



*Psychosocial correlates of good adjustment of
adolescents living in institutional care*

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Theoretical background

- Children and adolescents living in institutional care are at increased risk for psychological maladjustment and other adverse outcomes (Halfon, Mendonca & Berkowitz, 1995; Johnson-Reid & Barth, 2000; Pilowsky & Wu, 2006; Zima, Bussing, Freeman, Yang, Belin & Forness, 2000)
- A few studies however show that a notable percentage of fostered youths demonstrate positive outcomes in several life domains (Legault, Anawati & Flynn, 2005; Taussing, 2002).
- Resilience research focuses on good adjustment of children despite of adversity, and examines protective factors and processes which contribute to resilience (Masten & Coatsworth, 1998; Rutter, 1999; Werner & Smith, 1992, 2001).
- „Good adjustment” is usually defined in resilience research as absence of emotional and behavior problems, or / and as competence, e.g. school achievement, peer acceptance (Luthar & Zelazo, 2003; Masten & Coatsworth, 1998, Masten & Powell, 2003).
- **Aim of the study**: was to explore good adjustment pattern and its psychosocial correlates in a highly disadvantaged sample of adolescents.

Methods

- The study was carried out in 2003 by trained colleagues of public health departments.
- **Target group**: youths living in institutional care with two main care profile:
 - *Children's home*: more traditional form, caring for at least 12 at most 40 children
 - *Residential group home*: more family like, at most 12 children in a house
- Anonym, self-administered HBSC-based questionnaire
- **Topics**: demographic factors, family and peer relationship, school environment, risk behavior, subjective well-being, foster care environment

SAMPLE

- **Sample size**: 850 adolescents (from 48 state institutions)
- **Age**: 15-18 years olds (mean age: 16.52, sd: 1.02)
- **Ethnics**: 36.1% considered themselves gipsy, 62.5% Hungarian, 1.4% other
- **Care profil**: 48.7% lived in children's home; 45.6% foster home; 5.7% other

Defining good adjustment

Indicators	Levels of adjustment		
	Favorable	Average	Unfavorable
1. Academic achievement (HBSC)	Very good / good	Average	Below average
2. Delinquency Scale ¹ (CBCL, shortened version, Achenbach, 1991; Cronbach- α =0.68)	0-2 score	3-5 score	6-12 score
3. Tobacco smoking (HBSC)	I don't smoke	Less than once a week	At least once a week / every day
4. Drunkenness (HBSC)	Never	Once	2-3 times / 4-10 times / more than 10 times
5. Cannabis use in life (HBSC)	Never	Once or twice	More than twice
6. Life satisfaction (Cantril ladder) ¹ (HBSC)	8-10 score	5-7 score	0-4 score
7. Depressive mood ² (CDI, shortened version, Kovács, 1985; Cronbach- α = 0.77)	0-1 score	2-3 score	4-16 score

¹: Categories defined by quartiles

²: Categories defined by cut-off scores

Defining good adjustment

Criteria for being classified as „good adjusted”

1. Being in the favorable category by minimum 4 indicators,
 2. Not being in the unfavorable category by any of the indicators.
- 662 youths (78% of the sample) could be classified, and 11.2 % (n=74) of these youths were identified as showing good overall adjustment patterns.

Frequency of youths by number of favorable and unfavorable indicators

		N of favorable indicators is...								
		0	1	2	3	4	5	6	7	Total
N of unfavorable indicators is	0					6	20	28	20	74
	1			4	12	40	44	12		112
	2		3	22	63	68	17			173
	3	2	18	53	53	24				150
	4	8	36	52	14					110
	5	6	21	9						36
	6	7								7
	7									0
	Total	23	78	140	142	138	81	40	20	662

Psychosocial correlates of good adjustment

Predictors in the analysis:

1. Demographic data: gender, age, ethnicity, type of care
2. Personal characteristics:
 - Self-control (Psychological Immune System Inventory; Oláh, 1996; Cronbach- α =0.77),
 - Self-esteem (Rosenberg, 1965; Cronbach- α = 0.74)
3. Characteristics of the social environment:
 - Communication with parents,
 - with best friend, and
 - with teachers in foster home,
 - social support at school (4 HBSC items, Cronbach- α =0.68)

Predictors of *good overall adjustment*

(n=489; 79% of the classified sample)

Significant predictors		Odds ratio	95 % CI
Age*		0.63	0.46-0.86
Care profile	Children's home (reference)		
	Residential group home	2.22	1.17-4.22
Self-esteem *		1.14	1.05-1.23
Self-control*		1.19	1.09-1.31
Social support in school *		1.18	1.03-1.35
Communication with parents	Very easy / easy (reference)		
	Difficult/very difficult	n.s.	
	Don't have or see	2.71	1.34-5.46
Cox & Snell R ² =0.16			

Results:

1. Older youths have less chance to show good adjustment.
2. Youth living in residential group home have 2.22 times higher chance to be well adjusted than their peers in children's home.
3. Youths with higher self-esteem have higher chance for good adjustment.
4. Youths having higher self-control have also higher chance to be well adjusted.
5. Youths who don't have or see their parents have 2.71 times higher chance to show good adjustment than their peers who communicate easily with their parents.

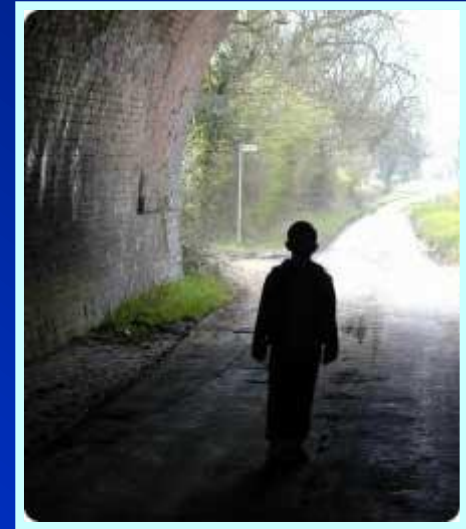
* continuous variables

Conclusions

- A significant but not overwhelming proportion (11.2%) of this highly disadvantaged sample shows good overall functioning.
- In line with other studies with normative samples or with other high risk groups, our results also emphasize the importance of personal resources like self-esteem and self-control, and the quality of social support at school in relation with good adjustment (Cicchetti & Rogosch, 1997; Legault, Anawati & Flynn, 2006;).
- Adolescents with better adjustment pattern have presumably higher chance to get into the more favorable smaller, family-like homes.
- Having no contact with parents can be protective for children who have left a highly dysfunctional family with disabled or delinquent parents (Wolin & Wolin, 1994).
- According to our results communication with best friend and with teachers at foster home don't play a significant role in adjustment of these adolescents. Some studies indicate that maltreatment experience – common for children living in foster home – and placement instability experienced by these children may make it difficult for them to rely on close relationship with peers and teachers (Cicchetti & Rogosch, 1997; Flores, Chiccetti & Rogosch, 2005; Herrenkohl, Herrenkohl & Egolf, 2003; Price & Brew, 1998).

Some limitations

- Cross-sectional design
- Some constructs were measured by a single-item
- The explained variance is low →
 - Other important factors should be also included which may contribute to prediction of good adjustment in this sample, e.g. age when child is removed from its biological family, cause of placement, years spent in care, placement instability, etc.
- Defining „good adjustment” on a rational basis, but other indicators of good adjustment should also be considered, e.g. health complaints, social competence etc.)



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