

# 'The black box never sleeps ...'

## Inside perspectives on youth placements in residential care

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### Abstract

The metaphor of the *black box* has often been used in recent years to refer to characteristics of residential care that - although of pivotal importance - are not sufficiently transparent or known. Considering its importance for positive outcomes and the lack of research on this topic within the context of residential care, the current special issue focuses on the 'components' that facilitate change in behaviour and well-being of youth in residential care through an explicit orientation towards the perspectives and experiences of young people and professionals. This form of study can be called 'voices research'. The included studies present insights on the aspects of the residential youth care process that are important for the development and well-being of the youth in care and, therefore, the outcomes of care. Topics that will be addressed include the youth-adult relationship in residential care; the adolescents' perceptions of participation in secure care; the experience of pain in secure care; clients' and professionals' perspectives on the quality of care; the threats to the therapeutic milieu aspects of residential care; and the discovered benefits of workers' in-service training according to positive parenting practice models.

**Keywords:** black box, residential care outcomes, youth perceptions

## Introduction

'A casual reader of the Stockholm Declaration on Children and Residential Care might easily conclude that the nations of the world had declared as a goal a definitive end to a centuries-long period in which dependent children had lived in group settings away from family and that a clear road map existed to a future that would be free of residential care. Our case studies of the evolution of residential care around the world call this viewpoint into question. Although it is certainly true that some parts of the world use residential care to a far lesser degree than others, we are unaware of any country with an industrial or post-industrial economy that does not place at least some of its children in residential care' (Courtney, Dolev, & Gilligan, 2009, p. 191).

For very young children, especially those under three years of age, family foster care is widely considered to be the preferred option in case of an out-of-home placement (Browne et al., 2006). Although data need to be interpreted with great caution because of shortcomings in registration systems, recent estimations of the number of children and young people in residential care settings at any given moment in time still indicate sizeable numbers, for example:  $\pm 60.000$  in the USA (2011),  $\pm 7.000$  in England (2012),  $\pm 5.000$  in Sweden (2010),  $\pm 15.000$  in the Netherlands (2010),  $\pm 94.000$  in Germany (2010),  $\pm 14.000$  in Spain (2011), and  $\pm 15.000$  in Italy (2010) (all numbers derived from Del Valle, 2013). Thus residential settings play an ongoing role in the care continuum (Bullard & Johnson, 2005). This being the case, the issue of the characteristics, the quality and the

effects of this type of care is an especially important one for the well-being of many children and youth.

The first part of the title of this introductory paper - 'the black box never sleeps ...' - was inspired by a comment of professor Robert Gilligan (Trinity College Dublin) during the 11th Biennial EUSARF Conference 'Inside out' (September 2010, Groningen, the Netherlands), with that expression referring - with a wink to Freud - to the potential impact of care services in the lives of vulnerable children and their families. The metaphor of the *black box* has often been used in recent years to refer to characteristics of services, especially residential care, that - although of pivotal importance - are not sufficiently transparent or known (see for instance, Evenboer et al., 2014; Fein, 2002; Harder & Knorth, 2014; Libby et al., 2005; Palareti & Berti, 2009; Sinclair, 2010). In research on results of care or therapeutic services it is more and more recognized that it is not possible to get a grip on intervention effects (i.e., the determinants of outcomes) without knowing 'what's going on' during the care or treatment process itself. More specifically, research is needed that addresses the issue of the 'components' that facilitate change in behaviour and well-being of young clients in care (cf. Chorpita, Daleiden, & Weisz, 2005; Emmelkamp et al., 2014).

There are different ways of studying effective ingredients or 'what works' components during residential care, such as descriptive studies that try to explore the core elements of an intervention and theoretical studies that intend to answer the question why a care process leads to certain outcomes (Knorth & Harder, 2014; Lee &

Barth, 2014; Whittaker & Maluccio, 2002). For example, several reviews and meta-analyses have been conducted to identify the outcomes and effective ingredients of residential care (Harder & Knorth, 2014). More specific ways to identify such ingredients are for example the gathering of treatment file information, the use of questionnaires, conducting observational studies or the gathering of data on the perspectives of those who are involved in care. For the current special issue, we choose to focus on this last type of research because it is still quite rare within the context of residential care (Kendrick, 2008; Kendrick, Steckly, & Lerpiniere, 2008). Therefore, the studies that are included in this journal are focused on the perspectives of young people and professionals regarding those aspects of the residential youth care process that are important for the development and wellbeing of the youth in care, and therefore the outcomes of care.

## Contributions

### Experiences and perspectives of youth

The first article is contributed by *Charles Izzo and his team* (Cornell University, USA). It reports on a survey of a large sample of youth receiving residential care services in the south-east part of the United States. More than 700 respondents (8-21 years old; mean age 14.3) answered an open question regarding the characteristics of direct care-staff that ‘... make them your favourite’. The underlying assumption is that knowing these perceived qualities and competencies of professionals would allow care

organizations to maximize the ‘fit’ with the needs, preferences and best interests of their most important stakeholders, the residents. Using the *Constant Comparative Method*, introduced by Glaser and Strauss (1967), five clusters of staff-characteristics were discovered that represent attitudes and behaviours highly appreciated by youth in care, i.e. engagement, genuineness, flexibility, respectfulness, and discrete favourable characteristics. Significant differences related to demographic variables such as age, gender and tenure at the agency were observed. For instance, girls were more likely than boys to endorse some categories in the ‘engagement cluster’ (i.e., care worker listens; meets emotional needs; is available/dependable/approachable) while boys more likely endorsed the ‘discrete favourable characteristics cluster’ (including, for instance, relational qualities like ‘nice’, ‘funny’, ‘likes to have fun’, etc.). The authors conclude that residential programmes should facilitate an ongoing dialogue with young residents.

In the paper of *Mijntje ten Brummelaar and her colleagues* (University of Groningen, Netherlands) the focus is on the experiences of young people (mean age 18,6) in secure residential care. A random sample of 18 male adolescents was interviewed on the degree of participation they perceived during their stay in a juvenile justice facility, assuming that a higher level of participation might enhance positive outcomes. More specifically, they were asked whether they felt that their views had been taken into account in decision-making processes, thereby differentiating between *everyday decisions* (for instance, regarding group activities) and *higher order decisions* (for instance, related to care plans). It came

out that in both types of decisions the interviewees expressed mixed views on their engagement in decision-making; some of them feeling involved, others wanting more responsibilities. If adolescents did not see a direct result of their expressed views, participation was felt as less meaningful. Also due to former experiences in care, some interviewees seemed to express feelings of distrust and indifference. The authors conclude that instead of a one-time experience, participation should be an ongoing process, while recognizing the boundaries of secure placements in care.

The contribution by *Leon Fulcher and Aliese Moran* (independent scholars), accompanied by *James P. Anglin* (University of Victoria, Canada), also refers to clients' experiences in a secure care facility. At the heart of this ethnographic study, and the book from which much of the article content has been extracted, is the voice of a young woman in secure care, in all its rough and raw reality. Our readers may be surprised by both the format and content of this article, as it requires us to move out of our comfort zones and engage in a quite direct manner with the pain and tragedy experienced by some young people in care. The article also includes assessments and perspectives from professionals working with these young people in the juvenile rehabilitation setting. The authors pay special attention in their discussion to what they term the *child protection paradox*, originally brought to the fore by Ainsworth and Hansen (2012). It refers to the seemingly inevitable tension created by the societal need to protect children against seriously abusive parents by removing them from home, while at the same time doing harm to children and parents by the trauma, distress and grief that

results for them. Not pretending to have 'the answer' for this paradox, Fulcher and colleagues opt for 'relationship-based supportive practices' '... that encourage and reward parental efforts to alter their lifestyles and parenting practices whilst attending to fundamental child protection concerns.' Such an approach also impacts, or should impact the way young people are being supported on their roads out of care, which is dramatically illustrated by the case under study.

The paper by *Sónia Rodrigues* (University of Porto, Portugal) and her supervisors *Jorge F. Del Valle* and *Maria Barbosa-Ducharne* covers a pilot study into the views and perspectives of children and caregivers regarding residential care services in Portugal. Six care centres in various areas in the country participated. In these centres 66 children (0-20 years old; mean age 15.1) and 62 caregivers (mean age 38.8) were interviewed on a number of quality dimensions, using an extensively tested evaluation methodology (named ARQUA-P). The resulting picture was quite positive. However, young people were, compared with caregivers, more critical on the dimensions 'respect for rights', 'normalization and integration', and 'development and autonomy'. In contrast, they evaluated the 'use of consequences' (like reward and punishment) more positively which, according to the authors, presumably is related with their negative past experiences in the family context. Children with more time spent in care felt more safe and protected, indicating a potential *buffering effect* on the impact of adversity from outside circumstances. Also, some typical age- and gender-related patterns came out. Older youngsters were less satisfied regarding the dimensions 'normalization

and integration' and 'health and life style'. And girls were described as more demanding compared with boys on 'health and life style', 'development and autonomy', and 'support to family reunification'. The authors conclude that centres should be sensitive to potential mismatches between children's and young people's needs and the services provided to them.

### Experiences and perspectives of professionals

Rodrigues and colleagues already reported on experiences and opinions of young people about those who are taking care of them in residential settings: the professionals or group workers. The next two articles focus on worker perspectives.

Our colleague *Hans Grietens* (University of Groningen, Netherlands) wonders if the residential group still can be a therapeutic milieu where daily life can be exploited to change children's behaviour or - more precisely - to initiate change in the direction of less problematic and more pleasant experiences of children (and their families). Fully aware of the fact that group workers and the way they relate to the young inhabitants is 'key' for the quality of group care, Grietens engaged six residential facilities in Flanders (the Dutch speaking part of Belgium) in his research, and involved three residential workers in each unit - one of them being a senior - for an open interview on the issue of the group as an instrument of change. According to the respondents, four 'megafunctions' exist: the group as a place for the child to settle down; to offer safety; to pass on values; and to offer warmth and involvement. Threats to these

'basics' come from two developments. First, interviewees report an increased *workload*, associated with factors like a growing complexity of young people's problems, the group size, the potential for negative group dynamics, and changes in policy. Second, they refer to a growing *lack of time*, being the result of duties like paper work and household work. The author ends, among other things, with a firm plea for reducing the group size, thereby making possible a more family-style environment for these vulnerable young people; an argument that can also be supported by indirect evidence (Harder & Knorth, 2007; Lee & Thompson, 2008).

The article by *Isabel Silva* and *Maria Gaspar* (University of Coimbra, Portugal) addresses a topic that seems pivotal in all efforts to optimize the quality of residential child and youth care services: the (in-service) training of the workforce. After a short overview of the literature on the challenges group workers have to deal with nowadays, especially in a Portuguese context, Silva and Gaspar direct their attention to the usefulness of parenting programmes for the promotion and training of positive staff care practices. Their own research on the application of the evidence-based *Incredible Years (IY)* parenting programme in training courses for Portuguese residential workers showed its positive value unmistakably. Participating residential staff carers ( $N=27$ ) in two training groups, each of them composed of 13 sessions, indicate that learning educative strategies, such as praising, helped them the most. Almost one-third of the carers stated everything about the programme was helpful. When asked about the specific benefits, the participants include comments regarding understanding the resident children

better, improving relationships with the children, learning more strategies, and the positive impact of the training in the residential environment. The authors strongly recommend the continuation of research on training of carers in positive parenting practices.

## Finally

Considering the six papers as a whole, one crucial factor emerges as decisive for the potential of residential care to impact the life of vulnerable children in a positive direction: the *relationship* between the child and the carer. The ability of residential workers to relate to children and young people in a sensitive and understanding way is at the heart of their professional identity and efforts. Their most appreciated characteristics (Izzo et al.), their creating room for child participation

(Ten Brummelaar et al.), their ‘relationship-based supportive practices’ (Fulcher et al.), their buffering of adversity from outside circumstances (Rodrigues & Barbosa-Ducharne), their personification of the therapeutic climate (Grietens), and their positive parenting practices (Silva & Gaspar) all are connected in one way or another to the child - carer relationship. As a common factor or element (Chorpita et al., 2005) the importance of this core aspect in the residential ‘black box’ cannot be overestimated (see also Kendrick, 2013; Harder, Knorth, & Kalverboer, 2013).

Further, given that relationship is in essence reciprocal (Anglin, 2002), researchers need to continue their innovative and creative efforts to engage the voices of both carers and those cared-for in addition to measuring outcomes. Without such research, even if strong positive outcomes are discovered in evaluation studies, we won’t understand *how* these outcomes were achieved.

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