

Children And Residential Experiences:

Creating
Conditions for
Change



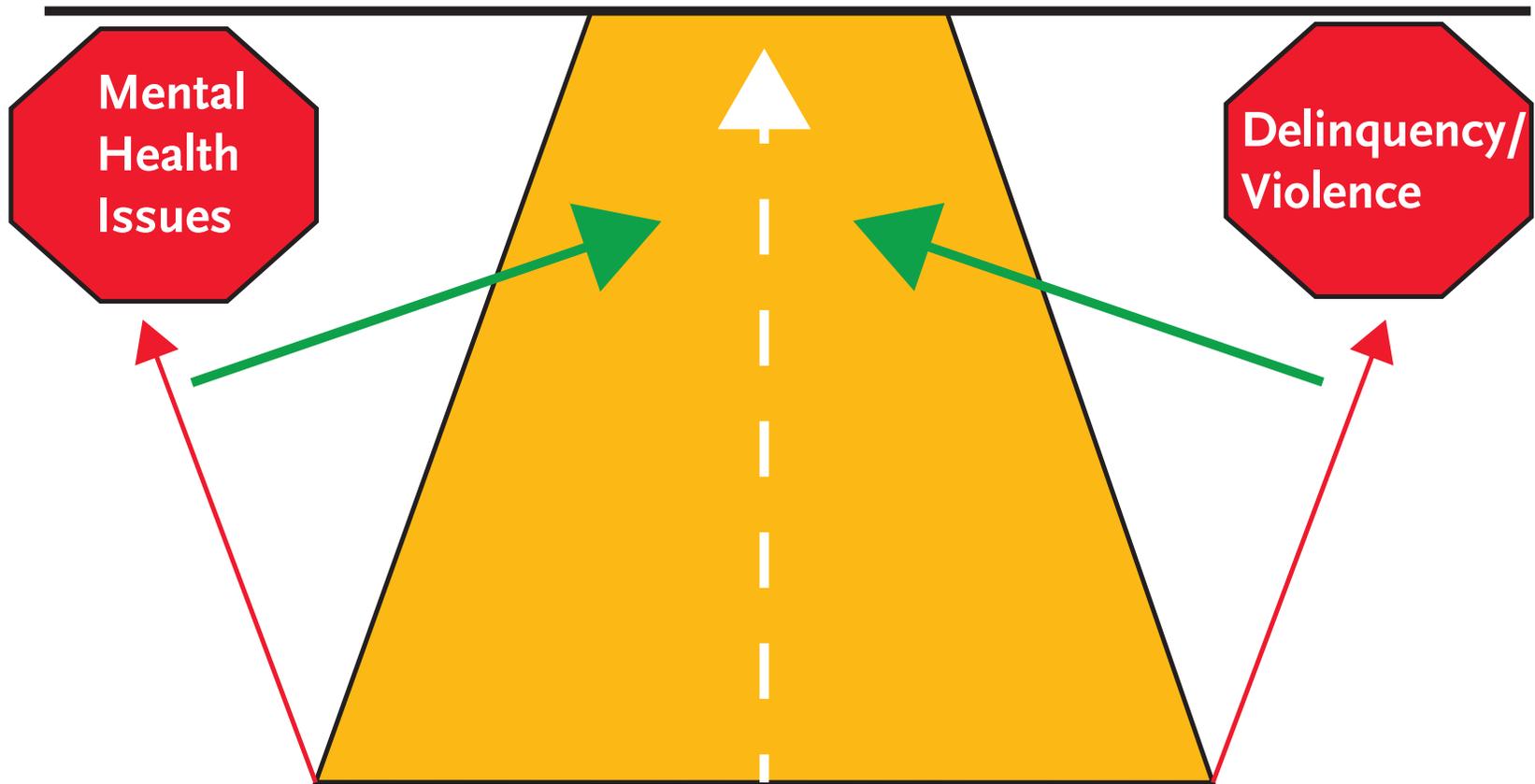
RESIDENTIAL CHILD CARE PROJECT, CORNELL UNIVERSITY

Purpose of Therapeutic Residential Care

- Creates breathing room “Boot camp to Monastery”
- Provides a safe place to learn new skills and practice
- Provides adults who act as teachers, coaches, and mentors to help develop and practice necessary life skills
- Helps children realize a more normal developmental trajectory



Developmental Trajectory



Core Concepts Guiding Quality Therapeutic Residential Services

- Best Interest of the Child
 - UN Rights of the child (1990)
- Struggle for Congruence
 - Anglin (2002)
- Evidence Informed Program Model (Theory of Change)
 - Lee & Barth (2011)

—Holden, Anglin, Nunno, & Izzo (2014)



Program Model

- Provides a conceptual framework and evidence informed theory of change that creates the conditions for change.
- Guides all staff members interactions and use of everyday events as they occur in the life space to teach interpersonal and pro-social skills.
- Improves children's abilities to engage in treatment, education, and other interventions more effectively.



Developing the CARE Program Model

- 2005-2006 – literature review, survey of agencies, expert advisory group, developing measurement instruments, field testing components
- 2007- 2009 – pilot model in 7-10 agencies, develop implementation model, refine measurement instruments
- 2010-11 – Anglin review of implementation process
- 2010-2016 – multi-site Duke study of 14 agencies to build evidence base for model
- 2015-17 – interrupted time series study – developing CARE fidelity criteria and instruments
- 2017 – **CEBC Listing Level 3, High Relevance**



Children And Residential Experiences Theory of Change

INTERVENTION

STAFF OUTCOMES

CHILD OUTCOMES

Staff Knowledge, Beliefs, and Motivations

Staff Practices

Child Experiences and Perceptions

Child Wellbeing

Understanding of practice principles

Familiarity with strengths and skills

Create opportunities for building self efficacy and self confidence

Strengthen child's relationships with staff and peers/ Improve child's relational skills

Adjust expectations to children's developmental level

Incorporate families into service planning

Recognize and respond appropriately to child's trauma-based behavior

Enrich the physical and social environment to create a therapeutic milieu

Children...

Experience success on challenging tasks

Trust and feel securely attached to care workers

Feel valued, higher self-worth

Feel connected to others

Feel greater connectedness to others (family, peers, staff)

Improved Self Concept, Self Efficacy, Self Esteem

Social and Emotional Adjustment

Behavior

Personnel Training

Organizational Technical Assistance

Exposure to Concepts and Principles

Confidence
Willingness
Motivation

...to apply principles and strategies

Consultation regarding implementation of CARE practice
Feedback from observations and survey results

ORGANIZATIONAL OUTCOMES

Organizational factors that reinforce agency application of CARE principles:

- Policies and practices that support innovations
- Climate
- Culture
- Congruence
- Data-based decision making

CARE Principles

Relationship
based

Family
involved

Trauma
informed

Competence
centered

Ecologically
oriented

Developmentally
focused





In order to develop normally, a child requires progressively more complex joint activity with one or more adults who have an irrational emotional relationship with the child. Somebody's got to be crazy about that kid. That's number one. First, last and always.

— *Urie Bronfenbrenner* —

AZ QUOTES



Relationship Based

- The ability to form relationships is associated with healthy development and life success
- Secure attachments allow children and staff to take risks and challenge themselves
- Developmental relationships are the key to helping children and adults develop

Attachment, reciprocity, progressive complexity, and participation (Li & Julian)

“The active ingredient in all interventions”



Growing Up In Care

Children do well if they can. If they can't, we need to figure out why so we can help.

- *Ross Greene*



Developmentally Focused

- All children have the same basic requirements for growth and development
- Children need adult support to engage their innate capacity to grow and develop
- Children and adults learn best when skills are within their zone of proximal development
- Staff development focused on increasing the capacity for adaptive thinking is necessary for the complexity of the work



Family (Community, Culture) Involved

- Family contact has demonstrated positive outcomes for children
- Planning for adequate community support is essential for a successful return
- Including families links children to social orientation and cultural environments
- Adults who are culturally competent can adapt interventions to the unique needs of children and families



Competence Centered

- Problem solving skills, flexibility, critical thinking, emotional regulation, social competence, and self-efficacy are necessary life skills
- Personal strengths and resources are the biggest factor in making positive change
- The development of competence is dependent on the developmental relationship, cognitive functioning and self-regulation



Trauma Informed

- Trauma has a debilitating effect on children's growth and development
- Maintaining resilient non-coercive, safe environments is essential for children and adults to learn new responses to stressful situations
- Challenging behavior is often pain-based behavior (Anglin)
- Resilient organizations are holding organizations (Kahn)

“in the shelter of each other we live” (Peig Sayer)



The Ecology of a Supportive Environment

*When you plant lettuce and it doesn't grow well,
you don't blame the lettuce.*

—Thich Nhat Hahn, Vietnamese Buddhist Monk



Ecologically Oriented

- Children and adults learn through interacting with their environment
- The environment is influenced by the interactions with the children and adults
- Environmental factors that protect children are (Benard):
 - Caring relationships
 - High expectation messages
 - Opportunities for contribution and participation



Implementation Strategies

- The agency is the locus of learning
- 3-4 year implementation agreement
- Quality assurance activities based on continued self-assessment
- Participation-centered management strategies
- Education, training and technical assistance
- Data informed decision-making



Levels of the Organization

- External agencies
- Leadership and management
- Supervisors and clinical staff
- Direct caregivers
- Children and families

