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U N I V E R S I T Y O F W I N D S O R  
The School of Social Work

THE EFFECT OF A CHILD'S AGE, AT THE TIME  
OF WARSHIP, ON THE STABILITY  
OF HIS PLACEMENT

by

Brian Richmond Blonde

A research project presented to the School of Social Work  
of the University of Windsor in partial fulfillment of the  
requirements for the degree of Master of Social Work.

May, 1971

Windsor, ONTARIO, CANADA

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## ABSTRACT

The problem under consideration in this study is a descriptive one which presents the extent of placement turnover in the adolescent population of wards in the care of the Roman Catholic Children's Aid Society for the County of Essex.

The hypothesis is; The age at which a child is made a ward of the Roman Catholic Children's Aid Society for the County of Essex, has a significant affect upon the stability of his placement.

The population from which the sample was selected is that of the Roman Catholic Children's Aid Society for the County of Essex. At the time of data compilation there were three hundred and eleven children in the care of this agency of which ninety-seven were between the ages of twelve and eighteen.

The sample of one hundred cases, including an experimental group and a control group were selected from the "Monthly Statistical Report of the Children in Care". Each of these groups were composed of twenty-five males and twenty-five females. Those children who made up the experimental group were all children who were over the age of twelve at the time of admission to care. Those children who made up the control group were all children who were under the age of twelve at the time of admission to care.

A check list was used to gather the data. The researcher used only face sheet data, in order to avoid subjective judgements, and recorded the age at placement and replacement.

The experimental group data and control group data were reviewed under the following headings; the number of replacements during the first two years in care; the number of replacements during the adolescent years; the number of replacements per year during the adolescent years; and the number of replacements per year by age at the time of wardship. This was followed by a comparison of the experimental and control group data, under the same headings.

The findings of this study were; that there is less danger of multiple replacements, during the first two years in care, for the child who is admitted to care prior to his adolescence, than for the child admitted during adolescence. This appears to confirm Parker's results, that as the admission age increases so does the frequency of replacements.

Secondly, that children who become wards in their adolescent years are in nearly twice the danger of undergoing replacement during the adolescent years, than children who were made wards before their twelfth birthday.

Thirdly, that the child who is an adolescent at the time of wardship, can expect replacement approximately once each year, while he is in care, whereas, the child who is younger than twelve at the time of wardship, can expect replacement approximately once every three years, during his



adolescent years.

Fourthly, that the child who is an adolescent at the time of wardship faces greater likelihood of suffering from emotional disturbance.

The hypothesis is confirmed, by the weight of this data, that the age at which a child is made a ward of the Roman Catholic Children's Aid Society for the County of Essex, has a significant affect upon the stability of his placement.

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## CHAPTER I

### INTRODUCTION

#### 1. Nature of Problem

The Roman Catholic Children's Aid Society for the County of Essex is legally responsible<sup>1</sup> to provide the best possible care and living arrangement for the children in its care. They have in their effort to provide this service, been confronted with the problem of high turnover rates in placements. Especially problematic are those children who are made wards after their twelfth birthday.

The problem under consideration in this study is a descriptive one which will attempt to discover the extent of placement turnover in this adolescent group. In addition, the descriptive data will be used to determine the effect of a child's age, at the time of wardship, on the stability of his placement.

This study takes on increased importance when we link it to the fact that separation itself produces irreversible damage.<sup>2</sup> This damage is compounded when multiple separations occur. "The end result of frequent replacement

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<sup>1</sup>Ontario, Committee of the Whole House, Department of Social and Family Services, The Child Welfare Act, 1965. Toronto.

<sup>2</sup>E. Lawder, "Can Long-time Care Be Unfrozen?", Child Welfare, (April, 1961), pp. 6-9.

is the typical, agency created psychopath whose fear of closeness is so great that he can tolerate only shallow and superficial relationships".<sup>3</sup>

This research will be of specific value to the Roman Catholic Children's Aid Society for the County of Essex, in enabling them to assess the likelihood of its being able to meet the needs of the child prior to the child coming into care and in re-examining its services to teenagers, keeping in mind that there may be acceptable alternatives to their present placement practise.

The results of this research will pertain only to this agency specifically, but with the understanding that since Children's Aid Societies in Ontario all operate under the Child Welfare Act and are presumably administered similarly, it may well have wider implications.

#### The Adolescent

The adolescent in care is a primary treatment and placement problem. His difficulties do not end when he is admitted to care, but rather they become more complex. Normal adolescent problems combine themselves with the major tasks of coping with the problems of separation and placement. "The pressures from physical, psychological, and social changes are of such intensity that the adaptive capacity of the individual is strained to the point of relative

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<sup>3</sup>N. Littner, Some Traumatic Effects of Separation and Placement, (New York: Child Welfare League of America, Inc., 1967), p. 25.

inadequacy."<sup>4</sup>

This time of adolescence is a period filled with contradictions. The adolescent vacillates between the push toward independence and the wish to remain dependent. He strives to develop a "relationship which permits him to master two maturational tasks, the achievement of self-responsibility and the achievement of genuine independence."<sup>5</sup> The need to establish a place for himself outside the family is accomplished, in part, through establishing relationships with his peers. The result is a shift in his ties to the family. "While he is separating himself from his family he must also find new ways of being connected with it. He needs to view what is happening as the development of new separateness from, not separation from, his family."<sup>6</sup>

When the adolescent is separated from his parents through wardship, he has partially achieved his desire to gain self-responsibility and independence. On one hand he feels a satisfaction for achieving these goals, on the other hand he is filled with the anxiety of separation with all its implications. This is a critical time for the adolescent. It is a time when he should be clinging to the satisfaction of childhood dependency, while pulling towards adult-

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<sup>4</sup>Irene M. Josselyn, The Adolescent and His World (New York: Family Service Association of America, 1952), p. 120.

<sup>5</sup>Casebook on Family Treatment Involving Adolescents (New York: Family Service Association of America, 1967), p. 4.

<sup>6</sup>Ibid., p. 5.



hood. Instead, the adolescent ward must cope with the feelings of rejection, fear of the unknown, of helplessness and anger.

Placement, therefore, complicates the adolescent's life. New parents means new values, new expectations, new rules, new relationships, and new dependency. At this time when the adolescent by nature should be striving for independence he is faced with the prospect of having to adjust to new relationships and dependency. While placement at any time will be difficult, for the adolescent it will be more difficult.

The major thesis presented here is that the age at which children are made wards has a significant affect upon the stability of placement. In this study the concern is with the adolescent who is admitted to care, and the effect his age has on his ability to remain in a foster home.

#### Separation and Placement

Various children react differently to separation from their parents. Factors such as age, relationships, life experiences and the child's ability to understand what is happening, alter the feelings produced.

No matter what the reason for separation, a child experiences either consciously or unconsciously, a feeling of abandonment containing elements of loss, rejection, humiliation, insignificance, and worthlessness. He is overcome with a feeling of helplessness, of lack of control over what

is happening to him.<sup>7</sup>

The seriousness of separation and placement is generally accepted by the social work profession. Ner Littner suggests that, when we try to pin-point the meaning of separation and placement to a child, we recognize that we have faced him suddenly with a series of psychological tasks. "These tasks result from the various painful and unacceptable feelings which the child has as a result of the separation."<sup>8</sup>

The first task that the child encounters is that of mastering the feelings aroused by the separation; these include feelings of abandonment, of helplessness and of anger, a fear of desertion by or death of his parents, and a fear of body mutilation or of his own death.<sup>9</sup>

In dealing with these feelings and fears, the child's behaviour expresses his attempts to prevent separation from his parents, "to express his angry feelings, control his feelings of helplessness, and fend off or control the anticipated punishment."<sup>10</sup>

Many of these feelings are repressed by the child,

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<sup>7</sup>See N. Littner, Some Traumatic Effects of Separation and Placement (New York: Child Welfare League of America, Inc., 1967).

<sup>8</sup>Ibid., p. 7.

<sup>9</sup>Ibid., p. 10.

<sup>10</sup>Ibid.

however, "the universal response to separation is anxiety."<sup>11</sup> In young children, the anxiety is most obvious in tension states; (i.e. enuresis or withdrawal and so on.) In the older child, the anxiety is frequently evidenced in the form of an emotional reaction;<sup>12</sup> (i.e. aggressiveness or running from foster home, and so on.)

The second task that the child encounters is the feeling about being placed with substitute parents. He comes to his new family, fearing rejection, disinterest and punishment. In an attempt to prevent these reactions the child tries to elicit a reaction that implies interest and acceptance; (i.e. any reaction different from the one he anticipates).<sup>13</sup>

The child's behaviour allows him to express his feelings and needs, "whether they are wishes for love, to retain his own parents or to express his angry feelings."<sup>14</sup> At the same time, this behaviour reassures "him about the feared consequences of these feelings--whether by preventing rejection, relieving guilt or shame, or by controlling

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<sup>11</sup>T. Benedek, "Toward the Biology of Depressive Constellation," as cited in J. Bowlby, Separation Anxiety: A Critical Review of the Literature (New York: Child Welfare League of America, Inc., 1962), p. 263.

<sup>12</sup>N. Littner, op. cit.

<sup>13</sup>Ibid., p. 15.

<sup>14</sup>Ibid., p. 16.

and warding off expected punishment or retaliation."<sup>15</sup>

The third task is that of resolving an oversensitivity to, or fear of any experience that implies a threat of separation and replacement from this new family.

"Whatever the precipitating situation, the child will react to it with a fear of rejection by his new parents and therefore stirring up of his old separation feelings and fears. The resulting anxiety will then"<sup>16</sup> reactivate the old system of overcoming these feelings.

This fear of replacement and rejection is legitimate when "turnover rates as high as 30%-40% a year in foster homes are common throughout Canada. Children moved 5, 10 and 15 times by age 16 are not exceptional."<sup>17</sup>

Trasler, estimates that over half of foster home breakdowns are caused by emotional disturbances resulting from previous rejections.<sup>18</sup> L. Eisenberg's investigation also links multiple placement with maladjustment.<sup>19</sup>

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<sup>15</sup>N. Littner, op. cit., p. 16.

<sup>16</sup>Ibid., p. 12.

<sup>17</sup>P. D. Steinhauer, "Crisis in Foster Care," Ontario Association of Children's Aid Societies Journal, (November, 1970), p. 9.

<sup>18</sup>G. Trasler, A Study of Success and Failure of Foster Home Placements; PhD Thesis University of London, 1955.

<sup>19</sup>L. Eisenbert, "If not now, when?", American Journal of Orthopsychiatry, XXXII, No. 5, pp. 781-791.

Chambers and Williams each studied children with multiple placements. Chambers found that children who had been in several foster homes, had a significantly poorer understanding of the concept of time than a control group of the same intelligence.<sup>20</sup>

Williams found a similar group to have a significantly lower verbal intelligence than their performance scores, and their responses to projective tests expressive of emotional impoverishment.<sup>21</sup>

"The association of fostering breakdown with maladjustment, therefore, is not in any doubt".<sup>22</sup> Trasler has made "clear how each rejection by foster parents intensifies the difficulties".<sup>23</sup> The unrealistic question remains however; which came first the repeated placements or the emotional disturbance?

The fourth task is that of "learning how to accept his wish to be close to his new parents--how to come to peace with the anticipation of rejection by them and the

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<sup>20</sup>J. Chambers, "Maternal Deprivation and the Concept of Time in Children," as cited in R. Dinnage, Foster Home Care Facts and Fallacies, a review of Research in the United States, Western Europe, Israel and Great Britain between 1948 and 1966, The National Bureau for Co-operation in Child Care, Longmans, 1967.

<sup>21</sup>R. Dinnage and M. L. Kellmer, Foster Home Care--Facts and Fallacies (Great Britain: E. F. Arnold and Sons Ltd., 1967).

<sup>22</sup>Ibid., p. 7.

<sup>23</sup>Ibid.

associated separation--induce painful feelings and fears about his own parents."<sup>24</sup> Prior to separation there may have been serious problems around closeness existing between the child and his own parents, "these difficulties along with the old methods of handling them will be unrealistically displaced onto the new parents."<sup>25</sup>

Children who have suffered rejection lack security in their relationships with others. This problem is compounded with multiple rejections. The child may withdraw from all but the most superficial relationships; he achieves security only when his fear has subsided and his trust has strengthened.

The traumatic experience of rejection causes lasting damage to the child's subjective security in interpersonal relationships. For the child in care, close contact with others provokes anxiety, "consequently he avoids them; he becomes an isolated, lonely individual"<sup>26</sup> who cannot bear to commit himself to a reciprocal relationship with another.

If the child is able to master these four psychological tasks, and if he is able to avoid multiple replacements, he can probably survive separation and placement relatively unscathed. If however, he is unable to master the feelings but rather represses them, the result will be a

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<sup>24</sup>Littner, op. cit., p. 13.

<sup>25</sup>Ibid.

<sup>26</sup>G. Trasler, In Place of Parents, A Study of Foster Care (New York: The Humanities Press, 1965), p. 240.

potential for personality scars.

These personality scars can take many forms: Littner, for example, enumerates some of the different types of personality scars that may result. "As long as the child's separation feelings, particularly those of anger, remain repressed, he will continue to unconsciously expect rejection by anyone he allows himself to love".<sup>27</sup> On one hand, the child will "need to maintain an emotional distance from people."<sup>28</sup> On the other hand, "he will have no conscious awareness that he continually expects rejection. Therefore, he will be unable to learn from new experiences that one can love and be close without being rejected."<sup>29</sup> Unconsciously he will continue to "expect that all future close relationships will be doomed to the same fate as the tragic one he experienced with his parents."<sup>30</sup> "A second consequence of the child's need to repress some of his separation feelings, is the creation of an unconscious fear of emotional closeness to people."<sup>31</sup> The basic problem of children being placed in foster homes is that of fearing to love or be loved. This involvement draws out the unconscious expectation that he will continue to be rejected.

The child finds it difficult to face "the associated

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<sup>27</sup>Littner, op. cit., p. 20.

<sup>28</sup>Ibid.

<sup>29</sup>Ibid.

<sup>30</sup>Ibid.

<sup>31</sup>Ibid., p. 22.

angry feelings which originally were directed towards his own parents but which later were displaced on to the persons he wished to be close to."<sup>32</sup>

A third consequence may be the creation of a tendency to provoke rejection. The placed child not only continues to anticipate rejection, but, "he has within him an unconscious need to get himself rejected--to actually bring about the very fate that he fears most."<sup>33</sup> While the child is attempting to cope with the anticipated rejection, "he may attempt to reproduce in his new home the exact attitudes and circumstances that he experienced in his old one."<sup>34</sup>

The literature indicates that separation and placement does have a detrimental effect on the child. Its seriousness cannot be overemphasized when the result of such multiple placements is an individual who is seriously handicapped and who is unable to establish constructive, meaningful relationships with other people, who becomes the agency created psychopath. The literature is quite clear that the deprived child, the child who has suffered frequent separation, multiple placement, or both, is prevented by repression, from full expression of his impulses and feelings. Consequently, his emotional flexibility is reduced and he is unable to function at a full physical, in-

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<sup>32</sup>Littner, op. cit., p. 20.

<sup>33</sup>Ibid., p. 22-3.

<sup>34</sup>Ibid.



tellektual or emotional capacity.

## 2. Delinquency

"Adolescence encompasses an extensive period of accelerated physical and psychological growth."<sup>35</sup> It is a time of identity crisis, a time when the individual is by nature seeking independence; sexual identity; a set of values; a separateness from his family. It is a time when normal adolescent rebelliousness creates conflict with parents, and authorities. Problems of dating, clothing, hours, length of hair, and so on keep the adolescent's family in "a state of crisis".<sup>36</sup>

By far the majority of families and adolescents weather this crisis, however, "children who have experienced poor identification and adequate emotional relationships with their parents early in their lives",<sup>37</sup> often turn to delinquent activity.

In Ontario, there is an upward trend in delinquency rates. This trend poses a problem to correctional authorities and also to those agencies which have a legal responsibility to protect children, under the Child Welfare Act,<sup>38</sup> (i.e. Roman Catholic Children's Aid Society For The County of Essex.)

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<sup>35</sup>Josselyn, op. cit., p. 5.

<sup>36</sup>Casebook on Family Treatment Involving Adolescents, op. cit., p. 4.

<sup>37</sup>Report of the Ontario Legislature's Select Committee on Youth, (Kingston, Ontario: Hanson & Edgar, Ltd., 1967).

<sup>38</sup>The Child Welfare Act, 1965, op. cit.

TABLE 1

JUVENILE DELINQUENCY IN ONTARIO  
1962, 1963 and 1964

Age	1962		1963		1964	
	Male	Female	Male	Female	Male	Female
15	2072	387	2279	438	2424	447
14	1650	328	1691	318	1805	341
13	1020	154	1119	191	1337	220
12	701	89	799	80	928	100
11	484	22	581	34	620	45
Total	5927	980	6469	1061	7114	1153

As illustrated in the preceding table, there has been an increase in the incidence of Juvenile Delinquency among males from 5927 in 1962, to 7114 in 1964, or a 20% increase in three years.<sup>39</sup> During the same period there was a 17.6% increase in the incidence of Juvenile Delinquency among females. There has been a mean increase in the incidence of Juvenile Delinquency among males of 6.66% per year, and a 5.86% per year among females, during these years. The population of Ontario on the other hand, increased only 2% from 1962 to 1963 and only 2.4% from 1963 to 1964.<sup>40</sup>

<sup>39</sup>Report of the Ontario Legislature's Select Committee on Youth, *op. cit.*, p. 16.

<sup>40</sup>Based on the 1962, 1963, 1964 Dominion Bureau of Statistics estimates.

In Windsor, the incidence of juveniles charged with delinquency increased by 50.05% between 1968 to 1970. During the same period, there was an increase of 66.56% in youths charged with delinquency.<sup>41</sup> At the same time there was an increase in population of only 1.8%. Of those charged, 10.9% of the juveniles were made wards of one of the two Windsor Children's Aid Societies in 1970.<sup>42</sup>

It is evident then that there is a real increase in the incidence of Juvenile Delinquency. On the other hand, a recent study of correctional services in Windsor, as an example, concludes that, "there appears to be an urgent and well recognized need for some special housing facilities for youth and young offenders in Windsor and area."<sup>43</sup>

It can legitimately be concluded from these two studies that while delinquency rates are increasing, facilities to meet this increase are not being provided, at least in the Windsor area.

It is not surprising then to find that care of the adolescent is more difficult, when by nature he is struggling to attain independence, in an environment in which delinquency is increasing, and the supply of facilities

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<sup>41</sup>Based on material for the 1970 Annual Report of City of Windsor Police Department.

<sup>42</sup>Ibid.

<sup>43</sup>B. J. Kroeker, Correctional Services in Windsor and Area, (Windsor: University of Windsor, 1970), p. 7.

are not keeping pace.

### 3. Related Research

There is a serious lack of research on ward care, in Canada. The consultant for Family and Child Welfare in the Department of National Health and Welfare, recently stated that, "little has been done (in ward care) despite the very great importance of arriving at a better understanding of the effectiveness of current practice in the placement of children."<sup>44</sup>

Not only has there been little done in the past, but also there is a great dearth of research currently underway. To the best of our knowledge, only one such project is now in process. This study, "The Decision to Separate Children from their Natural Parents"<sup>45</sup> is being carried out by the Family and Children's Services of London, Ontario. It is attempting to identify the pre-care factors which are related to in-care progress. The age factor is being considered as one variable in this multi-variable study.

A review of research on foster home care<sup>46</sup> in the

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<sup>44</sup>In a letter to the Director of Social Research and Planning, Department of Public Welfare, Halifax, N.S., March 18, 1969.

<sup>45</sup>Palmer et al., The Decision to Separate Children from Their Natural Parents (London, Ontario: Application for Research Grant, June 1970).

<sup>46</sup>Dinnage and Kellmer, op. cit.

United States, Western Europe, Israel and Great Britain between 1948 and 1966 reveals that, there have been no studies dealing specifically with the adolescent who is admitted to care. In spite of what appear to be high turnover rates, for this age group, the adolescent has been touched upon only incidentally in existing research.

Some studies have however, been done which demonstrate the effect of age on placement stability. Of these studies, Walter J. Ambinder<sup>47</sup> in the United States found, that the average thirteen year old had between four and five different placements and concluded from his research that children placed at an early age had a much better chance of adapting to a stable foster home than older children.

Healy and Bronner also of the United States, found that "considering all types of cases and placings there is an advantage in accepting younger children for placement."<sup>48</sup> His study indicates that there is a falling off of success with advancing years.

Two of these studies were carried out in the 1920's and had similar results. Theis<sup>49</sup> found that 81% of the children placed while under five years of age had no subsequent change of foster home, while only 48% of children placed after five years of age had no change

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<sup>47</sup>R. A. Parker, Decision in Child Care (London: George Allen & Unwin Ltd. Ruskin House, 1966).

<sup>48</sup>Ibid.

<sup>49</sup>Ibid.

in placement. She also found that the children placed before age five made a much better adjustment in their adult life. Similarly in, "A Study of Problem Children in Foster Families"<sup>50</sup> carried out by the Judge Baker Foundation in the United States found that, "there is an advantage in accepting younger children for placement--(as)--there appears to be a falling off in success with advancing years."<sup>51</sup> It also concluded that the period of highest failure (requiring removal from foster home) was between the ages of thirteen and eighteen.

Trasler, in Great Britain, found that 69% of children placed before the age of four were successful, while for those of age four and over the rate of success was only 40%.<sup>52</sup>

Baylor and Monachesi, also in Great Britain, found a decline in the rate of favorable responses to foster care for children over age eight. They concluded that "the factor of age seems to play an important part in the entire foster home process; and in general it may be said that the older the child is before coming to the attention of the agencies the more difficult his adjustment becomes."<sup>53</sup>

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<sup>50</sup>W. Healy, et al., Reconstructing Behavior in Youth, (New York: Alfred A. Knopf Publishing Co., 1931), p. 249.

<sup>51</sup>Ibid.

<sup>52</sup>Parker, op. cit.

<sup>53</sup>Ibid., p. 44.

An important research conducted by R. H. Parker<sup>54</sup> (see table below) in Great Britain, studied success and failure rates of foster home placements, in relation to age at time of placement. The results of this study are shown in the following table:

TABLE 2  
CHILD'S AGE AT PLACEMENT AND RATE OF SUCCESS  
AND FAILURE BY PERCENTAGE

Child's Age at Placement	Success	Failure
Under 1 yr. . . . .	77	23
1 under 2 . . . . .	62	38
2 under 3 . . . . .	65	35
3 under 4 . . . . .	56	44
4 under 5 . . . . .	50	50
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5 under 7 . . . . .	34	66
7 under 9 . . . . .	52	48
9 under 11 . . . . .	47	53
11 and over . . . . .	23	77

This study reveals that placements made while the child was under the age of one year had a little better than a three to one chance of "success", while children over eleven years of age had a little better than a three to one chance

<sup>54</sup>Parker, op. cit. (Parker's study dealt with the whole area of foster care. His findings were related to 83 items of information about the child and 33 about the foster parents.)

of "failure". He also concludes that there is "diminishing chance of successful foster care as the age of the child increases."<sup>55</sup>

A review of the research literature provides ample evidence that age has a significant effect upon the stability of placement. However, while the adolescent has been identified as a primary treatment and placement problem, little has been done to discover the extent of placement turnover in this adolescent group.

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<sup>55</sup>Parker, op. cit., p. 43.



## CHAPTER II

### RESEARCH DESIGN

#### Hypothesis

THE AGE AT WHICH A CHILD IS MADE A WARD OF THE ROMAN CATHOLIC CHILDREN'S AID SOCIETY FOR THE COUNTY OF ESSEX, HAS A SIGNIFICANT AFFECT UPON THE STABILITY OF HIS PLACEMENT.

#### Working Definitions

Ward means, a child that has been committed to the care and custody of the Roman Catholic Children's Aid Society for the County of Essex.

Placement is used as a noun in this study. It refers to any real change of living arrangement, therefore it excludes runaways, visits, trips, camps and any of the normal day-to-day living arrangements which we experience in this mobile society.

Stability means no replacements. (Replacement is used here to mean a change of placement.)

#### Population

The Roman Catholic Children's Aid Society for the County of Essex was selected for this study because it is typical of many of the Children's Aid Societies in Ontario. At the time of data compilation, this agency had in its' care and custody three hundred and eleven children. Of these, twenty-seven had been admitted to care after their

twelfth birthday. The total adolescent population of this agency was ninety-seven.

#### Experimental Group

This researcher used the total population, twenty-seven cases, that had been admitted to care after their twelfth birthday. He then expanded the sample to fifty cases, of which twenty-five were males and twenty-five were females. The decision to expand the sample was based on the fact that only a small number of children had been admitted to care after their twelfth birthday, and limited to fifty cases because of the great deal of time involved. An equal number of males and females were selected in order to determine if sex was a factor in the high turnover rates in placements.

An experimental group of fifty cases, including twenty-five females and twenty-five males who had been in the care of the Roman Catholic Children's Aid Society, for a minimum time limit of one year, and who had been admitted after their twelfth birthday, was selected from the "Monthly Statistical Report of the Children in Care."<sup>56</sup>

Each teenager who fit into this category was selected, and as many of the monthly reports were used as necessary, going back month by month, until a sample was collected. The first report used was that of June 1970. In order to obtain the female sample quota the reports from April 1970

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<sup>56</sup>Published monthly by the Roman Catholic Children's Aid Society for agency use.

to June 1970 were required. To obtain the male sample quota, a much longer period of time was required. The reports from June 1968 to June 1970 were required for this quota. It was necessary to check each recorded teenager's master file card to determine at what age the child was admitted to care. Each child who met the age requirement and the time in care requirement was selected. Excluded from the sample were all children who were, at the time of sample compilation, placed in Ontario Hospitals. These children were excluded because their placements are in permanent, institutional care, facilities, and therefore, are not subject to the same placement criteria, as the normal adolescent ward.

#### Control Group

In order to provide a population with which to compare the experimental group, a control group of fifty cases, including twenty-five females and twenty-five males who had been in the care of the same agency prior to their eleventh birthday, and who, at the time of sample compilation, were between the ages of thirteen and eighteen, were also selected from the "Monthly Statistical Report of the Children in Care" for the month of June 1970. These cases were selected in the order in which they appeared until the quota was filled. Also excluded from this group were all wards in Ontario Hospitals, at the time of this study.

The decision to limit the experimental and control groups to a total of one hundred cases was based on both the researchers' limited time and resources to complete

the study as well as on the difficulty of locating a greater number of cases.

#### Data Collection

Initially, the researcher had planned to differentiate between the types of placements that each child had been exposed to. With this in mind a check list was constructed, which enabled the recording of the type of placement, (i.e. group home, foster home, detention home, jail and so on) and the number of run aways from the particular living facility. This check list was eliminated on the basis that separation and placement itself produces feelings of abandonment, rejection, humiliation, insignificance and worthlessness, therefore it would be virtually impossible to determine the degree of the affect each type of placement had on the child. It was decided then that each placement would carry equal weight. A new check list was constructed, which enabled the recording of the age at placement and replacement. (See Appendix) The researcher decided to use only face sheet data, in order to avoid subjective judgements, and to insure that the information would be available for each case selected for study.

Excluded from the data are initial placements, which generally consisted of placement at the St. Joseph's Manor Receiving Home for a short time, and then placement in a foster home. Also excluded are those placements which were considered as holidays or visits.

The data for this research was gathered from the master file cards of the Roman Catholic Children's Aid Society for the County of Essex which recorded the date of birth, date of wardship and the occurrence of placements. Each card was studied carefully to insure that the recording of data was accurate. Occasionally, to confirm care information, reference was made to the file content.

## CHAPTER III

### PRESENTATION OF DATA

The experimental group data and control group data will be presented under the following headings; the number of replacements during the first two years in care; the number of replacements per year during the adolescent years; and the number of replacements per year by age at the time of wardship. This will be followed by a comparison of the experimental and control group data, under the same headings.

#### Experimental Group

The experimental group was composed of twenty-five males and twenty-five females, ranging in age from thirteen to eighteen years.

#### The Number of Replacements During the First Two Years in Care

The first two years of each child's wardship in the experimental group were examined to determine the numbers of replacements which were made in this period of time.

As depicted in Table 3, 36% of the experimental group did not have any replacements during their first two years in care. The remainder of the experimental group, 64%, had between one and six or more replacements during this two

year period. Some 20% of the total experimental group had one replacement, 12% had two replacements, 14% had three replacements, 4% had four replacements, 6% had five replacements, and 6% had six or more replacements, during their first two years in care.

TABLE 3

NUMBER OF REPLACEMENTS DURING FIRST TWO YEARS  
IN CARE OF THE TOTAL EXPERIMENTAL GROUP  
BY PERCENTAGE

Number of Replacements	Percentage of Frequency
0 . . . . .	36
1 . . . . .	20
2 . . . . .	12
3 . . . . .	14
4 . . . . .	4
5 . . . . .	6
6+ . . . . .	8

The Number of Replacements During the  
Adolescent Years

The experimental group was next examined in terms of the number of replacements for the entire adolescent years in care. The results of this examination are summarized in the following table.

TABLE 4

NUMBER OF REPLACEMENTS DURING ADOLESCENT YEARS  
OF THE EXPERIMENTAL GROUP, BY PERCENTAGE

Number of Replacements	Percentage of Frequency
0 . . . . .	20
1 . . . . .	16
2 . . . . .	20
3 . . . . .	8
4 . . . . .	6
5 . . . . .	6
6+ . . . . .	24

Eighty per cent of the experimental group underwent replacement during their adolescent years, 16% had one replacement, 20% had two replacements, 8% had three replacements, 6% had four and five replacements respectively, and 24% had six or more replacements.

The number of children not undergoing any replacements was only 20%, which is a decrease of 16% from the result in this category from Table 3, while the number with six or more replacements increased by 16%.

#### The Number of Replacements Per Year During the Adolescent Years

This group was then examined in terms of the mean number of yearly turnover of placements, by sex, and the age during which these replacements occurred.

As illustrated, the mean number of replacements for a twelve year old male is 0.25. This figure increases to 1.23 replacements for the thirteen year old male who had been admitted to care after his twelfth birthday. Similarly the fourteen year old male will have 1.36 replacements; the fifteen year old male 1.20; the sixteen year old male 0.86; and the seventeen year old male 0.75 replacements.

The female experimental group replacements are as follows: 0.66 at age twelve; 1.33 at age thirteen; 0.71 at age fourteen; 0.87 at fifteen; 1.63 at age sixteen; 1.44 at age seventeen.



TABLE 5

MEAN NUMBER OF REPLACEMENTS PER YEAR  
OF THE EXPERIMENTAL GROUP,  
BY AGE AND SEX

Age at Replacement	Mean Number of Replacements		
	Male	Female	Total
12	0.25	0.66	0.42
13	1.23	1.33	1.27
14	1.36	0.71	1.09
15	1.20	0.87	1.02
16	0.86	1.63	1.29
17	0.75	1.44	1.23
Total	5.65	6.64	6.32

The total number of replacements for the male experimental group during the adolescent period is 5.65, and 6.64 for the female experimental group. In terms of the mean number of replacements per year during the adolescent years; the male experimental group had 0.94 replacements per year, and the female experimental group had 1.10 replacements per year. (see Table 16)

The Number of Replacements Per Year by Age  
at the Time of Wardship

The experimental group was also studied in terms of the frequency of replacements by their ages at the time of wardship.

In the following discussion, the researcher will be referring to both Tables 6 and 7.

Age Twelve, at Time of Wardship

The number in the female sample, for this age group, is insufficient to enable us to draw any meaningful data. The male experimental group however, shows an increase in the number of replacements for each subsequent year in care, so that by age fourteen, the mean number of replacements per year has increased from 0.25 to 1.66.

TABLE 6  
MEAN NUMBER OF REPLACEMENTS PER YEAR  
OF THE MALE EXPERIMENTAL GROUP,  
BY AGE AT TIME OF WARSHIP

Age at Replacement	Age at Time of Wardship			
	12	13	14	15
12	0.25			
13	1.50	1.11		
14	1.66	1.11	1.57	
15	*	1.57	0.83	1.60
16	*	1.50	0.50	1.00
17	*	*	*	0.33

\*In each of these cases the sample had decreased by at least half, therefore, the figures are omitted on the basis of being an insufficient sample.

Blank space indicates that this age group was not yet in care.

TABLE 7

MEAN NUMBER OF REPLACEMENTS PER YEAR OF THE  
FEMALE EXPERIMENTAL GROUP, BY AGE  
AT TIME OF WARSHIP

Age at Replacement	Age at Time of Wardship			
	12	13	14	15
12	0.66			
13	*	2.00		
14	*	1.00	0.57	
15	*	1.33	1.00	0.55
16	*	1.20	4.60	0.22
17	*	0.40	2.80	1.25

\*In each of these cases the sample had decreased by at least half, therefore, the figures are omitted on the basis of being an insufficient sample.

Blank space indicates that this age group was not yet in care.

#### Age Thirteen, at Time of Wardship

The male experimental group admitted at age thirteen remains stable through age fourteen, and then moves up to 1.57 replacements at age fifteen, and then decreases slightly to 1.50 replacements at age sixteen. The female experimental group, however, is irregular in its progression, with two replacements at age thirteen; only one replacement at age fifteen, and decreasing slightly at age sixteen, and reaching relative stability during the year prior to dis-

charge when the age seventeen experimental group has only 0.40 replacements.

#### Age Fourteen, at Time of Wardship

The male experimental group admitted at age fourteen, moves with a steady retrogression over a period of three years, from 1.57 replacements at age fourteen to a relatively stable 0.50 replacements at age sixteen. The female experimental group, on the other hand, moves from a low rate of 0.57 replacements at age fourteen to a staggering number of 4.60 replacements at age sixteen, and then decreasing, but remaining at a rather unstable 2.80 replacements at age seventeen.

#### Age Fifteen, at Time of Wardship

The male experimental group again moves with a steady retrogression from 1.60 replacements at age fifteen to a stable 0.33 replacements during the year prior to discharge. The female experimental group, on the other hand, moves from 0.55 replacements at age fifteen to a stable 0.22 replacements at age sixteen, and then jumping drastically to 1.25 replacements during the year prior to discharge.

#### Control Group

The control group is composed of twenty-five males and twenty-five females, ranging in age from thirteen to eighteen years of age. The age at the time of wardship, for this group varied from age one to age eleven.

The Number of Replacements During the  
First Two Years in Care

Following the same procedure as with the experimental group, the first two years of each child's wardship in the control group, were examined to determine the number of replacements which were made during this period of time.

TABLE 8

NUMBER OF REPLACEMENTS DURING FIRST TWO YEARS  
IN CARE OF THE TOTAL CONTROL GROUP  
BY PERCENTAGE

Number of Replacements	Percentage of Frequency
0 . . . . .	58
1 . . . . .	30
2 . . . . .	8
3 . . . . .	4
4 . . . . .	..
5 . . . . .	..
6+ . . . . .	..

As depicted in Table 8, 58% of the control group did not have any moves during their first two years in care. Thirty per cent had one replacement; 8% had two replacements; and 4% had three replacements. None of the children in the control group had more than three replacements during their first two years in care.

The Number of Replacements During the  
Adolescent Years

The control group was next examined in terms of replacements for the entire adolescent years in care. The results of this examination are summarized in the following table.

TABLE 9

NUMBER OF REPLACEMENTS DURING ADOLESCENT YEARS  
OF THE CONTROL GROUP, BY PERCENTAGE

Number of Replacements	Percentage of Frequency
0 . . . . .	58
1 . . . . .	16
2 . . . . .	8
3 . . . . .	2
4 . . . . .	4
5 . . . . .	4
6+ . . . . .	8

Forty-two per cent of the children in the control group underwent replacement during their adolescent years. Sixteen per cent had one replacement, 8% had two replacements, 2% had three replacements, 4% had four replacements, 4% had five replacements, and 8% had six or more replacements.

The number of children not having any replacements was 58%, which is exactly the same as the result in this category from Table 8.

The Number of Replacements Per Year During  
the Adolescent Years

The control group was then examined in terms of the mean number of yearly turnover of placements, by sex, and the age during which these replacements occurred.

As illustrated, in the following table, the mean number of replacements for a twelve year old male is 0.40. This figure drops to 0.16 at age thirteen; rises to 0.31 at age fourteen; drops again to 0.20 at age fifteen, then rises to

its highest point 0.61 at age sixteen. During the year prior to discharge the mean number of replacements drops to 0.27.

TABLE 10  
MEAN NUMBER OF REPLACEMENTS PER YEAR OF  
CONTROL GROUP, BY AGE AND SEX

Age at Replacement	Mean Number of Replacements		
	Male	Female	Total
12	0.40	0.20	0.30
13	0.16	0.52	0.34
14	0.31	0.27	0.29
15	0.20	0.22	0.21
16	0.61	0.41	0.51
17	0.27	0.30	0.28
Total	1.95	1.92	1.93

The female control group replacements are as follows: 0.20 at age twelve; 0.52 at age thirteen; 0.27 at age fourteen; 0.22 at age fifteen; 0.41 at age sixteen and 0.30 at age seventeen.

The total number of replacements for the male control group during the adolescent period is 1.95, and 1.92 for the female control. In terms of the mean number of replacements per year during the adolescent years, both control groups had 0.32 replacements per year. (see table 16)

The Number of Replacements Per Year by Age  
at the Time of Wardship

The control group was also studied in terms of the frequency of replacements by their ages at the time of wardship. Three age groupings were chosen for examination, because of the quantity of the sample they represented. Nine males and six females were age one at time of wardship; similarly six males and seven females were between the ages of eight and nine. Six males and five females were between the ages of ten and eleven. These three groupings represent seventy-nine per cent of the control group. Only the replacements during the adolescent years were examined.

TABLE 11

MEAN NUMBER OF REPLACEMENTS PER YEAR  
OF THE MALE CONTROL GROUP, BY AGE  
AT TIME OF WARDSHIP

Age at Replacement	Age at Time of Wardship		
	1	8-9	10-11
12	0.00	1.16	0.33
13	0.11	0.16	0.16
14	0.00	0.33	0.66
15	0.16	0.00	0.50
16	0.33	*	*
17	0.00	*	*

\*In each of these cases the sample had decreased by at least half, therefore, the figures are omitted on the basis of being an insufficient sample.



TABLE 12

MEAN NUMBER OF REPLACEMENTS PER YEAR  
OF THE FEMALE CONTROL GROUP, BY AGE  
AT TIME OF WARSHIP

Age at Replacement	Age at Time of Wardship		
	1	8-9	10-11
12	0.50	0.00	0.20
13	0.18	1.71	0.00
14	0.18	0.80	0.00
15	0.20	0.25	0.00
16	*	*	*
17	*	*	*

\*In each of these cases the sample had decreased by at least half, therefore, the figures are omitted on the basis of being an insufficient sample.

#### Age One, at Time of Wardship

The female control group admitted at age one moves irregularly from 0.50 replacements at age twelve to only 0.18 replacements at age thirteen where it remained for the following year and then rose slightly to 0.20 at age fifteen. The male control group did not have any replacements at age twelve. At age thirteen there were 0.11 replacements, but this again returns to zero replacements at age fourteen. At age fifteen there is a slight rise to 0.16 replacements and at age sixteen the highest point 0.33 replacements is reached, following which it again

returns to zero at age seventeen.

#### Age Eight and Nine, at Time of Wardship

The female control group increases sharply from zero replacements at age twelve to 1.71 replacements at age thirteen, then drops off gradually to a relatively stable 0.25 replacements at age fifteen. The male control group drops sharply from a high figure of 1.16 replacements at age twelve to a rather stable 0.16 replacements at age thirteen, and then increases to 0.33 replacements at age fourteen and zero at age fifteen.

#### Age Ten and Eleven, at Time of Wardship

The female control group falls from a low 0.20 replacements at age twelve to zero replacements at ages thirteen, fourteen and fifteen. The male control group drops from 0.33 replacements at age twelve to 0.16 replacements at age thirteen, then increases to 0.66 replacements at age fourteen and dips again to 0.50 replacements at age fifteen.

#### Comparison Between Experimental and Control Groups

##### The Number of Replacements During the First Two Years in Care

The first two years of wardship in the experimental group were compared with the first two years of wardship in the control group.

TABLE 13

COMPARISON OF THE NUMBER OF REPLACEMENTS DURING  
THE FIRST TWO YEARS IN CARE, OF THE  
EXPERIMENTAL AND THE CONTROL GROUPS  
BY PERCENTAGE

Number of Replacements	Percentage of Frequency		
	Experimental	Control	Difference be- tween Experi- mental and Control Groups
0	36	58	-22
1	20	30	-10
2	12	8	+ 4
3	14	4	+10
4	4	..	+ 4
5	6	..	+ 6
6+	8	..	+ 8

As depicted in Table 13, 58% of the control group did not have any replacements during their first two years in care, as compared with 36% of the experimental group; a difference of 22% in the number of children not undergoing replacements. Thirty-two per cent of the experimental group had three or more replacements as compared with 4% of the control group. In addition, no child in the control group had more than three replacements, while the per cent in the experimental group increased with each succeeding year, with a total of 18% of the experimental

group having four or more replacements, and 8% having six or more replacements.

The Number of Replacements During the Adolescent Years

The experimental and control groups were next compared in terms of replacements for the entire adolescent years in care.

TABLE 14

NUMBER OF REPLACEMENTS DURING ADOLESCENT YEARS OF THE EXPERIMENTAL AND CONTROL GROUPS BY PERCENTAGE

Number of Replacements	Percentage of Frequency		
	Experimental	Control	Difference between Experimental and Control Groups
0	20	58	-38
1	16	16	..
2	20	8	+12
3	8	2	+ 6
4	6	4	+ 2
5	6	4	+ 2
6+	24	8	+16

Of those children admitted to care and placed in foster homes, as adolescents, 80% were faced with replacements, whereas of those admitted to care prior to adolescence, only 42% had subsequent changes of placements, during adolescence. Twenty-four per cent of the experimental group had six or more replacements whereas only 8% of the control group had this number of replacements.

#### The Number of Replacements per Year During the Adolescent Years

The experimental and control groups were next compared in terms of the number of replacements per year during the adolescent years in care.

Some of the adolescents of both groups in this study, had replacements, regardless of when they came into care. The number, however, increased drastically for those children who were adolescents at the time of wardship. If, for example, a male was admitted to care during his twelfth year, and was replaced each year according to the mean, he would have a total of 5.65 replacements during his six years in care. Similarly, a female admitted to care during her twelfth year would have 6.64 replacements during the same period. When the total experimental group is compared with the total control group, there is a mean difference of 4.39 more replacements for the experimental group than for the control group, over the six year period.

TABLE 15

MEAN NUMBER OF REPLACEMENTS PER YEAR OF BOTH  
THE EXPERIMENTAL AND CONTROL GROUPS,  
BY AGE, AND SEX

Age at Replacement	Frequency			
	Experimental		Control	
	Male	Female	Male	Female
12	0.25	0.66	0.40	0.20
13	1.23	1.33	0.16	0.52
14	1.36	0.71	0.31	0.27
15	1.20	0.87	0.20	0.22
16	0.86	1.63	0.61	0.41
17	0.75	1.44	0.27	0.30
Total	5.65	6.64	1.95	1.92

The following table illustrates the mean number of replacements per year during the adolescent years, at the rate of 5.65 replacements for the male experimental group, 6.64 replacements for the female experimental group, 1.95 replacements for the male control group and 1.92 replacements for the female control group, over the six year period.

As depicted, the mean number of replacements per year for the male experimental group is 0.94 replacements as compared with the male control groups 0.32 replacements. The female experimental group on the other hand has a mean num-

ber of 1.10 replacements per year as compared with the female control groups figure of .32 replacements per year.

TABLE 16  
MEAN NUMBER OF REPLACEMENTS PER YEAR  
DURING ADOLESCENT YEARS

Group	Replacements	
	Male	Female
Experimental . . . . .	0.94	1.10
Control . . . . .	.32	.32

The Number of Replacements Per Year  
by Age at the Time of Wardship

The experimental and control groups were then compared in terms of the frequency of replacements, during the adolescent years, by their ages at the time of wardship.

Age Twelve, at Time of Replacement

Of those children who were replaced at age twelve, the number of replacements in the male control group, who were between their eighth and ninth years at time of wardship surpassed all other groups with 1.16 replacements during this year. Two groups of females, those in the control group who were age one at time of wardship and those in the experimental group who were age twelve at time of wardship surpassed 0.50 replacements per year.

TABLE 17

MEAN NUMBER OF REPLACEMENTS PER YEAR OF THE MALE  
EXPERIMENTAL AND CONTROL GROUPS, BY AGE  
AT TIME OF WARSHIP

Age at Replacement	Age at Time of Wardship						
	1	8-9	10-11	12	13	14	15
12	0	1.16	0.33	0.25			
13	0.11	0.16	0.16	1.50	1.11		
14	0	0.33	0.66	1.66	1.11	1.57	
15	0.16	0	0.50	*	1.57	0.83	1.60
16	0.33	*	*	*	1.50	0.50	1.00
17	0	*	*	*	*	*	0.33

\*In each of these cases the sample had decreased by at least half, therefore, the figures are omitted on the basis of being an insufficient sample.

Blank space indicates that this age group was not yet in care.

#### Age Thirteen, at Time of Replacement

The male control group remained stable during this year with only 0.16 replacements for those who were between the ages of eight and eleven at time of wardship. Of the female control group, only those who were ages eight to nine at time of wardship had an appreciable number of replacements with 1.71 per year. Of the male experimental group, those who were twelve at the time of wardship had 1.50 replacements; those who were thirteen at the time of



wardship had 2.00 replacements.

TABLE 18

MEAN NUMBER OF REPLACEMENTS PER YEAR OF THE FEMALE  
EXPERIMENTAL AND CONTROL GROUPS, BY AGE  
AT TIME OF WARDSHIP

Age at Replacement	Age at Time of Wardship						
	1	8-9	10-11	12	13	14	15
12	0.50	0	0.20	0.66			
13	0.18	1.71	0.00	*	2.00		
14	0.18	0.80	0.00	*	1.00	0.57	
15	0.20	0.25	0.00	*	1.33	1.00	0.55
16	*	*	*	*	1.20	4.60	0.22
17	*	*	*	*	0.40	2.80	1.25

\*In each of these cases the sample had decreased by at least half, therefore, the figures are omitted on the basis of being an insufficient sample.

Blank space indicates that this age group was not yet in care.

#### Age Fourteen, At Time of Replacement

The male experimental group far surpassed the number of replacements encountered by the male control group. Those who were age twelve at time of wardship had 1.66 replacements; those who were age thirteen at time of wardship had 1.11 replacements; those who were fourteen at time of wardship had 1.57 replacements, whereas, of the control group the highest number of replacements, 0.66 was reached

for those males who were between the ages of ten and eleven at time of wardship.

Of the female control group, those who were between the ages of eight and nine at the time of wardship had the highest number of replacements with 0.80, while the remaining female control group remained stable. During this same period the female experimental group had 1.00 replacement for those females who were age thirteen at the time of wardship, while those who were fourteen at the time of wardship had only 0.57 replacements.

#### Age Fifteen, at Time of Replacement

The male control group remained relatively stable with a high of 0.50 replacements occurring for those males who were admitted to care between their tenth and eleventh years. Similarly, the female control group had only 0.25 replacements for those who were between the ages of eight and nine at the time of wardship.

The experimental groups, however, had a greater number of replacements overall. The male experimental group, who were thirteen at the time of wardship had 1.57 replacements; those who were fourteen at time of wardship had 0.83 replacements; those who were fifteen at the time of wardship had 1.60 replacements.

The female experimental group, had 1.33 replacements for those females who were age thirteen at the time of wardship; 1.00 replacement for those who were fourteen at

the time of wardship; 0.55 replacements for those who were fifteen at the time of wardship.

#### Age Sixteen, at the Time of Replacement

Of the female experimental group, those who were thirteen at the time of wardship had 1.20 replacements; those who were fourteen at the time of wardship had 4.60 replacements; while those who were fifteen at the time of wardship had only 0.22 replacements.

Of the male experimental group, those who were thirteen at the time of wardship had 1.50 replacements; those who were fourteen at the time of wardship had 0.50 replacements; those who were fifteen at the time of wardship had 1.00 replacement. The only control group remaining are those males who were age one at the time of wardship, they had only 0.33 replacements.

#### Age Seventeen, at Time of Replacement

The female experimental group had only 0.40 replacements for those females who were age thirteen at the time of wardship; a high 2.80 replacements for those females who were fourteen at the time of wardship; and 1.25 replacements for those who were age fifteen at the time of wardship.

Of the male sample, only those who were age one at the time of wardship, and those who were fifteen at the time of wardship remained. Those in the control group who were age one at the time of wardship had zero replacements. Those in the experimental group who were fifteen at the

time of wardship had only 0.33 replacements.

## CHAPTER IV

### FINDINGS AND SUMMARY

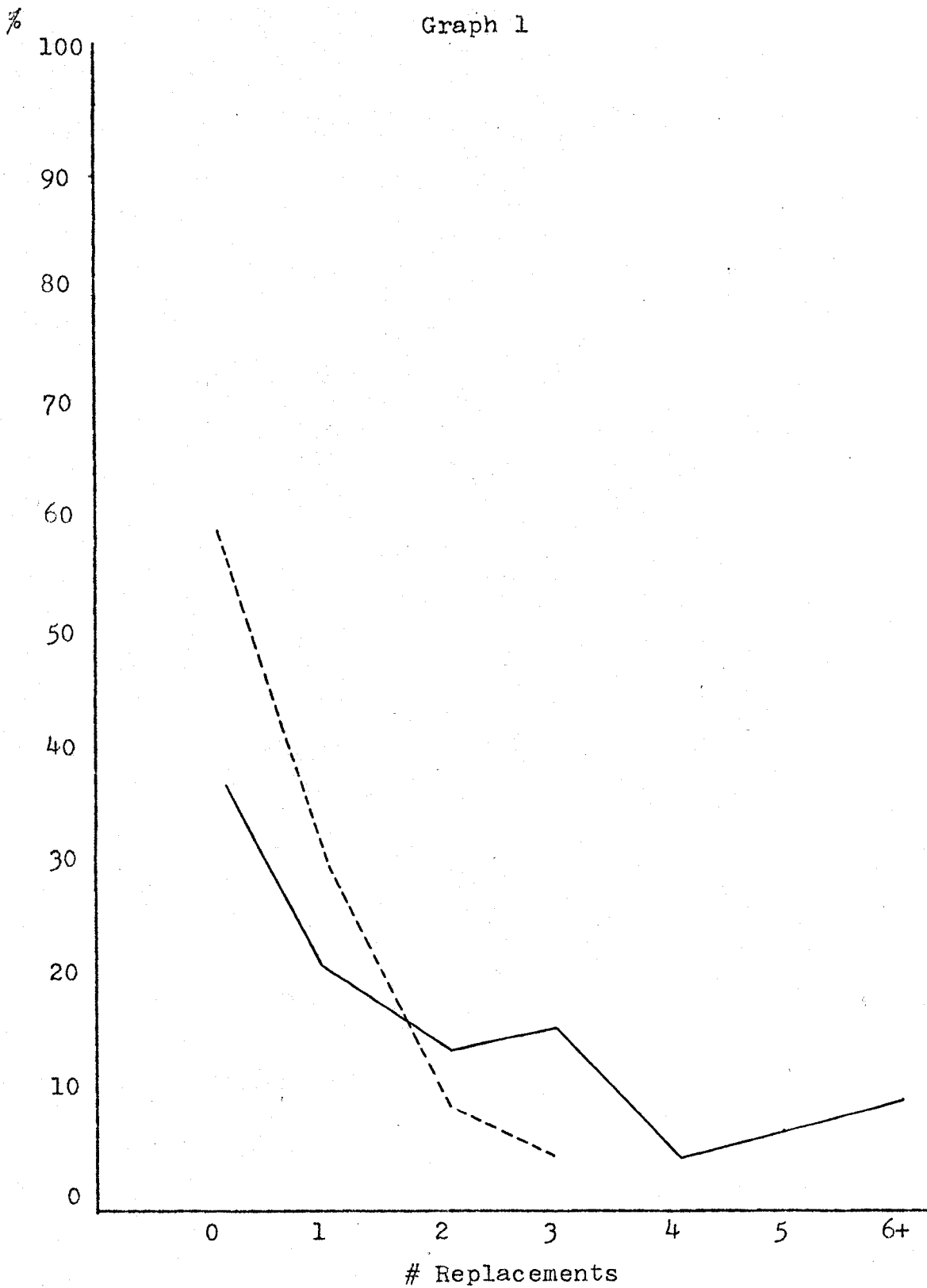
#### Findings

The findings of this study will be presented under the following headings; the number of replacements during the first two years in care; the number of replacements during the adolescent years; the number of replacements per year during the adolescent years; and the number of replacements per year by age at the time of wardship.

#### The Number of Replacements During the First Two Years in Care

Table 13 depicts that fifty-eight per cent of the control group did not have any replacements during their first two years in care, as compared with thirty-six per cent of the experimental group. Graph 1 illustrates these findings.

None of the children in the control group had more than three replacements during their first two years in care, whereas eighteen per cent of the experimental group had more than three replacements in the same period of time. This suggest that, THERE IS LESS DANGER OF MULTIPLE REPLACEMENTS, DURING THE FIRST TWO YEARS IN CARE, FOR THE CHILD WHO IS ADMITTED TO CARE PRIOR TO HIS ADOLESCENCE, THAN FOR THE CHILD ADMITTED DURING ADOLESCENCE. In addi-



Graph 1.--Graph of the number of replacements during the first two years in care, by percentage.  
 Experimental group \_\_\_\_\_  
 Control group -----

tion, these figures appear to confirm Parker's results, that AS THE ADMISSION AGE INCREASES SO DOES THE FREQUENCY OF REPLACEMENTS.

#### The Number of Replacements During the Adolescent Years

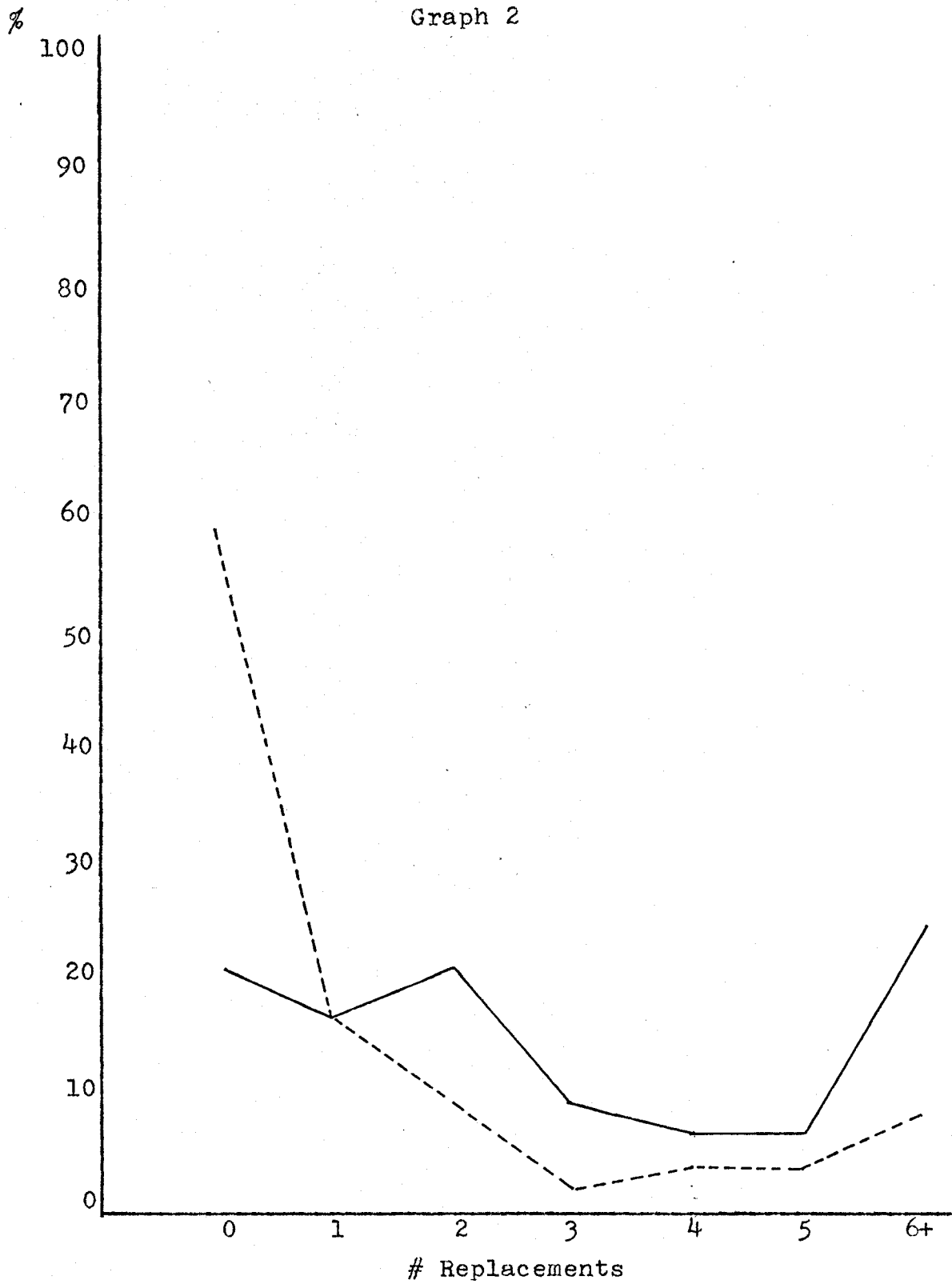
Table 14 depicts that twenty per cent of those children who were adolescents at the time of wardship did not have any replacements during the adolescent years, whereas fifty-eight per cent of those who were under age twelve at the time of wardship, did not have any replacements during their adolescent years. Graph 2 illustrates this finding.

An examination of these figures reveals that, eighty per cent of those children who were adolescents at the time of wardship, were faced with replacements, whereas forty-two per cent of those who were under the age of twelve at the time of wardship, had subsequent changes of placement. This means that the CHILDREN WHO BECOME WARDS IN THEIR ADOLESCENT YEARS ARE IN NEARLY TWICE THE DANGER OF UNDERGOING REPLACEMENT DURING THE ADOLESCENT YEARS, THAN CHILDREN WHO WERE MADE WARDS BEFORE THEIR TWELFTH BIRTHDAY.

#### The Number of Replacements Per Year During the Adolescent Years

As depicted in Table 15, the total mean number of replacements, for the six adolescent years in care, is 5.65 replacements for the male experimental group; 6.64 replacements for the female experimental group; 1.95 replacements

Graph 2



Graph 2.--Graph of the number of replacements during the adolescent years in care, by percentage.  
Experimental group —————  
Control Group - - - - -



for the male control group; and 1.92 replacements for the female control group.

As depicted in Table 16, the mean number of replacements per year, over this six year adolescent period is 0.94 replacements per year for the male experimental group; 1.10 replacements per year for the female experimental group. These figures mean that THE CHILD WHO IS AN ADOLESCENT AT THE TIME OF WARDSHIP, CAN EXPECT REPLACEMENT APPROXIMATELY ONCE EACH YEAR, WHILE HE IS IN CARE.

Both the male and female control groups have a mean number of 0.32 replacements per year during the adolescent years. This means that THE CHILD WHO IS YOUNGER THAN TWELVE AT THE TIME OF WARDSHIP, CAN EXPECT REPLACEMENT APPROXIMATELY ONCE EVERY THREE YEARS, DURING HIS ADOLESCENT YEARS.

The literature has linked repeated replacements to emotional disturbance and makes clear how each rejection intensifies the difficulties. If this criterion is accepted, then it follows that, THE CHILD WHO IS AN ADOLESCENT AT THE TIME OF WARDSHIP, FACES GREATER LIKELIHOOD OF SUFFERING FROM EMOTIONAL DISTURBANCE.

#### The Number of Replacements Per Year, By Age at the Time of Wardship

A review of Tables 17 and 18 shows that the experimental groups had far more placements during the adolescent years than the control group.

One figure, that of the female experimental group, who were fourteen at the time of wardship, which shows that at age sixteen, the mean number of females had 4.60 replacements, stands out as a staggering contrast to the other figures presented. This researcher offers two explanations for this high number. The first, is a result of a study conducted by John Liccione<sup>57</sup> in which he found that the largest amount of tension between mother and daughter exists at age fifteen, and the greatest amount of father-daughter tension exists at age seventeen. This tension may bring about a greater number of replacements at age sixteen. The second is that, as the total sample of this grouping is rather small it is hazardous to draw any firm conclusions.

The problem under consideration in this study has been a descriptive one which attempted to discover the extent of placement turnover in the adolescent population, of the Roman Catholic Children's Aid Society for the County of Essex. In addition, this descriptive data was used to investigate the hypothesis that, the age at which a child is made a ward of the Roman Catholic Children's Aid Society for the County of Essex, has a significant affect upon the stability of his placement.

This researcher offers this study as further evidence

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<sup>57</sup>J. Liccione, The Changing Family Relationship of Adolescent Girls, Journal of Abnormal and Social Psychology, Vol. 51 (1965) pp. 421-26.

that age has a significant affect upon the stability of placement. Further, since the adolescent population of the Roman Catholic Children's Aid Society for the County of Essex undergo replacement with such frequency, alternatives to their present placement policies and practices should be sought.

### Summary

The problem under consideration in this study is a descriptive one which presents the extent of placement turnover in the adolescent population of wards in the care of the Roman Catholic Children's Aid Society for the County of Essex.

The hypothesis is; The age at which a child is made a ward of the Roman Catholic Children's Aid Society for the County of Essex, has a significant affect upon the stability of his placement.

The population from which the sample was selected is that of the Roman Catholic Children's Aid Society for the County of Essex. At the time of data compilation there were three hundred and eleven children in the care of this agency of which ninety-seven were between the ages of twelve and eighteen.

The sample of one hundred cases, including an experimental group and a control group were selected from the "Monthly Statistical Report of the Children in Care". Each of these groups were composed of twenty-five males and

twenty-five females. Those children who made up the experimental group were all children who were over the age of twelve at the time of admission to care. Those children who made up the control group were all children who were under the age of twelve at the time of admission to care.

A check list was used to gather the data. The researcher used only face sheet data, in order to avoid subjective judgements, and recorded the age at placement and replacement.

The experimental group data and control group data were reviewed under the following headings; the number of replacements during the first two years in care; the number of replacements during the adolescent years; the number of replacements per year during the adolescent years; and the number of replacements per year by age at the time of wardship. This was followed by a comparison of the experimental and control group data, under the same headings.

The findings of this study were; that THERE IS LESS DANGER OF MULTIPLE REPLACEMENTS, DURING THE FIRST TWO YEARS IN CARE, FOR THE CHILD WHO IS ADMITTED TO CARE PRIOR TO HIS ADOLESCENCE, THAN FOR THE CHILD ADMITTED DURING ADOLESCENCE. This appears to confirm Parker's results, that AS THE ADMISSION AGE INCREASES SO DOES THE FREQUENCY OF REPLACEMENTS.

Secondly, that CHILDREN WHO BECOME WARDS IN THEIR ADOLESCENT YEARS ARE IN NEARLY TWICE THE DANGER OF UNDERGOING REPLACEMENT DURING THE ADOLESCENT YEARS, THAN

CHILDREN WHO WERE MADE WARDS BEFORE THEIR TWELFTH BIRTHDAY.

Thirdly, that THE CHILD WHO IS AN ADOLESCENT AT THE TIME OF WARDSHIP, CAN EXPECT REPLACEMENT APPROXIMATELY ONCE EACH YEAR, WHILE HE IS IN CARE, whereas, THE CHILD WHO IS YOUNGER THAN TWELVE AT THE TIME OF WARDSHIP, CAN EXPECT REPLACEMENT APPROXIMATELY ONCE EVERY THREE YEARS, DURING HIS ADOLESCENT YEARS.

Fourthly, that THE CHILD WHO IS AN ADOLESCENT AT THE TIME OF WARDSHIP FACES GREATER LIKELIHOOD OF SUFFERING FROM EMOTIONAL DISTURBANCE.

The hypothesis is confirmed, by the weight of this data, that THE AGE AT WHICH A CHILD IS MADE A WARD OF THE ROMAN CATHOLIC CHILDREN'S AID SOCIETY FOR THE COUNTY OF ESSEX, HAS A SIGNIFICANT AFFECT UPON THE STABILITY OF HIS PLACEMENT.

## APPENDICES

Appendix I

Male Experimental Group

Case No.	Age at Wardship	Age at Replacement					
		12	13	14	15	16	17
1	12	-	-				
2	12	x	xx	x	-	-	xxxxx
3	12	-	xxx	xxx			
4	12	-	x	x	-	-	-
5	13		-	-	xxx		
6	13		-	-	x	x	-
7	13		xxxxx	xx	xxx		
8	13		x	x	-	-	-
9	13		x	xx	x		
10	13		-	x	-	x	
11	13		-	-			
12	13		-	xx	xxx	xxxx	
13	13		xxx	xx			
14	14			xx			
15	14			x	xx		
16	14			xx	-	-	
17	14			xxxxxx	xx	xx	
18	14			-	-	-	-
19	14			-	x	-	
20	14			-	-		
21	15				-	x	-
22	15				-	-	
23	15				xxxxx	x	
24	15				xx	xxx	x
25	15				x	-	-

x indicates replacement

- indicates child in care with no replacements

blank indicates child not in care

Appendix II

Female Experimental Group

Case No.	Age at Wardship	Age at Replacement					
		12	13	14	15	16	17
1	12	x	-	-	-		
2	12	x	-				
3	12	-	-				
4	13		xxx	xx	xxxx	xx	xx
5	13		-	-	x	xx	-
6	13		xxxxx	xx	-	xx	-
7	13		xx	-	xx	-	-
8	13		xx	x	-	-	-
9	13		-	x	x		
10	14			xx	xx	xxxxx xxx	xx
11	14			-	-		
12	14			-	-		
13	14			-	-	-	x
14	14			-	x	xx	xx
15	14			x	xx	xxxxx xx	xxxxx
16	14			x	xx	xxxxxxx	xxxx
17	15				-	-	x
18	15				-	-	-
19	15				-	-	xx
20	15				xx	-	-
21	15				-	-	xxxx
22	15				-	-	-
23	15				xx	xx	x
24	15				-	-	xx
25	15				x	-	

x indicates replacement

- indicates child in care with no replacement

blank indicates child not in care



Appendix III  
Male Control Group

Case No.	Age at Wardship	Age at Replacement					
		12	13	14	15	16	17
1	1	-	-	-			
2	1	-	-				
3	1	-	-	-			
4	1	-	x	-	-	x	-
5	1	-	-	-	x	x	
6	1	-	-	-	-	-	-
7	1	-	-	-	-	-	-
8	1	-	-	-	-	-	-
9	1	-	-	-	-	-	-
10	2	x	-	-			
11	4	-	-				
12	6	-	x	x	-	x	x
13	7	-	-				
14	8	-	-	-	-		
15	8	-	-	-			
16	9	xxxxxx	x	-	-	x	x
17	9	x	-	xx			
18	9	-	-	-	-	-	-
19	9	x	-	-	-	xxx	x
20	10	-	-	-	-	x	
21	11	x	-	xxx	x	-	-
22	11	-	x	-	-		
23	11	x	-	-			
24	11	-	-	-			
25	11	-	-	x	x	-	-

x indicates replacement

- indicates child in care with no replacement

blank indicates child not in care

Appendix IV

Female Control Group

Case No.	Age at Wardship	Age at Replacement					
		12	13	14	15	16	17
1	1	xx	x	-	x	-	-
2	1	-	-	-	-	-	-
3	1	x	-	-	-	-	-
4	1	-	-	x	-	-	-
5	1	-	-	-	-	-	-
6	1	-	-	-	-	-	-
7	2	-	-	-	-	-	-
8	3	-	-	-	-	-	-
9	4	-	-	-	-	-	-
10	4	x	-	-	-	-	-
11	5	-	-	-	-	-	-
12	6	-	-	x	xx	xx	x
13	7	-	-	-	-	-	-
14	8	-	xxxxx xxxxx	x	x	-	-
15	8	-	-	-	-	-	-
16	9	-	-	-	-	-	-
17	9	-	-	-	-	-	-
18	9	-	-	-	-	-	-
19	9	-	xx	xxx	-	xx	x
20	9	-	-	-	-	-	-
21	10	-	-	-	-	-	-
22	10	-	-	-	-	x	x
23	10	x	-	-	-	-	-
24	10	-	-	-	-	-	-
25	11	-	-	-	-	-	-

x indicates replacements

- indicates child in care with no replacements

blank indicates child not in care

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## VITA

Brian Blonde was born September 2, 1940 at Chatham, Ontario. He attended Blessed Sacrement elementary school where he completed grade 7 in June, 1954, and then he went to St. Joseph's Convent in Red Deer, Alberta where he completed grade 10 in June, 1957. He obtained his senior matriculation from Notre Dame College, at Wilcox, Saskatchewan in June 1960.

From September, 1960 to May, 1964, he attended Notre Dame College at Wilcox, Saskatchewan. In May 1969, he graduated with a Bachelor of Arts degree in the Liberal Arts. He was admitted to the Master of Social Work program at the University of Windsor in September, 1969, and expects to graduate in May, 1971.

Mr. Blonde was employed with the Roman Catholic Children's Aid for the County of Essex from June 1964 until September, 1965, and again from June, 1968 until September 1969. For these two years he was a Social Worker in the Children's Services Department of the Agency.