

Non-relative foster care in the Province of Alicante, Spain: Characteristics of the profiles of foster families

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Abstract. Foster care is a determining resource for the child protection system. The scientific evidence shows that the psychosocial benefits of foster care for minors within the protection system are superior to those that can be provided by residential resource centres. Hence, during the last decade in Spain, work has been done to establish foster care as a priority resource. The objective of our work is focused on describing what type of families make up the Family Foster Care resource of the Province of Alicante and their parenting styles. A total of 207 people (72 minors and 132 foster parents) were evaluated, applying the following: 1) an ad hoc questionnaire composed of 12 questions; and 2) The Alabama Parenting Questionnaire consisting of 42 items (Spanish adaptation from Servera, 2007). More than 50% of the families are nuclear families and do not have biological children, with the duration of the foster care exceeding two years. The reconstituted families stand out due to its parental involvement and positive upbringing, while the nuclear and single-parent families show higher scores in consistent discipline. It is essential to know the profile of the foster families in order to achieve an adequate foster care process for minors.

Keywords: protection of minors; parental style; APQ; non-relative foster family.

[es] Acogimiento familiar en familia educadora en la provincia de Alicante, España: características de los recursos disponibles

Resumen ampliado. Ante la situación de desamparo de un menor, la Administración Pública interviene a través de dos recursos: el acogimiento familiar y el acogimiento residencial. Las evidencias científicas constatan que los beneficios psicosociales para los menores dentro del sistema de protección son superiores en un contexto familiar que los que se pueden proporcionar en recursos residenciales. Es por ello por lo que, en Julio de 2015, se emitió la Ley Orgánica 1/1996 de 15 de Enero, de Protección Jurídica del menor, de Modificación parcial del Código Civil y de la Ley de Enjuiciamiento Civil, que prioriza el interés superior del menor, su derecho a ser escuchado y anteponer el acceso a una familia acogedora como medida de primera opción, frente al acogimiento residencial, en menores con edades comprendidas entre 0 y 6 años. De este modo, el acogimiento familiar ha pasado a ser un recurso determinante para el sistema de protección de menores.

Con el fin de apoyar este cambio, durante los últimos años se han publicado varios trabajos que ponen de manifiesto la importancia de la influencia de la familia educadora sobre el desarrollo del menor. Variables, como la relación establecida con el entorno, la red de apoyo, el perfil de los acogedores, el estrés parental, la existencia de hijos biológicos, la estructura familiar, la capacidad para establecer vínculos afectivos; el estilo educativo o el apoyo técnico, son de gran relevancia y pueden determinar el éxito del acogimiento. Por ello, el proceso de selección de la familia para un menor, goza de gran importancia. Se pretende que esta cubra sus necesidades, las del menor, permitiendo una normalización en el nuevo entorno y oportunidades de futuro, a la vez que se respetan sus orígenes. Se trata de diferentes piezas de un *puzzle* que hay que encajar.

Debido a este hecho, el objetivo del presente trabajo se centra en describir qué tipo de familias conforman el recurso de Acogimiento familiar en familia ajena de la Provincia de Alicante y sus perfiles de crianza.

Para ello, se evaluaron 207 personas (72 menores y 132 acogedores), a las que se le aplicaron: 1) un cuestionario *ad hoc* de 12 preguntas; y 2) el *Alabama Parenting Questionnaire* compuesto por 42 ítems, en la adaptación española de Servera (2007).

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Los resultados encontrados fueron, que más del 50% de las familias son nucleares y no tienen hijos biológicos, siendo la duración del acogimiento superior a dos años. La familia reconstituida destaca por su implicación parental y crianza positiva, mientras que la familia nuclear y monoparental obtiene mejores puntuaciones en disciplina consistente.

Es esencial conocer el perfil de las familias acogedoras que conforman el recurso en cuestión, ya que nos permite determinar fortalezas/carencias de estos programas y, de esta manera, diseñar una estrategia con objetivos específicos para conseguir perfiles concretos de familia acogedora, atendiendo a la necesidad de los menores que acceden al recurso.

Palabras clave: protección de menores, estilo parental, APQ, familia ajena.

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Introduction

International regulations such as the United Nations Convention on the Rights of the Child (CRC) that was adopted in 1989 (Unicef Spanish National Committee, 2006) and the Hague Convention of 29 May 1993 on Protection of Children and Co-operation in Respect of Intercountry Adoption that was published in the Spanish Official State Gazette in 1995, emphasize the duty, both of institutions and of society itself, to ensure the satisfaction of the basic needs of minors, to protect them from cruelty and exploitation, and to respect their right to receive alternatives to in the face of abandonment or lack of care.

That is why in just over two decades, Spain has evolved from a charitable model, characterised by policies which favour the institutionalisation of children, to a child protection system, quite similar to that of the models used in many other European countries. Hence, Spain has become more advanced in this regard. Notwithstanding, there are still some deficiencies in the development of some programmes within the Spanish protection system (López et al., 2014).

According to the data published by The Ministry of Health, Social Services and Equality (2018), during 2018 in Spain there were 49,985 minors who were assisted by the protection system (which is an increase of 5.2% compared to 2017 with 47,493 minors). Among them, 21,283(52%) went into foster care. Considering the type of family fostering in terms of kinship, 12,564 (36%) were welcomed into kinship care (a family environment with rela-

tives or extended family members) compared to 6,981 (64%) who were in non-relative foster care. This majority regarding kinship care has been maintained over the years. In the Autonomous Community of Valencia, Spain, 2,659 children were fostered by families, whereby 1,985 (74.65%) were in kinship care and 674 (25.35%) were in non-relative foster care. On the other hand, 1,270 were left out of this system and they were moved to a residential care facility.

Here, we highlight two of the legal developments that have given the decisive push towards the introduction of the foster care measures in Spain. Firstly, Law 21/87 on Adoption and Familiar Guardianship (Care Orders), which proposes the possibility of foster care for those children who could not continue, living with their biological family, in a context in which protection in Spain was practiced almost exclusively through institutionalisation. Secondly, the Organic Law 1/96 on the Legal Protection of Minors, which was aimed at promoting the measures, by offering different foster models according to the different needs of children and families, while introducing the possibility of agreeing to temporary foster care during the case study period, the phase in which the most appropriate measure is determined to protect the minor. However, in the latter case, admission to a residential institution as a measure of protection has been the almost exclusive form of intervention in recent years (López, Delgado, Carvalho & Del Valle, 2014).

Taking this situation into account, and in response to the need to formalise the regula-

tions and to adapt them to the current situation, in July 2015, the Modification of the Organic Law 1/1996 of 15 January, of Legal Protection of Minors, partial modification of the Civil Code and the Law of Civil Procedure, which prioritises the best interests of the child, their right to be heard and places access to a foster family as a first-choice option in preference to residential care for children with between 0 and 6 years of age. Prioritizing minors to develop within a family is one of the aspects in which the greatest legal, scientific and professional consensus has been reached (Del Valle, Bravo & López, 2009).

In support of this change, in recent years several studies have been published in the literatures that highlight the importance of the influence of the foster family on a child's development. An example of this is found in the results of a study undertaken by Trejos-Castillo et al. (2015) which highlights the relevance that young people in situations of helplessness attribute to the support of adults and the community for 1) their positive mental development, 2) the development of positive coping strategies and 3) resilience. These are qualities that affect the construction of their personal relationships, their adaptation to the environment, and social welfare resources that they can use in the future.

A support network has also been an important variable with respect to the stability in the foster care system. Gil et al. (2012) highlights those families with a good ability to establish relationships have a broad support network. Poyatos (2011) adds that the non-relative foster care families enjoy greater social and professional support, in comparison with kinship care families. Further, the care arrangements in the kinship care family, on many occasions will 1) repair the support network of the child's birth family, 2) improve the socioeconomic deficiencies, 3) present an advanced age, and 4) improve the state of health of the foster care family (Poyatos, 2015). Jiménez and Zavala (2011) find that a good support network in this type of family correlates negatively with parental stress. On the other hand, these authors note that a greater number of foster children have increased the levels of stress in the foster carers with respect to the burden, albeit weakly.

Bernedo et al. (2013) found that from their sample, 86.8% of the participants had biological children. Gil et al. (2012) observed that the presence of biological children serves as a

model of bond establishment and conflict resolution that promotes resilience.

Regarding family structure, Molero and Gimeno (2013) note that single-parent families tend to foster children who have greater cognitive deficits, difficulties in the adaptive area, and personal-social problems.

In their research, Gil et al. (2012) found that those children who have a high capacity to establish ties have a length of stay in a family of more than 24 months. In addition, an assertive educational style predominates in these children, due to the fact that the educational style of the children will directly affect their coping styles and emotional stability, with the democratic-assertive style prevailing in kinship families, unlike the non-relative kinship families, whose educational styles range between over-protective and overprotective-punitive, both of which are less functional educational styles, since they encourage the development of inadequate skills of personal autonomy, low self-esteem and negative self-concept (Moral et al., 2012).

In addition to the appropriate educational style, another fundamental quality that parents should have as fosterers, as aforementioned, is the ability to establish emotional bonds with children. Generally, this quality is present in higher levels in parents who have a certain degree of maturity and experience (with their own children) and in families with a traditional structure (Fox, Berrick, & Frasch, 2008). Likewise, there are differences in this aspect between women and men, since women foster families dedicate more time to the care of the minors and, in addition, they generally have achieved a higher level of academic education than that of male fosterers (Gil et al., 2012). In the same way, and given the difficulties that most of the foster children present, there is a need to recruit specific family profiles, with certain educational skills that can be strengthened with adequate technical support (López et al., 2014). Therefore, the process of selecting a family for a minor is of great importance, intending for this family to cover the needs of the minor, allowing their normalisation in the new environment and future opportunities, while respecting their needs and origins (Berridge, 2005). Failing which, it could lead to a cessation of foster care due either to reasons of incompatibility or difficulties in coexistence (Del Valle, López, Montserrat, & Bravo, 2008). One can

liken this to the model of a puzzle with a variety of different pieces that have to fit together in the proper manner to successfully produce a complete picture.

The aim of the present investigation was to discern the status of the different sociodemographic profiles of the kinship foster families and their educational styles for a population sample from the Province of Alicante, Spain.

1. Method

1.1. Participants

The total sample was composed of 207 subjects, including minors ($n = 75$) together with their respective caregivers ($n = 132$), of the family foster care resources in the province of Alicante, Spain. At the time of collecting the data, the Province of Alicante had 175 children in foster care. The programme of professional intervention in foster care is composed of six technicians / educators and three psychologists. Among its functions, the technical team must guide and intervene with the foster families during the process of integrating a child to the new family context, and the subsequent stages of development of the child. The sample was collected during the home visits that the technicians of the programme, who agreed to collaborate in the investigation, undertook with the caregivers and the minors who coexist with these families.

1.2. Instruments

For the collection of sociodemographic data, an ad hoc questionnaire was elaborated; focusing on the profile of the family structure and the characteristics of the family members. The questionnaire consists of 12 multiple-response items that assess typical areas of foster care families, such as: age, place of birth, work environment, educational level, work situation, and monthly income of the foster care families. The questionnaire also provides a description of the foster care situation (housing type, number of rooms, number of foster care places, whether or not the family is on the adoption list, years as foster family, number of foster cares) and family profile (family type, number of people residing in the home, person with whom the child spends more time, number of biological children, number of children in

foster care, ages of the children in foster care, length of foster care, health problems or difficulties with respect to the child's learning, support network and means by which they learnt about the resource).

In order to evaluate educational styles, the Alabama Parenting Questionnaire - Short Form (APQ-SF) was translated into Spanish (Servera, 2007) and then used in the present study, both in its version for parents (in this case, foster carers) and version for children. The APQ-SF measures the parental practices that are considered to be related to disruptive behaviours in children. Thirty-five (35) of its 42 items are scored in five domains or parenting constructs: Positive Parenting scale (6 items), Poor Monitoring/Supervision scale (9 items), Inconsistent Discipline scale (6 items), Parental Involvement/Participation scale (10 items) and Corporal Punishment scale (3 items). The remaining seven items measure disciplinary practices other than corporal punishment and they are included in order to avoid an implicit negative bias towards the corporal punishment elements. The scale is a Likert-type scale with 1 (never) being the lowest value and 5 (always) being the highest value. In the results of previous investigations on the reliability of the APQ test, a moderate internal consistency has been demonstrated in the five scales ($\alpha = 0.63$ to 0.80, Shelton, Frick, & Wootton, 1996). The APQ also has good criterion validity, especially regarding the negative scales that show more deviant elevations for children with behavioural disorders, compared to children with no behavioural disorders (Shelton, Frick, & Wootton, 1996).

1.3. Procedure

Firstly, a bibliographic review was undertaken on the current state of foster care and parental educational styles. Subsequently, a series of variables were proposed and, after an expert judgment by a panel that was composed of researchers from the University of Alicante, the final variables were chosen.

The data were obtained through different questionnaires that were used to measure the chosen variables. The questionnaires were handed out in person, ensuring that the sample was random and making clear anonymity, confidentiality and voluntariness when participating. For this, the technicians were accompanied to the home visits that they carried out, to

verify that the objectives set forth in the foster care are being met.

Before initiating the minor evaluation and monitoring in this research, the procedure was presented before the Ethics Committee of the University of Alicante, which provides and approves the methodology used, and the approval was assigned the file number UA-2018-03-08. In addition, the psychometric evaluation and the corresponding analysis of the results of the evaluation were reported to all families by way of traditional mailing. In the letter that the families received, there was an opportunity for the children to not participate in the investigation. None of the families in the total sample exempted their children from participating in the evaluation and subsequent follow-up. This research was conducted in accordance with the 1964 Declaration of Helsinki and its later amendments.

1.4. Analysis of data

Once the entire sample was collected, all variables were coded with their alternative responses, and the results were entered into a database that was created using the statistical software package SPSS v.23. In this way, the descriptive and frequency analyses were carried out.

2. Results

2.1. Sociodemographic profile of host families

Regarding the sociodemographic data that were used in this study, in terms of family type, 61.3% (*n* = 46) were nuclear families, 24% (*n* = 18) were single-parent families, 10.7% (*n* = 8) were homoparental families and 4% (*n* = 3) were reconstituted families. Regarding the sex of the minors, 49.3% (*n* = 37) were males and 50.7% (*n* = 38) were females; regarding the sex within the foster care families, 43.94% (*n* = 58) were men and 56.06% (*n* = 74) were women. Regarding the age of the minors, the average age was 10.99 years (*dt*±3.916), with a minimum of 0 years and a maximum of 17 years; the age of the foster parents had an average of 50.67 years (*dt*±8.717), with a minimum of 34 years and a maximum of 70 years; the age of the foster care women was between 28 and 67 years of age, with a mean of 48.61 (*dt*±7.860). 74.7% (*n* = 56) for families living

in urban areas, compared to 25.3% (*n* = 19) for families living in rural areas.

Fifty-two percent (52%, *n* = 39) of the foster families did not have biological children, compared to 40% (*n* = 30) who had between one and two biological children, and 8% (*n* = 6) who had between three and four biological children. Sixty percent (60%, *n* = 45) of the families received only one child, compared to 40% (*n* = 30) who had received between two and four children in foster care. Sixty percent (60%, *n* = 45) of the foster care families could accommodate one child and 40% (*n* = 30) could accommodate more than two children. Most of the foster care families (89.3%, *n* = 67), were in a permanent foster care situation and the remaining 10.7% (*n* = 8) were providing simple foster care or Urgency and Diagnosis foster care. The average duration of foster care in this study was 3.39 years (*dt*±0.884), with more than 50% of families receiving minors for more than 2 years (Table 1). Almost seventy-nine percent (78.6%, *n* = 59) of the families up held a duration of between one and ten years as a foster family, while 10.7% (*n* = 8) endured for less than one year and the other 10.7% (*n* = 8) endured for more than ten years. Almost ninety percent (89.3%) of families had undertaken less than 3 foster care experiences, compared to 10.7% (*n* = 8) that had undertaken between 3 and more than 30 foster care experiences.

Table 1. Duration of the foster care.

	Frequency	Percentage
<3 months	2	2.7
3-12 months	11	14.7
12-24 months	20	26.7
> 2 years	42	55.9
Total	75	100.0

Regarding the support network of foster care families, 41.3% (*n* = 31) of the families indicated that they had a combination of support networks (parents, siblings, friends and professional caregiver) against 43.3% (*n* = 33) that refer to parents, siblings or friends as support networks, and 14.7% (*n* = 11) that indicated other types of support.

Regarding the area of education and employment, the variables Educational Level, Employment Situation and Monthly Income of the foster care families were analysed. For

Educational Level, in foster care it can be seen that 82.4% ($n = 47$) of male carers had undertaken higher studies (professional and university training), compared to 83.9% ($n = 63$) in the case of female carers. On the other hand, 68.4% ($n = 39$) of male carers and 54.1% ($n = 40$) of female carers had indefinite or open-ended contracts. More than half of the foster care families (50.7%, $n = 38$) had incomes ranging between € 2,000 and € 3,000 per month.

2.2. Descriptive analysis: Parental Educational Styles of the welcoming families

Following a descriptive analysis of the dimensions of the APQ - SF scale, the parental educational styles are shown, according to family type, in Table 2. The reconstituted family obtained the highest score in Parental Involvement ($M = 43.33$, $dt \pm 2.309$), Positive Parenting ($M = 25.67$, $dt \pm 4.041$) and Poor Monitoring/Supervision ($M = 16.00$, $dt \pm 6.000$); the single-parent family obtained the highest score in Inconsistent Discipline ($M = 12.50$, $dt \pm 2.256$); the nuclear family obtained the highest score in Corporal Punishment ($M = 6.59$, $dt \pm 2.464$); and, finally, the homoparental family obtained the highest score in Adequate Discipline ($M = 17.38$, $dt \pm 2.326$).

Table 2. Descriptive analysis of parental educational styles according to family type.

Parental Involvement				
	<i>M</i>	<i>Sd</i>	<i>Min.</i>	<i>Max.</i>
Monoparental	37.22	4.413	30	46
Homoparental	42.75	4.132	13	35
Nuclear	40.36	4.498	29	47
Reconstituted	43.33	2.309	42	46
Positive Parenting				
	<i>M</i>	<i>Sd</i>	<i>Min.</i>	<i>Max.</i>
Monoparental	24.33	4.144	15	29
Homoparental	25.00	3.817	19	29
Nuclear	24.98	3.992	14	30
Reconstituted	25.67	4.041	22	30
Poor Monitoring/Supervision				
	<i>M</i>	<i>Sd</i>	<i>Min.</i>	<i>Max.</i>
Monoparental	15.33	3.254	10	46
Homoparental	11.75	6.182	2	48
Nuclear	13.46	4.026	6	47
Reconstituted	16.00	6.000	10	46
Inconsistent Discipline				
	<i>M</i>	<i>Sd</i>	<i>Min.</i>	<i>Max.</i>
Monoparental	12.50	2.956	7	18
Homoparental	11.00	4.106	6	18
Nuclear	11.65	3.560	6	24
Reconstituted	9.67	2.887	8	13
Corporal Punishment				
	<i>M</i>	<i>Sd</i>	<i>Min.</i>	<i>Max.</i>
Monoparental	5.78	1.309	4	9
Homoparental	5.88	1.642	4	9
Nuclear	6.59	2.464	4	16

Reconstituted	6.00	1.000	5	7
Consistent Discipline				
	<i>M</i>	<i>Sd</i>	<i>Min.</i>	<i>Max.</i>
Monoparental	15.65	2.422	11	22
Homoparental	17.38	2.326	13	21
Nuclear	15.65	3.114	10	23
Reconstituted	16.00	3.606	13	20

Notes: M = Mean; Sd = Standard Deviation; Min. = Minimum; Max. = Maximum

3. Discussion

Hereafter, among the obtained results, we highlight those results that are most relevant for the description and analysis of the characteristics of the human resources of the programme of professional intervention in foster care in the province of Alicante (Spain). Firstly, 61.3% of the families participating in the programme are nuclear families, corresponding to the classical family structure, which determines that there is a great diversity among the foster families, since 39% of the families are divided among the categories of single-parent families, homoparental and reconstituted. This offers a greater variety of family structures when allocating a child to a family, allowing a family to better meet the needs of minors, which can be diverse: from needing more individualized attention, to having access to other fraternal models or to welcoming minors with previous paternal experiences.

Interestingly, the average age of children in foster care is approximately 10.99 years of age. If we crossover (i.e., moving average crossover) this value with the average age of the male carers (50.67 years) and the average age of the female carers (48.61 years), and we compare this with the average age of parents in Spanish society, according to data from the National Institute of Statistics for 2017 (32.08 years), when their first child is around 11 years old, then the average age of Spanish parents is 43 years old. This confirms that the average age of foster parents is quite high, taking into account that in Spain, Planned Parenthood is established at an already advanced age. Reality is that the average age of the current foster care families is very similar to the age that is highlighted by Rosser (2011) in previous studies on the same subject area.

Fifty-two percent (52%) of the of foster families do not have children of their own, from

which it follows that 1) they do not have previous parental experience and, above all, 2) they do not provide the foster child with a context of behavioural models to follow. It is noteworthy the effectiveness of the presence of other siblings from whom to learn when modelling behavioural habits that are typical of the family unit and the development of emotional regulation, favouring the correct adjustment to the new family nucleus (Sheffield et al., 2007).

On the other hand, foster families mostly offer a single foster care (60%) opportunity, with respect to which the percentage of families that offer to receive two or more minors (40%) is not a negligible amount. The latter families receive, in large part, groups of siblings, thus satisfying one of the policies of the administration that consists of favouring fraternal ties.

It is also to necessary to highlight the low percentage of families that are willing to offer simple fostering (12 months) and emergency and diagnostic fostering (6 months) (10.7%). These care arrangements are very necessary, when taking into account that the legislative framework states the objective of preventing minors from being committed to residential care when they are in a situation of abandonment between the ages of 0 and 6.

In relation to the description of the foster care family, it is significant that there is a high percentage of fosterers with higher education (82.4% for males and 83.9% for females) compared to the average for the population of Spain, which is approximately 41%, according to a report by the Knowledge and Development Foundation of Spain (Parellada & Monserrat, 2017). This supposes a high presence of foster families with a high academic and cultural level, which can provide positive educational and work models for the children who are protected by this measure. On the other hand, there is some employment instability, which is more

noticeable in the male carers, since 54.1% of male carers have an indefinite contract compared to the data provided for the total active population of the same sex in Spain, which is set at 71.6%. On the other hand, for female carers there is a minor difference, in that 68.4% hold an indefinite contract, compared to 73.4% of the total active population of the same sex in Spain (INE, 2018). This greater employment instability justifies the fact that, in some cases, there is some economic dependence on maintenance aid, which is provided to the host families, a fact that can be perceived during the monitoring and intervention process that is carried out by the technical teams. It also justifies that when asking the foster children the question of with whom they spend more time, the answer is: with the foster care family (100% of the heteroparental families).

Diverse studies in literature confirm the importance of parental styles on the results of parenting and intervention with regards to different emotional and behavioural difficulties (Ato, Galián, & Huéscar, 2007; Steinberg et al., 2006; Winsler, Madigan, & Aquilino, 2005), which is why it is relevant for the prediction of: 1) an adequate adjustment of the child to a family, 2) the characteristics the child presents and 3) the predominant parental style in the family relationship. In relation to this it is significant that, for our sample, the reconstituted families have the highest scores in Parental Involvement and Positive Parenting. The explanation for these scores may be due to the previous experiences that these foster care families bring to the new family unit. On the other hand, it is the families that present a higher score in Poor Monitoring/Supervision, which would likewise be related to those previous experiences that give them more confidence and a lesser need for control. Single-parent families have the highest score in Inconsistent Discipline, which is most likely derived from the absence of a second parental figure, with whom to share educational criteria, and the effort involved in maintaining these criteria for the benefit of the children. Furthermore, the nuclear family presents the highest scores in Corporal Punishment, which may be associated with more traditional, rigid and structured parental roles that are based on models in which parental authority was not debatable. Finally, homoparental families are those that score higher in Adequate Discipline, with educational patterns that are oriented towards a

democratic style and inductive control techniques, which denote a more open and flexible parental style.

4. Conclusions

When foster care resorts to non-relative foster carers there is a need for younger foster families, whereby the generation gap would be as small as possible, so that they can confront the difficulties that, in the period of adolescence, are added to this already difficult situation. This fact is reflected in a greater number of terminations from such criteria during this stage, due to unsustainable difficulties at the level of coexistence. At the same time, it must be borne in mind that parental experience, and the presence in the family nucleus of their own children, are conducive to an adequate coupling of the foster child and the rapid acquisition of relational habits and skills adjusted to the new family context. On the other hand, single-parent families are more fragile given the lack of support in a second authority figure. Further, there is a need to promote the profile of emergency and diagnostic caregivers, ensuring the superior well-being of the minor and reducing the impact of immersion in the foster care resource.

To achieve this type of family, it is essential to disseminate knowledge through means that reach this family profile, whereby the family members have started their experience in parenting and they may be attracted to being a part of the foster care resource.

4.1. Practical implications

In order to put the results of this study into practice, the main implication is to know in detail the characteristics of the foster care families and their parental style. This allows us to determine the strengths and weaknesses in the foster care resource and, in this way, it allows us to design a strategy with specific objectives that are aimed at achieving the specific profiles of the foster care family, while paying attention to the needs of the minors who access the foster care resource. We must start from the idea that not every family is optimal for any child who is in a situation of helplessness (Cairns, 2002). Each child has needs, and based on these needs, we must find the most suitable family for the child. This is why, from the perspective of professional practice,

the process of assessing the suitability of the foster families is given so much importance, because it is a process in which the characteristics and abilities for the assumption of such an important role, with respect to the life of a child in foster care, must be determined. If this process is not open-ended and the assignment of minors to different families does not follow a clear protocol, with a focus on the needs of the child and the characteristics of the family, then the chances of success are reduced.

4.2. Limitations of the study

Regarding the limitations of the present study, firstly, the size of the sample should be highlighted. A larger sample size would facilitate the generalisation of the obtained data, and thus ensure the representativeness of the group of people under study. However, access to people in distress is tremendously limited.

In addition, this study is the prelude to new investigations that seek to carry out more complex analyzes of differences and, given the data, assess the possibility of developing a model that can explain the mediating role of parenting styles on the success or failure of foster care in minors under guardianship.

On the other hand, to our knowledge, there is a scarcity of previous research in the literature on this subject, which prevents a comparison of the obtained results. Notwithstanding, the present study can offer very useful data for future research.

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4.5. Declaration of Conflicting Interests

The authors declare no potential conflict of interest with respect to the research, authorship, and/or publication of this article.

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Legal references

- Law 21/87, of November 11, which modifies the specific articles of the Civil Code and the Law of Civil Procedure in matters of adoption
- Organic Law 1/96, of January 15, on the Legal Protection of Minor, partially amended by the Civil Code and the Law of Civil Prosecution
- Organic Law 8/2015, of July 22, Modifying The System Of Protection Of Children And Adolescents