

"LOOKING AFTER CHILDREN": IMPLEMENTATION AND OUTCOMES IN CANADA

Louise Legault

*Child Welfare League of Canada
& Centre for Research on Community Services, University of Ottawa, Ontario*

Robert Flynn

*School of Psychology
& Centre for Research on Community Services, University of Ottawa, Ontario*

Sibylle Artz

*School of Child and Youth Care
University of Victoria, British Columbia*

Shannon Balla

Peter Dudding

Victoria Norgaard

*Child Welfare League of Canada
Ottawa, Ontario*

Shirley Cole

*Department of Health and Social Services
Government of Prince Edward Island*

Hayat Ghazal

*Services to Children and Adults of Prescott-Russell, Ontario
& Centre for Research on Community Services, University of Ottawa, Ontario*

Raymond Lemay

Services to Children and Adults of Prescott-Russell, Ontario

Susan Petrick

Gail Vandermeulen

Ontario Association of Children's Aid Societies, Toronto, Ontario

Marie-Andrée Poirier

*École de service social
Université de Montréal, Montreal, Quebec*

Marie-Claude Simard

Projet SOCEN

Institut de recherche pour le développement social des jeunes, Montreal, Quebec

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ABSTRACT: Recent research findings suggest that there are many positive outcomes and much resilience among children in care. These findings are based on a program evaluation of the Looking After Children approach, which emphasizes the promotion of positive outcomes of children in care, the importance of good parenting, and strong partnerships among caregivers. The Looking After Children philosophy is operationalized in the Assessment and Action Record (AAR). In a second Canadian adaptation of the AARs, Flynn and Ghazal (2001) retain many monitoring questions from the original British assessments while adding many measures from the National Longitudinal Survey of Children and Youth (Statistics Canada & Human Resources Development Canada, 1997). The use of questions from this national survey provides a means to compare children in care with a representative Canadian sample of children. This ability to compare developmental outcomes of children in care with those of their peers in the general population allows for a more accurate assessment of the degree to which children in care have attained positive outcomes despite adversity. This paper presents an historical overview of the implementation of the Looking After Children approach in Canada. Preliminary lessons learned from research findings, outcome monitoring, and implementation are also presented.

Key words: Looking After Children, children-in-care, foster care, resilience, outcome monitoring

Work on *Looking After Children* (LAC) began in the United Kingdom in 1987, culminating in the publication of the LAC tools in 1995 and their widespread adoption in England and Wales shortly thereafter. The LAC initiative grew out of concerns about the ability of the state to provide appropriate care for children and young people living apart from their families. The approach is based on a developmental model and is designed to promote optimal outcomes for children and youths across seven dimensions of development: health, education, identity, family and social relationships, social presentation, emotional and behavioural development, and self-care. These seven dimensions are measured by means of the Assessment and Action Records (AAR), the main *Looking*

After Children (LAC) tool designed to monitor outcomes annually among infants, children, and adolescents in out-of-home care. There are six age-appropriate versions of the Assessment and Action Records (AARs): 0-12 months, 1-2 years, 3-4 years, 5-9 years, 10-14 years, and 15 or more years. A seventh AAR, for use with Canadian youths aged 18-21, is currently under development. The AARs have several purposes: to produce consistent and thorough case records; to facilitate communication and shared understanding among front line workers, caregivers, parents, and children/youths; to improve the way in which assessments, plans of care, and reviews for individual children and youths are completed; to provide outcome measures to assess progress in children and young people's lives; and to allow for the aggregation of data on populations of children/youths to facilitate planning at the local, regional, provincial, or national levels. Used on a yearly basis, the AARs enable child welfare workers and caregivers to pinpoint children's and youths' individual needs, enhance the timeliness of the services they receive, and improve their developmental outcomes.

As a philosophy, the LAC approach moves away from the traditional goal of simply reducing harm to a more positive, pro-active focus on maximizing positive outcomes and trajectories in looked-after children. In addition to the promotion of good outcomes, two other key principles underlie the approach. First, child welfare agencies and organizations are accountable for the way they "parent" children and youths in their care and must hold to the same standards of parenting as a reasonable parent in the community who has access to adequate resources. Second, a child-centred, collaborative approach among key players is necessary to optimize positive outcomes and ensure appropriate "corporate parenting" by the adults responsible for the child's or youth's welfare.

The contents of the present paper are divided into four sections. The first section provides a brief historical overview of the introduction of the *Looking After Children* approach in Canada and of the tool that operationalizes this approach, the Assessment and Action Record. This section also includes a brief synopsis of the status of LAC implementation across Canada. The second section presents selected research findings as well as the results of four recently completed studies. The third section introduces the main lessons learned to date in outcome monitoring and implementation. We conclude with a discussion of possible future avenues of research.

BRIEF HISTORY OF THE LAC APPROACH IN CANADA

Introduction of the LAC Approach in Canada

The *Looking After Children* approach was met with great interest in a number of different locales throughout Canada. In 1995, a first pilot study was begun in Prescott-Russell Children's Aid Society (Plantagenet, Ontario). In 1997-1999, Phase I of a national *Looking After Children* in Canada project was funded by Human Resources Development Canada. It focused on introducing the approach, raising awareness, and piloting

the first Canadian adaptation of the LAC tool, the Assessment and Action Record (AAR), in six provinces: Ontario, Quebec, New Brunswick, Prince Edward Island, Nova Scotia, and Newfoundland and Labrador. Subsequently, some provinces fully implemented LAC (i.e., New Brunswick, Prince Edward Island). Important parallel provincial/territorial initiatives were also undertaken to implement LAC in a number of agencies and organizations located in Ontario, Alberta, Yukon, Northwest Territories, and British Columbia. In 2000, with continued funding from Human Resources Development Canada and the support of the provincial and territorial directors of child welfare, the Child Welfare League of Canada (CWLC, 1999) became formally involved as a sponsor of Phase II of the national Canadian Looking After Children project. In collaboration with LAC initiatives already underway in a number of jurisdictions, the Child Welfare League of Canada project aimed to expand the use of LAC and the AARs in child welfare organizations across Canada. Since then, a growing number of child welfare agencies and organizations have begun to use the AARs in response to an increased focus on accountability, particularly in terms of client outcomes.

Canadian Adaptations of the Assessment and Action Records

Several Canadian adaptations have been made of the original UK AARs. The first Canadian adaptation was published in 1997, in both English and French. In 2001, Flynn and Ghazal produced a second Canadian adaptation of the AARs. This version allows comparisons of the progress of children and youths in care with that of their age peers in the general Canadian population. As an added benefit, this version allows ready assessment of the degree to which a particular child or group of children have attained positive (i.e., resilient) outcomes in the face of adversity. Such comparisons are made possible by the fact that the revised AARs incorporate standardized population-based items and multi-item measures from the Canadian National Longitudinal Survey of Children and Youth (Statistics Canada & Human Resources Development Canada; 1995, 1997, 1999). The revised AARs also retain the same developmental dimensions and most of the service-quality monitoring questions from the original UK version. The rich information gathered by means of the revised AARs informs key stakeholders (e.g., youths, child welfare workers, foster parents, managers, board members, policy makers, and researchers) about the life experiences of children and youths in care and, more importantly, helps them identify pathways to achieve and maintain positive functioning.

Status of LAC Implementation Across Canada

There are thirteen provincial and territorial child welfare jurisdictions in Canada. Ten of these thirteen jurisdictions are now at various stages of implementation, ranging from full implementation to planning for LAC training (Newfoundland and Labrador, New Brunswick, Prince Edward Island, Quebec, Ontario, Alberta, British Columbia, Yukon, Nunavut and

Northwest Territories). Eight of these jurisdictions are currently using, or planning to pilot, the new Canadianized version of the AARs, which can be scanned into data bases and permits data aggregation. The other two jurisdictions are using non-scannable versions of the AARs, either the first Canadian adaptation of the AARs or a variation thereof.

RESEARCH COMPLETED TO DATE

As of this writing, we are in the final stages of scanning second-year cross-sectional and longitudinal data from the revised AARs into our LAC database. Our analyses to date have been based on LAC data gathered during the first year of using the revised AARs in Ontario (2001-2002). During 2002 and 2003, we have presented these findings at numerous conferences in child welfare and related fields, as well as to government policy analysts and decision-makers. We have also completed four research studies, the results of which we have begun to submit to peer-reviewed journals. The findings from these four studies are summarized below.

Resilient Outcomes Among Young People in Care (Flynn et al., 2003)

This study was intended to derive a new method for identifying resilience (i.e., positive adaptation in spite of serious adversity) among children and youths in out-of-home care and to determine the percentage of the latter who experienced resilience on selected outcomes. Participants included 340 young people aged 10 to 15 years and 132 children aged 5 to 9 years in the province of Ontario, Canada. Most were permanent wards of the province and were living in foster care. Corresponding to each in-care sample was a general-population sample of the same age range that served as a normative comparison group. These samples were drawn from the National Longitudinal Survey of Children and Youth (Statistics Canada & Human Resources Development Canada, 1999), which is a long-term study of the development of a nationally representative sample of Canadian children and youths from infancy into early adulthood. The two general-population samples were composed, respectively, of 5,539 young people aged 10-15 years and 11,858 children aged 5-9 years. Resilience among the young people in out-of-home care was operationally defined, on each outcome variable, as average or above-average functioning relative to that of the general-population sample of the same age. We found that relatively higher percentages of the young people in care experienced resilience on the outcomes of health, self-esteem, pro-social behaviour, and relationship with friends, whereas lower percentages were resilient on the outcomes of educational performance and anxiety/emotional distress. Overall, our results suggested that resilience has much to offer the field of child welfare research and practice.

Satisfaction with Current Placement (Flynn & Robitaille, 2003)

This study examined the level of satisfaction experienced by young people in out-of-home care with their current foster or group home

placements. The study also investigated the relationship with placement satisfaction of several child/youth characteristics (i.e., gender, age, and physically aggressive behaviour), the type of placement in which the young people were living (i.e., foster home versus group home), and two interpersonal variables (i.e., the young person's perceived relationship with his or her female caregiver, and with friends). The participants were 349 young people aged 10-17 years who were living in foster homes or group homes in Ontario. Half were male and half were female. The young people in foster homes were highly satisfied with their placements, significantly more so than those living in group homes. In a parsimonious regression model that accounted for fully 60% of the variance in placement satisfaction, the strongest predictor of placement satisfaction, by far, was the degree to which the young person perceived his or her relationship as positive with the foster mother or female group home worker. Other statistically significant predictors were the youth's residence in a foster (rather than a group) home and the perceived quality of his or her relationships with friends.

Involvement in Structured Voluntary Activities (Flynn & Vinograd, 2003)

On the basis of prior research on positive youth development, we hypothesized that more frequent involvement in structured voluntary activities (i.e., healthy extracurricular or community-based activities) would predict higher levels of positive outcomes, namely, self-esteem, pro-social behaviour and happiness/optimism, and lower levels of negative outcomes, namely, physical aggression, emotional distress, and suicidal behaviour. To test this hypothesis, we regressed each of the positive and negative outcomes on a set of predictor variables that included two demographic variables (gender and age), three risk factors (disability, aboriginal status, and substance use), a protective factor (the youth's perceived relationship with his or her foster mother or female group home worker), and the main predictor of interest, namely, an index of the youth's frequency of participation in structured voluntary activities. As predicted, more frequent involvement in such activities was significantly related to higher levels of pro-social behaviour and happiness/optimism, and there was a trend for greater involvement to be related to higher self-esteem. Contrary to prediction, however, more frequent participation was unrelated to any of the negative outcomes. Overall, the findings were consistent with resilience theory, which holds that involvement in healthy extracurricular or community activities is a protective factor in relation to the adaptation of young people who have experienced adversity.

Educational Resilience in Children aged 5-9 (Legault et al., 2003)

This last study explored the relative importance of protective and risk factors related to educational resilience. Children who experience early academic success are more likely to pursue their education and lead rewarding adult lives (Doherty, 1997). The early school performance of

children in foster care is especially important. Although many foster children experience difficulties in school, some do experience success despite having faced severe adversity in the past. Such children may be defined as educationally resilient. Three separate multiple regressions were conducted to identify significant factors associated with educational resilience. The regression models explained a total of 47% of the variance in educational performance. Specifically, results indicated that educational resilience (e.g., better academic performance) was significantly associated with (a) lower levels of hyperactivity and better problem solving skills in children; (b) high expectations by foster parents concerning academic performance and their encouragement of literacy-related activities (e.g., reading for pleasure, adult reading to child); and (c) children's experience of relatively fewer changes in primary caregivers (i.e., placement stability). Two main implications for foster parents and child welfare workers can be drawn from these findings. First, foster parents need to be aware of the importance of adopting high academic performance expectations and encouraging the development of literacy-related interest and skills among children in care. Although children in care may have experienced difficulties in the past, their future depends on receiving rich environmental affordances in the present (e.g., literacy-related opportunities). Second, there are significant associations between poor academic performance and both hyperactivity and poor problem-solving skills. Adults responsible for children in care need to be mindful that symptoms of hyperactivity and poor problem-solving skills may reflect, in part, children's exposure to stressful life events (e.g., abuse, leaving the birth home, living with strangers, etc.), rather than neurobiological imbalances. This latter hypothesis is partly supported by results showing that poor academic performance is associated with a larger number of different primary caregivers.

LESSONS LEARNED RELATED TO OUTCOME MONITORING AND IMPLEMENTATION

Lessons Learned from Outcome Monitoring

The ability to aggregate easily data obtained with the second Canadian adaptation of the Assessment and Action Records (AARs) enables child welfare stakeholders to monitor outcomes on several levels simultaneously. On the level of *direct service*, the AARs help the relevant stakeholders (i.e., child welfare workers, supervisors, foster parents or other caregivers, and young people themselves) to accurately assess children's and youths' developmental progress and to monitor their work as a team in carrying out high-quality, outcome-oriented plans of care. At the *managerial* level, the aggregated AAR results help supervisors, program managers, executive directors, and board members monitor children's outcomes on a regular basis by comparing their developmental progress with intended goals. Decision-makers can also assess the effectiveness of agency programs and services and identify those areas most in need of improvement. At the *provincial/territorial* level, the aggregated AAR results provide policy-makers

with accurate, up-to-date knowledge of system-wide outcomes, thereby enhancing accountability, policies and practices, and services. Finally, at the *national and applied research* levels, practitioners and researchers may gain a greater understanding of how environmental affordances, such as agency services or parenting practices, bring about improvements in developmental outcomes for children and youths in care. The ultimate goal of such applied research is to transfer the acquired knowledge to child welfare organizations across Canada and throughout the world. In short, the use of the AARs represents an inexpensive, cost-effective method of improving the capacity of organizations to be accountable for improved child or youth outcomes.

Lessons Learned from Implementation

Formal and informal feedback from stakeholders allows us to identify several key factors supporting LAC implementation. Formal feedback was obtained from key stakeholders earlier this year in an evaluation of Phase II of the national Looking After Children in Canada project (Allan, 2003). Stakeholders interviewed included young people, foster parents, members of the project's National Advisory Committee, provincial/territorial and national LAC coordinators, and LAC trainers.

Informally and formally, stakeholders have identified dedicated resources to support agency implementation as important. These resources come in two forms: (a) a strong training component for implementation, and (b) ongoing support for using LAC. The model of training, which trains trainers who then train local personnel, has been seen as effective and has been supported. Thanks to this approach, six jurisdictions (British Columbia, Northwest Territories, Ontario, Prince Edward Island, New Brunswick, Newfoundland and Labrador) are now able to conduct and sustain their own training needs. Joint sessions, involving foster parents and child welfare workers, seem to be useful in nurturing partnerships among these significant actors in children's lives. Foster parent involvement and opportunities for input have been identified as important and valued (Allan, 2003).

Our own observations indicate that, at the agency or organizational level, implementation appears facilitated by an incremental introduction of the AARs. For example, some agencies have made the use of the AARs part of the annual revision of the young person's plan of care. Others have introduced the use of the AARs first for youths, then for younger children in the following year. Implementation is also facilitated by strong support at the managerial level. Informal feedback from front-line workers and managers has suggested that a transition to the LAC approach is facilitated when management: (a) openly supports the approach; (b) recognizes that introducing the LAC approach requires a "cultural shift" and allows time to integrate the concepts fully; (c) sends all relevant staff to training sessions; (d) strives to streamline recording procedures (i.e., by eliminating duplication of forms); and (e) formally identifies an on-site "expert" who champions the LAC approach and philosophy, coordinates implementation

at the individual and agency levels, and provides feedback of findings from aggregated organizational, provincial, and national data.

The Canadian experience of implementation has seen both a grass-roots movement and ministry-level policies or regulations. Our experience has been that both top-down and bottom-up approaches to the implementation of LAC are useful and needed, particularly when they are reflected in collaborative agreements between child welfare organizations and provincial or territorial governments. Considerable synergy is created when child welfare agencies within a jurisdiction voluntarily adopt LAC and the province or territory then endorses their initiative. When a ministry responsible for child welfare has not yet enacted regulations or policies supportive of LAC, the continued use of the approach at the agency level remains fragile. During a formal evaluation of Phase II of the Canadian national project evaluation conducted earlier this year, respondents felt that key factors facilitating implementation are strong support from the provincial or territorial director of child welfare level and "systemic support" at this same provincial or territorial level. Respondents also noted that the greatest progress in LAC implementation has been made in provinces where there is policy-level support and resources to support implementation (Allan, 2003).

There is strong support for the contribution of the research component to the viability of the project. Through informal and formal feedback, stakeholders expressed an appreciation of the ability to acquire and evaluate outcomes in a timely way (by means of data aggregating information obtained from the AARs), which they saw as crucial to promoting the benefits of LAC and contributing to policy change. Jurisdictions provided with data reports were very enthusiastic about the information and the potential to develop a comprehensive profile of children in care. The long-term potential to evaluate outcomes and assess the development of children in care in relation to other Canadian children in care and children in the general population (through the link with the National Longitudinal Youth and Children Survey) was also identified as one of the most important contributions of the research component of the project (Allan, 2003).

CONCLUSION

Recently, there has been a growing recognition of the crucial interrelationships between research objectives and service-delivery goals in child welfare. Use of the AARs as clinical practice tools must go hand in hand with applied research. A major objective of our current research is to achieve a balance between the development of the AARs as "good practice tools" and the accumulation of data that will inform best practices in child welfare. We see both as essential to full and effective implementation of LAC. The ability to measure outcomes and provide meaningful information for decision-making is crucial for promoting the benefits of LAC and contributing to policy change. The aggregation of data and

preparation of annual AAR-based outcome profiles at the agency, provincial, and national levels offer ongoing opportunities to view the progress of young people in care in relation to that of their peers. More importantly, our research findings to date suggest that there are many positive outcomes and much resilience among children and young people in care on outcomes such as pro-social behaviour, self-esteem, optimism about the future, and satisfaction with current placement. Our results to date also indicate that urgent priority areas for improving outcomes are education and behavioural and emotional development. While these latter findings highlight remaining challenges in child welfare, our results have also shown that a good number of children and young people in care display average or above-average (i.e., resilient) academic performance and are well adjusted behaviourally and emotionally. In our future research, we will examine longitudinal data in an attempt to identify robust individual and environmental factors associated with resilient outcomes and trajectories among young people in care. These findings could then support the construction of effective intervention strategies associated with improved outcomes, not only in the traditionally identified areas of education and behavioural-emotional development but also in the other LAC dimensions of health, social relationships, identity, social presentation, and self-care skills. As researchers and practitioners, we have much to learn from resilient children and young people as we strive to make more educated decisions and fewer educated guesses about their development.

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