

PROVIDING DIDACTIC AND EXPERIENTIAL LEARNING OPPORTUNITIES  
TO PARENTS OF CHILDREN IN RESIDENTIAL TREATMENT AS IMPETUS TO FAMILY  
REUNIFICATION: THE FIVE ACRES PROJECT

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ABSTRACT

The Federal Adoption Assistance and Child Welfare Act of 1980 {PL 96-272} requires that a permanent plan be developed for all youngsters in out-of-home placement. A section of the Act mandates that agencies provide services to prevent placement out of the home, and that where placement cannot be prevented, the agency is instructed to return the child to the biological family as soon as possible. For family reunification to occur at an optimal time and not before the parents are sufficiently prepared, residential treatment centers must expand and revise their model of service delivery to include extensive involvement and provision of services to parents as a practical, integral part of their program. This study provided and examined such an expanded model of parental involvement at Five Acres--The Boys' and Girls' Aid Society of Los Angeles County.

Overview

The Adoption Assistance and Child Welfare Act of 1980, P.L. 96-272, mandated that placement agencies find better ways to help families overcome the difficulties which had led to court separation of the children and their parents (U.S. Congress, 1980).

As written, the Act has all the components that socially relevant legislation should have. Funding and the mechanisms for effective implementation, however, are not yet equal in strength to the conceptual formulation of the Act. In the past six years federal spending for welfare programs in general, and for child welfare programs in particular, has been severely cut.

This study addressed the challenge of providing expanded services without additional funding by implementing and evaluating a parental involvement program which attempted to resocialize the parents of children in residential care to a more competent parental role. The study investigated an expanded model of educational services to parents of youngsters who resided at Five Acres - The Boys' and Girls' Aid

Society of Los Angeles, a residential treatment center for emotionally and behaviorally disturbed youngsters between the ages of four and thirteen, who have been separated from their parents by court order. An attempt was made to resocialize the parents to a more gratifying parental role; and observe whether family reunification, increased satisfaction with home visits, and a decrease in the frequency and severity of children's disruptive behavior occurred as a result of this expanded involvement.

The model provided both didactic and experiential learning opportunities for parents based on the assumption that structured parental involvement would lead to acquisition of improved child management skills, a sense of adequacy and competence, and an increased commitment and willingness to resume full-time childrearing responsibilities on the part of the parents.

The didactic and experiential learning opportunities were applied separately to two groups of clients at Five Acres, and together to a third group at the center, in an attempt to discover if one type of learning experience was more successful than the others in providing a parental resocialization experience which led to the goal of increasing parental competency and facilitating family reunification.

#### Parental Involvement in Child Residential Treatment

There is substantial discussion in the literature urging children's residential agencies to become reoriented to a family centered/family reunification model of service delivery.

Several theorists have emphasized the traumatic effect of prolonged parent - child separation (Bowlby 1958, 1969; Ainsworth 1969, 1972; Goldstein et al 1973; Jenkins 1981). Many others have urged the involvement of parents in child residential programs from intake all the way through the treatment process (Maluccio 1974, 1981; Finkelstein 1974; Magnus 1974; Krona 1980; Wittaker 1979, 1981). Still others have offered models for family involvement in campus life (Heiting 1971; Kemp 1971; Bullington et al 1976; Sinanoglu and Maluccio 1981).

There is ample material available on the content and conduct of parent education groups (eg. Ginott 1965; Gordon 1970; Dinkmeyer and McKey 1976; Arnold et al. 1978, and others). Socialization and adult learning theorists explain the process by which adults can learn the behaviors, emotional responses, skills and values needed to function and fulfill their parental roles successfully (Towle 1954; Erikson 1963; Brim and Wheeler 1967; Clausen 1968; Knox 1972; Knowles 1972; Hilgard and Bower 1975; McBroom 1976).

### Population

The population consisted of 54 children, 36 boys and 18 girls, who happened to have been referred to Five Acres during a 12 month period by the Los Angeles County Department of Public Social Services or the Department of Education. As determined by the number of available parent figures who were willing to participate in the project, there were 112 study subjects [66 parents and 46 children]. Attrition reduced the final number to 88 [51 parents and 37 children].

### Design

Each child and family was sequentially assigned to one of the three treatment conditions as they entered the program. Treatment condition one consisted of experiential participation alone, treatment condition two consisted of presentation of didactic material alone, and treatment condition three consisted of a combination of both.

For implementation purposes this study employed pre- and post-test measures on all parents and children who had agreed to participate. Experimental conditions were applied simultaneously in all three groups. Data were collected and analyzed at the end of six months to ascertain which type of parental involvement opportunity (experiential, didactic, or both) was most successful for the agency in terms of meeting the goals for families outlined above.

The three groups were compared to themselves and to each other. Pre-tests included the Devereux Child Behavior Rating Scale and the Parent Report of Attitudes toward Child Rearing. The Index of Parental Satisfaction with Home Visits was collected on an ongoing basis during the study following each home visit.

### Dependent Variables

The primary dependent variables in this study were the decrease of inappropriate behavior by children (as measured by the Devereux Child Behavior Rating Scale) and movement toward family reunification. Family reunification was defined as the re-establishment of living together of a child in placement with the person(s) from whom he was separated by the court due to emotional or behavioral difficulties. The verbal commitment of a child and family to reunite within a specific time frame was considered an indication of movement toward reunification.

The secondary dependent variables included parental satisfaction with children's behavior on home visits (as measured on a six-item self-reporting instrument), change in parental style of parent-child interaction (as measured on a twenty-item questionnaire, the Parent Report), and the length of time in treatment before return to home and family.

### Independent Variables

The independent variables in this study were the methods of parental involvement and types of learning opportunities (experiential, didactic or both) offered to parents of children in residence.

Experiential learning opportunities were defined as activities in which parents were invited, encouraged, and assisted to participate actively together with their placed youngster(s) (e.g., birthday parties, field trips, exercise classes, holiday celebrations, meal preparations, conferences with houseparents and school personnel, opportunities to observe how houseparents manage children).

Didactic learning opportunity was defined as provision by the agency of systematic instruction, intended to impart to the parents specific pre-selected information through the medium of parent education/support groups. The groups consisted of a structured ten-week course, meeting one and one-half hours per week, designed to offer parents instruction and support regarding behavioral management of their children. The focus of the groups was on parent-child related issues. The format consisted of presentation of didactic material, facilitation of open discussion, and reports and discussion of related anecdotal experiences.

### Description of Data Gathered and Method of Data Reduction

The baseline data consisted of length of time in residence before the study began and included the collection of demographic data, a list of type and frequency of problem behaviors for each youngster, psychiatric (DSM-III) diagnosis for each youngster, scores on the Wechsler Intelligence Scale for Children - Revised (WISC-R), the Devereux Child Behavior Problem Checklist, indicants on an Index of Parental Satisfaction with weekend home visits, and scores on a twenty-item Parent Report of Attitudes toward Child-Rearing. Post-tests were administered six months after inception of the study, or at the time of discharge, if between two and six months following inception.

The chi-square statistical procedure was used to compare the three groups on the dependent variable of family reunification (i.e., children being reunited or not reunited with their families).

When post-test scores on the Behavior Problem Checklist and the Parent Report were obtained, an analysis of variance was conducted to determine the probability that the means of the three groups of scores deviated from one another merely by sampling error.

Correlations of parent and child variables with each other, and with the overall outcome measure of family reunification, were computed to ascertain significant elements. Correlations of demographic variables with the overall outcome measure were also computed.

Using family units as the base unit of analysis, statistical procedures were employed to assess the effects of treatment in relation to the following questions.

1. Is there a significant difference among the three treatment groups in regard to the primary outcome variable of family reunification?
2. Is there a significant difference in scores on each parent variable among the three groups?
3. Is there a significant difference in scores on each child variable among the three groups?

#### Primary Analyses

Tables 1 and 2 illustrate the results of the chi-square for difference among proportions as regards the primary analysis of each treatment condition in relation to outcome of family reunification. Results revealed that the families who received both the experiential and didactic treatment conditions moved toward reunification at a significantly higher rate than families receiving either the experiential or didactic treatment conditions alone ( $p=.05$ ).

Table 1

#### Family Reunification Outcome by Individual Treatment Conditions

Treatment Condition	Number Reunified	Possible Number	%
Experiential	5	11	45%
Didactic	6	10	60%
Both E & D	9	10	90%

Chi-square=4.67,  $p=.10$

Table 2

#### Family Reunification Outcome by Treatment Condition Categories

Treatment Category	Number Reunified	Possible Number	%
Separate (E or D)	11	21	52%
Both (E & D)	9	10	90%*

Chi-square = 4.19  
\* $p = .04$

The results of the correlations of parent variables with the outcome measure of reunification are displayed in Table 3. These correlations show that for all treatment conditions parents who did not react with parental temper and detachment were more likely to achieve reunification with their children. There was no significant difference among the three treatment groups on this factor.

Table 3

Correlation of Parent Variables With Reunification

<u>Parent Report Scale Item</u>	
1. Respect for Authority	.18
2. Control via Guilt and Anxiety	.26
3. Consistency *	-.08
4. Child Centeredness	-.14
5. Parental temper/detachment	-.33 **

Note: \* high score on this item is undesirable  
 \*\*  $p = .05$  (directional test)  
 Point biserial correlation coefficients are used  
 throughout to measure relationships between parent/child  
 variables and family reunification

The correlation of child variables with reunification indicated that the child's behaviors as measured on the Devereux scale are not statistically significant determinants of movement toward reunification. None of the behavior changes measured was related to the overall outcome measure.

Secondary Analyses

In order to compare the three groups and their patterns of change, within-group t-tests were performed to compare the pre- and post-test scores on each of the child variables for each of the three treatment groups. Difference scores were then calculated for each subject and the three groups were compared in their mean difference scores using a one-way analysis of variance.

Relatively few changes in the children's overall adjustment were noted in the six-month study period. No significant differences at the .05 level were found by applying the between-groups analysis to the child variables.

The results of the within-group and between-groups analyses for the parent variables were as follows. For the parent attitude scale the experiential group demonstrated significant change on item two, control by guilt and anxiety, at the .01 level. The didactic group demonstrated significant change on item three, parental consistency, at the .01

level. The combined experiential and didactic treatment group did not demonstrate any significant changes on this parent variable.

There were no significant differences found by applying the between-groups analysis on this variable.

The within-group analyses of the parental reports of satisfaction with home visits were grouped into three time periods of two months each and a one-way analysis of variance was conducted to determine if there was significant difference within each group for the three time periods. For all three groups there was significant change at the .05 level.

The correlation of child variables with parent variables revealed several interesting and significant findings (See table 4).

1. Parents' respect for autonomy correlated significantly with six measures of child behavior. Parents who respected their child's autonomy tended to have children who were less distractible, less anxious and fearful, less prone to emotional upset, less messy, less impulse-ridden, and more able to delay gratification.
2. Parents' control through guilt and anxiety correlated significantly with two child variables. Parents of girls reported using this strategy less often than did parents of boys, and the children of parents who did use this strategy tended to be messy or sloppy in their eating habits, careless about their appearance and personal belongings, and prone to get dirty and untidy quickly.
3. Parental consistency yielded one significant correlational finding. Parents who were very consistent tended to have children who were less domineering, less physically assaultive, less apt to tease and bully others, and less likely to provoke peers into assaulting them. Children of consistent parents also tended to be less timid and withdrawn, less socially isolated, generally less awkward and better coordinated physically.
4. Child-centeredness yielded no significant correlations with children's behavior ratings. This finding was surprising in that the investigator had expected that parents who were more child-centered would have children who were less behaviorally disturbed. One suggested explanation for this unexpected result is that the parent scale factor of child-centeredness may in fact be a misnomer. Based on the scale questions perhaps a high score in this category is more indicative of the parental tendency to be mistrustful and over-controlling (i.e., the opposite of permissiveness) rather than child-centered. Moderate scores on this measure might be more desirable than high scores.
5. Parental temper and detachment correlated significantly with one child variable. Parents who did not react in this style tended to have children who were generally self-

- sufficient and not excessively dependent upon adults.
6. Two significant correlations of the parental home visit satisfaction index and child variables emerged. These indicated that parents were most pleased on home visits with children who were able to delay gratification of impulses, could accept parental directives, did not get over-emotional when things did not go their way, and were able to express their anger in controlled and non-tantrum-like ways.

Table 4

Correlation of Child Variables With Parent Variables

Child Variable	Auto- nomy	Guilt	Consis- tency	Child- centered	Temper/ detach	Satis- faction
1. Sex (M=1,F=2)	-.02	-.39#	-.03	-.16	-.28	.04
2. Age	.10	-.15	.17	-.24	-.08	.00
3. Distractibility	-.42**	.20	-.16	.35	.02	-.26
4. Poor Self Care	-.26	.00	.12	.36	-.35	.27
5. Pathological use of Senses	.00	-.10	.18	.01	.03	-.08
6. Emotional Detachment	.02	.30	.14	.17	.08	-.05
7. Social Isolation	.06	-.02	.30	-.11	.05	.16
8. Poor Coordination	-.05	.04	.33	-.06	.17	-.03
9. Incontinence	.00	-.28	-.39	-.13	-.25	.16
10. Messy/Sloppy	-.54**	.37*	-.11	.36	-.01	-.16
11. Inadequate need for Independence	.07	.10	-.10	-.07	.34*	.03
12. Unresponsive to Stimulation	.01	.14	.18	.02	-.05	.26
13. Prone to Emotional Upset	-.31*	.11	.03	.21	.05	-.33*
14. Need for Adult Contact	-.08	-.21	.29	-.24	-.11	-.08
15. Anxious/Fearful	-.31*	-.26	.05	.15	-.04	-.28
16. Impulsive	-.39*	-.07	.15	.26	-.25	-.04
17. Unable to Delay	-.46**	.23	.16	.44	.19	-.41**
18. Social Aggression	.24	.21	.36*	.38	.08	-.04
19. Unethical Conduct	-.29	.26	-.03	.34	-.12	-.12

Note: \*  $p < .05$  [Directional Test]

#  $p < .05$  [Directional Test]. Parents of girls used guilt strategy less than did parents of boys.

\*\*  $p < .01$  [Directional Test]

<sup>1</sup> High scores on Autonomy and Child-centered scales are desirable. Low scores on all Devereux items are desirable.

The next step in the analysis was to correlate demographic variables with the outcome measure of family reunification. Three of the demographic indicators were statistically significant predictors at the .05 level.

1. Children who were diagnosed as having a dysthymic disorder showed a significant positive prognosis for reunification [ $p < .05$ ]. This result supports a long-held practice notion that pain and sadness ("dysthymic" disorder) frequently lie buried beneath anger and acting-out behavior. The data show that children whose sadness is available to measurement have a rather good prognosis for accepting treatment efforts aimed at remediating their family problems.
2. Children whose primary behavior pattern was characterized by fearful responses were significantly more likely to be reunified with their families ( $p < .05$ ).
3. Children who had several previous placements tended not to achieve reunification ( $p < .01$ ).

Interestingly, although the majority of the children and families (86%) had previously participated in counseling on an outpatient basis, this earlier experience apparently had no impact on the outcome of the experimental project. This finding begs an interesting question. If eighty-six percent of the families had previous outpatient counseling which did not increase their chances of reunification after placement occurred, what are the implications regarding the time, energy and money spent on that previous counseling? Research strategies could be developed to examine the nature and extent of previous outpatient counseling to measure what type of work was done, with what theoretical and practice orientation. It would be extremely interesting to try to find out whether previous counseling experiences had been based on curing and treating problems or on the teaching of successful strategies for living together as a family group.

### Discussion

Despite the fact that this project was set up experimentally and that no major internal validity issues arose during its implementation, the small sample size, coupled with several areas of unavoidable bias unique to the residential treatment practice setting, relegate the study to exploratory status and limit the generalizability of the findings to other settings serving the same type of youngsters and families. However, the findings of this initial inquiry can be used heuristically to generate practice strategies and hypotheses for future study.

Two basic questions were addressed by this research project. (A) Did study subjects improve their scores after treatment? (B) Did study

subjects involved in one type of treatment group (i.e., didactic, experiential, or a combination of didactic and experiential) improve their scores more than subjects in other treatment groups? These two questions generated four research hypotheses: (1) There will be significant differences in children's decrease of inappropriate behavior in the three groups based upon the type of socializing experiences offered and utilized by their parents. (2) There will be significant differences in the incidence of movement toward family reunification in the three groups. (3) There will be significant differences in parental satisfaction with home visits in the three groups. (4) There will be significant differences in the amount of change of parental style in the three groups.

The data did not support the first research hypothesis which projected significant differences in decrease of children's inappropriate behavior in the three groups based upon the type of socializing experiences offered to and utilized by their parents. A one-way analysis of variance, using mean difference scores for each of the three groups on each of the child variables, revealed no statistically significant difference among the three groups.

Perhaps the performance of children on campus is difficult to modify significantly over a six-month period, and when that modification does occur, it may be related to factors other than staff attempts to work with parents.

Consistent with the second research hypothesis, there was significant difference in the incidence of movement toward reunification in the three groups. When participants in the two separate treatment conditions were grouped together and compared to the combined treatment group, the results were quite dramatic: 52% reunification was observed for the two separate groups compared to 90% for the combined group ( $p=.04$ ). Even more meaning can be attached to this outcome when one notes that all staff members involved in the conduct of this project were instructed that no diminution of the usual criteria that Five Acres traditionally used to assess movement toward a successful reunification was to be employed.

The third research hypothesis projected a differential increase in parental reports of satisfaction with home visits. While the third research hypothesis was not supported, there was significant increase in satisfaction reported within each of the three treatment groups over a six-month period.

One possible explanation regarding the child's improved performance at home is that the act of the parent filling out the satisfaction checklist at the end of each home visit served as a kind of behavior modifier in the form of a control or a consistency measure for the children. When children know they are being scored they may put forth extra effort in order to have the scoring reflect positive growth.

A second possibility regarding children's improved performance at home stems from philosophical and theoretical notions about the social service delivery system in general. There is a peculiar irrationality inherent in a system which attempts to improve family functioning by physically separating family members when problems arise and treating each of the components as separate and unconnected entities. Children need to see a logical inter-relationship among the various systems that seek to control them (i.e., parents, school, treatment agents, out-of-home placement programs, etc.) Whenever there is a lack of consistency among these caretaking systems an irrationality arises which may be very threatening to the child. Some of these inconsistencies and irrationalities can be tolerated--at least temporarily--and some cannot. When parental figures and surrogate caretakers or extended family members give contradictory, inconsistent, irrational or conflicting messages, children may engage in acting-out behavior as an attempt to bridge the gap and to find some level of rational consistency. Perhaps the testing behavior so prevalent among children who are exposed to more than one set of parenting figures is an attempt to see what common limits will emerge from the diverse parenting styles of mother, grandmother, father, teacher, etc. The parent-involvement project, by showing the child that a unity of approach and method is developing around his/her caretakers may have offered some relief to the child facing multiple parenting and this relief may have allowed for reduced acting-out behavior on home visits.

Possible explanations focusing on the parent(s) also deserve exploration based on these findings. The child welfare system often works from a theoretical perspective which in essence is a parent-effects model, one which assumes that parents and other adult caretakers influence and shape the behavior of the child-client. A broader view of human behavior utilizing a systems perspective allows for the possibility of polar reactions or for hypotheses which project that the actions of children are powerful influences in shaping the responses and behavior of their adult caretakers. Perhaps the children whose parents participated in this project learned how to influence their parents to rate home visits as satisfactory even when they were not so.

A second explanation regarding parents emerges from a realistic assessment of how the parents of involuntarily placed children come to view the helping agents with whom they are required to interact. Many of these parents see the residential treatment facility as an extension of the legal system which removed the child from their home. As such, the facility can take on an image of authority which engenders mistrust on the part of the parent(s). The same kind of tension which develops between children and punitive parents can sometimes develop between agencies and their clients. For these parents, placing increasingly high ratings on the home visit satisfaction index may be an attempt to convince the system that they (the parents) are improving, and can be regarded as capable of taking their child home to live once again. The issue of how the child welfare system can act to move parents to a position of trust regarding the residential agency and its power remains fertile ground for future research endeavors.

A final thought regarding parents' role in the phenomenon of reporting increased satisfaction with home visits in all three treatment groups has to do with the design and nature of the parent involvement project itself. One of the goals of both the experiential and didactic components of the project was to prepare parents to more fully experience and understand the daily realities of living with children. If indeed the parents did obtain more appropriate expectations regarding child performance, and did gain an increased comfort level by frequent interaction with their child on home visits, this gain might be reflected by their experience of increased satisfaction with home visits. Attendant to this process, if parents begin to feel more confident and capable as a result of their involvement in the project, they might experience increased satisfaction with home visits even if their child's behavior did not change much; the fact that the parent now felt more competent and secure may have been perceived by them as a reason for increased satisfaction with home visits.

The fourth research hypothesis, which predicted that there would be a differential change among the three groups on the variable of parental style was not supported by the data. One interesting finding was revealed by conducting a correlational analysis of the parent attitude variable with the outcome measure of family reunification. The result clearly indicated that for all three treatment groups, the greatest incidence of movement toward reunification occurred in families in which parents did not react with parental temper and detachment.

#### Summation

The results of this study indicate clearly that an active parental involvement program in the children's residential treatment center leads to an increased probability of family reunification.

In addition to the enhancement of reunification goals for its clients, Five Acres benefitted from the implementation of this project in other ways that had not been anticipated. Group cohesion and the necessity for increased and improved communication became vividly apparent as the result of the endeavor. Child-care supervisors who co-lead the didactic component of the project learned more about group dynamics and group process and transferred these skills to their supervision functions with unit teams. Role conflicts were reduced as goal attainment became primary and points of similarity were emphasized. As a systems perspective began to supersede the more traditional individual treatment perspective within the agency, research and its attendant data collection functions became more respected parts of professional endeavor. Rescue fantasies, endemic to child residential treatment programs, began to give way to a broader view of the child and his/her functioning as observations of interactions between parent(s) and child revealed nuances of behavior and its purposes not previously available to staff members. Administrative staff expressed a sense of

satisfaction and pride in seeing the agency as a forerunner in the development of innovative responses to future trends in service delivery.

Treatment agents may not be able to create the ideal family they would like for their child-clients to have, but impending legal and social policy realities such as PL 96-272 and the movement toward short-term treatment models may afford the creative practitioner a unique opportunity to produce new and effective treatment models which result in amelioration of family dysfunction in ways not previously available.

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