

PRIMER: ENCOURAGING INFORMED AND SENSITIVE INTERACTIONS BETWEEN YOUTH IN CARE AND THEIR CHILD CARE WORKER

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AUTHOR'S NOTE: This article is presented from the perspective of young people growing up within the care system. As the researcher, the tone of the article clearly identifies with youth in care. Professionally, withdrawing this perspective would be contrary to our mission and our vision of impacting human services and ultimately the policies that inform practice. Personally, the investments by the informants, participants, my colleagues, as well as my own experiences do not allow for objectivity. It has been a privilege and an honor to work on this project and to have the opportunity to disseminate our perspective on what is working and what is not within the system, in our effort to work collaboratively towards positive solutions.

ABSTRACT: Primer: Encouraging informed and sensitive interactions between youth in care and their child care worker, is a program that focuses on making the voices of youth in care from across Canada heard. The Primer project incorporates data collected from youth in care into a workshop format for students in the helping professions. This article disseminates the crucial information collected for this project on current and historical challenges faced by youth in care. Key concepts that are at the core of the Primer workshop are presented. The major goal of the project is to increase informed and empathetic interactions between youth in care and their caregivers.

Key words: youth in care, youth empowerment, child and youth care work

BACKGROUND

The National Youth In Care Network (NYICN) is a national charitable organization comprised of young people, ages 14-24, who are either in or from state care in Canada. In any year, there are approximately 70,000 young people in the care of child welfare authorities and 25,000 young people in custody across Canada. Most of us have been traumatized by abuse (sexual, physical, neglect) and go into care stigmatized, isolated and mistrustful of adults. Too often, our futures are compromised by a lack of support services and a high level of early school drop out and chronic unemployment. NYICN exists to nourish the development of youth in care networks across Canada, while helping our members to find their voices and regain control over their lives through support, skill building, and opportunities for healing.

Our objectives are to support the development of local and provincial youth-in-care networks, to voice the opinions and concerns of youth in and from care,

to promote the improvement of services for our group, and to facilitate healing, support and skill building amongst youth in and from care.

Primer was a pilot project undertaken by the National Youth In Care Network to encourage informed and sensitive interactions between youth in care and their child care workers. As our mandate states, the National Youth In Care Network exists to voice the concerns of our membership, youth in care, to positively affect change within the social service provider community and broader helping professions. The pilot project was funded through the Laidlaw Foundation and the Ontario Trillium Foundation.

Primer was developed and designed as a presentation for current and prospective social service providers in college, undergraduate and graduate programs. Our membership feels that current and prospective service providers are not typically provided with the tools to work on behalf of children and youth in care in sympathetic and empathic ways. Specifically, the goal is to go beyond the existing culture of risk assessment and paperwork in the "real" world, which ultimately distracts from the "human" side of social services. Primer is an attempt to effectively "re-humanize" relationships with service providers.

Primer was developed in three distinct phases. The first phase included a survey and consultation with fifty youth in care from across Canada. Youth respondents were asked to discuss three major challenges faced by youth in care in Canada today. Subsequent National Roundtables hosted by the National Youth In Care Network provided validation for recurring themes identified by our respondents. The second phase of Primer included a literature review of material related to past struggles and challenges faced by youth in care. The parallels drawn between current and historical issues facing youth in care between 1977 and 2001 reveal striking similarities. The third phase of Primer promotes the power of personal relationships as an integral component in nurturing resiliency. In addition, it has been found that enabling and assisting us to find our voices and to support us to become empowered and engaged in the decision-making process will effectively teach us the skills to become independent adults. This provides important skills and prepares us for our eventual, and frequently abrupt, emancipation from care.

The first year of this pilot project has been quite successful in terms of youth participation and the subsequent positive reception in colleges and universities to the presentation. The National Youth In Care Network provided training for eighteen youth in care from across Ontario to develop their capacity for public speaking and public presentations. It was critical to the success of the project to provide appropriate training. This training was designed to reduce the vulnerability in sharing of personal stories as well as to provide skills and references that can be resumé friendly for youth who struggle to gain employment. Additionally, youth

traveled across Ontario for the training session that enabled young people in and from care who have experienced similar struggles, challenges and successes to connect and share stories in a safe place. This promoted emotional healing and bonding through natural processes. In total, eleven presentations were completed in eight college and university programs across Ontario and four presentations were completed at conferences.

METHODOLOGY

The National Youth In Care Network developed a survey with the assistance of our academic advisor from Ryerson University that would explore the experiences of youth in care from across Canada. Youth staff at the National Youth In Care Network were trained in conducting telephone interviews and a series of random telephone calls were made to members of the National Youth In Care Network. In addition, three focus groups were convened in Nova Scotia, Alberta and Ontario. Subsequent national roundtables hosted by the National Youth In Care Network supplemented the data gathered throughout the consultation process.

Youth informants were asked to discuss what they believed to be the three main issues facing youth in care today. Furthermore, they were asked what is it they wished of their primary caretaker (their child and youth care worker) in terms of meeting their needs and helping them to navigate the child welfare system.

A scan of existing literature focusing on the qualitative data provided by youth in care from the past twenty-five years yielded the comparison data for the current youth consultation. The literature scan was divided into two separate categories. The first category focused on qualitative studies designed to capture the voices of youth in care. Documents such as *Who Cares? Young People in Care Speak Out* (National Children's Bureau, 1977), *Pain...Lots of Pain* (Raychaba, 1993), and *Voices from Within: Youth in Care In Ontario Speak Out* (Snow & Finlay, 1998) provided historical and narrative data on the experiences of young people growing up as children of the state. This data was compared to our National Survey. There were stunning similarities that led researchers to question why policies and practices have kept the system unchanged throughout the decades.

Furthermore, we examined the existing literature on resiliency to (Hilton, 1994; Losel, 1994; Martineau, 2000; O'Leary, 1998; Osborn, 1994; Tiet, 1998; Vanistendael, 1994), empowerment (Raychaba, 1988, 1992a, 1993) and psychosocial wellbeing (Cichetti, Toth, Sheree & Rogosch, 2001; Kelley, 2000; Rutter, 1987, 1988) assist in the development of recommendations that would address the needs of young people in care. These recommendations were formulated to respect both our individuality and our rights as defined by Article 12 of the UN Convention on the Rights of the Child, which reads as follows:

1. States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
2. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.

United Nations, 1997

LIMITATIONS

There were fifty youth in care participants for the project whose input was invaluable and highly informative. However, there are approximately 70,000 youth in care in Canada today. The consistency of the responses with existing literature was viewed as providing validity to the responses that were received throughout our consultation process. The small sample size reflects the transiency of our population, an issue that was both cited in the literature over the years and reported anecdotally by our respondents. Youth in care are moved frequently and subsequently do not necessarily inform the National Youth In Care Network. This results in contact data that is in continuous flux.

Frequently children are bounced from service to service, because they have multiple needs and the agency has a limited mandate...Some children move through all these three systems (corrections, child welfare, mental health) according to different professional diagnoses of their problems. Children are frequently adrift in the service system, particularly in foster or institutional care.

Callahan in Raychaba (p.37, 1988)

The second major limitation relates to cultural representation. The majority of our respondents were English and Caucasian. However, of the fifty youth participants, four were Aboriginal and two were French-Canadian. In future surveys and consultation processes, we will focus on these distinct populations and develop materials specifically relating to and addressing their unique needs.

RESULTS

The following section highlights the parallels between our current results and the historical data from youth in care drawn from our academic literature scan. Many of our respondents were not aware of the existing research and literature examining the challenges and struggles faced by previous youth in care. The literature review serves to showcase the prevalence and persistence of the issues within the child welfare system.

COMPARISON OF CURRENT ISSUES (SURVEY 2001) TO TRENDS OF PAST TWENTY-FIVE YEARS

Youth In Care Survey (2001) Major Trends

Youth in our survey expressed significant concerns in relation to the following issues:

- Moving and transience
- Stigmatization
- Struggles to establish a voice
- Need for emotional healing
- Poor after care
- Overuse of restraints (physical and chemical)

Qualitative and Narrative Research Sources

Major reports reviewed on the experiences of youth in care in Canada, published between 1977 and 1998 (National Children's Bureau, 1977; National Youth In Care Network, 1988; Office of Child and Family Service Advocacy, 1992; Raychaba, 1993; Snow & Finlay, 1998) identified the following issues:

- Transience
- Stigmatization
- Lack of voice
- Impoverished personal relationships
- Poor extended care and maintenance
- Experiences of systemic abuse

The following section highlights each of the themes identified through the consultation process and the literature review. Each theme is represented by comments from youth respondents from our consultation process (2001) to further illustrate the shared experiences across decades and geography.

Respect

In some cases there is a distinct lack of respect for our history, culture and experiences upon entering a care system. We become objects to be dealt with rather than human beings to be guided and nurtured into adulthood. The system has been designed to warehouse us while forgetting our individuality and our unique experiences. Ultimately, the system creates a formula for care rather than an individualized plan addressing our disparate needs.

Youth are out of control for a reason, they have to understand that the youth needs help and they aren't acting out to be rebellious, like they are acting out because something is hurting them inside. (Youth Respondent, 2001).

Stigma

As youth in care, we are constantly defending ourselves against the stereotype of "bad children," being asked, "What did you do?" To assume that we, as children and youth, have done something wrong to be involved in the care system is a pervasive attitude in society and in the attitudes of many helping professionals.

"Public opinion, the public needs to know that a youth in care is not a bad person, but just someone who has had a hard life. And workers, they need to have enough time to get to know youth and what they are going through." (Youth Respondent, 2001)

Systemic Abuse

There is indisputable evidence that abuse within the system does occur. In recognizing that many have positive experiences in the care system, it cannot remain silent that further victimization while in the care of the government is a persistent issue. In November 2001, youth and adults participated in a roundtable on Violence Within the Care System hosted by the National Youth In Care Network. The comments were chilling about the systematic denial of their thoughts, feelings, emotions and their ability to communicate effectively. They were denied the right to feel sad and experience grief and loss. They were medicated into submission in order to follow the orders of the institution. Many developed chemical dependencies upon release into the wider community because they had not been taught how to deal with their feelings and emotions. "Youth in care get less, from nutritious food and nice clothing, to being able to participate in extra-curricular activities" (Youth Respondent, 2001.) "Group home life, lots of power struggles, and abuse all forms"(Youth Respondent, 2001).

Voice

Over 25 years of research has demonstrated the unabated need to be a participant in the decisions and processes that affect our lives. A true understanding of youth empowerment and youth rights as defined by the UN Convention of the Rights of the Child (1989) is essential to understanding and respecting the experiences and insight we bring to the process. Furthermore, provincial legislation decrees that children are entitled to be privy to the decisions that affect their lives and provide input into the decision-making process (Child and Family Services Act, 1990).

Therefore, this persistent lack of voice in the decision making process is a surprising issue given the weight provided within provincial and international governance. Currently, the major struggle reflects the lack of "voice" in the planning for eventual emancipation from government care and the provisions of extended care services contingent mainly on academic pursuits. "What is going to happen to me after? So it is going to go-how am I going to make it, deal with this, without that support, without that extra well-being"(Youth Respondent, 2001)?

Transience

Youth in care still move frequently and with little to no preparation for these moves. Transience is related to many factors, however the ultimate reality is that moves happen during time of crisis and the consequences of frequent or improper moves are not considered regardless of the knowledge of the long-term impacts.

"Instead of dealing with problems, they ship us from group home to group home"(Youth Respondent, 2001).

Personal Relationships

A social worker, child and youth care worker and/or service provider can be the first link to positive personal relationships within the care system. It is vital that social service providers work hard to develop and maintain a relationship with their child in care. Ultimately, a child and youth in care is the responsibility of the social worker acting in parentis locus for the government of Canada. "Good relationship, someone you feel comfortable with, responds, calls you back if you want to talk with them, and caring. Someone who isn't fake and really seems to care about you and what you are going through" (Youth Respondent, 2001).

DISCUSSION

The National Youth In Care Network has been working towards the goal of youth empowerment since our inception. Leaders of the organization have produced articles and books related to the issues of youth based on research from around the world (Raychaba, 1988, 1993). In Primer, the fundamentals of empowering youth are further extolled as a mechanism for enhancing the quality of the interactions between young people and their social service providers while increasing the quality of life for young people in care.

Why are themes of disrespect and lack of trust so pervasive in the statements of young people from around the world in child welfare protection systems? Why are our voices being sought out and then ignored in the development of new policies and practices? The answers to these questions are as simple as they are complex. As we strive to carve out our place in the world, our voices are continually silenced due to an underlying disrespect for the knowledge and expertise of young people. In society, as a general rule, youth are not considered to be valuable and contributing citizens; rather we are viewed as burdens who need to be dealt with rather than nurtured and guided into adulthood. "Despite the best of intentions of any adult, empowerment cannot be bequeathed: it can only be nurtured, encouraged, and promoted" (Raychaba, 1992).

As a step towards increasing the life chances of young people, there should be a sense of providing for the young person's overall wellbeing. Wellness varies over time and according to situations, as stated by Cicchetti, Toth and Rogosch (2000). Wellness constitutes what goes right in psychological development and adjustment. It is conceived as a

dynamic condition. In the words of Cowen (1994), "wellness is not an etched in granite, immutable state" (Cicchetti et al., 2000). Working with youth on improving their overall wellbeing will produce the most effective long-term results over the lifespan. Child and youth care workers must work with young people to regain their trust and prove that there are supportive adults who wish to assist them on the journey towards adulthood and emancipation from care.

A major source of youth empowerment would be to insure that youth assume an integral part of the decision making process. Youth are the experts on their own experiences and know what it is they need. However, the ability to express this may be suppressed, therefore, it is the responsibility of the worker to help make youth comfortable with the process. Social service providers need to be aware of the questions they ask and how they are asked. Is it conducive to participatory action? Workers should encourage the expression of thoughts and opinions as a healthy process that will lead to the development of life skills, such as problem solving and goal setting. This is an essential component of learning how to make decisions for ourselves appropriately, so that we can define our role as citizens. This can benefit and guide us as we move towards emancipation from government systems. It is time to start listening to young people and to understand that what we need and want is a voice, a meaningful voice in the decisions that affect our lives.

The following recommendations provide concrete suggestions to help alleviate the sense of alienation and isolation that youth have felt and continue to feel as children of the state. These recommendations focus on small steps, with personal relationships as the foundation. If these recommendations are incorporated into a working philosophy, they will "re-humanize" working relationships between youth and their service providers.

RECOMMENDATIONS

The following are critical elements that youth in care have identified:

Listen

Social service providers need to heed the basic tenet of youth empowerment. They must allow youth to be participants in the decisions that affect their lives, and engage in "doing with" instead of "doing for".

Relationship

Create a relationship with the young person. The power of personal relationships is a strong protective factor. Go for coffee, shopping or to a movie. Get to know us. Take the time to understand where we are coming from.

Community

Meaningful community partnerships between social service departments and the wider community would enable youth growing up in care to become involved in extracurricular activities such as sports, art and

music. Community partnerships could help engage youth who otherwise could not afford to be involved on the limited budgets of their parents (the government). This would also help to establish a support network outside of an agency that would provide for youth what the government cannot.

Positive Feedback

According to the *Looking After Children Project* (Kufeldt et al. 2000), it is important to include information such as interests, hobbies, achievements, and supports into a case file and not just crisis interventions. It is important to make a concerted effort to include positive feedback, as many agency forms do not provide space for those types of observations.

Rights and Responsibilities

Make sure youth know and understand their rights. Be cognizant of your responsibility as a worker to fight for their rights. A balance has to be struck between protocol and policies and what is truly in the best interests of the child.

CONCLUSION

This consultation was an opportunity to engage our members and provide a positive way for youth to have a voice in educating current and prospective social workers and child and youth care workers. It is essential that child and youth care workers provide consistent contact, offer true caring and foster the strengths that exist within each youth. It is through a concerted effort on the part of all front-line workers that the challenges and struggles facing youth in care will not be exacerbated for another 25 years.

References

- Cicchetti, D.; Toth, S. L. and Rogosch, F.A. (2001). The Development of Psychological Wellness in Maltreated Children. In Cicchetti, D., Rappaport, J., Sandler, I. & Weissberg, R. (Eds.) *The Promotion of Wellness in Children and Adolescents*. Washington, D.C.: Child Welfare League of America.
- Government of Ontario. Statutes of Ontario: Child and Family Services Act R.S.O. 1990, c. C.11, s. 107. Toronto: Queen's Printer.
- Hilton, L. J. (1994) *Voices of Youth. Suggestions for intervention and policy*. Children Worldwide. The Family and Child Resilience.
- International Catholic Child Bureau/North America. (1992). *Building on People's Strengths*. Institute Prospectus Child Resilience and the Family.

- Jackson, S. & Martin, P.Y. (1998). Surviving the care system: education and resilience. *Journal of Adolescence*, 21, 569-583.
- Jackson, S.; Born, M. & Jacob, M. (1997). Reflections on risk and resilience in adolescence. *Journal of Adolescence*, 20, 609-616.
- Kelley, T.M. (2000). Thought Recognition, Locus of Control, and Adolescent Well-Being. *Adolescence*. Fall. (Findarticles.com)
- Kufeldt, K.; Vachon, J.; Simard, M.. (2000). Looking After Children in Canada-Final Report. Fredericton: University of New Brunswick.
- Losel, Friedrich. (1994) Resilience in Childhood and Adolescence. *Children Worldwide, the Family and Child Resilience*.
- Martineau, S. (2000). Resiliency: The Risky Business of Translating Resiliency into Advocacy Practice. *Focus on Children and Youth*. 5(1).
- Miller, C. T. (2001). A theoretical Perspective on Coping with Stigma. *Journal of Social Sciences*. Spring. (Findarticles.com)
- National Children's Bureau. (1977). Who Cares? Young people speak out.
- National Youth in Care Network (2001) Who Will Teach Me To Learn? Creating Positive School Experiences for Youth In Care. Ottawa: National Youth In Care Network.
- National Youth In Care Network. (1996). Into the Hands of Youth-Youth In and From Care Identify Healing Needs. Ottawa: National Youth in Care Network.
- O'Leary, V.E. (1998). Strength in the face of adversity: individual and social thriving. (Thriving: Broadening the Paradigm Beyond Illness to Health). *Journal of Social Sciences*. Summer. (Findarticles.com)
- Osborn, A. F. Resilience and Intervention Strategies. *Children Worldwide. The Family and Child Resilience*.
- Oyserman, D. (2001). Stigma: An Insider's View. *Journal of Social Sciences*, June. Findarticles.com
- Raychaba, B. (1992a). Doing and Being Done To: Voices of Youth. Ottawa: National Youth in Care Network.

- Raychaba, B. (1992b). Commentary-"Out of Control": A Youth Perspective on Secure Treatment and Physical Restraint." *Journal of Child and Youth Care*, 7,1 83-87.
- Raychaba, B. (1993). *Pain...Lots of Pain. Family Violence and Abuse in the lives of Young People in care*. Ottawa: National Youth in Care Network.
- Raychaba, B. (1988). *To Be On Our Own With No Direction From Home. Report on the Special Needs of Youth Leaving the Care of the Child Welfare System*. Ottawa: National Youth In Care Network.
- Rutman, D.; Barlow, A.; Hubbersty, C.; Alusik, D. & Brown, E. (2001). *Supporting Young People's Transition From Government Care: Research Project. Stage 1 Report*. Victoria, British Columbia : Child, Family and Community Research Unit, University of Victoria & The Victoria Youth In Care Network.
- Rutter, M. (1989) *Pathways from Childhood to Adult Life*. *Journal of Child Psychology and Psychiatry*, 31 (1), 23-51.
- Rutter, M. (1987). *Psychological Resilience and Protective Mechanisms*. *American Journal of Orthopsychiatry*. 57(3), July.
- Smith, D. (2001). *Placement Disruption in Treatment Foster Care*. *Journal of Emotional and Behavioral Disorders*, Fall. Findarticles.com
- Snow, K & Finlay, J (1998) *Voices from Within: Youth in Care in Ontario speak out*. Office of Child and Family Service Advocacy. Toronto: Queens Printer.
- Tiet, Q.Q. (1998). *Adverse life events and resilience*. *Journal of the American Academy of Child and Adolescent Psychiatry*. November. Findarticles.com
- United Nations (1997). *Convention on the Rights of the Child*. Geneva: High Commissioner for Human Rights.
- Vanistendael, S. (1994) *Resilience: As old as mankind*. *Children Worldwide, The Family and Child Resilience*.
- Wiley, A. & Rappaport, J. (2000). *Empowerment, Wellness, and the Politics of Development*. In Cicchetti, D., Rappaport, J., Sandler, I. & Weissberg, R. (Éds.) *The Promotion of Wellness in Children and Adolescents*. Washington, D.C.: Child Welfare League of America.