups of respondents, especially their friendship networks. The respondents of NFCF, in general, reported between one and five close friends with one respondent, Ingrid, indicating a total of fourteen close friends. Ingrid’s explanation was that because she lived in various cities, she had a larger social network. She stated, “these are the women in my life and a few men that I’m very close to…I mean I can call them up for anything and they would be there.” Several of Ingrid’s friends are involved in the life of her daughter. This reliance that Ingrid’s statement infers is in contrast to findings which indicate that FCF members were generally more isolated from their social networks before and after placement.

Parents and guardians whose children had been involved in foster care (FCF) were more likely to report fewer persons within their social network than those who had not been involved in foster care. They were more likely to report that they either had no close friends or that their friendship network included no one. Although I was unable to explore in detail the association between small network size and foster care placement, I gained some insight into the struggles that parents experienced when they lacked the benefits that members within a social network provide. The data showed that those who were more likely to face the placement of their children were more likely to have a smaller social network resulting in greater social isolation. Sociologists understand that diminished social networks, especially among poor and/or single mothers, may lead to increased social isolation and other problems (Bess and Doykos 2014, Pearlin and Johnson 1977, Weinraub and Wolf 1983) and parents who had experienced foster care are not exempt.

Respondents provided several reasons for minimal interaction with family members, relatives, and friends. Lilia, a single mother of six, stated: “I’ve been a loner for a long time. I only stay to myself, my relatives, they pretty much doing themselves.” I asked Lilia why her family relationship was structured this way, and she responded: “Imma stick to myself because when I was growing up everything wasn’t about family so.” All of Lilia’s children were involuntarily taken and have been adopted with the exception of her firstborn. Although she allowed her oldest to be adopted by her maternal grandmother, they did not have a relationship then. She explains:

Nope, you gotta remember back then, my grandmother now she don’t drink, back then my grandmother was gay so she had the mind of a man and a woman and she sold drugs, she smoked the weed, um, she was just somebody, we didn’t have a relationship back then, we didn’t so back then I couldn’t talk to nobody back then.

Several respondents indicated that before placement, they had a small friendship network (often consisting of one or two members) or a nonexistent one due to drug use and domestic abuse in their lives. When they were interviewed, little had changed in terms of the size of their social network. Shaquita, for example, when explaining her social relationships before her children were placed into foster care stated, “I was like alone I didn’t really deal with people you know what I’m saying, as far as hanging with people I always was by myself.” I then inquired about her friendship and family network structure and she explained that though she had three longtime friends in her life, at the time when she encountered the foster care services, she was isolated from these friends. She implied that her drug use isolated her from these friends and the subsequent placement of her children.

Wesley, on the other hand, who had voluntarily placed his son into foster care due to his son’s disruptive behavior, stated that he had five friends that he could depend on for assistance. These friends were available during placement however, the problem, he stated, was his son’s unmanageable behavior and voluntary foster care placement of his son was his only option. Wesley was the one exception that I found among FCF respondents who indicated a larger number of friends within his social network. Among the other respondents interviewed those who had voluntarily placed their children in care did so because of their own personal issues such as drug abuse or domestic violence rather than inability to care for their child.

Some of the FCF respondents discussed interacting and seeking assistance when needed from acquaintances which included neighbors, church folks, their adult children, and Facebook friends. For Cara (from FCF), her closest friend was her adult daughter who she relied on for everything. She stated:

My oldest daughter, that’s my best friend. I tell her everything, she knows everything about me, I don’t have to sugar coat anything with her (laughs). That’s who… and when I go to the hospital or anything, she’s the one that goes with me, if I need to go anywhere, she’s the one who takes me, you know. She’s the one if I’m going through something, she’s the first one I call.

The differences between the structures of social networks and the extent of interaction among the two groups of respondents are notable. Family members/relatives tended to be particularly important parts of all respondents’ social networks, however, the respondents varied in terms of the number of persons actively functioning as part of their social network and the ability of the small number of network members to assist them. Although networks, especially non-kin networks (friends and acquaintances) were generally small, the respondents who had never been involved in foster care tended to rely heavily on their social networks for support compared to the other individuals who had been involved in foster care.

“I Can Depend on My Family Members to Assist Me”: Social Support

Respondents recognized the impact of social support (or lack thereof) from family, friends, neighbors, and extended family members on their choices and the well-being of their children. Social support, as de Souza Briggs (1998:178) notes, is the “social capital that helps one ‘get by’ or cope. This might include being able to get a ride, confide in someone, or obtain a small cash loan in an emergency.” The importance of social support was illustrated in the examples given by several respondents and was a common theme in my interviews for both groups of respondents. Thus, not only did they mention members of their social networks but they pointed out the individuals within these networks who provided the necessary support and who did not.

Tania, who suffered from a mental breakdown which she explained as part of the reason why she lost her children, described the loss of her support network:

I guess it was the fact that the last two of the deaths was mother and my child back to back. It was like that was my world. You know what I mean? And I know I had to have strength for the other two [children] because they needed me but I just couldn’t pull through. So my aunts stepped in and they got the kids. They came and got them, and before I knew it they had them, then they still had them, and they still had them, and then next thing I knew paper was thrown in. They was having court dates but I was never given a paper or call to go to court or nothing like that. I never even knew about the court date except for distant relative who would let me know. This is very serious and then I would get down there and I had just missed them or it was a missed date or postponement or something.

Tania continues to explain that about nine of her family members, those closest to her, passed away within a short period of time. When the last two members of her family passed away – her mother and son – she suffered from a mental breakdown. She stated that her mother was her greatest form of social support, and although her sisters were able to step in and care for her children, Tania claims that she is not close to them and seldom interacts with them today. Similarly, in an interview with another FCF respondent, Giana revealed her lack of dependable social support networks. Although others knew about her abusive domestic relationship, she notes that no one “stepped in to get them”. While it is true that poor mothers tend to be socially isolated with less social contacts (Pearlin and Johnson 1977, Weinraub and Wolf 1983), this is magnified when someone loses important members of their social network or is unable to receive assistance when needed as in the case of Giana and Tania. For those in foster care it seemed that this isolation caused greater problems in their lives that resulted in foster care placements. For those NFCF who had not been involved in foster care services, it was equally important to have social support. Sherona, a 21 year-old mother of one boy explained that her family members as well as close friends had always been supportive: “I probably be less mother to my son because it just me by myself doing everything and it be tiring”.

Another respondent, Melanie, in response to the question concerning the kinds of assistance she received from her family, stated that she received considerable support:

Oh, like my mother, yeah! My brother, yeah! I got a lot of support, I have a lot of support. Yeah, all I gotta do is pick up the phone and call my brother. If I really need him, he come out. He got two cars. He come right over come pick me up and take me where I gotta go.

Every time. He like my father, he like my backbone. I can count on him. If I can’t count on my mother and my father, I can count on him. I can count on him more than I can count on my other brother. I can count on both of my brothers but my older brother I really can count on.

Ingrid too relayed that she could always count on her family for support and assistance:

My mother, my grandmother, I take some things from my sister, my friend Agnes, my brother, a very good father, yea that would be about it.

*And have they always been involved?*

Well yeah!

*How often you could count on them to assist you with caring for your children?*

Oh my God! Always! Always!

These examples demonstrate that a supportive social support system is a critical asset for parents and children to thrive. The loss of valuable members of one’s support network may make it difficult to manage, as illustrated in the case of Tania who suffered from a mental breakdown and permanent loss of her children. Previous research indicates that a loss or lack of social support can be detrimental to the mental and emotional well-being of individuals (Sheppard 1994, Stenfert Kroese et al. 2002). Social support provides a buffer during traumatic circumstances.

Discussion and Conclusion

It has long been discussed that factors such as drug abuse, poor housing quality, physical and mental issues, incarceration (Chaffin, Kelleher and Hollenberg 1996, Walker, Zangrillo and Smith 1994), and parental socioeconomic status (Duncan et al. 1998, Ludwig and Mayer 2006, Ou et al. 2007) play a role in the well-being and outcome of children. Low-income families who have been involved with the foster care system, experience similar structural challenges in their neighborhoods yet, their outcomes may be different compared to other parents living in the same physical space. The forty-one families in my study were all similarly exposed to social problems such as a lack of jobs in the neighborhood, substance abuse, crime, poor housing quality, and physical and mental challenges. However, some families had their children placed (whether voluntarily or involuntarily) into the foster care system while others did not.In fact, there is significant variation in outcomes among those who face similar structural conditions (see a review of the literature by Newman and Massengill 2006). This study sought to develop a better understanding of these differences. The study took a comparative approach – those families involved in foster care and those who weren’t – to investigate the key factors that were absent and/or present which would influence the involvement of families in the foster care system. Special focus was placed on examining the structural factors that would influence involvement in the foster care system.

The findings of this study lead to an important conclusion: that social relationships – which include networks, support, and integration – play crucial roles in the placement (or non-placement) of children into foster care. It is important to consider the relationship between social networks, risk factors such as homelessness, drugs, and poverty, social isolation, and placement into foster care. In other words, what role do social networks and isolation play in foster care placement and how exactly is that influenced by risk factors? According to my findings, while social networks are important for both groups, it appears that risk factors such as parental substance abuse, poverty, and homelessness play a role in isolating parents whose children end up in foster care from members of their social network. I do not argue that the mere presence of risk factors will influence outcomes or result in isolation but rather the extent to which these risk factors are present is important. It results in isolation of parents from their social network members and results in an inability to care for their children.

While relatives and friends were important sources of support for single- and dual-parent families in this study, the relationships to these support networks varied among those who had been in foster care (FCF) and those who had not (NFCF). Parents who had been involved in foster care displayed more complexity in the relationships that existed with members of their network. In addition, their network was smaller in size, especially their friendship network. While these parents and guardians could list an extensive number of relatives, when it came to whom they relied on for assistance or interacted with – that is, their social network – this number severely dwindled or was nonexistent. Those involved in the foster care system or assisting families at risk of involvement in the social services system should pay attention to this issue.

In addition, although family and friends were very important to both groups, many of those involved in foster care were unable to rely on such relationships because of their dysfunctional nature. While some respondents in FCF may have had certain types of social support from family and/or friends, the necessary support to reduce or impede the placement of their children into the foster care system often was unavailable and thus placement into foster care was the result. As Stack (1974) indicates, many impoverished families are able to better face life’s challenges in part due to the different kinds of social support they receive. However, some families in similar conditions are unable to mitigate these challenges and subsequently engage with the child welfare system (Bishop & Leadbeater 1999, Martin, Gardner & Brooks-Gunn 2012, Martinez & Lau 2011). When one is totally or even somewhat isolated from their networks when they need assistance, an individual may find it more difficult to get the necessary assistance. This is a trend observed in the FCF in this study.

Also in this study, the parents/guardians who had not been involved in foster care were more likely to indicate and discuss their reliance on members of their social network. In poor families, reliance and the expectation of reciprocity was a given especially if this support could not be found within the marketplace (Dominguez and Watkins 2003). The respondents who had not been involved in foster care tended to have the necessary support specifically, practical and emotional, when it counted the most. This may contribute to the differences in outcomes – foster care versus non-foster care placements. These individuals were more likely to rely on the individuals in their network, and some knew where and how to find the necessary capital outside of this network. They were also able to provide various examples of how types of social support proved beneficial in assisting them in taking care of their children.

As with all studies, this study has its limitations. First, because of the difficulty of finding high risk respondents (those who had been involved in the foster care system), the study relied on a convenient sample. However, it is precisely these poor families that give insight to differences in outcomes among the poor. This indicates that there is a possibility of selection bias meaning that it was only the parents who saw the advertisements that were selected for the study.

My research method focused on an intraethnic comparison of families who identify as Black or African American, but this may limit its applicability to other racial groups. It is widely accepted in sociology that race and ethnicity are social constructs but at the same time scholars understand that racial categorizations have great consequences for how one perceives oneself and how one is perceived by others. Moreover, because Hispanics have different cultural experiences than African Americans, this study may not be applicable to Hispanics (and other groups). It is also limited in its contribution to understanding ethnic diversity in outcomes.

Although I gained insight into the struggles that parents experienced because of their network size and because they lacked the benefits that members within a social network provide, I was unable to fully explore the relationship between a small network size and foster care placement. A question for future research would be: to what extent does the size of the social network of those who have lost their children to the foster care services matter?

However, the findings of this study underscore the importance of understanding the complexity of social relationships and how they vary in function among the poor. Social networks and social support can be helpful or hurtful but are relevant when considering the outcomes of the poor, in this case the reasons for the placement of children into the foster care system. Social relationships specifically, the quality of these relationships, may be helpful in understanding and predicting the likelihood of placement into foster care, since social support and social networks can work together to promote or inhibit the quality of life among low-income mothers (Dominguez & Watkins 2003). Most importantly, the right or most relevant type of support from friends and/or relatives must be present when poor families go through challenging or traumatic times. This may serve as a buffer as well as a resource that deserves more focus. If the social network is unable to provide relevant support then the quality of life of disadvantaged families is impacted.

This research contributes to the disproportionate minority representation (DMR) debate. The concept of disproportionality or DMR means that compared to their proportion in the general population, minorities, especially African Americans, are overrepresented in the child welfare system (Ards et al. 2003, Hines et al. 2004). Many social work scholars (e.g. Busch et al. 2008, Cross 2008, Fluke et al. 2003, Hill 2003, James et al. 2008, McRoy 2008) have contributed to this conversation although many have taken an interethnic approach by comparing minority parents/guardians to whites (e.g. Fusco et al. 2010, Schuck 2005). My work reveals that there are differences between those of the same racial and class backgrounds.

While poor families, in general, may face similar structural barriers and challenges and even reside in the same local space, there are subtle differences among them that were explored in this study. Thus, poor parents may be at similar risk to high crime and poverty, for example, but these risks do not always result in foster care. An important factor that contributes to whether placement occurs is the quality and quantity of social relationships as well as the level of social integration. The various facets of the child welfare system should examine the entire familial picture, looking at risk factors, the presence or absence of social support, the quality and size of social networks, and the life history of families (e.g. if the individual has a history of abuse of foster care placement as a child). My study presents the perspectives of poor families who had been involved in foster care and those who had not. The study implies that there are varying experiences within race and class differences and experiences occur among the poor. Thus, social service case workers and others involved in the child welfare system including researchers should entertain more than only racial differences in an attempt to understand foster care placement. I do agree that racial differences exist and that race still matters in the outcomes of families but scholars should pay more attention to differences across a wide assortment of factors.

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