#### THE NEEDS AND PROBLEMS OF THOSE BROUGHT UP UNDER FOSTERAGE

It's serious parents' problems, their addictions and helplessness, the consequences of poverty and school failures that lead most children in Poland into foster institutions or families. Faced with the negative evaluation of their family functioning, and certainly before being given the versatile, intensive, long-lasting help, the children are taken away from their homes. The consequence being lots of marginalized families children's fate depending on the level of foster or rehabilitation institutions' functioning. Too frequently, children coming to these institutions are younger than 13 years of age when they most need their parents and some individualized care, while the emotional bond is essential for their normal growth. Families of children put into fosterage face numerous social, emotional, and health problems.

### **Marginalized families**

First and perhaps most numerous group of families whose children are taken away are the marginalized families who inherit poverty and destructive ways of coping with problems from generation to generation. A lot of parents were brought up under fosterage hence they are poorly prepared to work, to set up a home, or bring up children. Such families live under pressure of countless day-to-day problems, impossible to be solved as they estimate it. First of all, they lack means to live on, and their attention is focused greatly around this issue. They mostly live in tough social conditions, in small, cramped, overcrowded houses or flats lacking the basic conveniences. For years having neglected their health, they suffer health problems. Quite often, they don't use the medical service at all, also because of not having the necessary documents or certificates. Numerous official matters are not dealt with for years. They have little knowledge about the world, don't know how to use institutionalized help, and do not know their rights. They are easy to cheat, mislead, disregard. They lack in education, professional qualifications, skills and experience related to their job. Still, it's the emotional problems that make the change and possible catching up with deficiencies difficult for them. Above all, it's helplessness, immaturity, feeling of injustice, mistrust, lack of self-confidence, low self-efficacy, lack of constructive models, systematic work inability. With reality hard to accept, they escape into fantasies, addictions, or simply hours of television watching. They do not trust in themselves, feel worse than others, so they won't risk another failure or humiliation that would be caused by any attempt of changing the situation.

Conflicts are frequent between these families members, misunderstandings with neighbours and broken bonds with relatives are not scarce either. The way to deal with problems is the best they know, "taking shortcuts". They live by minor crimes, alimonies, benefits, donations. Being under attention of numerous services, they often receive the police, probation officers, or social workers at their homes, a pedagogue or a school teacher will drop in occasionally too. Brought up in such families, children don't have a stable nor predictable situation, they lack the sense of security and reliance upon adults. Their basic physical and emotional needs are poorly and irregularly met. In these homes, there are no constant rules, no clear expectations or strong emotional bonds. Children live under permanent pressure caused by the family conflicts and crises. This lack of sufficient parent care and attention has not just psychological consequences, but also the health ones – life under constant pressure results in permanent stress, poor immunity, frequent accidents and injuries, stemming from the lack of mindfulness of adults and children themselves. What worsens the situation is health negligence - not diagnosed malformations, lack of vaccinations, checks, balances. In a lot of homes, meals are not cooked, the family members feed on irregularly and irrationally (sweets, fast-foods), which also worsens their health condition.

Also the complete lack of privacy, lack of their own piece of space, not mentioning their own room, is many children's fundamental problem. The difficult family situation, insufficient parent care and the lack of interest in a child's intellectual growth in first years of their lives, as well as

the lack of pre-school education intensify the beginnings of the child's school education right from the start. What parents pass down to their children is poor cultural heritage (models, norms, values, knowledge about the world). Children themselves have no access to computers, artistic, sports, or educational activities, their vocabulary is poor, they happen to have difficulties understanding the language of their peers and teachers. Their personal hygiene is often bad and they are badly dressed which results in their peers' dislike and isolation, they get the "black sheep" status in their groups. Living under constant pressure makes the marginalized families children not able to focus and having poor memory. Always fighting for attention (eg. with destruction), they face numerous problems at school. Their educational career is most often a series of failures and humiliations. All this affirms their belief that "they can't do much and not much depends on them". These children live from one hour to the next, just like their parents they don't plan their future, they lack self-efficacy and don't believe in themselves. They avoid risk and failures. They are distrustful towards others, especially adults. They cannot take long-term actions, nor learn from their mistakes. They are not capable of taking the responsibility for themselves and their lives, they lack hope for change. Passive and restitutionary, they have unrealistic ideas and expectations.

### **Parental ineptitude families**

Another group of families are the weak, parental ineptitude families, or those having to cope with an illness or a disability. They cannot cope with bringing up their children, cannot set the boundaries or requirements, nor help them studying. Then, the reason for taking children away from home is mostly school failures and educational problems. Truancies, poor marks at school and other undesirable actions result in school informing the court, and then everything depends on the probation officer's or judge's opinion.

The families do not usually know their rights. They believe in professionals wanting to help their children. Sometimes they are even relieved with the decision of taking the child away from home since there's just trouble with them. Children happen to address care-and-educational institutions themselves trying to extort something from their parents. Sometimes, it's the officers' prejudices that are responsible for putting a child in an institution.

## **Families in crisis**

The third group of families who often have their children taken away are the families in crisis. An illness, one or both parents' death, divorce, moving abroad and leaving children under the care of grandparents, friends, or further relatives, these are frequent reasons for the child's difficulties in learning, for negligence or educational problems. Most of these families are offered no help, the case is usually directed to court. Meanwhile, the slightest help in coming to understand the source of family problems and solving them would enable letting the child stay at home. Such professional help is yet scarce and the child finds its way into fosterage. Against the will of parents and their own, they are put in a foster institution or family that is to ensure decent living conditions, development possibilities and safety for them.

The effects of staying in care-and-educational institutions It's authoritarian and restrictive educational work methods that prevail in care-and-educational institutions. Most stuff do not believe in possibility of their wards' rehabilitation. They have a negative approach to their natural families as well as to cooperation with them. Placing children in different forms of family foster care or preparing them to going back home is also rare for the institution. The housemasters are generally very poorly aware of what really goes on in their groups, working with just the chosen wards is enough for them, and in order to gain some piece they easily form negative contracts with the "other life" leaders.

These institutions' influence is definitely of a pathogenic nature: children's day-to-day matters often depend upon the "other life" brutal rules, more and more wards overuse alcohol, inhale glue, use drugs. Most often, housemasters know too little of children's common relations. Once

placed in the institution, the ward must defend themselves or fight their position in the group. Wanting to adjust to the ruling scheme, they must learn conformity, cold-heartedness, manipulation. Simultaneously, having the service – living and feeding – provided for, they learn passivity and the fact that while they cannot do much, they don't have to do much either and nothing depends on them. Those who protest and cause trouble are placed in rehabilitation institutions (more than half of the rehabilitation institutions' wards have earlier been to a children's home) or mental hospitals. Research results say that a long stay in a care-and-educational institution helps generating such features as: lower self-esteem, lack of aspirations, fear of leaving the institution and starting an adult life. Institutions lack the effective system of empowerment. Hence, having left the institution, most graduates cannot keep their jobs, they come into addictions, violence, and crime, while their children become the next generation of social system wards.

# **Foster families**

When taken away from their parents, inconsiderable amount of children are put in non-related foster families or family children's homes. Yet, having been put there against their will and the will of their parents, they protest, resist, break the rules and regulations. They behave even worse in their adolescent period, becoming the source of numerous conflicts, bitterness, growing common dislike. Most frequently, not prepared to corrective work with difficult wards, the carers receive no support from the institution but control and evaluation. As a result, some carers give up looking after the difficult child, or they give up conducting the foster family or the family children's home.

Yet, most children placed in foster families are brought up by their relatives (85%). Not infrequently motivated by financial reasons, it's their grandmothers or grandfathers who start the foster family. Many children live both with the grandparents and their own parents – making the foster family a fiction.

Unfortunately, both the institutions' stuff and foster carers are not prepared to corrective work with children having deep and rooted emotional problems or being in crisis caused by having to part with their families or by problems they experience in their peer group. A lot of housemasters and foster carers think that the decent living conditions, discipline, and support in school education are a sufficient help offer.

## Resumé

Vital problems of children brought up in marginalized families are:

- a. basic physical and emotional needs met poorly and irregularly,
- b. lack of the sense of security,
- c. lack of the stable, predictable situation,
- d. lack of the stable support of adults,
- e. lack of clear and constant "rules of the game",
- f. lack of clear and stable expectations of children,
- g. lack of stable emotional bonds,
- h. poor cultural heritage (models, norms, knowledge of the world),
- i. poor knowledge of language (poor vocabulary),
- j. lack of systematical health care,
- k. permanent pressure resulting from conflicts and family crises,
- I. dislike and isolation of the peers' side, the "black sheep" status at school.

Instead of solving them, living in foster care causes most of these problems to reinforce and deepen. Thus, main problems of young people getting prepared to empowerment would be:

- lack of sense of security,
- lack of self-esteem,

- low sense of self-efficacy,
- lack of trust towards others,
- lack of realistic evaluation of their own possibilities,
- passivity, failure avoiding orientation,
- results of having been brought up in poverty and shortage (egoism, egocentricity, aggression),
- lack of the knowledge of the world, lack of social and task skills,
- lack of responsibility for themselves and their lives,
- lack of their goals and life prospects awareness.

For the foster children, the difficulties they experienced in family and in foster care result mostly in emotional problems related to self-attitude. It's hard to cope with the sense of inferiority, complexes, and disbelief in the possibility of change on a daily basis. Not willing to be aware of these problems, young people escape into different forms of compensation. It's a common feature of many people coming into addictions to easily live the imaginary lives. The border between reality and fiction often becomes blurred here – everything can be imagined and explained. What becomes most addictive is the fact that things tough and costly in reality – requiring a lot of effort and the effort not always assuring the success – are possible, easy and simple in imagination. The methods used by this way of coping with difficulties are a lie and a make believe. Distancing from reality that is hard to take is helped by the use of drugs and alcohol, escape into computer games, or compulsive use of internet communicators and social networks.

Asked about their problems, the wards themselves mostly talk about solitude and lack of people they could trust. They don't understand their own history, often don't know what they are really like. They fear independence, responsibility, setting up a family, they can't see any chances for their own flat or a good job. They feel they lack practical skills of coping in life. Most frequent need they declare is "possibility of talking to a friendly, engaged and interested adult person".

What is crucial in efficient ward help is coming to understand specific problems, needs and possibilities of each of them, gaining their trust and even the slightest motivation for change.

",From care to adulthood – the self-dependence model" Conference materials

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