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“I Was Taken”

Rosalind D. Folman^a

^a Center for Adoption Research and Policy, University of Massachusetts Medical Center, Worcester, MA, USA

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ORIGINAL ARTICLES

“I Was Taken”: How Children Experience Removal from Their Parents Preliminary to Placement into Foster Care

Rosalind D. Folman

ABSTRACT. Little is known of how children experience removal from parents and placement into foster care. This paper presents results of a qualitative study of the experiences of 90 inner-city children, ages 8-14 years. Children’s narratives portray a progression of traumatizing events ensuing from the placement process. The narrative from a well-handled placement suggests guidelines for future interventions. Developmental and practice implications are discussed. *[Article copies available for a fee from The Haworth Document Delivery Service: 1-800-342-9678. E-mail address: getinfo@haworthpressinc.com]*

KEYWORDS. Foster children, placement, internal cognitions, coping, qualitative methodology, crisis, loss

Rosalind D. Folman is Associate Faculty at the Center for Adoption Research and Policy, University of Massachusetts Medical Center, Worcester, MA. Address correspondence to: Rosalind Folman, 225 Coolidge Avenue, #108, Watertown, MA 02472.

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Forty years ago, Littner (1956) wrote:

I would like to remind you of one of the greatest difficulties that we experience in the placement of a child—namely our problems about seeing things through his eyes, and adequately understanding and being sensitive to the real meaning of what he is trying to tell us through his verbal and non-verbal behavior. We can never effectively help a child unless we can understand his reactions to his past and his fears for his future. (p. 31)

Despite this call for learning about the child's experience of placement, only a few studies examine the events surrounding children's removal from their homes and placement into foster care (e.g., Johnson, Yoken & Voss, 1995; Kufeldt & Armstrong & Dorosh, 1989). Moreover, until recently, the child's perspective has been presented only indirectly through workers, foster parents and outside researchers (e.g., Fanshel and Shinn, 1978; Fein, Maluccio, & Kluger, 1990). The lack of information on how foster children experience removal is, therefore, a main obstacle to developing programs that assist them in coping with this traumatic event.

This paper will report on one part of a comprehensive study designed to allow foster children to talk about their inner worlds. The focus is on children's experiences surrounding their removal from their homes and placement into foster care, a topic which has been addressed by only a few studies (e.g., Johnson, Yoken & Voss, 1995; Kufeldt & Armstrong & Dorosh, 1989). In this article, the children's experiences of their removal from parents, which for them is a traumatic separation event, is interpreted within the context of attachment theory. Interviews with children allow us to identify those factors which, from the child's perspective, magnified, diminished or transformed the impact of the placement experience. The study will be described, selected findings will be presented and implications for clinical and policy issues will be discussed.

Background. Empirical research on children in foster care employs three types of informational resources to assess children's functioning in care. Each type of information resource has specific pitfalls and shortcomings.

First, the majority of reports of children's experience of foster care are based on case record information and relate to the child once in care (e.g., Thorpe, 1988; Pardeck, 1984; Proch & Howard, 1986; Fanshel, 1976; Gibson, Tracy & DeBord, 1984). They focus on system concerns, such as age at entry, replacement rates, re-entry rates, and length of time in care and the relationship between such systemic factors and outcome. Outcome in these studies is defined in terms of dispositional status or stability of foster home. However, neither dispositional status nor stability of foster home tells us much about children's adaptation to foster care or about the benefit to the child of placement into foster care (Triseliotis, 1989). Indeed, systemic stud-

ies have repeatedly demonstrated a lack of relationship between system factors and children's functioning while in care (Weinstein, 1960; Fanshel & Shinn, 1978) or later on in adulthood (Meier, 1965; Festinger, 1983; Zimmerman, 1982). Even in those research studies that have operationalized outcome in terms of children's level of functioning, most investigators have relied solely on information from case records (Stone & Stone, 1983; Lawder, Poulin, & Andrews, 1986).

Second, a small number of studies are based on caseworkers' ratings of children (e.g., Fanshel & Shinn, 1978), although many factors preclude accurate assessments by caseworkers. For example, caseworkers often have infrequent contacts with particular children because of excessive caseloads and high turnover rate, which undermine their ability to get to know the children they are rating. This is exacerbated insofar as children, fearful of alienating foster parents and caseworkers, hide their true feelings (Molin, 1988).

Third, in a handful of studies, foster parents provide information on the children's functioning in care (e.g., Sperr, 1975; Thomas, 1967; Walker, 1970; Fein, Maluccio, & Kluger, 1990). While foster parents are usually more familiar with the children than caseworkers, they, too, often rate the children after knowing them for a brief period (Hochstadt, Jaudes, Zimo, & Schacter, 1987). Also, aware of their past trauma, foster parents may interpret the children's behavior in a negative light: behaviors viewed as 'normal' in their own children are seen as 'problems' in foster children. This tendency to pathologize has also been suggested to occur in other studies of abused children (Black, Dubowitz, & Harrington, 1994).

The validity of the empirical literature is further weakened by the fact that the majority of studies aggregate results for foster children of all ages and lengths of time in care. Insofar as children in care are a heterogeneous population, with diverse backgrounds and experiences, the generalizability of the findings is undermined when individual differences are not recognized.

Furthermore, studies of what occurs only after the child is placed impose an artificial separation of the children's pre-placement lives from their fostering careers. In reality, those careers begin prior to placement, in the abusive and/or neglectful homes from which the children were removed. The parent-child attachment formed in the children's early years impacts on many areas of children's lives (Bowlby, 1969, 1973, 1980; Main, Kaplan & Cassidy, 1985; George & Main, 1979) and, thus, is likely to play a critical role in shaping how children experience and cope with separation from parents (Crittenden & Ainsworth, 1990; Eagle, 1994; Yarrow, 1964) and placement into foster care. The early parent-child relationship is a critical and pervasive determinant of children's interpretation of their experiences.

Internal working models. Attachment theory suggests that children develop, through their ongoing interactions with their environment, unconscious

working models of self and other (Bowlby, 1969, 1973, 1980). Thus, children who have experienced responsive care, thereby forming a secure attachment to their caregiver, internalize models of others as being available and of themselves as valuable, potent, and deserving of care. Conversely, children who have an unresponsive caregiver, resulting in an insecure attachment to their caregivers, develop a working model of others as uncaring, and a model of the self as not worthy of attention and comfort (Sroufe, 1986; Bretherton, 1985). Furthermore, research (Crittenden, 1992) indicates that stressful life events impinge upon these models. Hence, these models influence the meaning children give to situations, their perception of the environment as threatening or supportive, their ability to utilize the resources in the environment, the coping strategies available, and even the perception of whether or not the problems can be resolved. Therefore, a secure attachment serves as a protective function (Bowlby, 1973, 1980; Sroufe, & Fleeson, 1986), while an insecure attachment in infancy is likely to predispose the child to react adversely to later stressful experiences. Studies of maltreated children indicate that two-thirds are identified as insecurely attached (Egeland & Sroufe, 1981; Schneider-Rosen & Cicchetti, 1984). Thus, the majority of children entering care are already doing so with a model of adults as uncaring and not trustworthy. The extent to which children expect the new foster family and caseworker to be hostile and malevolent or safe and enriching is an important factor in children's ability to utilize their foster parents as sources of comfort and to use foster care in general as a corrective experience. So, it is not the act of placement, number of foster homes, years in care that alone determine children's outcome, but rather how children experience these events and, in turn, how they cope with them. However, how foster children understand their situation and how they cope, *the children's role in their outcome*, have never been studied.

To address this void in the empirical literature, theories and research on attachment, social cognition, coping and resiliency were used to inform the conceptual model of the study. The assumption in the proposed model is that children's adaptation in foster care is mediated by internal working models of self and others, by various cognitive appraisal processes, coping strategies, and risk and protective factors in the child and environment.

Crisis period. This article focuses only on one phase of the fostering process, the day the child is initially removed from his/her parents. From the perspective of attachment theory, separation of the child from his or her caregiver is severely threatening for the child, irrespective of the quality of the child's experience with the parent. Even neglectful and abusive parents are likely to be treated by children as protective figures (Bowlby, 1969, 1973). Abused children placed in foster homes have been found to remain attached to abusive parents (Eagle, 1994).

The events of the day of placement constitute a crisis for children because everything in their lives changes and the children are overwhelmed with feelings of abandonment, rejection, worthlessness, guilt, and helplessness (Geiser, 1973). Moreover, the children's old ways of perceiving the world and of coping with challenges no longer work. It is because of these experiences that crisis theory highlights the accessibility of individuals at times of crisis to new ways of perceiving and responding to situations (Fox, 1985), including seeing the world as one of caring adults who value them. Consequently, how this period is handled will greatly affect the children's ability to utilize the resources provided in foster care to facilitate their development (Littner, 1956).

Crisis theorists have identified three critical protective factors that can help children cope with crisis situations: adequate information about what is happening to them, an adequate support system and effective coping mechanisms to deal with the fear and anxiety generated by the crisis (Aguilara & Messick, 1974). Among younger children, there is often a need to borrow coping strategies from an adult (e.g., getting information) and to rely on an adult to help them organize and integrate their experiences (Fox, 1985). This article will look at whether the new adults in the children's lives provide them with these protective factors and whether the manner in which the adults handle the placement process facilitates children's abilities to cope or further exacerbates the effects of the crisis.

Recently, studies (e.g., Johnson, Yoken & Voss, 1995; Kufeldt & Armstrong & Dorosh, 1989) in which children were interviewed about their experiences in care found that information about why they were being removed, what was going to happen to them, and when would be their next contact with their families, was not provided to them. Literature from four decades ago suggests that, in this respect, the system is unchanged (Littner, 1956).

While these studies provide important information on the system's failure to meet the needs of children on this traumatic day, they do not depict 'the shock to the system' and the sense of terror and apprehension that is portrayed in clinical descriptions of the day of placement (Littner, 1956; Geiser, 1973; Kline & Overstreet, 1972). Thus, it in effect minimizes the damage that is done to children. These studies tell what occurred during this crisis stage, but not how these events affected the children. There are four phases in the crisis stage, i.e., removal from parents, time at agency prior to placement into foster home, placement in the foster home and the initial period following placement. This article focuses on the first two phases and examines how children experienced the events of placement day. Subsequent papers will report on the other phases.

THE CURRENT STUDY

The children were selected from private agencies serving inner city Detroit.¹ They ranged in age between 8-14, with a mean of 11.0, and had entered foster care in middle childhood because of abuse and/or neglect. This specific age group was chosen because it represents the youngest age in which children are able to reflect on their experiences and the oldest age group in which children are placed mainly because of parental neglect and/or abuse. They were identified through the computerized database at the agencies. Agency personnel were asked to identify all children who met the following criteria: they were between 8-14 years of age; they had been placed because of parental maltreatment; this was their first placement into foster care; they had been in care between six months and four years; and they had been living in their current foster home at least four months. Children with physical or developmental disabilities, a prior history of psychiatric hospitalization or residential care or who were considered by the caseworker to be too psychologically disorganized to participate were excluded.

Sample selection. Names were originally selected from the subject pool at random. After the first 45 children, the cell sizes for each age and gender group were calculated to determine the number of each age and gender that were needed to balance the cells. Initially younger children and older boys were under-represented. To compensate, younger children and older boys were randomly selected until their cells had adequate representation.

Of the 119 children contacted, 25% of the birth or foster parents refused consent. There were no differences on system and demographic factors between the children who did not participate and the final sample. Informal discussions with caseworkers indicated, as well, that there were no differences in emotional and behavioral problems between non-participants and participants.

Ninety children were interviewed. They were 80% African American; 20% Caucasian. There were 44 boys and 46 girls, ranging in age from 8.0 to 14.5 with equal numbers of boys and girls in each age group between 8 and 11 years of age. Thereafter (between ages 12 and 14.5) there were fewer boys. Recruiting boys 12 and older who met the other criteria was difficult because older African American boys are often moved into more structured settings, e.g., residential centers, as noted in earlier studies (e.g., Fein et al., 1990). See Table 1 for other characteristics of the children.

METHODOLOGY

Children's focus groups, in-depth semi-structured interviews, projective tests, questionnaires and standardized scales were used to obtain a pheno-

TABLE 1. Placement Factors

<i>Variable</i>	<i>Mean</i>	<i>Median</i>	<i>Minimum</i>	<i>Maximum</i>
Age of entry (n = 78) ¹	8.9	8.8	4 years	13 years
Time in care (n = 80)	2 years	1.9 yrs.	4 months ²	6 years
# of homes (n = 76)	1.92	2	1	6
Current home (n = 79)	1.3 years	1	2 months	4.75 years
# caseworkers (n = 74)	2.74	2	1	7
Time with cw (n = 76)	8.3 mo.	8 mo.	1 mo.	2.6 years
Contact with cw (n = 75)	3.1/mo.	4/mo.	1/mo.	7/mo.

1. This paper is based on interviews with 90 children. For a number of reasons, placement data (e.g., number of homes, number of caseworkers) were not obtained for a number of children. The numbers varied dependent on the variable.
2. One child was in care less than the 6-month minimum; another child longer than the 4-year maximum.

menological picture of children's pre-care and in-care lives.² Standardized scales and questionnaires completed by foster parents and teachers were employed to assess children's functioning in various areas of development. A 10-page questionnaire completed by caseworkers provided information on children's history prior to care and in care. All focus groups and interviews were conducted at the agency and were administered by the investigator. Children were paid ten dollars for their time and were provided with snacks during the individual sessions.

Interview. Each child was seen individually by the investigator who told the children, prior to the interview, that foster children were very special to her as she too was brought up in out-of-home care. She explained to the children that she was there to learn from them what it was like for them to live with a foster family, to learn about some of the good points and some of the problems, about what was working well for them and what wasn't, and the ways in which they may have tried to deal with the changes in their lives.

The investigator explained, as well, that she was not connected with the

agency in any way and would not tell anyone what they said unless something they told her caused her to become concerned about their safety.

Interview sessions were relatively unstructured, the interviews being guided by a list of topics to be covered (see Table 2). Children were asked to report their experiences with each of these situations. A core set of questions was asked of all children. In addition, a series of probes were provided to facilitate children's description of the stressors, cognitive and affective appraisals, coping strategies and risk and protective factors. Most probes were phrased to avoid suggesting experiences or thoughts to the children. For example, probes used to learn about the placement day were: "Who came to take you?" "Did you know you were going to be removed?" "What were

TABLE 2. Interview Guide

1. *Life before care.*
relationship with parents, siblings, extended family; experiences with family, friends, school, interests, special relationships, other resources?
2. *Reason for placement into care.*
why it happened? who is responsible? thoughts and feelings about it?
3. *Life at home in the months before placement.*
events leading up to placement? how coped?
4. *The day of placement.*
thoughts? feelings? how coped? who or what made things better? worse?
5. *The first few weeks of adjusting to new family, school, neighborhood.*
thoughts? feelings? how coped? who or what made things better? worse?
6. *Life in care.*
foster parents, caseworkers, other foster kids/birth kids in home, parental visits, school, friends, activities; stressors, cognitions, coping strategies, resources
7. *Sources of strength.*
8. *Hopes for the future.*
9. *Advice for new children coming into care.*
10. *Thoughts and feelings about the future.*
11. *Anything else that you would like me to know about you or about what it is like to be a kid in foster care.*

you thinking and feeling?” and “Was there anything that you could do to make yourself feel better at this point?” More focused questions were asked to ascertain whether the children had been given the resources they needed to cope with the placement experience, including “Were you given any information at this time?” and “Did anyone do anything to make you feel better?” Responses were recorded and the tape recordings transcribed.

ANALYSIS

The purpose of the current paper is to provide a systematic description of the way in which children taken into foster care experienced the process of removal. It was assumed that there were two distinct parts in the children’s removal and placement: the children’s removal from their parents’ home by police or protective service (PS) workers and the children’s wait at the agency until a foster family was identified.

Responses dealing with the children’s removal from their families were excerpted from each child’s interview. The excerpts were then divided into these two sections. Each section, in turn, was divided into sectors consistent with the probes, which were designed to investigate the circumstances of the children’s removal and whether children were provided the resources necessary to cope with a crisis.

Subsequent analysis was informally based on the recommendations of Weiss (1994) for conducting an issue focused analysis. Thus, the transcripts were reviewed for reports of particular experiences, e.g., how children understood what was happening, information and support provided. The experiences were coded for children’s understanding of their removal, the thoughts and emotions they experienced, their coping strategies and the ways in which the new adults in their lives did or did not assist them during this critical period. The coded excerpts were then sorted into files by code categories. Coding categories were created that were close to the data. They were phrased to allow distinctions among differences in experiences that had practical, experiential or theoretical importance. For example, categories concerned with the information provided children distinguished among the types of information provided, e.g., information that was factual, but not understood by children, “You’re going to a foster home”; information that presented the caseworker’s perspective, “You’re going to a nice lady’s house”; information that was untrue but meant to ease the children’s pain, “You will be going home tomorrow.” Separate categories were created to capture children’s experiences, thoughts, emotions and behaviors.

Those children whose responses within a category were nearly identical were grouped together and their understanding summarized. This was repeated for all the categories within each of the two sections, removal by

police and/or worker and waiting at the agency. The findings within each sector were then summarized and interpreted. Finally the sectors were integrated into a single coherent narrative.

Majority responses were designated as “main line” responses and constitute the core of this report. Responses that were made by fewer children were designated as “variant” responses. These were summarized and a search made for the factors that might explain their having occurred. They too are described in this report.

The descriptive statistics of the children’s responses are presented first followed by the narrative data. The narrative data are presented in terms of their logical sequence, i.e., children’s experience of the event followed by its interpretation. The aim is to tell a story of children’s experiences on placement day, focusing on their thoughts and feelings. Finally, a well-handled placement is described.

FINDINGS

Birth family characteristics. All of the children came from poor single-parent households. The majority of the birth parents in the sample were unemployed and involved with drugs. All had abused and/or neglected their children.³

*Pre-care lives.*⁴ In reality, these categories, abused and neglected, tell us little about the lives of the children prior to care. They do not tell us the age of the child when the parental maltreatment began, the presence or absence of physical and/or sexual abuse, the length of time involved, the severity, and the availability of other adults to care for the children. In fact, there was great variability among the children in each of these areas.

The narratives of their lives prior to care reveal a much more explicit and painful view of the nature of the deprivations they experienced. Almost all of the children, at some point in their lives, had experienced severe neglect, a large proportion having lived in crack houses or in abandoned buildings. The majority had experienced physical and sexual abuse as well, prior to entry. All the children had experienced betrayal and abandonment by their parents. For some it came early in their lives and occurred multiple times as they were moved from relative to parent and back to relative. For others, it did not occur until their mothers became involved in drugs in the year or two prior to placement and then again upon placement; a handful of children in the current study described an available, responsive and supportive caregiver prior to their mother’s involvement with drugs. These few children whose mothers had only recently been lost to drugs apparently had the time and opportunity to internalize the basic foundations of development: e.g., ability to trust, to develop relationships, and to develop a sense of self-worth which persisted in spite of later neglect.

For the majority of the children, their narratives revealed a similarity in the quality of their lives prior to placement. They had, by and large, experienced maltreatment for most of their lives interspersed with a few months or a year of good caregiving. Sometimes the care had been provided by a parent, sometimes by a grandparent. However, there were also two extreme groups, a small group (10%) who had in their earlier years a consistent period of 'good enough' mothering and an equally small group who had no positive memories. This variation in children's early caregiving relationships was reflected in the ways children perceived the world and the ways in which they coped, utilized available resources and adapted, indicating great diversity among the abused and neglected children in what they brought to the placement experience.

Day of removal. In the children's narratives of their experiences of removal from their families, a comparable range of experiences emerged. While the vast majority reported being removed from their homes without warning, taken to an agency, and provided little information or support, there were slight variations in the children's reports of how the police or protective services learned of their situation, who actually removed them, and what information they were given (Tables 3-4).

Consistent with the nature of the event, parental loss, and children's portrayal of how they were treated by the new adults in their lives, the overwhelming majority of children reported feelings of fear, confusion and an absence of coping strategies (Table 5).

The narratives, presented below, depict the realities behind these statistics, providing a rich portrayal of the fear, confusion and sense of abandonment the children experienced. The narratives demonstrate, as well, how the children's experiences, perceptions, thoughts and feelings, presented as separate themes are, in reality, intertwined.

A SENSE OF BEING APPREHENDED

As delineated in Table 3, most children described unexpectedly being taken by the police or a protective service worker from their homes or schools and brought to an agency or to a temporary shelter until a foster home was found for them. Many thought they were being taken into police custody, and some described resisting actively. The children saw police as threatening and themselves as targets, not as victims whom the police were rescuing, as depicted by Chantel, a 10-year-old:

They don't say nothin, just come on in the car. So they started gettin and the police just pushin us, pushin us and they push us in the car. And we be cryin we be kickin, talkin about leave us alone, leave us alone, what you takin us for, what you takin us for? We ain't doin nothin to y'all, we ain't doin nothin.

TABLE 3. Circumstances of Children's Removal

	<i>n</i>	%
<i>Children removed without prior warning</i>	85	94
<i>Children removed following:</i>		
anonymous report ³	65	72
call to police or PS by relative with whom they were living	9	10
child's report of abuse to a teacher	8	09
child's call to PS to be removed	1	01
child does not know what led to removal	7	08
<i>Children reported to be taken to agency or foster home by:</i>		
police	36	40
protective service workers accompanied by police	19	21
protective service workers	31	35
relative ⁴	4	04
<i>Children reported being taken directly to:</i>		
agency	82	91
children's shelter	3	03
foster home	5	06
<i>Children placed apart from one or more siblings⁵</i>	43	48

3. Majority of children reported a neighbor saw that they were alone and called PS. A few children told of a neighbor who was angry at parent and anonymously called PS.
4. These children were told by relatives, i.e., aunt/uncle, sister, parent, that they were taking them to the store or to visit someone, when in fact they were dropped off at a child welfare agency.
5. This information was provided by some of the children. Information on others regarding sibling separation was provided by caseworkers.

A number of children had been living in crack houses and were picked up by the police during a drug raid, which itself was a traumatic experience.

It was scary. They had police puttin guns in people's faces. I was so scared. I couldn' think. (Ervin, age 13)

FEAR AND BEWILDERMENT

The absence of preparation for their removal may have exacerbated the children's feelings of fear and panic. A revealing glimpse of how apprehensive the children felt is provided by Leonard, an eight-year-old boy who had entered care the previous year. Though the police made offhand efforts at reassurance, he was so overwhelmed by apparent catastrophe that he could not accept it:

Leonard: I was thinkin they (police) was gonna kill me or somethin. So, I sit in the corner and start cryin.

Interviewer: Did the police do anything to help you or make you feel better?

Leonard: They just tell me it was all right.

Interviewer: Did you believe them?

Leonard: No.

As the narrative continues, his fear of total vulnerability emerges.

Interviewer: What happened next?

Leonard: Then they took me in the police car.

Interviewer: What were you thinking then?

Leonard: I was thinkin they was just gonna take my momma somewhere and jus do whatever they gonna do with her and jus leave me on the streets or somethin.

Interviewer: Could you ask them where they were taking you?

Leonard: I was afraid to ask them where they takin me.

Absence of trustworthy information. Afraid to ask questions and reportedly given little information, children called upon other experiences and information in their attempts to make sense of what was happening to them. Most often they used television imagery and stories from other children and adults to try to grasp what was happening to them.

While the vast majority of the children reported that they were not given any information in the ride to the agency or while waiting at the agency, fifteen children related that they were told by the caseworker that they were going to foster care. Since few children know what foster care is I asked them what they had thought it was at the time. For three of these children their information about foster care came from the media.

I was thinkin what if we go to a bad foster home where they beat you and stuff, cause I was seein stuff on the news where foster kids be gettin

beaten by their foster mothers and I was like “what if it happen to me?”
(Mark, age 13)

There were a few children, prior to placement, who had been told things by their families that they now recalled. One girl was told by her grandfather

TABLE 4. Experiences with the New Adults in the Children's Lives

<i>Information children reported being given:</i>	<i>n</i>	<i>%</i>
<i>about where they were being taken by police or PS</i>		
none at all	84	93
going to foster care	3	03
going to an agency	1	01
going to a children's shelter	2	02
<i>at the agency about where they were going</i>		
none	70	78
going to a nice lady's house/it will be OK/you'll be safe	7	08
going to foster care	12	13
description of family ⁶	1	01
<i>about separation from sibling (n = 25)⁷</i>		
none	25	100
<i>Percentage of children given some form of help or comfort by:</i>		
police	0	0 ⁸
protective service workers	2	02
case workers	0	0 ⁹
child care workers	4	04

6. This was in response to one child's questions about the makeup of the family.
7. Of the 43 children separated from at least one sibling, only 25 were asked directly about the advance information given them about sibling separation.
8. Almost every child removed by police officers reported being taken to McDonald's, but no child said this experience helped to reduce their fears. Two children said it made them feel better because they had not eaten.
9. In most agencies children were given donuts and/or placed in a playroom while waiting for a foster home. However, this was not experienced as helpful in alleviating their fears.

TABLE 5. Children's Thoughts, Feelings and Actions on Day of Removal

<i>Children's reported feelings when removed from parents</i>	<i>n</i>	<i>%</i>
fear/panic	80	89
anger	4	04
relief/will be safe ¹⁰	6	06
<i>Fears children expressed (N = 51)¹¹</i>		
will never see mom again	26	51
will never see mom and siblings again	4	08
didn't know what will happen to mother	2	04
will be forgotten by family and friends	4	08
did not know what was going to happen to them	9	18
will go to jail	2	04
will be beaten or killed	3	06
did not know these new people	1	01
<i>Where children thought they were being taken</i>		
did not know	52	58
jail/juvenile detention	14	16
children's home	4	04
to a relative's home	6	07
to a home where somebody wants a child	1	01
foster care	5	06
to a police station until parent picked them up	5	06
back home (children removed from school)	3	03
<i>Children's ideas about what foster care was (n = 15)¹²</i>		
place where they beat you or kill you	10	67
like adoption, you never see mom again	2	13
lock you in a room/in a house and shut the gate	2	13
place where they put bad kids	1	07
<i>Coping strategies reported by children</i>		
none	86	96
thought about going home	1	01
thought about good things	1	01
pretended it wasn't happening	1	01
asked questions about where I was going	1	01

10. These children had been in emergency foster care previously for a few days and were familiar with fostering or were relieved to be removed from the abuse in their homes.

11. Almost all children spoke of being frightened at the time of removal. However, because some children went on to talk about other related incidents, only 51 of the 90 children were asked directly about what it was they feared.

12. Children who were told they were going into foster care or said that they suspected they were going to foster care were asked what they thought foster care was.

about what strangers might do to her and that was what she feared as she awaited placement.

I was kinda scared because my grandfather used to tell us that there was a lot of people going to throw us in a bag and throw us in the river. (Marie, age 12)

Another child's mother had been in care as a child and told him stories about what it was like. James, age 8, spoke of his fears about foster care:

I was scared because my mother told us when she was in foster care things that happened to her, that her foster sister lied on her, that her foster father was molesting her there. She got beat and nobody would help her.

Another handful of children reported that they had been told, 'that they were going to a nice lady's house.' Despite this, the majority of the children's expectations differed little from those given no such reassurances. For one child, the nice lady story did little to alleviate the apprehension about the new 'mom' he's going to and the fear of not seeing the mom he left behind.

It was scary. They was gonna take us take us away and we ain't gonna never see our parents again, and they gonna do somethin to us. I think they was gonna like abuse us and stuff. I didn't believe we was going to a nice lady's house. I think she was gonna be mean and everything. (Damian, 10)

Other children were given still another version of the caseworker's perspective which had little validity for the child.

They was like, well it was for the best and all this. I was like they don't know what they talking about. (Bobby, age 11)

A frequent comment by the children was that caseworkers lie because they tell you it is going to be okay, but it is not. They have just lost everything they have ever known and nothing, not even a nice lady, is going to make that okay. The caseworkers' comments about "going to a nice lady" or "things will be okay" not only do not lessen the anxiety, but instead (1) confirm for the children that the new adults in their lives, like the ones they left behind, cannot be trusted, and (2) invalidate their feelings of pain, loss and terror.

Several children told of how they were told little 'white' lies in order to make them feel better. While the children may feel better temporarily, they become angry later when they realize that once again they have been

betrayed. One boy, relating how the caseworkers told him that he would be going home the next day, commented:

They do that so you'll stop crying. They shouldn't have lied. They should have told me. (Michael, age 10)

What pervades all of the narratives is the absence of information that can help the children cope with their situations. Whether the children conjured up their own perceptions because they were given no information, were given inaccurate information by caseworkers or family members, or were not able to hear the information given to them, the impact was the same: confusion, apprehension, and a sense of themselves as helpless and vulnerable.

LOSS AND ABANDONMENT

The children's feelings of confusion, apprehension and helplessness are intertwined with what, for all children when removed from their parents, is the overwhelming emotion, that of loss. For the child this loss is accompanied by overwhelming feelings of abandonment. Leonard, quoted above, acknowledged his loss even as he contemplated the 'fun' idea that perhaps the policeman was going to take him to his home:

I thought that they was gonna take me to where they lived. Bein in a policeman's house would be fun, but not fun without being with my parents cause I love em.

Because children are not given a chance to say good-bye and to plan for future contact with their parents, they suddenly feel totally abandoned and alone as depicted by Joey, age 10:

I thought they were takin me to juvenile hall and that I was never gonna see my momma again and they were going to feed me bread and water and stuff.

This fear is so great that for some children it was not where they were going that was so frightening, but whom they were leaving. Robert, age 8, reveals his unspoken fear of total abandonment by his mother.

Interviewer: Where did you think you were going?

Robert: Away from my mother.

Interviewer: What were you thinking was going to happen to you?

Robert: I was going to leave my mother for good.

Sibling separation. As the day progressed, many of the children experienced still another major loss, that of their siblings. All but two of the children were removed from their homes together with some or all of their siblings. These siblings were now the only family that they had left, their only source of comfort and their only connection to their past. For some of the younger children, the older siblings were the ones who had parented them when their mothers were on drugs. And for the parentified⁵ children, their younger siblings were ‘their children.’ For both the parentified children and the children they parented, their siblings may have been their main attachment figures. And even for those children where a parenting relationship among the siblings did not exist, the relationships were close,⁶ perhaps even more than among siblings who have a responsive caregiver. In fact, sibling relationships in single families have been found in some situations to serve both as a buffer against family problems and as a source for affectionate relationships (Hetherington, Stanley-Hagan, & Anderson, 1989). This may be even truer for children entering care, separated from everything and everyone they had known. Often, however, finding a home to take all the siblings is impossible and they are separated.

The children reported that they were not prepared for the separation nor were they even told about it. Most children did not become aware that they would be separated from their siblings until the first child was dropped off.

Chantel, the 10-year-old quoted earlier, spoke of the importance of having her brothers with her and then the unexpected separation. As her last comment suggests, she was unable to make sense of the behavior of the adults. While the children may be able to understand why they were separated from their parents since they were aware of their parents’ drug involvement, separation from their siblings was incomprehensible.

Chantel: It help (to have her brothers with her) because I know they understand me and know how I’m feeling cuz they in the same condition I am.

Interviewer: Were you able to talk with them?

Chantel: We was all in different foster homes. So we didn’t even know the phone number or where they was going.

Interviewer: Did you know that you were going to different foster homes?

Chantel: No, I thought we was all going to be together as a group.

Interviewer: When did you find out that they weren’t going with you?

Chantel: When they dropped me off.

Interviewer: What were you thinking then when they dropped you off?

Chantel: I was thinking that they crazy. Is you crazy or something taking me away from my brothers?

With the separation from their siblings, the children experienced their second abandonment in one day. All sense of family, of comfort, of familiarity and of belonging was gone and there was no one except strangers.

UNSUPPORTED, MISUNDERSTOOD AND HELPLESS

Absence of support and understanding. Once the children were removed from their homes, it became the responsibility of the new adults in their lives to provide the children with the comfort and support they so badly needed. Therefore, as the children told of their harrowing experiences, they were repeatedly asked if anyone said or did anything that helped them in any way. However, with the exception of one child who actively sought out help and two sisters, to be described subsequently, who had a good placement experience, all of the children responded negatively. Cindy, age 13, tells not only of being given no information or support to cope with the loss of her mother, but of abandonment by the protective service worker who 'rescued' her.

They took us to an office and asked us to fill out a paper. The lady who brought us, she took off. I'm saying where are you going, don't leave me here. Next thing-I don't hear from my mother for a long time and I'm sitting here worried to death. Like what happened to my mother. Is she alive? Did something happen? Is she kidnapped? Tell me something.

Insensitivity to children's reality. Furthermore, it appears that caseworkers were insensitive to the fear and anxiety children might be experiencing as they waited alone, without information or explanations about what was happening to them. In most agencies, children, despite their fear and apprehension, were placed in a playroom while they waited for the agency caseworker to take them to the foster home or until a foster parent picked them up. Child care workers in the playroom were supportive for a few children. However, the majority of children did not experience such support. Nevertheless, many children played during this waiting period. Thus, they may outwardly have appeared to caseworkers and foster parents to have been all right. But as Lisa, age 9, insisted, this was not necessarily true.

Interviewer: Did you play?

Lisa: Yeah.

Interviewer: Did that make you feel a little better?

Lisa: No.

Likewise, the caseworkers' reality, that of rescuing children from abusive and neglectful and often drug addicted parents, at times overrode their sensitivity to the children's reality, their need and love for their parents. The caseworker's comments below reveal not only her insensitivity to the child's reality, but to his attachment to and identification with his mother. Robert, an eight-year-old who spoke earlier of his fear of leaving his mother, told how the caseworker attempted to ease his fears.

She said that it was a nice family and they don't do drugs. They don't do anything that your mother did. It's a different side of town. They have a nice house and are nice people.

It is because of children's attachment to their parents and the fear that they cannot survive without them, that removal from their parents leads to fears of being totally abandoned and an overwhelming feeling of helplessness, making it difficult for them to process any information given to them. The pervasive feelings of helplessness were articulated clearly by James, age 8, quoted previously. James, who entered care when he was six years old, said:

I was so scared. I was afraid that I wasn't gonna make it. I was gonna be helpless.

The child's words reveal the enormous gap between the children's perspective and the worker's perspective. While the protective service worker may have felt she was rescuing him from a neglectful mother who may have fed him only once a day or bathed him only once a month, the child, because of his overwhelming helplessness, sees a different reality. For him, being apart from his mother means he may never eat again since he does not how to prepare food for himself or he may never bathe again because he never took a bath by himself. This may not be objective reality, but it is the only reality the child knows and, for the child, the only one that matters. And because the children have been given no reason to believe that they can trust the new adults in their lives, they do not tell anyone what they are thinking and thus, there is no opportunity to correct their distorted thoughts nor to sensitize the adults to their inner realities.

TRYING TO COPE

The interviews with the children suggest that they were simultaneously experiencing multiple stressors and little support. However, they did try to

cope, to manage as best they could. Much of the time they were trying to work out what was happening to them, what would happen next. They had to decide how much of whatever they were told, by those now in charge of them, they should believe. Even Cindy, cited earlier, who throughout her narrative displayed great inner strengths and good coping skills, described a day of confusion, terror, and feelings of abandonment. Throughout the day she worried about herself, her siblings and her mother. Her efforts at coping required her to question much of what she was told. Her narratives revealed how she was compelled to make sense of a situation which was incomprehensible to her, e.g., a shelter that looks like a penitentiary, the disappearance of her mother, and the abandonment by her protective service worker (cited earlier).

Cindy: They took me to a temporary shelter. In the car she told us she was taking us to a girl's home and it's going to be okay.

Interviewer: Did you believe her?

Cindy: No, I didn't believe her. And at night time it look like a penitentiary. I was like 'I'm not gonna like this place!' These big fences and this little place, three cottages. I'm looking like 'Oh my god! It's a military home! I don't like it!' So gates opened just like the gates of the penitentiary. I'm looking like 'oh my, this is terrible. And as soon as we got in, we met some of the people. I met a lot of the girls. They seemed okay, I still didn't like it.

Interviewer: What were you thinking?

Cindy: I'm thinking that I'm going to end up living here and my mother is not going to come back.

With the exception of a handful of children who tried not to think about what was happening or to think of more positive things (e.g., their parents will come and get them back), which helped temporarily, the children were too overwhelmed with the events to even ask questions or reveal their terror. Not even those children who were able to talk about the strategies they used to cope with the abuse and neglect prior to care and with stressors they faced while in care were able to find any way to effectively cope with the trauma experienced on the day of placement. Only one child was able to approach the new adults in her life and inquire about what was happening. Karen, an eleven-year-old girl, like the thirteen-year-old cited above, reported good early caregiving and demonstrated enormous strengths. However, unlike the 13-year-old, Karen's removal to foster care was not sudden and unexpected. The combination of inner resources with psychological preparation for the move provided her with the resources to engage in effective coping strate-

gies. When placed in the agency playroom without information as to whom she was going to live with, she took control.

Interviewer: Were you able to ask anyone about what was happening?

Karen: Yeah I asked Mary and Suzy (child care workers) how old are they (foster parents)? What do they look like? They said they didn't know anything but Nicky (child care worker) she knew a lot of stuff.

Interviewer: So she filled you in?

Karen: Um-hum.

A WELL-HANDLED PLACEMENT

Given the extent of the children's loss, the trauma of removal and placement into a strange environment, are there strategies that will, in fact, help the children? The answer emerges in the well-handled placement of two sisters, ten and eleven years of age. It is from them that we learn about the little things that can be done to lessen *some* of the trauma of placement. What served to protect the children in this placement was that the children knew in advance what to expect, giving them some control over the situation. If the caseworkers are alert to the children's situation, let the children know where they are going, provide adequate information, meet the children's needs for *continuing* interpretation of what is happening, *continuing* information as to what will be happening and do not abandon the children, the terror described above can be ameliorated. The narrative of Shawna, a ten-year-old, reveals a non-traumatic placement experience.⁷

My mom told us that we probably gonna have to leave her house or live with our grandmother or somebody else because she couldn't take care of us anymore because she thought the land people (landlord) was gonna kick us out because they gave her a two-day notice. I was just sayin bye to everybody. I wasn't really that scared because they (case-workers) had told us that we was gonna see them (parents and siblings) the same week we got dropped off. You see, they gave us a lot of information so we really wasn't that scared about it. She was tellin us that it would only be temporary. And then she took us back to the house we were supposed to be, but nobody was home because they was goin to some type of a reunion or something like that. It looked like a nice house so I wasn't scared because I already seen the house. So then we had to go to another place. We went to this place for kids (DSS). We went up to a top floor. There was a copyin machine and a telephone so we called up our mom and we said hi to her and then she talked to us.

How different this experience was from those cited previously. The unexpected family disruption, the uncertainty about where they were going and what will happen to them, the fear of never seeing their mother again—none of this was part of these girls' experience nor was the accompanying terror. Although the pre-placement preparation and the information given the girls was planned, the foster parent's not being home was a fortuitous event, which, however, further facilitated the children's placement experience. It gave the girls a chance to see where they were going to live before actually moving in. Simultaneously, the foster parent's not being home forced the protective service worker to take the children back with her for an unplanned trip to the agency where she left them in a room with a telephone, enabling them to make that much-needed connection with their mother.

DISCUSSION

According to the children, removal from their homes was generally handled clumsily. For all but a few children, the day of placement began with a catastrophic disruption of the children's families and total lives. The children reported multiple losses which continued to increase in number as they were suddenly separated from their last remaining supports, their siblings. They encountered a progression of risk factors including a lack of information, the resulting terror of the unknown and an absence of acknowledgment of their feelings of pain and loss.

Risk factors were introduced beginning with the children's very first contact with the child welfare system through the 'emergency removals.' From the children's reports of their histories, the emergency removals were in most cases unnecessary. Children were not at immediate risk of harm. They may have been living with substance abusing parents who neglected them, but for them that was the only security and only sense of belonging they had (Littner, 1956). Conversely, unexpectedly being snatched by the police or protective service workers traumatized the children. In addition, the emergency approach precluded the children's being given any preparation which may have helped them mobilize their inner resources.

Other protective factors could also have been provided. For example, the children's fear of never seeing their mothers again, the most frequent fear, could have been alleviated by giving the children accurate information about parental visits. Information was kept from most children about key aspects of the placement experience, making each event appear to them to be random rather than predictable. At a time when their lives were out of control, providing the children with information would have given them some sense of control over the situation.⁸ Instead they were kept from the most important information of their lives. Moreover, their thoughts and feelings were not

validated. The new adults in their lives behaved either as if nothing had happened or they diminished the significance of the loss.

Developmental implications. Research on children who experience parental separation or loss suggests that it is not the separation itself that predicts pathological outcome, but the way in which it is handled by the adults in the child's life. Support to grieve, open communication, and accurate information about the loss are among the critical factors that differentiate those children who resolve the loss and resume normal development from those who develop emotional problems (Bowlby, 1980; Furman, 1974).

The manner in which the placement process was handled undermines the children's ability to adapt to their loss and so negatively affects their ability to develop new attachments in foster care (Steinhauer, 1979; Kates et al., 1991). Furthermore, excluding the children from critical information, decisions, and choices about their own lives induces a sense of learned helplessness in the children (Zimmerman, 1988), impairs their ability to cope with new stressors and increases their risk of low self-esteem (Harter & Connell, 1982) and depression (Peterson et al., 1993).

The failure to validate the children's thoughts and feelings may have as great or even greater negative impact on the children's lives than the lack of information and feelings of helplessness. Adult denial of children's pain obstructs the children's resolution of the trauma. In fact, adequate processing of traumatic events becomes more difficult if the parental figures defensively exclude the children's pain (Bowlby, 1973, 1980; Bretherton, 1995). For the children, the adults' denial is experienced as an emotional abandonment and still another confirmation that there are no adults who can and will help.

In addition, failing to validate the children's perceptions and feelings teaches them that they cannot trust their own perceptions and feelings. Many have already learned this in their birth families. For example, their mothers tell the caseworker that she does not leave them alone, when they know she does. In the placement situation, denial by the new adults in their lives is extremely confusing to the children. A comment made in connection with sexual abuse applies here. "Children who believe the denials come to doubt their ability to observe reality accurately. The long term impact is often that these children learn to operate in two realities, one that accepts the adult view that everything is okay and a second which the children keep hidden, that holds onto their inner feelings and perceptions" (Rosenfeld & Wasserman, 1990, p. 22). In sum, as a result of the systems' failure on the day of placement, the children's internal working models of adults as people who cannot be trusted and of themselves as unworthy of care are confirmed.

Implications for practice. The narrative from the good placement suggests some guidelines for what is needed to transform the placement experience from one of trauma to one of opportunity for change. It shows it *can* be done.

It requires (1) informing the children *prior to removal* that they are leaving their parents to *temporarily* live with another family; (2) allowing the children to contact their families as soon after removal as possible to reconnect and to make arrangements to visit with their parents; and (3) familiarizing the children, prior to entry to their new home, with where they are going to live by allowing them to meet their foster parents or see their home. If agencies are fearful that parents will abscond with the children if they are told of the placement in advance, procedures can be put into place that will meet the needs of the children and prevent prior removal by the parents. For example, workers can arrive in the morning, explain to parents and children what is going to happen. Children can pack their belongings, and when possible, parents can accompany children to the agency. At the agency, appropriate good-byes, plans for next contact and provision of parent and extended family phone numbers can be made.⁹ The author recognizes the dilemma for the caseworker in that this procedure may result in a difficult encounter with the parents. However uncomfortable this situation might be, it is temporary, while the traumatic impact on the children of emergency removals may be long lasting.

To these basic requirements, a few additions need to be made to further lessen the trauma for the children. It would be best if removal of the children were carried out by a caseworker familiar to the children. When possible, it is even more beneficial if the parent accompanies the child through this transition. If children are not able to meet their foster families prior to removal, they need to be given concrete information about them, i.e., shown a video of the foster family members talking about themselves, their interests, and the kinds of things they like to do together with children or at the very least, shown pictures of the members of the foster family along with being given a narrative about the family.

Finally, a protective factor that was suggested in the children's responses to interview questions about later developments in their fostering careers, is the incorporation of other foster children as resources. Foster children, more than anyone else, know what the new children are experiencing and what information is needed to ease their fears. Children already in care should be formally incorporated into the placement process. All new foster children can have other foster children assigned to them from the moment they enter care. If the 'foster child mentor' cannot be present upon the new child's arrival because of the time of day, the mentor can phone as soon as possible. In the interim, new children can be shown videos of foster children talking about foster care. In addition, research indicates that those who recover most successfully from trauma are those who are able to give meaning to their experience (Herman, 1992). Acting as a mentor to a new child provides the experienced foster children with the opportunity to do just that and to transform their pain into something positive.

None of these recommendations obviate the need for professional crisis intervention. The longer the agency delays providing an intervention to help the child deal with this trauma, the less effective it will be. Having a specially trained crisis team for these critical periods would benefit not only the family and the child, but the agency as well in the decreased time and energy for adjustment problems, removing children from unsuccessful placement, finding other homes, and working through the aftereffects with both the child and the foster family.

Ultimately, before change can be brought about, we must begin by asking why placements continue to be handled in ways that are damaging to the children. This will not be easy. Change in systems as complex as child welfare depends on the individual's knowledge about and willingness to do things differently, on the agencies' provision of support and resources, and on society's concern with the importance of children. Action in all these areas is vital.

NOTES

1. The majority of children in foster care in Michigan are placed with private agencies and this is done so in a random (non-biased) basis.

2. This article focuses only on children's responses to the interview question #4 regarding the day of placement (see Table 3).

3. Information on birth family characteristics was gathered from the children, their caseworkers and foster parents.

4. A more extensive report on the children's lives prior to care is in preparation.

5. Children who reported that, prior to care, they were responsible for the day-to-day care of their siblings were identified as parentified children.

6. Children's relationships with their siblings, both prior to care and in care, were reported by the children.

7. Since the descriptions given by the two sisters were essentially identical, only one of the narratives is reported.

8. The link between stress and psychopathology is much greater when the stressful event is seen as uncontrollable (Paykel, 1974).

9. These implications for practice may not be feasible in those cases in which children's lives are *truly in imminent danger* and emergency removals are the only recourse. However, even in emergency removals, children can be provided the necessary information and their thoughts and feelings validated.

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