

## **Development and validation of a new scale to assess motivations for fostering**

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### **Declaration of Interest**

The authors report no conflicts of interest.

### **Data Availability Statement**

Data used in this study are available from the corresponding author on reasonable request.

### **Ethics approval statement**

This study was approved by the Ethics Committee of Iscte - University Institute of Lisbon (approval number 129/2021).

# Development and validation of a new scale to assess motivations for fostering

## Abstract

**Background and Purpose:** Motivations for fostering are linked to placement outcomes, making them a crucial component of the assessment process of foster families' applicants. This study examined the psychometric properties of a newly developed scale to assess motivations for fostering. **Materials and Methods:** A total of 447 Portuguese adults completed an online cross-sectional survey. Participants answered the MIAF – Motivations for Fostering Scale (MIAF-MFS; ProChild CoLAB & SCML, 2024) and reported on sociodemographic data, perceived knowledge about family foster care, and intention of becoming a foster family. **Results:** The exploratory factor analysis revealed a 4-structure factor, explaining 52.3% of the total variance of the MIAF-MFS: Self-centered parenting motivations (8 items), Child-centered and altruistic motivations (7 items), Motivations related to previous contact with family foster care (3 items), and Self-centered personal motivations (4 items). The confirmatory factor analysis supported this factor structure. Convergent validity was shown by significant associations between the MIAF-MFS factors and perceived knowledge about family foster care and intention of becoming a foster family. The MIAF-MFS factors presented acceptable to high reliability. **Discussion and Conclusion:** The resulting 22-item MIAF-MFS could be a promising tool to support caseworkers in the assessment process of foster families' applicants.

**Keywords:** family foster care, motivation, fostering, intention, scale development, psychometric properties.

Worldwide, a high number of children are separated from their families for protection reasons (Masson & Parton, 2020). In Europe, more than 750,000 children are estimated to live in alternative care (UNICEF & Eurochild, 2021), and almost 400,000 are in out-of-home placement in the United States (AFCARS, 2023). Evidence on child alternative care suggests that family foster care is generally more protective of children's development than residential care (Van IJzendoorn et al., 2020), offering a more individualized, stable, and responsive context for children's development (Bakermans-Kranenburg & van IJzendoorn, 2024; Li et al., 2017). For instance, cutting-edge research has suggested that family-based care can act as a buffer against the effect of early deprivation stress on executive functioning difficulties in adolescence (Wade et al., 2023). Nevertheless, one of the main challenges in family foster care across many countries is having a sufficient number of foster families equipped with the skills needed to adequately care for children (e.g., Gilligan, 2019). The recruitment and retention of foster families are challenging (Davi et al., 2021; Randle et al., 2012), even though in countries in which a culture of family foster care is well-established (e.g., USA or Ireland; Gilligan, 2019; Williams et al., 2023), being fundamental aspects to consider in the practice of family foster care (Hanlon, Feltner et al., 2021). The motivations underlying the willingness to become a foster family have been identified as one of the most important factors in the recruitment of foster families (Gouveia et al., 2021), influencing their intention to become a foster family (Diogo & Branco, 2017), as well as their retention as a foster family (Hanlon, Simon et al., 2021). Such motivations have also been linked, consequently, to placement stability and permanency (Ahn et al., 2017; Salazar et al., 2018).

### **Motivations for Fostering**

Being motivated means being willing to do something. Motivation is not a unitary construct, since individuals can have different levels of motivation (e.g., too much or too little) and the orientation of the motivation can also vary. Motivation orientation refers to the

reason why we are motivated to perform actions (Ryan & Deci, 2017). One approach to motivation relates to altruistic *versus* egoistic orientation underlying prosocial behavior (e.g., Eisenberg et al., 2016). Specifically, altruistic motivation, based on empathic concern, is defined as “other-oriented emotion elicited by and congruent with the perceived welfare of someone in need” (Batson, 2011, p.11). Furthermore, the resource theory also helps to explain the motivations for fostering, suggesting that six main resources are exchanged in the relationships between people: love, status, information, money, goods, and services. According to this framework, the more people have resources, the more likely they are to give to others (Cox et al., 2003; Foa & Foa, 2012).

Motivation has emerged in the literature as a central dimension to consider in foster families’ recruitment and selection and is defined as the driving motive behind the intention to fostering (Caron et al., 2022). On one hand, it allows the development of recruitment strategies targeted to specific groups of publics who have motivations more associated with a willingness to foster, and successful foster care experiences (Giordano, 2024). On the other hand, motivations have been considered one of the most important dimensions to address in the applicants’ assessment and selection process (Caron et al., 2022; Gilligan, 2019), namely its consistency with the objectives of family foster care (Geiger et al., 2013).

Motivations to be a foster parent have been conceptualized in different ways. Some authors organize them into intrinsic motivations (i.e., forces inherent to the individual that give direction to their intentions and actions, such as values, beliefs, and emotions) and extrinsic motivations (i.e., external expectations and/or rewards, that shape behavior, such as monetary compensation) (MacGregor et al., 2006; Rodger et al., 2006; Sebba, 2012). Others proposed categories of reasons for fostering, namely child-centered reasons (focused on the needs of the child), self-centered reasons (focused on the caregiver’s self-sufficiency), and

community-centered reasons (focused on society or the community) (De Maeyer et al., 2014; Migliorini et al., 2018).

Specifically, child-centered reasons encompass feeling love and affection towards children, being committed to giving a family context to a child or providing a positive and stable family experience for a child (e.g., Broady et al., 2010; Coram, 2018; Daniel, 2011; Davi et al., 2021; De Maeyer et al., 2014; Howell-Moroney, 2014; López & del Valle, 2016; Nichols, 2019). Regarding self-centered reasons, these include wanting to be a parent or to be loved by a child, wanting to be a foster parent as an alternative to adoption, personal fulfillment and adding meaning to life, or increasing economic income (e.g., Contreras & Muñoz, 2016; Davi et al., 2021; De Maeyer et al., 2014; Diogo & Branco, 2017, 2019; Helm et al., 2006; Migliorini et al., 2018). Concerning community-centered reasons, reasons are related to contributing to society or community in some way and having a moral or social responsibility, religious and spiritual beliefs, or being aware of the need for foster families and wanting to participate (e.g., Baum et al., 2001; Cole, 2005; Keys et al., 2017; Rhodes et al., 2006; Rodger et al., 2006; Tyebjee, 2003). Personal experiences (having past experiences related to family foster care, such as previous opportunities to be a foster parent or having contact with foster families, having been fostered during childhood) and professional experiences (such as having current or past, direct or indirect contact with the child protection system) can also be a motivation for individuals to become a foster parent (e.g., Davi et al., 2021; Diogo & Branco, 2017, 2019). Finally, the influence and support of significant others (e.g., Raudkivi, 2020), namely the partner's desire to be a foster parent (e.g., De Maeyer et al., 2014), can also be reasons why individuals apply for fostering a child.

These categories of reasons to be a foster parent are not exclusively and often combined in the same person. Thus, individuals can have multiple reasons for becoming foster parents and can be motivated by internal and external processes (Rhodes et al., 2006; Rodger et al.,

2006). According to a recent systematic review of the foster families' intention and retention factors identified (Gouveia et al., 2021), different motivations can be positively associated with the decision to become a foster parent. The desire to care, love, and help children seems to be the most frequent motive pointed out by the literature, but results also showed that self-centered and financial reasons can lead individuals to become foster parents.

### **Motivations for Fostering, Intentions to be a Foster Family, and Knowledge about Family Foster Care**

Research has suggested that intrinsic, altruistic, or child- and community-centered motivations are more associated with the intention to foster a child, with a positive experience of family foster care, and with positive child outcomes. The link between motivations and intention to become a foster family can be explained by the planned behavior theory, which posits that behavioral intentions are predicted by cognitions, such as beliefs (Ajzen & Fishbein, 2005). Studies conducted with community samples (not foster families) identified that less self-oriented or family-related reasons and more child-centered reasons are associated with a higher willingness and intention to foster (Magalhães et al., 2022). Moreover, research with foster parents indicates that altruistic and child-centered motivations are a central characteristic of successful foster parents (Giordano, 2024; Van Holen et al., 2019), and are associated with higher retention (Rodger et al., 2006), a longer fostering experience, and a higher number of children fostered (Howell-Moroney, 2014; Rhodes et al., 2006). On the other hand, self-centered motivations are related to low stability and permanency of placements (Rhodes et al., 2006).

Additionally, the interest and willingness for fostering tend to increase when people have more knowledge on foster care issues (Davi et al., 2021) or are familiar with the child welfare system (De Mayer et al., 2014). For instance, previous studies revealed that people with a helping profession (e.g., teachers, social workers, paramedics, firefighters, or day care

workers) are particularly willing to foster children, namely those with more particular needs (Cox et al., 2003). Furthermore, being female, younger, more educated, and having parental experience and more resources have been linked to greater willingness and intention to become a foster family (e.g., Cox et al., 2003; Magalhães et al., 2022; Raudkivi, 2020).

To our knowledge, only the study of De Mayer and colleagues (2014) explored sociodemographic differences regarding the motivations for fostering, namely age, gender, educational level, and number of children, but they found no significant differences. However, considering the resource theory (Foa & Foa, 2012), we can hypothesize that more resources are predictive of more child-centered and altruistic motivations, while less resources could lead to more self-centered motivations. As such, a better understanding of which sociodemographic characteristics are more strongly associated with altruistic and child-centered motivations, and to a higher intention for fostering, enables the development of recruitment strategies targeted to specific groups in the community, using a market segmentation approach (Sullivan et al., 2014).

### **Assessing Motivations for Fostering**

The assessment of motivations for fostering should rely on evidence-based instruments (De Maeyer et al., 2014) to inform reliable processes of recruitment and selection of foster families, playing therefore a crucial role in improving the selection procedures of foster parents (Luke & Sebba, 2013). However, according to an international literature review (Luke & Sebba, 2013), the evidence on available, standardized instruments to support foster parents' selection process is limited. Most of the instruments used in the assessment and selection process have been validated on foster parents (instead of the general public), and relied on small samples, making it difficult to draw robust conclusions. Furthermore, existing measures in the domain of family foster care tend to be built for scientific studies and overlook the professional practice of family foster care (e.g., Leber & LeCroy, 2012; Rhodes et al., 2006),

contrary to what has been advocated by translational research regarding the importance of research-practice partnerships in child welfare (Testa et al., 2014). Although there are a few instruments assessing motivations for fostering, such as the Reasons for Fostering (Orme et al., 2006) or the Motivations for Foster Parenting Inventory (Yates et al., 1997), these measures were developed based on studies dating back to the early 1990s and have been used as checklists, which are more suitable to measure the presence or absence of behaviours, actions or skills (Philip, 2024). Further, many studies used *ad hoc* questionnaires created to collect data for a specific purpose (e.g., Migliorini et al., 2018), which might result in inconsistent and inaccurate measures, and non-generalizable findings (Philip, 2024). Additionally, evaluations in foster care should rely on up-to-date, brief and scientifically validated instruments to ensure meaningful and reliable results and comparability across studies (Vallejo-Slocker et al., 2024), and cross-country transference (Luke & Sebba, 2013). The availability of an instrument with the potential to be applied in diverse countries would allow comparability across studies (Vallejo-Slocker et al., 2024), and this is particularly pertinent, since motivations for fostering are fairly similar across countries (Gouveia et al., 2021). The development of a new tool to assess motivations for fostering combining up-to-date empirical evidence and key stakeholders' views (i.e., academics, caseworkers, foster families) also constitutes an opportunity to advance scientific knowledge in this field and inspire family social work in other countries.

### **The MIAF – Motivations for Fostering Scale**

In an attempt to address some of these shortcomings, the MIAF – Motivations for Fostering Scale (MIAF-MFS) was developed. The development of the MIAF-MFS is framed within a broader project aimed at developing a practice model of family foster care – the Integrated Model of Family Foster Care (MIAF) –, which was led by ProChild CoLAB and one child welfare agency (Santa Casa da Misericórdia de Lisboa; SCML). The MIAF-MFS

was co-developed through collaborative and iterative work between researchers and family foster care caseworkers, following best practices for developing and validating scales (Boateng et al., 2018). A review of national and international studies on motivations to be a foster family (e.g., Diogo & Branco, 2019; Harden et al., 2008; Negrão et al., 2019; Sebba, 2012), including existing measures (e.g., Casey Foster Applicant Inventory; Orme et al., 2006), was first conducted to identify core dimensions of motivations for fostering. The resulting dimensions were further discussed with caseworkers to ensure that all possible motivations were compiled. An initial pool of 79 items was generated by three researchers, which were further evaluated by five experts (three family foster care caseworkers and two psychologists and researchers in child welfare). Based on guidelines for item development (Yusoff, 2019), content validity was undertaken by asking experts to rate each item's clarity and relevance (ranging from 1-not clear/relevant to 5-highly clear/relevant). Items that received a rating of 1 or 2 were revised through meetings between researchers and experts ( $n = 36$  items were excluded). A 54-items version of the scale was then discussed with five families who were currently fostering. Families were asked to select the items that must be included in the scale and those who should be revised, providing suggestions for improvement. The results of this discussion were shared with the experts and a preliminary version comprising 35 items was administered to 60 foster family applicants as part of the evaluation process conducted by family foster care caseworkers. Twelve caseworkers were then interviewed (after giving their consent) asking for final suggestions to improve the scale, and minor adjustments (e.g., wording changes) were incorporated.

### **The Present Study**

This study was motivated by the need to have evidence-based and updated measures to improve the selection procedures of foster family applicants in Portugal, a need that is shared worldwide (De Maeyer et al., 2014; Luke & Sebba, 2013). Considering the importance of

motivations for fostering in foster families' recruitment and selection (e.g., Caron et al., 2022), this study presents the development and psychometric properties of the MIAF-MFS (ProChild CoLAB & SCML, 2024). Specifically, it aimed to assess (1) the factor structure of the scale, (2) its reliability, (3) convergent validity, by examining the associations between the MIAF-MFS and perceived knowledge about family foster care and intention of becoming a foster family, and (4) the associations between the MIAF-MFS and sociodemographic characteristics.

## **Method**

### ***Participants***

A sample of 442 Portuguese adults participated in the study, mostly female ( $n = 375$ , 84.8%). Their ages ranged from 25 to 76 years old ( $M = 42.24$ ,  $SD = 10.08$ ), and most of the participants had, at least, a bachelor's degree ( $n = 382$ , 86.4%) and were currently employed ( $n = 395$ , 89.4%). Approximately 70% ( $n = 309$ ) were married or cohabiting and had children ( $n = 314$ , 71.0%). Most of them had no personal experience or contact with family foster care ( $n = 337$ , 76.2%) or residential care ( $n = 330$ , 74.7%), but almost half of the participants had previous experience or contact with adoption ( $n = 201$ , 45.5%). Eighty-two of the participants had already worked in child welfare contexts (18.6%), and 96 participants were currently working in child welfare (21.7%). On average, participants perceived having low ( $n = 146$ , 33.0%) to moderate ( $n = 185$ , 41.9%) knowledge about family foster care ( $M = 2.73$ ,  $SD = 0.90$ ;  $range = 1 - 5$ ).

### ***Procedures***

This study was part of a larger project focusing on individuals' perceptions and motivations related to family foster care, in order to inform recruitment and selection

strategies of foster families at a population level, approved by the Ethics Committee of Iscte - University Institute of Lisbon (approval number 129/2021). Participants were recruited from the general population, if they met the inclusion criteria of being 25 years or older, the minimum age to apply to become a foster family in Portugal (Law 139/2019). Further, and considering the importance of knowing community motivations for fostering to design targeted recruitment strategies (Hanlon et al., 2021), participants were asked to confirm that they were not currently fostering a child. Moreover, to restrict the legal framework and language proficiency, participants had to live in Portugal and read/ understand the Portuguese language. Data collection occurred at a single time point, between February 2022 and January 2024, through an online survey, hosted in ProChildForm Generator Platform (an online survey management system that allows for the creation and publication of customized forms and secure access to data). The survey was disseminated through social media and networks of the research team, as well as by child welfare institutions and contained a brief explanation of family foster care and detailed information about the study goals and participants' rights. Participants give their informed consent by checking three statements reflecting their willingness to participate. Participation was voluntary, anonymous, and with no financial compensation.

### ***Measures***

*Sociodemographic and foster care-related characteristics.* Participants completed a self-report questionnaire assessing sociodemographic (e.g., age, education, marital status, number of children) and foster care-related (i.e., personal experience with family foster care, residential care, and adoption, and professional experience in the context of child welfare) characteristics.

*Motivations for Fostering Scale.* The MIAF-MFS (ProChild CoLAB & SCML, 2024) was used to assess motivations for fostering. A full description of the scale and its development was presented in the introduction. The MIAF-MFS includes 35 items that cover distinct motivations to be a foster family, which are answered on a 5-point Likert Scale, ranging from 1 (Strongly Disagree) to 5 (Strongly Agree).

*Intention of becoming a foster family.* Intention of becoming a foster family was assessed through two questions. The first question was “Have you considered becoming a foster parent?” and was answered on a 5-point Likert-type scale, ranging from 1 (Never) to 5 (Very Often). The second question was adapted from Raudkivi’s (2020) study and reads as follows: “If a proposal was made to your family to take care of a child removed from his or her biological parents, and the decision was up to you alone, what would your answer be?”. The question was answered on a 5-point Likert-type scale, ranging from 1 (Definitively not) to 5 (Definitively yes). In both questions, higher scores indicate a higher intention of becoming a foster family. For the purpose of this study and considering the strong correlation between both questions ( $r = .55, p < .001$ ), a composite score of intention of becoming a foster family was computed by averaging the two questions ( $\alpha = .70$ ).

*Perceived knowledge about family foster care.* Perceived knowledge about family foster care was assessed through the question “Please, classify your own level of knowledge about family foster care using the following scale”, answered on a 5-point Likert-type scale, ranging from 1 (No knowledge) to 5 (Very Good).

### **Data Analysis**

Statistical analyses were performed using IBM SPSS Statistics 29.0 and AMOS 27.0 (Arbuckle, 2022). Descriptive statistics were computed for sample characterization. A preliminary inspection of the data found no missing values, and items with skewness values

above 3 were eliminated (Kline, 2005) to ensure the assumptions for conducting factorial analyses. A holdout method was used to test the scale's construct validity, and the full sample was randomly split into two subsamples: 60% of the cases were retained in Sample A ( $n = 266$ ) for exploratory factor analysis (EFA), and 40% were retained in Sample B ( $n = 176$ ) for confirmatory factor analysis (CFA). Both samples showed an appropriate size (Costello & Osborne, 2005). The Kaiser–Meyer–Olkin's (KMO) coefficient and Bartlett's test were examined to establish the suitability to conduct an EFA (Tabachnick & Fidell, 2013). In Sample A, a principal axis factoring analysis (oblique rotation) was performed, and items with the lowest communalities ( $<.30$ ) and with high cross-loadings (i.e., loadings  $>.30$  in more than one factor) were progressively eliminated, according to recommendations from Tabachnick and Fidell (2013). Decision on the number of retained factors was based on two criteria: the Guttman-Keiser criterion (i.e., eigenvalue  $> 1$ ) and the Parallel Analysis method (Hayton et al., 2004). Then a CFA was conducted in Sample B using maximum likelihood estimation. The goodness of fit of the model was assessed through the following criteria: the ratio of the chi-square statistic to the degrees of freedom ( $\chi^2/df$ ) below 2; the comparative fit index (CFI) approaching 1 (Whittaker, 2016), and the root mean square error of approximation (RMSEA) below .10 (Kline, 2016). Reliability of the MIAF-MFS was computed in both samples, through Cronbach's alpha. Corrected item-total correlation, average inter-item correlation, and alpha if item deleted were also examined. The following criteria were indicators of good reliability: alpha  $>.70$ , corrected item-total correlation  $>.30$ , and inter-item correlation between .15 and .50 (and  $<.80$ ) (Field, 2005; Kline, 1998). Convergent validity of the MIAF-MFS was estimated on the total sample ( $N = 442$ ), by computing Pearson correlations between the MIAF-MFS factors and perceived knowledge about family foster care and intention of becoming a foster family. Pearson correlations were interpreted as follows: small:  $r \geq .10$ ; medium:  $r \geq .30$ ; large:  $r \geq .50$  (Cohen, 1988). To estimate whether MIAF-MFS

factors varied in terms of sociodemographic characteristics (i.e., age, sex, education, and children) independent samples *t* test and Pearson correlations were computed between variables in the total sample. Significance was set at the level  $p < .05$  for all analyses.

## **Results**

### ***Descriptive Analyses***

A descriptive analysis of the 35 items was performed to analyze the symmetry of the items' distribution. The analysis of the absolute values of *skewness* identified five items showing values higher than 3 (Item 12. *Own experience of being fostered*; Item 17. *Managing the loss of a loved one*; Item 18. *Improving couple relationship*; Item 24. *Showing others that I am a good person*; Item 33. *Managing the loss of a child*). Therefore, these items were not included in the subsequent analyses.

### ***Exploratory Factor Analysis***

An EFA with the 30 items, using the principal axis factoring extraction method with an oblique rotation, was conducted in Sample A ( $n = 266$ ). The Bartlett's Test of Sphericity,  $\chi^2(231) = 1887.30, p < .001$ , and the medium Kaiser–Meyer–Olkin ( $KMO = .82$ ) supported the adequacy of the factor model. Parallel analysis, based on the Monte Carlo simulation, in conjunction with the Guttman-Kaiser criterion, suggested a four-factor structure. Eight items were progressively removed from the subsequent analysis: three items were eliminated given the low communalities ( $<.30$ ) (Item 4. *Coherence with religious beliefs*; Item 19. *Partner desiring to foster*; Item 26. *Helping children with special needs*), three items were removed due to high cross-loadings ( $>.30$ ) (Item 14. *Contributing to society*; Item 30. *Personal achievement*; Item 34. *Being loved by a child*), and two items were eliminated given low loadings ( $<.30$ ) (Item 22. *Being encouraged by friends and relatives*; Item 29. *Being a good example to others*).

Table 1 presents the four-factor structure, explaining 52.61% of the total variance, composed of 22 items with significant factor loadings ( $>.30$ ). Factor 1 was labeled “Self-centered parenting motivations” and includes eight items covering motivations centered on self-needs related to parenthood, which explained 22.05% of the variance. Factor 2 was labeled “Child-centered and altruistic motivations” and includes seven items covering motivations centered on the child’s needs and based on solidarity and community sense, which explained 15.78% of the variance. Factor 3 was labeled “Motivations related to previous contact with foster care” and includes three items covering motivations associated with the experience and contact with the child welfare system, specifically with family foster care, which explained 8.07% of the variance. Factor 4 was labeled “Self-centered personal motivations” and includes four items covering personal motivations, centered on self-needs of income or companionship, which explained 6.71% of the variance.

[Insert Table 1 here]

### ***Confirmatory Factor Analysis***

We tested the four-factor structure of the scale using CFA. Following the inspection of the modification indices, three pairs of error terms within the same factor (self-centered parenting motivations, and child-centered and altruistic motivations) were allowed to correlate. The overall fit of the four-factor model tested was adequate:  $\chi^2(200) = 293.109$ ,  $p < .001$ ,  $\chi^2/df$  ratio = 1.47; CFI = .92; RMSEA = .05 (90 % CI .038, .064). The standardized solution presenting the factor loadings is displayed in Figure 1. Standardized factor loadings were high (ranging between .46 and .78) and all statistically significant.

[Insert Figure 1 here]

### ***Reliability***

As shown in Table 2, the values of Cronbach's alpha indicated good reliability on both samples for Factors 1 (Self-centered parenting motivation;  $\alpha_A = .81$ ,  $\alpha_B = .83$ ) and 2 (Child-centered and altruistic motivations;  $\alpha_A = .85$ ,  $\alpha_B = .82$ ), and an acceptable internal consistency of Factor 3 (Motivations related to previous contact with foster care), namely on Sample A ( $\alpha_A = .70$ ,  $\alpha_B = .63$ ). The alpha coefficient for Factor 4 (Self-centered personal motivations;  $\alpha_A = .63$ ,  $\alpha_B = .66$ ) did not reach the .70 benchmark considered to establish acceptable reliability; however, the average inter-item correlations for this factor was within the recommended range of .15–.50 in both samples (sample A = .33, sample B = .36). The item-total correlations were all above the recommended cut-off point of 0.30. Regarding Cronbach's alpha if item deleted, the removal of item 20 from Factor 3 would increase the total Cronbach's alpha value more than .10 in sample A ( $\alpha$  if item deleted = .74) but not in sample B ( $\alpha$  if item deleted = .63).

[Insert Table 2 here]

### ***Associations between motivations for fostering, knowledge about family foster care, and intention of becoming a foster family***

Overall, MIAF-MFS factors were significantly correlated with perceived knowledge about family foster care and intention of becoming a foster family, supporting the convergent validity of the MIAF-MFS (Table 3). A higher perception of knowledge about family foster care was related to lower self-centered parenting motivations ( $r = -.16$ ) and higher child-centered and altruistic motivations ( $r = .19$ ) as well as higher motivations related to previous contact with family foster care ( $r = .33$ ). A higher intention of becoming a foster family was moderately associated with higher child-centered and altruistic motivations ( $r = .44$ ) and

weakly associated with higher self-centered personal motivations ( $r = .14$ ). Correlations between MIAF-MFS factors were mostly low to moderate.

Moreover, differences were found between participants that worked or are currently working in the child welfare system ( $n = 131$ ) and those unfamiliar with the child welfare system ( $n = 159$ ), regarding self-centered parenting motivations,  $t(288) = 3.12, p < .001$ , self-centered personal motivations,  $t(288) = 2.60, p = .005$ , and motivations related to previous contact with family foster care,  $t(288) = -5.82, p < .001$ . Specifically, participants familiar with the child welfare system reported lower self-centered parenting motivations ( $M = 1.68, SD = .71$ ) and self-centered personal motivations ( $M = 1.63, SD = .62$ ) than participants unfamiliar with the child welfare system ( $M = 1.97, SD = .83$ , and  $M = 1.84, SD = .72$  respectively). Participants familiar with the child welfare system revealed higher motivations related to previous contact with family foster care ( $M = 2.35, SD = 1.11$ ) than those unfamiliar with it ( $M = 1.67, SD = .89$ ).

[Insert Table 3 here]

### ***Associations between motivations for fostering and sociodemographic characteristics***

Women and men reported differences in Factor 2,  $t(438) = -3.613, p < .001$ , with women ( $M = 4.37, SD = 0.61$ ) reporting higher child-centered and altruistic motivations than men ( $M = 4.06, SD = 0.79$ ). Significant correlations were found between age and Factor 2 ( $r = -.133, p = .005$ ) and Factor 3 ( $r = .111, p = .020$ ), showing that as age increased, child-centered and altruistic motivations decreased, while self-centered personal motivations increased. Concerning education, significant differences were found for Factor 1,  $t(440) = 4.005, p < .001$ , Factor 2,  $t(440) = -2.613, p = .009$ , and Factor 4,  $t(440) = 5.288, p < .001$ . Individuals with an academic degree showed less self-centered parenting motivations ( $M =$

1.76,  $SD = 0.74$ ) and self-centered personal motivations ( $M = 1.63$ ,  $SD = 0.61$ ), and more child-centered and altruistic motivations ( $M = 4.36$ ,  $SD = 0.59$ ) than individuals with no academic degree (self-centered parenting motivations:  $M = 2.18$ ,  $SD = 0.88$ ; self-centered personal motivations:  $M = 2.10$ ,  $SD = 0.85$ ; child-centered and altruistic motivations:  $M = 4.12$ ,  $SD = 0.91$ ). Differences between having children or not were significant for Factor 1,  $t(440) = 3.080$ ,  $p = .002$ , with individuals with no children showing higher self-centered parenting motivations ( $M = 1.99$ ,  $SD = 0.78$ ) than individuals with children ( $M = 1.75$ ,  $SD = 0.76$ ).

## **Discussion**

The present study had two main goals. The first was to examine the psychometric properties of a newly developed scale, the MIAF-MFS, designed to assess motivations for fostering in a community sample. The second was to explore the relationships between these motivations, sociodemographic factors, knowledge about family foster care, and the intention of becoming a foster family.

Regarding the first aim, results showed that the MIAF-MFS has a four-factor structure consisting of 22 items: 1) self-centered parenting motivations (8 items), 2) child-centered and altruistic motivations (7 items), 3) motivations related to previous contact with foster care (3 items), and 4) self-centered personal motivations (4 items). All factors were found to be intercorrelated, suggesting that individuals may choose to foster for a variety of reasons, as supported by previous research (Rhodes et al., 2006; Rodger et al., 2006). Overall, reliability values for each factor were found to be satisfactory, indicating that the reliability of the MIAF-MFS is generally acceptable. However, it is important to note that the reliability of Factor 3 (motivations related to previous contact with foster care) and Factor 4 (self-centered personal motivations) did not meet the acceptable threshold. This may be attributed to the

limited number of items loading onto those factors. Furthermore, the characteristics of the sample may have influenced these findings. For example, participants in the present study perceived a limited to moderate knowledge about family foster care, which aligns with the current scenario of family foster care in Portugal (ISS, IP, 2023). This may have resulted in inconsistent or more varied responses to items.

The four-factor structure observed in our study is consistent with previous research that has identified similar motivational categories in the context of family foster care (Davi et al., 2021; De Maeyer et al., 2014; Magalhães et al., 2022; Rhodes et al., 2006; Sebba, 2012). For instance, in a study with non-kinship foster parents (De Maeyer et al., 2014) and in a community-based study aiming to assess the validity and reliability of the Reasons for Fostering Inventory (Magalhães et al., 2022), the authors identified common categories of motivations for fostering, notably self-oriented and child-centered or altruistic motivations. However, our study identified two additional distinct factors: self-centered parenting motivations and motivations related to previous foster care experience. These factors encompass items specifically tied to parenting (e.g., “It is a chance to start a family”) and previous contact with the child protection system (e.g., “I know a child who needs to be fostered”), respectively. Interestingly, this contrasts with previous studies, which identified a single factor of general family-related reasons (Magalhães et al., 2022) that included items not specific to parenting, although some were linked to contact with the foster care system. The emergence of those two independent factors in our study may be attributed to the fact that in Portugal, as in other countries (e.g., Spain, Brazil), family foster care remains mainly non-therapeutic or non-professionalized. Therefore, foster family applicants are more likely to be motivated by parenting-related reasons (e.g., desire to provide care and love to a child) rather than to help children with complex mental health and behavioral needs or see fostering as a career (as observed in therapeutic fostering). On a related note, some of the items of this

factor relate to the possibility of adopting a child and constitute a family; we could hypothesize that participants may perceive family foster care as a way to adopt a child in the future, thus leading to an isolated factor of motivations related to parenting. However, further research on this topic is needed.

Characteristics of our sample could also explain our findings. Almost half of the participants had previous experience or personal contact with adoption, and more than 20% of participants were currently working in child welfare. These experiences likely contributed to the distinct factors observed in the present report, as participants with such backgrounds might have more specific motivations for fostering compared to a more general population. Accordingly, participants familiar with the family foster care, that worked or are currently working in the child welfare system and participants, showed lower self-centered parenting and personal motivations, and higher motivations related to previous contact with family foster care, than participants unfamiliar with the child welfare system. This result is aligned with previous research suggesting that people in helping professions are more willing to foster children, namely children with particular needs (Cox et al., 2003). People in helping professions, such as psychologists, social workers and other professionals working in child welfare system, tend to demonstrate higher levels of empathy (Stosic et al., 2021), which can lead to less intrinsic and egoistic motivations.

Regarding the associations between motivations for fostering and sociodemographic characteristics, significant associations were found between motivations for fostering and participants' sex, education, age, and having children. Specifically, the results indicated that women showed more child-centered and altruistic motivations compared to men. This finding could be explained by gender socialization roles, which traditionally emphasize nurturing and caregiving behaviors in women. Social and cultural expectations often encourage women to adopt more empathetic and caring roles, potentially leading them to develop stronger altruistic

motivations (Magalhães et al., 2022). In addition, our results revealed that individuals with an academic degree significantly exhibited fewer self-centered parenting and personal motivations and a higher prevalence of child-centered and altruistic motivations compared to those without an academic degree. This seems to be in line with the Resource Theory (Cox et al., 2003; Foa & Foa, 2012), which posits that individuals with higher levels of education may have access to greater resources, such as financial stability and social support networks. These resources could enhance their sense of social responsibility and increase their motivation towards fostering children as a means of contributing to the welfare of vulnerable children in need of care.

The current study revealed that older participants exhibited less child-centered and altruistic motivations than younger ones. They were also found to be driven more by self-centered personal reasons. This finding may suggest that older individuals may prioritize personal reasons for considering foster care, such as providing support to children they know personally, rather than solely driven by altruistic intentions. It is possible that older individuals are seeking companionship or fulfillment in their later years, which can be reflected in self-centered personal motivations. This is consistent with the life-course perspective, which posits that motivations and priorities can shift as individuals age, often towards more self-focused goals due to changes in personal circumstances, such as retirement or an empty nest (Settersten, 2003). Finally, individuals without children demonstrated a higher tendency toward self-centered parenting motivations than individuals with children. This may indicate that these individuals view family foster care as a means of fulfilling their parenting role. These findings may be of particular relevance to the Portuguese context, given the paucity of information about family foster care, its processes, and legal framework. This may result in individuals erroneously perceiving similarities with adoption. Nevertheless, further research is required to substantiate this hypothesis.

Regarding the associations between motivations for fostering, perceived knowledge about family foster care and intention of becoming a foster family, results indicated that individuals who perceived higher knowledge had fewer self-centered parenting motivations and more child-centered and altruistic motivations. It is possible that as individuals gain insight into the emotional, psychological, and social needs of foster children and the impact of providing a stable and nurturing environment, they may become more motivated by a desire to help and support these children with the goal of making a positive difference in their lives. Increased knowledge may contribute to increased empathy, which in turn may be related to less self-centered and more child-centered and altruistic motivations. It may also be the case that knowledge of these children's experiences and needs may increase the confidence of potential caregivers to take on the role of foster parent, thereby increasing their motivation to foster (Lotty et al., 2020).

Consistent with this possibility, our study showed that higher general knowledge about family foster care was also associated with more motivations related to previous contact with family foster care. This may be due to the fact that individuals who have previously been involved with the foster care system develop a deeper commitment to the system as a result of their personal experiences, heightened sensitivity to maltreatment, and the relationships they have developed (Diogo & Branco, 2017). Previous research has supported this finding, demonstrating that general knowledge about foster care and prior contact with or experience in the foster care system are associated with stronger intentions to foster (Baum et al., 2001; Davi et al., 2021). In a large sample of potential foster parents, Randle and colleagues (2012) found that "I don't know anything about foster care" was the most frequently cited reason for not fostering (40% of the sample). Providing prospective foster parents with information about foster care may promote more altruistic decisions about fostering, which is important given that research has shown that child-centered and altruistic motivations are associated

with positive fostering experiences (De Mayer et al., 2014) and intentions to continue fostering (Rodger et al., 2006).

In this study, we identified a significant positive correlation between child-centered and altruistic motivations and the intention of becoming a foster family. This finding aligns with recent research. Magalhães and colleagues (2022) found that child-focused motivations, alongside educational attainment, were significant predictors of the intention to foster children within the community. Similarly, Davi et al. (2021) identified motivations such as "helping children in need", "providing children with a stable childhood" and "keeping a child out of the system" as strongly correlated with the intention of becoming foster parents. Interestingly, the descriptive statistics of our study indicated that participants exhibited higher average values for child-centered and altruistic motivations, suggesting a prevalent desire to improve the lives of children in need. This is consistent with prior research indicating that individuals are often motivated to become foster families for altruistic, intrinsic, or child-centered reasons (MacGregor et al., 2006; Rodger et al., 2006). These findings underscore the importance of child-centered and altruistic motivations in fostering intentions.

Additionally, it was observed that individuals with more self-centered personal motivations exhibited a higher intention of becoming foster parents. This could be attributed to the fact that individuals with these motivations may view fostering as a means of fulfilling their personal needs, such as seeking companionship, filling an emotional void, or gaining a sense of purpose. These self-centered personal motivations may not necessarily result in low-quality care; rather, they may reflect the complexity between personal and altruistic reasons in the decision to foster. This is corroborated by research indicating that personal benefits, such as emotional satisfaction and personal growth, can coexist with altruistic motivations, influencing the decision to become foster parents (Anjos et al., 2023; Rodger et al., 2006).

### ***Strengths, limitations, and directions for future research***

The MIAF-MFS was developed through a systematic and rigorous process, relying on the most recent available evidence on motivations for fostering and a collaborative work between the research team and key stakeholders in the field of family foster care (i.e., academics, caseworkers, and foster families) in order to ensure the suitability and up-to-dateness of the scale. However, this study had some limitations that should be acknowledged. First, its cross-sectional nature did not allow us to examine reliability over time. Second, online recruitment and sample characteristics of the present study may have introduced some bias in the responses. Despite the large sample size of the present study, the majority was female, almost half of the participants had previous contact with adoption and a quarter was working in child welfare contexts. These characteristics may have induced more positive responses to certain items (e.g., motivations related to parenting and prior contact with foster care) and potentially explain the emergence of specific MIAF-MFS factors. Further research with a more heterogeneous and representative sample would enhance generalizability of the findings. Third, the reliability of Factor 3 and 4 was acceptable considering the reduced number of items, but still low. Further psychometric evaluation of the MIAF-MFS is needed. Another avenue for further validation studies should be testing the MIAF-MFS among foster family applicants. Longitudinal studies exploring the prospective associations between foster family applicants' motivations and family foster care placement outcomes would shed some light on the predictive validity of the scale for identifying the motivations more likely to predict placement's outcomes.

### ***Implications for practice***

The present study responds to the scarcity of validated tools to support foster family applicants' assessment process, thus it holds particular significance for social work in the

context of family foster care. The MIAF-MFS was found to be a valid and reliable scale for measuring motivations for fostering. While further testing would provide additional insights on the psychometric performance of the MIAF-MFS, our findings encourage its regular use in child welfare settings. The MIAF-MFS has the advantages of providing scores for four key dimensions of motivations for fostering, which, complemented by a qualitative interpretation, could be used as a starting point to discuss applicants' motivations more deeply. This could be particularly useful for identifying foster family applicants who endorsed motivations less aligned with the goals of family foster care (e.g., individuals interested in adopting a child), which could be therefore deeply explored by means of interviews. For instance, with individuals who reported motivations related to prior contact with family foster care, it would be worthy to examine more deeply the content of such experiences and how they related to more or less realistic expectations regarding family foster care. Accordingly, the administration of the MIAF-MFS could guide the decision-making processes related to foster family applicants' assessment.

This study also entails relevant implications for foster families' recruitment strategies. Awareness campaigns should be promoted to increase the Portuguese population's knowledge about family foster care and be tailored to activate child-centered and altruistic motivations, in order to increase individuals' intentions of becoming a foster family. Importantly, they should help to clarify differences between family foster care and adoption to minimize motivations focused on satisfying parenting needs. Moreover, recruitment efforts should consider that women, younger and more educated individuals are more likely to hold the more child-centered and altruistic motivations. This would help to enhance the quality and stability of foster care placements, ultimately leading to improved outcomes for vulnerable children and youth.

Finally, while the findings of this study are especially relevant for the Portuguese context, they had potential implications for countries in which family foster care is not broadly adopted as Portugal, as well as for countries that lack well-validated tools to support decision-making processes related to foster family applicants' assessment. Since the core dimensions of the MIAF-MFS matched international literature on motivations for fostering, further adaptations of the MIAF-MFS to other countries and cultures could be a promising avenue for research and practice.

### ***Conclusions***

This study provides preliminary evidence of the validity and reliability of a new, evidence-based tool for supporting caseworkers in the assessment of motivations for fostering, as part of the broader assessment and selection process of foster families. It also informs about individual differences regarding motivations for fostering as well as the specific motivations influencing the intention of becoming a foster family in Portugal.

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