ENVIRONMENTAL FACTORS AS DETERMINANTS OF EMOTIONAL WELL-BEING OF ADOLESCENTS IN FOSTER HOMES IN OYO STATE, NIGERIA

By

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Abstract

The study examined the extent to which environmental factors determined emotional well-being (EWB) of adolescent in foster homes (AFHs) in Oyo State, Nigeria. The target participants are adolescents in foster homes with total no of seventy eight (78) having 46 boys and 32 girls. Data were collected through three separate standardised instruments: Environmental Factor Scale (EFS), Emotional Well-being Scale (EWS) and Adolescent Fostering Scale (AFS) and they were complimented with focus group discussion (FGD) and Group Key Informant Interview (GKII). The statistical tool used to analyse the data collected were simple percentage for demographic analysis and multiple regression to analyse research questions. The findings revealed that the environmental factors which are domestic influence, neigbourhood characteristics and drug/substance abuse are important influence in moulding the personality of the adolescents, while supervision over their involvement with their neighbours reduced opportunity for delinquent peer group. The study recommended that there should be provision of safe, stable and nurturing home environment for the fostered adolescent. Foster home climate and foster officials' religious beliefs positively influenced the emotion of adolescents in foster homes. Therefore, better environment should be constantly sustained in foster care to ameliorate negative development of inmates.

Keywords: Fostered adolescents, Emotional well-being, Foster homes, Environmental factors

Introduction

Adolescence is the period of transition from childhood to adulthood, a stage of major growth and development in which significant physiological, cognitive, psychological and behavioural changes take place (Gidion, 2010). At this stage, important developmental tasks, such as developing an identity and becoming independent, need to be accomplished. The strongest factor in moulding a child's personality is the relationship with the parents, if his parents love him with a generous, even flowing, non-possessive affection and treat him as a person who likes themselves, has both rights and responsibilities, then he has the chance of developing normally, but if they diverge from this, the child's development may be distorted (Cox & Cox, 2009) Some adolescents left their biological family orientation due to inability of their parents to care for them as a result of various calamities ranging from physical or mental illness, imprisonment due to illegal behaviours such as drug trafficking and abuse. Other causes can be due to financial constraints, inadequate housing and unemployment (Charlotte, 2001). (Abanihe 1983) reported that child fostering or the practice of sending children out to be raised by non-biological parents is wide spread among many societies in West Africa and adolescent fostering has become a global problem that needs to be tackled if they are to be given their rights. However a look at the Oyo state shows that adolescent fostering occurs at unprecedented rate and is fast becoming a permanent feature of the culture.

Foster care is care for children outside the home that substitutes for parental care. The child may be placed with a family, relatives or strangers, in a group home (where up to a dozen foster children live under the continuous supervision of a parental figure), in an institution (Tower, 2001). Whatever its form, foster care is an enormous upheaval in the life of a child, who often must adjust not only to a different family, a different location, a different school, and different peers, but to different culture as well (Rhawn, 2004). Important decisions concerning the lives of foster children are in the hands of strangers such as juvenile courts, social welfare agencies, substitute parents, anyone of which may have custody of the child (Troy, 2005). Foster care is intended to be a temporary living situation for children with the aim of reunifying such children with their parent or guardian or find another suitable permanent living arrangement.

Environment is known to be an individual's surrounding, which is supposed to be the natural world. But when a child coming from unhealthy environment continues to grow and enter into new stages of life, he or she may not be able to rise to a given challenge. As a result of experiencing repeated traumatising events in the biological and foster home, adolescent who receive no treatment for psychological scaring suffer adverse effects. Eric Erickson believes that environment influences personality and personality also influences environment. This is what happens to a fostered adolescent who was brought up in a hostile environment, he or she in turn influences his or her environment later in life with that same hostility. Adolescents who were abused, neglected and maltreated usually suffer serious emotional problems. They may find themselves in a marriage or partnership that is disappointing or bland, and may seek easy targets e.g. children to vent their anger and frustration (Covitz, 2008). They may lack coping skill to deal with their problems and emotional issues.

Emotional well-being of the fostered adolescents is their ability to maintain a stable state that will allow them to exhibit positive self-esteem, self-concept and sustain good relationship with others. The institutionalised fostered adolescents may experience emotional disturbance as a result of their past experiences from their biological background of orientation. Emotional abuse is prevalent among fostered adolescents and this affects their self-concept making them to see themselves as worthless and incapable. When the fostered adolescent is constantly humiliated and maltreated, they suffer more than if they have been physically abused with the resulting effect of being withdrawn to themselves (Khartri, 2004).

Upon receiving a fostered adolescent into their care, foster parents may be placed in a difficult parenting situation from the onset. Fostered adolescent have several unique needs of their own that must be addressed by the foster parents. Fostered adolescents have been shown to experience greater mental and physical health problems than adolescents who are not placed in foster homes, Burn (2004), Hill & Thompson, (2003). The children have also been found to have unique difficulties in forming secure attachment. Bowlby (1944) noted that broken relationships during childhood (e.g. a child being removed from his or her biological parents home) may result in increased likelihood that a child will become "psychopathic" 'delinquent', or 'antisocial' and as a result, have an "affectionless personality". However, based on Green (2008) research, it is also unlikely that foster adolescent, without additional assistance, will easily be able to form a secure attachment to future caretakers (e.g foster parents) Lanyado (2003) stated that "when a young child has experienced neglect and abuse from his or her parents followed by abandonment, there is a fearfulness about allowing anyone else-possibly particularly an adult-close to him. In the child's mind, this is risks and a repeat of the painful rejection, attack, abandonment, or uncertainty of past relationships. The adolescent may now be convinced that 'daring to try again' to allow a new relationship to grow is a highly dangerous position". In support of Lanyado's statements, Green (2008) found that foster adolescent with a history of abuse or early institutional care were likely to exhibit an insecure attachment and/or be diagnosed with Reactive Attachment Disorder.

Groze and Rosenthal (2003) reported that formation of relationships with new parents (e.g. foster parents) were least positive in the case of children who experienced multiple abuse episodes. These researchers also noted that frequent transitions between foster homes were associated with difficulties in trusting others and avoidant or ambivalent attachment styles but most adolescent do not have bad experience in fosters care. "The most negative part of foster care is usually not where they are placed but it is how other people judged them" says Bissell and Green (2006). "They further stated that people treat adolescents in foster care like they did something wrong". "According to the National survey of child and Adolescent well-Being (2004) the first comprehensive study of children in the child welfare system, more than 85% of children in foster care reported they like the people they are living with, feel like part of their foster family, and believe their foster parents care about them" Bissell and Green (2006) further stated that "child welfare agencies are relying on placement with caring relatives for abused and neglected children, at times the foster parents often play an important role in helping birth parents enhance their parenting skills and improve their relationships with their children.

But on a happier note, abuse by foster parents is rare. If there is any contrary opinion, this might have been developed by well publicised tragedies of children abused in foster care, that often distort public perceptions of the benefits that foster or families provide to children who have experienced abuse and neglect before entering foster care. Majority of the children who experienced abuse or neglect were abused by their parents, but less than 1% reported abuse by their foster families (Brown, Cozby, Klee and Worden, 2001).

Domestic influence is a social phenomenon that impacts every segment of the fostered adolescents. Adolescent neglect may occur when a caregiver does not give them the care he or she needs according to its age, even though the caregiver can afford to give the care or is offered help to give that care. Their neglect can mean not giving food, clothing, and shelter. It can mean that the carer is not providing an adolescent with medical or mental health treatment or not giving prescribed medicines the adolescent needs. This can also mean neglecting the adolescent's education, keeping them form school or from special education, it may also include exposing them to dangerous environments, they may be poorly supervised, this may include putting them in the care of someone incapable of caring for them. It can also mean abandoning them or expelling from home.

Effects of Abuse on Fostered Adolescent Development: First, abused children are more likely than non-abused children to engage in delinquent behaviours later in adolescence showing violence and insensitivity to others as well as themselves. An adolescent that has been abused typically has a high overall level of distrust, resulting in difficulty in forming intimate friendships and romantic relationships (Liverson, 1994). Ineffective interaction with others lead to a poorer performance in school due to a lower motivation level, less frequent school attendance, and lower classroom participation. Abused adolescents have a great rate of teenage pregnancies and are more likely to end up in an unhappy marriage that lacks support, security and maturing.

Fostered Adolescent and Drug/Substance Abuse: Most children become a part of the child welfare system because they are confirmed product of child abuse or neglect, commonly referred to as maltreatment. Adolescents may be removed from their home due to severe maltreatment defined as neglect, physical abuse, sexual abuse, and emotional abuse. Child maltreatment can also include harm that a caregiver allows to happen or does not prevent from happening to a child, (American Humane Association, 2012). Youth may also be placed out of home due to the parent's inability to address their child's delinquent and/or high risk behavior substance abuse is a factor in at least three quarters of all foster care placements. Foster youth exhibit higher rates of illegal drug use than youth who have never been in foster care (National Survey on Drug use and Health, 2005). Often times, the alcohol and other drug issues faced by foster youths can be traced to a family history of substance abuse and dependence. Prenatal addiction, both prematurely and during child rearing, is a significant factor in child abuse and neglect cases and can be contributing factor in the removal of a child. These predisposing factors are multifaceted with research showing hereditary links, the influence of social norms, and the use of alcohol and other drugs as learned coping mechanism. Studies suggest 40% - 80% of families in the child welfare system are affected by alcohol and drug dependency, (Child Welfare League of America (2008).

Emotional Harm and Substance Abuse: When maltreatment occurs in the home, even when substance abuse is not a contributing factor, it can still leave a child more vulnerable to substance abuse in adolescence. One of the most common coping strategies used by youth who are suffering emotionally is self-medication through alcohol and other drugs, which can lead to further victimisation, mental health problems addiction and lack of self-care. In most extreme case of child maltreatment, where exposure to abuse is repeated and /or severe, research shows that there can be changes in brain physiological that, in practical term, impact how children think, feel, and act. Such changes can leave these children at higher risk for a variety of mental health problems and addictions. Nationally, 50% of children and youth in the child welfare system have mental health problems.

Youths in foster care often experience multiple placements in homes and schools. Adolescents experiencing numerous placement changes are affected emotionally, cognitively and physically contributing to both the internalising and externalising of negative behaviours. (Newton, Litrownika, Landsvel, 2000). For every change in school setting, foster youth fall three to six months further behind their classmates, creating a downward spiral. Consequences include alienation from teachers and peers who are doing well, a loss of self-efficacy (the feeling of success) detachment from school and the acquisition of friends who are also alienated. As a result of poor attendance and low economic achievement and lack of care, these youth may be transferred to other schools. Survey data show that some school students are likely to use drugs and alcohol with higher frequency and higher amounts than their non-continuation school peer, (Vaughn, Ollie, McMillen, Scott and Munson 2007).

Fostered Adolescent and Neighborhood Characteristics: Neighborhoods are increasingly studied as a context where children and youth develop, however, the extent of neighborhoods impact remains debatable because it is difficult to disentangle this impact from that of the family context, in part, because fostered adolescents have no choice as to where they live. But from all perspective, neighbourhoods do matter in the life of the fostered adolescent. Suggestions were made that children and adolescents living in high-income neighbourhood may have higher cognitive ability and school achievement than those living in middle income neighbourhoods, and children and adolescents living in low income neighbourhoods may have more mental and physical health problems than those living in middle-income neighborhoods. The home environment has been shown to be partly responsible for the link between neighbourhood and the development for adolescents, neighbourhood effects are partially accounted for by community social control (Brooks-Gum, 2002).

In contrast, adolescents residing in neighborhoods with a high degree of informal social control are likely to experience greater supervision over their behaviour, thus reducing opportunities for delinquent peer groups to form and attract new participants, (Osgood and Anderson, 2004). Youth residing in these more advantageous neighborhoods are more likely to form friendships with conventional peers and to orient themselves toward conventional behaviour such as academic achievement, (Osgood 2006).

If there is a proper articulation of the environmental factors that predisposes the emotional wellbeing of these fostered adolescents, then a better framework for the institutionalisation of the fostering system will be built. Besides, an insight into the impacts of such environmental factors as domestic influence, neighborhood characteristics and drug/substance abuse will go a long way in helping to assist the foster adolescents' adjustments to societal expectations in the face of frustrations and disappointments.

Although vast and rich literature exist on adolescence and the fostering system in Nigeria, but most of these past studies had been conducted outside the realm of environment as predisposing factors of better and solid emotional well-being of the fostered adolescents. Rather, previous studies had focused on foster adolescent adjustment (Daniel, 2002), foster adolescent social competent behaviour (Suniya, 2001); foster home environment (Daniel, 2007); foster adolescents' psychological well-being (Suniya & Edward, 2007), school adjustment of foster adolescents (Jennifer & Brenda, 2004). It is against this background that this study set to find out the environmental factors as determinants of emotional well-being of fostered adolescents in Oyo State, Nigeria.

Objectives of the Study: The objectives of the study are to:

- i. determine the extent to which environmental factors influence emotional well-being of fostered adolescents in Oyo State, Nigeria.
- ii. ascertain the relationship between environmental factors and emotional well-being of fostered adolescents in Oyo State, Nigeria.

Research Questions

RO₁: To what extent have environmental factors influence the emotions of adolescents in foster homes in Ovo state, Nigeria?

RQ2: What is the relationship between environmental factors and emotional well-being of the adolescents in foster homes in Oyo state Nigeria?.

Methodology

The research design adopted for the study is descriptive survey research design of 'ex-post-facto' type; this is used because the design did not give room for manipulation of any kind as the event has already occurred. The population of this study comprised of all adolescents in foster homes in Oyo state Nigeria. Stratified, proportionate and simple random sampling technique were adopted for the study; purposive sampling procedure was used to select all the foster homes for the study, while a combination of stratified proportionate and simple random sampling techniques were used to select 78 respondents (i.e 46 boys and 32 girls). They were stratified into three (3) stratum based on age below 14 years, 15-18 years and 18 years and above. The instruments for data collection were three separate standardised instruments: Environmental Factor Scale (EFS), Emotional Well-being Scale (EWS) and Adolescent Fostering Questionnaire (AFQ). They were complemented with Focus Group Discussion (FGD) session with the fostered adolescents while Group Key Informant Interview (GKII) was used to compliment the questionnaires. The instrument was pilot tested, using fostered adolescents outside the selected foster homes and was conducted on 9 fostered adolescents from Ibadan and Ilora in Oyo State. They were found appropriate for this purpose because they shared similar characteristics with the fostered adolescents in the selected foster homes. However, they were not included in the real study and analysis of data collected was done using descriptive statistic, such as simple percentages for the demographic data, and multiple regression analysis for research questions

Table 1: Population of the Fostered Adolescents in the selected institutions

S/N	Name of Institions	Number of Respondents
1.	Juvenile Correctional Home, Sango, Ibadan	18
2.	Jesus Children Missions Outreach, Bodija, Ibadan	15
3.	Oyiza Orphanage Home, Oke-Ado, Ibadan	5
4.	Galilee Foundation (Kings kids Children Village)Ring road, Ibadan	4
5.	Covenant Children Home, New Bodija, Ibadan	5
6.	Ilora Motherless Home, Ilora.	2
7.	Living Word Mission Home, Isale-Ososami, Ibadan	15
8.	Rosarian Voice, Sango, Ibadan.	1
9.	His Heritage Home, Oluyole Extension, Ibadan	6
10.	The Care People Foundation, Ibadan.	7
	Total:	78

Findings and Discussion

This section presents the results from the data collected from the responses of the respondents used for the study. The results are presented in tables and references are made as appropriate.

Table 2: Table Showing Demographic Data Of Respondents By Percentage.

<u>Characteristic</u>	x	Percentages	
Gender	Male	61.5%	
	Female	38.4%	
Education	Primary	23.0%	
	Junior Secondary School	41.0%	
	Senior Secondary School	35.8%	
Age belo	ow 14years	16.6%	
	15-18years	34.6%	
	18 and above	48.7%	
Ethnicity	Yoruba	42.3%	
_	Igbo	25.6%	
	Hausa	19.2%	
	Others	12.8%	
Religion	Christian	50.5%	
	Muslim	49.4%	
Duration o	f placement		
Short term category		21.6%	
Moderate term category		21.1%	
Long term category		57.3%	

Table 2 above reveals the following:

Age: Respondents below age 14years were 16.6% out of total of 78, while the age bracket of 15-18years were 34.6% and those respondents within the age bracket of 18years and above were 48.7%. Adolescent form the bulk of the respondents used for this study, this implied that adolescence exhibitions and traits are common at this age bracket

Ethnicity: The distribution of respondents by ethnicities reveals that 42.3% were Yoruba, 25.6% were Igbo and 19.2% were Hausa while other ethnic nationalities not mentioned in this study were 12.8%. Yoruba has the largest fostered adolescent this is because the study was conducted in Oyo state, and for her harmonicity.

Gender: There 61.5% male adolescent respondents while female adolescent respondents were 38.4%. This implies that by nature male adolescent are more restless and more prone to distractions that could lead to maladjustment and abnormalities of the adolescents.

Educational level: Holders of primary school leaving certificate were 23.0%, while 41.0% respondents were holders of junior secondary certificates, the remaining 35.8% respondents were holders of senior secondary school certificates. This is attributable to the fact that adolescents are family independent and are more influenced by the peer group.

Religion: 50.5% of the total respondents were Christians, while 49.4% were Muslims. Greater no of them practices Christianity because they have to abide by the religion they are practicing in the homes they are residing though they are of other religions, and majority of the institutions available were Christian homes except for the government owned that allow them to practice their own religion.

Duration of placement: The distributions of the duration of placement of the respondents are as follows, 21.6% respondents were under short term category, while 21.1% respondents were under the moderate term category, the remaining 57.3% respondents were under the long term category. This might be due to level of correction and state of mind of the fostered adolescents.

RQ₁: To what extent have environmental factors influence the emotions of adolescents in foster homes in Oyo state, Nigeria?

Table 3: Joint Predictions of Environmental Factors on Emotional Well-being

Model	Sum of Squares	DF	Mean Square	F	Sig.	
Regression	6.333	1	2.111	0.21	21	
Residual	717.41	7	1.256			
Total	723.49	71				

R = .094, $R^2 = .009$, $Adi R^2 = .004$

Table 3 reveals that the joint effects of domestic influence, neighbourhood characteristics and drugs/substances abuse on emotional well-being was not significant F (3,571) = 1.680; R = .094, R2 = .009, Adj. R2 = 0.004; P > .05). About 1.0% of the variation was accounted for by the independent variables while the remaining 99.0% was not due to chance. As revealed by the result, out of all the three components of the environmental factors, domestic influence has the highest contribution to the adolescents' emotional well-being. This is because to most of the respondents, domestic influence is an environmental phenomenon that impacts every segment of the fostered adolescents. This is followed by neighbourhood characteristics and drug/substance abuse A GKII interviewee, Mrs J of Jesus Children Missions Outreach, Bobija, Ibadan had this to say:

"We usually encourage them to mix with good people, they attend good club like GINEXT which is a Christian programme, they are all attending private schools, every younger ones are encouraged to put on good dresses, even most of the people that brings gift to us are aware that they have to bring presentable gifts, like dresses, shoes and some other items, some of them are member of the choir in the church and are even leaders in their social groups, if they do not attend church on a Sunday, some of their group members may come around to look for them. Those that have once lived in a foster home before and are currently doing well in their careers are also allowed to visit them so as to have word of encouragement with them, all these will definitely boost their moral and prevent them from being badly influenced"

Like Thornberry (2008), in his study on the co-occurrence of problem behaviours among adolescents, this study reveals that sustained foster family and community relationships are important in providing critical support to a fostered adolescent as he or she faces the challenges of young adulthood. No individual can completely escape the influence of the culture and society in which he lives, since he is an integral part of the whole, each individual is a product of his early experiences and learning, (Odejide, 1999). Also Rathod (2006) in his study based on individual factors associated with drug dependence, his study revealed that as the individual grows up, he can adopt one of the three attitudes towards the values and attitudes which surround him. He can reject them (non-conformity) or submit to them (conformity) or he can stay neutral and form his own values.

RQ₂: What is the relationship between environmental factors and emotional well-being of the adolescents in foster homes in Oyo state Nigeria?

Table 4: Relative Predictions of Domestic Influence, Neighbourhood Characteristics and Drugs/Substances abuse on Emotional Well-being

Model	Unsta	Unstandardized Coefficient		T	Sig.
	В	Std. Error	В		
(Constant)	2.065	0.129		1.988	.000
Domestic influence	0.990E.1	0.004	0.011	0.265	.034
Neighbourhood	0.667E-025	0.006	0.005	0.120	0.04
characteristics	-0.383-025	0.004	-4.25	-98.3	
Drug/substance abuse					0.05

Table 4 reveals that the relative contribution of each of the independent variables on dependent; domestic influence ($\beta = .090$, P < .05), Neighbourhood characteristics ($\beta = .042$, P > .05), and Drugs/substances abuse $(\beta = -.034, P > .05)$. It is therefore noted in the result above that only one of the factors was significant (Domestic influence) which the other two were not (Neighbourhood characteristics and Drug/substance abuse). As revealed by the result out of all the three components of the environmental factors, domestic influence has the highest contribution to the adolescents' emotional well-being. This is because to most of the respondents domestic influence is an environmental phenomenon that impacts every segment of the fostered adolescents. This is followed by neighbourhood characteristics and drug/substance abuse. Notably the extent of neighbourhoods impact in the life of fostered adolescents remains debatable because it is difficult to disentangle this impact from that of the family context, but from all perspective neighbourhood do matter in the life of the fostered adolescent. To further support the result of this study on attitude of the foster family National Survey of Child and Adolescent Well-Being (2004) stated that "the first comprehensive study of children in the child welfare system, more than 85% of children in foster care reported that they like the people they are living with, feel like part of the foster family, and believe their foster parents care about them". Adeyemo (2003), Abosede (2007) and Salami (2008) also supported the outcome of the findings of peer influence, states that peer influence buffer the fostered adolescents from stress and lessen the risk of later emotional and behavioural problems. They further stated that when teens behave right, think positively and are socially successful their relationship is a source of well-being, pride and identity.

However, the insignificant relationships between emotional well-being and environmental factors show that protective factors, such as social competence i.e. good peer influence, positive attitude of the foster family, positive academic influence etc safe guard them from poor environmental factors and as such may not have negative influence on them. Also intelligence of the fostered adolescents, their high self esteem, their outgoing temperament, strong sibling and peer relationships and a supportive relationship with an adult, can help protect the adolescents from the adverse effects of exposure to domestic violence. This is buttressed with FGD, response from a discussant His Heritage Home, Oluyole Extension, Ibadan:

"when I see my friends reading this usually motivate me to read."

Another discussant of Oyiza Orphanage Home, Oke Ado, Ibadan says

"we usually gather to read and discuss, even when I don't" feel like reading they usually call me and this encourages me.

Recommendation

Adolescents in foster care have often experienced family instability and other types of maltreatment and compromised healthy development. However provision of safe, stable and nurturing homes for the adolescents may lessen the harmful effects of their experiences by exposing them to protective factors that can promote resilience.

Conclusion

As a result of the exposure of the adolescents in foster care to risk factors such as poverty and maltreatment, they faced multiple threats which included poor health, attachment disorders, compromised brain functioning, inadequate emotional skills etc. Provision of stable emotional well-being and nurturing families will boost their resilience and ameliorate negative impacts on their developmental outcomes.

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