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Do Foster Parents and Care Workers Recognize the Needs of Youth in Family Foster Care with a History of Sexual Abuse?

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ABSTRACT

Children in family foster care have the right to participate in decisions regarding their life, however, adults often advocate on behalf of children. This Q methodological study explored whether shared perspectives among foster parents and care workers resemble shared perspectives of youth regarding the psychosocial needs experienced by youth with a history of sexual abuse. Participants sorted a set of statement cards according to what they thought was most important for youth. By-person factor analyses examined how the Q sorts of foster parents and care workers related to those of youth. The results showed that foster parents mostly recognized the group of youth who value an instrumental relationship with their carers, while care workers mostly recognized the group of youth who value support of both foster and birth parents with regard to their preparation for independent living. The two youth groups characterized by ambivalence and autonomy were barely recognized. Results are discussed in light of the expected roles of foster parents and care workers, and youth's contact with birth parents. Lastly, this study highlights the importance of youth participation, because youth offer unique and varying perspectives about their needs.

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Children and youth in foster care have often experienced traumatic events prior to care, in addition to the traumatic event of being removed from their parents (Dovran, Winje, Arefjord, & Haugland, 2012; Turney & Wildeman, 2017). Children, therefore, often struggle with the impact of these (complex) traumatic experiences and the resulting attachment difficulties (Greeson et al., 2011; Schofield & Beek, 2005). Studies have shown that children who were sexually abused have an increased risk of experiencing difficulties in foster care, such as behavioral problems, dropping out of school, repeated out-of-home placements, and post-traumatic stress disorder (Dubner & Motta, 1999; Edmond, Auslander, Elze, McMillen, & Thompson, 2002; Eggertsen, 2008; Pollock & Farmer, 2005). Family foster care aims to provide these children with a safe and nurturing

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family environment that meets their needs and allows them to thrive (e.g., Berrick & Skivenes, 2012). When children in family foster care can participate in the decision-making surrounding their care and upbringing, this may increase their safety, the success of the placement, and their overall sense of well-being (Vis, Strandbu, Holtan, & Thomas, 2011). However, many children report a lack of participation (Bessell, 2011; Leeson, 2007), which means that foster parents and care workers often advocate on behalf of children regarding their needs. This study therefore aims to understand the differences and similarities between the needs experienced by youth with a history of sexual abuse and how caretakers view the needs that youth experience.

Although almost all countries in the world ratified the United Nations Convention on the Rights of the Child (UNCRC, 1989), respecting children's views is not only considered good practice, but is also a legally binding obligation for these countries (Lundy, 2007). Article 12 states that children should be able to participate in and influence the decisions regarding them. This involves both decisions on a personal level, as well as on a meso and macro level, such as in policy and research (Lundy, 2007; Winter, 2010). Over the last two decades, there has been a surge in research including the voices of children in family foster care. Their experiences provide additional insights into the complex nature of foster care, which can improve foster care outcomes and children's well-being (Winter, 2010).

There are benefits to having children participate in decisions regarding their care. First, participation has intrinsic value for the children, in that it helps them to form their opinions and provides them with dignity and self-worth (Bessell, 2011; Križ & Roundtree-Swain, 2017). Adolescents specifically are exploring and forming their identity, which includes considering their social networks, future aspirations, education, and values (Erikson, 1968; Harter, 1990). Moreover, adolescents increasingly require autonomy in making decisions, which prepares them for young adulthood, because the majority of youth in family foster care will be living independently when they turn 18 (Pecora et al., 2006). A second reason to promote participation is the possible benefit for children's well-being. Participation increases the likelihood that decisions are based on the needs of children and that these decisions lead to more positive outcomes. Moreover, child safety issues may be more easily detected and there is greater compliance and acceptance of children for the decisions made (Bessell, 2011; Cashmore, 2003; Križ & Roundtree-Swain, 2017; Vis et al., 2011). Finally, participation, as mentioned above, is a right of children and promoting the participation of youth consequently promotes the adherence to their human rights (Bessell, 2011). In order to participate in decision-making in a meaningful way, children require the opportunity, sufficient information, and the feeling that their voices matter (Pölkki, Vornanen, Pursiainen, & Riikonen, 2012; Stanley, 2007).

In practice, the ability for children in family foster care to participate in decision-making depends on the commitment of adults to adhere to their rights (Lundy, 2007). Despite the perceived benefits and the legal obligation to listen to children when making decisions that affect them, children in foster care are often not adequately included in this process (Bessell, 2011; Pölkki et al., 2012; Winter, 2010). They are often not invited to participate in the decision-making, do not receive enough information (Fitzgerald & Graham, 2011), can only respond to an agenda set by adults (Winter, 2010), and struggle with loyalty issues toward their birth parents (Pölkki et al., 2012). The relationship between children and their social worker is important for facilitating for participation (Bijleveld, Dedding, & Bunders-Aelen, 2015; Križ & Roundtree-Swain, 2017), but social workers often believe that they are able to advocate for children and children need protection from possible harm that stems from participation (Bijleveld et al., 2015; Križ & Roundtree-Swain, 2017). Moreover, social workers struggle with a lack of time, human resources, and training to provide children the opportunity to participate (Pölkki et al., 2012; Vis, Holtan, & Thomas, 2012).

Hence, in the decision-making process, the views of children are often not voiced by the children themselves, but by adults advocating on their behalf. In this respect, Sommer, Samuelson, and Hundeide (2010, pp. 22–23) differentiate between *children's perspectives* and *child perspectives*, with children's perspectives representing "children's own experiences, perceptions, and understandings of their world," and child perspectives indicating "adults' understanding of children's perceptions, experiences and actions in the world." Child perspectives are thus a reconstruction of children's perspectives from the adult point of view.

Taking a child perspective and advocating for children in foster care can be difficult for adults because their understandings of children's views are influenced by their own experiences and views (Lundy, 2007). Research has shown that children and adults can have different perspectives on issues and emphasize other aspects of these issues. For example, foster parents evaluate birth parent contacts more negatively than children (Salas Martínez, Fuentes, Bernedo, & García-Martín, 2016). Moreover, youth emphasize autonomy in mental health support while foster parents are more concerned with reducing risk behavior (Stanley, 2007), and children's experiences do not always align with the professionally kept case records, for example regarding permanency and maltreatment histories (Cho & Jackson, 2016; Rolock & Pérez, 2016).

Sexual abuse is an experience that children and adults find difficult to disclose and discuss (Hepworth & McGowan, 2013; McElvaney, 2015). Around 4–35% of the children in family foster care have experiences of sexual abuse (e.g., Oswald, Heil, & Goldbeck, 2010), but children rarely start telling about these experiences to their foster parents immediately when placed with them (McElvaney, 2015). While some children may

spontaneously mention the abuse during their stay in a foster family, many children's disclosures are fragmented and indirectly indicated through play, acting out, and verbal clues (Wubs, Batstra, & Grietens, 2018). When foster parents and care workers are unaware of a history of sexual abuse, it is even more complicated to take a child perspective regarding the needs of children.

Although foster parents and professionals often advocate for children in family foster care, it is important to know how closely their child perspectives resemble the children's perspectives, and what differences exist. With this knowledge, foster parents and care workers can reflect on potential biases when advocating for youth, and decision makers can take the differences into account when weighing the child perspectives of adults. To achieve these aims, this study will compare the children's perspectives of youth and the child perspectives of foster parents and care workers regarding the psychosocial needs of youth with a history of sexual abuse. Meeting the psychosocial needs of youth contributes to their well-being and positive placement outcomes (Berrick & Skivenes, 2012), and youth's needs are therefore important aspects to consider in the decision-making process. Psychosocial needs according to Maslow (1943) are those of emotional safety, a sense of belonging, self-esteem and self-actualization. This study aims to understand the possible differences in how youth, foster parents, and care workers view these psychosocial needs. This is important as listening to the voices of youth regarding their needs can positively influence their well-being. The main research question of this study is: "Do foster parents and care workers recognize the psychosocial needs of youth in family foster care with a history of sexual abuse?" This study builds on our previous Q methodological paper, in which by-person factor analysis revealed four perspectives among 15 youth with a history of sexual abuse regarding their perspective on their psychosocial needs (Steenbakkers, Ellingsen, van der Steen, & Grietens, 2017).

The first children's perspective found in our previous paper indicated youth with ambivalence regarding safety and belongingness needs. These youth wanted to process their past with the assistance of their foster parents, but they also preferred to do this alone. Moreover, they wanted opportunities to make autonomous decisions, while also keeping an emotional connection to their foster parents. The second children's perspective is characterized by an orientation toward the future life, mostly focused on self-actualization needs to be met with the support of both the foster and birth family. These youth were not preoccupied with the past, and also preferred limited involvement of professionals, such as foster care workers. The third children's perspective revealed a clear need for autonomy. This viewpoint did indicate the importance of having a close relationship with foster parents, but without wanting them (or professionals) to become too involved in the lives of youth. The last children's perspective showed rather instrumental expectations regarding the role of professionals and foster parents; it is considered foster

parents' and professionals' job to take care of the emotional safety needs of youth and to help them process their past. While an enduring relationship was deemed necessary for this, an emotional bond was not. All children's perspectives indicated difficulties in the contact with their birth parents. Three out of the four perspectives found contact with their birth parents to be unimportant; only the second, future oriented, perspective valued contact. The current paper investigates if these four children's perspectives (ambivalent, future oriented, autonomous, and instrumental) are recognized by foster parents and care workers.

Method

Participants

The recruitment of participants consisted of two phases. First, we invited a purposive sample of (former) foster youth to participate. The sampling criteria were adolescents or young adults who had lived with one foster family for at least a year. These criteria were chosen based on the assumption that older children and young care leavers would have recent placement memories and would be capable of reflecting on their experiences. Potential participants received written information about this study, distributed to both current and former foster youth by four local foster care organizations, one national foster youth group, and one national foster parent group. Youth who were interested in participating were requested to contact the researchers directly. Additional participants were contacted using snowball sampling. The final sample consisted of 15 youth, who, in this study, represent the children's perspectives. All participants gave informed consent after they received thorough information about the research project.

Subsequently, in phase two, we recruited foster parents and care workers to represent the child perspectives. They could participate if they had cared for a youth between the ages of 12 and 18 in the last 5 years, and the youth was in their care for a minimum of 1 year. We focused on recent placements, so that foster parents and care workers would be able to recall the situation of the youth easily. Two foster care organizations and a foster parent group distributed the information about this study among potential participants. The final sample consisted of nine foster parents and seven care workers who gave informed consent. They were asked to select one youth they had cared for to report on, who hereafter are referred to as "target youth."

The characteristics of youth and target youth can be found in [Table 1](#). The majority of youth and target youth were female, had a Dutch ethnicity and were on average between 7 and 8 years old when entering foster care. On average, youth and target youth stayed in a small number of foster families, although some had up to nine placements. The amount of ACEs

Table 1. Sex, age, ethnicity, and foster care characteristics of youth and target youth

	Youth (<i>n</i> = 15)		Target youth FP (<i>n</i> = 9)		Target youth CW (<i>n</i> = 7)	
Sex						
Female	13	(87%)	7	(78%)	5	(71%)
Male	2	(13%)	2	(22%)	2	(29%)
Age ^a						
<i>M</i> (<i>SD</i>)	21.7	(2.87)	17.1	(2.32)	15.6	(1.43)
Range	17–28		14–20		13–18	
Ethnicity						
Dutch	11	(73%)	5	(56%)	6	(86%)
Other	4	(27%)	4	(44%)	1	(14%)
Age first placement						
<i>M</i> (<i>SD</i>)	7.5	(4.10)	7.3	(5.08)	8.0	(5.51)
Range	1–15		1–15		2–15	
Number of placements ^a						
<i>M</i> (<i>SD</i>)	3.2	(2.11)	2.4	(1.67)	2.3	(.95)
Range	1–9		1–5		1–4	
Number of ACEs						
<i>M</i> (<i>SD</i>)	6.5	(2.70)	8.0	(1.50)	6.0	(2.24)
Range	2–10		5–10		4–10	

Note. FP = Foster parents. CW = Care workers.

^aAt the time of the Q sorting or at the time youth left the care of the foster parent or care worker.

reported by youth and by their foster parents and care workers are high, with foster parents reporting the most ACEs on average. The main difference between the youth and the target youth is their average age. This can be explained by the fact that foster parents and care workers reported the age of the target youth who were in their care at that moment, or their age when they left their care, while youth reported their current age. Despite these age differences, the youth, foster parents, and care workers all reflected upon the needs of youth while they were adolescents in care.

Q methodological studies aim to unveil existing perspectives, and thereafter to understand and compare them (Brown, 1980; Watts & Stenner, 2012). Hence, the method has a qualitative nature, despite its application of quantitative techniques, and therefore the number of participants does not need to be very large. To understand the various perspectives regarding the topic of interest, Q methodological studies usually have fewer participants than statement cards, often around a 1:2 ratio (Watts & Stenner, 2012). In the current study, the number of statements was 45, and the total number of participants was 31 (15 youth and 16 target youth).

The foster parents were between 49 and 61 years old ($M = 54.6$); there was one foster father among the nine participants. The amount of years participants had been foster parents varied from 1.5 to 25 years ($M = 12.0$). Among the care workers was one male participant. The age of the care workers ranged from 30 to 62 years old ($M = 46.1$) and their years of experience ranged from five to 16 years ($M = 11.1$).

Measures and procedures

Questionnaires

The participants were asked to fill out a short demographic questionnaire. The version for youth included questions about age, sex, ethnicity, foster care experiences, and current living situation. Foster parents and care workers reported for the target youth they selected. Moreover, they reported their own age, education, and work experiences in foster care.

In addition, we presented all participants the Dutch translation of the 10-item Adverse Childhood Experiences (ACE) questionnaire (Felitti et al., 1998). Youth were asked if they experienced any of 10 adverse experiences in their childhood, ranging from physical abuse and neglect to sexual abuse and witnessing domestic violence. Foster parents were asked if it was very likely that the target youth had any of these 10 adverse experiences. Youth and target youth could thus have an ACE score ranging from zero to ten. For the purpose of this study, participants who gave an affirmative answer to the question regarding sexual abuse were selected. The ACE questionnaire defines sexual abuse as when an adult or peer ever, without the youth's permission, sexually touched them or had the youth sexually touch that person, made or showed sexual images or movies, or had (tried to have) oral, vaginal or anal sex.

Q sort

In order to unveil existing perspectives, participants rank a set of statement cards regarding a topic, in this case the psychosocial needs of youth, according to what is most like and unlike their perspective. These statement cards should be self-referenced instead of factual, because they need to be scaled from most like to most unlike a person's viewpoint (Stephenson, 1980). Individual Q sorts are subsequently correlated and factor analyzed in order to reveal groups of participants with similar viewpoints (McKeown & Thomas, 1988; Watts & Stenner, 2012). Each factor displays the statements that are typically viewed positively and negatively by participants loading on that factor (Ellingsen, Størksen, & Stephens, 2010). The overall configurations of the factors are subsequently interpreted and compared to identify which viewpoints about the subject under investigation are present among the participants (Watts & Stenner, 2012). Since this study aimed to understand the personal viewpoints of foster youth (children's perspective) and compare that with the views of foster parent and care workers regarding the viewpoints of youth (child perspective), Q methodology is well suited for this study.

Prior to the current study, statements were constructed using a participatory approach. The process of developing statements builds on Concourse theory (Brown, 1980), and (former) foster youth and care workers were interviewed in order to identify different aspects of the concourse on

psychosocial needs among foster children who have experienced sexual abuse. A Fisherian block balance design was applied to reduce the identified concourse to a manageable set of statements (45) representing the concourse (Watts & Stenner, 2012). The statements reflected emotional safety, belongingness, self-esteem, and self-actualization needs of youth in relation to foster parents, birth parents, friends, professionals, and youth themselves. For youth, the cards were formulated from a first-person perspective, hence referring to what “I” need, in order to reveal their children’s perspective. To reveal the child perspective of foster parents and care workers, their cards referred to what “he” or “she” needs, depending on the sex of the target youth. Examples are: “He finds it important to feel secure that he can stay in his foster family until he is old enough to live on his own” and “She wants to feel at home when she is with her birth parents.”

After filling out the demographic questionnaire, participants were introduced to the Q sorting procedure. Youth were instructed to sort the statements according to the importance of each statement for themselves (children’s perspectives), while foster parents and care workers were instructed to sort the statements according to what they believed was the importance of each statement for the target youth (child perspectives). First, they were asked to read all the statements and sort them into three piles: important, unimportant, or neutral/not applicable. Then, they were instructed to sort the statements into a “quasi normal distribution” shaped grid from most unimportant (1) to most important (9) (Figure 1).

Analysis

It is in the analysis of Q studies that qualitative and quantitative techniques are combined. The first step is to perform a by-person factor analysis, revealing patterns of shared views among the participants (which appear as factors). Each factor is portrayed as the weighted average ranking of the participants who significantly associate with that factor (McKeown & Thomas, 1988). Subsequently, a qualitative inspection of the perspectives is important to understand and compare

Most unimportant									Most important	
1	2	3	4	5	6	7	8	9		

Figure 1. Sorting grid of the Q sort.

the viewpoints revealed by the factors. The software program PQ method, designed for Q methodological research, was used for the analysis (Schmolck, 2002).

In order to explore how the child perspectives of foster parents and care workers resembled the children's perspective of youth, it was crucial to retain the original youth factors as clean as possible. Hence, we included the youth and youth factors from the previous paper and analyzed the perspectives of foster parents and care workers separately. Manual rotations were performed to extract the original youth factors, and to avoid that the Q sorts from the foster parents and care workers would distill new factors/perspectives. This procedure resulted in factors that highly correlated with the original youth factors. In order to examine how closely the factors resemble the original youth factors, the weighted average Q sorts of both were compared.

Foster parents and care workers who had an individual child perspective that aligned with one of the four shared children's perspectives, significantly associated with one of the output factors. These foster parents and care workers could be described as recognizing one of the children's perspectives with regard to the needs experienced by the youth in their care, while those who did not associate with an output factor did not recognize this in the youth in their care.

In order to understand differences between the four children's perspectives, we compared the sex, age, ethnicity, age of first placement, number of placement and ACEs of the (target) youth within the output factors. These demographic characteristics were described and qualitatively interpreted, as the number of participants who associate with the output factors were too small to have enough power to statistically analyze any possible differences.

Ethical considerations

The themes of this study require particular ethical awareness, therefore, some of our ethical considerations are outlined here. First, although we asked participants about their or the target youth's adverse childhood experiences in the questionnaire, we did not ask them to elaborate on these events in order to prevent triggering negative memories and emotions. Secondly, foster parents and care workers were requested not to mention the name of the target youth in order to protect their anonymity. Finally, participants had the opportunity to decide where the research would be conducted: at home, the university, or any other place where they felt comfortable. The research procedure was approved by the Ethics Committee of the host institution.

Results

The by-person factor analyses of the individual Q sorts performed by foster parents and care workers, along with the individual Q sorts of youth and the original youth factors, both resulted in four factors that closely resemble the original youth factors. The correlations between the factors and the corresponding original youth factors ranged from .77 to .95 (Table 2). In both analyses, 14 of the 15 youth associated with the same factor as in the analysis that only focused on their perspective. One youth changed from an association with original youth factor 4 (Instrumental) to factor 1 (Ambivalent). This can be explained by a relatively high correlation between original factors 1 and 4 ($r = .58$), indicating some overlap in these two perspectives. Furthermore, including foster parents and care workers in the analyses will consequently influence the factor arrays, which contributed to this youth having a closer association with factor 1. Inspections of the weighted average Q sorts of the factors and the original youth factors indicated only minimal changes in the order of the statements. These results indicate that the output factors in each analysis are an adequate depiction of the original youth factors and, thus, represent the children's perspectives of youth in foster care with a history of sexual abuse. The factors resulting from the foster parent and care worker analyses explained 57% and 58% of the variance respectively. How the foster parents and care workers compare to the perspectives of children will be outlined below.

Foster parents

Five of the nine foster parents significantly associated with one of the four perspectives (Table 3). The four who did not associate with one particular factor either loaded highest on both the Ambivalent and Instrumental perspective or were divided over the Future oriented, Autonomous and

Table 2. Factor matrix of output factors with original youth factors

		Original youth factors			
		Ambivalent	Future oriented	Autonomous	Instrumental
Foster parents	Factor 1	.77^a	.34	.28	.43
	Factor 2	.10	.85^a	.01	-.05
	Factor 3	.25	.17	.91^a	.07
	Factor 4	.35	.08	.09	.77^a
Care workers	Factor 1	.86^a	.30	.20	.40
	Factor 2	.21	.81^a	.12	.03
	Factor 3	.23	.13	.95^a	.13
	Factor 4	.19	.07	.06	.86^a

Note. Foster parents and care workers were analyzed separately. ^a and bold indicate a significant correlation with the corresponding original youth factor at $p < .05$.

Table 3. Factor matrix of foster parent analysis

	Ambivalent	Future oriented	Autonomous	Instrumental
FP1	.13	.38	.37	.35
FP2	.03	.07	.30	.55^a
FP3	.41	.26	-.08	.60^a
FP4	.41	.32	.05	.42
FP5	.04	.24	.10	.72^a
FP6	.45	.28	.05	.43
FP7	-.18	.35	.43	.44
FP8	.30	.50^a	.08	-.10
FP9	.52^a	.19	-.39	.04
Expl. Var. ^b	18%	11%	13%	15%

Note. FP = Foster parent. ^a and bold indicate a significant correlation with the corresponding factor at $p < .05$.

^b Explained variance based on entire model with original youth factors and individual youth. Number of youth defining each factor (and factor loading): Factor 1; 6 youth (.52 to .75), Factor 2; 2 youth (.70 to .77), Factor 3; 5 youth (.47 to .73), Factor 4; 2 youth (.56 to .80).

Instrumental perspective, suggesting that their perspectives were a mix between several children's perspectives.

The Ambivalent perspective had one foster parent with a significant association. This foster parent thus perceived a youth with ambivalent needs toward processing the past and integrating in the foster family. This children's perspective reveals the needs of youth for both support and autonomy in the foster family, but limited involvement of their birth parents. The Future oriented perspective also had one foster parent who revealed an understanding of this perspective. Youth with this perspective wanted to work on their future with the support of their foster and birth parents. The Autonomous perspective remained solely represented by youth. This factor indicated the need of youth to be independent from their caregivers. Overall, most foster parents significantly associated with the Instrumental perspective. This children's perspective was characterized by the needs of youth to be taken proper care of by their foster parents and professionals, and learn about themselves and their past. Although the care should be long-term, youth preferred to engage in a more instrumental relationship with their caregivers. Contact with their birth parents was unimportant in this viewpoint.

Care workers

Whereas five care workers had a significant association with the Future oriented perspective, one care worker had a significant association with the Instrumental perspective, however, the latter was a negative loading indicating an opposite view (Table 4). One professional did not associate with one particular factor, but had medium loadings on both the Future oriented and Instrumental perspectives.

Table 4. Factor matrix of care worker analysis

	Ambivalent	Future oriented	Autonomous	Instrumental
CW1	.18	.54^a	.17	.42
CW2	-.05	.33^a	.22	-.03
CW3	-.28	.50^a	.22	.35
CW4	.04	.75^a	-.08	-.07
CW5	.14	.39	.16	.33
CW6	.03	.27	-.08	-.33^a
CW7	-.06	.59^a	.20	-.06
Expl. Var. ^b	17%	16%	14%	11%

Note. CW = Care worker. ^a and bold indicate a significant correlation with the corresponding factor at $p < .05$.

^b Explained variance based on entire model with original youth factors and individual youth. Number of youth defining each factor (and factor loading): Factor 1; 6 youth (.49 to .82), Factor 2; 2 youth (.65 to .72), Factor 3; 5 youth (.47 to .77), Factor 4; 2 youth (.58 to .85).

Most care workers perceived youth with needs aligning with the Future oriented perspective. This children's perspective illustrated the needs of youth to have agency when shaping their future, while it also recognized the support youth need from both foster and birth parents in this challenging process. These youth were not preoccupied with the past, and also preferred limited involvement of professionals. None of the care workers recognized the Ambivalent, Autonomous or Instrumental children's perspectives. Care workers thus did not perceive youth who needed the help of their foster parents and care workers with processing the past, neither within an emotionally close (Ambivalent perspective) nor an emotionally distant (Instrumental perspective) relationship. Care workers also did not perceive youth as wanting to be completely autonomous while working on their future (Autonomous perspective). Moreover, the three children's perspectives care workers did not align with all indicated that birth parent contact was unimportant to youth.

Demographic characteristics of the need perspectives

Table 5 shows the demographic characteristics of the youth and target youth who associate with any of the four need perspectives. Sex, ethnicity, age of first placement, and number of placements do not seem to differentiate between the youth and target youth within the four perspectives. The Future oriented perspective seems to have youth and target youth who are slightly younger, whereas the Autonomous perspectives consists of older youth. That said, the Autonomous perspective only consists of youth, who were older to begin with, whereas the Future oriented perspective mainly consists of target youth, who were younger on average. Finally, the youth and target youth with an Instrumental perspective seem to have experienced more adverse childhood experiences compared to the other perspectives.

Table 5. Sex, age, ethnicity and foster care characteristics within the four perspectives

	Ambivalent	Future oriented	Autonomous	Instrumental
Sex				
Female	7	6	4	4
Male	0	2	1	1
Age ^a (<i>M</i>)	20.7	17.2	22.4	19.2
Ethnicity				
Dutch	4	7	4	3
Other	3	1	1	2
Age first placement (<i>M</i>)	7.7	6.8	7.2	8.1
Number of placements ^a (<i>M</i>)	2.4	3.1	3.4	2.4
Number of ACEs (<i>M</i>)	6.4	5.8	6.4	8.2

Note. ^a At the time of the Q sorting or at the time youth left the care of the foster parent or care worker. Ambivalent consists of 6 youth and 1 foster parent; Future oriented consists of 2 youth, 1 foster parent and 5 foster care workers; Autonomous consists of 5 youth; Instrumental consists of 2 youth and 3 foster parents.

Discussion

In this study, we examined if foster parents and care workers recognize the psychosocial needs of youth in foster care, and what the differences are between the adult's 'child perspectives' and the 'children's perspectives' of youth (Sommer et al., 2010). We focused on youth with a history of sexual abuse, because this experience is often undisclosed, which makes it more difficult for adults take the perspective of youth. The results of this study show that foster parents and care workers recognize some of the children's perspectives revealed by the youth, when they try to think about how youth in their care perceive their psychosocial needs.

Role expectations

The children's perspectives display the roles youth expect from their foster parents and care workers. However, the child perspectives of foster parents and care workers differ in how they regard these roles. Foster parents recognize the importance of their caretaking role, whereas the care workers recognize the importance of foster parents as mentors and diminish the importance of their own involvement.

Most foster parents recognize youth who value their support to deal with the past and daily struggles. Although this caretaking role is important, these youth want the relationship with their foster parents to be distant and instrumental. Foster parents caring for youth with a history of sexual abuse and many other adverse experiences may feel that youth need their support to deal with their adverse experiences. Even in short-term placements, foster parents might feel they can contribute to processing this past and preventing negative impact of the abuse (Pasztor, Hollinger, Inkelas, & Halfon, 2006). Moreover, foster parents seem to recognize that some youth do not want a

close relationship with them, perhaps because they do not feel emotionally safe enough to establish a sense of belonging (Steenbakkers et al., 2017). However, there is a risk of conflict when foster parents are trying to balance the closeness they need in order to help youth with their past, while also keeping the distance that allows youth to be engaged in the relationship. The three children's perspectives less often recognized by foster parents view their role either as helping youth to process the past in an intimate relationship or as supporting the independence of youth. These perspectives regarding the psychosocial needs of youth might be less often recognized by foster parents because of the reasons they became foster parents; to care for children whose parents cannot (De Maeyer, Vanderfaellie, Vanschoonlandt, Robberechts, & Van Holen, 2014). Hence, they do not perceive the necessity to form a bond similar to youth's birth parents, but also believe their role is too important to let youth be completely independent.

Care workers often align with the children's perspective that values the role of foster parents as mentors for the future. Getting an education, learning independent living skills, and receiving social support are important needs for youth in order to thrive as young adults (e.g., Pecora et al., 2006). As many youth struggle after leaving care, this could be an important issue specifically for care workers, who recognize the importance of this need especially among younger adolescents. Care workers recognize the agency youth want when shaping their future, while also recognizing the support youth need in this challenging process. The three children's perspectives that were not recognized by the care workers value the role of foster parents as helping youth to deal with their past, either with emotional closeness or distance, or letting youth make autonomous decisions. It is striking that care workers do not perceive youth who want to process the past. This might relate to the difficulties youth can have to disclose their past, specifically related to child sexual abuse (Hepworth & McGowan, 2013; McElvaney, 2015). It could also relate to the normalcy youth want to experience, which might be especially prominent during contact with professionals (Madigan, Quayle, Cossar, & Paton, 2013). Care workers' training regarding the importance of attachment might have influenced their lack of recognition of the distant role some youth expect from their foster parents (e.g., Schofield & Beek, 2005).

Regarding the expected role of care workers, there was also a discrepancy between the child perspectives of foster parents and care workers. Care workers aligned with the children's perspective that places the least amount of dependence on them. They do not seem to recognize youth who value their assistance, but rather believe youth expect their role as professional to be minimal. For youth who do want care workers' assistance, this devaluation of their role could give them the feeling of being insufficiently supported or heard (Fitzgerald & Graham, 2011). Foster parents on the other hand perceive youth who want involvement from care workers in a supportive but

instrumental relationship. This again relates to the caretaking job foster parents seem to recognize in the perspectives of youth, that is, that care workers should help youth with their past while they are (temporarily) in care (De Maeyer et al., 2014; Pasztor et al., 2006).

Birth parent contact

Whereas all children's perspectives of youth indicate difficulties in the contact with birth parents, one group of youth do want to have a good and supportive relationship with them. Foster parents and care workers however differed in how they believe foster youth prioritize and view the contact with their birth parents.

The foster parents in this study mostly align with the children's perspective that does not value birth parent contact. Studies have shown that youth can encounter difficulties when visiting their birth parents, and that the relationship with them is not always supportive (Sen & Broadhurst, 2011). When foster parents see youth struggling with the contact, this might explain why they recognize the negative aspects of the relationship between youth and their birth parents. However, foster parents do not recognize the group of youth who do want a supportive relationship with their birth parents. This more negative view of birth parents from the perspective of foster parents has also been found in other research (Salas Martínez et al., 2016), even though good and supportive contact with birth parents likely promotes positive outcomes for youth (Sen & Broadhurst, 2011).

Most care workers on the other hand perceive youth as wanting good contact with their birth parents. They seem to believe youth prioritize loyalty toward their birth parents instead of the acquired loyalty toward their foster parents. Perhaps care workers believe that youth expect (one of) their birth parents to care for them again in the future. Their assumption may be guided by the Dutch child protection system. A majority of placements in the Netherlands is temporary, aiming for reunification of the child with their birth parents (De Baat, van Den Bergh, & de Lange, 2017). The children's perspectives that indicate more difficulties in the contact with birth parents are not recognized by care workers. They might hence overestimate the importance of contact while minimizing problems that also can be present (Sen & Broadhurst, 2011).

Children's perspective versus child perspectives

The results show a discrepancy between children's perspectives and child perspectives regarding the psychosocial needs of youth in foster care (Sommer et al., 2010). Foster parents and care workers mostly align with two different children's perspectives; the instrumental and future oriented

perspective respectively. The two other children's perspectives, the ambivalent and autonomous perspective, were both hardly recognized by foster parents and care workers.

On one hand, this result suggests that foster parents and care workers do not adequately recognize children's perspectives. Foster parents' and care workers' own perception of the needs of youth might have influenced their child perspectives (Lundy, 2007; Sommer et al., 2010). Many of the arguments presented above follow this line of reasoning, trying to understand how the adult perspectives have influenced the child perspectives. Further, not all youth communicate openly about their experiences or indicate their needs with their behavior (Steenbakkers, van der Steen, & Grietens, 2016). For example, youth with an ambivalent perspective might be more prone to show one part of this ambivalence, while keeping the other (perhaps more vulnerable) part to themselves. The uncertain and vulnerable position of youth in foster care might result in youth behaving socially desirable and not expressing their needs. This might be especially prominent in youth who experienced sexual abuse, because the adult-child power imbalances were taken advantage of (Putnam, 2003).

A different explanation of the findings might be that foster parents and care workers see beyond the needs youth display. Due to their age, experience and professional training, they try to understand not only the behavior of youth, but also where this behavior could be coming from. This hidden perspective might be difficult for youth to reconcile with their developing identity, for example when they want to be independent but still require support in some situations (Morton, 2017). Moreover, it might be difficult for youth to acknowledge the impact of their previous caregiving environment, because of loyalty and attachment toward their birth parents (Atwool, 2013). Foster parents and care workers could recognize these underlying perspectives and thus perceive which side of the ambivalent youth requires their attention, or when and from whom independent youth actually do need support. When youth themselves are not yet aware of these needs, this could result in the discrepancy between the children's and child perspectives found in this study.

Strengths and limitations

Q methodology allows researchers to identify shared perspectives among people, which therefore fitted this study that aimed to compare children's and child perspectives. While we compared the individual child perspectives of foster parents and care workers to the shared children's perspectives of youth, youth participating in this study were not part of the target group the parents and care workers reported on. It would have been interesting to compare the perspectives of youth with the child perspectives of their matched foster parents and care workers, to see whether the child perspectives and children's perspectives within

an individual case were similar or dissimilar. Perhaps some of the overlap in the child and children's perspectives might have been missed because it pertained to different youth. Moreover, the youth were asked to retrospectively reflect upon their needs as adolescents, but their current needs or their current perspective upon their needs as adolescents may have influenced how they sorted the cards. Hence, youth may have provided us with a more 'mature' vision on their psychosocial needs. Finally, the occurrence of sexual abuse was based on self-report by youth and on reports by secondary informants for the target youth. Self-reported sexual abuse can be underreported in questionnaires, which is especially prevalent in less severe forms of abuse (Langeland et al., 2015; Wilsnack, Wonderlich, Kristjanson, Vogeltanz-Holm, & Wilsnack, 2002). For the secondary informants, reporting sexual abuse also depends on whether the child disclosed the abuse, which many children do not (McElvaney, 2015). Therefore, we asked foster parents and care workers whether it was 'very likely' that sexual abuse had occurred. This was done to prevent very conservative estimations based on disclosure only, while requiring a high amount of certainty that abuse occurred.

Implications

It is crucial that foster parents and care workers are sensitive to children's experienced needs and responsive to these needs. Meeting children's needs additionally requires that welfare systems provide good follow up to children, as well as foster parents. Furthermore, findings suggest that the child perspectives foster parents and care workers differ, which may challenge a good cooperative relationship based on reciprocal understandings. Exploring any differences between their perspectives may prevent disturbances in their relationship. Finally, this study highlights the importance of having children participate in the decisions regarding their care, because they have unique and varying perspectives about their own needs. At a minimum, children should be timely informed about their right to participate in decision-making and given options on how to make their wishes and needs known (Lundy, 2007; Pölkki et al., 2012). Foster parents and care workers should be aware that even though they may advocate for children and look after their best interests, their understanding of the children's perspectives will not always be an accurate reflection of what children themselves would say.

Future research could examine what the impact on decisions and outcomes for children is when adults advocate for children, especially when their perspectives differs from the children's own perspectives. This could also include the perspectives of birth parents, as they often remain important in the lives of their children. Finally, future research can explore how much weight is given to the voices of children in decisions regarding their care when they do receive the opportunity to speak.

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