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THE PERCEIVED INFLUENCE OF SPIRITUALITY IN
ADOLESCENT RESIDENTIAL GROUP HOMES

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Karima Aisha Deadrick-Boone

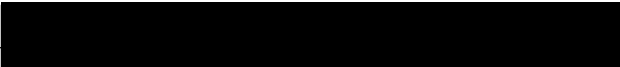
June 2004

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A Project
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Approved by:


Dr. Rosemary McCaslin, Faculty Supervisor
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06-04-04
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Francie Jones, Director, Standing Tall
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ABSTRACT

This qualitative study explored the perceived influence of spirituality on client outcomes in adolescent residential group homes. Face-to-face interviews were conducted with professionals implementing or observing spiritually focused intervention practices with adolescents in residential group home treatment. Their client population focus included ethnic minority youth ages 12-18 with histories of severe abuse, neglect, or behavioral problems. The narrative data collected during these interviews were transcribed and analyzed for themes that emerged regarding the perceived strengths, challenges, and outcomes of including spirituality in adolescent treatment. Of particular interest were the reports of how ethnic minority clients received and responded to spiritual and religious practices based on cultural norms. The sample consisted of 12 group home professionals who functioned in positions that required close contact with adolescent clients and provided opportunities for observation of their response to treatment. Study results offer a deeper understanding of the influence and implementation of spiritual practices among children impacted by child welfare.

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Thank you to Dr. Roslyn Turner-Clark for support of this project and linking me to vital resources.

Standing Tall Home for girls, thank you for support and participation.

DEDICATION

With my deepest love and appreciation this project is
dedicated to...

The "village" of spiritual leaders that helped birth and raise me to be an humble instrument of God. I will be forever grateful for the guidance I am blessed with and the prayers of my ancestors who have sacrificed for me in life and death.

To my mother, grandmothers, extended family, sister-friends and prayer partners who have spiritually covered me throughout this project and in life. Thank you for teaching me the power of prayer.

To my beautiful boys Daniel and Darnell, you are my blessings, my gifts, my heart, and my contribution. Thank you for being patient with Mommy as I learn and teach.

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CHAPTER ONE

INTRODUCTION

Problem Statement

Youth populations from low socioeconomic conditions have a higher incidence of child abuse, substance abuse, teenage pregnancy, homelessness, and criminal behavior due to poverty and racism. As a result, there is an overrepresentation of ethnic minority children, identified as African American and Latino, in the United States child welfare system (U.S. Department of Health and Human Services, 2003).

When relative placement is unavailable, many of these children are placed outside the home in foster care or residential group homes. Residential group home placements provide care for children and adolescents with significant problems in their home or social environment. The clients served in group homes include children and adolescents who are deemed dependents of the court based on evidence that the child is: 1) a victim of neglect or abuse, 2) a perpetrator of physical or sexual abuse, 3) emotionally and behaviorally disturbed, or 4) a juvenile delinquent. In fact, residents of adolescent group homes represent the most difficult to place clients who have either been repeatedly moved from foster homes due to behavioral

problems or complex circumstances surrounding their dependency (i.e., sexually abused, pregnant teen mother already parenting one child).

Among the out-of-home placement interventions utilized by child welfare agencies, residential group home treatments are designed to create a healthy family/community atmosphere to foster a nurturing yet structured environment for emotional healing and comprehensive care. In addition, the intervention focus is specifically intended to provide supervision, protection, housing, case management, and behavioral interventions that will improve the youth's social and relational functioning. In fact, as a licensing requirement, group home programs are mandated to provide psychoeducational, cognitive behavioral and social learning treatment approaches to redirect maladaptive behavior patterns and increase coping skills.

While they have shown some degree of effectiveness in improving the immediate behavioral outcomes of the clients (Berry, et. al, 1992), these treatment focuses were grounded in theories and practices that concentrated their intervention on cognitive and behavioral development and failed to address the spiritual aspect of the client. In doing so, the treatment approach simultaneously neglected

the cultural dynamics embedded in the spiritual practices of African American and Latino communities, and their connection to the religious communities that often influenced the family's identity and created needed support systems. Considering the group home program is intended to create and model a healthy functioning family environment, failure to appropriately include significant cultural and human components of spirituality should entreat the social work profession to question the overall effectiveness and competency of the treatment modality.

As the demand for child welfare services in low socioeconomic communities has increased, so has the demand for community based and culturally relevant service providers. Seeing the need for services in their own communities, local churches that already provided influential leadership began taking on an additional role as social service providers. Among the many services provided by the faith-based community, residential group homes emerged with added dimensions to their treatment approach. Group home staff and professionals in the faith-based community considered the inclusion of religious practices (i.e. prayer, church attendance, bible study) a necessary tool for spiritual development. For these organizations, spiritual development was perceived as an

essential and neglected component to the rehabilitative and restorative intervention process.

Spirituality as an integral component of culture among many African American and Latino families and its impact on adolescent identity development has, by and large, been ignored in the field of social work (Hill, 1998). This is a critical deficiency considering the consequences of neglecting culturally relevant identity development as a means of restoring and building self-confidence, self-esteem, and connection. Most importantly, strong consideration must be given to the number of clients in residential treatment who have been estranged from their families of origin, severely abused and neglected, suffered abandonment and loss, labeled "disturbed" and "delinquent" and, as a result, lack identification with support systems other than child protection and criminal justice. The spiritual development of these adolescents can function as a vital long-term tool for coping, survival and connectedness.

The participation of religious organizations in social welfare and advocacy for underrepresented minority groups is not new. In fact, both nationally recognized religious groups and local community churches have historically demonstrated an active interest in child

welfare through orphanages, mentoring programs, tutoring, and family preservation services (e.g., counseling, food banks). However, with the federal government's recent partnership with faith-based organizations to provide more private sector social services, questions are being raised about the influence of religion on treatment outcomes. Religious leaders, especially among urban minority populations, have long contended that the inclusion of religious and spiritual practice and commitment are not simply added for good measure. Rather, they are critical developmental links that acknowledge the importance of spiritual well being in addition to mental and physical health (Dilullo, 2001). Therefore, participation in mentoring programs, bible study, prayer and meditation practices are equally relevant interventions that produce different, more holistic changes that ultimately lead to more successful client outcomes.

While these assertions have been made, differences in program effectiveness or the perceptions of those who implement them have not been empirically tested. There are many unanswered questions about this community of residential group home providers and professionals. In fact, when considering the impact of spirituality among in group home programs, it is important to note that the

programs implemented by faith-based and non-faith-based group homes are governed by legal mandates that require the exact same non-spiritual intervention and treatment modalities. However, for the purpose of this study, faith-based group homes are defined as residential group home facilities in which professional staff implement and encourage the voluntary participation of adolescents in religious practices of spirituality and include these practices in the daily operation of the facility. A program of this type may include church attendance as a regular program offering on Sunday morning, teen bible study as a weekly activity, mentorship with religious leaders, or prayer before individual or group therapy sessions. These facilities may not be directly linked to one particular church organization or religious group. Rather, they are governed by a spiritual belief system that influences the operation of the overall program and is shared with the clients.

With a lack of research on the practices of the faith-based group home community, it is necessary to further explore and document what professionals working in this field believe to be the influence of spirituality on adolescent client outcomes in residential group home facilities.

Purpose of the Study

This study sought to fill gaps that currently exist in the body of knowledge about to the practices and perceptions of professionals in faith-based residential group homes. Through qualitative research this study entered the group home community and documented narrative data through interviews that question the strengths, challenges and norms of professionals working with minority adolescents. In doing so, this study captured the rich experiences and valuable perspectives of the professionals who are influential in predicting and identifying success outcomes of adolescents impacted by child welfare and juvenile justice systems.

Considering the impact of beliefs, norms and attitudes as predictive factors to treatment successes, the perceptions of professionals in residential group homes are critical in implicating further research and intervention improvements. Likewise, the perceptions of mental health providers assessing client behavior and thought patterns, are instrumental in drawing conclusions about the direct and indirect impact of religious and spiritual practices on behavioral outcomes. These reports may shed light on the belief that spirituality is a

significant cultural component that minority adolescent clients identify with in treatment.

This study systematically analyzed and empirically presented key themes identified in the narrative reports of the professionals interviewed. The perceptions of group home professionals who have worked in both faith-based and secular group home environments, were examined for recurring patterns and grouped by recurring themes that emerged. These themes provide desperately needed insight into the advantages, disadvantages, and beliefs about the inclusion of religious practices as a vehicle for spiritual development in adolescent residential treatment programming.

Although no causal relationships were drawn, this study reported conclusions made by professionals with direct service experience regarding the influence of spirituality on overall client outcomes. Attention was also given to the population studied, and whether or not religious practices in behaviorally focused interventions have an influential cultural connection.

Significance of the Project for Social Work

As the field of social work seeks to provide advocacy and empowerment to underrepresented and vulnerable populations, it must consider whether its current

understanding for social problems and interventions are developmentally holistic, and culturally competent. The skepticism of field workers and community leaders that suggest a lack of spiritual focus in the behavioral interventions of minority adolescents must be considered and investigated. Likewise, it is imperative to continually consult the community of practice to determine what "best practice" methods of intervention are being implemented with or without existing empirical validation.

Through this study the field of social work is further expanded in its insight and knowledge of the perceived differences in treatment as stated through the narratives of professionals with experience in faith-based and secular group home settings. Social work professionals who are closely connected with these communities can appeal to the empirical measures of knowledge provided by this study in their assessments of appropriate interventions for clients in this target population.

Finally, based on the themes reported in the study, significant implications for change in the current field of practice can be considered. As the expertise of the professionals implementing faith-based and secular residential group home programs is consulted, social workers functioning as advocates for urban minority

adolescents have a responsibility to insure the advancement to practice based on the potential improvement to the client's life outcome. In doing so, social workers are enabled to make changes in the assessment, planning, and implementation of culturally competent and spiritually relevant interventions.

CHAPTER TWO

LITERATURE REVIEW

Introduction

The problems encountered by ethnic minority adolescents in their social, mental and developmental functioning are complex and varied. The societal foundations of poverty and racism have assisted in creating an environment within minority communities inundated with behaviors considered maladaptive and antisocial in comparison with America's white middle class communities. In response to these presentations and the overwhelming number of minority adolescents represented in state child welfare and juvenile justice systems, many interventions have been implemented to redirect and rehabilitate these adolescents.

Residential group home facilities have functioned as an effective provider of mental health and social rehabilitation among these communities. However, with the increase of community faith-based group homes, questions are being raised about the influence of religion as a strong cultural component, in the successful outcomes of minority adolescents.

In this chapter, the complex problems minority adolescents face and the prevention/intervention strategy

that residential group home placements provide will be explored. There will be further discussion of the distinguishing characteristics that faith based group homes bring to their intervention approach and why there is speculation among the group home community of practice that suggests religious practice among this population has cultural and spiritual significance that leads to improved life outcomes.

Minority Adolescents in Child Welfare

Public health and child welfare advocates have long recognized a need for an increase in services of prevention and intervention for children and adolescents in the United States. Of particular concern are the populations of urban minority youth who are often poor and underserved in areas of education, mental health, and medical treatment (U.S. Department of Health and Human Services 1999,2001). These children are less likely to receive the same level of mental health treatment and medical insurance and access to education as their white middle class counterparts. Many of these disparities are a direct result of discrimination, cultural values, language barriers, poverty and immigration status (U.S. Department of Health and Human Services, 2001). As a result the numbers of African American and Latino adolescents

struggling with problems of unwed pregnancy, substance abuse, delinquency, sexual abuse, child abuse and neglect are above the average for adolescents of higher socioeconomic status and other ethnicities. Recognizing this problem, social scientists, child welfare, and public health advocates and the federal government have collaborated to devise effective prevention and intervention strategies that will decrease the number of adolescents at risk for juvenile delinquent behavior and incarceration, unwed pregnancies, substance abuse, homelessness and poor mental health (U.S. Department of Education, 2001).

Group Home Interventions

In response to the increasing problem of urban minority adolescents in need of social services such as behavioral redirection and rehabilitation, child welfare has seen an increased need for residential group home facilities to house children that have been removed from the home. Residential group homes are one of the oldest options in treating young offenders (Haghighi & Lopez, 1993). These programs typically provide 24-hour care for a child in a residential facility designed as a therapeutic environment. Within this setting recreation, health,

nutrition and educational services are provided along with mental health services and counseling (Brazier, D.J. 1996).

A study conducted by Haghghi and Lopez (1993), reported on a longitudinal study conducted from 1990 and 1998 to trace the success and failure of 152 randomly selected juvenile offenders who were referred to home treatment programs by the juvenile court. Success of the intervention was defined as "children being able to return to normal lives in the community... to adopt a normal life-style where they can keep jobs, and act in their own best interest" (Haghghi & Lopez, 1993). The study found that the group home intervention was effective in interrupting delinquency behavior in four out of five cases and preventing repeat offense.

Spirituality in Social Work Treatment

For many years religious organizations have been an instrumental force in providing support and services to the poor and needy. This is especially true for minority communities which are culturally linked in significant ways to religious practices of faith and spirituality (Power, T.J. 2003; Scott, D.G., 2003; Dilulio, J.J., 2002). Dilulio (2002) provided an in-depth discussion and literature review of three types of faith-based practice that leads to improved behavioral outcomes for urban

children. He notes that while there are no empirical studies that show faith based interventions outperform secular ones, there is a great deal of speculation that suggests religious practice and commitment are characteristics present among the most successful intervention programs involving black adolescent males in low-income neighborhoods.

Summary

Residential group home facilities are interventions designed to provide 24-hour care, basic living provisions and mental health treatment while creating a functional model of a healthy family environment. While these interventions may employ evidenced based practices of behavioral and cognitive interventions, most lack consideration for the spiritual development of the adolescent client. The literature demonstrates that while there are pockets of research regarding the emergent need for increased awareness of spirituality in social work practice, group home treatment and spirituality as a cultural component, there is little research that sews these pockets together for improved service delivery to the client. This study contributes to the task of filling this gap in knowledge through its exploration of the perceptions of professionals in the field.

CHAPTER THREE

METHODS

Introduction

Chapter Three outlines the methodological steps used to conduct this study. A qualitative research approach was utilized in gathering and analyzing narrative data. In this chapter, the procedures used in collecting the data, selecting the sample, and analyzing the results are discussed. Furthermore, measures taken to protect the human subjects and ensure confidentiality are presented.

Study Design

The purpose of this study was to explore the potential impact of spirituality on client outcomes among adolescents in residential group homes. Of specific concern, was the perceptions of professionals in the field who have directly observed the influence of spirituality and religious practices of spirituality in interventions with abused, neglected, and delinquent adolescents in group home placement. Special attention was paid to the argument that a strong spiritual orientation in group home placements may create a more culturally competent, and ecologically balanced atmosphere for treatment success.

Prior review of the literature indicates that the field of social work has made strides in acknowledging the deficiency of spiritual sensitivity in treatment; this is especially true when considering social work practice with ethnic minority populations. However, few, if any, field studies have been conducted to explore the impact of spirituality in child welfare, one of social works largest service areas. As such, this study begins narrowing the knowledge gap that exists about the thoughts, attitudes, and beliefs of professionals in the faith-based and secular residential group home communities. In following a qualitative design, the study steps into the community of practice and explore the perceptions of professionals whose observations of the influence of spirituality in relation to treatment success provides valuable insight and expertise.

The limitations of the study's design include the potential for researcher error and self-report. Although the interviews conducted were audio taped and transcribed verbatim, the narrative data was potentially subject to misinterpretation and improper coding due to the researcher's error in understanding. Additionally, the study's results relied on the self-report of the

participants whose accounts cannot be authenticated for reliability or controlled for bias.

Sampling

The sample for this study included twelve professionals working in faith-based residential group homes with at least a 90% minority adolescent population. For the purposes of this study, minority adolescents are defined as African American and Latino males and females aged 12-18. The professionals considered included individuals whose job function currently or previously included one or more of the following: supervision and/or observation of clients in treatment; planning and implementation of spiritually oriented activities (e.g. prayer, bible study, choir rehearsal), supervision of group home staff in direct contact with clients, guiding mental health treatment in group or individual sessions, and on-site delivery of direct social work practice to the clients. The participants must also have had at least 3 years experience working with minority adolescents in one or more faith-based residential group homes.

A convenience and snowball sampling strategy was used to identify the sample population. Based on a listing provided by the California Care Licensing Committee, various residential group homes, identified as

faith-based, from Riverside and San Bernardino counties were selected. Also, as a result of conversations with professionals in these settings, a snowball strategy was utilized to identify other independently contracted professionals who met the study's criteria. Additionally, the snowball strategy allowed the researcher to identify other group homes implementing spiritually oriented practices but not identified as faith-based by name or religious affiliation; professionals from these facilities that meet all other criteria were also studied.

Data Collection and Instruments

This study used an interview schedule as a primary instrument for data collection. The interview schedule included questions that specifically targeted the beliefs, attitudes, and normative variables involved in the professional's perception of how religious and spiritual practices influence client outcomes. The study included twelve in-depth, interviews that questioned the overall strengths, limitations and cultural norms of including spirituality in group home interventions. The interview included core questions that identified the beliefs of the interviewee's: "In your experiences with group home residents, what is your perception how spirituality influences clients" and "What is your perception of the

need for spiritual development in adolescent group home interventions?" It also questioned how openness to spiritual development is impacted by ethnicity through the question "Have you observed a difference in response to spiritual practices based on ethnicity?" It also assessed the normative variables among this community of practice by asking "What do other professionals in the field think about the inclusion of spiritual development in group homes?"

In collecting these narratives, the researcher is included as an instrument for data collection. As the interviewer, the researcher's use of self is a critical component for developing rapport with the respondent and making them comfortable with sharing valuable information related to their individual practices and beliefs. Through an effective use of self, the researcher engaged the respondent through active listening, asking open ended questions, clarifying concepts and terms exclusive to the profession, and employing the use of silence in allowing the respondent to elaborate.

Procedures

Interviews were conducted face to face with twelve professionals working in group home facilities. After identifying which group home facilities meet the study's

criteria, calls were made to generate interest in the study and identify the willingness of the administrators and staff to participate. Once the staff member or program administrator responded favorably to the researcher's request, the researcher set an appointment to interview the subject at their group home site or location of choice. In doing so, the subjects were able to feel comfortable and familiar with their own environment during the data collection process. The respondent was read the contents of the Informed Consent prior to being interviewed. Upon meeting with the participant, the researcher provided an Informed Consent and requested that the participant check the boxes indicating their consent to being studied and audio taped. They were also informed of their protection and confidentiality through verbal instruction by the researcher. The data collection instrument and consents are provided in standard form in the Appendices section of this proposal.

Protection of Human Subjects

To ensure the confidentiality of the participants, any identifying information regarding the participants or their associated agency was excluded for complete confidentiality. The informed consent provided to the participants includes a disclaimer informing them that

their identity along with that of the agency will be confidential. The researcher ensured that this document is read, understood and signed before any questioning begins.

This research project was approved for the protection of human subjects by the Department of Social Work Sub-Committee of the Institutional Review Board of California State University, San Bernardino and by the San Bernardino County, Department of Behavioral Health, Research Review Committee (see Appendix C).

Data Analysis

The qualitative, exploratory, and descriptive data elicited through this study was analyzed and reported in a variety of ways. The narrative data provided by the subjects were grouped based on common themes that emerged from the questions. The themes were grouped by context and through an analysis of words and statements similar meaning. The formulas used to analyze this data are based on variable uses of words, concepts, and phrases. The study did not attempt to draw conclusions based on these themes, but merely report them in a clear and unbiased manner.

Summary

The narrative responses provided in this study, represent the perceptions of professionals in faith-based residential group homes. These perceptions provide the field of Social Work with an insightful, line-view of the influence of spirituality on the outcomes of minority adolescents. Through the collection and reporting of thematic responses, empirical knowledge of how this community of practice functions and implements its interventions will become available.

CHAPTER FOUR

RESULTS

Introduction

This chapter discusses the narrative data collected among professionals working in residential group homes with neglected, abused and delinquent adolescents. The findings are presented based on themes that emerged from interviews regarding the influence of spirituality among adolescents in residential group homes.

Presentation of the Findings

In this study twelve professionals were interviewed at residential group home sites. The subject's position and level of direct service experience in the field varied from 3 years to 20 years. The average length of time working with the targeted population was 7 years. Among the subjects, seven were female and five were male, ranging from ages 22 to 55 years of age. While 8 participants reported working with both male and female adolescents, one reported working with only males and 2 reported working exclusively with females. Additionally, six respondents currently worked with pregnant and parenting female adolescents. All participants reported experience working in residential group homes that were

faith-based and secular and demonstrated knowledge of the difference.

The narrative data collected from the face-to-face interviews were summarized based on responses that addressed the questions asked and identified relevant factors that contributed to the participants' perception of the influence of spirituality in among adolescents in residential group homes. The responses were then grouped based on significant themes that described the thoughts, beliefs and norms of professionals observing, implementing, and planning the inclusion of spiritual practices and development as a core component of the residential group home intervention. In all, seven major themes emerged from the analysis. These themes addressed issues of the adolescent's unresolved pain, loss and guilt; need and response to attachment and love; observable changes; verbalized feelings of hopefulness; cultural/ethnic factors influencing identification with spiritual practices; influence of staff through modeling; and attitudes and beliefs of professionals working with the clients.

Through an analysis of the key concepts and words, and phrases elicited by the interview questions, the key themes identified speak to the perceived beliefs,

observations, challenges, strengths, and norms of professionals working in the field. Following is a discussion of each open-ended question along with the participant responses that lead to the identification of the core themes.

Responses to question 1, "In your experiences with group home residents, what is your perception how spirituality influences clients?" produced two core themes that related to the observations, beliefs, strengths, and challenges of including practices of spirituality as a means of achieving spiritual development in the group home intervention. The first theme acknowledged the importance of the staff's ability to model spiritual practices and religious beliefs while in direct and indirect contact with the clients. Responses such as "Religious practices and moral lifestyle are different, you can practice religion all you want, they [clients] see the difference in how you live." "They have trust issues, and they want to know they can trust the staff to live what they teach." "The staff is really the key, you can encourage them to participate and they might not. But if they see a difference in how that staff member treats them, talks to them, prays with them, and practice what they preach, then

they can trust the staff member first. They get to know God later, but through that experience with staff."

Within the same theme of modeling, was an embedded component of mentorship as identified by responses such as "the kids latch on to that staff member [one who encourages spirituality]." "They come to me and tell me things they won't share with their therapist, because they know I'll pray with them, not prescribe meds." One respondent described her church group's experience in conducting regular bible studies at a group home in this way "they look for us, they ask for bibles, they have questions ready when we get there, they call us collect when we miss a date and ask when we are coming back. They can feel our love and concern for them, God's love through us."

The second theme that emerged from question one dealt with the professional's perception of the client's cognitive, behavioral and spiritual changes. Respondents noted that specific behaviors were changed and limited based on the adolescents cognitive recall of scriptures, sermons and spiritual practices that provided moral markers for when to do change their behavior. The following observations were consistently identified among 9 of the 12 respondents "they'll stop cussing after they

go to church for awhile." "You'll hear them say things like, 'I should cuss you out for that, but I'm saved now and I aint' supposed to do that'." "I can see a difference in their attitude, even appearance sometimes, they start combing their hair and looking neat, caring about their appearance." "They cooperate more with the other [clients], they don't get attitudes and tempers as quick."

One case example was provided by a respondent describing the observable change in a client recently admitted to the group home, "we got one that we called the "[intake] packet from hell" she had been in 7 different group homes, and she was a so deviant when she got here, we didn't know what to do with her... after she got committed to going to church and the teen bible class, she calmed way down. She would listen, and watch her mouth, she still acts up sometimes, but her behavior really changed."

Another case example identified the change made in a client who was determined to break his cycle of substance and alcohol addiction after "committing himself to God." The respondent described the observation in this was "once he had experienced spirituality, there was a difference in him like day and night. He was determined to break his addiction and he went cold turkey. He made

obvious changes immediately, who he had relationships with, his language, he stopped being so mean, he stopped cursing, and would correct himself if he thought it [curse words] was going to slip out. He developed this zeal for helping others to change and he shared Christ's love with the other boys all the time."

Among the respondents, five were professionals currently working with adolescent mothers in residential group home treatment. Their perceptions provided variance in what emerged from the client outcomes as a result of spiritual influence. Three of the five professionals, made reference to the maturity difference among adolescent mothers in treatment "the moms are a little more mature than other teens I've worked with. They're a little more emotionally mature. They tend to grasp a belief system faster." "The girls that have babies have more to lose by not getting it together. So sometimes I think they really get serious about going to church and serving God because they want to do better for their babies." "I've seen these girls just hungry for love. They are broken hearted and many of them discovered that having the baby didn't really fill the void. They are still missing something and when they develop a relationship with God they feel comforted, and loved and accepted and hopeful."

The data analysis also revealed a difference in observed response based on the gender of the respondent and the gender of the clients they had the most experience with. Of the four male respondents working primarily with male adolescents, three made reference to behavioral changes in the client's language, and aggression. While the female respondents working primarily with females discussed changes in the client's physical appearance, empathy toward others, and increased cooperation with peers and staff.

From the data collected in response to question one, another theme emerged focusing on the unresolved disappointment, pain and guilt, as experienced by the client. Of the twelve respondents, ten made reference to the client's need for love and resolution of emotional hurt due to unanswered questions about their prior abuse. "When you take them to church, or try to pray with them, one of the first things they want to know is "why did this happen to me?, If God is love, why did my daddy do that or my mother do this, or my friend die? Why did God let this happen?" One respondent explained some client's resistance to spirituality as "a rejection of God, because they feel rejected by God due to the abuse they suffered." Another respondent identified a Latino male adolescent's response

to spirituality as stemming from the disappointment of being separated from his home while on probation. "I'll never forget this boy, because he came to me and told me that when he went to church he felt safe and he felt the same security and comfort that he had when he was at home. He was comforted by the church family and he missed having a family." Other respondents described the inclusion of spirituality in the intervention as "a missing link to hope." "These kids are so hurt and emotionally damaged." Yet another respondent observed that many of the clients are drawn to spirituality through prayer and church "fellowship" because of "lack of love, constant rejection, always moving around with no identity or family, no sense of purpose or hope, no reason for living."

In addition, to the need to resolve issues of disappointment and abandonment, many of the respondents reported the client's need to experience love. An analysis of the narrative data yielded these contextual phrases that thematically appeared. "Most of these girls have never known true love." "When they feel that the staff encouraging them to participate in church services or prayer really shows love and concern, they are amazed. And sometimes they start acting worse to see what that staff will really do." "The girls want to feel loved." Many of

the respondents suggested that, it is the demonstration of love by the church community, staff, or what is learned in the bible that draws the adolescent into a deeper spiritual relationship and connection to others. "This one boy said 'as bad as I was, it took somebody great [God] to love me'." Another referenced it in this way "the lifestyle we promote is a loving lifestyle it shows kindness and not conflict, they want that, they're tired of fighting they want to love. They just usually don't know how, and that's where prayer and bible reading and attending church for guidance comes in." "Knowing they are loved by God gives them purpose, it adds meaning to their lives."

The theme resulting from question 2 "Have you observed a difference in response to spiritual practices based on ethnicity?" pointed to the cultural and ethnic influences on the client's perception and acceptance of spiritual practices. Ten of the twelve respondents stated there was a difference among client's response and prior exposure to spirituality based on ethnicity. "I'd say about 80% of Latino and African Americans have had some type of experience with religion before coming to the group home." "Many of them have seen or heard or remember attending every now and then, but nothing consistent, and

usually not with their parents, its usually with a grandparent or neighbor or friend." "There is definitely a difference in who participates more willingly. The ones who have been around church or choirs, or praying grandmother's, they are more responsive than those who haven't had any exposure to it." Respondents also indicated that the effort put forth by staff to encourage spiritual practices was primarily done so by minority staff "It is usually the Black staff that encourages going to church and praying. So I think the minority kids identify with that too. They see the staff as one of them." One Caucasian respondent even suggested that the cultural difference in who encourages the practice and who responds may be a factor for spiritual acceptance "some of the white kids don't go because it's usually an all black church... when a Latina staff member took the kids to a more culturally mixed community church, more of the other girls went." Yet another respondent stated "ethnicity has no bearing on the matter. They all need it and when you give them the opportunity to join in, you can get all kinds."

Finally, question four addressed the normative values of other professionals in the field. The question "What do other professionals in the field think about the inclusion of spiritual development in group homes?" Consistently the

respondents indicated that the threat of legislation and legal mandates prohibited most group homes from trying to include spiritual development in their programming.

"Society is afraid of addressing the greatest need these kids have at the expense of political correctness. We have legislated God right out of the children's lives and as a result they are lacking the ethical and moral principles that create a foundation for a sound life." "Many professionals in the field know it's a need, what they don't know is how to include it in the program without getting in trouble with the government." "Others I know in this field definitely see it as a missing piece, we provide it here [faith based group home] but they don't have total agreement on how to do it in other homes."

"Well there are some that recognize the importance and they want to include it, but they don't want to do the work. It's more work on their shift to take the boys to a church or even more than one if they request worship at different types of places." "You can't proselytize and a lot of professionals are scared of the staff doing that, so they discourage everything." One respondent even stated that "I don't understand how we can have federal dollars going to other faith based organizations, but when it comes to the ones who need spiritual guidance the most,

the kids, before they are too far gone, we don't want to allow that in their interventions." Several respondents also suggested that there is a difference in perception among the professionals in the field based on that person's belief system bias, "Non Christians tend to see it as a nice thing to do if you can, but it's not necessary or of particular benefit to the person's behavior change. They only look at if the behavior changed. Christians in the group homes do see it as necessary and consider it the foundational piece for total transformation, not just behavior change today, transformation for life."

Summary

This chapter discussed to seven major themes drawn from the narrative data collected. These themes emerged in response to the questions which addressed the thoughts, beliefs and norms of the professionals working with adolescents in faith-based and secular residential group homes.

CHAPTER FIVE

DISCUSSION

Introduction

Through this study of professionals working with adolescents in faith-based residential group homes, perceptions of how spirituality influences client outcomes were discovered. From an in-depth analysis of the narrative data collected, seven major themes emerged. Acknowledgement of these themes as insight into the direct observations of professionals working directly with clients provides the field of Social Work with increased awareness of how spirituality in practice influences the outcomes of child welfare clients. The study results provide a foundational assertion that implicates the need for further study and considerations of change in adolescent group home interventions.

Discussion

In its qualitative design, this study did not seek to draw conclusions regarding the influence of spirituality on adolescent client outcomes in residential group homes. Rather, it consulted professionals in the faith-based group home community regarding their perceptions based on observation and experience. As such, the discussion of the

study results will make a presentation of the themes that emerged in the perceptions of the respondents. No correlations or conclusions regarding these perceptions will be discussed.

Through an in-depth analysis of key concepts, words, and phrases elicited by the interview questions, seven major themes emerged. These themes included, the adolescent's unresolved pain, loss and guilt, need and response to attachment and love, observable changes, verbalized feelings of hopefulness, cultural/ethnic factors influencing identification with spiritual practices, influence of staff through modeling, and attitudes and beliefs of professionals working with the clients.

Of the seven themes, the most frequently repeated theme was the influence of staff through modeling. According to the respondents, the modeling of moral and ethical behavior consistent with a staff's proclaimed spiritual beliefs, was a significant factor in how the client responded to spiritual practices and development efforts. The respondents consistently reported that the adolescent clients "can see right through you" and recognize when a staff member who encourages participation in spiritual practices, has a lifestyle that mirrors their

beliefs. This was reported by the respondents to be critical in the adolescents ability to observe patterns of behavior that demonstrate an adult's ability to be compassionate, loving, respectful, and "different" from other adults they have had negative contact with.

Another theme that presented a strong pattern in response was that of the cultural/ethnic factors influencing identification with spiritual practices. Considering 10 of the 12 respondents confirmed that ethnic minority clients had higher rates of prior exposure to spirituality through religion, it was observed that the professionals observe a cultural component that minority clients identify with. The responses established the assertion that clients with prior exposure were more willing to participate in church activities, engage in prayer, and feel accepted in places of worship. In doing so, the respondents noted that the clients felt "accepted and loved" and would report that they "had a family" within the church community outside of the group home setting.

Many of the adolescents in residential group homes are dependents of the Juvenile Court and clients of child welfare agencies because they are victims of severe abuse and neglected. Considering this, it is not surprising that

the theme of unresolved issues of pain, loss and guilt emerged in the professional's response. The respondents noted that the client's either gravitated toward spirituality as a means of "comfort and healing" or they rejected it due to their belief that God had abandoned or rejected them, leaving them with scars of abuse and emotional pain.

Included in this theme were the perceptions of the professionals which suggested that the client's desire for spiritual connection as a link to their feelings of guilt for acts of delinquency including violent assaults, promiscuity, prostitution, substance use, gang violence, sexual abuse of others, and other acts of deviance. The reported that often client's verbalized feelings hope because of "God's forgiveness."

Tied to respondent's observation of the adolescent's issues of unresolved pain, loss and guilt was another theme that identified the client's need and response to attachment and love. The concept of acceptance by the religious community and staff emerged repeatedly as an identified need of the adolescent client. Often residents in group home treatment have been moved among multiple out-of-home placements (e.g. foster families, relatives homes, other group homes) due to unsuccessful efforts to

stabilize them in one environment. As a result, many of the adolescents were reported by the professionals to have severe problems with identity development, empathy toward others and feelings of belonging due to lack of attachment and connection.

Another commonly reported theme was the client's observable changes. Many of the respondents discussed changes in the client's affect including care for their increased concern for appearance, increase in cooperation, and an increased ability to self-correct behaviors considered "immoral" such as lying, cursing and fighting.

Finally, the question that solicited perceptions of norms among professionals in the field, yielded a responses regarding the attitudes and beliefs of professionals working with clients. Many of the professionals responding, stated that other professionals believed that there was a need for spiritual development in adolescent group home treatment. The believed however, that there were legal limitations that prevented them from doing so. They also reported that other professionals in the field, believe that it is a "nice" component to a program but does not impact client outcomes and constitutes more work for the staff than is necessary.

Limitations

The limitations of this study include the sample size, population and inability to verify the reports made by the respondents. While all participants met the criteria for participation, the sample size of twelve professionals significantly limits the generalizability of the study. Among the participants, the demographics were as follows: five male, seven female, nine African American, one Latina, and two Caucasian. These demographic factors in terms of gender and ethnicity may have some limitations on the cultural perceptions and biases of the respondents. Likewise, the self-report provided by the respondents cannot be authenticated for accuracy.

Recommendations for Social Work Practice, Policy and Research

This study provides narrative data that represent the perceptions of professionals in faith-based residential group homes. These perceptions provide the field of Social Work with an insightful, line-view of the influence of spirituality on the outcomes of adolescents in group home treatment. Through an increased awareness of how spirituality impacts the outcomes of abused, neglected and delinquent adolescents, the field of Social Work is encouraged to further explore the need for spiritual

development in the treatment and Social Work practice. The acknowledgement of spirituality as a critical aspect of identity development, cultural competence, and human development will require that Social Workers make efforts to formally include it in the assessment, planning, and implementation of services to child welfare clients.

This study also implicates the need for further research. Considering few studies have been conducted on the impact of spirituality and children, it is the responsibility of the Social Work profession to further explore aspects of development that may be lacking in the current intervention practices for vulnerable children.

Conclusions

While no formal conclusions were drawn by the study, the data collected made clear the relevant factors that exist among professionals in faith-based residential group homes. All of the professionals expressed their beliefs about the observable changes in outcomes for many of the adolescents who participated in spiritual development activities. They also made clear that there was a lack of knowledge among other professionals in the field how to implement spirituality in state funded residential group homes. This indicated that while these professionals agree to the need, they are still without a model or evidence

based practice theories about how to implement the services in the treatment of adolescents. Through this study, the professionals working with abused and neglected adolescents have identified their practices and needs of this aspect of the child welfare profession. It is now the responsibility of Social Work research to further explore those needs and provide needed recommendations on how to address them.

APPENDIX A
INTERVIEW GUIDE

Interview Questions

1. In your experiences with group home residents, what is your perception how spirituality influences clients?

Optional Prompt Question: How does staff encourage spiritual development and practice among clients?

2. Have you observed a difference in response to spiritual practices based on ethnicity?

Optional Prompt Question: Have you observed a difference in how ethnic minority clients respond to practices of spirituality?

3. What is your perception of the need for spiritual development in adolescent group home interventions?

4. What do other professionals in the field think about the inclusion of spiritual development in group homes?

APPENDIX B
INFORMED CONSENT

INFORMED CONSENT

THE PERCEIVED INFLUENCE OF SPIRITUALITY IN ADOLESCENT
RESIDENTIAL GROUP HOMES

The study in which you are being asked to participate is designed to explore the perception of professionals working with ethnic minority adolescents in residential group homes. The purpose of the study is to gather information related to the impact of spirituality on client outcomes as experienced by professionals in the field. This study is being conducted by Karima Deadrick-Boone under the supervision of Rosemary McCaslin, Ph.D., ACSW at the California State University of San Bernardino in partial fulfillment of the requirements for the degree Master of Social Work.

In this study you will be asked to answer questions related to your experience in working with minority adolescents in faith-based group homes. The interview is expected to take 20-30 minutes after which you will be compensated with a gift certificate.

Your participation in this research study is completely voluntary and you may withdraw from the study at any time. You should be assured that your responses and identity are kept completely confidential. Your responses will be used for data analysis only.

If you have any questions regarding this study, you may contact Rosemary McCaslin, Ph.D., ACSW at the California State University of San Bernardino, Department of Social Work 5500 University Parkway, San Bernardino, CA 92407 or you may call her at (909) 880-5507.

By checking this box, you acknowledge that you have been informed of your rights and agree to participate voluntarily and are at least 18 years of age.

By checking this box, you provide your permission to be tape recorded during this interview. After the completion of this study, all notes and tapes will be destroyed.

APPENDIX C
DEBRIEFING STATEMENT

Debriefing Statement

The study you have just participated in was designed to explore perceptions of professionals working with ethnic minority adolescents in residential group homes. The purpose of the study is to gather information related to the impact of spirituality on client outcomes. The responses will be evaluated for themes, and data analysis will be conducted to measure the outcomes. Karima Deadrick-Boone conducted this study in partial fulfillment of the requirements for the degree Master of Social Work at California State University of San Bernardino.

Thank you for your participation and for not discussing the contents of our interview with other study participants. If you have any questions about the study, please feel free to contact faculty supervisor, Rosemary McCaslin, Ph.D., ACSW at (909) 880-5507. If you would like to obtain a copy of the results of this study, please contact the California State University of San Bernardino's Pfau Library after August 2004.

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