

University of Alberta

**A Community-based Program From the Perception of Youth: A
Case Study**

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Dedicated to my parents, the ones who instilled the
value of education within me.

Abstract

The purpose of this study was to access the perspectives of youth between 12-15 years of age that reside in a Receiving and Assessing Home (residential care facility). In order to meet the needs and provide appropriate care for youth, we as counsellors and caregivers, need to gain greater insight into how youth understand and organize their world while living in a Receiving and Assessing Home.

This study involved five months of data collection in the field using a variety of qualitative research methods. The results of the study suggest that in order for youth to make changes and positive choices in their lives, basic developmental needs are required to be met. Also, due to the high number of children in care and present day financial restraints in social programs, agencies are not able to provide these basic needs and thus are becoming more dependent on the assistance of community. It is becoming evident that there is an increasing need for community volunteers to mentor youth at risk in order to provide a support network that will help meet youth's basic needs. In addition, it appears that youth could benefit from the opportunity to participate in making decisions that affect their lives. This would give them a sense of autonomy over their environment as well as make them responsible and accountable for their experiences while in care.

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Chapter One

Introduction

The Significance of Residential Care

Residential Care is any form of care for a youth which removes him or her, for purposes of living and supervision, from the home of his or her parents or other near relatives, thus vesting normal parental authority over the youth in other adults (Patten, 1968, p. 1). The family system is considered to be a natural setting for youth development. Growing up in emotional and physical closeness to parents, brothers, sisters, and other relatives, the youth develops the psychological foundations that enable the individual to participate, later on, as a member of his or her own society. It is only when the family is incapable of caring for its children that substitute measures of youth care become necessary.

Each year thousands of children and youth in Canada are cared for outside their own homes. Each province has jurisdiction over child welfare legislation, thus the definition of "care" varies from province to province. In Alberta, according to the Child and Family Services Annual

Statistical Report (1995), a child placed in care¹ is under the age of 18 years and is in need of protection and is under one of the following legal authorities: emergency apprehension, apprehension order, order to extend custody to 3 years, custody agreement with child, temporary guardianship order, interim custody order, permanent guardianship order. In 1995, there were 4,359 children and youth in Alberta in care. This number rose from 3,962 children in care in 1994 and continues to rise (p.72).

Throughout history, people have cared for children² who were not their own. Accidents and diseases have permanently deprived children of their parents. Similarly war, disaster, famine and economic depression are examples of crises in which nobody is at fault when a child is left uncared for. In these cases society has assumed the responsibility of caring for the afflicted children.

Today, in Canadian society many children are in need of assistance not due to disasters but rather because of

¹ Care for children and youth in Alberta includes: parental care, extended family, residential treatment, remedial care, secure treatment, group care, receiving group care, supported independent living, independent living, residential education, auxiliary medical, view to adopt, foster care, drug and alcohol management, behavioral adaptation therapy, interim placement other than above, significant other, young offender act facility, agency foster care, fee for service care, and not coded.

² For the purpose of this thesis the terms children and youth are used interchangeably, referring specifically to individuals between the ages of 12-17 years. According to Alberta provincial legislation a child is under the age of 18 years.

social conditions that arise in their own personal families. Current complexities and pressures of economic insecurity have increased in our society, and family problems have been intensified, resulting in new and different conditions necessitating placement for our youth (Balcerzak, 1989). Some of the major social conditions giving rise to youth problems are described below. It needs to be noted that there may be other conditions in addition to the ones described here, impacting the lives of individual youth.

Reasons Youth are Taken into Care

Separation of Parents

Today, the dissolution of families, as a result of marital discord, leads to more children in need of care than ever before. The Canada Year Book (1996) indicates that in 1990 there were 76,859 divorces in Canada, an increase of over 14,000 in comparison to 1985. According to Dodge (1990a), this steady increase in divorce has directly impacted the children in the family. At present, Canada has a 50% divorce rate leaving 1 million children and youth affected by divorce each year.

In spite of the best expressed intentions of the supporting member of the separated or divorced couple and in

spite of welfare laws requiring regular contributions toward the support of minor children in cases of separation and divorce, thousands of children each year must be cared for, either through direct social service aid or through being placed, at public expense, in foster homes or children's institutions. In many instances, the parent having custody is unable to provide care and supervision of the children and requests placement.

Problems for children from broken homes are not solely financial. The key issue for children of divorce is the support that can be given by the child's custodial parent without the necessity of resorting to substitute care. However, every child needs the love and security of parents or consistent available guardians. Many parents who have lost their marital partners do an excellent job at bringing up their children. Yet, some single parents suffer from reduced incomes and the economic pressures do not lend themselves for children to be raised in households that are orderly and predictable and which have regular bedtimes, less TV, hobbies, and after-school activities. It is well recognized that families are the best source at instilling discipline, ambition, respect for the law, and regard for

others (Galston, 1992). In such cases, when families are not able to provide for the children it is often the responsibility of a social agency to assist in the supervision, training, and affection needed by the children of broken homes (Dusek, 1987).

Parental Ill-health

On occasion, parents who have suffered an accident or are severely ill or in need of surgery are unable to care for their children. The children may be temporarily placed in substitute care until the parents can resume their responsibilities. Accidents and illness can cause children to be orphaned or can deprive them of a supporting member of the family.

Today, a significant and growing number of children are in placement because of the mental illness of one or both parents. Some parents are receiving treatment, either at home or in a mental hospital. Children of such parents should be in placement, both for their own emotional growth and accommodate of the recovery of the parents.

Attention must also be given to alcoholism and drug addiction; these debilitating diseases among parents frequently make alternative care for children and youth

necessary. Approximately 13% of the total number of people consuming alcohol in Canada consider themselves heavy drinkers³ suffering from drug addiction, specifically alcoholism (Health and Welfare Canada, 1989). Children of drug addicted parents frequently suffer from neglect (Vasta, Haith & Miller, 1992).

Young Offenders

A child between the ages of 12 and 17 years who commits an act that would be a crime if he were an adult is considered to be a young offender. Between 1984 and 1986, the annual number of young people charged under the Young Offender Act rose 59%, from 22,000 to 35,200. Boys are more likely to appear in youth courts. In fact, in 1988, young males accounted for 84% of those charged under the Young Offenders Act (Statistics Canada, 1990). In addition, Statistics Canada (1990) shows that between 1986 and 1988, the number of charges processed by youth courts slightly increased. Canadian statistics show that nationally, in 1988 there were 106,100 charges against young people, up 10% from 96,200 in 1986.

³ Heavy drinking behavior is defined as consuming five or more alcoholic beverages on a single occasion.

The Young Offenders Act came into effect in 1984 and replaced the Juvenile Delinquents Act. Under the Young Offenders Act, there are four types of sentences used by youth court judges: Probation, custody, community service and fines. The most common disposition for adolescents who plead guilty or are found quietly in court is probation. In 1988, 51% of young offenders received probation. Another 20% received custodial dispositions, 16% had to pay fines and 7% were ordered to perform community service work. Absolute discharges were given to 4%, while the remaining 2% received dispositions such as detention for treatment, counselling, and paying restitution (Doige, 1990).

Single-Mother Families

Families headed by single mothers are a large and growing population in Canada. According to Statistics Canada (1996), this group of families includes mothers who have never married, women who are single parents due to the dissolution of a common-law or marital relationship, and women who are single parents due to the death of a partner. In addition, many single families mother share a disadvantaged status "in that they have low income, low

education, and are at increased risk of physical and mental health problems" (Jencks & Mayer, 1990, p. 17).

Children who grow up in single-mother families are exposed to the stresses commonly encountered in these families, such as poverty. It has been repeatedly demonstrated that low-income children have significantly more psychosocial problems such as emotional and behavioral problems and difficulties at school, than do children who are not from low income households (Rutter, 1985).

Statistics Canada data show that approximately one in six children is from a single-parent family. The majority of the single-mother families are identified as being in the low-income bracket. A total of 71% of the single-mother families were classified as low income; in contrast, among the two-parent families, 16.4% lived at or below the low income level. It was also identified that the average household income of a single-mother family was \$22,058, which is less than half that of a two-parent family. In addition to being poorer, single-mother family status placed youth at "increased risk of emotional or behavioral problems or academic or social difficulties" (Statistics Canada, 1996, p. 87).

Parental Neglect

In addition to emotional illness and alcoholism there are the problems of parental incompetence and degeneracy. Some parents seem unable to care for their children and constantly find their own wants in conflict with their children's needs. Thus, some children are neglected and emotionally or physically abused. The courts sometimes declare that neglected children are in need of supervision, in which case they are placed in settings outside their own homes.

Emotional Disturbance and Mental Deficiency

As the result of emotional disorder, many children and youth cannot develop adequately within their own homes and cannot profit educationally from the traditional public school system. Their difficulties, which range from behavior disorders to psychoses, make them in serious need of treatment (Vasta, Haith & Miller, 1992).

A mentally defective, deficient, handicapped, or retarded child is one who, because of disease, injury, or genetic anomaly, has an impaired brain which seriously prevents him or her from performing up to the average for his or her age in several intellectual areas (Lener &

Spanier, 1980). There are brain-injured youth who are not mentally retarded, although they may need special assistance to overcome a particular handicap. Technically, a person is classified as a mentally defective if his intelligence quotient measures below 70. These abnormal characteristics make it challenging for parents to care for such youth. Often these youth are assigned over to social service agencies for direct assistance.

How Are Youth Cared For

Separation of parents, parental ill-health, young offenders, single-mother families, parental neglect, personal problems, emotional disturbance and mental deficiency are the main reasons why the number of families in need of outside help and the number of youth in need of protection has increased. Social conditions have given rise to various services that are either provided by the public or a voluntary agency. A public agency is a branch of the federal, provincial or municipal government and may be referred to as the department of social welfare. A voluntary agency is operated by a charitable organization, such as a church group.

Once a youth has been referred to social services, the role of the public agency is to assign a social worker to that individual. The youth is then interviewed and provided with the appropriate services such as counselling, foster day care, financial assistance, health services, adoption agency, residential care (group home care) or institutional care. A voluntary agency is operated by a charitable organization, such as a church group, or by an organization funded by the local community or another non-sectarian financial source. The agency provides a varied of assistance for a child. A social worker may place a child in a voluntary agency depending on the needs of the youth.

Research Focus

The focus of my research was on residential care, one specific type of public service that is available for youth who are in need of immediate alternate care. The residential facility for youth in which I conducted my study was a Receiving and Assessing Home in a major city in Western Canada. The facility offers a program that is intended to address the needs of individuals affected by the complex social conditions discussed above. The Receiving and Assessing Home (R & A Home) is a temporary "home" for youth

while they are in transition. Youth that reside in this home come from diverse family backgrounds and are in transit to various types of care. They may be coming from treatment and may be on their way to their original care givers or families. They may be on their way to secure treatment because they pose a threat to themselves and/or other people around them. Youth may also be awaiting foster care or long term residential care or may have been abandoned by their parents such that their social worker requires time to assess their personal needs before they are placed in longer term care. In many cases, youth are placed in the R & A Home because they are on a waiting list for another facility. Most youth treatment facilities have reached their maximum capacity level and have long waiting lists for placement. These youth are generally referred to as being "at risk." "At risk" youth have the potential for getting involved in deviant behavior that generally precipitates trouble with the law. Dryfoos (1990) suggests that there are four major categories of risk behaviors in youth,

- 1) Drug and alcohol use and abuse,
- 2) Unsafe sex, teenage pregnancy, and teenage parenting,
- 3) School failure, underachievement and dropout and
- 4) delinquency, crime and violence. (p.2)

Participation in anyone of these behaviors would diminish a youth's life chance and in some cases eliminate the young person's chances of even having a life (Lerner, 1995). Today, in America, there are approximately 28 million children and adolescents between the ages of 10 and 17 years. About 50 % of these youth engage in two or more of the above categories of risk behaviors (Dryfoos, 1990). Moreover, 10% of our nation's youth engage in all of the four categories of risk behaviors (Dryfoos, 1990).

Personal Interest and Concern with Research

This research thesis reflects a personal interest of mine and is also directly related to my professional work with youth who are "at risk" and have been involved in the social services system. As a Child and Youth Care Counsellor for the past few years, I have developed a particular interest in finding out more about youth's experiences and how they make sense of their world while in residential care at a Social Services' Receiving and Assessing Home.

My work experience has also given me the opportunity to discuss and share ideas with the youth residing in care, as well as with parents who have children

in care. Prior to being employed at the Receiving and Assessing Home, I have an additional eight years with children and youth in social services which contributes to my fundamental knowledge and understanding of this field.

I have often wondered how these youth feel when they have been placed in a "home" away from their "real home", often not having a choice about where they can live. When I observe the structured day, the various interactions and the dynamics in the home I wonder what impact the Receiving and Assessing Home has made on these youth. What kinds of experiences are the children having in the "home" and how do they view these experiences? How do they feel about being in a Receiving and Assessing Home? What kinds of things do they like about the "home"? What kinds of things do they dislike about the "home"? And why? How youth create and understand their daily lives - their method of accomplishing everyday life and their described order in the world in which they live (Bogdan and Biklen, 1992). These questions have motivated me to undertake this inquiry on a formal basis.

The Nature of the Problem

The need for an increase in number of temporary homes for youth who are in transition has been continually argued for by the Crisis Center⁴ which has long waiting lists for youth placement. The Receiving and Assessing Home being studied has maintained its maximum capacity of eight residents daily and at times exceeded that capacity by having nine in the home. The youth are referred to the Receiving and Assessing home by the Crisis Center. The Crisis Center has an on-going waiting list of people who have no place to go as all possible resources in the community have been utilized to their maximum potential. Reports continually support the concept of the group homes for alternative care, but what they do not elucidate are the youths' perspectives about the group home's living environment and the program being offered. As a result, by and large, alternative care programs have been developed mostly by government functionaries without consulting the people who utilize the program.

The limited literature available on alternative care has been devoted to a theoretical analysis of various factors

⁴ Crisis Center is the initial agency which refers children and youth for alternative care.

that explain the reasons why youth are in care. In addition, several studies have focused on possible improvements in the quality of youth care. However, there is inadequate knowledge about the youth's perceptions of residential care⁵, even though such knowledge is essential in designing and/or redesigning appropriate programs. This study focuses on the knowledge that can be obtained by practical observation, field notes and personal interviews to investigate the various structural, organizational and communicational aspects that constitute the current R & A Home.

Significance of the Study

The significance of this study is that through interviews, youth are able to discuss their perception of residential care and the way in which they understand the world they live in. They have the opportunity to express and are encouraged to elaborate on the reasons for their opinions, thus making it possible to identify key issues about residential care that influence their perceptions. The results of this study contribute to the research concerning the relevance of residential care and its effectiveness in meeting the needs of the youth.

⁵ In this thesis, the terms group home, alternative care and residential care are used interchangeably.

Too few researchers (Dinnage & Pringle, 1966; Patten, 1967; Balcerzak, 1989) have contributed to an understanding of the many issues affecting the youth in residential care. However, even fewer have directly involved youth in their research. Patten (1967), for example, claims to discuss institutional care, the childrens' problems and how the institution functions. Yet, in his study he makes no reference to speaking with youth who were residing in the alternative care he was researching.

Balcerzak (1989) reviews current issues and questions facing alternative care that have evolved over time in the fabric of our society. He looks at the kinds of children who are in need of care, and what services will be effective in helping them. He looks also looks at how services can be delivered more efficiently. But once again, this research does not address the voices of young boys and girls who reside in alternative care. Although there is a great deal to learn from these types of studies, I feel there is a tremendous need to give youth who reside in residential care an opportunity to share their experiences.

Research Objectives and Questions

Given that there is limited information on the perspectives of youth while in group homes, the objective of this research will be to bring forward and represent these perspectives. Through a description of the youth's lived experiences, this study will attempt to illustrate the complexities encountered by the residents and by child and youth care counsellors. Some of the episodes described may be unfamiliar to some child and youth care counsellors. The home is dynamic and depends on the psychological and emotional state of the staff and children; therefore, no two days are the same. Every day is a new day filled with a new set of challenges. It is important to examine the experiences of the youth in order to learn how to better provide a healthy and nurturing environment that addresses the needs and interests of these individuals. In order to fulfill this purpose, a number of specific objectives have been established. These objectives are:

1. To understand how youth view the Receiving and Assessing Home.
2. To learn more about the experiences of youth in the Receiving and Assessing Home.

3. To identify what youth like and dislike about the home.
4. To record the youth's suggestions for improvement, which may lead to alternatives to current program.
5. To identify what motivates youth to engage in recreational activity.
6. To identify what role violence plays in the home.

Limitations

This study is primarily descriptive and exploratory in nature. Its purpose is not to test any set of hypotheses or any specific theory regarding the field or inquiry. Rather, the focus is to gain insight and understanding as to how youth view and organize their daily lives while in residential care. Therefore, concepts and principles from different fields of study, including sociology, education, and psychology have been eclectically drawn from for interpretive frameworks.

In the R & A Home, my role was dual purpose. Not only was I a researcher trying to learn what the youth were experiencing, how they interpreted their experiences, and how they themselves structured the social world in which they lived, but I was also a counsellor -- someone who provides guidance and who disciplines as necessary. During certain

designated times throughout my shifts, I would shift my role from that of a counsellor to a researcher. At times, it was quite difficult to differentiate my roles, not only for myself but also for the youth involved. I found myself trying to be an "insider" with the youth, asking them personal questions and trying to help them; yet on the other hand, I found myself acting in the position of disciplinarian and authority figure. When I was trying to be a researcher, I made attempts to explain to the residents that I was trying to gather information that was separate from my regular work there. However, I felt that in some instances I was still perceived as an "outsider", by the youth and that this was a barrier to my research. It must be kept in mind that since I was an "outsider" someone who is older and in a position of authority, this may have limited the amount and kind of information that the youth were willing to share with me which may have limited the data collection.

Not only did I experience difficulty in differentiating my roles as a researcher and a counsellor, but I also believe that my age had an impact on my role as a researcher. As I am not between the ages 12 to 17, I could only imagine myself being in their situations and empathized with them mainly by

relating to my past experience. This required me to be more attentive to what the youth had to say, so that I would not distort their experiences by interpreting them according to my own experiences.

Another issue that prevented me from becoming a true insider was the psychological trauma and emotional stress that the youth were experiencing at the time that they were in the R & A Home. Some of the children had been taken away from their parents for the first time, and some had left their home on their own for the first time. As Grace, one of the respondents, once told me, "You've never gone through what I have been through, you would never understand."

Although I was an "insider" in the sense that I was familiar with the environment and the youth in the home, I was still an "outsider." What went on in front of me, the discussions and observations, were very different from what went on behind me. Goffman refers to this type of behavior as "'back region,' or backstage behavior, and 'front region', or on-stage behavior" (Riggins, 1990, p.69). An entire backstage culture existed among the youth, and only people who shared a similar background and had certain characteristics that could be a part of this culture. For

example, having experience living on the street, being involved in street gangs, and coming from a dysfunctional family would help one to become an "insider" or a part of that backstage culture. Not having these shared experiences created the divided line between the front region and the back region. However, establishing close and trusting bonds with the youth and really listening deeply to their experiences had diminished the gap between the frontstage and the backstage. Being sensitized to the voice of youth allowed me to appreciate and understand their experiences.

Finally, the scope of this research was limited by constraints of time and budget. It would have been useful to investigate more in-depth, specific themes that emerged during this study, such as safety, aggression, and violent television. However, due to the limited time allotted for this research, only a general review of various themes could be provided for the R & A Home.

Overview

This study is organized into four chapters that are followed by a bibliography. This first chapter presents an introduction to the research problem and its significance. The objectives established for the study are discussed, and

the underlying assumptions and limitations are stated. The chapter concludes with an outline for the presentation of the thesis. Chapter two presents the study design, including preliminary fieldwork, gaining access, parameters of the study setting, research design, methods employed to collect data, data analysis, and how I dealt with reliability and validity issues. The third chapter presents an interpretation of the data along with a summary. The fourth chapter provides a summary and concludes with implications for future research.

Chapter Two

Study Setting and Research Methods

Preliminary Fieldwork

My initial field work at the home began as a pilot study, during which I spent 2-3 days a week for approximately 3 months observing, interacting with and interviewing youth about their experiences in the Receiving and Assessing Home. This provided me with many opportunities. It allowed me to identify an initial direction and focus for my study. I was able to identify a direction through consideration of the kinds of questions that I needed to ask the youth. My preliminary fieldwork also encouraged me to try out different skills such as listening, asking questions and observing as researcher and not as an employee. My initial work also contributed to an establishing a different kind of relationship with the youth in the home. Moreover, it allowed me to commence my research as soon as possible and eliminated any extra time that would have been necessary in adjusting to the research environment.

Gaining Access

According to Bogdan and Biklen (1992), there are two issues that dominate ethics guidelines in research with human subjects: informed consent and the protection of subjects from harm. These guidelines attempt to ensure that:

1. Subjects enter research projects voluntarily, understanding the nature of the study and the dangers and obligations that are involved.
2. Subjects are not exposed to risks that are greater than the gains they might derive (p. 53).

Pursuing these guidelines, I wrote a letter to my program manager, describing my project and stating my objectives. My manager responded by providing me with written consent; however, it was noted that a restriction of confidentiality would be required when using children's names. Written consent of the participants was obtained prior to initiating the study. Each participant voluntarily chose to engage in the research, and an agreement was made that they could withdraw from the study at any time. I also informed them that their participation in the study would not affect their stay in the home.

Respondents were provided with the option of being tape recorded. It was explained to them that if at any time

during the interview they did not wish to be recorded, I would be happy to turn off the tape. I assured them that I would be the only person listening to the audio tapes and that complete anonymity and confidentiality would be maintained at all times.

I also explained to them, prior to any observation or interview, that participant names would not be used nor would the name of the home be included in any printed or published material. All participants have been given pseudonyms. Interviews were scheduled informally at a time, when it was convenient for both the interviewer and the interviewee. In several group interviews, youth asked not to be tape recorded. I was happy to honor this request, as it made it possible to comfortably discuss personal issues.

Parameters of the Study

The study focuses on ten youth who were in the Receiving and Assessing Home during the six month period of my research. My research reflects the perspectives of the ten residents who were selected out of the many youth who resided in the home. Participants in this study included: 7 girls and 3 boys between the ages 13 to 15 years old. The ten individuals included persons of various of personalities

and backgrounds such as: quiet/shy, talkative, broken families, families with parents, repeat offenders, first time offenders, first time in care.

The purpose of the home was to provide short term accommodation for youth who were in crisis. This resulted in a high turn-over rate of youth at any given time. Youth resided in the home for anywhere from one day to several months. Ideally, the program permitted individuals to stay in the home for anywhere from 3 weeks up to 3 months. In many instances, however youth stayed for a much longer period, some youth, in fact, remained in the home for up to 6 months.

The Setting

The House

The R & A Home was a two story, spacious, rectangular building situated in a residential part of the city. It had two schools nearby, one primary and one secondary nearby that were utilized by youth while in care at the home. A main bus route two blocks away made it viable for youth to travel to other parts of the city. Surrounding the home was a large front and backyard where outdoor activities, such as soccer, hacky sac, and football were played. Also, youth

who have been given permission to smoke by their social worker had access to smoke on the deck.

The Receiving & Assessing Home was maintained by a total of 5 full time staff, 4 Youth Counsellors and 1 Team Leader. The majority of the counsellors had several years of related experience. From 7:00 a.m. to 11:00 p.m., there were 2 Youth Counsellors working at any given time. Every evening at 11:00 p.m., one full time staff member came in to work the "awake-over-night-shift"⁶. On weekends, there was a live-in counsellor (he would come in on Friday at 11:00 p.m. and leave on Sunday at 11:00 p.m.) A program manager oversaw all staff and program activities, and a social worker carried out assessments on youth who came into the home.

During the time of my research, changes in the R & A Home's staff were taking place. Over the course of a few months, four full time staff including a team leader needed to be replaced. It was six months before almost an entire new staff crew was put in place. This had a substantial impact on the day-to-day consistency and stability of the program.

⁶ An awake over-night-staff was a counsellor who was up the entire night in case there was an emergency in the home.

The R & A Home was a house divided into two levels, the main floor and the downstairs. The main floor consisted of four female resident bedrooms and a bathroom that was shared among them. The common living room, dining room and kitchen were also located on the main floor. There were two rooms occupied by the counsellors. One was used as the main office and the other was a bedroom for the weekend staff. The staff had access to their own bathroom and shower both of which were located upstairs.

Downstairs, there were four bedrooms for the male residents and a bathroom that they shared. A large recreation room with a television, video game and ping-pong table was also located downstairs. A laundry room and a food storage room were located down the hall from the recreation room.

Phase System and Incentives

Every youth who came to live in the R & A Home was placed on a four level phase system, with the first phase being the lowest and the fourth phase being the highest. During their first week in the home each person was placed on Phase 1. Phase 1 included the following privileges: permission to use the television, telephone, and stereo,

participate in group outings with staff, and volunteers when deemed appropriate by staff and 9:00 p.m. curfew. Every Tuesday at staff meetings, the team (staff) assessed each resident based on his or her behavior during the week. If a person's behavior warranted having them move up a phase then that person's privileges increased. However, a resident whose behavior was unsatisfactory (was not complying with house rules) would remain on phase 1. Residents were allowed to move up one phase per week, but they may move down more than one phase at once, depending on the type of rule that was breached. For example, if an individual was on Phase 3 and breached a serious rule in the house, such as going AWOLING (leaving without permission and not returning to the home by curfew), that person may be immediately moved down to Phase 1. In order to achieve phase 4, the youth needed to follow house rules for the entire week.

The following privileges were inclusive for Phase 2: the use of television, telephone, and stereo, independent outings, and 9:00 p.m. curfew 5 nights a week and 10:00 p.m. on weekends (Friday and Saturday). Phase 3 privileges included: access to television, telephone, and stereo, independent outings, and 10:00 p.m. curfew 5 nights a week

and 10:00 p.m. on weekends, with possible curfew extensions negotiable with staff and extra \$1.00 allowance weekly. Phase four privileges were: T.V., telephone, stereo, independent outings, 10:00 p.m. curfew 5 nights a week and an 11:00 p.m. curfew on weekends with possible curfew extensions, possible weekend out of the house upon request and with definite plans approved by staff and parents, 10:30 p.m. bedtime upon staff discretion and an additional \$2.00 allowance compared to phase 3. Youth were able to get a base allowance⁷ of up to \$10.00. Youth received 50 cents a day for making their bed, up to a maximum of \$2.50 a week, plus 50 cents a day for doing their assigned chore, up to a maximum of \$2.50 a week. On Saturdays youth were able to make an additional \$2.50 for cleaning their room thoroughly and \$2.50 for doing a "major chore clean", for example, cleaning the kitchen, bathroom or the living room. Any additional work completed beyond expectation reflected an increase in allowance, whereas work that did not meet expectations resulted in a decrease in allowance.

⁷ Base allowance is defined as the amount of money earned by just doing expected chores. Every resident starts with zero money at the beginning of the week and can earn up to \$10.00. Any additional chores performed around the house was added on to the earned base allowance.

Bed Times

During the week, Sunday to Thursday, all residents had a 10:00 p.m. curfew meaning that they had to be in the house by that time. At 10:15 p.m., residents were to be in bed. Youth who have earned the privilege of being on Phase 4 were allowed 15 minute later (10:30 p.m.) bed time. Weekend (Friday and Saturday night) bedtime hours for youth included 10:00 p.m. for those 11 years of age or younger, 11:00 p.m. for 12-13 year olds and 12 midnight for 14-17 year olds. An additional half an hour later bed time was added on to each age group for those who were on phase 4.

A Typical Day - Weekday and Weekend

The structure of the day depended on whether it was the weekend or weekday. On a weekday, by 7:00 a.m., youth who were going to school were generally up and starting their morning routines, including showering, brushing their teeth, eating breakfast, making a lunch and getting their books ready for school. By 8:30 a.m., all the youth who were enrolled in school were off for the day. By 9:00 a.m., youth who were not in a day program were up and had until 10:00 a.m. to get ready to do school work in the home, this might consist of home schooling or work that was provided by the

child and youth care counsellors. Youth that were at home did school work from 10:00 a.m. to 12 noon and then from 1:00 p.m. to 2:00 p.m.. At noon, the children who were going to the nearby school and the children who were doing school work at home made their lunch.

At 2:00 p.m., the evening staff would arrive and there would be a shift exchange for an hour in order to discuss the developments that had occurred that day. During this time, youth who were able to signout (referring to youth who have earned the privilege to leave the residence on their own in order to visit friends and family), signed out and whereas those who did not have signout privileges were generally doing school work in their room. At 4:30 p.m. all residents had Quiet Time in their rooms for one hour in which they did homework, read or simply rested. By 5:30 p.m., supper had been prepared and was ready to be served. Each day, residents alternated between preparing supper and setting and clearing the table.

After supper, residents had household chores to complete. Household chores were rotated on a daily basis and included the following: hallway sweep and mop, dust and vacuum living room, dust and vacuum recreation room, clean

male bathroom, clean female bathroom, sweep and mop dining room and clean kitchen. A detailed description of each chore was located on the bulletin board in the dining room. The rest of the evening was free until bedtime.

The weekend had a less structured schedule. One of the first requirements for the youth on Saturday morning was to do a major room clean-up. This included organizing room (toys, clothes), dusting, vacuuming and having their sheets washed. The youth did not receive their allowance until the clean-up was accomplished. The rest of the day was free. Those who could signout did so, whereas those who were too young or had not earned signout privileges would remain on the unit, either inside the house or out in the yard. As for meals, brunch was at 11:00 a.m. and supper at 5:30 p.m. Sunday followed a similar non-structured pattern as Saturday; however, the major room clean up was only a requirement for Saturday. Weekends were also a time when the staff organized recreational activities with the youth. Such activities would include going to the park, bowling, movies, swimming etc.

Research Design

A qualitative research design was selected for this study in order to allow for greater personal interpretation by the researcher and depth of response from the youth involved. Denzin and Lincoln (1994) define qualitative research as:

multimethod in focus, involving an interpretive, naturalistic approach to its subject matter. This means that qualitative research researchers study things in their natural setting, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them. (p.2)

According to Bogdan and Biklen (1992) qualitative research is defined by the following characteristics: 1) use of a natural setting as the direct source of data, with the researcher being the key instrument; 2) is descriptive in nature; 3) is concerned with process rather than simply with outcomes or products; 4) is inductive; and 5) has meaning as its essential concern (p.31).

Lincoln and Guba (1985) indicate that "realities are wholes that cannot be understood in isolation from their contexts, nor can they be fragmented for separate study of the parts" (p.39). As nothing stands alone in the studied environment, it is advantageous to uncover all the

interwoven elements. Traditional research is based on the assumption that there is a single, objective reality known as "the world out there" that we can observe, know and measure. Interpretive research, on the other hand, recognizes that knowledge is actively constructed rather than "found" (Ellis, in press). My research, being of qualitative design, is based on description and interpretation rather than attempts at "objective" measurement.

Qualitative research is appropriate in a number of cases and situations, as described below:

Some studies naturally lend themselves more to qualitative type of research, for instance, research that attempts to uncover the nature of persons' experiences with a phenomenon like illness, religious conversion, or addiction. Qualitative methods can be used to uncover and understand what lies behind any phenomenon about which little is yet known. It can be used to gain novel and fresh slants on things about which quite a bit is already known. Also, qualitative methods can give the intricate details of phenomena that are difficult to convey with quantitative methods. (Strauss & Corbin, 1990, p.19)

In order to gain a deeper understanding of the youth's perspectives on their lived experiences in the R & A Home, my study incorporates the following: observational fieldnotes, story writing, interviews, photographs, and the

interpretation and the appraisal of settings, all of which are techniques that Eisner (1991) advocates for qualitative studies (p. 33).

Some researchers view a research design as similar to an architectural blueprint. It is a plan for assembling, organizing, and integrating information (data), and it results in a specific end product (research findings) (Merriam, 1988, p.6). Since I was interested in the 'how' and 'why', a case study approach was appropriate for my purposes. This specific research design has included interviews, observational field notes photographs and story writing. I have chosen a case study research design as opposed to hypothesis testing, because of my interest in insight, discovery and interpretation. As Yin (1984) observes, the case study is a design particularly suited to situations where it is impossible to separate the phenomenon's variables from their context. A case study is often the best methodology for addressing research problems in which understanding is sought to improve institutional practice:

research focused on the discovery, insight and understanding from the perspectives of those being studied offers the greatest promise of making significant contributions to the knowledge base and practice. (Merriam, 1988, p.3)

As a counsellor, I sought to better understand the experiences of youth while in residential care at the R & A Home. Through qualitative research, I was able to pursue my objective which was to understand the meaning of the experiences of youth. Patton (1985) identifies this type of research as a means

...to understand the nature of the setting -- what it means for participants to be in that setting, what their lives are like, what's going on for them what their meanings are, what the world looks like in that particular setting--and the analysis to be able to communicate that faithfully to others who are interested in the setting. (cited in Merriam, 1988, p.17)

It was my goal that understanding would help me and my colleagues become better counsellors and provide facilities that better meet the needs and interests of youth who are in residential care.

Merriam (1988) refers to four essential characteristics of a qualitative research design stating that it should be:

- 1) particularistic because the focus is on the holistic view of a particular situation, event, program or phenomenon;
- 2) rich and thick in description, using documentation of events, quotes, samples and artifacts;
- 3) heuristic because it uncovers new meaning leading to the rethinking of a

phenomenon being investigated; and 4) inductive because it continually unravels and discovers new relationships, concepts, and understanding rather than attempting verification of predetermined hypotheses, (p. 11-13). I have worked towards fulfilling all these characteristics in my research.

Methods of Data Collection

Individual Interviewing

Interviewing was one of my primary means of data collection. Patton (1987) indicates that interviews are an important source that allow us to access another person's perspective and learn about things we cannot directly observe. From my preliminary fieldwork experience, I learned that interviewing this particular group of youth with "closed" questions was not effective. I believe that "Yes/No" and one-word answers left me at a dead end and left the individual with no opportunity to personally develop ideas or questions. This led me to conduct open-ended interviews, which can develop a conversational relation between two people, one in which the participants come to know as much about each other as about whatever was the topic of the conversation (Weber, 1986, p. 65). Prior to the

interviews, a relationship was established between myself and the interviewees with the aim being to create a more relaxed atmosphere. This relationship was developed through the personal conversations that I had with the youth. We met several times informally, prior to the interview so that an element of trust and safety could develop between myself and the resident. As Ellis (1994) states, the role of the interviewer is to communicate genuine curiosity, respect and acceptance. As much as possible, the interview should provide an opportunity for the interviewee to experience his or her total self as a person of many parts who experiences ups and downs, loves and hates, fear and courage, as well as infantile desires and more mature interests (p. 370).

Following Bogdan and Biklen's (1992) suggestions my interviews were intended to be like a conversation between friends. I used open-ended questions and following Seidman's advice (1991, p.59) I encouraged the interviewee to talk in the area of his/her interest after which I probed more deeply, picking up on the topics and issues that the respondent had initiated and following up by asking for clarification and seeking concrete details.

Group Interviews

From my experience, I came to realize that individual interviews are not always an efficient method of data collection in every situation. The individual interview seemed to work for the respondent named Candice, whose communication skills were strong and who had no difficulty in sharing her personal background with me. However, the individual interview did not seem to work with Alexis. I had difficulty getting Alexis to carry on the conversation. Most of the conversation only led to very brief "Yes/No" type answers. At that point, I realized that, for some individuals, a more effective strategy for communication would be to use group interviews. I placed youth in small groups of three, creating a more comfortable and secure atmosphere that would make it easier for them to share their experiences more openly. Group interviews are advocated by Patton (1987) who makes reference to the many consumer decisions that people make in a social context, decisions often growing out of discussions with other people. The group interviews provided youth with an opportunity to hear the ideas of their peers. Moreover, it gave individuals the confidence to share personal experiences.

During interviews, I kept in mind three important interviewing skills for researchers, as outlined by Seidman (1991):

1. Interviewers must listen to what the participant is saying, making sure that they understand and assess whether what they are hearing is sufficiently detailed.
2. Interviewers must listen for the "inner voice," as opposed to an outer, more public voice. The outer voice reflects an awareness of the audience. It is not necessarily true if it is guarded.
3. Interviewers must listen while remaining aware of the interview process as well as the substance. They must be conscious of time during the interview; they must be aware of how much has been covered and how much there is yet to go (p.56).

Observations and Fieldnotes

Fieldnotes are another important element in my written account of what I heard, saw, experienced and thought in the course of collecting and reflecting on the data (Bogdan & Biklen, 1992, p.107). I initially began taking notes in categories according to youth and the events that occurred around him or her. As my fieldnotes expanded, I discovered that it was more effective to write observations in chronological order, using quotes and a shorter time period for observation. Categorizing my fieldnotes before I had an opportunity to analyze all of the observations set

limitations in terms of future thematic groupings. Also, using an 8 hour time frame for observation did not make it possible to capture thick descriptive detail. Instead, it only provided me with general summaries.

The entire logging process of my observations involved taking mental notes, jotted notes and then full fieldnotes. During my observations I would make brief notes in order to remember things at a later point when I would be able to make more detailed notes about what I had observed. Following the event, I spent time writing up more detailed descriptions. The mental notes and jottings were converted into a running log of observations that are referred to as the "full fieldnotes" (Lofland & Lofland, 1995, p.91). Observational fieldnotes were promptly written soon after the observation, usually no later than the following morning in order to avoid forgetting valuable and detailed information.

My written observations were guided by Lofland and Lofland's (1995, p. 93) two rules of thumb: 1) being concrete and 2) distinguishing verbatim accounts from those that are paraphrased, based on general recall or my personal impressions. A great deal of emphasis was placed on capturing an understanding of the activity, objects and

people being observed. An attempt was made to describe and recall events as exactly as possible "word for word" in order to remain at the lowest possible level of inference. Capturing raw behavior and avoiding any final judgment was the key in writing insightful fieldnotes.

Analytical Memos

When I began writing my fieldnotes, I used a great deal of descriptive detail, trying to capture a word-picture of the setting, people, actions, and conversations observed. Towards the end of my research, following the suggestions of Bogdan and Biklen (1992) I became more reflective (p.108) and analytical in my note-taking. These reflective and analytical parts of my fieldnotes were called "analytical memos" and were distinguished by parentheses from the rest of the text. Analytic memos contained such material as reflections on analysis, method, ethical dilemmas, conflict, observer's frame of mind and points of clarification (Bogdan & Biklen, 1992, p. 122).

When I began writing up my observational fieldnotes, I found myself struggling to get started. My first entries were the most difficult to write, but once I started writing,

I found it quite addictive. I became immersed in my writing which unraveled from one page to another, as I recalled information, quotations, personal impressions, etc.

Weekend Reports

Weekend reports were an additional source of data. These reports were compiled by three staff members who spent the weekend with the residents. Weekend reports provided a brief summary of weekend events and a character profile of resident who was in the home. This compilation of data was based on the combined impressions of the staff and helped to confirm my observations. The weekend reports represent the consensual perceptions of staff members who carefully considered their written interpretations. This type of data added to the observations that I was able to make myself and added opportunities for greater depth and rigor in data collection.

Youths' Personal Impression Writing

The house residents were asked to volunteer to write down their impressions of their experiences in the home. Out of the ten residents, two participated in personal impression

writing. They were provided with a sheet of paper along with the question "If you were to tell a friend about R & A (where you live) what would you tell that person?" The two individuals wrote on this topic during an afternoon spent at the home, having been suspended from school. To my surprise, they wrote an entire page on their impressions of the home. Quite often, youth at Receiving and Assessing Home had very low reading and writing skills, which made any type of writing task a difficult means for collecting data from them. However, for these two individuals, I found their written impressions to be an additional source of information supplementing my fieldnote observations.

Photographs

Photographs were another source of data collected. A disposable camera was provided, and the youth were given the opportunity to take pictures. Taking photographs was used as a springboard for individual and group discussions. The discussions about photos provided insight into the youths' perception of themselves and of others around them.

Leaving My Field of Research

It was important for me to attain closure in my research field as my data collecting gradually tapered off.

This closure was made possible because I was casually employed at the home which meant that I was occasionally called to work, even though my research was finished. Thus, until the residents moved on to other places, I was able to maintain the ties that were developed over the course of the research. I found that even though the youth had moved on, some of them still maintained ties with the home by phone or just dropping by for a visit.

Data collection came to an end when the following occurred: 1) exhaustion of sources (when sources had been tapped many times; 2) category saturation (continuing data collections identifies minimal new information); 3) emergence of regularities (the same themes continue to emerge on an ongoing basis); 4) overextension of information (when the meaning of new information is very far removed from the core of any of the viable categories that have emerged)(Lincoln and Guba, 1985, p. 350). Towards the end of my data collection, it became evident that no new categories were being developed and that regular patterns or themes were being repeated in my fieldwork. It also became evident among my participants that we had reached a point at which there

was nothing more to discuss and the same patterns simply continued to emerge in our interviews.

Data analysis

Following my data collection, I spent time sifting through all my fieldnotes. An effort was made to make as much sense as possible out of my data by making use of a process that Lofland and Lofland (1995) called emergent induction. Intensive immersion into my data allowed me to apply my intuition and sensibilities (p.184) to try to avoid any distortion of interpretation.

Prior to my data analysis, I tried to make sure that all my fieldnotes were complete and that I had finished any last minute outstanding observations and analytical memos. Following this, I spent time mulling over my data. During this process I even speculated on certain ideas. Bogdan and Biklen (1992) encourage speculation as it helps one take the chances needed to develop ideas, and emphasize that researchers should not be too cautious. I also spent time highlighting and utilizing my page margins in order to identify key words and phrases.

Following this stage, I took about a three week break from looking at my data. This gives me a chance to distance

myself from the details of the fieldwork and to put the relationships between me and the subjects in perspective (Bogdan & Biklen, 1992). I then came back to my research feeling fresh and rested.

Following my break, I spent many hours analyzing my data. In order to provide a rich description of the youth's perspectives, I tried to organize my information in such a way that it would enable me to read and retrieve data easily. I analyzed my data in accordance with Lofland and Lofland's (1995) as well as Bogdan and Biklen's (1992) suggestions for generating categories and identifying themes. First, I went through all my fieldnotes looking for major codes that were general and sweeping, incorporating a wide range of activities, attitudes and behaviors (Bogdan and Biklen, 1992). I searched for patterns and clusters that would help me identify key concepts. As the code categories emerged, I named them. I then displayed the categories on sheets of paper and posted them around my office, making the differences visual. Once I had made a hard copy of all my information, I cut up my data and further coded and identified particular themes, dating them accordingly and placing them under the general categories that I had posted

on my wall. One advantage of using this approach was that I had a certain degree of flexibility in grouping or arranging the information as well as in identifying the relationships between one category and another. The codes categorized information at different levels. Subcodes broke these major codes into smaller themes. When I needed to get a sense of the context from which the coded, cut-up pieces of information originated. I found myself reverting back to the original pages of data.

Once my data was cut-up into pieces, it was critical to be able to identify each piece according to which observation or interview it came from. For example, each piece of information that referred to my fieldnotes included the date (i.e., March 12, 1996), and the information that came from the interview was coded (i.e., 8-4). The first number makes reference to the interview number, and the second number refers to the page number. This system helped organize my information in a way that I was able to easily access my information in my original hard copy. All information that was on the walls was stored in file folders according to categories when they were not in use.

I began writing about the subject areas that had become most salient for me. These topics also seemed to be the ones that were most comfortable for me. As I spent time going over and over my data, themes began to emerge. As these themes began to emerge, I made a conscious effort to write down the lived experiences of youth from their perspective.

Reliability and Validity

As discussed in Chapter 1, the reliability of the data from the informal interviews is somewhat uncertain, due to the inherent inability to test for systematic response bias. However, all researchers are affected by observer bias:

Questions or questionnaires, for example, reflect the interests of those who construct them, as do experimental studies. Qualitative researchers try to acknowledge and take into account their own biases as a method of dealing with them. (Bogdan & Biklen, 1992, p. 47)

As a researcher, I made a conscious effort to continuously confront my opinions and prejudices with the actual data in order for the data to "bear the weight" of interpretation. My primary goal was to add to knowledge, not to pass judgment on people, places or institutions. Qualitative researchers tend to believe that situations are complex; rather than try to narrow the field, I made an

attempt to portray many dimensions that interact with youth who are in care.

Interpretive inquiry research centers on the question as to whether it could be clarified and made more comprehensive or comprehensible rather than focusing on research in terms of proving an interpretation to be true or false. In order to decide whether an interpretation is adequate we ask the following questions: 1) Is it plausible, convincing? 2) Does it fit with other material that we know? 3) Does it have the power to change our practices? 4) Has the researcher's understanding been transformed? 5) Has a solution been uncovered? 6) Have new possibilities been opened up for the researcher, research participants, and the structure of the context (Ellis, 1995)? Addressing these questions help solidify interpretive findings.

Throughout the course of the study, several other strategies were utilized to ensure that my analysis was substantiated. I used Eisner's (1991, p.53) criteria for appraising qualitative inquiries insofar as: 1) I attempted to provide a coherent interpretation of the youth's perspectives within the residential care context, using multiple data sources to support my conclusions, 2) I secured

consensus or agreement by providing descriptions, interpretations and evaluations of residential care and by also providing an account of the youth's perspectives toward care at the Receiving and Assessing Home, and 3) I endeavored to provide an account of the youth's perspectives that will be useful in the designing of residential care programs for youth.

Additionally, I spent 5 months in the field gathering data and learning about the social context in order to provide sufficient basis for a comprehensive description of the case. This time period allowed me to use different sources of data collection which, in fact, demonstrated consistency in the overall patterns that emerged through my research. Patton (1990) identifies this consistency as significant to the overall credibility of the findings (p.468).

Generalizability is another concern in regard to my findings. My research does not directly apply to all residential care facilities. However, as Stake (1988) notes, unique cases help us to understand more typical cases. Although the findings of this study are not generalizable, assessing generalizability is, after all, the responsibility

of the reader, who must ask, "What is there in this study that I can apply to my own situation, and what clearly does not apply?" (Walker, 1980, p.34).

Chapter Three

A Perspective From Youth

Hearing the Voices of Youth

When I began my research, I was not sure how open youth would be to discussing what really was going on with them. I quickly came to realise that most of the youth were eager to talk about their experiences once they were given the opportunity. In many instances youth alluded to never having the opportunity to express themselves or even if they did express their voice there was nobody to listen to them. This was evident to me during a conversation with Tommy when he stated that:

My mom's boyfriend blames me for everything even for my mom wanting to commit suicide, he says I am a big problem so my mother gave me away and I never want to go back. I know I'm not perfect but nobody cares to listen anyway. (July 15, 1996)

In another instance Taylor also made reference to not being heard. He said:

I am in this home because my social worker thinks I have a lot of problems with my parents and stuff. He tends to blame things on me and not my parents. So that's why I'm here and my parents don't have to go to therapy. So I have the problem, that's what my social worker says. My mom too, said that but nobody cares what I think. (6-2)

When I asked Candice why she is here at this home, she said that she and her sister went to a friend's place after their parents had thrown them out of the house following an argument. Her friend then received threatening phone calls from her father saying that "he was going to beat the heck out of all of them" (1-3). My friend called the police and when the police arrived they just took us away (Alexis and me) and didn't do a thing about my dad threatening my friends. Candice said that "it isn't fair, it's not even why they phoned the cops. And the cops were like yelling at us and everybody else and not listening to us" (1-4).

One day I was in the kitchen helping prepare dinner and Jamie was on the phone talking to her mother. Jamie appeared agitated with the conversation. I overheard her say, "you don't believe me, but it was true. You weren't there, I'm not making this up" (April 7, 1996). Jamie hung up the phone with her mother, stormed into her room and I followed her. She was trembling and her eyes were full of tears. Jamie then explained to me:

I was sexually abused by my father, but my mother won't believe me. She is denying it, but I wouldn't make something like this up. My social worker doesn't believe me, my counsellor doesn't believe me. But it's true. I would never make something like this up. My mother just keeps saying "Come home, we will find you another counsellor to help you through this." I keep

getting new social workers. The last one I finally opened up to and told him everything. I couldn't believe it, I told him everything but it didn't help. Now I have a new one and she hasn't even asked me anything about it. She won't believe me either, nobody believes me. (April 7, 1996)

When I listened to these stories, I soon began to realise that these youth seldom had an opportunity for their voices to be heard. Not only were their voices not heard, but they were often used as scapegoats and were blamed for things for which they were not necessarily responsible. I found that when I developed a trusting relationship, and a listening ear they eagerly shared their stories with me. This gave them an opportunity to express their voice and be heard.

Youth spent anywhere from one night to six months, in this residential home. As a result, some of the youth came and went quickly and I was only able to develop a superficial relationship with them while others were around for a longer period of time and therefore, a more trusting and open friendship was established. I found that because I was also a youth counsellor in the home, I had to take a more listening approach in order for the youth not to have viewed me as just another counsellor but as a friend and someone they confide in. Quite often as a counsellor I seldom had an opportunity to sit and talk with them about their lives as I

was usually caught up in the paper work or preoccupied in dealing with people in crisis. When I was collecting data for my research, my approach included investing interest and time when talking to youth with the ultimate goal of developing a trusting and valuing relationship. For most youth, counsellors in the home are just additional authority figures passing through their lives. As Alicia stated, in a conversation with me "I like it here because there are so many different staff and you can get attached to staff but not as much because there are so many coming and going" (5-3). These feelings were commonly shared among youth. Most preferred to keep to themselves in the R & A Home until they moved on to their destination.

My greatest challenge as a researcher was just to listen to youth talk. I often wanted to jump in, offer my explanations and suggestions for their situation, however, as a researcher that was not my role. Making them feel important, valuing and listening to their stories was my ultimate goal. I balanced my two different roles by consciously being aware of what particular role I was playing at that time. I found that the more practised I had the better I became at differentiating my roles.

Most of their stories emerged when we were together sitting on their bed in their room. I made special effort to ask my respondents where they felt most comfortable talking with me and they generally responded by taking me in to their rooms. There, we had privacy, the door was closed and it appeared that they felt safe to converse with me. Quite often nobody else knew where we were and we were seldom interrupted.

From our discussions, I was able to gain insights about what it was like to be a teen in a R & A Home. I also was able to learn more about life experiences of a teenager coming from a dysfunctional home. Now, when I work with these youth I do not look at them as housing them here for a temporary period of time. I see them as emotional and sensitive youth with very individual and complex backgrounds that have voices to be heard.

Communicating with Youth

I recall the afternoon that John's parents sat on the sofa across from where he and I sat. They sat in silence as John talked incessantly to me. I would interject a question here and there for clarification. The parents sat in silence, with jaws hanging, and watched the interplay between

their 15 year old son and myself, a complete stranger to them. After 30 minutes, I stopped John, turned to his parents and said, "I would like to hear your view of the problem." His father's first remark was, "I can't believe it! We had to practically drag him here. He told us we could make him come to the R & A Home, but we couldn't make him do anything else. And here he sits gabbing away. I am amazed at what you got out of him." In point of fact, I had "gotten" nothing out of John's father. He gave me an earful when I asked him to tell me his view of the problem. "All we can get out of him is 'I don't know' or else absolute silence," his mother added. "Whenever I try to talk to him, it ends up in a battle. He goes to his room, slams the door and turns his music as loud as it will go. There is no communication between us. And here he sits and talks and talks (June 11, 1996).

I found this to be a typical break down in communication among many families where there is no listening between the care giver and the youth and vice versa. Taylor, for instance, said he felt "comfortable here (in care) and it's more of a home here than when I was living with my parents." When I asked, "Why is that?", he replied, "Because

people talk things over and not yell and scream at you and push you around and you know you don't get treated like a child but like an article, something to use. Like for anger to take out your anger and stuff" (6-4). Candice shared a similar experience. She was pleased to be here away from the "drinking, arguing and hitting". She said that it got to the point where nobody was talking to each other, just yelling and "here you guys listen to what we have to say."

I remember talking to Nadia about two months after she was placed in a more long term residential care setting. I asked her what kinds of memories she had from the R & A Home and she answered without a pause,

I remember a lot of good memories. I remember sitting outside, I would sing and make up songs and Alisa would play on the guitar and all the youth would play the spoons and the garbage cans. There are so many memories just sitting there and talking about life and what we were going through. (4-4)

I can look back and say that I do not remember the majority of the youth wanting to communicate. I noted that some individuals craved attention, wanting to be in the presence of staff, but I never identified the need for them to want to communicate. This study has helped me uncover a layer of communication that I had never seen before and encouraged me to look at the situation critically. It is

these stories revealed by youth expressing the need to communicate and the need to be listened to that offer insight and a better understanding which help improve the experiences of youth while in temporary residential care.

Reasons For Being in Care

Disrupted Family Relations

Broken family relationships for the most part identify one of main reasons for youth to be in care at the R & A Home. I often heard stories where parents remarried and the children were never accepted by the new spouse. Taylor, for instance, was taken in by his grandparents several years ago when his father passed away and his mother remarried. During our conversation Taylor stated,

my step dad and I never really connected from the beginning, it was like I was always in their way. My grandma in B.C. decided to look after me until I became a teenager. Then my grandfather didn't really want me to stay there. My grandma did, but my grandfather didn't because he doesn't really like teenagers and stuff. He says that we're trouble. I never really did get along with him like I did with my grandma. One day I was put on a bus to come to Edmonton and I thought that I was going straight home and handle things with my parents but it didn't work like that you know, my social worker said you're going to a group home. I go like what? (6-2)

Carrie also came from a divorced family. She moved from her mother's place in B.C. to be with her father. She said:

I wanted to go to school and change my life around because I was involved with a lot of bad people in B.C., so I came here to get better" (10-3). But unfortunately, things did not work out the way she had anticipated and she ended up at an R & A Home. "My dad's girlfriend didn't like me. She made him kick me out. He picked his girlfriend over me and that didn't make me feel good because I just met him again for the first time in like eleven years and that didn't make me feel good but that's in the past " (10-3).

These are just a few examples illustrating that the lack of family acceptance by parents shattered a final hope for a better life in several young people I spoke to. It is evident here that the new partner in a broken family had difficulty accepting the already existing children. These children are often thought of as being a nuisance and interference in the new developing relationship (White, 1989). It is these situations that contribute to youth being the victims of our society.

Some of the youth experienced violence in the home. For example, Candice voluntarily left home with her sister Alexis. Alexis said she got into an argument with her

parents and decided that things at home were getting out of hand and unruly:

They (parents) were fighting and they were yelling at us saying that they were going to treat us like crap and that we don't deserve anything else. And, well, my mom drank like everyday, we want her to get better, so we went to my sister. (2-2)

It was often that Alexis and Candice experienced verbal and physical abuse. Because they both recognized that the family environment was not a healthy place for them, they chose to leave their home with hope that something would change. For them the R & A Home was just a temporary place until a few things were "fixed up".

Drugs and Alcohol

Some parents had taken advantage of the community program and used this as a break away from their children. Youth were put in a temporary home until parents were able to get some help for their children with the intention that there would be a positive change in their child's behaviour.

My mom wouldn't let me live at home because I was getting too bad, I was following my brothers foot steps so she said you would live in a group home for a couple of months to prove to me that you're going to change so I agreed with her, that's why I'm here. (9-2)

It was evident that the social pressures of drugs and alcohol among young teens was quite prevalent as their

stories evolved. In many instances, these pressures made family life very difficult. Matthew stated, that, "my mother didn't want me back at home because I kept smoking pot and not listening to her and doing what I wanted to do" (3-2). Matthew's mother was anticipating that by having him move away into a group home, he would get better and demonstrate more positive behaviour.

Sheila's mother sent her away for much the same reasons. According to Sheila, she was involved with "drugs, alcohol and bad kids" (9-2). Sheila's mother sent her to a R & A Home believing that this would give Sheila time to think about all the problems that were going on in her life. Also, this would give her an opportunity to prove to her mom that she was making an effort to change the situation. When I asked Sheila, "what does it mean that you have to change before you can go back home?" she said, "well stop doing drugs, uhm, listening to my mom and what she has to say, following her house rules, go to school, things like that" (9-2). When talking to Sheila it was clear that she was aware of what changes needed to occur as her mother had indicated that this was her final chance. "My mother gave me

two chances but I wrecked those, you know, I can't lose the respect for my mom any more" (9-4).

The R & A Home was also a place where teens went when their parents were struggling with various issues. Candice referred to the Receiving and Assessing Home as "just a place for us (her and her sister) to go until my mom and my dad, you know, get some help" (1-2). Candice's parents were struggling with a drug and alcohol addiction and the R & A Home provided Candice and her sister a place to live until their parents were able to receive appropriate support.

Physical Handicap

Tony's parents also used the R & A Home as a vehicle to make things better. Tony was a 14 year old boy who enjoyed reading, playing games and watching movies. He was adopted at an early age of two with a handicap. Tony was a child with a handicap, he was unable to see out of his left eye. During an interview, Tony, said that he came here because his parents were concerned that his "behaviour was getting extreme and they were worried that I would end up in jail and stuff, so they wanted me to go get some help" (8-2). According to Tony, he lied a lot and would often sneak around

the house. He also indicated that he had difficulty staying out of trouble while at school.

It was apparent that in some cases parents needed a short break away from their children due to their youth's involvement with drugs, alcohol and misbehaviour. It was evident that Matthew, Sheila and Tony clearly knew what problems existed and what needed to be changed in order for them to return home. However, when I asked what steps were involved to change their situation, concrete ideas were difficult for them to identify. Matthew for instance, was quite proud that he had refrained from alcohol since he had been on probation. He believed that because he has abstained from drinking alcohol for the past 2 months he had changed, but when I asked him the following question: "What would be an ideal recreation outing?" he stated, "if I was at home, I would probably go out with my friends, I, probably, would smoke pot or do something like that" (3-5). Sheila said she was ready to go back home and that 3 months to be away from home was long enough. However, just a few days after stating she was ready to go home Sheila ran away from the R & A Home and neither her mother nor the R & A Home had heard from Sheila for 6 days.

It was my understanding that youth were able to identify their problems and recognized the need for change, but they were not clear on how to address this change nor did they have the support network to assist them through the change. Hence, they were not able to commit to long term change in their lives. Some youth demonstrated change while in care, but often change was temporary, once youth were out on the streets they reverted back to their old habits. According to Nielsen (1986), change in behaviour requires self-control that begins by learning to set goals. She states that:

setting a goal is a tricky task that is critical to the success of self-control. Most people can quickly identify their aspirations. But people usually fail to achieve goals that are established in a moment of overzealous optimism: "I'll lose forty pounds!" "I'll stop smoking tomorrow." "I'll study twice as many hours every day." Youth should set goals slightly beyond their present performance. Goals should initially span short periods of time, perhaps only one class period. Youth must also learn to write their goals in behavioural terms, so that measuring progress is easy (Nielsen, 1982, p.162).

This observation holds true in my findings. For example, before Sheila could go home she needed to work on attending school, abstaining from drugs and alcohol and needed to find new friends. To work on all three issues at

once would have set Sheila up to fail. First, Sheila needed to identify what issue she would like to begin working on. If it was school, her first goal would be to attend two full days of classes in a row. If Sheila never did homework for school the first goal might be to spend 30 minutes in the next two days doing school work at home. As supported by Nielsen (1986) youth need weeks of practice and supervision to learn how to choose realistic goals and to express them behaviourally.

However, before Sheila or anyone else in the R & A Home can start setting goals and fulfilling these goals successfully, they must have her basic needs met. These needs are what Maslow refers to as a hierarchy of needs. The needs are placed on a hierarchy that must be partially satisfied before needs at the higher levels can be fulfilled. Maslow refers to these needs as: 1) physiological needs: hunger, thirst, etc. 2) moving forward towards safety needs: without feeling secure, safe and out of danger one can not move onto the next stage, 3) belongingness and love needs: to be close to others and feel accepted by their parents or caregivers, 4) then self esteem needs can be achieved 5) followed by the self-actualisation need that allows to move

toward fulfilment and development of full potential (White, 1989).

Most youth in the home are struggling to achieve the second level in Maslow's hierarchy of needs. Being in care is unfamiliar and unsettling for many youth. As indicated later on in the study youth do not feel safe in the home. Some youth feel physically threatened by other youth. In addition, youth in the home do not feel loved by the people around them nor do they feel that they have a sense of belonging. Many youth express anger and feel abandoned by their parents or caregivers for putting them into care. And thus, have not achieved Maslow's second level of safety

The Need to be Home

Regardless of what the situation was like at their real home, most youth would rather be there. Only two youth I spoke to told me that returning back to their homes was not in their short or long term plans. In a conversation with Matthew he stated, in every other sentence that he wanted to be home. I asked what it is like for him to be here at a R & A Home? Matthew responded, "it's okay but I still want to go home" (3-3). Alexis, coming from a alcoholic abusive family said "I would rather be at home but this is a good place to

stay for now" (2-4). Taylor, who had been rejected by his step-father, wished he could go to "a home, a normal mom and dad home. I don't want to be stuck in the system for the rest of my life. Well, not my teenage life" (6-6). To the question "why was it important to live in a home?" Taylor replied,

Because, I didn't really grow up having a stable home. My parents were divorced when I was about three and half. I had seen my dad once before he died. He was murdered, so I haven't had a dad for ten years now, about ten and a half. It's kinda awkward, cause my mom was always going out with different guys so you grew up like with different guys, living in the home and stuff. And people always saying, do you want to marry, to my mom it's kinda weird then she did marry my step dad who is the wrong person for her. I know a lot of people who think he is the wrong person for her. So I haven't had role models for a very long time. (6-6)

Carrie said she did not mind living in this particular group home because "it feels more like a home than just like a place to stay... we act like a family" (10-3). When I asked her what does it mean "we act like a family?" "Just the way we act around each other, we're all close", she responded.

Everyone had their own ideal image when they referred to the meaning of home. For some, it was to go back to live with their mothers, for others it referred to a place where there is a mom and a dad, and yet for others it included a

place where people acted like "a family". The ideal image of a home perceived by youth reflected individual life experiences. In many cases, youth's disruptive home life lacked the appropriate role models in order for individuals to experience healthy human growth. Considering the social environment the youth come from, we as counsellors in residential homes should consider taking an active role in recreating the family concept in order to meet the basic needs of individuals and provide appropriate role models.

A Strange Environment

"It's a weird and it's a scary experience" was the most common way youth described their initial arrival into residential care. Matthew said when he first arrived, " it was weird, actually, it's like when you get here it is scary, but once you get to know everybody it's okay" (3-3). When I asked why is it scary, he said "because it's a place away from home and there is no place like home" (3-3).

The question I often found myself wondering about was, "What experiences were youth having when they first came into care? What were they feeling and what were they thinking when they first entered the door?" One day after listening to two young girls talk about how nervous and uncomfortable

they were when they arrived at the R & A Home, I asked what would have made them feel more comfortable. Their response was:

Sheila: Maybe if I knew what was going to happen to me, maybe it would be less stressful.

Sandi: If I met the rest of the kids when I first came. I spent my first two days in my room sleeping.

Carrie: I was first nervous, not knowing anybody, not knowing what they think of you, but they made me feel welcome.

Donna: Do some kind of activity that includes everyone, this gives a chance for everyone at home to meet each other. (July 7, 1996)

These feelings of nervousness and anxiety are added stresses to the individuals. In most cases youth have been severely traumatised prior to arriving at the R & A Home and an effort should be made to minimize any additional stresses. In some cases, youth are leaving home for the first time and others have experienced psychological and physical abuse. This led me to wonder how can the transition into residential care can be more amiable for youth? The R & A Home was transitional and it often became routine to have a high turnover rate among youth. Because of this, it is easy to get into a pattern of filling beds in the Home, maintaining quota

and continually seeing youth come and go. However, sensitivity towards youth as individuals should always remain a priority.

Good and Brophy (1994) state that providers and teachers need to be encouraged to take a proactive role in guiding and socializing troubled youth, especially those who lack other positive influences in their lives. Rather than just providing basic physiological needs such as food and shelter, care givers must be prepared to: 1) cultivate close personal relationships that go beyond acting in disciplinary/authoritative role, 2) considerable time is necessary in dealing with youth and their families, and perhaps even to be "on call" to those who have left the home and have no one else to turn to, 3) for youth who do not have families as an option for support, mentor volunteers should be found from the community to create these family like bonds. By addressing these needs, counsellors may help create a more comfortable environment for youth in the R & A Home.

Recreation

For the most part youth spoke favourably of recreational activities at the R & A Home. This was surprising to me, because during my time as a youth

counsellor I recalled having to coerce participation and even make outings mandatory on numerous occasions. At times it seemed that my colleague and I would exert great energy urging the residents to participate, but once we actually got to where we were going (i.e., Fort Edmonton Park) or engaged in an activity (i.e., swimming), the youth enjoyed it so much that they could not get enough of whatever they were doing which made it difficult leave when it was time to go home. I vividly remember, the day we decided that we were going at Fort Edmonton Park. There was nothing but constant complaining from the time youth found out that they were going there to the time that we had arrived at the Park. But, once we arrived at the Park the youth were so caught up with what was going on immediately around them that it was difficult to move on from one exhibit to another. I remember the time in the Penny Arcade room playing with the various games and dressing up, laughing and taking pictures in the costume room where they each had an opportunity to dress up in traditional early 1900's costumes.

Youth's initial lack of motivation to do recreational activity led me to several questions: does this reflect that among these youth there have been few recreational

opportunities in their past and these youth are not use to extra-curricular activities? Or do the youth lack the initial confidence of doing well in swimming, basketball, etc., but once they get started they do not find it to be all that difficult? Is it a power issue, do youth refrain from any activities where there are adults involved? Or perhaps, these activities are initiated by adults and are not of interest to youth?

Previously, youth complained about not having input in making recreational activity decisions. To amend the problem, a dry eraser board was hung on the kitchen wall for the residents to write any suggestions for future recreational outings. The board was hung in a location that was accessed by everyone on a daily basis. This gave youth the opportunity to share their interests with others and also gave them power to make decisions about activities they were going to get involved with. The most frequently suggested recreational outing from the youth was going to the movie theatre. It seemed as though, no matter how many rental videos they watch at the R & A Home that day, they could always find an interest to go to the movie theatre. Youth often requested to play pool at the local pool hall.

Swimming, basketball and working out at the gym were other youth favourites.

Even though a board was made accessible for youth's recreational suggestions, I found it to be blank with no suggestions most of the time. This led me to several questions: Do youth lack the motivation to engage in recreational activities? Are they not familiar with the different kinds of activities that are available to them? Or do they lack the skill of taking on the initiative in making decisions such as going swimming? Or is it hard to get momentum when you are traumatised and depressed? How many adults have the get-up-and-go attitude when they are feeling sick or sad? I believe it is important to recognize and keep in mind that many of these children who have arrived in the home have been traumatically affected psychologically and or physically. Often these youth have left their families for the first time either on their own accord or their parents have been unable to care for their child and turned them over to social services. In some cases, youth have been removed by social services from their home due to physical or sexual abuse by their parents/caregivers. Youth are coping with many different personal experiences while in the R & A Home.

In order for youth to be motivated and engaged in meaningful recreational activities, consideration should be given to the current state of the individual. The get-up-and-go attitude generally requires a person to be healthy psychologically and physically. This is not the case for individuals who come into care at the R & A Home.

Effects of Television

Television plays a significant role in the lives and socialisation patterns of youth. Children are estimated to watch television on average up to four hours daily, and by the time one reaches 18 years of age, they have spent over two years of their lives in front of the television (Hearold, 1986). These are alarming statistics as youth who are in care at the R & A Home would appear to fit into the estimated statistics.

Because the R & A Home was a temporary environment for youth, they were provided with minimal treatment with an insignificant amount of funding allocated for recreational activity. This made it challenging for youth counsellors to keep the residents busy. I found that youth were kept busy during the weekdays by either going to school, doing home school or looking for work. The times that concerned me were

the hour or two before quiet time (4:00 p.m.) and the hours preceding supper (6:00 p.m.). If no activity was planned by staff, youth were more than happy to play "Nintendo" video games or watch television until bedtime (10:00 p.m.). The weekends were also free time for youth. Those who had privileges to signout had the option of leaving, those who did not, went on home visits or remained at the residence. Recreational activities were planned on weekends: they usually ranged in time from three to six hours depending on the outing. What I found following the outing was that some youth spent the rest of the time viewing television or playing video games. When the number of hours were totalled, in some cases youth were viewing 20 or more hours per week of television in the home. Needless to say, these were alarming figures. Because the recreation room was located downstairs, the amount of time youth spent watching television was easily overlooked. During the day staff generally spent most of their time in the staff room talking to youth, doing paper work or in the kitchen and dining room area helping prepare meals. As a result, those youth who maintained a low profile and spent time in the recreation room downstairs

generally spent many hours watching television that went unnoticed by counsellors.

I found the number of hours spent watching television to be disturbing due to the very minimal human interaction that was going on among the youth. They were not exercising, playing with friends indoors or outdoors, nor were they involved in any hobbies. It was evident that television was being used as a primary source of diversion for entertainment, knowledge and basic information. Without ever leaving the couch youth were being stimulated, entertained, horrified or intrigued. However, they did not need to respond or interact with the material, they did not have to analyse or criticise it and they did not have to remember anything about it (Van Evra, 1990). Most youth came to the R & A Home from unstable environments during very impressionable years of their lives where attitudes, beliefs and ideas about the world are being developed and nurtured. This made me wonder about the impact that television was making on the many youth, who spent extensive hours watching it.

Violence

Violence played a paramount role and had major impact on youth's lives. I found violence to be a common conversational theme around the dinner table, when going to the video store to select movies and in just normal day to day peer interaction at the R & A Home.

One evening at the dinner table Francis was entertaining the rest of the kids in the house with a story about the time he went paint balling while on a home visit.

Paint balling is awesome, you should have seen, I hit my brother four times in the head, in the arm and in the leg. My brother is really good too, he got me in the arm that's why I have this big bruise (March 3, 1996).

Francis appeared to be quite intrigued with his paint balling activity, I often wonder how he was able to separate the game from reality. Especially, when just prior to his paint ball expedition, he was involved in a criminal offence chasing a younger resident in a dark recreation room with a metal rod saying "I'm going to get you" (February 12, 1996).

On another occasion, I had taken the residents to the video store and Rick had explained to his peers and staff, "when I go home for the weekend I spend nearly my entire time watching restricted movies: "Menace to Society", "Higher

Learning" and a few other restricted movies (February 17, 1996). He replied by saying that "watching movies here at the group home was boring because we can't rent violent restricted movies" (February 17, 1996). It was also interesting to observe youth when we went to the video store, to see what kinds of movies appealed to them. Almost every time, they headed for violent and restricted rated movies and tried to plead with me explaining why they should be able to watch these movies.

I repeatedly had struggled with violent television and movies being viewed in the R & A Home. Many researchers (e.i., Leifer et al., 1974; Murray, 1984) have argued that viewing violence does influence a child's values, attitudes and behavior, and that it is associated with increased aggression under certain circumstances. Other researchers (i.e., Cook, Kendzierski, and Thomas, 1983) have argued that there is less consistency in results regarding claims about television violence and aggression and suggest that biases may have inflated estimates in the past. They argue that television's role is likely small compared to other socialization factors. Freedman (1984) concluded that there was a small, but consistent positive relationship between

viewing violence and behaving aggressively, but there is little evidence, at least so far, that viewing violent programs in natural settings or over the long term causes individuals to become more aggressive.

In the above mentioned research it appears that there is no clear relationship between television violence and violence among youth. However, from my experience, I would argue this point. There had been no lack of violence in the R & A Home and perhaps there should be sensitivity expressed to youth who are exposed to violent environments and engaged in frequent violent television viewing. Frequently, when youth did not get their way, they expressed anger by throwing furniture around their bedrooms, breaking windows in their bedrooms, physically beating up staff and spitting on them, disconnecting and breaking smoke detectors in their bedroom and punching holes in the wall. One afternoon while the kids were doing home school at the kitchen table, Jon had difficulty concentrating on his school work and was being disruptive to another resident who was attempting to do work. As a result, Jon was sent to his room until he was ready to come back and focus on his school work. Jon not only had difficulty following through with staff's direction, but when

he did go to his room he repeatedly slammed his door for a period of three minutes and then he came out of his room and began shaking the stairway railing until it broke.

Some youths' behavior concerned me and made me wonder if some individuals were able to distinguish between reality that they live in and the fantasy which was created by watching movies and playing video games. I remember the time when Steven just finished watching a Bruce Lee video and no matter where I saw him he was shadow boxing (mimicking Bruce Lee). He would follow people around the house and box with them. He would box people from the front and often would box people from behind when they did not even know he was there. When I asked him, what he was doing he said?, "I'm shadow boxing, I pretending to be like Bruce Lee"(July 20, 1996). Joel also displayed similar behavioural patterns when watching violence on television. I'm would often catch Joel practising different fighting techniques in the living room based on the street fighting he was viewing on television. I even found him practising in his bedroom. Youth who lacked being raised with a set of defined morals and values were highly impressionable to their immediate surroundings. Because youth spent a great deal of time watching television

in the R & A Home, they were highly influenced by television. They used fictitious television characters as role models and often displayed similar patterns of what they observed on the television.

Feeling Safe in the Home

Theft

Safety in the home was also an issue that was raised in many forms. Fearing for his life was a concern for Joel. For the most part of his stay in the home, Joel was the smallest and the youngest boy in the home. He was a 12 year old boy approximately four foot tall and weighed 60 pounds. When the R & A Home received older and bigger boys they tended to pick on Joel. In one instance Joel came running up the stairs and into the staff office saying:

I can't stay here anymore, I have to get out, it is too dangerous for me. I'll AWOL if I have to. Can you call someone to get me outta here? They (Rod and Francis) were waving the silver pipe and smacking the couch and they were looking for me. I got myself to the door and ran upstairs. And they kept saying, we're going to get you (February 12, 1996).

Joel was so frightened he was willing to do anything to remove himself from his unsafe environment.

Grace said she did not feel safe in the home because someone stole five dollars from her purse that she received for allowance. She received allowance in the morning and the next thing she knew, the money was gone from her wallet that was left in her room. Grace accused a peer who she saw hanging around her bedroom door. Unfortunately, the money issue was never resolved. This was just one example where stealing was a major concern for the youth in the home. At times, youth had items disappear from their rooms two to three times a week and many youth expressed concerns of being violated. Theft occurred in cycles, it was either a daily concern for everyone in the R & A Home or weeks went by and theft was not an issue. The staff intervened by putting lockers in the main floor hallway. This provided each resident to lock up any valuables they owned. Unfortunately, this was only part of a solution to theft in the home. Firstly, the lockers were not big enough and the youth were not able to put large valuable items in the lockers. Secondly, youth were not use to utilizing lockers to store their belongings. Lockers were not located close to their rooms and some youth found it inconvenient to make full use of them.

Recollections of Home Living vs. R & A Home

Candice, on the other hand, while in the R & A Home, felt really safe and relieved to be in care. In her interview with me she indicated:

Orysia: How do you feel right now?

Candice: I feel really comfortable here, and I feel like safe. You know like I didn't feel safe in my home and now I don't wake up wondering if I'm going to be here, the next day or if I'm going to be thrown on the streets or something.

Orysia: What makes you feel safe?

Candice: I don't know, just nobody is drinking or nothing. You guys don't lose your temper or don't hit anyone. If we have a temper tantrum we just go to our rooms and it's not like you guys start yelling or anything. And it's the kids that are here too. You feel pretty safe in a place with a whole bunch of people there.

Orysia: What does it mean that we don't yell at you?

Candice: You just send us to our room or tell us to go calm down instead of losing control. You tell us to sit down and watch TV and calm down or go to your room and read a book. (1-2)

Jamie found her recollections of living at her parents' house to be quite disturbing. She recalled:

when I started to physically develop my father started to approach me. I would stay out as late as possible at my friend's place in order to avoid seeing him. I would come home late at night and

sneak into my room so he (father) wouldn't hear me. This way I would just go to sleep, but if he was up or he if he heard me come into the house he would meet me in my room and wanted to have sex with me (April 7, 1996).

At the time of being sexually abused, Jamie did not feel safe in her home and made every attempt to avoid having a sexual relationship with her father; however, she was not able to permanently leave home. Her commitment and obedience to authority and her expectable wish to please her father combined with fear, guilt and confusion led to her being continually abused. Eventually, Jamie established trusting relationships at the R & A Home where she was able to share some of her experiences with the counsellors. For Jamie, living at the R & A Home gave her a sense of security because she knew she was no longer going to be sexually abused by her father.

There were different levels of safety identified in the home. Safety reflected the experiences of individuals and because every youth's experience was an individual experience it is important to recognize the varying degrees of safety that are required in the home.

Some researchers found that a sense of security among youth can reduce the risk factor of developmental

difficulties. Werner & Smith (1982) identified the following circumstances that help nurture an individual to become healthy and wholesome:

- 1) There were four or fewer children in the family.
- 2) Alternate caretakers were available to the mother within the household (father, grandparents or older siblings).
- 3) The workload of the mother, including employment outside the home, was not excessively heavy.
- 4) The child had a substantial amount of caretaker attention during infancy.
- 5) A sibling was available as a caretaker or confidant during childhood.
- 6) During adolescence, the family provided structure and rules.
- 7) The family was cohesive.
- 8) The cumulative number of chronic stressful life events experienced during childhood and adolescence was not great. (p. 255)

Other researchers have found that children from poorer communities are more likely to develop into children at risk than are children from affluent communities (Rutter, 1987). The ecological circumstances in which children lived also made a significant difference in those who developed problems. Those who lived in poor inner-city neighbourhoods had significantly higher risk of developing a psychological

disorder than those who lived in relatively poor small towns or rural areas (Lavik, 1977).

House Rules

Rules in the R & A Home and approaches that staff took to deal with various situations helped shape and provide a sense of safety and security. The sense of safety and security among youth contributes to a healthy, secure and confident life. The first day youth arrived into care they were given an overview of how the home functioned along with the rules and expectations of each individual. From various conversations it appeared that some youth had difficulty understanding established rules in the home. For instance, Monica was upset she was not able to smoke after 10:00 p.m. curfew. She said, "what usually happens to me is if I get upset I usually go for a smoke and like if I got upset and I got a phone call at 10:01 p.m. and then I got really upset and wasn't allowed to go for a smoke I would be pretty mad and would make matters just worse" (7-7). When I asked Monica "why do you think that you have to stop smoking at those specified times, she replied, by saying I have no idea" (7-7).

Carrie also appeared quite confused and frustrated with house smoking rules,

I think we should either have smoking privileges or not have smoking privileges. I think taking them away and giving them back is just stupid, we either have them or we don't. They make you hand in your cigarettes. I don't like that, I accidentally left matches in my pocket and I forgot about them and got my smoking privileges taken away for twenty four hours (10-8).

Carrie had difficulty understanding the meaning behind rules and differentiating between rules and privileges in the house. First, Carrie failed to understand that smoking was a privilege and not something that was owed to them. And secondly, it could be taken away depending on whether or not they earned the privilege. When I asked if she understood why cigarettes and matches were handed in to the staff office upon entering the home, she said "I'm not going to smoke in here, I'm not going to set my room on fire, I'm not going to set my hair on fire" (10-8). Carrie believed rules to be personally directed towards her and failed to understand that these were rules applied to everyone.

It became evident to me that although youth were aware of the house rules and had signed a form that stated they had read the house rules upon placement into the home, they had

difficulty abiding by the rules. Many individuals in the home found rules to be confusing and unclear. For instance, explaining to Carrie that having cigarettes and matches in their possession while in the home is a fire hazard was not acceptable. She believed that she was mature and responsible enough to have control of her own cigarettes at all times. In this situation, Carrie believed that having no cigarettes in her possession while in the home was an unfair personal attack.

In addition to unclear rules, many youth expressed preference to determine their own loss of privileges when breaking rules in the house. For example, one evening Nadia was 10 minutes late returning home from her signout and was punished. Her consequence was having phone privileges and signouts removed for the next day. However, she believed that a more reasonable consequence for coming home late would be, "when you're ten minutes late, you come home twenty minutes earlier the next day, multiply the time you are late by two and that's the amount of time you come in early the next day. (4-5). Alexis also grieved when she was reprimanded for inappropriate behavior, she did not believe that if "one person does one thing bad like what happened at

the dinner table before, then we all lose money and I don't think that's fair. Why can't we just figure out the problem ourselves" (2-7).

Having set rules and consequences establishes a controlling and compliant environment, however, allowing youth to be involved in the decision making process such as setting their own bedtime and their own consequence for not following through on bedtimes provides them with a sense of control over their lives. This sense of control in their lives gives the youth responsibility to identify how they want to live in the home and also makes them accountable for the decision they choose to make.

Kohn (1996) emphasises the importance of handing over the power to youth instead of having them rely on adults for truth and values. Those who order individuals around and have youth comply to a restrictive set of rules do not encourage youth to take responsibility over their own behavior, we must first give them responsibility. As Constance Kamii (1991) has written,

We cannot expect children to accept ready-made values and truths all the way through school, and then suddenly have them make choices in adulthood. Likewise, we cannot expect them to be manipulated with reward and punishment, and to have the courage of a Martin Luther King in adulthood. (p.398)

The importance of choice is what creates our society and our democracy. Research studies support this view. Students who are able to participate in making decisions at home and in the schools are more committed to decision making and democracy in other contexts (D'Amico 1980, Battistoni 1985, Angell 1991).

Consequences

Discipline was another recurring and interesting theme that emerged continually throughout our conversations. Some residents believed that discipline by staff was fair, while others perceived great unfairness. I was surprised to learn in several discussions about specific incidents and their effects on the youth. What had appeared to me to be a trivial event turned out to be a traumatic experience for others.

I remember when Alexis said to me, "I don't think it's fair when one person does one thing bad like what happened at the dinner table before, then we all lose money and I don't think that's fair" (2-6). When I asked her what exactly she was referring to she said,

Uhm, well, I didn't see it but people like Candice said that the kids were putting things in each other's drinks and then we had to drink each others' drinks. Grace put a whole bunch of stuff in Candice's water and like instead of drinking it she just put it in a bowl too,

and the staff were asking us who did it and weren't letting us leave until we told who did it and then we all lost a buck because we didn't say who did it and I didn't even see it happen. (2-7)

Loosing a dollar was a tragic experience for Alexis. She did not believe that everyone including herself should have been punished. Alexis had suggested that more effort should have been made to determine who was involved instead of punishing the entire table. Alexis also added that kids should determine their own consequences and perhaps in this instance, everyone sitting at the table should have had more of an opportunity to discuss the incident.

This was a positive learning experience for me. I found that I did not take the time to listen and understand the conversation that was occurring around the table. In the future, a more conscious effort should be made regarding how youth feel and what may seem trivial to me may not necessarily seem trivial to everyone else especially those being reprimanded.

Nadia vividly recalled the evening she was punished for being ten minutes late,

I was late for like ten minutes one day and I was totally like in all this trouble, it was like I tried to kill someone. It was like holy cow, the biggest mistake I ever done...I was punished by not being allowed to use the phone all day and I could not go out at all so I

wouldn't be able to sleep over at my friend's house. (4-3)

Further into my conversation with Nadia I found out she was depressed that evening because she got into an argument with her boyfriend and her loss of privileges just "topped everything off", as she put it. Nadia believed her loss of phone privileges and signouts for the next day were unreasonable.

While some residents struggled with rules and consequences in the home, others had no problems complying. Sheila and Alicia believed the R & A house rules to be fair and equitable. They said that the rules were pretty much the same as what was expected from homes they previously came from and did not find any difficulty following through with them.

Drugs, Alcohol and Youth

Current research trends show that:

The patterns of use and abuse of chemicals in adolescents have changed remarkably in recent years and continue to change. The chemicals presently in use are stronger and more readily available than they were only 5 years ago. Not only are more children presently involved, but involvement is heavier and occurring at younger ages. (Macdonald, 1989)

Among many of the residents in the R & A Home, drugs and alcohol were very serious concerns. Youth openly acknowledge their use and addiction problems to drugs and alcohol. During a group discussion with Carrie, Matthew and Monica, I asked them why they did drugs,

Carrie: I smoke drugs because it gives me something to do, maybe forget about what's going on around me. I like to be around my friends and my friends do it. I just met a bunch of bad people, and I started doing drugs and illegal things, drinking smoking and a lot of stuff.

Matthew: I like it, it's fun. I get a high and it makes me feel good.

Monica: My friends do it, it's just the thing we do. When I get mad at my mom or have some problem I like to have a smoke and even some drugs, if I have some. (July 20, 1996).

It was evident that among the youth there were different patterns of drug use. Carrie began smoking drugs approximately six months ago and eventually became fully dependent on chemical agents. Matthew has been actively using drugs for a couple of years now and prior to his charge he smoked pot regularly almost to the point of excess. And Monica's drug consumption tends to be influenced by the presence of her peers and availability of money. These different patterns in drug use are supported by the findings

of American Drug Association division (Wilford, 1984): 1) drug experimentation where the individual is curious and testing what is available or experimenting based on peer pressure, 2) drug use which is divided into a recreational category and a regular use category, 3) drug abuse, and 4) drug dependency where the individual is controlled and driven by the drug.

Comparing, competing, testing, experimenting, looking for thrills, peer pressure and rejecting parental advice and instructions have always been a normal part of teenage life. However, it is normal adolescent behavior and developmental immaturity that makes youth more at risk. Accordingly those who have inappropriate attitudes and lack coping skills are even more susceptible to dependence on drugs and alcohol.

When I asked how they financially supported their drug and alcohol habits, I received the following responses:

Matthew: I get it from my mom or my dad. They don't know I get drugs though. Sometimes I sell my stuff to get money to buy drugs and sometimes my friends have money. I pawned my brother guitar once. And steal.

Carrie: I normally pan handle when I'm on the street. Or I get money from my dad for smokes and then spend it on drugs. When I was living at home I would also steal from home. I would steal mouth wash and even cleaning stuff to get high.

Monica: I would get it from friends or people I would meet. (July 20,1996)

For Matthew and Carrie shortage of money was not a deterrent to purchase drugs. They developed their own creative ways of accessing money where nothing was going to get in the way. Getting money from parents, stealing, pawning and panning was just a regular way of doing business. Not only was their money to support the drug habit, but also drugs were readily available on the street, "there were certain people we would go to and they usually had the stuff, it's never a problem (10-3)".

Further into our conversation, while discussing drug use, I discovered that two of them denied having a drug addiction problem,

Orysia : Would you say that you are addicted to drugs and alcohol?

Monica: No, I wouldn't say that. I haven't used drugs for a while. Not since the last time I left here and didn't come back.

Matthew: Uhh, I don't think so. I mean it was getting bad but I haven't touched anything since I've been on probation. Because if I breach my probation order I go back to secure (treatment). I've been clean since I've came here.

Carrie: Yah, I was. I wouldn't say that I am now but I was. I went to a drug center to get better. (July 20, 1996)

While discussing their future involvement with drugs, I was intrigued to find out that drug use was very much a reality in their life,

Orysia: Would you do smoke drugs or drink alcohol again?

Matthew: Yah probably, but not until I'm off probation.

Monica: Yah (laugh). Why not.

Carrie: I don't know (July 20, 1996).

It was evident that drugs continued to play a central role in Monica's, Carrie's and Matthew's lives. Neither Monica and Carrie had a strong position opposing drugs and if given the opportunity they would probably involve themselves with drugs. And although, there were several issues to deter Matthew from drugs, such as his drug trafficking charges, his restricted probation order stating to refrain from drugs and alcohol and his mother refusing to take him back home until his behavior changed, drugs continued to be an active reality in Matthew's life.

Matthew even refused to attend his drug addiction counseling appointment. When he was encouraged to attend he

said, "it's boring and I don't need it anymore, I don't do drugs. I haven't done them in a long time" (July 19, 1996). However, in a later conversation Matthew stated, "I would rather be at home with my friends, probably smoking pot or do something like that" (3-5). According to Alcoholics Anonymous (Macdonald, 1989),

a person has to hit bottom before he can be motivated sufficiently to seek recovery. If we are willing to wait for children to hit bottom and voluntarily accept treatment, we should be aware of some unpleasant possibilities. Death by suicide, accidents, or homicide is a real one. (p.196)

The ability for youth to make judgements based on positive values and morals prepares youth to make good choices such as saying "no" to illegal substances such as drugs and alcohol. Piaget (Dusek, 1991) believes that making ethical judgements is not a well developed skill in early adolescence. Protecting the adolescent until this skill is acquired may enable the individual to make appropriate and informed decisions. Professionals in the field identified youth with seven particular needs to be met which help reduce risk factors among teenagers. These included (Macdonald, 1989): 1) increased respect from adult; 2) more time and involvement with adults; 3) more constructive opportunities

to experiment with life; 4) more help in developing social competence; 5) better qualified adult youth leaders; 6) more opportunities for moral development; and 7) help in finding the meaning of life (p.119).

Using these guidelines may help decrease drug use among teens as, virtually all alcoholics and drug addicts begin their use as adolescents. Hence, society has every reason to be alarmed and to take appropriate action on this issue (Macdonald, 1989).

Defiant Behavior and Power Relations

One of the most common themes that continued to recur throughout my research was defiance among youth. Struggles between older youth exerting power and control over younger youth and youth refusing to listen to staff's directions and refusing to follow house rules were just a few examples. One Saturday evening, Jamie decided that she wanted to go for an overnight visit to her boyfriend Adam's place. The problem with Jaime's last minute decision was that these arrangements were supposed to be made prior to the weekend and not an hour before she wanted to go on the visit. After reminding Jamie that she was not following proper procedures, she insisted by saying, "But I want to go , I am going anyway. You guys never

let us do anything. I hate this place..." Although Jamie was well aware of weekend signout procedures she was insistent on doing what she wanted to do at that time.

Tim, on the other hand, insisted on getting involved with other peers' business. Tim was advised by another staff member to stay out of the conversation that was between myself and Jen: "I am not talking to you Tim. If you wish to discuss the situation we can discuss it later, in the meantime I am speaking to Jen and you need to mind your own business." Tim continued to interfere and was eventually told to go to his room, but he replied by saying, "No, I'm not going to my room." Tim was willing to support his peer regardless of the consequence he was going to receive for not staying out of other peoples personal business.

Power relations were also found to be prevalent among the youth in the R & A Home. When Steven and Joel were residing in the house, they were repeatedly picked on by the older male residents. Most often this was kept a secret from the counsellors, but on occasion it would surface. An example was, the week Steven's room was "trashed". Everyday, for almost a week, Steven would return home to find his room destroyed, he found his after shave cologne dumped on his

pillow, toilet paper all over his room, some of his toys were broken and his bed sheets all over his room. Joel also was picked on by his peers, he was often physically beaten and had his personal belongings stolen from his room. Joel's room was located on the main level, away from the rest of the boys, as staff did not feel that it was safe for him to be downstairs. There was definitely a pecking order where the physically and verbally strong individuals took advantage of the weaker individuals, however, this was not to say that Steven and Joel did not do anything to instigate this behavior.

A Vision for the Future

Plans for Schooling

When I asked youth about their future, there seemed to be a consensus on finishing their high school education, having a family and working. Alicia said she would like to finish high school, but she failed grade 8 twice and is now two years behind. She also told me that she failed a third time, but they passed her on to grade 9 with a 29.5% overall average. When I asked her what plans she had for this year she replied:

When I go to a new school I try hard to make friends and don't pay attention to school. Then I end up being like the popular kid then I have to fool around and stuff

like that. But I am not going to worry so much about friends and then just get my work done and pass grade nine. (5-6)

Alicia had a clear vision for the upcoming school year, "I have to study, pay attention and do my homework" (5-6).

It was interesting to hear that most youth valued and recognized the importance of education, but many struggled to get through the system. Many youth while in care, were suspended from school and others were doing home school. There were times where six out of eight youth in the R & A Home were suspended from school. Reasons for suspension included poor attendance, behavior problems in the classroom and on school grounds and vandalism. We even had situations where every school in the Edmonton area would refuse to accept youth who resided in the R & A Home. For instance, Joel was suspended from a school down the street. He had broken school windows, spray painted the outside doors and windows and displayed aggressive behaviours toward other peers in the classroom. Joel was informed by the principal not to return on school property ever again.

I vividly recall those mornings trying to get Steven and Matthew out of bed for school. Matthew, who eventually was expelled from school, attended less than 50 percent of

his classes this past school year. He said that he spent most of his time planning where he was going to be hanging out next. When I asked him why he wasn't attending school he said, "I'm bored, I hate going to classes" (3-2). Matthew was a very bright child with many talents, one of them being musically gifted. Matthew found school not to be challenging and had difficulties learning in a traditional classroom environment. He indicated that he enjoyed learning at his own pace but often complained about not being stimulated in a classroom environment. Perhaps Matthew would have been more successful in a less structured environment where he was able to learn and challenge himself at his own pace. Colangelo (Nielson, 1982) indicated, "the general consensus is that many gifted adolescents are unmotivated and disruptive in school because they are not receiving a curriculum that meets their special needs. Gifted students need freedom to learn at their own rate" (p. 123). Matthew was one of those youth who would of benefited in having his own space to learn and develop.

A longitudinal 'Youth in Transition' project, conducted at the Institute for Social Research at the University of Michigan, found that family background factors and their ability were related to educational attainment (Macdonald,

1989). It was noted that those most likely to finish high school and enter college were from families with higher socio-economic standing, were more likely to come from intact homes, and had smaller family sizes. Individuals who dropped out of school had lower intelligence, poorer vocabulary and poorer reading abilities. Other reasons for dropping out of school included little intellectual stimulation and encouragement at home, desire for freedom, getting married, a need to earn money, wanting to get a job and needing to help the family financially. Non-academic reasons for youth dropping out included lower self-esteem and being more often depressed than those who finish high school, while those who did not drop out had higher needs for self-development (Bachman et al., 1971).

Marriage and Family

Youth in the study often spoke of wanting to be married and working within 5 years. Things that were important to Taylor were, "getting married, having kids, basically having a decent life. Trying to get my kids to have the better things than in my life. You know getting a good job and taking responsibility for everything" (6-8). Monica also indicated that getting a job and being married was important

to her. When I followed up on what kind of work they would like to be doing nobody had yet decided. In some cases, there was no ideal vision for the future, but for others, there was interest in attaining a job and establishing a family.

Dusek (1991) identifies these future aspirations in relation to the self-concept. He defines the self-concept as a complex self-perception that changes as the individual develops from childhood through the adolescent years. He further states,

The self-concept, which changes gradually across the adolescent years, is influenced by a variety of factors. Parental child-rearing techniques that are warm, firm but not strict, and that make the child feel wanted promote good self-concept. Being overindulgent being too strict, and making the child feel unwanted foster poor self-concepts. Lower social-class children and adolescents have poorer self-concepts than their middle-class peers. This seems to reflect differences in parental child-rearing techniques as well as more general effects associated with the general social relations of those in the lower economic strata. Those who mature early tend to have more positive self-images than those who mature later, particularly among males. (p. 167)

Although youth generally demonstrates the characteristic of a poor self-concept, as counsellors it is important to assist youth in developing a more positive self-concept. The stronger the self-concept in the individual the

better adjusted psychologically. This also contributes to higher career aspirations and decreases the chances of youth being at risk. Hence, positive aspiring behavior among youth fares more successfully in the real world (Durzek, 1991).

Conclusion

While listening to the voices of youth and observing their daily interactions, I was able to gain valuable insights into experiences of the youth who were in care at the R & A Home. Youth were generally intrigued and interested to discuss their experiences in the home. Often, youth perceived that they did not have the opportunities to be heard in their real homes nor was this opportunity given in their "home" away from home. They spoke of how in many cases they were blamed for all existing problems in the family and rarely did anyone listen to what they had to say.

Youth gave many reasons for being in care. According to some youth, they came from divorced families where the new spouse was not open to having them around. Alexis and Candice came from two parent families. They perceived their parents' addiction to drugs and alcohol as a destructive force in their families which led to intolerable physical and verbal violence at home.

In other cases parents and children needed time away from each other. Parents believed that a break would give the necessary time to help sort out existing problems in the home. However, very often they found out that time alone did not resolve their problems. A combination of counseling where issues were dealt with and a time of physical separation was most beneficial for everyone involved. Needless to say, regardless of what situation youth came from, almost all wanted to eventually return back home.

This study has made me realize that a safe and secure environment is the most fundamental element that is needed to be addressed and fulfilled while a youth is residing in the R & A Home. The diverse and devastating experiences that youth bring with them to the R & A Home are insurmountable and it is only when the child feels safe that those trusting relationships are being formed. It is through these relationships that the traumatized youth begin to share their personal experiences. This sharing is the prerequisite to deal with rudimentary issues that contribute to youth being at risk.

There was an attempt to make a safe and secure environment in the R & A Home through rules and consequences that were enforced by staff. Some youth stated that rules were reasonable and fair while others expressed confusion and frustration. The youth have shown and told me that what counsellors may see as obvious, logical and reasonable rules may not be seen that way by youth. In many cases, youth did not agree to house rules because they did not have a full understanding of the meaning behind the rules. We need to understand that in order for youth to follow rules they need to understand the reasoning behind their existence. I found that when rules were explained to the children in terms that they were able to relate to, then these rules were more readily accepted by youth.

I also learned that youth in the study wanted to have some control and input over how they were going to be reprimanded for rules that were not followed. The R and A Home residents frequently indicated that they were not being fairly treated and wanted to have some choice in choosing the consequences.

As counsellors, we tend to focus on compliance, control and systematized environment within the R & A Home.

As a result, we often fail to recognize the diverse interests and the need for autonomy among youth. If youth are given the responsibility to make decisions that directly impact their lives they are made to feel that they have some control over themselves and thus are held accountable for their behavior. Autonomy requires responsibility and accountability for behavior and this differs from simple compliance whereby the objective is to control individuals (Kohn, 1996). In addition, autonomy gives the individual opportunity to develop confidence in decision making and it can also encourage youth to take initiatives in positive decision making regarding daily activities (Holmes, 1995).

Many youth in the R & A Home engaged in serious drug and alcohol abuse. In most cases, youth in the home got involved with drugs because they were experimenting with friends or because it made them feel good. Using recreational time in the R & A Home to support pro-social activities is imperative. Youth need to experience that having fun is more than just smoking drugs and hanging out at the mall. Activities that are non threatening but challenging are important elements in order for youth to have successful experiences.

My research has given me the opportunity to take a closer look at how youth spent their time in the R & A Home on a daily basis. I made a special effort to monitor the number of hours youth spent watching television and playing video games. I discovered that some youth in the R & A Home spent 20 or more hours of watching television a week. The room where youth spent most of their time watching television was located in the lower level of the house out of sight and sound of the main staff office. I found this to be a contributing factor to the many hours of overlooked television watching among youth.

This study demonstrates that violence was a common theme that centered around various activities and discussions among youth. In the presence of counsellors these discussions and behaviors were quickly discouraged and redirected. However, it intrigued me that when there was any opportunity for youth to be alone, their conversations would delve into some aspect of violence. I also found television to have influenced youths' violent behavior on many occasions. It was common to see youth modeling aggressive fighting techniques that they had seen on television, such as moves from kick boxing and street fighting.

Most importantly, youth had ambition and desire to succeed. The value of education was instilled among youth and there was the desire to complete their high school education even though many struggled academically, had poor attendance or were suspended from school. It is not difficult to understand high school dropouts when one thinks of the youth who is doing poorly in school, receives little encouragement at home and often in the principal's office because he or she is in trouble with teachers, administrators and peers. Additionally, he has to get out of bed every week day morning for nine months every year to do something they cannot tolerate. These are lived experiences of many in the R & A Home, however, it is important to recognise that youth do value the completion of a high school education. It is the frustration of getting through the school system that some youth experience to be an oppressive environment and therefore unable to succeed.

In addition to their quest for completing a high school education, youth also expressed a desire to work, be married and have a decent life. It is our responsibility as counsellors to provide youth with opportunities to make positive choices in order to assist them in creating

positive choices and achieving these goals. However, prior to providing positive choices it is essential that the most basic developmental needs are met. Brendtro and Long (1994) refer to these developmental needs as the four A's: 1) youth need the attachment with positive social bonds in order for prosocial behavior to occur. Continued negative peer influence will not promote prosocial behavior 2) youth need to set high achievement levels in order to avoid accepting failure 3) individuals given the autonomy to be responsible rather than obedient is true discipline 4) through altruism, helping others because they want to help not because they will personally benefit will lead to young people finding proof of their own self-worth. It is through fulfilling these four A's attachment, achievement, autonomy and altruism that opportunities for making positive choices and assisting youth in creating positive choices will have significant meaning. Meeting youths basic needs is the least they deserve!

Chapter Four

Personal Reflections and Interpretation

The time I spent with the youth at the Receiving and Assessing Home and the stories shared by youth have made a profound impact on my life as a professional youth counsellor. My experiences as a counsellor will never be the same. I no longer view these youth from the same set of perspectives as formerly held. I talk to them differently and I listen to them differently. I believe that my future interactions and my decisions as a counsellor will be more informed with the intention of always considering the perspective of youth.

I will never forget the voices of youth and the frustrations expressed about not being heard by their care givers. Jamie who said, "nobody believes me, nobody listens to me, my social worker doesn't believe me, my counsellor doesn't believe me." "My mom just keeps saying, 'Come home, we will find you another counsellor to help you through this.'" It was evident that Jamie did not need a counsellor, what she needed was for her voice to be heard, for someone to listen. If we take time to listen to their

stories and to look at the way things are viewed from a youth's perception, we then begin to understand the needs of youth. It is this understanding that will lead significant changes and the difference in life experiences for these children.

As I was coming to an end with my research, I was frequently asked about the outcome of my work. I found myself with not one or two solid answers, nor with a final conclusion, but rather with a better understanding and knowledge of youth who spend time in residential care. This understanding and knowledge that emerged from my findings had lead me to even more questions. Selltitz (1959) referred to this cultivation of questions as a continuing search for truth in which tentative answers lead to a refinement of the questions to which they apply. The quest for asking better and better questions is endless. Vidich and Bensman (1968) concluded that, "at best, (the researcher)...can feel that he has advanced his problem along an infinite path...there is no final solution" (p. 396).

Valuable insights gained from my research have led me to more questions and to a refocus of my ideas on

residential care. Important practical concerns are: Are the needs of youth being met in residential care? How can we as counsellors become more effective while housing youth in residential care? In a time of budget restraints where staff resources and material resources are limited, how can we become more efficient and effective with youth at risk in residential care? How can we provide youth with more than just a shelter, but with the right to opportunity that every child has? Are program objectives being met and are these objectives suitable or should they be reassessed?

One may wonder how applicable my research is when referring to other situations? I concur with Eisner (1991) that the readers will determine whether the research findings fit the situation in which they will work. Every situation is unique and if it is problematic then it must be looked at in terms of how it got that way and what can be done to improve it? On the other hand, I can offer some ideas and suggestions on how we can move forward to get a closer understanding of youth's lived experiences from their perception.

Recommendations

Based on my research with youth, I wish to propose the following recommendations to counsellors, parents, caregivers and those who are involved in designing and implementing short term residential care facilities.

First, I believe that youth have had little opportunity to express their voices while residing in the R & A Home. When youth arrived in their home they were told what to do, when to do it and how to do it, thus allowing very little room for youth to make decisions on their own. Providing opportunity for youth to take responsibility in the decision making process that involves their life directly gives them a sense of power and control over their environment that is necessary when facing daily challenges and making routine day-to-day decisions.

For example, youth should be able to have the opportunity to design some of their own house rules, such as the time they should wake up in the mornings the time they should go to sleep during the week and on weekends. In the event of breaking a house rule youth should have the opportunity to define or be assisted in defining their own enforced consequences. Youth should be given input on

developing their own system of privileges. As positive behavior in the R & A Home increases so do the number of privileges. If the privileges directly impact the individual it provides them with a more meaningful experience that relates to them personally.

Youth frequently complained about the lack of understanding of house rules. Often they are told about existing house rules, but in many instances they were new and unfamiliar to youth, thus making it difficult for youth to understand why they even exist. I found that when an effort was made to explain rules to youth in terms that they could relate to, then these rules were more readily accepted by the residents.

I would also recommend that this approach be taken by parents and care givers outside the Receiving and Assessing Home. It is important to take the opportunity to listen to your children and give them the power to make decisions that affect their lives. Youth have valuable information to share and when listened to, everyone can benefit.

Secondly, the need for a feeling of safety and security among youth is one of the most fundamental requirements to be fulfilled in the home. Youth generally

arrived at the home from very disruptive circumstances. Some individuals came from physically, verbally and sexually abusive environments which were brought with them to the R & A Home. Other youth frequently complained about not feeling safe in the home. Often, there were experiences of either theft that was occurring among residents. In some cases, smaller and younger residents were verbally or physically abused by the older and physically stronger youth. Safety in the home takes on many different forms and affects everyone individually, based on their past experiences.

In order for youth to progress and learn from their past life experiences they need to feel secure about themselves and others around them (Maslow, 1987). This theory argues against the cognitive-behavioral approach where therapists use the principles of antecedent events, reinforcement, modeling, identification, and internalization to explain maladaptive behavior and to set up the conditions for changing maladaptive behavior (Skinner, 1953; Bandura, 1977; Rosenthal and Zimmerman, 1978). The humanistic-existential approach is based on the premise that human beings have a strong need to grow, develop, and actualize to the fullness of their potential (Rogers, 1959, 1980).

However, growth requires movement forward beginning with Maslow's physiological needs and progressing upward through safety and security needs, belongingness and love needs, self-esteem needs, and finally, self-actualizing needs (White, 1989). Since residential care meets the basic physiological needs the next stage would be to fulfill the safety and security needs of youth. This could be accomplished by establishing trusting relationships with the counsellors in the R & A Home and volunteer mentors in the community where they are able to share and discuss their experiences. Through these trusting relationships youth will be able to grow and develop a wholesome lifestyle (Sebald, 1992).

In addition, it is important that counsellors take time to listen to youth and stay informed about youths' daily lives. It is important that youth share their past and present experiences with counsellors. Reading youth's history from files does not create the same type of relationship between the youth and the counsellor, when the youth opens up and offers to share their personal story with the counsellor. Creating these trusting relationships creates an opportunity for youth to discuss any

circumstances of personal safety being violated in the home by other youth. Once these basic relationships are established, youth can begin to deal with underlying issues that have troubled their lives.

Thirdly, recreational activity is an important element in shaping youth's personality, interests and skills. It provides opportunity to try new and different physical activities which can enhance youths coordination, agility and technique. It can be a historical learning experience and it can also be a learning experience on contemporary issues such as touring the parliament building and learning about current issues being discussed in politics. It is through these examples of recreational activity that youth can develop hobbies and interests that provide alternatives to their current street life. As Sheila indicated,

being in the home has been good for me because it has changed me by going to movies and doing all that other rec. stuff. It has made me think that this is a better way to have fun instead of going out and doing other things like drugs and hang out at malls. (9-6)

Providing different types of recreational opportunities for youth contributes to more positive choices in decision making among youth.

Many youth shared their stories of drug use and abuse. They became involved with drugs because they were bored and needed to be stimulated. As one individual put it, "it makes me feel good." Youth have time on their hands and they need to be given options on where to invest their time in order to make positive choices. I believe that our goal as counsellors should not be just to provide a roof over youth's heads, but to create an environment where they can be given opportunities to challenge themselves, learn, feel comfortable and confident. It is through these opportunities that individual can develop a positive self-concept which in turn can initiate positive aspiring adolescent behavior.

I would like to encourage youth counsellors to work more closely with parents, caregivers and mentors from the community in encouraging them to more actively participate in recreational activities with their children. These activities provide youth with alternatives to their current street life activities. I also suggest that because youth do not regularly recommend recreational outings, each week one youth be assigned to organizing an activity. Those youth who have limited ideas for outings should be supplied

with a list where they have the option to choose activities of their choice. In addition, to maintain a variety of activities, a recreational outing should not be repeated more than once during the month.

My fourth recommendation relates to television which plays an important role in youth's lives. Some youth spend 20 or more hours a week watching television and playing video games. I have noted that the actual number of hours that youth spend watching television is easily overlooked. In the Receiving and Assessing Home youth are limited to the amount of treatment and programming available and they have a lot of free time that contributes to watching television. In addition, the room with the television set was located in the R & A Home in an area that was not frequently accessed or monitored by staff. Thus, the amount of time youth spend watching television is not taken into account. And frequently the type of movies/shows and video games youth engage in are inappropriate for their age, because they illuminate violence and aggression.

It is important as caregivers and counsellors to assess the amount and the type of television being viewed. I believe that not only the type of rented movies should be

closely screened, but also the type of video games that youth bring into the home. Violent video games have an equally negative impact on youth's behavior as violent movies do. I learned that youth become absorbed in television watching when they are bored and have nothing else to occupy their time. It is our responsibility as counsellors to be creative with time and resources and encourage youth to participate in different types of activities. Creative programs can draw on skills of the staff, free community facilities and events and operate with donated equipment and adult volunteers. These activities do not require high financial budgets, but require enthusiasm and spontaneity that provide opportunities to learn lifetime recreational skills.

In addition to using free facilities and donated equipment, organizations that involve children at risk should consider more actively using volunteers from the community as a support network. Social Agencies need to hire adequate staff and make the work hours for counsellors on par with other full time jobs.

According to Statistics Canada (1996) children with no parent or single-mother families have a greater increased

risk of emotional and behavioral problems and academic and social difficulties compared with children from two-parent or extended families. In order to decrease the risk of youth being emotionally and behaviorally challenged, Brendtro and Long (1994) suggest that schools and social agencies should restore the sense of tribe⁸ based on additional staff and volunteers to mentor youth at risk. This extended support system could be used to meet basic human needs such as a "consistent, safe and loving environment" (Brendtro and Long, 1994). It is through these needs that the "attachments" of positive social relations occur and contribute to prosocial behavior among youth.

Fifthly, youth placed a great deal of importance on how rules and consequences were implemented in the home. Most often youth came into the R & A Home with rules and procedures already established. In some cases youth had difficulties understanding certain rules and when they were reprimanded for specific behavior they believed they were inappropriately treated. Youth frequently requested the opportunity to have input in setting rules and identifying consequences that affect their daily lives. A youth may

⁸ The phrase "sense of tribe" refers to an extended support network that exists among tribal communities.

continue to break house rules because first, they may not understand why the house rule exists, secondly, the consequence may have no bearing on his daily life experiences, or third, rules are imposed on youth and youth are resisting the authority. I believe that youth in the home should have the opportunity to meet as a group and regularly hold house meetings to discuss rules and share their ideas on how they believe the current living environment is meeting their needs. Youth should also have the opportunity to meet on an individual basis with counsellors to discuss and provide input on rules and consequences that appear to be challenging for them. For example, if youth have trouble following weekend curfew rules or smoking privileges they should have the ability to provide input into the rule-making process. Nelsen, Lott, & Glenn (1993) found "that the kids will either come up with the same rules [as the person in authority] or even tougher rules, but then they have ownership and you can label them 'We decided' instead of 'I decided'" (p.140).

Mary Watson (1995) indicates that when rules are constructed for children several implications arise:

Individuals are encouraged to perform a kind of calculation: Is the fun or personal gain of this violation worth the pain or personal loss I'll suffer

if I get caught? The [residential care facility] is seen as legal system in which one operates out of self-interest, making personal choices about one's behavior and experiencing the positive and negative consequences of such choices. In this case, the [facility] is not a moral agent, not a socializing agent it does not define the kind of community which the child is joining, but acts merely as an enforcer of an externally determined code of conduct, a code that is imposed on only some members: the [residents]. (p.124)

Kohn (1994) also believes that we need to go beyond rules because black and white rules memorized by youth elicits conformity and passive participants in society. To become ethical citizens, as opposed to people who merely do what they are told, individuals need to construct their own moral meaning. Giving them this opportunity to make decisions in the home, in the school and in society their opportunities to make choices are maximized and they may discover and learn for themselves enhancing their creative thinking.

Secondly, the authority figure becomes a police officer guarding and protecting rules that have been established. Watson explains this as a negative effect on the community:

If adults are the upholders of order, then whenever they are in the presence of children, they must be vigilant. They must be watching for violations...And most children will avoid the presence of adults for fear that they will be controlled or chastised. Such

an approach to discipline creates the very opposite of a caring community.

Therefore, providing choices and creating an environment that "we want to live in" not only makes it more pleasant for everyone but also prepares youth to make decisions regarding daily activities as they move on in life. Researchers also believe that providing choice contributes to building self-esteem. Kohn (1994) outlines that:

[individuals] do not come to believe they are important, valued, and capable just because they are told that this is so or made to recite it. On the other hand, they are even less likely to feel that way when they are compelled to follow directions all day. Students acquire a sense of significance from doing significant things from being active participants in their own education. (p. 282)

For these reasons, I believe that providing a certain degree of autonomy gives youth a sense of responsibility and accountability over their lives and their living environment. In addition, decision making opportunities play an important role in the formation of self-esteem, creative thinking and motivation among youth (Cole & Cole, 1989). All these elements combined play a critical role in

making their experiences more meaningful while residing in the R & A Home.

I believe the above recommendations can be beneficial to counsellors, caregivers and those implementing programs in order to provide meaningful and positive experiences that youth can take with them and utilize for a lifetime.

Implications for Further Study

Although this study has addressed various issues in residential care, it has raised a number of important issues that would warrant further study. The areas which require further research are indicated below.

- 1) More focus should be given on studies that address the basic needs youth have such as safety, security and belongingness.
- 2) More case studies are needed on the perception of youth who are in residential care, this will provide professionals in the field with a greater understanding of ways to improve programs.
- 3) Studies need to be conducted in order to identify how volunteer mentors from the community can be more actively recruited to help meet the basic needs of youth.

4) Youth between the ages of 12 to 17 years (sometimes as young as 11) resided the R & A Home. This age span has physiological and psychological implications on other youth residing in the home that need to be reviewed.

5) Residential care programs have long term impact on individuals. Therefore, more longitudinal studies could be conducted to determine the effects programs had and have on individuals.

Concluding Statement

The opportunity to listen to these youth and discuss their experiences as they lived it has been invaluable to me. I have not been able to put into words all of my new discoveries, however one of the most worthy outcomes of this study is the impact it has and will continue to have on my daily life. I have learned to listen and I have learned to look closely at what is being said by youth. I am more aware of the messages being delivered and I make a conscious effort to perceive through the eyes of the individual speaking. I can only hope and encourage other people who are involved with youth at risk to take the time to hear the story that they are living. To hear it and understand it

from their perception is what will make movement towards change in the future.

By listening to youth, I have been able to fulfill my research objectives. I have learned about the experiences youth had in the Receiving and Assessing Home. I have identified that as youth, they enjoy making decisions that directly impact their lives. This empowers them and gives them a sense of control. Youth enjoy communicating with counsellors and have been explicit in their need for attention and attachment. I have also identified that youth are generally interested in experiencing different types of recreational/social activities however, it is difficult to encourage participation when the mind and body are not healthy. Most youth in the R & A Home have been severely traumatized and do not have the get-up-and-go attitude of healthy individuals. Youth require their most basic needs addressed such as a safe and caring environment before youth can make positive choices in their lives.

I have also identified the significant role that violence plays in the R & A Home. Violent tendencies in daily activities among youth not only reflects parenting problems in the home but also reflects the amount and type

of television⁹ being viewed in the R & A Home. Television watching is a cheap source of entertainment. The amount of time youth spend in front of the television can be excessive. This should be closely assessed as it has been observed in the R & A Home that youth have a tendency to display patterns of behavior that they have learned from television.

The community also plays an important role for youth at risk. Youth are a part of our community and they are also the future of our community. It is my opinion, that if the community does not take an active role in addressing the basic needs of youth, our youth will be spending their adult years in prison. We need to create a community support network where volunteers/mentors from the community can assist in creating a "safe, loving and caring environment" (Brendtro and Long, 1995).

In addition, I have recognized that as counsellors, parents and caregivers we need to continue raising important questions such as: How can we better understand youth and their experiences? How can we provide a safe and secure environment for youth in which they can learn and develop to

⁹ Television viewing includes videos and video/nintendo games.

their fullest potential? What can we do as counsellors to stimulate youth and challenge their capabilities to their fullest potential? What can we do to encourage youth to participate in pro-social activities and behaviors? By addressing these types of questions we can begin to make a difference for youth at risk while residing in care.

This research study has provided me with tools to work with in my counseling sessions and my daily youth interactions. I now listen and try to understand. I hope always to hear the voice of youth when making decisions that impact their lives. I have been inspired to continue investigating and learning about the complexities of the human individual.

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