Helping Children In Care Overcome Emotional Obstacles To Independence

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Permanency means an enduring, safe home for every child. The final step in the process is successfully moving into independent living. For some adolescents who grow up in foster care, the transition to independence is relatively smooth. Their foster families help them mature emotionally and socially so that they are able to manage adult financial and interpersonal responsibilities. However, other adolescents have great difficulty moving out on their own. They do not benefit from independent living programs or life skills training, and they do not find stable employment. They frustrate foster parents, child care workers and staff of independent living programs who cannot understand their lack of success in moving toward self-sufficiency. They may get a job and leave it after three weeks. They may be argumentative with adults or act unpredictably toward roommates. They may abruptly move in with an older boyfriend or girlfriend, only to leave equally suddenly.

These young people face emotional obstacles to independence. They are often described as "physically adult, but emotionally children." These adolescents are unable to move on their own successfully because (1) they have not made peace with their biological families; (2) their low self-esteem is paralyzing; and (3) they lack a reliable, strong relationship. Case workers, foster parents, and child care workers in group homes and independent living programs can play a crucial role in helping adolescents overcome these emotional obstacles to independence. Case workers, foster parents, and child care workers provide a therapeutic environment in which young people feel supported while their emotional development catches up with their chronological age. Independent living programs for youth in care have much more success when they are designed to enable them to overcome the emotional obstacles to independence, as well as teaching skills for self-sufficiency.

Two young people exemplify these difficulties:

> "Lisa" was removed from home at age 8 after the death of her mother. Her father is an alcoholic who she held responsible for the loss of her mother. After two years in foster care, she was placed with older brothers; she has frequent contact with her father. As an adolescent, Lisa began reacting strongly against her brothers' violent, unpredictable lifestyle. She felt they should not receive foster care payments when they did not provide her with adequate food, clothing or nurturance. She became promiscuous and used drugs, arguing that both were her only way to withdraw from home. At age 19, Lisa is talking about moving on her own and cutting her ties to all family members, although she does not attend her vocational program regularly and is not making progress toward independence.
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> Eighteen-year-old "Ricky" lives among two group homes, a former foster family, and his separated parents — he spends two or three weeks in each place before getting into a disagreement and moving on. His mother is emotionally disturbed (with periodic psychiatric hospitalizations) and his father is a drug addict. He and his sisters moved back and forth between foster homes and

their parents throughout childhood. He has been out of school since age 15 when he left a residential treatment center. Ricky is a loner; he listens to music and generally stays out of everyone's way. He has no plans for the future.

Lisa and Ricky have several characteristics in common. First, both have poor relationships with peers and adults. Second, both return to their biological families continuing to want the nurturance that years of experience has shown will not be forthcoming. Third, Lisa and Ricky are confused by their feelings — both are depressed and have explosive outbursts which they neither anticipate nor understand. Fourth, both have experienced years of school failure, and they cannot read above the fourth grade level. Finally, Lisa and Ricky feel futureless; they do not picture themselves in any particular job, family or activity once they get on their own. These characteristics are shared by many young people who grow up in care. Without help from foster parents and workers to resolve these emotional problems, Lisa, Ricky, and other young people like them cannot become independent.

HELPING CHILDREN IN CARE MAKE PEACE WITH THE PAST

At age 18 and 19, Ricky's and Lisa's lives remain dominated by their early losses. The trauma of childhood rejection shows itself in their contact with family members, their angry temper tantrums, their keeping a distance from others, and their futurelessness. On the one hand, the shred of self-esteem that these young people have derives from their attachment to the biological parent. **Their original family is their lifeline**, no matter how inadequate that home was. Even for the child who has had only intermittent contact with biological parents while in care, this is a far more significant connection than has been recognized.[1] While the child's allegiance to biological parents is not surprising, it is difficult for many workers and foster parents to accept. Sometimes our anger at the family who has hurt a child we care for makes it difficult for us to recognize their continuing importance in his/her life. Until we accept that their biological families are their lifeline, we will not be able to help Ricky and Lisa develop a balanced view of their parts.

As Tiddy has pointed out, "The adoptive or foster child is in reality experiencing life in two (or more) family systems. We cannot deny the existence of one or the other; the placed child carries the imprint of the biological family and it is basic to the child's identity. If we do not try to understand this, or if we suppress it, we...have the placed child enacting within the foster family the role — usually dysfunctional — that the child carried in the biological family. p. 55"[2]

Many young people who have grown up in care are very protective of their biological families — they cannot tolerate any criticism of their parents. For some, this "blind loyalty" has been encouraged by repeated separations and consequent idealizing of the unavailable parent. Ricky's altercations in group homes and at his parents' apartments often result from his overreaction to criticism of one parent — his mother will tell Ricky that his father is a junkie, and Ricky will belligerently defend his father until his mother forces him to leave again. Ricky's and Lisa's unrealistic, continuing hope for the nurturance they have not received at home comes from this protective — and optimistic — view of their families.

On the other hand, these same young people harbor tremendoud rage against their birth families. They are furious at their parents for their failure to be caring, responsible adults, having abandoned them, and saddling them with all their emotional problems. Lisa has for years wished that her father had died and insists that her life would have been entirely different if her mother had lived. She despises her father, but cannot pull herself away from him.

The scars of losses during childhood re-emerge during adolescence. They are apparent in Ricky's and Lisa's victim mentality: what Schachter refers to as a lifetime sense of having been

cheated of one's entitlement. 3 Their families have disappointed them; they will always be hurt throughout life, eternally victims. Making peace with the past means answering questions like "Why did this happen to my family?" and "Why did this happen to me?" Making peace with the past means acknowledging **both** the anger at having been hurt by parents and the continuing importance of their biological families.

Foster parents and workers help children make peace with the past by enabling them to change their victimized orientation. Our goal is to help Lisa and Ricky say for themselves, "My family hurt me very badly because they had problems. For years I was angry at them for what they took away from me. I wanted them to give me the love I missed. Now I see that they don't know how. I still love them, but I know they had big problems themselves. I'm grown up now, and I don't need to be a victim anymore. I can leave the past behind and love myself and be loved by other people. When I get hurt by someone now, I don't have to relive all the hurts of the past."

Enabling an adolescent to make such a statement requires mature foster parents and workers. They cannot blame the child's attachment to the biological parents on their own inadequacies. They must themselves value the biological family while seeing the hurt and disappointment it has inflicted the child. They must be able to tolerate rvpeated moves by the child from closeness to distancing in his/her struggle to make peace with the past.

HELPING CHILDREN IN CARE WITH COMPLEX IDENTITY ISSUES

Normally during adolescence, young people both identify with **and** push away from their parents. But young people like Lisa and Ricky have profound identity problems — their relationships with biological and foster parents (and child care workers) do not permit the normal process of identification and separation.

Many young people who grow up in care act as if their biological families establish a ceiling on their futures; Lisa believes that she can never be any better than an alcoholic with a violent lifestyle; Ricky believes that he is destined for a life of emotional disturbance or substance abuse. This perspective effectively prevents these young people from having more success than their families. Without articulating it, Lisa and Ricky would view success as a criticism of their families' limitations — a kind of survivor guilt. On the other hand, not escaping the family pattern is passively punitive and ironically may be the youth's only way to get back at the parent. Thus, fulfilling their destinies as failures serves the dual purpose of protecting their families and expressing their anger at them.

Often biological families have no way of giving their blessing to the child's success. In the mainstream culture, religious rituals and high school graduation (with each step along the way) are opportunities for the family actively to encourage the adolescent to be better than what he/she has come from. It reduces the adolescent's guilt when the parents say, essentially, "We do not need you to be just like us." Foster parents and workers cannot give this blessing on behalf of the biological parents (although their encouragement of the child's success has many other benefits). The child needs **both** some blessing for success from the biological family and help to overcome his/her survivor guilt from foster parents and workers who courageously confront it.

For many young people, the most stable adult in their lives has been a biological parent. Consequently, in answer to the question "Who am I?" young people often identify with that parent despite the availability of more desirable role models in the foster home, school or elsewhere. The young person looks like the biological parent, may be temperamentally similar to the parent and has feelings about family roots which are difficult to put into words. Too often workers and foster parents, hoping to reduce the pain of identification with inadequate biological parents, have not helped young people struggling with the "Who am I?" dilemma. We tend to respond with "Look at who you can become" rather than facing with them the harder problems of "Look at what you have come from."

Remaining a victim serves the young person well as a convenient identity. The young person can justify the feeling of personal powerlessness by blaming it on having been rejected. The young person can attribute futurelessness to victimization from society. Being a victim means the young person does not have to take the risks of defining him/herself or the challenge of trying to succeed. Being a victim means not taking responsibility for oneself, contrary to the maturing process which independent living programs promote. An essential part of helping children in care with "Who am I?" is enabling them to feel safe discarding the victim identity.

Young people in the early phase of identity issues can benefit from group discussions with others further along in the process. Ricky was surprised to find that his older sister understood how painful it was for him to look at what they had come from. She became a major supporter of the "new Ricky." Ricky's worker learned from his sister how to help him see his success in the future as different from the family, neither fulfilling their goals nor being limited by their failures. Ricky's sister was able to get both biological parents to attend his vocational program's graduation; everyone gave their blessing to the Ricky who was no longer a victim but was taking charge of his life.

Case workers, foster parents, and child care workers can also benefit from sharing with each other the difficulty of helping children reach their potential in the context of, but not limited by, their pasts. Perhaps we fear that as they face honestly their biological parents' strengths and weaknesses, they will need more from us than we can give. Perhaps we fear the acting out of many adolescents' struggles with identity. Support from others is crucial to enable workers and foster parents to remain loving while facing difficult issues with the adolescent whose identity is emerging.

HELPING CHILDREN IN CARE IMPROVE THEIR SELF-ESTEEM

Children typically blame themselves for the neglect and abuse they have experienced. At a group discussion where she was an effective leader and was particularly articulate, Lisa said of herself, "I have always been the bad kid." Although she was angry about her mistreatment, Lisa believed that she caused the beatings at home and the lack of warmth from her brothers. Her continuing self-destructiveness is the consequence of this belief that she was a bad person who deserved punishment.

Low self-esteem both results from and contributes to lack of success. As Dr. Vera Fahlberg has pointed out, unpredictability during early childhood can result in poor early adjustment in school. [4] Both Lisa and Ricky were distracted in class and were delayed in developing reading and arithmetic skills. Consequently, both had behavior problems in school and became truants before they reached junior high school. Their early failure in school made them dislike themselves, confirming many of the messages they were receiving from the world around them. Their lack of self-worth caused them to withdraw, cutting off any chance of success experiences in school.

Neither Lisa nor Ricky has been really good at anything. Survival alone has consumed most of their energy. They approach situations feeling inferior, although often they cover their uncertainty with an image of "looking good." Their inexperience with competence and their expectation of being inadequate also contribute to their futurelessness. If either had a talent that had been encouraged, they could imagine the possibility of a future pursuing that ability.

In order to improve their self-esteem individually, Lisa and Ricky must come to terms with racism and sexism. Being a young minority member in this society means feeling inferior. Child care workers must help young people see their own potential in a culture which has denied minorities access to success. Although oppression is a real obstacle, Lisa and Ricky can have much more control over their own success than they believe. [5]

Each young person needs to be successful at something and the support to pursue something long enough — and not run away from it — to develop competence. Being good at something is the best antidote to low self-esteem. Being good at one thing, with support, usually leads to becoming good at several things. Gordon [6] suggests that for vulnerable

students who have low self-esteem and are poor readers, are depressed, alienated, passive, and seek immediate pleasure in drugs, the key element of self-esteem building programs must be **action** of some sort; learning something new; being recognized for an accomplishment; helping someone more vulnerable. His approach emphasizes exercise and involvement. These active steps are especially needed to help youth give up their helplessness and think of themselves in the future.

Workers and foster parents might open up provocative discussions of self-worth by drawing posters with youth for the office or kitchen or meeting room with the following (adapted from Gordon):

People who feel good about themselves generally

- Have a sense of humor which is not based upon putting other people down
- Know how to listen
- Have a passionate interest in some things
- Are tolerant of the changing moods of others
- Have a high-energy level and are enthusiastic
- Are creative
- Are self-confident
- Appreciate the success of others
- Have sympathy for the failures of others
- Are optimistic: LOOK FORWARD TO THEIR FUTURE
- Are sensitive to the needs of others
- Are not sure of everything

Young people must have a sense of self-worth before they have the necessary confidence to get out on their own. Child care workers and foster parents can help them appreciate their own uniqueness. Child care workers and foster parents can support their feeling of control over their own lives. Child care workers and foster parents can help them clarify their goals and serve as role models for achieving their aspirations. Child care workers and foster parents can find opportunities for active successes and help the young person change his/her internal messages about being inferior.

HELPING CHILDREN IN CARE FORM TRUSTING RELATIONSHIPS

Some young people who have grown up in care would say that their lack of trust has been an important survival skill. Children can only learn the rules of frindship, the meaning of affection, and the tolerance of anger and disappointment in relationships through their connection to a reliable, loving adult. [7] Neither Lisa nor Ricky has learned the give and take of relationships. They have not been permitted to depend on others to get their needs met consistently, and they are chronically hungry for the nurturance they missed in childhood. As adolescents, they stubbornly resist closeness with anyone, fearing more disappointment in getting their true needs met.

Young people who have trouble forming relationships but are also hungry for nurturance are at high risk for substance abuse and early pregnancy. Many adolescents describe feeling high in the same way adults would describe a close relationship — it makes them feel good, it makes them not worry, it makes them feel that they belong. Youth use drugs and alcohol as antidepressants and a substitute for forming intimate relationships. Young mothers describe a similar sense of feeling good and belonging when they have a baby, at least initially. They have closeness without the challenge of relating consistently to a peer or an adult.

As they "age out" of care, vulnerable adolescents are presented with a double bind. On the one hand, they are expected to take steps which may feel to them like breaking relationships. [8] They are losing their foster families. They are losing their workers. They may be leaving school. On the other hand, they are encouraged to establish new relationships, an artificial "adult support system". Most other adolescents are allowed to take some of their old

family relationships into their new adulthood, which makes the transition much smoother. It is no wonder that adolescents in care are untrusting and ask, "Why risk getting hurt in a new relationship? I'll just be a loser again."

Because of their lack of trust, these young people can be very rejecting. Anyone who offers a relationship is threatening their protective detachment. They may fight against forming any deep attachments. Their pseudorelationships, such as Lisa's with her series of boyfriends, are based on the belief that needs cannot be met by anyone so it is best to exploit others for momentary pleasure. Helping young people forming good peer relationships requires coaching and considerable support. Forming strong relationships means liking self and accepting admiration. A close peer friendship is a crucial contributor to self-esteem and may be the youth's first step into successful, trusting relationships. [9]

In order to become independent, these young people must be able to give and take so that they can develop a support network of productive relationships when they are on their own. Many case workers, foster parents, and child care staff have been trained not to form too close a bond with the young person because of the potential damage from loss should that adult move out of the youth's life. Despite this danger. probably the most important help we can offer the young person is a transitional relationship as they move into independence. Making this commitment to an untrusting youth requires tolerance of excessive dependency and unpredictable rejection. Anderson & Simonitch [10] describe how important this relationship can be:

> 'Holding on' becomes a human need, and the best one can do in adjusting to loss is to try to replace what has been lost. This can be done through substitutive relationships as well as through accomplishment, achievement and success that compensate for disappointment. Child welfare workers who work with emancipating adolescents must develop close, warm, supportive, substaining...relationships to ensure that these young people have substitutes for parents and other significant adults they may have had to let go of. ...One of the major challenges facing the caseworker is mustering the skills that are necessary in order to enable the youngster to deal with 'letting go' by 'holding on'.... The work is demanding and time-consuming.... The caseworker in many instances becomes the most significant person in the young person's life." p. 385

A Child Welfare League of America training handbook proposes guidelines for developing a healthy relationship with a young person: [11]

- Avoid setting up dare situations; stay out of power situations.
- Don't give them all the answers; avoid lecturing; respect their right and need to find out most things for themselves.
- Negotiate with and contract with the youth to work on realistic and achievable goals.
- Overlook and ignore little things.
- Don't get upset when the adolescent demands the last say.
- Turn negatives into positives when you are dealing with pessimism and defeatism.
- Provide social prompting.
- Give doses of positive reinforcement.

It is crucial that the young person learn to give and take in a relationship with a responsible adult. If this relationship does not seem to develop with workers or foster parents, we can help the young person connect with another caring adult. Such a relationship can be en-

couraged with a mature peer, a foster parent, a child care worker, a teacher, a coach, or a therapist. We must help a young person find this special relationship.

For **each** case, we must ask ourselves whether we have taken the steps necessary to help a young person become involved in a positive relationship as he/she makes the transition to independence.

We can offer support to the person in a relationship with a child in care to tolerate the ups and downs guaranteed by youth who are needy but inexperienced in, and untrusting of, relationships.

HELPING CHILDREN IN CARE UNDERSTAND THEIR FEELINGS

Many children in care are terrified of the mysterious underworld of their feelings. They do not have labels for their internal reactions and often experience all their feelings as a generalized anger/anxiety state. They have an internal reservoir of anger from a long history of hurt and rejection. They are scared when the reservoir overflows under the stress or relatively minor frustrations — whether they hold the anger in or explode, their feelings are unpredictable and frightening.

Underneath the anger is hurt, which makes these young people particularly vulnerable to additional disappointment and mistreatment.[12] Both Lisa and Ricky alternate between depression and explosion. Both are easily hurt, anticipating rejection in every interaction. They typically blame their explosions on mistreatment from family members or other adults. They are frightened by how easily their rage is triggered.

There are four stages of depression common among emancipating youth, to which child care workers and foster parents must respond (according to Anderson and Simonitch): (1) anxiety — having to let go of important adults and have fears about what is ahead; (2) elation — usually lasting less than a month, coming from having freed themselves; usually followed by a crash into helplessness and disappointment; (3) fear and loneliness — loss of self-esteem from not managing competently; withdrawal; the worker may become the target of hostility, followed by guilt; sometimes youth return to family members for solace; a strong relationship with the worker and group counseling are needed during this phase; and (4) quiet confidence — youth may take 6-12 months to reach this phase; can think out solutions independently; new and lasting relationships; feeling of accomplishment.[13]

Child care workers and foster parents can help young people moderate both their depressions and explosions. Child care workers and foster parents can teach them how to choose to express their feelings, depending on the situation. They need patient instruction on how to predict their feelings, particularly the anger and hurt which result from disappointment. They need help learning how to express their anger without being explosive or self-destructive. They need support to overcome their depression. Adults who model mastery of feelings and are willing to share with the young person how they feel and what they are choosing to do with those feelings can be a great help.

Although feelings and values are different, clarification of either helps to label the other. Workers and foster parents might provoke beneficial discussions of values and feelings by drawing a poster with youth for the office or kitchen or meeting room with the following (adapted from a moral education program by Tatum):[14]

- Manipulative, coercive behavior hurts
- Supportive, caring behavior feels good
- Knowledge feels good; ignorance hurts
- Communication feels good
- Adolescence is an exciting time to be enjoyed AND taken seriously
- You are in charge of your own body
- You are unique and special

Another approach to understanding feelings comes from Dent and Ceccerallo's "The Spiritual Side" (a chapter in a life skills guide for teens):

Somewhere inside of you there is a feeling which guides you...

> It's that ultimate feeling of well-being; the feeling of being at peace with one's self. We all seek it in one way or another, for we don't feel complete without it. There are many ways of finding this inner peace. One of the oldest methods is through religion. One of the values you may find in attending a particular religious group is that you may find the activities related to it can help give you a sense of belonging and working together towards a common goal. Helping other people is frequently a part of these activities and the feeling that it brings cannot be underestimated." p. 73 [15]

In order to become independent, vulnerable young people must **master** their feelings. They must learn that their feelings are not good or bad, but a reality of everyday life. Foster parents, child care workers and case workers play an important role in accepting their feelings, teaching them how to manage anger and sadness, and supporting the development of strong values and a rewarding spiritual life.

DEVELOPING INDEPENDENT LIVING PROGRAMS

Some teenagers who grow up in care will make a relatively smooth transition from foster homes to maturity. Others will benefit from independent livings skills programs. However, some face emotional obstacles to independence. They cannot manage successfully on their own without making peace with their biological families, forming at least one strong relationship, and improving their self-esteem. Most independent living programs have not been designed to serve the needs of these youngsters. Their failure in life skills training and employment preparation have been frustrating to staff and foster parents. It is crucial that we redirect some of our efforts to insure that young people facing emotional obstacles to independence receive the special assistance they need.

In a recent survey of more than fifty independent living programs in the U.S. and Canada, Helen Stone [16] has identified what she has called "less concrete services":

- Decision-making
- Developing self-identity
- Developing self-esteem
- Accepting responsibility
- Making peace with family
- Developing relationships
- Appropriate response to authority
- Learning leadership skills
- Developing realistic expectations of self
- Dealing with loneliness
- Spiritual/ethical development
- Giving of self
- Opportunity for controlled experimentation (failure, bad judgment)
- Developing a support network

In the same study, a ranking of the program elements thought to be essential in operating independent living programs collected from 34 staff at 10 agency sites showed that "Decision Making" ranked third and "Developing Self-Esteem" tied for fourth with "Sex Education" behind the concrete services, "Financial Management" and "Finding Housing" in priority. The list of the top ten program items ranked "Essential" contained both concrete and non-concrete services in a 50/50 proportion. "Making Peace with Family" ranked first among those

items regarded as "Good to Have" (the ranking next to "Essential"). Many items were also indicated by respondents as being **the** most important and those selected most were "Developing Self-Esteen", "Developing Realistic Expectations of Self" and "Developing Self-Identity." The recognition of the importance of the less concrete services being made the focus of effort for many youth in foster care is growing as experienced program operators report on their program achievements.

In recognizing the emotional obstacles to independence for some youth, foster parents, child care workers and caseworkers work together to give the young person the permission they need to mature:

- Permission not to blame self for the hurt of the past
- Permission to be oneself, not bound by the past or by family limitations
- Permission to succeed (and not to view success as a criticism of the family)
- Permission to see the strengths and weaknesses of the biological parents
- Permission to separate from parents and other adults
- Permission to feel conflicting loyalties about birth family and foster families
- Permission to feel anger and sadness, without being out-of-control

In the context of permission-giving, we can help the young person imagine and take steps toward a future in which he/she will be competent at something and able safely to create his/her own family (which is not necessarily destined to break apart or fail to meet the needs of its members). We can count as a success a young person who can say, "I see that my parents wished that our family could have been different. Now I can take charge of my own life so that it **does** go in a better direction."

In a permission-giving independent living program, attention is also paid to the needs of foster parents, caseworkers and child care workers. They need regular support for this draining work. When an adolescent who has been a victim all his/her life gets permission to feel entitled to more, the resulting bitterness for that deprivation may be taken out initially on caring adults. Foster parents and workers need to get refueled to tolerate the ups and downs of the adolescents' struggles.

The attached checklist may help youth and foster parent/caseworker/child care worker get off to a good beginning in recognizing the emotional obstacles to independence. It can be used as a case planning tool. To make progress toward independence, youth (and adults) must be comfortable discussing such topics as making peace with biological families, success, hope for the future, and feelings. The checklist helps us teach the young person to make choices, to achieve short-term, reasonable goals, and to develop effective problem-solving skills. Furthermore, a regularly meeting group in which these topics are openly discussed among youth is essential in residential and day programs helping youth toward independence. Youth benefit from realizing that others are experiencing the painful process of enhancing self-worth, investing in the future, and revisiting the past. The best way to help youth take their emotional development seriously is by doing so ourselves as we implement independent living programs.

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FOOTNOTES

1. Dr. Ner Littner described the foster child's need to recreate their biological parents "to master the unacceptable feelings of anger at his own parents and his guilt about these feelings by reproducing the situation in which they first occurred, as a form of self-punishment to alleviate his guilt." p. 18. And he refers to the child's concern that "loving his new parents implies disloyalty to the old." p. 13. Littner, Ner. **Some Traumatic Effects of Separation and Placement**. New York: Child Welfare League of America, 1976.

Fernando Colon describes the need for "rootedness" for displaced children. "The child's experience of biological familial continuity and connection is a basic and fundamental ingredient of the sense of self and personal significance." p. 241. Colon, Fernando, "Family Ties and Child Placement," **Family Process**, vol. 17, 1978, p289-312.

Suzanne Tiddy summarizes the contributions of family therapy research on understanding the importance of the biological family to the child in placement. She describes the dangers for children who have been emotionally cutoff from biological parents. "The way...to finish the unfinished business is to maintain or establish some form of contact and enable the children and their parents to work through their intense pain and confusion. p. 55. She goes on to discuss the anger of the child at the biological parent:" ... the source of this anger is frequently beyond the child's awareness because it is usually too powerful to admit or deal with. It, too, is associated with the child's frustrating efforts to preserve loyality to the family; to become angry would further jeopardize their precarious position with their parents. It is thus displaced on others or deeply internalized." p. 57. She describes the child's creation of fantasy parents and a "natural defense mechanism to cope with the separation trauma. The result is the inability of the child to integrate into the foster family and gain from the corrective and remedial benefits of a healthier family system." p. 55. "One way to break through these conflicts is to go beyond visiting, to involve the biological family in therapy sessions with the child and perhaps the foster parents ... It is as if the lid has been lifted from the pressure cooker. Both the child and parents are much relieved...In this process, we must carefully address the needs of the foster family, with compassion for their position. They probably have already received the brunt of the child's displaced anger — especially the foster mother." pp58-9. She sensitively describes the steps necessary and cases studies of involving biological parents. Tiddy, Suzanne, "Creative Cooperation; Involving Biological Parents in Long-Term Foster Care," **Child Welfare**, Vol. LXV, Number 1, January-February, 1986. pp. 53-62.

2. Tiddy, Suzanne, **op cit**

3. Shachter describes a return to the early childhood separation process from parent, acted out, as greater closeness with child care staff evolves. "A new sense of disappointment, disillusionment and rage is followed by renewed distancing...(which) reflects the resident's eternal yearning for the perfect, caring, symbiotic parent never experienced. The feeling of having been cheated of one's legitimate entitlements persists through the years — sometimes dormant, sometimes acutely active." p. 296. Shachter points out a paradox to which child care workers and foster parents must be sensitive as the youth gets closer and then distances: "The very successes of work experience and growing occupational self-definition may conjure up separation fantasies which may regressively pull the adolescent back... At the same time, it is the provision of new opportunities for self-sufficiency (symbolized in our culture by occupational competence and income-earning behavior) which **in actuality** permits disengagements from the more infantile objectives." p. 301 Shacter, Burt, "Treatment of Older Adolescents in Transitional Programs: Reapproachment Crisis Revisited," **Clinical Social Work Journal**, Vol. 6, No. 4, 1978, pp. 293-304.

4. Fahiberg, Vera, M.D. **Attachment and Separation: A Workbook**. Project CRAFT - Adoption Training Project, Michigan Department of Social Service, 1979.

5. Clark, Clemes and Bean emphasize the need for an adolescent to have power in order to raise self-esteem: "Let an adolescent know he is responsible for what he feels. Explain and demonstrate how he can take charge of the way he reacts to people and events. Show him that he does not have to be a victim of other people's words, attitudes, or actions. When he wants to blame others for his own difficulties, direct his awareness back to his own choices and possibilities in the situation." p. 59, Clark, Aminah, Harris Clemes, and Reynold Bean. **How to Raise Teenagers' Self-Esteem.** Enrich: 1980, San Jose.

6. Gordon described vulnerable teenagers as having poor self-images, feeling inferior, inadequate or insecure. He has concluded that vulnerable teenagers are the most prone to engage in irresponsible behavior which tends to be destructive and irrational. Sol Gordon and Kathleen Everly, "Increasing Self-Esteem in Vulnerable Students," **Impact '85**. The Institute for Family Research and Education. Syracuse University.

7. Fahlberg **op cit**

8. Wood reports that some emancipating "adolescents conclude that a vital substance is lacking in themselves to survive and to remain viable as separate entitites. They misconstrue individuation as primarily entailing loss of their primary relationship with their parents rather than entailing a change in that relationship and an enhancement of their self-identity." p. 880. Wood, William, "A Cognitive Perspective Applied to Emancipation Problems." **Adolescence**, Vol XV, No. 60. 1980, pp. 879-885.

9. Sex education, in its fullest sense as described by Gordon, should be provided to youth who have already been sexually active in order to strengthen their relationship-building skills: "many young people today use sex as an avoidance of intimacy rather than as an expression of it...Teaching adolescents to respect each other is very important because first love and relationship experiences often set the tone for future feelings about the opposite sex as well as themselves." Sol Gordon and Kathleen Everly. **op cit.**

10. This confusion of feelings is described by Anderson and Simonitch in an article on depression in youth moving toward independence: "Reactive depression appears to be a common reaction to emancipation among the youths involved in the Independent Living Subsidy Program (Oregon)... Reactive depression of some degree is always a response to loss or disappointment. The reaction varies in intensity and duration, depending upon the young person's personality strength, reconstitutive ability, and capacity to compensate for losses and disappointments...Too much deprivation, misfortune, or constitutional lack of adaptive capacity can lead to an essential lack of personality strength and a tendency to collapse into a reactive depression when facing even the most ordinary losses and disappointments of living..." p. 385. Anderson, James L. and Brian Simonitch, "Reactive Depression in Youths Experiencing Emancipation," **Child Welfare**, Volume LX, Number 6, June, 1981.

11. Stone, Helen, **et al, Foster Parenting an Adolescent, Leader's Guide**, Child Welfare League of America, 1973, New York.

12. Viscott describes a child's anger over the death of his beloved dog: "Expressing anger over the hurt that causes it allows an emotional wound to close...the youngster naturally began to seek out objects he could get angry at: first, the driver of the automobile, then the automobile, and then even a little at himself...Next he shifted the blame from himself to his parents, and finally, much diluted by time, the anger was directed at the dog...If any loss is to heal in the best and most complete way, the anger it generates needs to be allowed full freedom of expression." pp82-3. David Viscott, M.D. **The Language of Feelings**. 1976: Pocket Books, New York.

13. Anderson, James L. and Brian Simonitch, **op cit.**

14. Tatum, Marylee "A Rationale for Sex Education in the Public Schools" in Promoting Sexual Responsibility and Preventing Sexual Problems (G. Albee, Sol Gordon and Harold Leitenberg, Eds.), Hanover, NH: University Press of New England, 1983.

15. Anne Dent and Julius Ceccerallo. **Independence: A Life Skills Guide for Teens**. 1983. Mississauga, Ontario.

16. Personal Communication with Helen Stone, Director, Institute for Quality Child Welfare Services, New York. 1986.

Moving Toward Independent Living Checklist

● To be done by the caseworker and young person together ●

Date I would like to be on my own:
What stands in my way?

Things I am good at:

Things I would like to improve about myself:

The two people I care about most:

How will I keep on caring about them in the coming year?

What will I do to find more people to care about who will care about me? Do I have a trust problem that makes it hard for me to get close to people?

How well am I doing in making peace with my biological parents? How much do I see them? Would I like to see them more or less? What problems do they have? What have they given me that I want to hold onto? In what ways will I grow up to be like them? In what ways will I grow up to be different from them? Is it okay with my family if I do better in life than they did?

What do I like about myself? What do I want to change about myself? How will I go about liking myself better this year?

Some young people feel that they do not have a future. What do I hope for in my future? What would I like to become? What might keep me from making steps toward my goal this year?

Some young people blame themselves for bad things that happened to them in childhood. Some feel angry most of the time because of what happened to them. Do I feel that I am a victim because I was abused or neglected? What do I want to do with these feelings this year? What do I want to do to stop being a victim, to "take charge" of myself?

Date to review this checklist: