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Level of adaptive behaviour according to the occupational status of foster adolescents in independent living

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LEVEL OF ADAPTIVE BEHAVIOUR ACCORDING TO THE OCCUPATIONAL STATUS OF FOSTER ADOLESCENTS IN INDEPENDENT LIVING

By

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THESIS

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This thesis is dedicated to my father,

Dr. Donald M. Amoroso.

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Abstract

This is a quantitative study that describes the profile of adolescents in independent living in Halton Region by their occupational status. Occupational status is a variable that ranges along a continuum, from adolescents who are in school fulltime & working part-time, in school fulltime, working fulltime, in school part-time & working part-time, in school part-time, working part-time, and not in school or working. Information for adolescent profiles was obtained from case files, as well as from the Vineland Adaptive Behaviour Scale which was completed by adolescents' social workers. It is expected that these profiles will assist social workers in identifying potential predictors of adolescent occupational status in independent living. Hence, areas requiring further skill development, prior to an adolescent leaving care, were identified. Implications for agency planning were discussed.

Introduction

The foster care process begins when the question of whether to remove a child from his or her natural family is posed. It involves the integration of a child into a substitute family and it ends when a child is stabilized back into his or her original home, is placed for adoption, or is of legal age to become independent (Ministry of Community and Social Services, 1981). Generally, children come into care for one of three reasons. One-third of children enter the child welfare system because their parents are unable to care for them - e.g., parents may have a mental or physical illness or there may be other family problems such as alcoholism. Another third of children are admitted because their parents are unwilling to care for them - e.g., parental mental or physical illness or other family problems such as drug addiction. The final third of children are removed from their homes, voluntarily or mandated by the courts, because of abuse, neglect, or abandonment (Kendrick, 1990).

In North America, there are over a half-million children in foster care. Of the more than 200 000 troubles youths, under age 18, who are defined in the Canadian child welfare legislation, approximately 60 000 will become Crown Wards meaning that they are permanently in the care of the child welfare agency. Annually, 12 000 Crown Wards leave the child welfare system (Kendrick, 1990). In Ontario, there are fifty-five agencies involved in providing foster care to approximately nine thousand children who range in age from infancy to late adolescence (Ministry of Community and Social Services, 1981). Silva-Wayne noted that there were 10 008 children in the care of Children's Aid Societies (C.A.S.) In Ontario in June, 1994. Although there are no current statistics for the number

of youth in independent living (National Youth in Care Network, 1997), the aforementioned statistics appear to have remained relatively stable since 1981.

There are four risks children face when they are brought into care (Ministry of Community and Social Services, 1981). First, once a child is placed, there is a danger that the period of placement will become unnecessarily prolonged or permanent. Second, there is a tendency for children to lose contact with their natural family. This is in spite of the fact that the amount of contact a child has with his/her natural parents is related to whether (s)he returns home (Inglehart, 1994). In fact, according to Kendrick (1990), children are often placed at a distance from their parents. As a result, proximity to and the maintenance of emotional ties with natural parents is reduced. This is compounded by the fact that natural parents are often poor and lack resources to visit their children. Third, multiple placements result in children being unable to form stable and lasting relationships with their caregivers. Fourth, the longer a child is in care, the more likely (s)he is to show signs of severe emotional damage.

Thus, it appears that children who enter the foster care system are at risk of remaining there. Silva-Wayne (1994) suggested that some analysts believe that the child welfare system is a "reflection of the class system in that it derives its clients from the poorest and least powerful among us and reinforces their underclass position" (p. 3). In agreement with Silva-Wayne (1994), Kendrick (1990) stated that "over 80% of children in care are taken from the lower strata of society: from impoverished families, from the growing ranks of single mothers, from Native bands, and from the surging number of immigrant families"(p.10).

In addition to the fact that parent-child contact may be reduced, thereby limiting the possibility of a child returning home, Kendrick (1990) suggested that children may also be unlikely to return home because social workers may not recognize improvements in the home situation when they occur. The result is that a child may be retained in care indefinitely and unnecessarily. Of concern then, is the finding that children who remain in care beyond one and one-half years have a sharply reduced chance of ever returning home to live with their parents (Ministry of Community and Social Services, 1981; Fanshel, 1975).

Traditionally, children over the age of ten and 'disturbed' or special needs children, are the most difficult to place for adoption or foster care. This makes them likely to remain in the child welfare system throughout their adolescent years. Today, these children make up the bulk of young people coming under the protection of the state (Kendrick, 1990). Moreover, those who enter care as adolescents tend to be in an even more disturbed state than if they had been removed from their home at an earlier date (Kendrick, 1990).

Foster care services are based on the two objectives of preventing out of home placement and achieving a sense of permanency when out of home placement is deemed necessary (Ministry of Community and Social Services, 1981). This legislation has not been responsive to the older youths in foster care who are over eighteen years of age and not in school. For these youths, financial assistance is unavailable from child welfare and returning home or adoption are not options.

The age at which Ontario is no longer responsible for Crown Wards (who are in

school) is twenty-one. Crown Wards who are not in school do not have financial assistance after eighteen years of age (National Youth in Care Network, 1997). Mech, Ludy-Dobson, & Span-Hulseman (1994) have estimated that approximately 20 000 teens per year age-out of placement in the United States. Although this number does not proportionately represent Canada's population, Silva-Wayne (1994) noted that 53% of the 10 008 children in C.A.S.s in Ontario in June, 1994 were thirteen years of age or older. Thus, it seems that child welfare agencies are serving a large number of adolescents in substitute care with the expectation of providing services to meet their transitional needs from foster care to independent living. In fact, the federal government's response to the number of youth who opt for independent living, was that it is the responsibility of each provincial Ministry to assist youth to develop the skills necessary for independent living **before** they actually attempt it (Ministry of Community and Social Services, 1981).

> In his scathing review of the foster care system, Kendrick (1990) stated that Children in care anywhere outside their natural homes will have most areas of their lives regularly mishandled. They will depend upon untrained, underpaid, and frustrated foster parents or group home workers who become their primary caregivers. They will experience infrequent visits from social workers and psychologists, condescension and secretiveness about their cases, and haphazard methods of care planning. If they are made permanent Crown Wards, they will become soley dependent upon the state and its harried overworked representatives. At the end of their transit through the system, they will be thrust

> at 16 or 18 [years of age] with little or no preparation, into an unwelcoming world...They will enter society grossly undereducated, unskilled, and therefore unemployable and confused, lonely, frustrated, and angry. Adolescents with these characteristics are destined for menial labour or welfare, are predisposed to mental health problems, suicide, homelessness, delinquency, and ultimately prison. Many of the graduates of foster care end up on the streets (p. ix).

Congruent with this harsh review, Raychaba (1988) identified that foster adolescents generally function below grade level academically. Moreover, in many cases, they do not have family upon whom to depend; they feel stigmatized; they have few social supports; and they tend to lack knowledge of employment related and general life- and social-skills. According to Cook (1994) and Aldgate (1994), these skills include the ability to obtain adequate housing, complete school, procure and maintain employment, achieve positive social relationships, perform daily living skills, and live independently. Already at a disadvantage, what is the likelihood that these adolescents will be able to successfully compete in the adult world?

Inglehart (1994) maintained that the skills that youths lack when they emancipate from care seriously impede their transition. It has been demonstrated that those in foster care do less well than those not in foster care with respect to young adulthood. Hahn, Curan, & Best (1990) identified homelessness, issues of poverty, health and social problems as some of the consequences for young people leaving care unprepared. These results mirror the findings of Raychaba (1988).

Competence in life-skills such as accessing health care, finding accommodation,

budgeting, making and keeping appointments, and reading are important for one's sense of identity (Beach, Robinet, Hakim-Larson, 1995; Gordon, 1992). It is the acquisition of an ego-identity which Erikson (1959) proposes is the primary developmental task of adolescence.

Erik Erikson's theory of development is often used in discussions pertaining to adolescence. Erikson's theory (1959) is based on the premise of healthy development. It entails the successful resolution of conflicts that occur at various points throughout the life-cycle. During adolescence, Erikson suggested that the primary developmental task is the acquisition of an ego-identity and therefore, the identity crisis becomes the outstanding characteristic of adolescence. The resolution of identity versus role confusion is a biopsychosocial process.

Adolescence can be thought of as a time when the events of childhood culminate and preparation for the future begins. In our society, the belief is that one's destiny is in one's own hands, and decisions with life-long implications are a feature of adolescence. Consequently, there is concern and anxiety on the part of the adolescent. This concern and anxiety may be exacerbated for foster adolescents who are preparing for independence because it can be thought of as a crisis which may bring to the surface past deficits in care and attainment (Aldgate, 1994).

During adolescence, identity is usually found in interaction with other people. At this time the peer group is important for providing social feedback, as well as for providing role models to each other. Typical, adolescents use the peer group to attempt to find themselves by trying out different roles without committing themselves to any one

(Muss, 1988). Eventually, if the developmental conflict of identity is successfully resolved, adolescents attain a feeling of well-being. Choices of occupation, mate, lifestyle, religion, and politics slowly make sense to adolescents as they move towards young adulthood.

According to Marcia (1980), achievement of identity occurs when the individual is pursuing a chosen occupation and an ideological goal. Marcia (1980) identified occupation as one of the key challenges during adolescence that is necessary for a sense of identity and therefore, the successful resolution of the identity crisis. Conversely, identity diffusion is marked by no clear occupational or ideological direction.

For adolescents who may have been separated from their families prior to their teen years, like many foster adolescents in independent living, there is the possibility that there are few significant people in their lives from whom they can receive meaningful recognition and, in turn, few people with whom they can try out their various roles. The result, according to Erikson's theory, is that the identity conflict is unresolved and further development may be blocked, manifesting itself in psychopathology (Muss, 1988).

According to Muss (1988), the adolescent who experiences a failure in the search for identity will experience self-doubt and role confusion. He further suggested that this individual may indulge in self-destructive behaviour such as drug use; may become preoccupied with the opinion of others or conversely, may turn to the other extreme of not caring what others think. Muss (1988) also said that when role confusion becomes prolonged, it may lead to psychotic personality disorganization. In its most severe form, the clinical picture of role confusion may lead to suicide or suicide attempts. Thus, the

outlook is dismal for adolescents who do not resolve the identity conflict. Moreover, the importance of assisting adolescents in independent living, who often reach this stage with developmental deficits from earlier stages, to resolve the identity crisis is evident (Cook, 1988).

Although Erikson's theory has been criticised by feminists who maintain that Erikson failed to account for gender differences in development (Gilligan, 1977; Gilligan, 1982), his theory is still used extensively in discussions pertaining to adolescents both in North America and in other countries. For this reason, this conceptualization of the adolescent developmental task of Identity, as outlined by Erikson, will be used for this study.

Kendrick (1990) used Erikson's theory to demonstrate and to explain the plight of youth in care. He asserted that youth in care show signs of depression, confusion about sex roles or identity, low self-esteem, an unwillingness or inability to form relationships with peers and adults, and aggression. These personal inadequacies, along with confusion generated by their abandonment, as well as the transiency associated with being in the child welfare system, has a severely disturbing effect upon the adolescent's sense of identity and self-esteem.

There has been growing recognition of the vulnerability of youths aging out of care and their need for special support (Allen, Bonner, & Greenan, 1988). Indeed, interest in independent living programs is evolving in response to fear that young people in care are poorly prepared for the work force, for post-secondary education, and for maintaining themselves in the community (Hahn, 1994).

To date, few studies have been developed to evaluate the outcomes of independent living initiatives and the effects on foster children (Raychaba, 1988). This limits the effectiveness of programs designed for this population. Social workers have the responsibility to prepare foster adolescents to become self-sufficient. Therefore, outcome research is necessary to ensure that planning is effective.

Duva (1988) noted that only ten percent of children in foster care have a formal plan for independent living. It is possible that even fewer have been assessed for educational, social, and employment competencies. Hahn (1994) conceptualized the skills that adolescents learn into *hard skills* (such as employment and housing) and *soft skills* (such as self-esteem and other personal abilities). It seems that most of the focus for skill development, to date, has been on emotional adjustment. Although this is an important area, the development of hard skills should not be overlooked.

The importance of developing hard skills is especially salient when one considers that most children who come into care do not return to their families or become adopted (Seim & Chapman, 1989). Accordingly, the importance of teaching life-skills knowledge to foster adolescents is evident. That is, without a competent level of life-skills knowledge, foster adolescents may not be competitive in the working world (Gordon, 1992; Beach et al., 1995). In effect, they may remain dependent on society, in some way, for their existence.

The literature lends credence to this notion. In 1994, Cook found that with respect to education completion, young parenthood, and the use of public assistance, discharged foster youth more closely resembled 18- to 24-year olds living below the poverty line

than those of the general population. Moreover, Meston (1988) suggested that failure to prepare young people properly for independent living places them at risk for a number of undesirable aftercare maladies, for instance, homelessness. These concerns were echoed by Aldgate (1994); Kendrick (1990); Hahn (1994); Hahn, Curan & Best (1990); Inglehart (1994); Cook (1994); and Raychaba (1988). The authors further contended that the failure to develop adequate resources for these adolescents will be costly in the long run.

Hahn (1994) noted that in his sample of foster adolescents between 16 and 19 years of age, their mean level of reading comprehension was at the seventh grade level. Moreover, 28% were below the fifth grade in reading comprehension. Not surprisingly, the gap between age and reading comprehension increased with age. Of significance was the fact that the total time in care was correlated with low basic skills.

In a comprehensive study by Inglehart (1994), several dimensions for readiness for independent living were analysed in an attempt to determine possible predictors of adolescent readiness. He discovered that: 1) those who experienced more disruption and those who suffered from behavioural or emotional problems were least prepared for independent living; 2) the amount of time a youth had been in care was crucial for understanding his/her learning needs; 3) contact with siblings and parents during foster placement was correlated with improved emancipation outcomes; and 4) work was important because it taught adolescents discipline and responsibility, created a sense of social identification and status, and constituted a source of meaningful life experiences. In addition, the significant predictors were: school performance, mental health problems, hours worked per week, total number of placements, contact with father, ethnicity, and

caretaker perceptions of being asked for assistance. Hence, those functioning most positively were likely to be doing well in school, to have no mental health problems, to be working, to have experienced less placements, to have contact with their father, and were perceived to be more likely to ask for assistance.

The studies read to date have been informative in that they have identified characteristics which may be used to predict an adolescent's success in independent living. However, they are limited in their applicability for several reasons. First of all, the method of sample selection is suspect. In many instances, case workers were asked to identify which adolescents were successfully living independently. In no studies were the criteria for success defined clearly and consequently, adolescents were subjectively chosen by their case workers. The extent to which these adolescents are representative of their successful peers is unclear given the lack of a concise definition for success. Furthermore, the differences between adolescents who were deemed successful and those who were not, is unknown.

Second, depending on the source of the data, the results should be interpreted with some caution. For example, some studies relied exclusively upon adolescent self-reports with no standardized follow-up to verify that respondents reported accurately about their current life situation. Therefore, the credibility of the results are uncertain. That is, there is the possibility of social desirability where a person responds in a way that (s)he thinks the experimenter would appreciate. Alternatively, there is also the possibility that respondents could embellish or down play aspects of their current life situation depending on their comfort level with the interviewer. On the other end of the continuum, some

studies obtained their data from case workers only and allowed no input from the adolescents. Acknowledging that case workers are extremely busy with large client loads, it may be that they are not familiar with the adolescents on their case loads. Again, the results need to be interpreted with caution.

A third limitation to the studies reviewed was that the tools used to measure knowledge of life-skills were not strongly reliable or valid. In most instances, researchers independently selected criteria that they believed were important to independent living. Again, the subjective nature of this selection indicates that the interpretation of results requires some reservation on the part of the reader.

Finally, it is worthwhile to note that all but two studies were conducted with American foster children. It is uncertain to what extent the American studies accurately represent the Canadian situation.

Despite these limitations, the literature suggests that the preparation of foster adolescents for independent living should become a focus of service. It seems particularly important because the typical supports found in families are lacking for children placed by child welfare workers.

Cook (1994) discovered that services work best when they are targeted to meet specific goals. Therefore, she stated that social workers need to actively teach independent living skills. Cook (1988) also noted that, in many instances, social workers are expected to identify adolescents' strengths and needs, but they are not provided with the tools necessary to do so. Standardized checklists which include items related to career planning, housing, maintaining health, accessing resources, interpersonal/socialization

skills, and budgeting need to be developed (Cook, 1988; Tatara, Casey, Nazar, Richmond, & Chapmond, 1988). In a similar stance, Duva (1988) proposed a shift from current independent living programming to a competency-based system of performance.

Based upon these premises, the following study was designed. Essentially, the first purpose of this research was to profile foster adolescents in independent living in Halton Region. The second purpose of this research was to identify the level of skills competency of youth living independently, in order to determine whether there is a relationship between higher levels of life-skills competency and more positive occupational outcomes.

According to the Policies and Procedures Manual for Halton Region's C.A.S., independent living is an option available to Crown Wards between the ages of 16 and 21 years. At 16 years of age, these adolescents are no longer required to live in an agency approved placement. Therefore, children who are approaching independence or who have reached the age at which the agency should consider assisting them to begin to develop the skills necessary for independent living, may be conferenced as to their appropriateness for referral either to the Independence Worker or to an Independent Life Skills Program.

It was anticipated that they research project might identify and address areas where foster adolescents in independent living require further life-skills training. Furthermore, based on the profiles developed, information regarding contributing factors which may predict the occupational status and, in turn, the level of support an adolescent might require to live independently, would be identified. Finally, there was the potential

for the C.A.S. to utilize the results from this study for Individual Program Planning, as well as for agency planning.

Working Definitions

The following definitions are used for this study:

Adolescent. Although participants in this study ranged in age from 16 to 21 years, the term 'adolescent' is used to describe them because it is the mandate of the Children's Aid Society to work with adolescents and not with young adults.

Adolescent/Youth Living Independently. Terms used interchangeably in this report to refer to those adolescents who were living in a place arranged by the Children's Aid Society through foster care, but who are now living on their own. That is, because they have reached the age at which they are no longer required to reside in an agency approved placement, they are not living in a foster home, group home, or with their biological family.

Occupational Status. A variable that identifies whether an adolescent was registered in school fulltime & working part-time, in school fulltime, working fulltime, in school part-time & working part-time, in school part-time, working part-time, or was neither working or in school on January 31, 1997.

Adaptive Behaviour. Adaptive behaviour is multidimensional and developmental in nature. It involves the performance of daily activities required for personal and self-sufficiency. Adaptive behaviour is age-related; it is defined by the expectations or standards of other people; and it is defined by typical performance and not by ability (Sparrow, Balla, & Cicchetti, 1984). The level of adolescents' adaptive behaviour was

measured by the Vineland Adaptive Behaviour Scale (VABS). Specifically, three domains of the VABS were administered in order to determine the level of adaptive behaviour: communication, daily living skills, and socialization.

The Research Questions

1) What are the characteristics of adolescents living independently in the care of Halton Region C.A.S.?

2) What is the level of adaptive behaviour of adolescents living independently by occupational status. Specifically, what is the level of life-skills knowledge of adolescents living independently as measured by the Vineland Adaptive Behaviour Scale?

3) Which variables are potential predictors of the occupational status of adolescents living independently? More specifically, Do demographic variables (gender of an adolescent, age of an adolescent, the reason an adolescent was placed in care, an adolescent's age at entry into care, the number of placements an adolescent has experienced while in care, the frequency of parental and other family contact, the frequency of caseworker contact and turnover, and the education level of an adolescent), in conjunction with adaptive behaviour differ significantly by occupational status of adolescents?

Method

Design

This was an exploratory quantitative study that profiled adolescents in independent living in Halton Region. The level of adolescents' adaptive behaviour was also measured.

Sample

The Director of Halton Region's C.A.S. exercised his authority as the legal guardian of these adolescents, in order to grant permission to this researcher to access adolescents' files and to contact their social workers. Adolescents were identified by Halton Region's computerized data file system. This interactive data system is the primary system of the agency. From it, the Child Turnaround Document was retrieved in order to identify adolescents living independently.

Fifty-eight adolescents (33 male and 25 female) were identified as being in independent living in Halton Region on January 31, 1997. They ranged in age from 16 to 20 years ($\bar{X}$ = 18.5, S.D. = 1.2).

Data Collection

Adaptive Behaviour. Social workers from the Halton Region C.A.S. were asked to complete the Vineland Adaptive Behaviour Scale - Expanded Form (VABS), for each adolescent on their case load who was in independent living. Completed forms were returned for 55 of the 58 adolescents in the study. The Vineland Adaptive Behaviour Scale is a 577-item comprehensive assessment of adaptive functioning. It is one of the most widely used measures of adaptive functioning and it has been normed for both

handicapped and non-handicapped populations.

The VABS assesses personal and social self-sufficiency from birth to adulthood. It measures behaviour on four domains: communication, daily living skills, socialization, and motor skills. Domains are ordered by subdomain, which are comprised of items commonly accomplished by a certain age. Thus, related items are clustered. For each domain, percentile ranks, adaptive levels, and age are reported. A respondent who is familiar with the individual's behaviour completed the VABS questionnaire. Respondents reply with "yes, usually" responses, "sometimes, partially" responses, or "no, unknown" responses. They are coded as 2, 1, 0 respectively. For the purpose of this study, items from all domains, except the motor skills domain, were included. The communication domain includes such items as reading books, newspapers, and magazines, and writing letters and reports. Items such as wearing clothing appropriate for the weather and health care are included in the daily living skills domain. Belonging to groups, dating, and controlling impulses are items from the socialization domain.

Because no adolescent in this sample was identified as mentally retarded, an assumption was made that all adolescents could successfully complete the tasks associated with younger children (i.e., tasks associated with children less than fourteen years of age). Therefore, social workers completed only VABS items that were specific to the developmental period of adolescence (Sparrow, Balla, & Cicchetti, 1984). In order to calculate scores, all items associated with children younger than fourteen years were assumed to have scores of two. In effect, all item clusters preceding the items pertaining to adolescence were assigned the highest possible score. This means that all participants

received the highest score for items such as putting on shoes, caring for hair and fingernails, and ability to use the telephone. A copy of the revised VABS Scale is attached. (Appendix A.) For the Vineland Adaptive Behaviour Scale, higher scores indicate better adaptive behaviour for an individual. Conversely, lower scores indicate a lower level of adaptive ability.

The VABS was selected for three reasons. First, it can be used to assess the effects of various treatment interventions pertaining to adolescent functioning. Second, it can determine the relationship between adaptive behaviour levels and levels of clinical, cognitive, or educational functioning. Third, it can be used to gather information in longitudinal studies in which adaptive functioning is a variable of interest. Furthermore, unlike scales that measured levels of life-skills knowledge in previous studies, the Vineland Adaptive Behaviour Scale has been extensively tested for its reliability and validity.

Split-half coefficients for the VABS domains were as follows: communication domain (median = .94), daily living skills (median = .95), socialization domain (median = .92) and for the total VABS (median = .97). In addition, Sparrow, Balla, & Cicchetti (1984) reported excellent levels of both test-retest reliability and interrater reliability for each of the adaptive behaviour domains and their subdomains. For the adaptive behaviour composite, test-retest reliability and interrater reliability coefficients were .99 and .98, respectively. Both criterion-related validity and construct validity (factor analyses) were conducted for the VABS as well. Validity coefficients ranged from .20 - .80. (See Sparrow, Balla, & Cicchetti, (1984) for more detail.)

Demographic Information. Demographic data was collected from the case files and incorporated into the demographic profile. All file data was complete to January 31, 1997. Factors including age, gender, reason for entry into care, length of time in care, number of placements, frequency of parental and other family contact, frequency of caseworker contact and turnover, and education level were collected, consistent with earlier work by Seim and Chapman (1989). In order to remain consistent, the same codes which are used by the Halton Region C.A.S.'s information system were maintained in this study.

Variables. The following indicates how variables were coded in this study.

Subject Number. Refers to the file number of adolescents who were in independent living on January 31, 1997. Because file numbers ended in an alphabetical term, letters were changed to numbers based on the letter's position in the alphabet (e.g., if a file number was 11041-A, the number was changed to 11041-1).

Gender. Male = 1

Female = 2

Age. An adolescent's current age (in months).

Age at Admit. The age (in months) at which adolescents were admitted to the child welfare system.

Time in Care. The length of time an adolescent has spent in care (in days).

Reason for Admit. Agency codes were maintained to identify why adolescents were admitted to care. Reasons are as follows:

031 Family Breakdown

035 Parent/Child Conflict/Aggression

038 Adult/Spousal Conflict/Violence

041 Alleged Physical Neglect/Child

042 Alleged Physical Abuse of Child

043 Alleged Sexual Abuse of Child

046 Verified Physical Abuse/Child

049 High Risk of Abuse

056 Child Deserted by Legal Guardian

072 Supervision of ex-Crown Ward

073 Mental/Emotional Health/Child

076 Child's Disruptive Behaviour

078 Child's Sexual Behaviour

085 Child Refusing to be at Home

091 Lack Willingness to Care

095 Lack Parenting Skills

101 Orphaned/Abandoned Child

104 Sexual Abuse or Risk of

113 Parent/Child Conflict

114 Child Behaviour Problem

Number of Placements. Refers to the number of places an adolescent has lived while in care. A move was considered a placement if an adolescent lived at a location for thirty days or more.

Number of Workers. Number of workers an adolescent had while in care.

Education. The highest grade completed as of January 31, 1997.

Special Education. Whether an adolescent was in a regular school program or a modified program (e.g., Section 27). 1 = yes 2 = no

Time in Independent Living. The time (in days) an adolescent has been living independently. If an adolescent had more than one attempt at living independently, the sum of all days was calculated.

Attempts. The number of times an adolescent has tried to live independently.

Worker Visits. The frequency of direct worker contact (phone or in person). This was calculated by dividing the number of direct contacts between an adolescent and his/her worker by the number of months an adolescent had been in care.

1 = less than monthly basis

2 = monthly

3 = more than monthly basis

Parental Contact. Distinguishes the contact adolescents had with their parents throughout their time in care.

1 = continuous contact

2 =discontinuous contact, but now in contact

3 = no contact

Extended Family Contact. Whether adolescents had contact with extended or other family members while they were in care (e.g., siblings, aunts, uncles, grandparents).

1 = yes

2 = no

Socialization. The score calculated for the Socialization Domain of the VABS.

Daily Living Skills. The score calculated for the Daily Living Skills Domain of the VABS.

Communication. The score calculated for the Communication Domain of the VABS.

VABS. The sum of the scores from the Socialization Domain, the Daily Living Skills Domain, and the Communication Domain. The higher the score, the better the adaptive behaviour on all domains.

Limitations

A limitation of this study was, in the most conservative definition, this is a census of adolescents in independent living during a particular time and in a particular area. Consequently, the results cannot be generalized beyond this sample. This is especially true because although the policy regarding independent living is established by the provincial government, significant variability exists in the manner in which agencies implement the policy. Therefore, what may be determined for Halton Region, may not be applicable for other regions.

That being said however, many agencies do not actively plan for or teach adolescents independent living skills, and this is an idea that could be generalized to other Children's Aid Societies. That is, this study identified the Vineland Adaptive Behaviour Scale as an effective assessment technique that can be used by an agency's workers to develop Individual Program Planning for their clients prior to them entering independent living.

Another limitation is that adolescents were not interviewed in person for their perspective of their current living situation. This might have added supplementary information to what was provided by social workers. Furthermore, adolescent files were not always complete and there is the possibility that social workers were biased in their reporting of information. It would be interesting to compare self-reports, with worker reports, and with a standardized measure of performance. Time, unfortunately did not permit such a study. However, this point is a suggestion for future research. Finally, this research was a pilot study which identified potential predictors to adolescent occupational status. It would be worthwhile to conduct another study that is either longitudinal in design, or that utilizes another population in order to determine whether the potential predictors do, in fact, have predictive validity.

Ethics Review

In spite of the fact that the C.A.S. is the legal guardian of the adolescents, and the fact that the C.A.S. requested this research be conducted for program development purposes, consents were requested of the adolescents. (Appendix A-2.)

Results

Data.

The case files for fifty-eight adolescents in independent living were culled for demographic data in order to develop an adolescent profile. In some instances, files were not complete and therefore data is missing. Social workers from Halton Region C.A.S. were given VABS questionnaires to complete for each adolescent on their caseload who was in independent living. Of the 58 questionnaires distributed, 55 VABS questionnaires were returned.

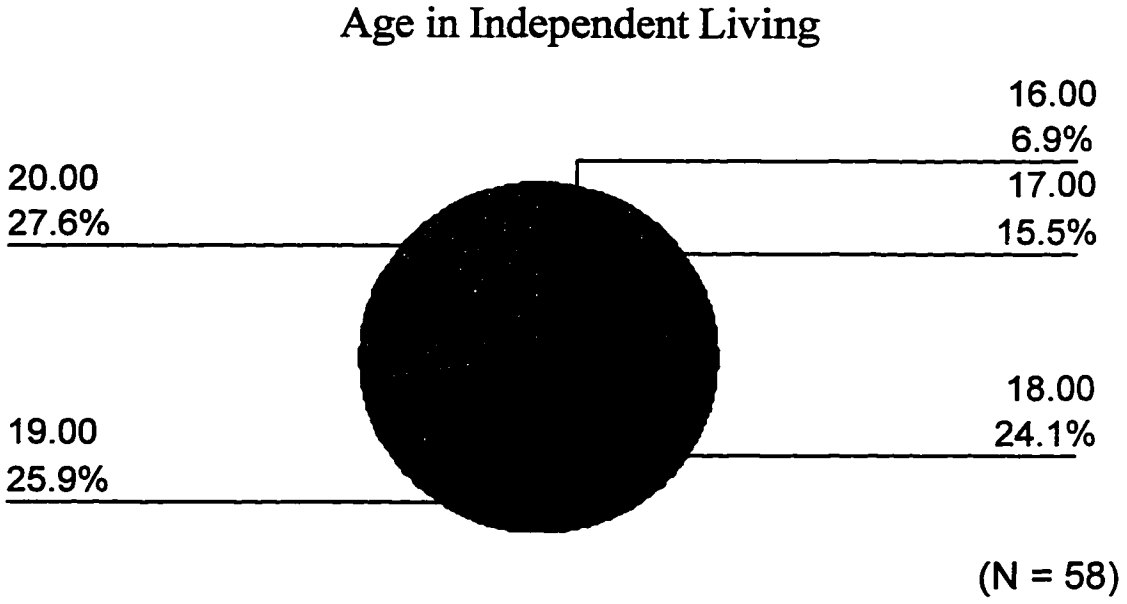
Demographic Profile.

A frequency analysis was run on the data in order to develop a profile of adolescents in independent living. The profiles were current as of January 31, 1997. The number of adolescents included in the analyses is 58 unless otherwise stated. Frequency tables for demographic data are located in Appendix B-1.

There were 33 male and 25 female adolescents in independent living in Halton Region on January 31, 1997. Adolescents ranged in age from 206 to 221 months ($\overline{X}$ = 239.57, S.D. = 14.9) which equates to a mean age of 18.5 years (S.D. = 1.2). (See Figure 1.)

Insert Figure 1 here.

Figure 1.


Age in Independent Living
16.00
6.9%
20.00
27.6%
17.00
15.5%
18.00
24.1%
19.00
25.9%
(N = 58)

The age at which adolescents were brought into care ranged from 99 to 244 months ($\bar{X}$ = 176.26, S.D. = 30.1). The most frequent age at which adolescents were admitted to care was 145 months or approximately 14 years (n = 15). There was however, a 15 year range (3 - 18 years) between when adolescents entered C.A.S. care. (See Figure 2.) The most common reason cited for a child's admission to care was Parent/Child conflict (n = 14).

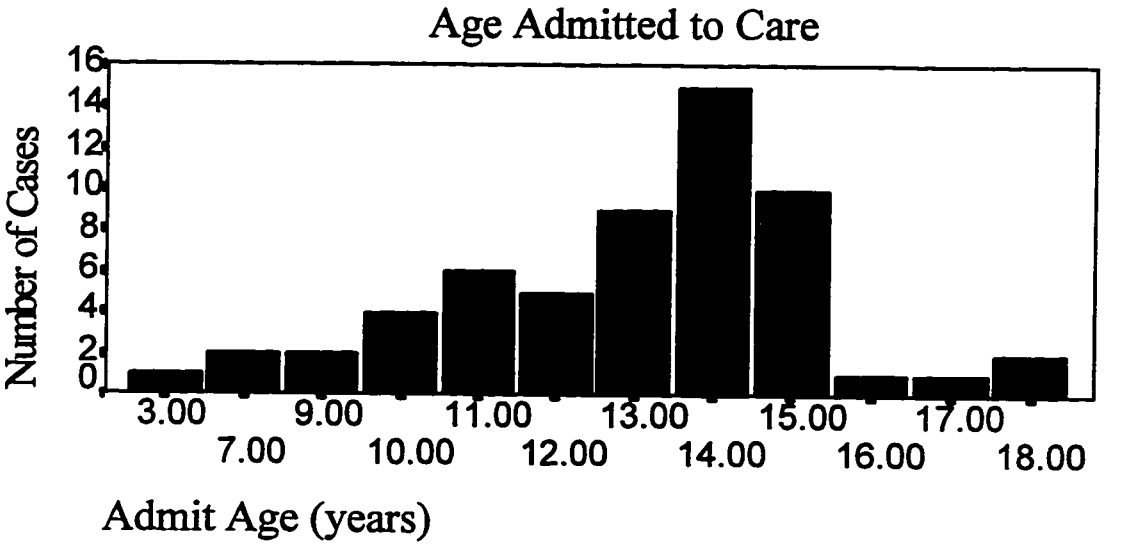
Insert Figure 2 here.

On January 31, 1997, adolescents had spent between 78 and 5, 265 days in the care of the C.A.S. ($\bar{X}$ = 2044, S.D. = 1052.2). During this time, the number of placements they experienced ranged from two to sixteen ($\bar{X}$ = 7.3, S.D. = 3.5).

Adolescents had between one and five workers while they were in care ($\bar{X}$ = 1.9, S.D. = 1) with most adolescents having had one worker (n = 21) or two workers (n = 24). (See Figure 3.) Twenty-two adolescents had direct contact with their worker less than once per month, 2 had contact on a monthly basis, and 34 had contact with their workers more than once per month.

Insert Figure 3 here.

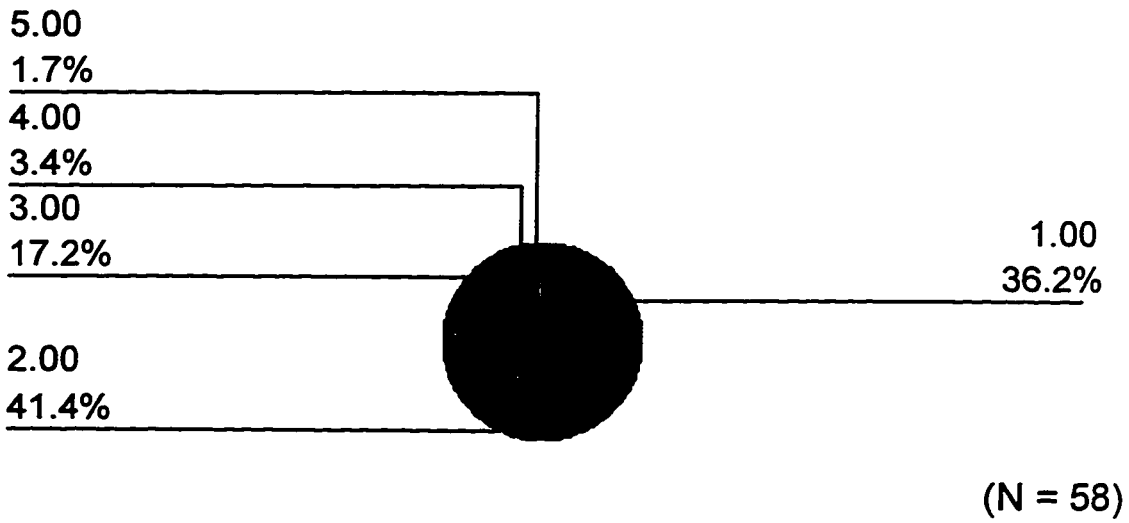
Figure 2.


Age Admitted to Care
Number of Cases
16
14
12
10
8
6
4
2
0
3.00
7.00
9.00
10.00
11.00
12.00
13.00
14.00
15.00
16.00
17.00
18.00
Admit Age (years)

(N = 58)

Figure 3.

Number of Workers Adolescents had While in Care



Throughout their time in care (N = 58), 28 adolescents maintained continuous contact with their parents, 18 had discontinuous contact but currently have contact, 11 had no contact, and one case was missing because of the adolescents' parents were dead. (See Figure 4.) In reviewing the case files, it appeared that the decision of whether or not to maintain parental contact was decided by either the parent(s)or by the individual adolescent. Forty-eight adolescents had contact with family members other than their parents, seven adolescents did not have any contact with extended family members and there were three cases of missing data (N = 58).

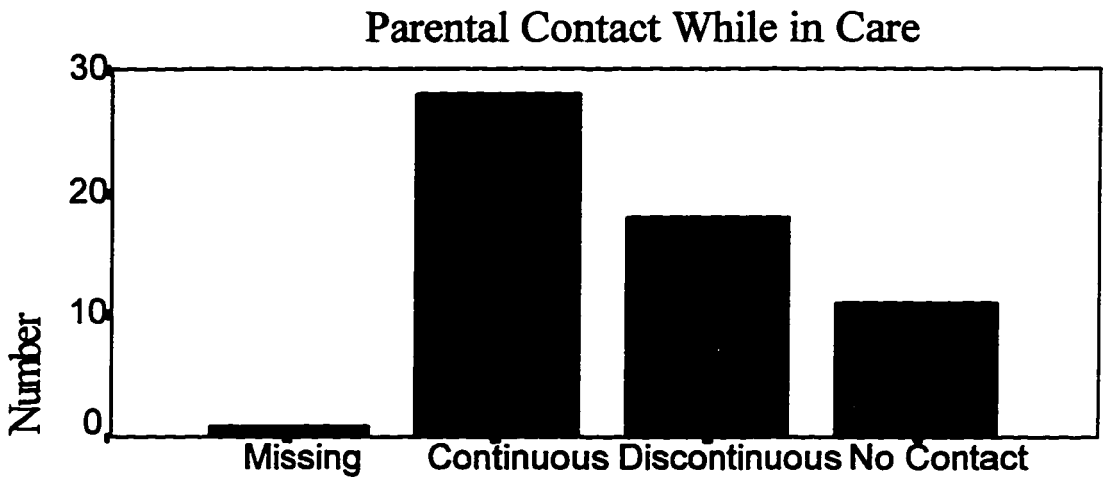
Insert Figure 4 here.

The majority of adolescents were on their first attempt at living independently (n = 38), however 15 adolescents were on their second attempt. The remainder of adolescents have attempted to live independently three or four times. (See Figure 5.) They have spent between one and 32 833 days in independent living.

Insert Figure 5 here.

With respect to education (N = 57), the highest grade that adolescents completed ranged from grade 7 to first year university. Most had completed grade 9 (n = 20) or grade 10 (n = 17). Five adolescents were enrolled in a modified school program. When one considers the age of adolescents in this study ($\overline{X}$ = 18.5), it is apparent that their

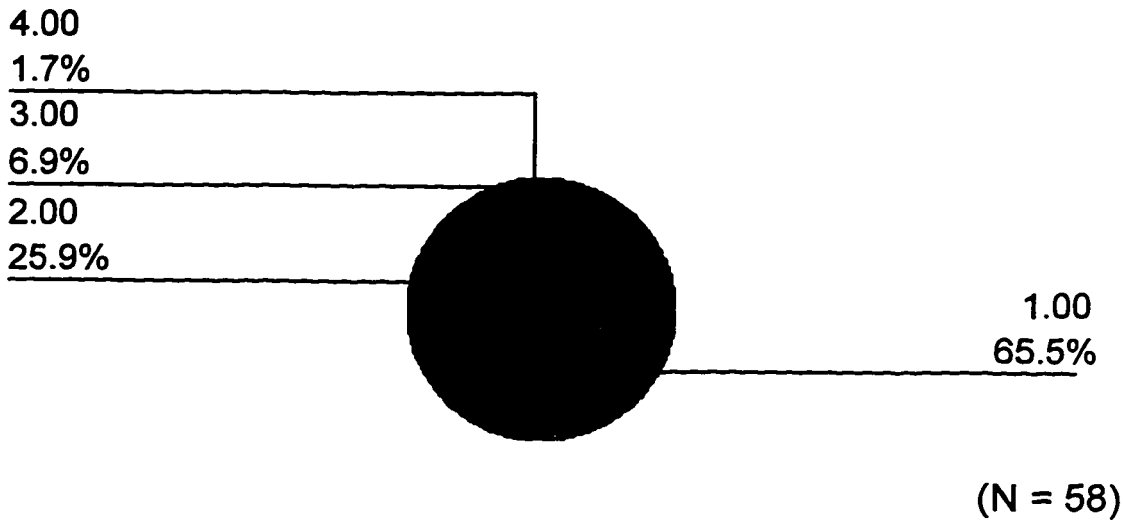
Figure 4.


Parental Contact While in Care
30
20
10
0
Number
Missing
Continuous
Discontinuous
No Contact
Type of Parental Contact

(N = 58)

Figure 5.

Number of Attempts at Living Independently



educational attainment is below that expected for their chronological age.

Regarding current occupational status, 19 adolescents were neither in school or working on January 31, 1997. Thirty-eight adolescents were either working or in school on a fulltime or part-time basis (or some combination thereof). As Figure 6 shows, 7 adolescents were in school fulltime & working part-time, 13 adolescents were in school fulltime, 6 adolescents were working fulltime, 4 were in school part-time & working part-time, none were in school part-time, 8 were working part-time, and 19 were not in school or working.

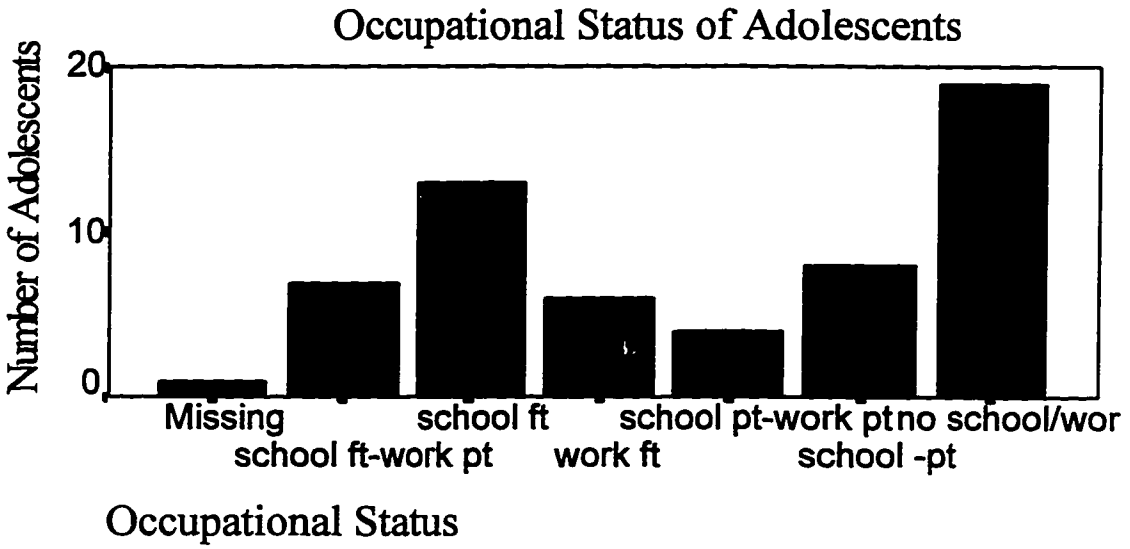
Insert Figure 6 here.

Adaptive Behaviour by Occupational Status

In order to ascertain adolescents' level of adaptive behaviour (as measured by the VABS) by their occupational status, one-way ANOVAs were calculated to determine whether there were differences between the seven levels of occupational status: adolescents in school fulltime & working part-time, in school fulltime, working fulltime, in school part-time & working part-time, in school part-time, working part-time, and neither in school or working; and the communication domain, the daily living skills domain, the socialization domain, and the VABS score.

There was a significant difference between scores on the communication domain and the occupational status of adolescents (F (5, 49) = 3.53, p. = .008). Table 1 summarizes the mean scores for the groups. The Duncan Test was used to determine

Figure 6.


Occupational Status of Adolescents
Number of Adolescents
20
10
0
Missing
school ft-work pt
school ft
work ft
school pt-work pt
school -pt
no school/wor
Occupational Status

(N = 57)

which occupational groups differed significantly from each other ($p < .05$). Results indicated that those adolescents who were not working or in school differed significantly from adolescents who were in school fulltime, those who were working fulltime, those who were in school part-time & working part-time, and those who were in school fulltime & working part-time. A Pearson product correlation between communication and occupational status was significant ($r = -.488$, $p. = .0001$) indicating that adolescents who were not in school or working were rated lower on the communication domain by their social workers, than their peers. The correlation matrix is located in Appendix B-2.

Insert Table 1 here.

There was a significant difference between adolescents' scores on the daily living skills domain and their occupational status (F (5, 49) = 2.94, $p. = .02$). The mean scores for each group are reported in Table 2. The Duncan Test ($p. < .05$) revealed that there were significant differences between adolescents who were not in school or working and those adolescents who were in school fulltime, those who were working fulltime, those who were in school fulltime & working part-time, and those who were in school part-time and working part-time. An occupational status by daily living skills correlation was significant ($r = -.432$, $p. = .001$) indicating that adolescent occupation was related to scores on the daily living skills domain. That is, those who were not in school or working were rated lower on the daily living skills domain than other adolescents.

Insert Table 2 here

Table 1.

Communication Domain Mean Score by Occupational Status (N = 55)

Group	Count (n)	Mean Score	S.D.
S-FT&W-PT	7	257.71*	7.2
School - FT	13	254.08*	7.4
Working - FT	6	254.50*	8.0
S-PT & W-PT	3	258.00*	7.8
School - PT	--	--	--
Working - PT	7	245.86	16.7
No School/Work	19	241.68	13.9

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that these groups were significantly different from the No School/Work group mean.

Table 2.

Mean Scores of Daily Living Skills Domain by Occupational Status (N = 55)

Group	Count (n)	Mean Score	S.D.
S-FT&W-PT	7	386.29*	14.1
School - FT	13	377.23*	10.0
Working - FT	6	381.33*	26.2
S-PT & W-PT	3	391.33*	7.0
School - PT	--	--	--
Working - PT	7	366.29	29.7
No School/Work	19	354.79	32.7

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that these groups were significantly different from the No School/Work group mean.

There was a significant difference between adolescents' occupational status and the overall VABS score (F (5, 49) = 3.84, p. = .005). Internal means calculated by the Duncan Test again demonstrated that there were significant differences (p. < .05) between those adolescents who were not in school or working, and those adolescents who were in school fulltime & working part-time, those who were in school or working on a fulltime basis, and those who were in school part-time & working part-time. The correlation between occupation and the overall VABS score was significant (r = -.4891, p. = .0001). Thus, it would appear that adolescents who were working or in school were rated higher by their social workers on their overall level of adaptive behaviour than their peers who were not working or in school. The mean scores for each group are presented in Table 3.

Insert Table 3 here.

There was no significant difference between adolescents' occupational status and their scores on the socialization domain.

Table 3.

Mean Scores on the VABS by Occupational Status (N = 55)

Group	Count (n)	Mean Score	S.D.
S-FT&W-PT	7	891.00*	28.49
School - FT	13	874.62*	20.06
Working - FT	6	881.17*	43.49
S-PT & W-PT	3	894.67*	28.31
School - PT	--	--	--
Working - PT	7	862.00	62.31
No School/Work	19	829.63	48.39

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that these groups were significantly different from the No School/Work group mean.

In order to assist the C.A.S. with program planning, an item-analysis was conducted to determine on which specific items of the VABS there was significant differences by occupational status. With respect to the communication domain, adolescents differed on item 2, expressing complex ideas; item 3, beginning to read; item 6, using reading materials; and item 8, writing letters and reports. With respect to the daily living skills domain, adolescents differed on item 7, making bed; item 15, earning money; and item 17, job skills. On the socialization domain, adolescents significantly differed on item 4, belonging to groups and item 6, going places with friends independently. On each of these items, adolescents who were not in school or working were rated with significantly lower adaptive behaviour than their peers. Appendices B-3a to B-3i summarizes the mean differences between the groups.

Demographic Variables which Differentiate Adolescents Occupational Status

In order to determine which demographic variables were potential predictors of occupational status, one-way ANOVAs were run to determine whether there were significant differences between the occupational status and: [the gender of an adolescent, the age of an adolescent, the reason an adolescent was placed in care, the adolescent's age at entry into care, the frequency of parental and other family contact, the frequency of caseworker contact and turnover, and the highest level of education achieved by an adolescent]. There was a significant difference between adolescents' occupational status and the level of education that they had achieved. There were no significant differences found for the other variables.

There was a significant difference between the occupational status of adolescents

and the highest level of education they had achieved (F (5, 50) = 2.82, p. = .025). An examination of the differences between group means by using the Duncan Test indicated that there was a significant difference between adolescents who were not in school or working and those adolescents who were: (a) in school fulltime **and** working part-time, (b) in school part-time **and** working part-time. The mean grade levels achieved for each occupational level are summarized in Table 4. There was a significant negative relationship between occupation and gender (r = -.345, p. = .009) indicating that adolescents who were not in school or working had lower educational achievement than their peers who were working or in school.

Insert Table 4 here.

Table 4.

Education Level by Occupational Status (N = 55)

Group	Count (n)	Mean Score	S.D.
S-FT&W-PT	7	11*	0.63
School - FT	13	10.08	1.12
Working - FT	6	10.16	0.75
S-PT & W-PT	3	11.25*	1.50
School - PT	--	--	--
Working - PT	7	10.12	1.25
No School/Work	19	9.21	1.65

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that these groups were significantly different from the No School/Work group mean.

Potential Predictors to Occupation

The variables of communication, daily living skills, overall VABS score, and grade which were identified to be significantly correlated with occupational status and which also differentiated adolescents by their occupational status, were entered into a multiple step-wise regression analysis. From the regression procedure, the VABS score followed by grade, communication, and daily living skills were found to be significantly related to adolescents' occupational status ($R = 0.538$, F (4, 49) = 4.99, p. = .002). The adjusted R^2 was 0.23 indicating that 23% of the variance in occupational status was accounted for by these four variables. Table 5 contains the results from the computer generated regression.

Insert Table 5 here.

In summary, adolescents in this study were a mean age of 18.5 with a grade nine or ten level of education. Most were on their first attempt at living independently and most had contact with their families. Thirty-eight youth were in school or working, 19 were not. The communication domain, the socialization domain, the overall VABS score, and the grade level of adolescents differed significantly by their occupational status.

Table 5.

Summary of Stepwise Multiple Regression for Adolescent Occupational Status (N = 54)

Variable	B	SE B	Beta
Communication	- .077	.067	-.419
Daily Living Skills	-.028	.042	-.314
Grade	-.199	.240	-.121
VABS	0.010	.036	.216
Constant	26.578	6.02	

Discussion

The results from this study indicate that there are variables which differentiate between foster adolescents' occupational status in independent living. Specifically, the level of adaptive behaviour on the communication domain, the daily living skills domain, and the overall VABS score differed significantly depending on whether an adolescent was: in school fulltime & working part-time, in school fulltime, working fulltime, in school part-time & working part-time, in school part-time, working part-time, or not in school or working. In addition, the level of education adolescents had achieved also differentiated between their occupational status.

A closer examination of the specific VABS items on which adolescents differed by occupational status indicated that there were items from all domains which were significantly different for adolescents. Items from these domains will be discussed.

With respect to the communication domain, the items on which adolescents differed included: ability to express complex ideas, beginning to read, using reading materials, and writing letters and reports. The general relationship between the occupational groups was that adolescents who were neither in school or working were more likely to be rated lower on these items than their peers.

In effect, items on the communication domain reflect the fact that adolescents who have little direction (as evidenced by their lack of occupation) are also less able to communicate effectively with others. That is, they are less articulate both in terms of their verbal and written communication. Furthermore, their reading skills are less developed

than their peers. This combination of no occupational status and therefore, no direction, along with poor communication skills, may place these adolescents at risk for the myriad of difficulties which were outlined by previous writers e.g., homelessness, poverty, and mental illness (Raychaba, 1988; Inglehart, 1994; Hahn, 1994; Meston, 1988; Cook, 1994; Aldgate, 1994; Hahn, Curan & Best, 1990; and Kendrick, 1990).

Related to the fact that adolescents differed in their ability to effectively articulate themselves and their level of literacy, is the fact that adolescents who were not working or in school had a significantly lower level of education than their peers. These results should be interpreted cautiously however, because the average grade level completed for adolescents in school or working was grade ten.

When one considers the age of adolescents ($\overline{X} = 18.5$) in this study, it is evident that their educational attainment is below what is expected for their chronological age. Thus, even those who were in school or working appeared to be struggling with respect to educational achievement. This finding supports other studies where educational achievement was lacking for adolescents in the foster care system (Kendrick, 1990; Cook, 1994; Aldgate, 1994; Hahn, 1994; and Inglehart, 1994). It would appear that a focus on education, which, in turn, would increase adolescents' level of adaptive communication, should become a focus for Halton Region's C.A.S.

The items from the daily living skills domain on which adolescents were significantly different included: making bed, earning money, and job skills. The fact that adolescents differed in terms on whether or not they made their bed did not seem as relevant as the fact that they differ in terms of their ability to earn money, as well as in

terms of their level of job skills knowledge.

With respect to earning money, adolescents who were in school fulltime & working part-time, and those who were working fulltime or part-time were rated as showing more initiative to find ways to earn money than adolescents who were not in school or working. In addition, adolescents who were working fulltime had significantly higher scores than adolescents who were in school fulltime. Inglehart (1994) identified the importance of work for attaining a beginning sense of financial independence, as one of the tasks that adolescents strive for into young adulthood. Consequently, the initiative to find ways of earning spending money is an indication of higher levels of adaptive behaviour.

Indeed the significantly different results between occupational status and job skills knowledge supports this idea. Included in the category of job skills knowledge are items such as, arrives at work on time, notifies supervisor if arrival at work will be delayed or absent due to illness, obeys time limits for coffee breaks and lunch, and holds fulltime job responsibly. Again, adolescents who were not in school or working had significantly lower scores than adolescents who were in school fulltime & working part-time, working fulltime, and in school part-time & working part-time.

The implication is that adolescents who have low levels of life-skills knowledge are also unlikely to find or to keep a job. Inglehart (1994) identified the importance of work for giving adolescents a sense of purpose, as well as a sense of independence. He also stated that work is important for social identification. Moreover, Marcia (1980) identified having an occupation or a clear goal as one feature of adolescents successfully

negotiating the identity conflict. In order to assist adolescents and to increase the likelihood of successful emancipation therefore, Halton Region may want to provide more intense job skills training.

Acknowledging that social workers cannot be expected to provide all of the skills necessary for adolescents as they move toward young adulthood, as well as the fact that many social workers are already overextended, the use of volunteers and partnerships with community businesses have been suggested in the literature as alternative ways to provide adolescents with the necessary skills (Mech & Leonard, 1988; North, Mallabar & Desroches, 1988). These may be options for Halton Region to explore.

The results from this study, thus far, support Hahn's (1994) contention that if foster adolescents are to mature into competent and competitive adults in society, then child welfare workers need to shift some of the focus from *soft skills* to the development of *hard skills* such as education and employment. Moreover, it would appear from the findings of Marcia (1980) and Inglehart (1994) that the effects of competence in education and employment will spill over to the soft skills. Specifically, adolescents who feel good about their job or education are likely to better about themselves and their situation. They are at less risk for identity diffusion.

In this study, adolescents who were not in school or working also differed from their peers with respect to whether they belonged to a peer group and whether they went places independently with others. Adolescents who were not in school or working were unlikely to belong to a peer group or to attend social functions.

Erikson (1959) and Muss (1980) identified the importance of the peer group

during adolescence for the successful resolution of the identity conflict. The peer group is used by an adolescent to try out different roles. It is a place where adolescents receive meaningful feedback (Muss, 1980). When adolescents do not have the opportunity to experiment with their identity, their ability to consolidate who they are as they enter adulthood is reduced (Muss, 1980; Marcia, 1980). The result is identity diffusion which is characterized, in its most severe clinical form, as psychopathology (Muss, 1980). Adolescents in independent living who do not have a peer group are at risk of not resolving the identity crisis.

The transiency associated with the child welfare system (Kendrick, 1990), as well as the disruptions that foster adolescents' experience prior to their placement suggest that many adolescents en route to living independently may not have a peer group from whom to draw support or with whom they can try out their various roles. It may be advisable for Halton Region, whenever possible, to encourage adolescents to find accommodation proximate to their school, place of employment, or family in order to reduce disruption and isolation, and so that friendship networks can be maintained as much as possible.

Given that the VABS is useful for differentiating between the occupational status of adolescents, it follows that it could be implemented as an assessment instrument for social workers. That is, social workers could administer the VABS in order to assess the adaptive behaviour of adolescents prior to their emancipation from care. As a result, the scale would highlight areas where further development and training should occur and, as a result, individual program planning could be implemented. The ideal outcome of this intervention is that adolescents would be better prepared for independent living when it

becomes an option for them. The targeting of specific behaviours has been suggested by Cook (1994).

In addition to the use of the VABS as an assessment instrument prior to adolescent emancipation from care, the VABS can also be used to periodically assess adaptive behaviour levels throughout an adolescent's time in independent living. Hence, adolescents who enter independent living at age 16 can be followed through to adulthood. Any difficulties they encounter can be identified early and interventions can take place as appropriate. In effect, social workers may be able to reduce the severity of potential difficulties by identifying and intervening at an early date.

Finally, because the VABS is a standardized measure that is valid and reliable, it can be used by the agency to compare populations of adolescents moving through independent living. The potential to define typical strengths and weaknesses of adolescents prior to their emancipation and as they progress through independent living can provide valid information to agencies. This information can be used for program development.

The use of the VABS as an assessment instrument for program and individual planning seems especially important when one considers the stigma associated with being in foster care and the disadvantage at which foster adolescents start vis à vis preparation for their adult life (Raychaba, 1988; Kendrick, 1990). For example, because many youths experience multiple placements they lose opportunities for informal learning, for forming and maintaining friendships, and for practising life-skills. In addition, because of low self-esteem youth may fear failure and resist practising the skills that they have been

taught (North, Mallabar & Desroches, 1988).

In order for these adolescents to become self-sufficient, to have healthy self-esteem, and to avoid the maladies associated with foster care as outlined by other researchers, they need to be competent at the hard skills defined by Inglehart (1994). At the very least, in this writer's opinion, completion of high school seems necessary. With a high school diploma, adolescents have more options available to them. Hence, they are not necessarily destined to menial labour or unemployment (Kendrick, 1990).

The litany of negative consequences for adolescents in independent living infer that preparing youth for independent living should be a primary concern for foster care programs. According to Meston (1988), once a decision is made to remove a child from the home, an obligation exists for the state to properly complete the undertaking.

For adolescents in independent living, this means that agencies should impart the necessary skills to adolescents prior to their emancipation. Furthermore, because preparation occurs along a continuum (Cook, 1988), agencies have a responsibility to ensure that adolescents are managing the task of living independently until they are 21 years of age. It is anticipated that the use of the VABS, in conjunction with a focus on educational achievement can assist social workers in Halton Region with these tasks.

Conclusion

This study identified four potential predictors of occupational status for adolescents who are in independent living in Halton Region. These include the level of adaptive behaviour on the communication and daily living skills domains of the VABS, as well as the overall rating of adaptive behaviour (VABS). In addition, the level of

education achieved is also a potential predictor of adolescents' occupation in independent living. An item-analysis of the VABS identified specific areas in which Halton Region's C.A.S. can focus training for individual planning, as well as focus attention for program planning.

Specifically, a focus on the educational achievement and the literacy of adolescents needs to become a priority. It would appear that the focus on education by workers often pertains to an adolescent's behaviour in the classroom and not necessarily to an adolescent's academic achievement. In addition, Aldgate (1994) noted that it is not uncommon for social workers to have low expectations with respect to the academic achievement of foster adolescents. Aldgate (1994) further contended that because foster adolescents are not expected to achieve academically, they do not. In an attempt to break this cycle, social workers should demonstrate an interest in the academic performance of adolescents in addition to concern for their classroom behaviour. Academic strengths should also be noted in case notes and acknowledged by workers.

Moreover, results from this study indicate that a method of teaching adolescents job skills should be explored and implemented subject to the limitations and feasibility within the agency. For instance, the development of links with other community agencies who offer job skills training, as well as with local businesses and/or volunteer mentors employed in an area of interest to an adolescent, would allow an adolescent to learn job skills first-hand. It is possible that the experience adolescents obtain through training, volunteer work and connections with mentors would assist them to gain the necessary experience for obtaining paid employment and would also increase their job skills

knowledge.

The suggestions outlined with respect to education and job skills training are not proven methods of enhancing academic achievement or of increasing job skills knowledge. In addition, the practicality of the suggestions is unknown. That is, they may not be feasible options for Halton Region. It is suggested that outcome research addressing whether or not interventions employed by Halton Region to enhance adolescents' educational achievement and job skills training be conducted. As a result, methods that appear to be working can be refined and methods which do not appear to be working can be modified.

Finally, given the transiency of the foster care system and the number of disrupted attachments that foster adolescents have experienced, there needs to be an emphasis on developing and maintaining links between adolescents and the community. This could be accomplished by providing job skills seminars for these adolescents (perhaps having community guest speakers) or by linking services with a youth drop in center e.g., arranging times for foster youth to drop in should they want to converse with a peer who is in a similar situation. Future research should be conducted to determine whether suggestions are effective. Research might also be used to ask the adolescents what they think would be helpful.

It is hoped that these interventions, which target both individual adolescents and the population of adolescents in independent living, will increase adolescents' level of adaptive behaviour. In turn, it is anticipated that adolescents will be more likely to remain in school or to have employment, thereby reducing the chance of identity diffusion and

and increasing the opportunity for greater success in life which is often characterized by occupational status.

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Appendix A

Test Instruments

Appendix A-1

About the Individual:

Name: _____ Gender: _____ Age: _____

Date: _____ Case File #: _____ Date of Birth (mm/dd/yy): _____

Highest grade **completed** (e.g., the adolescent may currently be in grade 10, therefore the completed grade would be grade 9) _____

Is the adolescent in a special program at school (e.g., Section 27) Yes ____ No ___

Occupational Status:

Registered in school fulltime & working part-time _____

Registered in school fulltime _____

Working fulltime _____

In school part-time & working part-time _____

In school part-time _____

Working part-time _____

Neither in school or working at the present time _____

Instructions:

For each area of behaviour you will be asked to rate the skills of the adolescent for whom you are responding to this questionnaire. Some items are arranged along a continuum from no skills to adult level skills and others are a list of skills which are associated with the identified task. For most of the adolescents on your caseloads they will have mastered most. If not all of the steps, however some adolescents may not have fully developed skills at this time. Please score each item to reflect the adolescent's skill

level as follows:

2 = yes, usually 1 = sometimes, partially 0 = No, never

N = no opportunity to observe DK = Don't know

Try to answer every question as accurately as possible remembering that you are answering with respect to the adolescent's actual behaviour and not to their potential level of behaviour. Please complete the enclosed questionnaires by **Thursday March 27, 1997.** Thank you for your involvement in this project.

COMMUNICATION DOMAIN

1) Uses regular plural nouns _____

2. Uses present tense verbs ending in "ing." _____

3. Uses regular past tense verbs _____

4. Uses past tense verbs with other words to tell about past events _____

5. Uses irregular past tense verbs correctly _____

6. Uses irregular plurals _____

SUM_____

2) Expressing complex ideas

1. Expresses ideas in more than one way, without assistance _____

2. Gives complex directions to others _____

3. Has realistic long-range goals and describes in detail plans to achieve them _____

SUM_____

3) Beginning to read

1. Reads at least three common signs _____

2. Reads simple stories aloud _____

3. Reads simple stories aloud, with ease, when asked _____

4. Reads on own initiative _____

SUM_____

4) Beginning to write

1. Prints or writes at least 10 words from memory _____
2. Prints or writes simple sentences or 3 or 4 words _____
3. Prints or writes at least 20 words from memory _____
4. Prints or writes more than 20 words from memory _____
5. Prints or writes short notes or messages _____

SUM_____

5) Printing and cursive

1. Copies at least five letters of the alphabet from a model _____
2. Prints or writes own first and last name _____
3. Writes in cursive some of the time _____
4. Writes in cursive most of the time _____

DO NOT SCORE 1.

SUM_____

6) Using reading materials

1. Arranges items or words alphabetically by first letter _____
2. Uses a dictionary _____
3. Uses the table of contents in reading materials _____
4. Uses the index in reading materials _____

SUM_____

7) Reading books, newspapers, and magazines

1. Reads books of at least second-grade level _____
2. Reads books of at least fourth-grade level _____
3. Reads material of at least fourth-grade level on own initiative _____
4. Reads adult newspaper stories N MAY BE SCORED _____
5. Reads adult newspaper or magazine stories each week N MAY BE SCORED _____

SUM_____

8) Writing letters and reports

1. Writes beginning letters DO NOT SCORE 1 _____
2. Writes reports or compositions DO NOT SCORE 1 _____
3. Addresses envelopes completely _____
4. Writes advanced letters _____
5. Writes business letters DO NOT SCORE 1 _____

SUM_____

DAILY LIVING SKILLS DOMAIN

1) Wearing clothing appropriate for weather

1. Demonstrates interest in changing clothes when very wet or muddy _____
2. Wears clothing appropriate for cold weather without being reminded _____
3. Wears clothing appropriate for rainy weather without being reminded _____
4. Dresses in anticipation of changes in weather without being reminded _____

SUM_____

2) Beginning health care

1. Covers mouth and nose when coughing and sneezing _____
2. Cares for minor cuts without assistance _____
3. Avoids persons with contagious illnesses, without being reminded _____

SUM_____

3) Advanced health care

1. Takes own medicine appropriately _____
2. Uses oral thermometer without assistance _____
3. Looks after own health _____

SUM_____

4) Using tools

1. Makes simple repairs on broken toys or possessions _____
2. Uses basic tools _____

SUM_____

5) Using kitchen appliances

1. Uses simple appliances in food preparation without assistance _____
2. Uses sharp knife to cut food _____
3. Uses stove or microwave oven for cooking _____

SUM_____

6) Using equipment and household cleaning products

1. Follows written instructions when using new equipment _____
2. Uses household cleaning products appropriately and correctly _____

SUM_____

7) Making bed

1. Attempts to make own bed when asked _____
2. Makes own bed when asked _____
3. Makes own bed routinely _____
4. Makes own bed and changes bedding routinely. DO NOT SCORE 1 _____

SUM_____

8) Advanced housecleaning

1. Sweeps, mops or vacuums floor carefully without assistance, when asked _____
2. Cleans room other than own when asked _____
3. Straightens own room without being reminded _____
4. Cleans room other than own regularly, without being asked _____

SUM_____

9) Household repairs and maintenance

1. Performs routing household repairs and maintenance tasks when asked _____
2. Performs routine household repairs and maintenance tasks without being asked

_____

SUM_____

10) Cooking

1. Prepares and cooks basic foods that do not require mixing _____
2. Explains value of balanced meal _____
3. Prepares foods that require mixing and cooking, without assistance _____
4. Plans and prepares main meal of the day without assistance _____

SUM_____

11) Caring for clothes

1. Puts own clothes away without being reminded _____
2. Washes own clothes _____
3. Takes complete care of own clothes without being reminded DO NOT SCORE 1

_____

SUM_____

12) Sewing

1. Sews buttons, snaps, or hooks on clothes when asked _____
2. Sews buttons, snaps, or hooks on clothes without being asked and without assistance

_____

3. Mends simple tears without being asked and without assistance _____
4. Sews own hems or makes other alterations without being asked and without assistance

_____

SUM_____

13) Safety at home

1. Demonstrates understanding that hot things are dangerous _____
2. Demonstrates understanding that electrical outlets and light sockets are dangerous

_____

3. Asks whether unfamiliar item is safe to touch or consume _____
4. Demonstrates understanding that it is unsafe to accept rides, food, or money from strangers

_____

SUM_____

14) Saving Money

1. Saves money for specific purchase _____
2. Saves money on general principle _____
3. Saves for and has purchased at least one major recreational item _____

SUM_____

15) Earning money

1. Works for neighbour or friend to earn money _____
2. Sells products to earn money _____
3. Earns spending money on a regular basis _____

SUM_____

16) Budgeting

1. Budgets for daily expenses _____
2. Budgets for weekly expenses _____
3. Budgets and economizes for groceries and other expenses _____
4. Shops comparatively for household products, services, and personal items _____
5. Budgets for monthly expenses _____

SUM_____

17) Job Skills

1. Arrives at work on time _____
2. Notifies supervisor if arrival at work will be delayed _____
3. Notifies supervisor when absent because of illness _____
4. Obeys time limits for coffee breaks and lunch at work _____
5. Holds full time job responsibly DO NOT SCORE 1 _____

SUM_____

18) Managing money

1. Manages own money without assistance _____
2. Has checking account and uses it responsibly _____

SUM_____

SOCIALIZATION DOMAIN

1) Responding to social communication

1. Laughs or smiles appropriately in response to positive statements _____
2. Responds verbally to social small talk imitated by adults _____
3. Responds verbally and positively to good fortune of others _____

SUM_____

2) Initiating social communication

1. Converses with others on topics of mutual interest _____
2. Initiates social small talk with meeting acquaintances _____

3.Initiatessconversationss on topics of particular interest to others _____

SUM_____

3) Cooperative interactions

1. Has cooperative relationships with friends _____
2. Places only reasonable demands on friendship _____
3. Responds to hints or indirect cues in conversation _____

SUM_____

4) Belonging to groups

1. Has a group of friends _____
2. Forms or joins social clubs with others _____
3. Belongs to young adolescent organized club, interestgroup0, or social or service organization _____
4. Belongs to older adolescent organized club, interest group, or social or service organization _____

SUM_____

5) Dating

1. Attends chaperoned parties for both sexes _____
2. Goes with one person of opposite sex to party or public event where many people are present _____
3. Goes on double or triple dates _____
4. Goes on single dates _____

SUM_____

6) Going places with friends independently

1. Refrains from frequently asking what to do _____
2. Does things with friends spontaneously _____
3. Plans ahead to meet friends _____
4. Goes to evening school or facility events with friends, without adult supervision_____

N MAY BE SCORED

5. Goes to evening nonschool or nonfacility events with friends without adult supervision _____

SUM_____

COPING SKILLS DOMAIN

1) Controlling impulses

1. Controls anger or hurt feelings when plans are changed for unavoidable reasons _____
2. Controls anger or hurt feelings when denied own way _____
3. Controls anger or hurt feelings at constructive criticism _____
4. Independently weighs consequences of actions before making decisions _____

SUM____

2) Apologizing

1. Apologizes for unintentional mistakes _____
2. Apologizes for hurting feelings of others _____
3. Apologizes for unintentional slights _____
4. Apologizes for mistakes or errors in judgment _____

SUM____

3) Borrowing and returning

1. Returns borrowed toys, possessions, or money to peers or returns borrowed books to library _____
2. Repays money borrowed from caregiver _____

SUM____

4) Making and keeping appointments

1. Makes own appointments _____
2. Repays money borrowed from caregiver _____

SUM____

Appendix A-2

March 14, 1997.

To Whom it May Concern,

The workers of Halton Children's Aid Society are currently engaged in joint research with Dr. Robert D. Seim of the University of Waterloo, Dr. Anne Westhues of Wilfrid Laurier University, and myself, Marissa Amoroso. The focus of this study, which I am carrying out to meet the requirements for my Master of Social Work degree at Wilfrid Laurier University, is to develop a profile of adolescents who are living independently. It is hoped that we will be able to identify where we need to provide more life-skills training for adolescents who are getting ready to live on their own.

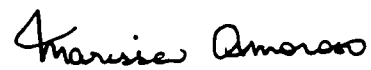
In order to develop the profiles, we are asking for your cooperation in allowing us to collect information from your files (for example, your age and how long you have been living independently). Results of the research will be reported in the form of group means and differences. You will not be identified in the collection, analysis, or reporting of the data. That is, your name and any other identifying information will not be reported anywhere. For instance, if we were to report on the average age of people living independently, we would say something like "People living independently in Halton Region are, on average, 15 years old."

All information from your files will be kept in the strictest confidence and will only be seen by the research team. No other persons will see the information from your file. For that reason, we are requesting that you sign and return the enclosed consent form in the self-addressed envelope by **March 27, 1997.**

The ethical guidelines for this project have been approved by the Department of Social Work, Wilfrid Laurier University. If you have any questions about the completion of this request, please ask your worker. If further information is required, then your worker will contact Dr. Robert Seim who will return your call.

Thank you for your involvement in this project. We hope that the information that you provide will help us to plan well for adolescents who are getting ready to move into independent living.

Yours sincerely,



Marissa Amoroso (Investigator)

CONSENT FORM

I understand that I am being asked to participate in a research study which is being conducted by Marissa Amoroso under the supervision of Dr. Anne Westhues of Wilfrid Laurier University and Dr. Robert D. Seim of the University of Waterloo.

The purpose of this study is to better understand and prepare adolescents to live independently.

I understand that there are no risks involved in this study.

I understand that my participation is voluntary. I may refuse to participate in this study without penalty to me. I understand that my records will be kept confidential because no identifiable information will be included and that I will not be identified in any discussion or written documents.

I understand that I have the right to have all questions about the study answered by the researcher or research advisors in sufficient detail to clearly understand the answer.

If I have any questions about the research, the procedures employed, my rights, or any other research related concerns, I may contact the investigator and/or her supervisors.

I acknowledge receiving a copy of informed consent.

Marissa Amoroso

Marissa Amoroso (Investigator)

Date: _____

_____

Your Signature

Appendix B

Summary of Statistics Tables

Appendix B-1

Table B-1a.

Descriptive Statistics for Adolescent Profiles

Variable	N	Mean	S.D.	Minimum	Maximum
Admit Age (months)	58	176.26	30.11	99	244
Admit Age (years)	58	12.89	2.64	3	18
Age (months)	58	239.57	14.93	206	261
Age (years)	58	18.5	1.25	16	20
Attempts	58	1.44	0.71	1	4
# placements	58	7.26	3.50	2	16
# workers	58	1.90	0.92	1	5
Time in Care (days)	58	2044.03	1052.22	78	5265
Time in IL (Days)	58	1157.86	4253.08	1	32833

Table B-1b.

Summary of Family Contact (N = 55)

Extended Family Contact	Frequency	Percent
Contact	48	82.8
No Contact	7	12.1
Missing	3	5.2
Total	58	100

Table B-1c.

Gender of Adolescents in Independent Living (N = 58)

Gender	Frequency	Percent
Male	33	56.9
Female	25	43.1
Total	58	100

Table B-1d.

Adolescents in a Modified School Program (N = 58)

School Program	Frequency	Percent
Modified Program	5	8.6
Regular School Program	53	91.4
Total	58	100

Table B-1e.

Type of Parental Contact (N = 57)

Type of Contact	Frequency	Percent
Continuous	28	48.3
Discontinuous	18	31
No Contact	11	19
Total	57	100

Table B-1f.

Frequency of Worker Contact (N = 58)

Type of Contact	Frequency	Percent
Less than Monthly	22	37.9
Monthly	2	3.4
More than Monthly	34	58.6
Total	58	100

Table B-1g.

Reason Child Admitted to Care

Reason	Frequency	Percent
Family Breakdown	1	1.7
Parent/Child Conflict/Aggress	4	6.9
Adult/Spousal Conflict/Violence	1	1.7
Allg'd Physical Neglect/Child	2	3.4
Allg'd Physical Abuse/Child	4	6.9
Allg'd Sexual Abuse of Child	4	6.9
Verified Physical Abuse/Child	1	1.7
High Risk of Abuse	2	3.4
Child Deserted by Legal	1	1.7
Guardian		
Supervision of ex-CW	3	5.2
Mental/Emotional Health/Child	4	6.9
Child's Disruptive Behaviour	1	1.7
Child's Sexual Behaviour	1	1.7
Child Refusing to be at Home	3	5.2
Lack Willingness to Care	3	5.2
Lack Parenting Skills	1	1.7
Orphaned/Abandoned Child	3	5.2
Sexual Abuse or Risk of	1	1.7
Parent/Child Conflict	14	24.1
Child Behaviour Problem	4	6.9
Total	58	100

Appendix B-2

- - Correlation Coefficients - -

	ADMITAGE	AGE	ATTEMPTS	COMMUNIC	DLIVSKIL	FAMCON
ADMITAGE	1.0000	.0193	.0954	.1897	.1413	-.1517
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .	P= .886	P= .476	P= .165	P= .304	P= .269
AGE	.0193	1.0000	.1907	.0654	.2260	.1828
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .886	P= .	P= .152	P= .635	P= .097	P= .182
ATTEMPTS	.0954	.1907	1.0000	-.0488	-.0160	.3708
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .476	P= .152	P= .	P= .723	P= .907	P= .005
COMMUNIC	.1897	.0654	-.0488	1.0000	.7020	-.3065
	(55)	(55)	(55)	(55)	(55)	(52)
	P= .165	P= .635	P= .723	P= .	P= .000	P= .027
DLIVSKIL	.1413	.2260	-.0160	.7020	1.0000	-.2451
	(55)	(55)	(55)	(55)	(55)	(52)
	P= .304	P= .097	P= .907	P= .000	P= .	P= .080
FAMCON	-.1517	.1828	.3708	-.3065	-.2451	1.0000
	(55)	(55)	(55)	(52)	(52)	(55)
	P= .269	P= .182	P= .005	P= .027	P= .080	P= .
GENDER	.1995	.0865	.0893	.0843	.1916	-.0891
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .133	P= .518	P= .505	P= .541	P= .161	P= .518
GRADE	.0935	.3024	-.2154	.5183	.3695	-.1057
	(57)	(57)	(57)	(54)	(54)	(54)
	P= .489	P= .022	P= .108	P= .000	P= .006	P= .447
MODIFIED	.1265	-.0206	.1091	.0614	-.0158	-.3132
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .344	P= .878	P= .415	P= .656	P= .909	P= .020
NUMPLACE	-.2329	.0333	.1877	-.0955	-.1040	.0091
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .078	P= .804	P= .158	P= .488	P= .450	P= .948
NUMWORK	.3447	-.4452	.0216	-.0485	-.2039	-.1344
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .008	P= .000	P= .872	P= .725	P= .135	P= .328

(Coefficient / (Cases) / 2-tailed Significance)

" . " is printed if a coefficient cannot be computed

- - Correlation Coefficients - -

	ADMITAGE	AGE	ATTEMPTS	COMMUNIC	DLIVSKIL	FAMCON
OCSTATUS	.0035	.1703	.2634	-.4883	-.4323	.2119
	(57)	(57)	(57)	(55)	(55)	(54)
	P= .979	P= .205	P= .048	P= .000	P= .001	P= .124
PARCON	-.1154	-.0612	.1539	-.1382	.0202	.5672
	(57)	(57)	(57)	(54)	(54)	(54)
	P= .393	P= .651	P= .253	P= .319	P= .885	P= .000
REASONAD	.2998	.1311	.2705	-.0599	-.1033	.0021
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .022	P= .326	P= .040	P= .664	P= .453	P= .988
SOCIALZ	.1725	.1792	-.0958	.7632	.6078	-.1544
	(55)	(55)	(55)	(55)	(55)	(52)
	P= .208	P= .190	P= .487	P= .000	P= .000	P= .274
TIMECARE	-.8947	.4072	.0110	-.1346	-.0102	.2294
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .000	P= .002	P= .935	P= .327	P= .941	P= .092
TIMEIL	.0643	.2303	.1061	-.1165	-.0645	-.0580
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .631	P= .082	P= .428	P= .397	P= .640	P= .674
VAB	.1796	.1963	-.0485	.8828	.9308	-.2666
	(55)	(55)	(55)	(55)	(55)	(52)
	P= .189	P= .151	P= .725	P= .000	P= .000	P= .056
WORKCON	.2017	.1132	.2727	.1134	.0159	-.1833
	(58)	(58)	(58)	(55)	(55)	(55)
	P= .129	P= .397	P= .038	P= .410	P= .908	P= .180

(Coefficient / (Cases) / 2-tailed Significance)

" . " is printed if a coefficient cannot be computed

Appendix B-3

Table B-3a.

Mean Scores on Item 2 of the Communication Domain by Occupational Status.

Expressing Complex Ideas (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	5.42*	.79
School - FT	13	5.00*	.71
Working - FT	6	5.00*	1.26
S-PT & W-PT	3	5.33	1.15
School - PT	--	--	--
Working - PT	7	4.00	1.29
No School/Work	18	3.78	1.40

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that scores for the first three groups were significantly different from the last group. There was also a significant difference between those working part-time and those in school fulltime & working part-time.

Table B-3b.

Mean Scores on Item 3 of the Communication Domain by Occupational Status.

Beginning to Read (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	7.57*	.79
School - FT	13	6.85	1.14
Working - FT	6	7.50*	0.84
S-PT & W-PT	3	8.00	.00
School - PT	--	--	--
Working - PT	7	5.86	2.12
No School/Work	18	5.50	2.53

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that scores for those in school fulltime & working part-time, as well as those working fulltime had significantly higher scores from those who were not working or in school.

Table B-3c.

Mean Scores on Item 6 of the Communication Domain by Occupational Status. Using Reading Materials (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	7.57*	1.13
School - FT	13	6.46*	1.71
Working - FT	6	7.17*	1.60
S-PT & W-PT	3	8.00*	.00
School - PT	--	--	--
Working - PT	7	5.43	2.70
No School/Work	18	4.33	2.20

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that scores for the first four groups were significantly higher than scores for adolescents who were not in school or working.

Table B-3d.

Mean Scores on Item 8 of the Communication Domain by Occupational Status.

Writing Letters and Reports (N = 53)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	8.14*	2.04
School - FT	13	7.62*	1.85
Working - FT	6	6.67	1.51
S-PT & W-PT	3	8.67*	2.31
School - PT	--	--	--
Working - PT	7	5.71	3.25
No School/Work	17	4.82	3.11

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that scores were significantly different from those adolescents who were not working or in school.

Table B-3e.

Mean Scores on Item 7 of the Daily Living Skills Domain by Occupational Status.

Making Bed (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	7.71*	.76
School - FT	13	5.92	1.85
Working - FT	6	7.33*	1.63
S-PT & W-PT	3	8.00*	0.00
School - PT	--	--	--
Working - PT	7	6.14	2.04
No School/Work	18	5.17	2.38

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that group scores were significantly higher than for adolescents who were not in school or working.

Table B-3f.

Mean Scores on Item 15 of the Daily Living Skills Domain by Occupational Status. Earning Money (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	9.14*	1.46
School - FT	13	6.38	1.85
Working - FT	6	8.00*	2.28
S-PT & W-PT	3	9.00*	1.00
School - PT	--	--	--
Working - PT	7	6.29	2.56
No School/Work	18	5.50	2.23

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that scores were significantly higher than the score for adolescents who were not in school or working. There was also a significant difference between adolescents who were in school fulltime & working part-time and those who were working part-time. In addition, there was a significant difference between adolescents in school fulltime & working part-time and those who were in school fulltime.

Table B-3g.

Mean Scores on Item 17 of the Daily Living Skills Domain by Occupational Status.

Job Skills (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	5.42*	.79
School - FT	13	5.00*	.71
Working - FT	6	5.00*	1.26
S-PT & W-PT	3	5.33	1.15
School - PT	--	--	--
Working - PT	7	4.00	1.29
No School/Work	18	3.78	1.40

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that scores for the first three groups were significantly different from the last group. There was also a significant difference between those working part-time and those in school fulltime & working part-time.

Table B-3h.

Mean Scores on Item 4 of the Socialization Domain by Occupational Status. Belonging to Groups (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	4.71*	1.80
School - FT	13	2.85	1.46
Working - FT	6	3.83	1.60
S-PT & W-PT	3	3.00	1.00
School - PT	--	--	--
Working - PT	7	4.57*	2.94
No School/Work	18	2.33	1.33

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that there were significant differences between adolescents who not in school or working. There was also a significant difference between adolescents who were in school fulltime & working part-time and adolescents who were in school fulltime.

Table B-3i.

Mean Scores on Item 6 of the Socialization Domain by Occupational Status.

Going Places with Friends Independently (N = 54)

Group	Count (n)	Mean Score	S.D.
S-FT & W-PT	7	9.29*	1.11
School - FT	13	7.85	1.91
Working - FT	6	8.83*	1.60
S-PT & W-PT	3	8.33	2.89
School - PT	--	--	--
Working - PT	7	7.86	2.85
No School/Work	18	6.61	1.82

Note. Dashes indicate that there were no adolescents in school part-time.

* The Duncan Test for internal means ($p. < .05$) indicated that there was a significant difference between the asterisked groups and adolescents who were not in school or working.