

CHAPTER 1: INTRODUCTION

This work is an exploration of emancipation into adulthood. It examines the transition from adolescence to adulthood, with particular attention to gender differences, from the perspective of young people who leave child welfare care because of the age of majority. Their experience is viewed within the context of young people their age as described in the literature on adolescence and care-leaving, and census material. It is primarily a qualitative study, taking as primary data the self-narratives of young people given in the year after they turned 18, the age of majority in Ontario. Thirty young people, fifteen of each gender, were randomly selected from among 165 youth born in 1976 who were in the care of a large child welfare agency in Toronto, Ontario, after their 16th birthday. They were asked to complete the Canada Census 1991 Long Questionnaire; to produce a self-narrative that was direct-scribed, a technique adapted to research in which the speaker presides over the transformation of oral word into written text; to analyze the narrative as a story in collaboration with the researcher; and to take part in a gender-specific focus group. Twenty-four young people, twelve of each gender, completed all the individual components, and fourteen attended the group discussions. Data collection took place in the first nine months of 1995 in and around Metropolitan Toronto, and was analyzed and written about over the next few years.

I undertook this work as an opportunity to reflect in a disciplined way on a near-decade of experience in setting up and running the Pape Adolescent Resource Centre (PARC), a program for youth leaving child welfare care, which in turn built on two decades of social work in and around child welfare. Much of my practice has involved work with adolescents. Working with youth has always attracted me because it is full of teachable moments — for myself, as much as for the youth. Adolescence is expected, perhaps even encouraged, to be a time of vision and turmoil, and in dealing with that, adolescents often have insights into the hidden workings of our society which they have not yet agreed to discredit or censor. They are also the primary target of social indoctrination, and by listening to what they hear, we can glimpse patterns and portents that we might otherwise miss.

This work is rooted equally but differently in my own experience as a mother raising adolescent daughters during the time that PARC was born and raised. The time was marked by a daily dialectic between 'normal' adolescence and adolescence in care. I 'mothered' in both worlds simultaneously, in one partnered with a caring reasonable father, and in the other with a legacy of patriarchy writ rigid and anachronistic. In the home world I could enjoy being a woman, but in the work world I had frequently to be a harridan, fighting and manipulating to

get the basics of life, materially and spiritually, for my 'family'. To be 'the good woman' in the child welfare scene is to be the minion of forces that repatriate the problems of society to the individual. At the same time, the individual in our society is subliminal, largely lost to view and service. The outcome of care-leaving, as it is currently conceptualized, is for the problem to disappear. And so it does, as the literature attests.

The outcome of parenting, on the other hand, is to produce individuals who are able to manage the world they inherit, including the older generation as its energies flag and competence wanes. One of the reasons we value our children is so that they will value us as the balance of dependency shifts. Children who have been undervalued may not make comfortable stewards of the future; as they amass power and influence, they may use it to right perceived wrongs, perhaps in a reparative way, but perhaps punitively. To the extent that undervalued children are prevented from assuming adult power, the future is in more predictable hands. This is an argument for class intensification, the rich getting richer (and more powerful) and the poor getting poorer (and less powerful).

Another approach to ensuring a good future, of course, would be to value all children so that regardless of who gains power, they have no axe to grind. While this rhetoric remains in use, the reality it represents is gossamer thin and getting thinner. The principle of universal rights has been sacrificed to the mantra of global economics. Once more, as in times of yore, the family and the community is assigned the task of bridging the gap between what individuals need and what they can get under the rules that operate, one of which currently is that 'outside' resources should be withdrawn so as not to interfere with the 'natural' order of things. This is the mechanism of class intensification.

When I was at PARC, I didn't have a construct called class intensification. I only knew that it was much easier to be optimistic about the future well-being of my daughters than of the youth with whom I worked. Secondly, I knew that I felt responsible and was held responsible by others for how my daughters 'turned out', but that no one assumed that responsibility for the youth with whom I worked. In fact, there was a readiness to give PARC that responsibility, even though its mandate originally limited work with a youth to six months (so as not to engender dependency). And thirdly, I was aware that people asked us how the youth we worked with 'turned out', as if there was a reasonable expectation that the transitional work would be finished, or far enough along to evaluate, whereas about my daughters, people enquired how they were doing, what their plans were, where they were heading, implying a work in progress. If youth in care were a similar work in progress, truncating our involvement meant we had nothing to do with it, no matter how it turned out,

and furthermore, would not be burdened with the knowledge. The expectation that youth in care be a finished work at emancipation, illogical and abnormal as that would seem, is implied by calling what happens after care ends, independence. It also suggests that a world of rugged individualism and self-sufficiency is possible, normal and good.

PARC rejected the requirement to terminate involvement when care ended in favour of creating a class of youth called alumni, graduates of the system, whom we called upon to enrich PARC as a care-leaving community by giving it the benefit of their inside knowledge, and to be role models and mentors to younger youth. In return for this civic contribution, they were entitled to receive service as they required it. We sought and created showcases where their progress could be celebrated. Often the progress was the act or report of posing their lives as a problem to be solved by themselves, regardless of who or what was responsible for creating the problematic circumstances. An initial response from 'the system' was the claim that in order to demonstrate such outcomes, we were 'creaming' the population, taking the most capable individuals and presenting them as the norm. The majority of youth in/leaving care, then, could be excused from an expectation of such outcomes. As the number and scope of youth who could demonstrate success increased, attempts were made to attribute it to individual effort, from which it followed that anyone who wanted to and applied themselves assiduously could indeed become, as my grandmother would have put it, the silk purse made from the sow's ear, the impossible transformation. This argument was difficult to meet, since there was much truth in it, but to accept this individualistic explanation also excuses the system from the expectation of nurturing success among all the youth for whom it cares. Articulating and selling a systemic or structural explanation, however, was very difficult, resisted at all levels and for a variety of reasons. In the end, the effort wore me out and sent me on a journey of reconsideration, of which this work is one outcome.

This journey is a tale of transition, both personal and professional, that in many ways runs parallel to that which the participants in this work describe. Professionally, I transformed from practitioner and administrator to scholar and researcher. This coincided with the life cycle transition of becoming 'empty nesters' and repositioning for a last whack at productivity. The participants described the adolescent transition from child to adult within a framework conceptualized by me as I was making the transition from parent to (for lack of better terminology) older adult. My journey provides the frame for this research as it unfolded, and identifies the somewhat moving perspective from which the work was conceptualized, designed, conducted, amended and analyzed. The question is how explicitly my journey needs to be included in order for the researcher to be adequately visible

among the researched. I allowed myself to use the first person whenever it felt appropriate to put myself into the picture, and to share with the reader what I think they might need to know about me to understand the perspective that informs the frame.

The origin of the work was in the dialectic between my personal and professional experience of parenting, and that juxtaposition is central to the design of this work. Children need parenting, and the child welfare system was created, ostensibly, to provide surrogate parenting where natal parents are unable, for whatever reason, to do the job. My perception of the social role of child welfare has been fundamentally influenced by John Boswell's *The Kindness of Strangers* (1988), a study of the abandonment of children from antiquity to the Renaissance. Boswell concludes that as long as children whose parents could not care for them for whatever reason were exposed to the broader community where others who had use for them could claim them, their life chances were overall about the same as for those children raised by their natal parents. Just as in fairy tales an heiress ordered abandoned in the woods to be devoured by wild animals may be claimed to clean house by a horde of dwarfs, so in antiquity (and present-day garage sales) one person's trash might become another person's treasure. When child welfare was institutionalized, however, unwanted children were delivered to a designated door, taken in, lost to view, and, if they survived, emerged at adolescence to a world they did not know and that did not know them. Their disconnection from society was often a death sentence, in part because the institutions who took them in did not value them but merely did a job in which the returns for doing it badly were better than for doing it well: dead children cost less than live ones. If the children survived institutional care, they might succumb at re-entry to society, because they had no access to a means to support themselves and no right to be supported by others.

Particularly for a wind from such a distant past, this resonated chillingly with the daily work of PARC. PARC youth often expressed that they felt like they belonged nowhere, were differentiated only by the way in which they were (or escaped being) stigmatized, and had little value to anyone except as a problem. The ambiguity about caring was also omnipresent: they questioned whether people paid to work with them really cared or were just doing a job. The corollary was that any caring that was reimbursed, perhaps even simply rewarded, ceased to be 'real'. Taken together, these described the emotional work that must be done with youth being emancipated from child welfare to establish or repair a foundation for practical and psycho-social reciprocity.

This task is so difficult that it would be reasonable to expect to fail, and that may be the unstated expectation of the system. And yet, direct contact with youth leaving care gives a

visceral experience that many are going to succeed in life better than there is any reason to expect. Given their circumstances, the question becomes where and how they get the emotional nutrients they need to survive, whether before they come into care, during their sojourn in the system, and as they are being emancipated. There are many impediments to finding an answer: it may be outside the youth's perception, they simply don't know it; it may be that they know it but lack the ability to express it; and/or it may be that talking about it is taboo in some way. The challenge becomes devising an approach that allows them to share their knowledge in a way that is sufficiently contextualized that the appropriateness of aggregation can be assessed.

I found an approach to finding an answer in Carol Gilligan's seminal work, *In a Different Voice* (1982). What she had to say about gender differences in how people perceived and named the world resonated strongly with me, immediately became an important construct in my life and eventually became central to this work. Initially, however, its most valuable contribution was that I could visualize myself doing Gilligan's kind of research, using words rather than numbers as data, drawing conclusions from careful listening and logical debate rather than numerical manipulation. I also liked that her work asked for my contemplation as a reader, rather than setting forth 'truth'. If what she did was accepted as mainstream research, I could see a way to overcome the philosophical and epistemological problems that alienated me from traditional research. Much later, I realized that Gilligan also started me on the path of conceptualizing social work and traditional research as speaking in different voices. This raised the possibility of identifying and validating the research language that lurked within social work reality, and conversely, of appreciating the role of quantitative research.

Once the possibility that words were potential data was firmly planted in my mind, the ethical framework for becoming a researcher fell into place. If a reciprocating exchange of words were the medium of research, I could conceptualize it as being useful for the researched as well as the researcher. Guidance for how this should be done came from Paulo Freire, whose work, *Pedagogy of the Oppressed* (1972), has long been my philosophical guide. Freire believed that what differentiated man from animals was their capacity for praxis, acting and reflecting to change the world, and that the capacity to do so was nurtured and challenged through dialogue among equals naming and re-naming the world they shared, even though their positions within that world were not equal by the usual standards. His message is deceptively simple: "To speak a true word is to transform the world." (Freire, 1972:60) I could see myself as a researcher whose task was to create the conditions under which young people emancipating from child welfare care could speak a true word about their

world. Much later I understood the second part of the task, which was for me as a researcher to speak a true word about my understanding of what they said.

From these three came intellectual guidance to the task of transforming a problematic life experience into a research project, Boswell offering a sociological framework for the trash/treasure dialectic, Gilligan providing an approach to research that worked with words, and Freire presenting an ethical orientation that empowered participants. The elements of this work that began to gather were that it be a primarily qualitative approach that used words as data, focused on gender differences in perception and negotiation, and viewed outcomes against the experience of the age cohort in order that the dialectic between the 'normal' and child welfare experience of growing up would become and remain evident as an aggregated frame within which to understand individual outcomes.

As preparation for the research project proceeded, other issues were added. It became evident that Canadian literature on care-leaving was very limited, in part because of the lack of an infrastructure to support and share the development of a public dialogue across a large and diverse nation. Much of the care-leaving literature was less than helpful to the practitioner, in that it described a flawed system rife with problems without offering guidance about how to exploit the circumstances that exist, or, alternately, to change the system for the better. On the positive side, much of the Canadian literature is written from a youth perspective, sometimes by youth themselves, and/or gives priority to their voices. An infrastructure exists by which the progress achieved by collaborative work between youth and adults can be marked, although it has not yet the means to accumulate and aggregate the results and to use them to nurture and challenge change.

This work, as it unfolded, attempted to locate the Canadian care-leaving reality (inasmuch as that can be construed from Toronto-based research) within the international literature. It attempted to critique the child welfare system from the point of view of how it conceptualizes and manages its role as surrogate parent, on the grounds that reframing the work is a readier route to change than renegotiating the reality under which the work is done. In this, it parallels the British Looking After Children initiative (Parker et al, 1991), which uses as a measure what a reasonable parent would do in the circumstances to achieve a particular result. This approach also requires an articulation of what the goals are for children in care, aside from removing them from natal circumstances deemed unsatisfactory. This articulation is long overdue, and may be useful in exposing contradictions within the child welfare system and in creating pressure to address them.

The methodology, as it developed, accentuated the importance of self-narrative in defining and developing identity, and as a protective and/or reparative exercise at times of transition and stress. It also demonstrated a technique called direct scribing that supported a broad spectrum of participants to be thoughtful and eloquent in their response to a complex life-stage question. The technique, which originated in practice, could be adapted to create the means by which youth in care and members of their personal community might contribute their voices continuously and directly to the record of care, thereby accumulating a rich diversity of perspectives on the life and times of the individual, out of which s/he could knit and re-knit a textured and multi-faceted identity.

The study population or sampling frame included youth who left care (placement and/or legal status) early (after reaching 16 but before age 18), those who 'aged out' upon reaching the age of majority, and those who qualified for extended care. It also included two 'classes' of youth, those who entered care early and left late -- long-termers -- and those who came late and left early -- visitors. There was a statistically significant relationship between class membership and gender, in that boys tended to be long-termers and girls tended to be visitors. This gender affiliation was evident among the participants as well. Several possible explanations are explored within the limits of the data, including ambiguity about competence: gender influences in how it is defined and how it is valued, and the possibility that it is a vulnerability in under-resourced circumstances. The gendered nature of the child welfare system, the preponderance of women at the service delivery interface and of men at the legislative and policy level, complicates the role of competence, which is at the centre of child welfare work, whether in its task of policing parents or its task of surrogate parenting.

Regardless of gender differences in care career, expectations and experience, child welfare legislation implacably requires emancipation upon reaching the age of majority. Living on one's own requires competence in several areas, the lack of any one of which may spell disaster. Over the past two decades, a system of 'preparation for independence' programming and extended care have been introduced to attenuate the process and to provide the means to teach the necessary competencies. It is hard to see these measures as other than too little too late, particularly for those youth who have been socialized to the dependency that child welfare, like most institutions, engenders and requires.

The traditional hierarchy of the child welfare system renders children seen and not heard, more-or-less passive recipients of adult decisions, occasionally consulted about but seldom in charge of their lives in care. The expectation is that children will acquiesce to the

authority of their care-givers. If this is not an acceptable option, as it may not be for children and youth who have survived in dysfunctional families and disadvantaged circumstances by distrusting authority, particularly when the child welfare system malfunctions in ways reminiscent of their prior experiences, the choice that remains is to resist. This is also the choice of workers in the system, whose task it is to find a fit between the rigidity of the legal and administrative framework and the flexibility required of parenting, and who do so either by bending life to fit the rules, or bending rules to fit life.

Much of what has been presented in the literature as outcomes of care can be attributed to the short-comings of the system itself, in particular a truncated and abnormally early emancipation. At the individual level, however, they may be seen as a measure of acquiescence or resistance. For example, most care-leaving literature, this research included, describes high rates of involvement with the justice system for boys and high rates of early parenthood for girls. Often this is presented as a lack of ethical development, irresponsibility, and/or poor planning. Given, however, the improbability of boys or girls in care achieving the foundation required for the occupations that would be taken as positive outcomes, it could be that they are entering the work world in the only jobs for which they have, or are likely to get even with more effort, the qualifications and experience. This could be acquiescence to an unstated expectation of failure as defined by becoming a criminal or a parent. Or it could be resistance, using the resources they have to make the best life they can, which, as the participants in this research attest, has positive elements. Being a criminal (if male), for example, provides the material means of survival inside or outside of jail, a social status and membership in a community of like-minded people. Becoming a mother (but not necessarily a father) reinvigorates social investment in the woman, allowing her access to financial support, housing, medical assistance, education and counseling that would not be available to her as 'just' a person. On the other hand, *not* becoming a criminal or a young mother could equally be read as acquiescence — being rescued by child welfare from a negative life trajectory — or resistance, using child welfare resources to transform oneself from a negative natal legacy. The individual's rationale is the differentiating factor.

I approached this task during data collection by asking the participants to tell their story and to analyze it with me so that I could be accountable to them for how I understood the elements of their story. In aggregating the data to produce some useful generalization, however, I had to reinterpret their stories without their input or concurrence. In assuming responsibility for *my* narrative about care-leaving, I experienced both the vulnerability and the value of saying my word to change my world, just as I had expected the participants would.

The theory in which I located myself in conducting this analysis was that of Carol Gilligan and her colleagues. In her seminal work, Gilligan discovered that an ethic of care existed and operated in the world by listening to women in ways that had not been done previously. She concluded that women tended to use an ethic of care, whereas men tended to use an ethic of justice. (I re-named her orientation of justice as an orientation of order, which I felt fit better with the less litigious nature of Canadians.) Her later research began to modify that stance, suggesting that both genders *could* use both orientations, although the gender association remained, and suggesting that using an ethic of care was a means of resisting patriarchal authority. It seemed reasonable to apply her constructs to the experiences of my participants, who were multiply disadvantaged and needed effective means of resistance.

The process of applying Gilligan's construct to my data was neither simple nor neat, for many reasons, and yet seemed worthy of perseverance. First I simplified Gilligan's definitions to render them functional: I characterized the ethic/perspective/language of care as being inclusive, responsive to others, and minimizing harm, and the ethic/perspective/language of order as using roles, rules and reciprocity. I attempted to code my participants' data in terms of a dominant ethical language, without success. In a second attempt, I focused on the nature of the problem they were attempting to solve, borrowing Gilligan's analysis to functionally define eight cells describing relationships between ethic of order/ethic of caring and conditions of equality or inequality, social attachment or detachment. In the unsatisfactory resolutions (inequality, detachment), two sub-categories were defined: acquiescence and resistance. I sorted each of the 24 participants for whom I had full data-sets, 12 of each gender, into one of these cells.

The sorting was difficult but instructive, and produced a third approach that focused on the relationship between the nature of the problem and the nature of the response. Gilligan postulated that the two world views could not be held simultaneously, just as the classic figure/ground illustration of the vase that can also be seen as two facial profiles can be perceived in only one way at a time, although one who acknowledged (could 'see') both options could switch between the two. This suggested to me the idea of bilinguality, the ability to speak two languages, and the idea of fluency, being able to match the language to the situation. I created yet another matrix into which I sorted the participants on the basis of the language(s) they used and the effectiveness with which they applied them to resolve/improve situations. Finally, I differentiated them according to gender, to pose as a question the gender association that Gilligan identifies, the gender differences in care career that my quantitative analysis identified, and my visceral and subjective sense that the female

participants warranted optimism more than the males.

This analysis resolved into a sense of having exposed something that had veracity and value. I sorted the participants, by gender, into five categories: the silenced/echoing, the unilingual in order, the unilingual in caring, the bilingual but confused, and the bilingual and appropriate. There were four more boys than girls in the bottom two categories, and four more girls than boys in the top category. The placements of the participants, based on what I knew of them from all sources, felt right. Those in the higher categories evoked optimism about eventual satisfactory outcome, even though current circumstances and resources did not warrant such a conclusion. It seemed fair to say that success was being acquired by how they used the resources they had, and how they balanced themselves internally, within their communities, and with respect to the larger world. Ethical bilinguality as a source of resilience made sense to me and was useful in understanding my world, as well as giving me a sense of understanding more fully the worlds of the participants.

The nature of this research is that the 'truth' of its findings can only be assessed by further consideration and application. As satisfying as an idea can be, it is only as good as it is useful. And so the final question is whether this way of thinking about the world of leaving care has any practical usefulness. I am optimistic that it will be because ethical bilinguality, like any language, should be amenable to being taught. It is a readily accessible tool that is available within existing resources: one need only teach the idea for workers and care-givers to be able to apply it to daily life. Secondly, I find it comforting and fitting to think that the mother tongue of child welfare is order and of parenting is caring, and that mutual bilinguality is essential for their shared business to be done well. If the idea of dominant ethical orientations can be used to explain differences, it can as well be used to deploy differences optimally to balance the polarities that are essential to most human tasks.

In doing this work, I am indebted to many people: the youth — my children and those of others — who raised the questions and motivated me to search for answers; my peers and partners, including those who gave me intellectual, emotional and practical support; my patrons, including the Canadian government which granted a Welfare Fellowship, the Laidlaw Foundation which gave me an Advanced Study Fellowship, the Metro Toronto Children's Aid Society which gave me access to their records and youth, and my husband, who gave ballast to my budget; and the participants, who reside in my mind and soul. I am especially grateful to the people who talked me through this journey: my husband, Michael Fay, who encouraged me to make the radical move of becoming a mid-life student and who allowed me to practice academic discourse with him; my friend, Paulina Hynes, whose wisdom gained

from her own life in care reverberated with the material; my daughter, Heather McLeod, who rescued me from the miasma of minutiae by requiring me to communicate to her sensibly about my work; and Margaret Boushel, my advisor, who has patiently persevered through stumbles and stutters. I also thank my current employer, Family Services of Haliburton County, for graciously sharing me with this work.

We turn now to the treatise itself. The literature is reviewed in the next two chapters, focusing first on the adolescent transition and secondly on the leaving care experience. Chapter four describes the development and rationale for the methodology. The next three chapters discuss the findings: chapter five discusses the care-leaving experience, chapter six compares youth leaving care with their age cohort, and chapter seven develops the concept of ethical bilinguality as a protective factor. The last chapter reflects on the experience and conjectures about its utility for how we think about and manage youth at emancipation.

CHAPTER 2: THE ADOLESCENT TRANSITION

In this chapter, we consider what the literature has to say about growing up at adolescence. Adolescence is a relatively recent construct, originally theorized from a male perspective, but subsequently modified to incorporate the impact of gender. The research literature approaches adolescence from a multiplicity of perspectives, making it difficult to render a meaningful picture. Therefore I developed and imposed a structure, the adolescent mandala, to give shape and order to a discussion of adolescence, with special attention to gender differences. I articulate my ideals for adolescence, as exposed in locating the literature on the mandala, and search for an articulation from the state about its expectations and goals. Two questions arise for exploration in the care-leaving literature: What are the outcomes for children/youth raised in care? What is the relationship between what is known about the transitional work of adolescence and the philosophy and practice of care-leaving?.

2.1 GROWING UP AT ADOLESCENCE

Hall, a psychologist, is credited with coining the term adolescence in a paper published in 1904 (Offer & Shonert-Reichl, 1992), but it is a much older idea that the relative dependence of childhood should give way to the obligations of adulthood more or less in conjunction with puberty. This transition was a common theme in fairy tales and myths, long before it became the subject of theory and empirical research.

Before the advent of psychology, adolescence was primarily a physical maturation, the natural arrival of the capacity for reproduction, accompanied by the social corollary of mating. Sigmund Freud, because he focused on the first years of life, had little to say about the adolescent transition. Anna Freud and Peter Blos extended his theory into adolescence, conceptualizing it as a second individuation period. In the first individuation period, the toddler internalizes a concept of mother in order to be able to leave her physically to explore the world. In the second individuation phase, the adolescent cuts parental ties (which, because the primal life force was sexual, necessarily had sexual overtones) in preparation for establishing a mating relationship (Eisenbaum & Orbach, 1982). This separation was traumatic and rendered the entire personality vulnerable and somewhat malleable, creating some opportunity to repair earlier damages (Freud, 1958). Conflict was essential to the process.

Freudian theory has come under severe criticism for its androcentrism, particularly the view

that female sexuality is the lack of male sexuality, and female personality development the accommodation of this deficit. Nancy Chodorow, a feminist psychoanalyst and sociologist, reconfigured the theory to incorporate the fact that mothers are primary care-givers. She explored the adolescent individuation process as gender-differentiated, concluding that boys need to reject the mother in order to develop male gender identities, but that the gender identity of girls is supported by a continued relationship with their mothers. Boys mature to value their separateness and are threatened by joining, whereas girls are comfortable with connectedness and threatened by separation (Chodorow, 1978; Apter, 1990:53-56).

Sociology adopted a similar view of adolescence as the dark and stormy night between the child in his family and the adult in the world, a time when the individual is liminal, disengaged and socially marginalized. Because adolescence was conceptualized in terms of what it was *not*, it was considered an unfit subject for direct study (Spencer, 1990:4). But Margaret Mead's anthropological work from Samoa, published in 1928, was based on empirical observation, and presented quite a different picture of adolescence (Howard, 1984; Mead, 1928). Her description of an idyllic primitive life in which girls blossomed into generous sexual partners stood in sharp contrast with the industrialized world, which was in the throes of social unrest and war on an unprecedented scale where young men killed and were killed in unmanly ways. Erik Erikson, born a year later than Mead, undertook a study of adolescence with the intent that thoroughly understanding it would prevent the further manipulation and exploitation of young men that he observed in war-torn Europe (Erikson, 1950:15, 274).

Erikson can be credited for establishing as popular wisdom that the task of adolescence is developing an identity. He presented the developmental spectrum of man as occurring in eight stages, each optimally the culmination of the preceding stages. The work of adolescence, step five, was to resolve the dynamic tension between identity formation and identity diffusion, before proceeding in early adulthood to step six, resolving social intimacy and social isolation (Erikson, 1950:239-266). His work was primarily based on clinical observation of boys and the biographies of famous men, and he integrated females into his theory by proposing that a girl stayed in a kind of developmental suspended animation protecting her "valuable inside, an inside on which depends her fulfilment as an organism, a person, and as a role-bearer" (Erikson, 1950:400) until selected as a partner for an intimate relationship, at which point she skipped directly to step six. When the task of identity development does become her priority, however, it is directed not to the clarification of individual identity as is the male, but to social role identity (Erikson, 1968, 1975). In short, according to Erikson, boys emerge from the adolescent task as individuals and girls as wives

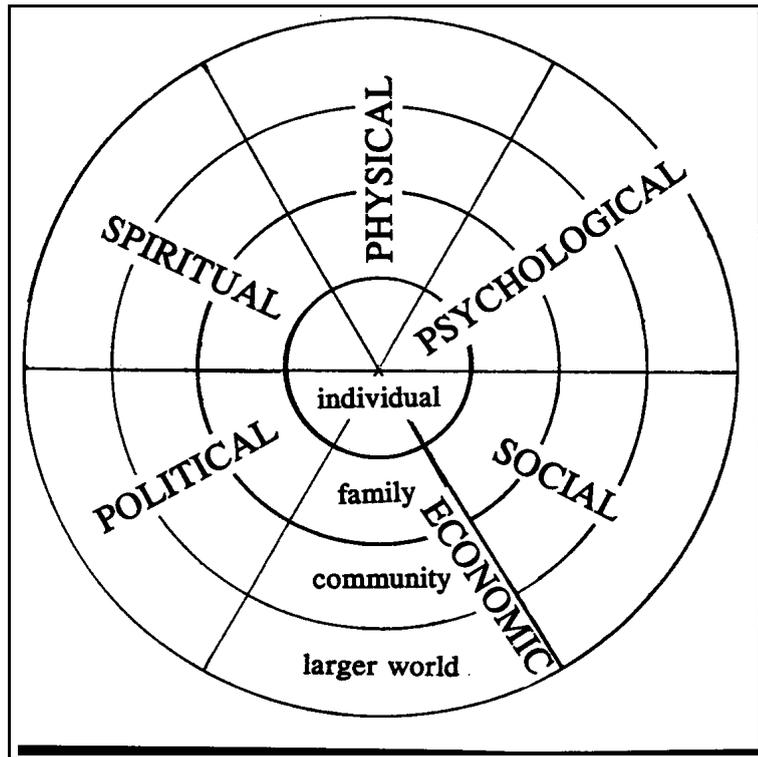
and mothers.

Erikson has been castigated by the feminists for his androcentrism, and by the empiricists because his work does not specify the extent of essential resolution in each developmental phase, and the consequences of incomplete resolution for subsequent phases. This provides little guidance for applying his theory to those with less than optimal childhoods. What was inarguable, however, was that gender influences adolescence in a basic way, and that it was no longer acceptable to extrapolate the female experience from the male reality (Erikson, 1965:xv). Rather, a theory had to be developed based on empirical observation of girls themselves.

Carol Gilligan addressed this issue in her seminal work, published in 1982, in which she proposed that there are gender-affiliated ways of seeing and naming the world that are basic to differences in growing up. As an educational psychologist, she approaches the adolescent transition from the perspective of cognitive and ethical development, discovering in direct work with a small group of girls and women a previously unidentified 'ethic of caring' that parallels the male 'ethic of justice'. Justice is ethics as we know it traditionally, based on fairness resting on "an understanding of relationships as reciprocity between separate individuals, grounded in the duty and obligations of their roles." The ethic of care "rests on an understanding of relationships as response to another in their terms." (Gilligan & Attanucci, 1988:74, citing Lyons, 1983: 136).

In subsequent longitudinal work with advantaged girls in a private school, Gilligan and her colleagues noted "a kind of psychological foot-binding" that diminished the agency and self-confidence of girls as they entered adolescence (Brown & Gilligan, 1992: 218). Other psychologists describe a similar stage of "gender intensification" that heralds the appearance or exacerbation of gender differences that seem to disadvantage girls at adolescence (Hill & Lynch, 1983:201). This vulnerability is not evident at an earlier age; in fact, the increased vulnerability of females at adolescence stands in sharp contrast to the higher ratios of difficulty experienced by males in both childhood and later life (Jacklin, 1989; Offord, 1986).

The influence of gender on human development is so pervasive that the literature seeking to explain it is vast and comes from a variety of perspectives. Furthermore, gender is known to be influenced by factors such as race and culture, class, and social circumstances (Harding, 1987:7), which must be given due regard when juxtaposing empirical studies in order to build a meaningful picture of the existing research base. To render manageable the massive literature, I devised a framework into which I could sort it, which I call it the 'adolescent



mandala', diagramed as follows:

I postulated four concentric circles representing enlarging social configurations in the movement of the individual over time from the privacy of person-in-family to an increasingly large and public sphere, and six vectors representing domains or perspectives from which the personal transition may be viewed. The assumption underlying the concentric circles is that there is an ordered and predictable movement from private to public life that accompanies maturation, expressed in each of the six domains. The domains are as follows:

- *Physical*, in which I include sexual maturation, physical characteristics and social reactions to physical characteristics, sexual activity and procreation.
- *Psychological*, in which I include the development of identity through the resolution of conflict, both internal and external, i.e., coping strategies, the interplay of internal and external resources brought to bear on problems.
- *Social*, in which I include the influence of past and present relationships, availability and differential use of potential helpers, and the social aspect of adolescent partnering and parenting.
- *Economic*, in which I include routes to adult productivity such as education, employment and unpaid labour, including the economic aspects of adolescent partnering and parenting.
- *Political*, by which I mean the exercise of personal power in the world, that is, personal agency, including the development of identity through praxis and narrative, and voice as an index of agency.
- *Spiritual*, by which I mean the personal acceptance of some of life circumstances as inevitable and unchangeable, as if it were determined by a higher force.

The literature does not fit neatly into these domains, and was not evenly distributed among them. There is virtually no research in the latter two domains, for example. One could debate the boundaries I imposed and the rationale I used in sorting research into one rather than another category. Nevertheless, the exercise has merit as a way of exposing to myself as well as to the reader the way in which the literature informed my understanding of the adolescent transition, cross-pollinating the wisdom of experience with the intelligence of research.

2.2 THE ADOLESCENT MANDALA

2.2.1 Physical

Whereas the onset of puberty once was the marker of the adolescent transition, it now initiates a more prolonged developmental process. The age of menarche has been declining at the rate of four months per decade since the mid-nineteenth century, so that onset of puberty is now age 12 or 13 for girls in most parts of the world. Boys, continuing a long-established age differential, enter puberty a year or two later (Coleman & Hendry, 1980:16-20, 26).

The literature makes passing reference to the massive endocrinological changes that take place in early puberty, and there is some discussion of social discomfort with physical manifestations such as acne and skin outbreaks, but generally the chemical maelstrom that buffets early adolescence is not given the same attention as the role of chemical imbalances in other physiological transitions, such as menstruation, childbirth, or menopause. In life, however, endocrine-driven mood swings and outbursts are often among the most memorable parts of early adolescence, perhaps particularly with girls.

The physical changes of puberty make it more or less a public event, one that is welcomed more by boys than girls. Studies from several countries have found that girls have mixed or negative reactions to their physical maturation, whereas boys have positive reactions. Girls are particularly dissatisfied with the very characteristics that denote maturity, the gaining of weight and the development of breasts and hips (Rodriguez-Tomé et al, 1993; Offer & Shonert-Reichl, 1992). This reaction is exacerbated if puberty comes early (Petersen et al, 1991), and the negative effects become more marked with age (Rodriguez-Tomé et al, 1993, Rodriguez-Tomé & Bariaud,1994).

Other people also react to the physical changes of adolescence. The gender-intensification hypothesis holds that there is "an acceleration of gender-differential socialization during adolescence, perhaps at the onset of puberty or shortly thereafter, and perhaps especially for girls" as new areas become genderized and demand for conformity increases (Hill & Lynch, 1983:201). Drawing on existing research on psycho-social reactions to physical maturation, Hill & Lynch conclude that in early adolescence, often concurrent with the menarche, the family (particularly fathers), the school environment, and peers of both sexes related differently to girls, and that girls became less self-confident, less academically achieving,

more vocationally traditional, more socially involved, more and negatively self-conscious, more anxious and depressed, less confident, more compliant and avoidant of conflict, and had lower self-esteem.

With sexual maturation comes the probability of sexual activity, which is occurring at earlier ages than in recent history. Sixty percent of males and 56% of females in Canada aged 15-19 in 1990 reported being sexually active (Lindsay et al, 1994:38). A Canadian researcher with a broad age range among her participants notes that female sexual behaviour increasingly resembles that of males. The so-called double-standard has not disappeared, however, in that *attitudes* about sex are still gender-differentiated. Although males and females may engage in the same sexual behaviour, how they think about sexuality remains different, with females demonstrating a less exploitive or more reciprocal attitude earlier (Gfellner, 1986).

With sexual activity comes the prospect of reproduction, which is essentially differentiated by gender, to the point that it is frequently reported as a female phenomenon. This is particularly so in adolescence, where childbearing often takes place outside of established relationships. For each 1000 girls aged 15 to 19 in Canada in 1991, 27 gave birth and 15 had therapeutic abortions in the country. The rate of live birth is the same as a decade earlier, but dipped in the interim years. The rate of abortion is 1.5 per 1000 lower in 1991 than in 1980. There is an age difference as might be expected. Older teenagers (ages 18 and 19) are more likely to give birth (44.5/1000 in 1991), with half again as many pregnancies (21.8/1000) terminating in abortions, whereas younger teenagers (ages 15-17) are less at risk to give birth (15.1/1000), but a higher proportion of pregnancies, two-thirds, (10.4/1000) are terminated by abortion. (Lindsay et al, 1994:44).

2.2.2 Psychological

Erikson defined the core adolescent task as establishing identity, resolving “what they appear to be in the eyes of others as compared with what they feel they are, and ... the question of how to connect the roles and skills cultivated earlier with the occupational prototypes of the day.” (Erikson, 1950:253) Although his work is deeply embedded in the first half of the century, there remains merit in the conception of the work of adolescence as finding a fit between an individual and his/her world, both social and economic. The discrepancy between what one is and wants and what the world makes available determines how difficult the developmental task will be. Those who have the resources they need to become who they want to be and to do what they want to do, and those who are satisfied

with who they are and what they can do will have the easier time of it; those who want to be more or other than they have the means to achieve will experience difficulty and frustration. Success requires both social and material resources from the external world, and, from the individual, the skill and will to solve problems. The latter we call coping, and it is this I consider in this domain.

Coping is defined as "constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person" (Lazarus & Folkman, 1984:141). It is presented in the literature as being of two general types: problem-focused — changing the problematic circumstances, and emotion-focused — changing emotional response to the problem (Seiffge-Krenke, 1993; Frydenberg & Lewis, 1993; Compas et al, 1993). Although the evidence has many ambiguities, it appears that different strategies are used depending on the nature of the problem, that ability to cope increases with age, and that girls use more strategies than boys.

Seiffge-Krenke (1993) expands on gender differences and differences in coping strategies between normal and clinical populations. She describes the clinical population as having "female" coping patterns. She found that girls in normal populations were more vulnerable than boys because they perceive more events to be stressful, were more stressed by events even after they have been coped with, and were more fatalistic and pessimistic about outcome. Whereas boys were likely to assess a situation, take an action and then forget about it, girls assessed and acted but then continued to worry. Girls relied on social relationships as part of their coping strategies, both directly (to help solve the problem) and indirectly (to give emotional support while solving the problem) but were more sensitive to and stressed by social conflicts, particularly in early adolescence. The dilemma of using social relationships as part of a coping strategy may have contributed to what Seiffge-Krenke called "counseling aversion" among adolescents with overwhelming difficulties who tended also to have had difficult relationships with their parents. Similarly, although less dramatically, Gilligan and her colleagues reported that girls in early adolescence, as their self-confidence declines with gender intensification, begin to develop a strategy of silencing themselves, censoring what they say and perhaps eventually what they think (Gilligan et al, 1990).

The medical world also identifies gender differences in prevalence and presentation of distress. In a large study of Ontario children from ages 4 to 16, Dan Offord and his colleagues (1986), as had other researchers with other populations (e.g., Rutter, 1979), found that girls tended toward internalizing conditions (neurosis and somatization) and boys toward

externalizing conditions (conduct disorder and hyperactivity). Younger girls (ages 6 to 11) had lower rates of psychiatric disorder, about half that of male peers, but in adolescence the trend reversed and the rate of disorder among girls exceeded slightly that among boys. In what may be another example of the vulnerability of coping strategies that depend on social relationships, adolescent girls were the group least likely to be perceived as in need of professional help; the rate of psychiatric disorder for adolescent girls (ages 11 to 16) was three times the rate of perceived need of help (Offord et al, 1986:6). This may be due in part to differences in how parents and the girl perceived her/herself, which was also true of other sub-groups in the study. In addition, however, the researchers identified gender differences in circumstantial stressors, specifically that adolescent girls in disadvantaged situations had domestic and care-giving responsibilities. It may be that the personal developmental work of these girls, including a recognition of distress and help with it, was subsumed in the need of their families for their contribution.

That the emotional well-being of girls tends to deteriorate at the time that gender intensification occurs suggests that girls may need more robust coping strategies and may more frequently be overwhelmed by problems because they occupy a more challenging world. Particularly in disadvantaged situations, where the community may see itself as having first call on competence and caring in order to survive, legitimizing the right of the individual to care for herself is a challenge.

2.2.3 Social

Feminist psychologists have developed a gendered explanation of adolescence that incorporates in positive terms the tendency of girls to value and retain family and other relationships more than boys. Nancy Chodorow (1978) revised psychoanalytic theory to argue that the work of girls at adolescence is to learn to be themselves within a relationship, whereas the work of boys is to learn to be intimate without losing their sense of identity and autonomy. Gilligan and her colleagues contributed convincing evidence that men tend to see the world differently than women (Gilligan, 1982, Gilligan et al, 1988), and that girls at adolescence begin to become aware of the need to communicate according to the dominant (male) perspective (Gilligan et al, 1990). Gilligan attributes much of the stress that girls feel at adolescence to a reconsideration of relationship (Brown & Gilligan, 1992), because the nature and importance of relationship is an essential difference between the perspective of justice/order by which men tend to see and name the world, and the perspective of caring, which comes more spontaneously to women. It may even be that valuing relationship is, or is seen to be, resisting the ownership model of gender relations that underlies patriarchy.

The research approaches social relationships from a multiplicity of perspectives.

Mellor (1989) finds within the non-feminist psychological literature evidence that girls are more involved in relationships, have more relationship skills, give and receive self-disclosure, and emphasize the resolution of dilemmas over the exercise of justice in decision-making. Papini et al (1990) found in an American sample that young girls in particular confided in their parents in well-functioning families, and used peers as confidants as they became self-confident. They conclude that self-disclosure is a skill learned in the family, and that adolescents from families that did not teach or value this skill were less able to use peers or other adults as resources. This is consistent with Seiffge-Krenke's (1993) counseling aversion. Israeli research found that parents who respect and support their children are used as resources throughout adolescence, and that young people who have good relationships with parents develop better relationships with peers (Shulman, 1993). There seems to be considerable agreement among the literature that the use of social relationships is rooted in childhood experience and generalizes as the adolescent moves into the larger world, and that girls value social relationships more and are more adept at them.

Getting advice does not necessarily require the same degree of self-disclosure, and therefore the gender picture changes somewhat. Peers become more important as advisors in mid-adolescence, although not in all matters and not to the exclusion of parents. The kind of advice being sought influences somewhat an adolescent's choice of advisor, but parents, and in particular mothers, are preferred by both boys and girls (Monck, 1990; Nolin & Petersen, 1992). Fathers tend not to be used as confidants. Some attribute this to their role as authority and discipline figure in the family, and while this may influence interaction, particularly in traditional patriarchal families (Yates, 1990), the dynamic is likely more complex. Terri Apter (1990) interviewed girls from 11 to 21 in Britain and USA and found that while girls liked to do special activities with fathers, confiding or arguing was clearly reserved for mothers. The girls saw fathers as inept at emotional matters, unable to engage in the intimate and complex emotional struggle for individuation within the family, and relatively unaware of what was happening in the adolescent's life. Many "managed" their fathers by withdrawing emotionally and sometimes physically, particularly if they saw him attempting to take control. Even fathers who had been very involved with young children were distanced from their daughters at adolescence (Apter, 1990:66-75). Interestingly, boys in families in which fathers were actively involved parents were more able in adolescence to develop warm and expressive relationships with girls (Cooper & Grotevant, 1987).

Peer relationships are central to the adolescent transition. The general pattern is understood

to progress from large same-sex groups isolated from each other in early adolescence to group-to-group interaction to mixed-sex cliques to courting dyads. Within groups, smaller groupings and dyads exist, particularly for girls, whose social life tends to be in the private sphere, whereas boys are more public and more likely to be involved in organized sports and events (Coleman & Hendry, 1980:113). This tendency is wide-spread and is often presented as if it were a 'natural' expression of gendered social preferences. At a time when identity is defined in large part by the social group to which one belongs, however, the unequal availability of organized social opportunities may play a role in differentially developing skills. Frydenberg & Lewis (1993) suggest, from the Australian reality, that girls may not use participation in sports as a way to cope with stress, as boys do, because they lack access. Similarly, a Canadian study found that the personal and social development of girls was enhanced by involvement in organized sports, but that strong social forces limit and deny this opportunity (Varpalotai, 1996:94).

In any case, regardless of gender, the lack of organized social activities makes peer group membership a much more difficult task. Organized social activities provide structures that bring youth together and allow, even encourage, relationships that are not dependent upon personal connection, and mediates entry and exit and interim placement in the group, whereas the lack of structured social activities renders group development and management a matter of sifting and sorting personal relationships, an onerous and risky undertaking. The provision of organized social activities may be not just a way to keep adolescents busy and out of trouble, but essential to their social development, and in the case of disadvantaged youth, their only hope for social mobility.

With maturity, intimacy and reciprocity becomes more important, earlier for girls than for boys (Youniss & Haynie, 1992). Perhaps the biological clock ticks more loudly in the ears of girls (Greene & Wheatley, 1992), with the notion, warranted or not, that motherhood subsumes personhood (Lees, 1993:114-134). Although girls have a head start at confiding relationships, Cooper & Grotevant (1987) found that by completion of high school, boys and girls share expectations about friendship and dating. This may not be the same as equality in interpersonal relations, however. Social relationships have a cost as well as a benefit, in that reciprocity is expected (Phoenix, 1991), but it may be that the pricing structure, so to speak, is gender-differentiated. Moran & Eckenrode (1991) found that adolescent males gained more and paid less for peer support. Youniss & Haynie (1992) found that girls are more likely to be confided in by both male and female friends; perhaps there is a different cost in confiding than in receiving a confidence. In any case, the idea of equality of social skill and motivation between the genders contradicts the position of the girls Apter

interviewed, as well as the young women in Lees' study (1993), and the young mothers in Phoenix's study (1991). One might conjecture that, like the attitudinal differences toward similarly described sexual relationships that Gfellner (1986) reported, similar statements of interpersonal expectation may not represent the same behavioural reality.

Intimate relationships in adolescence may offer an opportunity to redress deficits in earlier socialization. Quinton and Rutter (1988) found that young women raised in institutions were more likely to do well as adults if they married men with whom they had a positive confiding relationship. Many of the women deteriorated markedly if the relationship ended, suggesting that intimate relationships may be supportive, but not necessarily reparative (although the authors do not discuss material conditions that might influence outcome). Men raised in institutions were also positively affected by good marriages, but they were more likely than the women to find a good partner, and without planning to do so, whereas for women the capacity to plan to meet and marry a 'good man' was crucial to that outcome (Rutter et al, 1990). That positive marriage is a protective factor was confirmed in a larger study of socially disadvantaged adults who had not been raised in institutions. The researchers hypothesize that the mechanisms which determine marriage to a socially deviant partner are highly gendered and involve a number of social factors, including homogamy (the tendency for those who are alike to associate), a high rate of deviance within the field from which partners are most likely to be chosen, the lack of qualities that would attract someone "better", the inability to discriminate quality of partner because of immaturity, the inability to recognize opportunities or alternatives, the inability to make effective choices (i.e., poor planning skills), and the lack of good advice or presence of bad advice (Quinton et al, 1993:766).

Individuals who lack the social resources we tend to expect from family and community may look to find them elsewhere. Those who have retained or regained the capacity for relationship in spite of the failure or disappointments of early relationships may locate or create substitute helpers, such as mentors. Rhodes et al (1993) found that adolescent single mothers in inner-city America who had self-selected mentors were less depressed and anxious, used other social resources more effectively, and had enhanced coping skills. They found that the young women who had mentors were more likely to have had a positive relationships with their own mothers. Thoits (1986) suggests that assistance may be more welcome if the helper is empathic, is seen as coming from circumstances and having experiences consistent with the expression of empathy, and can provide both problem-focused and emotion-focused support. This suggests the possibility of providing peer mentors who are trained and supported in being helpful. Other researchers recommend the

use of non-relational techniques such as teaching social or other life skills that avoid the issue of relationship difficulties (Rice et al, 1993; Compas, 1987). Much remains to be learned about adapting what is known about natural support networks to the design of alternative sources of assistance.

2.2.4 Economic

Erikson (1950:253) included preparation for adult productivity as a core element in the work of adolescence, and it was clearly gendered: boys prepared for a vocation and girls to be wives and mothers. While this view reflects his time and place in society, it is still salient as a social template. But there has been a sea-change in the work world: the social contract for a living wage has been annulled; women are in the paid work force throughout the family cycle; the amount of education required to get and maintain adequate employment is escalating; and the means and motive to postpone reproduction, and to correct 'mistakes' when they occur, are generally available. Establishing a vocation is now a complex and life-long task for the individual, to be undertaken with diminishing public support and escalating pressure on private resources to bridge the gap between the necessary and the available.

Canada initiated a social support net in the prosperity of the years following World War Two. The intent was to prevent the devastation of economic depression, such as the country had experienced in the 1930s, and of war rooted in oppression, such as they had experienced in the second world war. The cornerstone of the social contract was the so-called living wage, a rate of pay that allowed a man to support his family, honour his social obligations, and pay taxes to finance the construction of a social support net to transfer resources so that all had the means to live a decent life. The living wage is no longer a hallmark of the Canadian work situation, and the social support net is seriously eroded. This is the work world Canadian adolescents now enter.

The Canadian economy, along with that of the rest of the industrialized world, has moved to a service economy, a bifurcated work world with jobs that required extensive education and offer excellent remuneration at one end, and at the other end, jobs that offer part-time, temporary and poorly-paid work with no future (Krahn, 1991). Employees at the bottom end of the service industry, even if employed full-time and year-around, an improbable scenario, would not earn enough to meet the poverty level established by Statistics Canada. Youth are likely to fall into this end of the employment spectrum, for a variety of reasons: they have not yet acquired adequate education or experience to qualify for good jobs; higher educational requirements and the escalating cost of education means they will likely need to combine work and study for a prolonged time, which reduces their employment flexibility;

and they are in active competition with others who have been jettisoned from their place in the work force or are seeking to enter the work force to replace or augment others in their economic unit who are not (or are no longer) competitive. Youth (ages 15-19) have had the highest unemployment rate in the country for two decades, about 20% of the two-thirds of the population of that age who are attached to the labour force. Stable seasonal, geographic and gender patterns are evident (Best, 1995).

Gender is an increasingly important factor in the labour market. Women have joined the work force in ever-increasing numbers, while men have slowly left it, so that women now constitute 45% of the labour force (Ghulam, 1993). Women as a whole tend to be disadvantaged in the labour force, in that they earn less than their male counterparts, although the gap is decreasing as more and better-educated women join the work force; they hit the earning ceiling earlier, especially if not well-educated (Best, 1995); and they are more likely to work part-time, perhaps in order to accommodate family and domestic responsibilities, which fall unequally on their shoulders (Jackson, 1996; Devereaux, 1993). Since 1990, when men's wages started to decline, the only families who have kept pace economically are dual-earner families (Foot, 1996; Rashid, 1994; Glossop, 1994). It has become increasingly necessary for women to join and remain in the work world throughout the family cycle to sustain the status quo. Perhaps in response to this reality, the proportion of women attending post-secondary education has risen sharply in the last twenty years. This puts them at an advantage for the job market that is evolving, in which it is estimated that two-thirds of new jobs in this decade will require at least 13 years of education (Sunter, 1994).

There is a huge emphasis placed on education as a means of qualifying for 'good' work. Youth who leave school without a high school diploma are almost certainly disqualified from the labour force. A large telephone survey conducted by Statistics Canada (Gilbert & Orok, 1993) found that 18% of 20-year-olds in 1991 left school before achieving qualifications, almost one-fifth of them before they reached age 16, the legal age for leaving school. Boys were more likely to leave earlier than girls and more likely to have failed a grade. While the researchers found the kinds of differences one might expect between early leavers and school graduates, such as early leavers having poor school performance, a dislike of school or teachers or a sense of not belonging, pre-occupation with paid work, alcohol or drug use and criminal involvement, they note that the *majority* of early leavers did not have these characteristics. Rather, the crucial factor in early leaving appeared to be family circumstances, in that living in a single-parent family and leaving school early were associated, particularly for boys. Almost one-third of youth not living with either parent left

school early. Although pregnancy was cited as the reason for leaving school by only 9% of the girls, 27% of female leavers had dependent children by age 18-20. A similar number received welfare, compared with 10% of those who graduated.

This study does not give direct information about employment, but it could be said that the 27% of girls who had babies had found jobs parenting for which they were paid through receipt of welfare. Reproduction and child-rearing, although it produces the human capital without which the economy, and society in general, could not continue, is not valued in the same way as the production of other resources. It, as well as other family work, is increasingly a private rather than a public obligation (Müller, 1991). Life-course theorists (for example, Quinton & Rutter, 1988) see early child-bearing as a constricting factor, inasmuch as it prematurely closes off opportunity to prepare for a productive adulthood, which is achieved either directly through education and employment, and/or indirectly through gaining access to a pool of successful (i.e., educated and employed) people from which to select a mate. Phoenix (1991), however, argues that parenthood may not be perceived as a liability if the parent has already completed his/her preparation for adulthood. If parenthood delivers adult rights that are not otherwise available, such as having one's own home and managing one's own finances, it may be seen as an asset. If the individual has the resources she needs to manage the responsibility well, it may in fact *be* an asset.

Youth who don't do well in the education system may complete their preparation for adulthood early in adolescence. Offord et al (1986) suggests that girls from welfare-dependent families and subsidized housing may attend poorly at school because they are expected to help their mothers with domestic and child-care responsibilities. It may be that becoming a parent is, at base, a way of getting paid for a job very similar to the one these girls are already doing without recognition or remuneration. If girls can't see themselves competing successfully in the work world, they may reasonably opt for a job for which they have qualifications and often experience, i.e., child rearing. If they lack the resources to meet and marry 'good' economically viable men, they may reasonably prefer the option of support through welfare. The availability of welfare to women as mothers may indeed render economically non-viable men irrelevant in private family life as their unemployability does in the public world. Of course, males who are not economically competitive may have skills other than those the labour market rewards with employment. They could, for example, contribute to unpaid labour as women do in their traditional domestic role. However, it seems improbable that unemployed men would contradict the general trend and embrace a larger share of domestic labour.

Overall, it appears that the economic world is being taken over by women, that without divesting their private obligations they are expanding their public roles into what was traditionally the venue of men. The trend is rooted in childhood and becomes evident at adolescence: girls perform better in school, enter the work force earlier and in greater numbers, and are gaining ground in earning capacity. Meanwhile, they continue to do the bulk of unpaid domestic work, they continue the physical work of bearing children, and they continue to be more likely to qualify for state 'pay' for their parenting work. The changing nature of paid work has improved the fit of women with the jobs available and significantly re-gendered employment, without a corresponding change in the gender of private family and domestic work. The traditional world of men is well into obsolescence — except as social advantage protects it, as it always has. The capacity or willingness to extend the mantle of protection to the gender as a whole appears to be waning, and the relative importance of class over gender is increasingly evident. This means that *among the disadvantaged*, being male increases vulnerability, and being female is a protective factor, if only because they have increased access to both private and public productivity.

2.2.5 Political

I am defining 'political' in this domain as the exercise of personal power in the world. The theoretical literature holds this to be an essential element of growing up. Erikson considered the work of adolescence to include the resolution of the problems of "ideology and aristocracy", ethics and leadership, establishing how "the best people will come to rule and rule develops the best in people." (Erikson, 1950:254). On this foundation is built the capacity to partner (step six) and parent (step seven), and the extension of personal parenting that he calls generativity, "the concern in establishing and guiding the next generation" (Erikson, 1950:258). From a less hierarchical perspective, Paulo Freire considers "that man's ontological vocation (as he calls it) is to be a subject who acts upon and transforms his world" (Freire, 1972:12). The feminist perspective holds that the personal is political, by which they mean that power relationships in the world exist and are manifest in individual experience, and that social change is the result of exposing and changing power relationships in everyday life.

The empirical literature that uses the terminology of politics tends to focus on organizational structures and voting behaviour, which casts a much broader net that does not necessarily include the element of personal agency, which is where these three perspectives converge. Measuring personal agency is not an easy task. Agency exists — or fails to exist — at the individual level, it includes both mental and physical activity, and it implies intent based on values. To define the intent of an act without consulting with the actor is an act of

oppression, what Freire would call cultural invasion, imposing one's view or analysis of the world on another (Freire, 1972:121-135). This is the criticism leveled against positivist enquiry and androcentrism. It is also, interestingly, a common complaint of adolescents about parents and other authority figures. But it is not humanly possible to not have a world view, so how can discourse avoid being oppressive? Freire proposes dialogue among equals, focused on the reality they share, for the purpose of change. He speaks of this process as naming the world (Freire, 1972:60-61), because dialogue with others to come to a shared understanding of the world that mediates them is to change it by that understanding.

Some sociologists would agree with Freire that the naming of the world creates it. Social constructivists argue that reality is created in discourse between individuals: reality is whatever they agree it is. Ken and Mary Gergen, (1983, 1988) argue that identity is a social construction that is created and recreated by the telling of self-narratives. Public narratives create a social identity that is limited only by credibility: an individual is who/what s/he says s/he is to the extent that s/he is convincing. Consistency over time and the 'thickness' of the narrative (that is, the inclusion of mini-narratives that support and embellish the maxi-narrative) add credibility in the external world and stability in the internal world, which is what Erikson would call identity. In this way, the individual becomes, quite literally, the author of his/her own transitional process. In its simplest form, this might mean talking oneself step by step through a challenge. In a more complex form, it could be Freire's ontological vocation.

If the telling of narratives is a normal way in which identity is established and re-established, an exercise of agency that is in direct support of the process it describes, it is a very user-friendly approach to researching the political work of adolescence. Can one assume that adolescents have had sufficient opportunity to develop the skill of narrative, so that the medium doesn't exclude participation? Belenky (1986) and her colleagues have demonstrated a spectrum of voice among adults, a progression in the extent to which one owns one's words, that establishes that the ability is not universal. The challenge to the researcher is to find ways to expand the range of individuals who can narrate. Within feminist research and to some narrativists, the commitment to give voice to the marginalized and the muted is explicit. Those who have unmasked androcentrism in traditional and positivist science have drawn attention to the silenced voice. For example, when Gilligan (1982) heard and reported girls saying that they were being asked the wrong question in a moral development instrument, she was making room for the young female voice. Dorothy Smith (1987) in requiring sociologists to place themselves within the worlds they studied and

to study the world in which they were placed, including their experience within patriarchal institutions, was making room for the full voice of the researcher. Ken Gergen, in suggesting that self-knowledge is only possible through self-narration, and that "the inarticulate and linguistically undifferentiated individual...requires attention." (Gergen, 1989:76), is calling for new voices. Belenky and her colleagues (1986) reported on the silenced and the echoing among the women they studied. Catherine Kohler Riessman (1993:4), who believes that life events are mastered through narration, calls specifically for voices from transition and trauma. These and others evidence a commitment to support the silenced to name their world in order to change it. In so doing, they articulate a political role for researchers and theorists, and for those on whom the research focuses as participants.

2.2.6 Spiritual

Part of the work of adolescence is ethical development. According to Piagetian theory (Beard, 1969; Coleman & Hendry, 1980:36-39), as children develop the cognitive capacity for formal logic and therefore are able to hypothesize and generalize, they may, with larger exposure to the world and the increasing need to exercise personal agency, reach the higher levels of ethical reasoning characterized by generalized, abstract principles that define right and wrong. Sometimes in life, however, conditions exist that contradict the code of ethics but can't be understood through logic and can't be corrected by intervention: they can only be accommodated by accepting their existence as if there were a reason that at some point might become evident. This is the sphere of what I am calling spirituality, the personal acceptance of some life circumstances as inevitable and unchangeable, as if they were determined by a higher force.

I could find very little literature that addresses spirituality defined in this way. A large Canadian study reports that youth differentiate between organized religion and spiritual issues, which the researchers define as the "areas of life that the gods have historically addressed." (Bibby & Posterski, 1992:53). They postulate that there is a stable volume of spiritual interest among youth that finds non-traditional expression when traditional routes (e.g., organized religion) are unacceptable, as they now seem to be.

I maintained a vector in the mandala for spirituality because I had anecdotal evidence from my practice and my personal life to indicate that spirituality is important, particularly when life circumstances are difficult and inexplicable. It needed to be separated from the general disparagement of organized religion, which is and has been intimately involved with the delivery of social services and is now being tried in courts across the country for physical, sexual, and emotional abuse of children delivered by the state into its care. At a time when

the traditional structures are being exposed as fraudulent, perhaps even evil, it seems important to be open to registering spirituality wherever and however it may express itself.

2.3 THE IDEAL OUTCOME OF ADOLESCENCE

The creation of the mandala was an attempt to picture the work of adolescence holistically, to include all the areas that I thought needed to be known about in order to do the job well. In imposing this structure, I exposed my values. The task of fitting the literature into the mandala clarified my view of what I held to be important, because my values determined what literature I included and how I used it. Initially I expected to learn about adolescence from the literature, but what I gained, in the end, was an expansion and an affirmation of what I know about adolescents, and the confidence to construe it into a generic vision about the work that joins childhood and adulthood.

My belief is that adolescence is a developmental stage at which the individual has the capacity to reflect on the childhood that was imposed on him/her and to pose as a problem to be solved the acquisition of a chosen adulthood. The developmental question is: Given what I've come from, how can I be/become what I want to be? This is not the first or only time that the individual may ponder such a question, and indeed an individual may avoid doing so over his/her entire life, but it is socially accepted as an overarching question during the transition between childhood and adulthood, coincident with physical maturation. It is, at base, the assumption of responsibility for articulating and achieving an outcome in life.

The mandala suggests three outcome arenas, with two sectors included in each. Each outcome resides in a different social configuration. The ideal outcomes, as I see them, are as follows:

- With respect to the physical and psychological development of adolescents, I hold as ideal that they live well in their bodies under circumstances that are bearable; and that they value the diversity of gender, culture, endowment and experience.
- With respect to the social and economic development of adolescents, I hold as ideal that they live well in the communities in which they find themselves, balancing what is needed and what is available; and that they value holism, interdependence, the intangible and the unremunerated.
- With respect to the political and spiritual development of adolescents, I hold as ideal that they live well in the global world, exercising praxis continuously; and that they value the balance between what can and should be changed, and what must be accepted as inevitable.

These are the ideals that guide my interactions with adolescents in this research, as well as elsewhere. They are my goals for adolescents for whom I have responsibility, whether directly through an accountability relationship, or indirectly through my civic duty to the society and community in which I live.

2.4 SUPPORTING GROWING UP

If the task of adolescence is to articulate an intended outcome, a goal, it seems reasonable that those who support the work of adolescence should also articulate their goals. As any parent of an adolescent knows, the task of supporting youth in their work of growing up is not easy. There is necessarily a tension between the goals of the youth and the person(s) helping him/her, if only to define who does what in order to achieve a common goal.

Although the nature of support/parenting changes as children become adolescents, it does not end. The primary change is that the supportive function becomes more public as the child ventures into the larger world, and more broadly shared as adolescents incorporate helpers and advisors beyond the family, invest more time and energy in peers, and move toward locating themselves socially and economically in society and creating the next generation. Adolescents who are raised in child welfare care, the population on which this research focuses, move early and precipitously into being publicly supported. One might expect that the state would incorporate into its support role what is known about addressing the normal needs of adolescents, as well as repairing any damage or addressing any deficits that might result from their history before coming into care, their experiences while in care, and the special burden of being parented in public.

This might be made explicit either as a statement of parenting philosophy or of desired or expected outcome(s). Aside from a general statement about acting in the best interest of the child, the legislation governing child welfare does not include a statement of parenting philosophy. I spent several days in the Ontario Archives searching for an indication that someone somewhere during the two-year consultative process that preceded the last major change in child welfare legislation in 1984 had articulated the intended outcome for children who came into care and stayed there until emancipation. I found nothing.

This silence seems at odds with the way in which society in general holds parents responsible for how their children 'turn out', and in sharp contradiction with the perception of natal responsibility that justifies child welfare legislation. It is an inexplicable oversight of

human rights to not examine publicly and in detail the eventual outcome of an intervention that creates such massive social disruption, for the child and its parents, as well as for the community that is buffeted by the child welfare process at every stage. It is also difficult, if not impossible, to assess the efficacy of intervention in the absence of articulated expectations, a problematic oversight as the state increasingly justifies its activity on the basis of economic accountability.

One could argue that parenting is only adequately measured over the long term, long after the individual has moved beyond the child welfare mandate, and thereby excuse the legislation from including outcome expectations. Similarly, since the rationale for child welfare intervention is to correct a life trajectory that appears problematic in childhood, one could argue that child welfare responsibility ends with the resolution of childhood problems. Extended to its logical conclusion, one could then say that removing the child from the situation deemed problematic as defined by the legislation is itself the expected outcome, and that whatever occurs thereafter is outside that accountability structure. For whatever reason, there is a notable absence where one would expect the articulation of a goal to be.

This is not an insignificant oversight for individuals who are emancipated into adulthood from child welfare care. The literature on the adolescent transition raises two questions that may be addressed in the literature on youth leaving child welfare care, which is the subject matter of the next chapter: What are the outcomes for children/youth raised in care? What is the relationship between what is known about the transitional work of adolescence and the philosophy and practice of care-leaving?

CHAPTER 3: YOUTH LEAVING CARE

In this chapter, we will consider the literature on youth leaving the child welfare system with a view to refining and informing my study questions and design. My focus is on youth leaving child welfare care because of chronological age, with no illusions that the problems that brought them into care have been eradicated sufficiently for their former family life to resume, but rather with the recognition that the child welfare mandate has or is about to run out and that, ready or not, the youth is to be declared adult and independent. This is variously called emancipation, aging out of care, independent living, or in the lead-up phase, preparing for independence. Some youth in some jurisdictions are offered extended care, a financial and/or counseling support package beyond the expiration of wardship, in an effort to attenuate the emancipation process. While I think that the use of the word 'independence' reflects and/or promotes a basic misapprehension of the care-leaving process, I use it in this chapter as researchers have used it.

The term leaving care is variously used to indicate either the point at which the youth leaves child welfare facilities *or* the expiration of wardship *or* the closing of the file when extended care ends. For some individuals, the administrative and human events are simultaneous: they leave child welfare facilities to live 'independently' in the community without child welfare support on the date wardship ends. Others move into the community while still wards (independent living) with child welfare support, and others receive support (extended care) after wardship ends and after leaving child welfare facilities. Supports vary in nature and intensity and may or may not be part of an organized care-leaving support program. The functional definitions of these elements of care-leaving are crucial in discussing the research literature.

Most researchers include data on the placement of youth while in care, often called their care career. This is the notion, borrowed from criminology, that life course is determined by the interplay among choices made by individuals and those who exert influence or control on them, within the structures that mediate them (Cole, 1995). Because it is conceptualized as a bilateral negotiation, the career in care is taken as a measure of the personal characteristics of the child or youth. Whether this is warranted is questionable on both conceptual and empirical grounds. Conceptually, it assumes a level playing field and equal access to choices that is often precluded by law in child welfare. Empirically, Roy Parker (1988) has demonstrated that many factors other than the characteristics or needs of the child determine placement decisions. Nevertheless, youth are often described as having come from foster care or group care. Sometimes legal status is included — voluntary care,

temporary versus permanent wardship, and post-wardship care — which may be associated with placement. Involvement with the juvenile justice or mental health system also has implications for placement, and this factor is variously treated in the literature. In some studies, juvenile justice involvement subsumes wardship, and other times, or if it excludes incarceration, it is disregarded. To complicate the situation further, these decisions are often not made explicit.

Nevertheless, care career is one of the few broadly comparable elements available, and it has been useful in focusing attention on the residual nature of the care-leaving support function. That is, regardless of care career, youth must leave the child welfare system at or in anticipation of a chronologically-determined point, and the task of bridging the gap between what is required for survival or success and what the individual youth has is relegated to preparation for independence programs or care-leaving schemes, or in their absence, the community at large. To the extent that the rationale for research is the measurement of outcomes as an indicator of the need for or quality of care-leaving support, a before-intervention measure of the youth's functioning is essential, and care career may be the best currently available. I include care career in this discussion as it is used by researchers, although I do not accept placement history as an adequate or accurate way to classify youth.

The research literature on Canadian youth leaving child welfare care is limited, and insufficient for an effective review of what is known. In child welfare, as in many other areas, we Canadians tend to interpolate ourselves within the British and American reality, building our knowledge of ourselves on borrowed foundations. I approach the literature in that spirit

3.1 AMERICAN RESEARCH

Edmund Mech (1994) gives a history of attention in the United States to child welfare emancipation issues. He credits Wiltse (1978) for first drawing attention to the need for independent-living programs for youth leaving child welfare. In 1983, a federal document on the matter was circulated, and in 1986, independent living legislation was introduced. In 1989 the Child Welfare League of America published standards for independent-living service, and in 1993, the right to such service was permanently enshrined in federal law and funding made available. The question of efficacy followed: did the intervention improve the outcome of youth formerly in care?

The existing literature on care-leaving was limited. Because child welfare and many related

services in the USA are within the jurisdiction of each state and delivered through a mix of public and private organizations, much of the research related to a particular geography and political/economic situation, making generalization difficult. It tended also to focus on the in-care or care-leaving experience rather than forward to outcomes. The notable exception is a large-scale study of young people discharged from care in New York City conducted by Trudy Festinger (1983). The methodology addressed the complex issues of defining what constitutes a good outcome, when and how it could/should be measured, and how individual differences in capacity and life experience should be included.

Festinger's study population was all youth who were discharged from care in New York in 1975 between the ages of 18 and 21 and had been in care continuously for the previous five years. From this population of more than 600, her team was able to locate 421 case records and engage 70% of them, 277 individuals, in a personal or telephone interview or mailed questionnaire. Data were collected in 1979-80, when the respondents were 22 to 25 years of age, with a mean age of 23. Festinger became curious about the next life phase and later added a comparison group of 77 individuals who had left foster care from some of the same agencies five years earlier. She also compared her respondents on some variables with others of the same age, race and gender, using data from a national survey.

Overall, Festinger found that her respondents fared rather well. The protocol included three measures of well-being, and based on aggregated responses, she concluded that most were satisfied with their lives. The elements she identified as important, which were intertwined in their impact, were community engagement (i.e., housing stability, knowing neighbours, organizational membership and adequate physical surroundings), social connectedness (i.e., number of friends and satisfaction with the relationships), and a spiritual life (i.e., religious affiliation).

Well-being was generally not related to factors in the past but to current circumstances. The difficulties identified were educational, particularly for males, which led to employment disadvantage. A sense of well-being was associated among males with employment and among females with education. Females tended to be better educated than males, and those from foster care better educated than those from group care. Females from foster care, although the most advantaged group, were most dissatisfied with their education.

Social relationships were more important to females than males. The vast majority of respondents, 96%, said they had someone to turn to, and more females than males said they had a lot of people. Festinger explored contact with biological family, including siblings,

as well as foster families, and found a very complex relationship between closeness, frequency of contact and sense of well-being, as well as with care career elements.

Partnering, particularly in the absence of children, was associated with well-being with females but not males. Parenting seemed less satisfactory as a social connection. Rates of terminated pregnancy were high (35%), and 47% of the women had children, giving birth at a mean age of 20.5 years. Most mothers (96%) were parenting their children, 57% were living with partners, and 31% had never lived with a partner. Only half of the 29% of the men who had children were living with them. Neither marriage, partnering nor parenting were associated with well-being for men.

The older population that Festinger studied, who were a mean age of 28 at the time they were interviewed, were quite similar to the younger group, except that they were further along in the life cycle and somewhat more settled. In comparing both of these groups with the general population, she found they were

- less likely to be married, 37% compared to 15% (with white females from foster care most closely resembling their cohort), but equally likely to have children,
- more disadvantaged educationally if male (and particularly if from group care),
- less likely if male and white to have a college degree, but more likely if a black woman,
- equally employed if male and white (but only 68% of black males compared to 93% in the general population were employed),
- likely if a black woman to have a better income,
- more likely to be seeking employment if female and white,
- not over-represented on welfare, even at times of high vulnerability,
- equally as healthy as the general population, and
- reporting well-being equal to the general population, except for whites from group care.

Overall, independent of their satisfaction with the care they received, most respondents, 83%, felt they were lucky to have been placed in care. According to file data, one-third of Festinger's respondents were discharged with "serious problems", but 48% came without serious problems and left without them. She questions the easy assumption that the difficulties youth in and from care face are psychological, suggesting that they are very likely practical, including first and foremost, an inadequate attention to education. Festinger concludes that the wide-spread pessimism about outcome for children raised in care is unwarranted. Nevertheless, the care experience could be improved, and she crafts from participants' suggestions a variety of recommendations for changes in practice, many of which required few additional resources.

While there is little question in my mind that Festinger got a good measure of the elements she was looking for in the population she studied, her positive results also reflect the sector of the in-care population on which she focused. She accessed young people who came into care early (94% under the age of 12), had reasonably stable care careers, and managed well enough in the system to stay until wardship lapsed (34% of the sample left care at 18) or longer (20% stayed to within 9 months of turning 21). Less than half of the study population were located and agreed to participate, and participants were apt to be among the most stable and socially connected. Nevertheless, her study is invaluable in demonstrating the necessity for direct study of youth after emancipation, even if the task of locating them is discouragingly difficult, time-consuming and expensive; to consider them a valuable source of wisdom, and to hear them on issues they consider important as well as on the subjects that researchers had pre-determined to be important; and to differentiate between the impact of external (circumstantial) and internal (psychological) contributions to outcome.

A second large study builds on Festinger's foundation. The Westat study (1991), conducted by Ronna Cook and her associates, is a very large and meticulously designed nation-wide study intended to establish the relative efficacy of different components of independent living programs funded by the federal government. They used a multi-stage stratified design with probability sampling to establish selection at the level of state, county and individual youth, identifying 1644 youth weighted to statistically represent 34,600 youth age 16 and over discharged from foster care over a 19-month period in 1987-88. A population profile was derived from file and agency staff information. A majority (56%) were female (the converse of Festinger's study, in which 58% were male), and the median age was 21. Most (70%) entered care as adolescents and were in care for a median of 2.5 years; those who entered care before adolescence were in care for a median of 9 years and were likely to be male and member of a minority group. An astonishing 47% of the study population were considered handicapped, which included clinical diagnosis of learning and developmental disabilities as well as physical disabilities.

In spite of a veritable army of well-resources and trained tracers and access to case files and some governmental information, slightly less than half the sample, 810 individuals, were located and interviewed 2.5 to 4 years after discharge. (Cook echoes Festinger in describing the difficulty and cost of locating youth post-discharge, and the high rate of participation once located.) Findings were statistically manipulated to correct for the effect of non-response, which from comparison of file data was found to be primarily those who left care early and without independence training, in particular states.

The youth were interviewed in a 5-month period in 1990-91. Regression models were applied to the data to establish relationships between eight indicators of positive short-term outcome with longer-term implications (able to maintain employment for a year, graduating from high school, ability to access health care as needed, not being a cost to the community, avoiding young parenthood, having at least one important relationship, being generally very happy with life, and an overall measure consisting of the sum of the other seven) and five measures of skill training (none versus any, existence of training in each of 12 categories, and three variations on multiple skills training, i.e., a continuous measure of training in 23 skills, 10 skill-set clusters, and 5 skill-set clusters measuring proportion of training).

Overall, Cook and her colleagues found that youth leaving care did not do very well, in that

- 54% completed high school
- 49% were employed when interviewed
- 38% had maintained employment for a year
- 40% were a cost to the community (i.e., received welfare, medicaid, were in jail) at time of interview
- 60% of the women had given birth to a child
- 25% had been homeless for at least one night
- 17% were completely self-supporting
- median weekly salary was low (\$205/week).

With respect to education, young parenthood and use of public assistance, youth from care resembled youth 18-to-24-years old living below the poverty line more than they did that age group in the general population.

Cook and her colleagues found that independence skill training was most effective if it was targeted toward a specific outcome and offered in combinations. They did not find routine generic preparation for independence training, which they report to be a common approach (as it is in Canada), to be effective. The skill cluster most related to positive outcome were credit, consumer, budget, education and employment skills, that is, practical skills directly involved with managing current circumstances. Many youth reported receiving more training in other areas, in particular home management skills and socialization skills, that were not associated with positive outcome as it was measured in this study. Not all youth were equally likely to receive independence training: youth who had a high school diploma, worked while in care, or came into care because of abuse and neglect were more likely to receive training, whereas those with chronic health problems were less likely to be offered training. About one-third of the sample received no training at all. High school graduation was

associated with better outcome whether or not the young people received independence skills training.

Three outcomes were not affected by training as measured in this study: early parenthood, educational status after discharge and having a social network. Furthermore, parenthood was not necessarily seen by the participants as a negative outcome, even though young mothers fared less well on cost to community variables than other young women. The researchers report that "for many of the young women, having a child to care for is the most important aspect of their lives." (Cook et al, n.d., xvi). Females who became mothers were likely to have entered care in early adolescence (ages 13-15), whereas females who were not mothers entered either earlier or later. Females who became mothers were more likely to have a problem with drugs, to have had multiple placements in care, and to not be permanent wards. Females with emotional problems and handicapping conditions were less likely to have a child.

With respect to education, 54% of the youth had graduated high school before being discharged, a proportion similar to those aged 18-24 living in poverty (53%) and significantly less (78%) than the general population of that age. Primarily because of financial limitations, only a small proportion of youth, 30%, continued education after discharge. There were no gender differences in high school graduation among youth from care, nor between white and black youth.

Respondents were rated for having concrete (practical) and emotional support networks and for the number of people with whom they had a close relationship. Contrary to the perception of social isolation among youth leaving care (although 14% said they had no one with whom they were close), 60% reported strong concrete support and 57% strong emotional support. Extended family was the most frequent living arrangement at discharge (54%) and at the time of interview (38%), and an additional 10% stayed with foster family following discharge. This is quite different than Festinger's participants, of whom 5% lived with biological family and 12% with foster families.

Not surprisingly, youth who had emotional problems, drug problems, chronic health problems and physical and mental handicaps were overall less likely to have positive outcomes, even though they were more likely to have received training. Most youth reported good health, although 30% of those who needed health care said they were unable to get what they needed because they lacked money and/or health insurance. (Unlike Canada and Britain, USA does not have universal publicly-supported health care.) The respondents reported rates

of alcohol or illegal drug use equal to or lower than that of the general public of their age (which the researchers conjecture may be an artifact of under-reporting). Half of the post-discharge legal involvement reported was related to alcohol and drug use, but only one-quarter of the respondents reported having been involved with the law, and only 4% were incarcerated at the time of interview. (Youth adjudged delinquent were excluded from the study population.) The researchers calculate this proportion to be similar to the age cohort.

It is interesting to conjecture why Festinger could conclude that her research participants had relatively good outcomes and Cook, a decade later, could not. Festinger's population was limited to New York City and environs, whereas Cook's population was selected to reflect the national composition. Festinger, by not including early leavers and temporary wards, may have excluded from her population those at higher risk for poor outcomes, whereas Cook statistically corrected for under-representation within the study population as defined. Cook's sampling frame included early leavers and temporary wards, but in excluding wards in facilities other than foster homes and delinquents, she may also have excluded those at high risk for poor outcome, particularly in a country in which rates of incarceration are high.

Perhaps a decade of political and economic neo-conservatism made it more difficult for individuals faced with emancipation to cobble together an adequate outcome in the 1990s than in the 1980s. Although both samples had similarly low rates of high school graduation at discharge, Festinger's sample were twice as likely to get further education (59% compared to 30% of Cook's participants). Festinger's sample were more likely to be employed at the time of the interview and the gender split was more marked (Festinger: 75% male and 55% female, overall 65% employed; Cook: 56% male, 43% female, overall 49% employed). Festinger's sample was likely to be on welfare (10% males, 34% females compared to 32% males and 45% females in Cook's sample). Festinger's sample was less likely to become young mothers (47% compared to 60% in Cook's sample). A similar proportion were likely to be married or living as married (42% of Festinger's sample and 39% of Cook's sample). A much higher proportion of Cook's sample lived with extended family, which may reflect that they had a shorter stay in care or that there were fewer alternatives available, or a combination of these and perhaps other factors. In any case, the receipt of independent living skill training to which Cook's population had a legislated right seems not to have advantaged them relative to Festinger's population who preceded this mandate. The measures researchers use define what a good or expected outcome for youth leaving care is. In the American studies, success is defined by economic viability and social connection leading to general satisfaction with life. The comparison of Festinger's study participants with the general population suggests gender and race differences in acquiring

the means to economic viability, with black women improving their possibilities, white men holding their own, white women failing to achieve their aspirations, and black men, although more likely to have been in care throughout childhood, being disadvantaged. Cook's study participants at best achieved parity with a cohort living in poverty. With respect to social connection, Cook's study specifically excludes parenting as a positive connection, although she notes the positive valence given it by the participants. Connection with biological family is central but ambiguous: it may have become the favoured alternative for Cook's participants only or largely because of the loss of other options over the decade. The third element, satisfaction with life, is a particularly interesting outcome expectation, given the limited success in the other two areas. It may imply a requirement of gratitude for what has been attempted, regardless of what has been achieved, or it may suggest that the purpose of child welfare intervention is to quell social unrest, particularly at adolescence, the age at which 70% of Cook's participants came into care.

3.2 BRITISH RESEARCH

Unlike Canada and the United States, child welfare in Britain is delivered under a single legislative mandate and through a common system, the 'local authorities'. This structural consistency supports a focus on care career and allows for comparison of geographic variances that reflect economic and cultural differences. Like the United States, legislation requiring support to youth leaving care initiated research that evaluated efficacy of programs; unlike the American literature, the studies tend to be smaller and more qualitative.

Prior to the Child Care Act of 1980, the literature included anecdotal and descriptive material about the in-care, leaving care and post-care experience. For example, Kahan published in 1970 a retrospective study of 10 individuals who had graduated over a 17-year-period from the agency she administered, gathered through a series of group discussions. Godek (1976) took a shorter perspective on 8 youth leaving care in Scotland. They allow (but do not encourage, because of how the data were collected and presented) a human narrative perspective to emerge.

Empirical research on care-leaving began in the 1980s, and the first specialized programs to support care-leaving appeared in the mid-eighties. (Biehal et al, 1995:5). The Children Act of 1989 strengthened service to youth at care-leaving by making it "the duty of the authority to advise, assist and befriend him with a view to promoting his welfare when he ceases to be looked after by them." (Section 24, 1) up to their 21st year or beyond, for the purpose of

supporting education or training. (Garnett, 1992:9).

Rowe et al (1989) conducted a quantitative study of placement changes in six local authorities, selected to give a national flavour, that illuminated in-care career patterns and demonstrated that young people disappeared from the picture as they left care. Louise Garnett (1992) focused on this absence by using as a sampling frame a sub-set of 308 young people from Rowe's study population who graduated from care at 16 and over. She selected 45 youth who left care after age 16 from each of three local authorities. They were aged 19 to 21 when data were collected in 1989 from the youths' last social workers or other staff members, and where that was not available, from case files. Garnett found that care-leaving tended to take place at 18; only 14% of her study population left care at 16 or 17. This is later than had been reported by other researchers, perhaps because she defined care-leaving as termination of legal status rather than leaving care facilities. Her intention was to relate care career and outcome by tracking youth from various kinds of final care settings to their next situation. In the end this was not possible because of poor-quality data, and because final placements did not reflect care career. Youth tended to be placed in independence settings prior to termination of status, regardless of the varying level of competence and need implied by in-care placement. Garnett concludes "that leaving care is for most young people a particularly gloomy and depressing prospect." (Garnett, 1992:127), although she acknowledges that the methodology probably led to over-representation of poor outcomes in the data, in that the most vulnerable youth were most likely to have maintained contact with the local authority.

A group of researchers from Sheffield (Fisher et al, 1986) studied the experience of coming into, being in, and leaving care from three perspectives, that of the children, their families, and the case workers. Within their sample of 55 cases drawn from among all children over 8 years of age admitted to care in 1981-82, 45% were age 15 or older, and only 9% were over 16. Most youth, it appeared, did not remain in care to prepare for emancipation to independence. Of interest to that process, however, is their finding that even with younger children whose families were actively involved, where family reunification would seem to be a viable goal, workers accorded care-leaving less attention than entry into care, and that youth and families in many cases initiated and managed the exit from care, with the worker's role relegated largely to recording its occurrence (Fisher et al, 1986:114). This is consistent with the fading out of sight that Rowe and Garnett found using institutional data, and may illuminate the importance of extended or surrogate family to care-leaving outcomes reported by the American researchers. It may also suggest that the primary focus of child welfare as an institution is on removing children from their parents rather than on managing them in care or preparing them for adulthood.

Concurrent with the Sheffield research, a study in Leeds focused on the perspective of adolescents in the process of leaving care. Mike Stein and Kate Carey (1986) interviewed up to five times over four years 45 non-randomly selected youth of a possible 79 discharged in 1981 at ages 16 to 18 from the care of a rural/small town local authority, and augmented this data with information from their files. Like Garnett, they found that most of the young people experienced considerable difficulty. Stein and Carey were critical of the assistance the youth were given in preparing to leave care, which often involved moves into temporary placements where they underwent a "domestic combat course", and that a successful outcome was defined as leaving care to live on one's own, a state of isolation that the authors found abnormal and unhealthy (Stein & Carey, 1986:158). They also criticized the lack of attention given to the psycho-social elements of the transition, and the negation of the importance of inter-dependence.

Many of the young people in this study attached themselves to families, whether their biological or foster families or the families of partners, and/or created families with partners and children. Ten participants were parents of 12 children, with 3 more expected, by the time the study ended, by which time the participants were 20 to 22 years of age. This (10 of 45) is a lower rate of procreation than that described by the American researchers (Festinger 47% females, 29% males; Cook, 60% females), but higher than Garnett reports, at one in seven (Garnett, 1992:37). It may be an under-representation because of the voluntary nature of the study group and the loss of participants over time. Although the researchers describe seven of the ten parents as "well established with a partner and child" by the end of the study (Stein & Carey, 1986:82), they did not see it as an easy or positive situation.

Using a similar methodology, Stein and his colleagues (Biehal et al, 1992) conducted a larger study of youth leaving the care of three local authorities, using as quantitative data information collected from workers on 183 young people, 91% of those 16 to 19 years old who met the criteria of having moved to independence or having legal status terminated in the last six months of 1990. They attempted to select from this population a study group of youth referred to four care-leaving schemes and a comparison group of those who were not involved in a care-leaving scheme, using stratified random sampling matched on gender, ethnic origin, last care placement, and more than/less than two years in care. However, this plan was modified to accommodate differences in size of local authority and care-leaving scheme, gender imbalance, and small numbers in ethnic and special needs categories. (Biehal et al, 1995) There was a significant gender imbalance in the sample, which was 61% female (similar to Cook, whose sample was 56% female). Comparison among the

participants was complicated by several factors, including that scheme participants at the outset were "significantly more disadvantaged than the comparison group" (Biehal et al, 1995:259). This is in interesting contrast with Cook, who reports that the more competent youth were likely to receive care-leaving support. Given the preponderance of females in both samples, it also raises the question of whether females are at differential risk in the two cultures.

In the second stage of the study, 42 participants in four care-leaving schemes in the three local authorities and 32 non-participants as a comparison group, 74 in all, were interviewed three times in 1992-93, as were their key transition workers and agency workers. By the end of the data collection period, 53 young people, 30 participants and 23 non-participants, remained involved, a loss of about 1/3 of the sample evenly distributed in the sub-groups. Because the categorization into sub-groups was unsatisfactory, the researchers present qualitative data concerning the entire 74, profiling care-leaving patterns, housing, education, career paths in early care-leaving, social networks, life skills, identity development (with black youth as a special sub-group), early parenthood, youth with special needs and offending behaviour (including substance abuse). Outcome measures were determined in nine domains: accommodation, life skills, education, career paths, social networks, relationships, identity, drug use and offending behaviour. Limited comparisons were made between scheme participants and non-participants that including changes in circumstances over time, and occasionally participants were compared with young people in the general population.

The researchers conclude that "The leaving care schemes therefore appear to be particularly effective in improving outcomes in the two core areas of scheme activity -- facilitating access to good accommodation and developing life skills." (Biehal et al, 1995:276). The areas in which leaving care schemes were clearly not helpful were in education and career paths: both groups were much worse off educationally than their age cohorts in the general public, and few continued education after leaving care. Females had more education than males. With respect to employment, both groups and both genders were disadvantaged relative to their age cohort, and many of those with "insecure" careers slipped into full-time parenting. By the end of the data collection period, "one-third of the young people had become parents [by age 19], and nearly one-half of the young women" (Biehal et al, 1995:131) of the final group of 53, a proportion that might be swelled by those with whom the project lost contact. An overall indication of outcome was determined for each of the 53 young people who remained involved throughout the study, comprising three measures: good accommodation, stable income, a sense of purpose. About three-quarters of each group was judged to have

had good outcomes relative to their starting point, and poor outcome was associated with lack of consistent family (biological or foster) support.

There are a number of methodological problems that make it difficult to conclude whether the care-leaving schemes were critical in determining outcome, and indeed whether outcome should be attributed, not to the care or care-leaving experience, but to the adequacy of the social support net, regardless of whether family and/or the care-leaving scheme, or indeed, anyone other than the youth him/herself, facilitated access to it. There is also a question whether the outcome indicators selected are gender neutral, since all three could be associated with motherhood (but not necessarily fatherhood).

What seems clear from the care-leaving literature from both Britain and the USA is that care-leaving schemes themselves are very unlikely to deliver a positive outcome. A satisfactory foundation for a successful transition to adulthood must begin to be built long before care-leaving is imminent. To change what is demonstrably a negative trajectory at the time a child comes into care, interventions along a broad spectrum of psychological and social factors need to be made and tracked, in order to begin to understand and manipulate the very complex mechanism by which a positive outcome can be achieved. The British government in 1987 commissioned a process that involved academics, policy makers and practitioners in extensive consultation, under the guidance of Roy Parker, leading to the development of a protocol known as Looking After Children, which is being adapted for use in several other countries, including Canada. It partializes the in-care parenting task and engages all those who have a part in caring for the child (including the child) in defining developmental goals, agreeing on a strategy to reach each goal, and periodically measuring progress to goal and recording it in the child welfare file, in a consistent way that can over time comprise a data base comparable across jurisdictions with little input in addition to regular case-work recording. An additional contribution is the possibility over time of developing behaviourally-standardized practice expectations for and among the various members of the care community. Under Parker's leadership, a broad base of experts agreed upon seven dimensions for assessment: health, education, emotional and behavioral development, family and peer relationships, self-care and competence, identity, and social presentation. They defined it empirically for six age groups (under 1, 1-2, 3-4, 5-9, 10-15, and 16 and over), and developed a protocol and procedure for using this matrix to track progress in care and contribute information to a common data base. (Parker et al, 1991)

The care-leaving literature demonstrates that the reality of the child is often poorly reflected in the child welfare file and in data collected from case workers. The file as an instrument of the institution may reflect what is important to the institution, rather than what is important to

the child whose life the file records (Martin & Palmer, 1997). Research recognizes the importance of strengthening data by capturing a variety of perspectives, and yet this basic rule for bringing credibility and depth to the matter under consideration is often overlooked in documenting the lives of children in care. Many elements of a child's life may not be given the continuous and cumulative attention that is necessary to realize the child's potential.

The Looking After Children protocol addresses these inadequacies in a number of ways:

- It requires on-going collection of data from a variety of sources, including the child, biological family (where involved), carers and child welfare officials.
- Young people are expected to provide data directly into the file, implying an expectation that the youth is responsible in some measure for his/her behaviour.
- This also provides a respectful way to debate and evaluate issues in which personal values influence the definition of a problem and the need for and nature of intervention, such as sexual activity or alcohol/drug use.
- The application of all seven dimensions ensures that important areas such as sexuality not be avoided because of embarrassment or lack of confidence, as may now be the case (Biehal et al, 1995:132). This seems essential to improving understanding, for example of high rates of early pregnancy, sufficiently to intervene effectively.
- Recognizing the centrality of educational achievement to positive outcome, and the danger of expectational drift as educationally-delayed youth age, continuous monitoring and timely action to address identified difficulties is required.
- To support identity development, access to information about biological family, the reasons for being and remaining in care, a positive orientation to being in care, contact with others who share being/having been in care, and respect for minority culture are required. (Parker et al, 1991)

I find particular merit in the official record of the life and times of children and youth in care being more democratically compiled and accessible. The file may then become more like a life story whose multiple narrators and perspectives are visible and owned, including that of the person whose life it is. It is common for child welfare institutions to attempt to augment the official file with 'life books', a personalized record of the child's life constructed collaboratively with the child, that theoretically parallels the official record. This is, in my opinion, an inadequate solution. As well as the lack of continuity and cumulativity that also plague the official record, life books have other limitations: they are not the data on which official decisions are made and they are narrated and/or edited from the same perspective that informs the official record, excluding the multiplicity of perspectives that give depth and dimension to the record, and the full panoply of detail from which a sense of identity is

created and re-created. Making the official file a record that the entire care team, including the child or youth in care, contributes to and edits, goes some way to creating the conditions under which a fuller version of life can be documented and used as a basis for decision-making. David Fanshel suggests as a strategy of protection for (American) children being abused or neglected in care, "Modern technology also makes possible computerized opportunities for children to report anonymously about themselves." (Fanshel, 1989:474). The empowering potential of having direct access to official records about oneself may be useful in routine circumstances as well, and indeed the use of computers may facilitate this.

The rights of children to be appropriately involved in decisions impacting on them, which (I would argue) includes having ready access to the information that influences decisions, is articulated in the United Nations Conventions on the Rights of the Child, Article 12 (UNICEF, 1990). This is encouraging movement toward more honest partnerships with children and youth in care, including broadening and strengthening their rights to information. Furthermore, the sustained personalized connection with adults that in every study of youth leaving care is identified as crucial to good outcome can only be built on the kind of positive and respectful relationship with the potential for equity that is implied by giving children and young people in care direct access to their files and sufficient support to grow and prosper with what they learn from it.

Considering the British care-leaving literature, as I did the American literature, in terms of what the outcome measures selected imply about their goals and expectations for youth leaving care, what is evident is that the British studies are designed to evaluate how well the child welfare system works, rather than where the care-leaving population resides within the larger population. In part this is an artifact of methodological choice, a difference in the kind of conclusion that can be drawn from qualitative and quantitative studies. Structural consistency within the child welfare delivery system makes systemic evaluation easier. Because Britain has a broad network of social supports, still more or less in place in spite of two decades of supply-side economics, the issue of economic viability is softened. Where the American researchers measured a sense of satisfaction, the British look for a sense of purpose. The purpose of the child welfare system is to deliver surrogate parenting, with the implication that the job well done will address the issue of what adult outcomes should be; in short, the child welfare system is accountable for process, not outcome. Perhaps because Britain is a geographically small and legislatively homogenous country with a strong history of dialogue among practitioners, policy makers and academics, it has given leadership in developing a practice methodology that may eventually produce child welfare data to support authentic international comparisons.

3.3 CANADIAN LITERATURE

The Canadian child welfare reality shares the challenge of geographic and legislative diversity with the USA, and with one-tenth the population has even greater cultural diversity. It also has a much younger research tradition than either the USA or Britain, and a dearth of native publications in which Canadian research can be presented and debated. Often research is unpublished or published in-house and minimally disseminated; the sheer size of the country makes sharing information difficult. Child welfare in Canada is a provincial jurisdiction and therefore based on 12 different legislations variously delivered, sometimes directly by the government and sometimes through private organizations, usually called children's aid societies (CASs), instead of or in addition to direct governmental delivery. Research also reflects the Canadian tendency to celebrate rather than minimize its cultural diversity. The development of an integrated picture of existing research, and the accumulation of findings to build toward a meaningful body of work, is therefore quite difficult. I will present the Canadian literature within a narrative about movement toward that goal.

Unlike Britain and the USA, none of the Canadian child welfare jurisdictions has a legislated requirement to provide care-leaving support, (although each has provision to do so) so there has not been the broad impetus of the "duty to befriend" clause in the Children Act or the Title IV-E program funding in the USA to develop programs or evaluate the efficacy of those programs. Early in the 1980s, John Meston of the Canadian Child Welfare Association (CCWA), established a connection with the National Association of Young People in Care in Britain and began to organize a similar group in Canada, the National Youth in Care Network (NYICN). Early in the process of engaging young people, they identified care-leaving and post-discharge support as a pressing need. Brian Raychaba, a youth from care then 21 years old, was commissioned by the CCWA/NYICN to research the care-leaving experience across the country; his book, *To Be On Our Own...With No Direction From Home* (1988), published and distributed by the NYICN, galvanized the attention of academics, politicians and practitioners across the country. Meston described the existence of "a well-developed range of preparation-for-independence programs" across the country that nevertheless was inadequate to the need (Meston, 1988:633). In spite of increased awareness and general agreement that care-leaving and post-discharge supports are a good and necessary thing, the service offered now may be no more adequate than that Meston described then.

The means to measure the extent to which the need is being met do not exist. In late 1992, a private foundation and a federal government program began "working with a number of

organizations and individuals to develop a collaborative initiative that might strengthen the transition to independence for young people who have been in the care of the state." (Shields, 1996) This initiative subsequently moved toward the form of a national task force with the mandate of sharing information, supporting activities, and generally keeping attention focused on the needs of youth leaving care during a time of widespread cutbacks in social programming across the country. The work of the Task Force was impeded by lack of funding (the federal program initially involved subsequently disappeared), but did offer a forum in which the Canadian situation could be monitored from a multiplicity of perspectives, including child welfare organizations and officials, academics, and youth from care. In 1995, it commissioned a survey of all child welfare jurisdictions to establish the availability of data about well-being in care, at care-leaving, and post-discharge. No jurisdiction systematically collected information on any of the three phases of care that could be used to establish a base-line against which progress within a jurisdiction, let alone across jurisdictions, could be measured. Many jurisdictions were struggling with how to establish outcome and efficacy measures, however, as the pursuit of balanced budgets across the country brought with it the requirement to justify expenditure with measurable gains (Martin, 1996).

Leadership in meeting this challenge is coming from Kathleen Kufeldt, working with a growing group of jurisdictions that are considering adopting a Canadianized version of the Looking After Children protocol (Kufeldt, 1994). This initiative offers a forum, much as the original work led by Roy Parker appears to have provided in Britain, for a harmonized and pragmatic view to evolve which retains respect for the unique elements of each jurisdiction, or even among service deliverers within a jurisdiction. It is not yet developed to the point where data is available.

The task force also commissioned a series of group discussions with young people in/from care, facilitated by a young person from a care background (Martin & Palmer, 1997). Youth from three provinces (Ontario, Alberta, Nova Scotia) discuss the mechanisms by which they fall through the cracks and the means by which they find the resources they need to continue with their developmental tasks, all of which are intricately intertwined with individualized perceptions of family life, the child welfare system, and the 'normal' world. Voice data are presented in each of the seven categories (slightly modified) used in the Looking After Children protocol. The vulnerability and resilience of youth is evident alongside the shortcomings of the system, exposing a multiplicity of ways to intervene.

This reality is approached from a theoretical perspective in a work by Marilyn Callahan and her colleagues (Callahan, 1993), which adapts the idea of 'street-level bureaucracy' (Moore,

1987) to child welfare practice. They suggest that legislation and regulations are defined in the exchange between the individuals who deliver service and those who receive it, and are thereby rendered malleable. This resonates with the voice of youth describing the importance of the particular worker or the particular care-giver in molding their experience. The variability of the in-care and leaving-care experience that is the bane of research may be the salvation of those who work and live in the system. Cross-sectional data that 'freezes the frame' may miss the crucial elements in managing transitions.

Susan Silva-Wayne conducted one of few existing studies of the process of youth leaving care in a qualitative study conducted in 1993 of 19 "successful" graduates of the Toronto child welfare system. She defined success as having stable housing, being engaged in work, education or parenting, being socially connected, having a positive sense of self and control, and having the capacity for self-reflection. The participants had been out of care for up to 5 years, were on average almost 22 years of age, and had been in care a mean of 9 years. Twelve (63%) were females, 8 (42%) were born outside Canada, and 9 (47%) were referred by the Pape Adolescent Resource Centre, a multi-faceted support service that continues to be available to child welfare youth after discharge. Attenuated agency contact was a primary factor in selection, but the focus of the study was to identify conditions among youth in care that encourage or establish resilience. The researcher concludes that "being real and good parents and rejecting minimalist interventions and formalized cut-off points, such as the designation of 18 or 21 years of age" are important elements within the system (Silva-Wayne, 1995:321). The relationship between external and internal resources in transforming these elements into resilience as a personal quality is not addressed.

Thompson and Newman (1995) explored the converse of this, whether and how the child welfare system jeopardized youth, in a quantitative study based on mortality statistics and child welfare file information in Alberta, a province in Western Canada with a consistently conservative attitude toward social services. Among children and youth in care in 1980 who died within the next eight years (i.e. to a maximum age of 25), they found a death rate 72% higher than among the age cohort in the general population. The rate remained high when the sub-group of children in care because of severe developmental delay were excluded. Mortality rates were higher than in the general population at ages 14 and 21, and were due to homicide and suicide rather than illness. The authors speculate "that deaths prior to age 18 reflect stresses associated with the feared separation [of leaving care], and those after are a consequence of difficulties in dealing with the world without support." (Thompson & Newman, 1995:853), and applaud the efforts of child welfare jurisdictions to establish extended care. They explored whether being in care was itself a risk or protective factor by considering 38

children who had moved in and out of care, of whom 12 died while in care and 26 while not in care. Based on the relative amount of time spent in care, they conclude that "there is no evidence here that the protection offered by the child welfare system results in any greater safety than release from care." (Thompson & Newman, 1995:852), but neither does it increase the probability of death. "The only explanation of the 'no difference' finding that would suggest that the system was dangerous is that those released from care were actually at higher risk than those retained. This, of course, is not impossible, but it is, one hopes, unlikely." (Thompson & Newman, 1995: 853). Indeed one does hope that the child welfare system doesn't jettison or abandon its more vulnerable members, but there is some indication that this -- or, more passively, the failure to engage those who most require protection -- may be the case.

In Canada, as in Britain (NCH, 1993) and the USA (Mecum, 1994; Conte, 1994), a high proportion of homeless youth have a child welfare background. Kathleen Kufeldt, in conjunction with the service community over a number of years, conducted an in-depth study of homeless and street youth in Calgary, Alberta. In an early study (Kufeldt & Nimmo, 1987), 53% of 489 street youth were found to have run from child welfare care. In a 1992-93 study based on 45 in-depth case studies, 21% had run from child welfare care and 37% had been involved with child welfare at some point, most having been placed outside the home (Kufeldt & Burrows, 1994:58). The researchers found the participants to be heterogenous and the need for change and flexibility far-reaching, as participants used different systems and had different needs at various developmental and "street career" stages. Of the child welfare system in particular, they say

This study also adds to the growing number of studies indicting Child Welfare services. The very service set up to rescue and protect is failing too many children. As it becomes increasingly restrictive in its mandate, more children and adolescents will end up falling through the cracks. (Kufeldt & Burrows, 1994:152)

Alberta led the way in Canada in balancing the budget by cutting social services, and the Progressive Conservative government elected in Ontario in the spring of 1995 followed their example with enthusiasm, leading to increased restriction of mandate and money such as Kufeldt & Burrows describe.

The Children's Aid Society of Metro Toronto (CASMT) in Ontario undertook a year-long study (McCullagh & Greco, 1990) of service to young people on the street and effectively homeless, which included a significant proportion of young people who were or should be served within the child welfare mandate. The impetus for this study was from among child welfare workers who lived with the personal and professional stress of trying to serve young

people for whom they were or felt responsible with resources that did not fit their needs well.

Their recommendations addressed two populations, youth under 16 who fell within the CAS mandate and could not be served by other agencies without CAS involvement, and youth over 16 who left the child welfare system and ended up on the street. Negative feeling about CAS service among youth and agency staff operated to limit the service available (e.g., youth not requesting service because they didn't want to be "reported" to CAS and/or non-CAS staff not offering service to those who fell within CAS mandate) and to normalize manipulation (e.g., lying or accepting lies about age or circumstance to avoid CAS contact). A four-part alternative service delivery system was recommended but has not been achieved because of lack of funding.

Given the limited and fractured picture of care-leaving in Canada, little can be conjectured about the values and expectations that are implied. Perhaps because of the dearth of academic study, however, the Canadian literature and practice has embraced another kind of expertise, that of youth themselves. As the NYICN has established itself, with varying vigour, in all child welfare jurisdictions, infrastructures have developed that allow young people in and from care to dialogue with each other and with adults. As the power of what they have to say is demonstrated, it has become increasingly accepted that young people have a unique and valid perspective that illuminates other kinds of knowledge, and increasingly unacceptable to speak about the issues of youth without including them in an authentic and meaningful way. They have been included as experts in other areas in which they have inside knowledge, such as domestic violence (Raychaba, 1993), street life (Webber, 1991; Lau, 1989) and sex work. A young Canadian woman from care with a history of prostitution was one of very few youth directly involved in the World Congress Against the Commercial Sexual Exploitation of Children held in Stockholm in 1997, and subsequently has partnered with Senator Landon Pearson to organize the International Youth Summit on Sexually Exploited Youth in the spring of 1998, designed specifically to bring together youth who are or have been sex workers (Pearson, 1998). Many of these youth will also have child welfare involvement -- or *should* have had it. The contribution of Canadians to the care-leaving literature may be in giving the voice of youth a central place in the discourse, as writers of literature and contributors to conferences and the popular media, as well as the source of voice data in qualitative studies.

3.4 THE RESEARCH QUESTIONS

What does the literature relating to the adolescent transition, as discussed in the last chapter, and care-leaving, as discussed in this chapter, recommend for my research?

The first point is to acknowledge that we know very little about the Canadian care-leaving experience. While there is reason to expect that it is similar to that described in the American and British literature, a direct study of the Canadian reality, or some part of it from which generalizations can be made, is essential in order to locate Canada within the literature and to know how and why we might apply other countries' studies to our situation. The first research question, then, is: What is the Canadian care-leaving reality?

The second question is what the outcomes of child welfare care-leaving are, including how they should be defined and when it is appropriate to measure them. The only truly predictable outcome of child welfare care is that it ends. The goals for raising children and youth in the child welfare system are not made explicit in the legislation, and from a developmental perspective, the work of adolescence is unlikely to be completed by the age of majority when the child welfare mandate ends and, ready or not, youth are emancipated to adulthood. The British literature illuminates how care tends to dissipate near the end, and the American literature attests to the difficulty and cost of locating participants for a retrospective perspective. This raggedness contributes to the under-representation of the most vulnerable (e.g., early leavers, street-oriented youth, the homeless and transient) in the existing research, and the exclusion of those who have gravitated into related care systems, such as the mental health and justice systems. These issues need to be addressed within the Canadian reality.

The third question, anticipated in the previous chapter, is what the gender differences are in leaving care. Differences between males and females are recognized in normal discourse and are increasingly important in developmental theory, and yet child welfare legislation does not differentiate. The literature tends to describe rather than explore gender differences at care-leaving, even though the consequences of some events (reproduction is an obvious example) are very different for the two genders. Our understanding of care-leaving as a human experience may be enriched by focusing on gender differences.

The fourth question, also anticipated in the previous chapter, is the relationship between the normal adolescent transition and care-leaving. When youth in care lose the status of child, they lose on one hand the stigma of having been inadequately parented, and on the other the right to any special consideration. At adolescence, a time according to life course theory when the impact of choices are exacerbated because they preclude other options with long-term implications, the options available to the individual in care to attenuate emancipation by extending either end of the process are limited. Research has addressed somewhat the

availability and efficacy of transitional supports (i.e., preparation for independence or extended care), and focused on characteristics of sub-populations within the system who are likely to be offered and/or use to advantage the programs available. But the larger matter of how the population of youth in care as a whole manage the transition from childhood to adulthood, relative to others of their age, within the social, political and economic circumstances that give meaning and resonance to their reality, is an essential frame that needs to be explored.

This is a question of process as well as a matter of outcome, of conceptualization as well as action. It is the central business of child welfare to explicate the difference between good and bad parenting, and yet we do not consistently assess our own practice. Youth experiencing parenting by child welfare report its shortcomings but also, sometimes with surprising reasoning, that it was 'good enough' or better than the alternative. Because the literature does not give a consistent description of what care-leaving is or should be, we need to ground our thinking in perceived reality. The expertise on the question of the relationship between the developmental work of adolescence and the structural work of leaving care, inasmuch as it exists, seems to me to lie with youth reflecting on their experience: what it was, what it was not, what they had hoped or wanted it to be, and what they feared it might be. This recommends that my study should give central importance to the perspective of youth in how they conceptualized and managed their transition from childhood to adulthood, from being in care to being on their own.

Lastly, if one believes that both long and short-term strategies are necessary to make the world a better place, the question is what protective or remediating strategies can be identified to inform practice and policy. Particularly useful are those that can be applied within existing resources. Again, the perspective of youth may be enlightening: the research should listen to hear what worked, from their point of view, to make care-leaving easier or more successful.

3.5 SUMMARY

In this chapter, I have reviewed the literature from the USA, Britain and Canada that pertains to care-leaving. Two large-scale American studies done a decade apart describe substantially different outcomes, with variations based on gender and race. The British studies are smaller and focus on outcomes based on care career or utilization and efficacy of preparation for independence programming. The Canadian literature tends to be qualitative and to use the voices of youth in/from care.

A consideration of this literature, combined with the literature on the adolescent transition discussed in the previous chapter, suggests these five research questions:

- What is the Canadian care-leaving reality?
- What are the outcomes of care-leaving?
- What are gender differences in care-leaving?
- What is/are the relationship(s) between the normal adolescent transition and care-leaving?
- What are protective or remediating strategies that can inform child welfare policy and practice?

In addition, an argument is made for focusing on the process of emancipation from the perspective of youth leaving care rather than child welfare structures. Because emancipation restores youth from care to the general population, they should be conceptualized as individuals within their age cohort, with due regard for the influence of gender, rather than in relation to one of a number of institutions involved in their histories. We turn now to a consideration of the issues involved and how to integrate them into the research design.

CHAPTER 4: METHODOLOGY

In this chapter, I discuss the issues and circumstances that determined the eventual shape of the research design. This chapter reviews the research questions, and follows with a discussion of specific issues and the manner in which their resolution influenced the design and methodology of the research. The chapter finishes with a detailed description of the research protocol as it unfolded, including a discussion of the impact of methodology on the application of findings. The research findings will be discussed in detail in the next three chapters.

4.1 THE RESEARCH QUESTIONS

I reviewed the literature of child development theory and child welfare practice against the experiential backdrop of years of social work practice, many of them in child welfare and with youth leaving care, and the experience of parenting children now past adolescence. The challenge of developing research questions to guide my work was not so much one of acquainting myself with the field under study, but rather of arranging all the elements which I believed to be critical to a holistic understanding in a way that could be expressed in a few simple and researchable questions. Designing a project that could address those questions within the limits of my resources was a second stage of problem solving, but one that inevitably and continuously informed the articulation of the questions.

The questions that guided the design and methodology of the research are reiterated here:

- What is the Canadian care-leaving reality?
- What are the outcomes of care-leaving?
- What are the gender differences in care-leaving?
- What is the relationship between a normal adolescent transition and care-leaving?
- What are protective or remediating strategies that can inform child welfare practice and policy with respect to care-leaving driven by age?

4.2 METHODOLOGICAL ISSUES

4.2.1 A feminist perspective

Methodology is, as Sandra Harding defines it, “a theory and analysis of how research does or should proceed” (Harding, 1987:3). She differentiates it from methods, techniques for gathering evidence, and epistemology, the theory of knowledge, in order to clarify what is

meant by feminist research. She identifies several elements that characterize feminist research, and while it was not my intent to 'do' feminist research, I am pleased that the approach that I developed meets her criteria, specifically that it derives from women's experiences and seeks to answer women's questions; that it acknowledges the plurality of experiences within gender occasioned by class, race and culture; and that it includes the researcher within the ambit of study, especially with respect to sources of social power. This framework will be evident in subsequent discussion.

4.2.2 A critical perspective

I was also pleased to find a framework for understanding research methodology that does not give gender a central role, but rather identifies the qualities that constitute critical research. Lee Harvey (1990) differentiates, similarly to Harding, between methodology, method and epistemology, but draws a contradiction with positivist or phenomenological approaches in which he describes critical social research as "underpinned by a critical-dialectical perspective which attempts to dig beneath the surface of historically specific, oppressive, social structures." (Harvey, 1990:1). He identifies eight elements of critical social research:

- *abstraction*, by which he means investigating rather than accepting unquestioningly concepts and constructs;
- *totality*, by which he means taking a holistic view;
- *essence*, by which he means allowing oneself to name the invisible that underlies or organizes the visible;
- *praxis*, that analysis is itself a political act;
- *ideology*, the examination of beliefs in order to render apparent that which is 'natural' and therefore invisible;
- *structure*, by which he means reducing something that is generally considered as a unit into its component parts;
- *history*, the questioning of the generally accepted interpretation of past events and circumstances; and
- *deconstruction and reconstruction*, which is dialectical enquiry, a method of analysis that involves juxtaposing a thing with its opposites until the appropriate contradictions emerge.

These elements will become evident in the details of the design and implementation of my research.

4.2.3 The thrust

If the purpose of research is to change the world, and my purpose in specific is to address

care-leaving as an adolescent transition, the research should illuminate policy and practice that serves youth as they are emancipated. The developmental literature tends to focus on individual maturation independent of external circumstances, whereas the care-leaving literature focuses on external circumstances (legal status, placement, service utilization or availability) and disregards maturation. To be useful to workers and youth dealing with emancipation, my research needed to focus on both internal (maturational) and external (circumstantial) elements, and to the ongoing dynamic between them. Furthermore, if child welfare is about surrogate parenting, and the adolescent developmental task is about individuation, the research needed to incorporate the diversity of the population and the fit between individual youth and the service offered them.

I attempted to compile a comprehensive list of the elements involved in the transitional task, both for the individual and for the institution, with the idea that I could collect information from research participants and service providers about who used what resources when and to what effect, and map the responses to demonstrate what an adequate support service would include. The task rapidly became impossibly complex. I began through this exercise to understand that the adolescent transition and emancipation are not the same thing, even though the discourse (equating leaving care with becoming independent) suggests they are. Because they are used interchangeably, the relationship between the two concepts has not been examined to any extent. The conflation of the two events or conditions into one construct has political value: it obscures the fact that the same state that rescues children from unsatisfactory parents itself acts like an unsatisfactory parent by prematurely withdrawing support. Calling emancipation independence also packages the policy in a way that invites youth themselves to support it: who in their teens is likely to muster a compelling argument against independence, or plead for the apparent alternative, continued dependence? Equating reaching the age of majority with adulthood and with independence, the apparent alternative to dependence, has the added political and economic advantage of transferring responsibility for not achieving the mythical condition of self-sufficiency to the individual. The phenomenological approach I considered, even if it could unmask the contradictions I suspected, was also well beyond my resources.

An alternative approach to my assembling the picture of care-leaving and the adolescent transition was to create the condition under which the picture could emerge. Rather than trying to identify and locate all the elements, I could simply ask what they were and what was the relationship between them. Whom would I ask? Who would have this information? Who are the experts on the relationship between the adolescent transition and emancipation? The answer had to be the youth who were experiencing it, if only because it

was clear that the usual list of suspects -- researchers, workers, policy makers or analysts -- were not. Furthermore, the wisdom worth knowing needs to come from within the reality (D. Smith, 1987:92), "studying up", as Harding (1987:8) calls it, if the underlying ideology is to be revealed.

Having determined to *whom* I should go, I was faced with the very large question of how I should engage them in causing a picture to emerge. The stimulus would need to evoke a full consideration of both the adolescent transition and legal emancipation that would include its precedents (individual capacity, prior experience), the interventions (child welfare and community input, formal and informal, events that took place as well as those that didn't), and elements of individual agency (goals, beliefs, perceptions of power). How could youth be engaged in the task of giving information about agency, intervention and history? The short conclusion to a long consideration was that youth should be invited and supported to tell a narrative. The narrative should be about their experience of the adolescent transition, but the youth should be those who had experienced emancipation, so that both elements were available to the narrative without the relationship between them, or lack thereof, being hypothesized.

Both the adolescent transition and emancipation are universal experiences. The adolescent transition is a process, whereas emancipation is an event. Care-leaving incorporates both, but the relationship between the two is not clear, and may even be intentionally obscured or misrepresented for political purposes. How could I reasonably expect young people in the midst of this maelstrom to articulate what they were experiencing? I reasoned that if, as the narrativists hold, constructing stories is the way in which people make sense of their experience, the more so when circumstances are critical or confusing (Riessman, 1993:4), offering youth in transition the opportunity to reflect on their experience could not only *be* helpful to them as well as to me, but *be seen* by them to be at least potentially helpful. Conversely, failing to invite them to tell their stories on the assumption that they wouldn't want to, couldn't do it, or shouldn't spend their time and energy in this manner silences them, to our mutual loss. Youth are no less able than any other potential partner to refuse the invitation or exercise good judgement about whether they have the time and energy to take part in my research project. The challenge was to design a protocol that could engage them, and once engaged, support them to explore the subject material in fullness.

What would be the characteristics of a sufficiently engaging and supportive protocol to elicit a contemplative narrative from youth about an experience in which they were presently involved? It would need to be seen to value their time and expertise. It would need to be of use to them in the short term, whether indirectly or directly, privately or publicly, practically

or philosophically. It would need to accommodate their vulnerability, the limits of their personal power to control what happened to them on a day to day basis. It would need to address respectfully the skill deficits they might be expected to have, such as low literacy and limited training in critical thinking, as well as to accommodate learned self-protective behaviors, such as heightened awareness of power inequities that are characteristic of interview situations. In short, the protocol needed to be evidently collaborative and inherently engaging, and to leave them with something tangible for their contribution. The latter condition could be addressed by paying them a stipend for participating, on the grounds that they had something I needed and no reason to be doing me a favour.

I had developed, in my practice, a technique that we called 'direct scribing' that I considered could be modified to become an engaging and collaborative approach to collecting narrative data. Direct scribing entails transforming the youth's oral speech into written word by typing as s/he speaks. The youth sit beside the helper, the 'scribe', and watches the computer screen as the scribe types the youth's words and edits them as instructed. This technique developed out of a literacy project with youth leaving care (Fay, 1989) in which the oral stories youth recorded were transcribed into written text and used to teach literacy skills. As we expected, youth found the experience of seeing their stories as written word very engaging and empowering. We did not anticipate the next step, which was a developing analysis of the power of the written word in the child welfare system, and as a corollary, a demand for a means to produce authoritative and eloquent written text. Youth wanted to add their perspective to the child welfare file that purported to be a record of their time in care, to communicate clearly about complex thoughts to people and about situations that were important to them, and increasingly, they wanted to speak out compellingly about their experiences in a way that would allow others to learn from them. Direct scribing became the technique that made these activities available to a broad spectrum of youth (Martin, 1998).

Several characteristics of direct scribing recommended it for adaptation to research. First, having the participant and the researcher sit beside each other facing the computer screen, rather than facing each other as in a traditional interview situation, creates an opportunity to mute the power inequities inherent in the interview situation to which youth in care have reason to be sensitized. Rather than the interviewer asking questions, the interviewer/scribe is directed by the participant. The power nuances in body language are softened by placing them outside the proscribed work space, the triangle between the computer screen, the participant's voice and the scribe's hands on the keyboard.

Secondly, a complex task becomes simplified by partialization: the job of the participant is

to transform thoughts into spoken words, the job of the scribe is to transform spoken into written words, and the computer displays and records the product. The synergy between the partialized functions is quickly evident: talking makes thinking easier, being listened to makes talking easier, and seeing what has been said makes clear communication easier. The evidence of success, the production of material that captures what is meant, is inherently motivating and supports deepened commitment to the task.

Thirdly, the product can simultaneously belong to, be physically in the possession of, both participant and researcher/scribe. Because it is the product of their collaboration, it can be valuable to both, although perhaps in different ways. Each can use it as s/he wishes, within some constraints that respect its co-ownership, without depriving the other of the opportunity to do likewise.

Fourthly, the complex politics of transforming oral word into written text (Mishler, 1986) is under the control of the producer of the word, the speaker, more than is possible in other techniques used to capture spoken word. The speaker edits the product until the written transcription reflects his/her meaning satisfactorily, and has in his/her possession the final copy of the data. S/he has no control over how it is used, but does have control over what it is.

Fifthly, from a practical perspective, direct scribing is an efficient and secure way to get data. Data is not at risk to be lost because of malfunctioning equipment, as often happens with orally recorded interviews. If there were a technical problem, it would become evident at the time when it could be addressed, rather than after the moment, when there is little recourse. Direct scribing is efficient, in that the transcription is completed within the interview, whereas several hours of transcribing are usually required for each hour of recording.

Sixthly, participants may be more comfortable with using computers than tape recorders or (particularly in the case of those with child welfare experience) written notes. This may be especially true of young people raised with computers. Terri Apter used both tape recorder and computer in doing research with adolescent girls and their mothers. She reports

Initially these interviews were taped, but later I used a portable computer. The bother of using the keyboard when conducting an interview was actually less intrusive than the tape, which made many participants nervous — they wanted the opportunity, if necessary, to “take back what [they] said.” There was also much reassuring eye contact and a peaceful filling-in of pauses as I used the computer. (Apter, 1990:12)

For all these reasons, direct scribing seemed to offer a useful technique for getting good

narrative data. I had the keyboard skill and the equipment necessary to use the technique, and it was an approach with which I was personally comfortable. That it had merit as a research technique that others might use was a possibility for added value to my work.

Similarly, narrative seemed to serve the thrust of the research questions, in that it allowed the relationship between the legislated and developmental components to emerge, described the Canadian care-leaving reality, and had a good possibility of including protective and remediating strategies. Among the challenges remaining in extending and developing the protocol to address the research questions were the issues of context and analysis.

4.2.4: Context

Having decided that the study population would be youth leaving care, the backdrop against which to place them became an important consideration. Lee Harvey suggests that critical ethnography at the very least “consider[s] the subject group in a wider context” (Harvey, 1990:11). When in the literature the wider context is the child welfare system, the individual is obscured in the complexity and plurality of the system. When the wider context is the age cohort, the youth leaving care stands out starkly, but so far to the margins as to be almost out of the picture. When the context is narrowed to the age cohort living in poverty, as Cook et al (1991) did, a better balance is achieved between the population and the context. This suggests that while we as a society do not articulate an intended outcome for youth leaving care, we expose our expectations in the outcomes we achieve. The question is whether I should accommodate or expose this expectation in my study. Given that Cook’s study is of an American population, there would be value in assuming that perhaps Canada is different, that our child welfare system graduates youth to a mainstream rather than to a marginalized reality.

If mainstream, what variables should be chosen on which to compare youth leaving care with their age cohort? To locate this study within the care-leaving literature, the variables should include living circumstances, the extent of financial support available, including its source(s), attachment to the labour force, education as an indicator of long-term employability, procreation and marital status. While I rejected care career as a way of categorizing youth from care, some care history would locate my study population in relation to those of other studies. Because I was interested in the care-leaving experience, details about living circumstances post-care but preceding the circumstances at participation would be useful. Because Canada is different than either Britain or the USA in its relationship to immigration, and because the research would take place in Toronto which has a very high proportion of

immigrants to Canada, it would be important to include immigration experience. Because race and culture is important in itself and in the care experience, as well as a factor in immigration, it should be included.

While asking research participants for the answers to these questions was within reason, the matter of getting cohort information was more challenging. Where would this scope of information about youth of the same age be available to me within my resources? The Canadian government conducts a country-wide census every five years that includes much of this information. I therefore explored modifying the census instrument for use with my participants in order to contextualize them in the larger Canadian reality.

The most recent census data available at the time were collected in 1991. A short questionnaire comprising nine questions was required of the residents of 80% of all dwellings in the country on a particular day in June. Residents in every fifth dwelling were asked to complete the long version. The long questionnaire consists of 45 questions to be completed by the head of each household on behalf of each member of his/her household, and an additional eight questions about the physical domicile, to be answered once for each household. The long questionnaire establishes the relationship between the householder and the persons to whom the responses apply, and includes information about age, sex, marital status, language(s) spoken, birth place, citizenship, migration, ethnic origin(s), aboriginal status, religious affiliation, disabilities and activity limitations, residential mobility, reproduction (females only), education, work history and current circumstances, and income. The census questionnaire is developed with broad consultation, building on previous experience as well as reflecting new interests. Occupied dwellings are carefully enumerated, and trained staff are deployed to ensure a high level of response and quality of data across the population. Data is made available in various aggregations, some free and others at varying cost.

The census variables matched well with those in which I was interested. The quality of the census data is well respected internationally. The instrument itself was a reasonable size and format to administer to an individual. While generally the census questionnaire looked like a good instrument to use to collect contextualizing data, one counter-indication came to mind. It was unlikely that youth themselves would have answered the questions in the census itself, since they would not have been considered the head of the household in most cases. Would the responses made about them be essentially different than what they might have answered had they responded directly? If most youth in the contextualizing population lived with natal family, I felt comfortable presuming that most of the information would be

similar to that which the youth would give directly, since none of it was particularly value-laden or of a nature that parents would be unlikely to know or share about their offspring. If they lived outside the natal family, I could not easily presume that whoever answered the questions had good information. However, in “non-institutional collective dwellings such as hotels, motels and rooming houses” and in “private households when members (lodgers, for example) wish to keep their responses confidential from one another”, individual interviews were conducted by Census Canada officials (Statistics Canada, 1992:16). For the first time in the history of the census, an attempt was made in 1991 to include the homeless or marginally housed who might be missed in the enumeration of dwellings by conducting individual interviews in a random sample of soup kitchens. These measures reassured me that data from youth in non-family homes, as well as those still in natal homes, were likely to be of similar quality to that which I could gather through individually presenting the census questionnaire to participants in my study.

Having determined to adapt the census questionnaire to my purposes, it remained to decide when and how to administer it. Because the information was reasonably value-neutral, particularly in comparison with the subject matter of the narratives, it made sense to start with it, and to use the experience as the first stage in establishing the work culture that would support the participants providing the data I required. Part of the culture was working collaboratively with the computer as the focal point, the rather unusual expectation of having the participant sit close beside me and watch the screen as we engaged in a variation of communicating, i.e., direct scribing. I reasoned that if I presented more usual material in this unusual format, it would ease the transition into the work format. The protocol that developed was the presentation of the 45 questions of the Census '91 Long Questionnaire on the computer screen, to be answered by the participant with respect to themselves and each person who lived in their dwelling, as if they were the head of the household. This was a more onerous expectation than census officials would have had of most youth, but I decided to include it in order to get detailed information about the living circumstances of the participants. Such information is not present in the literature, although it is something we would tend to know about our personal children if they were living away from the natal home.

Furthermore, there is some indication that the specifics of where and with whom they live is of central importance to youth leaving care (Martin & Palmer, 1997). To the original 45 questions, I added two open-ended questions, one a request for a thumb-nail description of living circumstances since leaving child welfare facilities (regardless of status), and the other a brief description of care career.

The next issue was to decide on the sub-set of the census population within which I should

contextualize my study population, that is, reaching a specific definition of what I meant by cohort. Having ruled out economic class as a limiting factor, there remained two components about which decisions needed to be made, geographic location and age. Census information is readily available at the aggregation level of Census Metropolitan Areas (CMAs). The Toronto CMA includes Metropolitan Toronto and the surrounding areas with which it is socially and economically integrated, i.e., between which 35% of the population commutes regularly (Statistics Canada, 1992:109). This seemed a geography that suited my population.

The matter of age was more complicated. I needed first to establish the target group more specifically, which would determine the appropriate contextual sub-group. Because I was interested in the dynamic between the adolescent transition and care-leaving, age should be held constant. I should include all three routes to emancipation: leaving after age 16, the earliest age at which one can legally live without adult supervision; 'aging out' upon reaching 18; and receiving extended care, available on negotiation to age 21. Participants should have as much experience of living on their own as possible, which recommended older participants. On the other hand, the longer individuals had been out of touch with the agency, the more difficult they would be to locate, and this recommended younger participants. I would begin data collection in early 1995, which meant that youth born in 1976 would have turned 18 the previous year, and be turning 19 during data collection. If I included all youth born in 1976 whose files were closed after their 16th birthday, as well as those whose files were still open, all three routes to emancipation would be included. The earliest out of care would have been on their own for up to three years, and the difficulty of locating them would be off-set with the ease of finding those emancipated the previous year and those still on caseloads. It seemed reasonable to accommodate this mix of difficulty within my resources. The conclusion, then, was that the study population would be all youth born in 1976 who had been in care after their 16th birthday, and the contextualizing cohort all youth in the Toronto CMA who were 18 or 19 years of age.

In summary, then, the research design that evolved contextualizes youth leaving child welfare care in a metropolitan area in Canada within their mainstream age cohort, using as measures the full scope of quantitative variables available from the 1991 census, as well as some child welfare information. The protocol for administering the Census '91 Long Questionnaire was to present it to the participant on a notebook computer, in order to introduce the participant into a work culture that would support direct scribing as a technique for evoking a self-narrative about emancipation and the adolescent transition. The context

provides the framework within which data is collected and presented, and thereby constrains and supports analysis. It is to the issue of analysis that we now turn.

4.2.5 Analysis

Lee Harvey holds that critical ethnography goes beyond placing research participants in context, to “incorporat[ing] ethnography directly into a dialectical analysis. In this approach, the understanding developed from the ethnographic study is integrally related to the deconstruction of the social structures.” (Harvey, 1990:12) I understand this to mean creating reflexive loops within data collection that continuously refines and confirms a developing understanding of the questions, if not the answers, under consideration. The protocol as developed to this point lacked reflexivity. It was a straight-ahead presentation of questions to which the participant was asked to provide answers, whether quantitative or qualitative. The perspective of the researcher and the effect of the interplay between the researcher and the researched was outside the data collection framework and therefore unavailable for collaborative analysis. Epistemologically, then, truth would be determined by the researcher, and the researched would have no access to knowing what the researcher had decided it was, except in the finished product. That is, to this point in the design, I as the researcher am silent on what I mean by the questions I ask and on what I understand by the responses, and there is no opportunity for either myself as the researcher or the researched to explore or confirm confluence or divergence in our understandings of the reality that mediates us.

The first step in correcting this was to have me on record in the same medium as the researched, a variation on feminist admonition to locate oneself in the same critical plane (Harding, 1987:9; D. Smith, 1987:92). In scribing the narrative, then, I would scribe my questions as well as the responses. And I would interact with — question — the narrative to allow the participant to know and respond to my understanding of what was said. The narrative would then come into existence in the overlap of the understandings of myself and of the narrator. The drive to shared understanding would be part of the data, and the data would reflect my growing analysis of the matter as I absorbed material from all sources. Checking interpretation is a very common element in social work counseling and other circumstances when clear communication is held to be important, and therefore the theoretical decision to incorporate it into the protocol came easily. Experiencing the reality of seeing my oral interactive self in text powerfully confirmed the difference between spoken and written word, and the wisdom of the decision.

The second step was extending the protocol to allow the participant to analyze his/her narrative (and our exchange) in order to maximize learning and teaching from it. I designed a third session at which the participant was asked to assume a more objective stance toward his/her narrative and to go through a series of exercises to analyze it as if it were a written story. The approach was structural in order to accommodate any content, and the structure partialized the analytical task so that participants who lacked or were not confident enough to apply critical skills could collaborate. The skeleton of the protocol was again borrowed from the earlier literacy project (Fay, 1989) and adapted through the piloting process. It asked the participants to identify the outline of their story and the critical elements, to evaluate the positive or negative impact of each event on the outcome of the story, and where appropriate to note changes in their understanding of the impact over time. Then they were asked to make a series of narrowing selections from among the events they had chosen to include, in order to identify the critical contradictions, the generative tension between forces, that shaped the story. In the latter exercise, participants were specifically requested not to share their thought process, and I asked only whether the outcome felt right to them. The intent was to minimize self-censoring and self-consciousness, since one's ability to reason often exceeds the ability to describe it. Finally, as an exercise to bring closure to a cognitive-emotive experience, participants were asked to make a summative statement about the story.

The third interview was an attempt to get to the essence of the care-leaving experience, after earlier exploration for a description of the experience. An analysis of what the individual perceived as being the essence of their experience was possible within a dialogue between each of them and me, but the aggregated data would be coloured by who I am as a person and by who or what they saw me as being. What they could see was a woman at least as old as their parents, and in many cases their grandparents, white, educated, middle-class, Canadian born, and a social worker/administrator with extensive experience working with youth like them. Many of these qualities sharply differentiated me from them. I reasoned that how the participants analyzed their experience in a dialogue with me might be quite different than they would analyze it with their peers, and that the difference would be instructive. I therefore planned a fourth data-collection event, a focused group discussion among the participants.

The dominant assumption underlying my approach to exploring the adolescence transition was that it was essentially differentiated by gender. Therefore I determined that the focus groups would be constituted by gender, so as to accentuate gender differences that might exist, and that they would be asked to discuss gender differences directly. Initially I hoped this might be accomplished by having participants share their narratives with each other, and reflect upon the role of gender in the themes that emerged. As the narratives emerged,

however, it became evident that the stories were sufficiently different, even within gender, that the themes were not readily discernible and the impact of gender in the narratives even less available to articulation. Eventually the protocol that developed was to present findings from existing research on adolescence and to ask the participants to apply it collaboratively to their experience and to render an opinion on its applicability.

The focus group was intended as an opportunity to consider the material under exploration from a fourth perspective that might expose and/or counteract the influence of the researcher on the material. The group milieu, the explicit focus on gender, and the switch from personal experience to academic concepts as the subject matter impacted so strongly on the discussion that the effect was of gathering parallel rather than overlapping data. The protocol evoked very strong gender differences, to the point that it was hard to believe that a similar stimulus was offered to both groups. The unintended outcome was data on the gender-differentiated influence of individual adult/youth versus peer group interaction on maturational issues.

What is evident to me in retrospect is that the fit between the study population and the method used to which I paid such careful attention in designing the first three interviews was totally missing in designing the final data collection event. I was concerned about using a variety of methods in order to triangulate the data, and focus groups seemed a logical addition. They have routinely been used to interpret earlier study results (Morgan, 1988), and are often used with adolescents because of the perceived influence of peers. However, the research on peer influence suggests that prior family experience determines peer relationships (Papini et al, 1990; Shulman, 1993), and specifically that negative family experience, such as this population could be presumed to have had, would undermine their self-confidence and make them wary of adult helpers (Seiffge-Krenke, 1993) and therefore overly dependent on peer influence. I anticipated and incorporated their wariness of adult helpers, failed to acknowledge the ameliorating impact that being a woman of motherly age might be expected to have (since mothers are the favoured parent for consultation for both genders-- Monck, 1990; Nolin & Petersen, 1992; Apter, 1990), underestimated the prevalence and impact of low self-confidence on group dynamic, and was more surprised by gender differences in group performance than familiarity with the literature would warrant (Youniss & Haynie, 1992). The imbalance between study population and method might very well have become evident during piloting, except that this component of the research design was not piloted, for logistical reasons.

In spite of the planning flaws, however, the focus group did operate as a fourth reflexive loop in the research design. It provided an opportunity for the youth to talk to each other about

the adolescent transition, and to do so in strongly gender-differentiated ways. The bonus for me was to focus attention on issues of fit between gender and method, as well as between content and method. The data, viewed from this perspective, support learning for practice as well as for research design.

4.2.6 Generalizability

One of the canons of research is that the findings should be generalizable (Corbin & Strauss, 1990). The dilemma facing me was how, given the limitation of my resources as a solo researcher with limited funding, I could maximize the extent to which my findings could be applied to other populations of youth in care. There were a number of considerations:

- Given a 4-phase data collection design, I anticipated that I could manage a study population of 30 youth if I limited the geography to the area in and around Metropolitan Toronto. A study group of that size would adequately accommodate heterogeneity of several sorts, including age at care-leaving.
- I wanted to balance gender to accentuate gender differences. I considered that a gender sub-group of 15 could still adequately accommodate heterogeneity.
- I anticipated difficulties in locating some potential participants, in particular those who had been out of care for some while, and that there would be gender differences. I thought it likely that girls would be more likely than boys to maintain contact with the child welfare system, since they value social connection more (Mellor, 1989; Youniss & Haynie, 1992). From my experience at PARC, I also thought that girls would more likely be users of resources for disadvantaged or street youth, another site for locating potential participants. (I was wrong.)
- I anticipated that there would be gender differences in engaging participants, once located. I predicted that the protocol would be inherently more attractive to girls, in that girls disclose more easily (Youniss & Haynie, 1992), and that I as a woman might more easily engage girls than boys. On the other hand, I expected that offering payment of a stipend for participation would help both genders equally to participate.
- I needed a mechanism to locate participants within the population from which they were drawn, and to compare those who declined an invitation to participate, and those whom I was unable to locate, with those who accepted the invitation to participate. The mechanism needed to identify differences by gender.

I had a prior work relationship with two child welfare agencies serving youth in Metropolitan Toronto that I felt would support a request for access to their youth for research purposes. I considered but rejected the possibility of drawing a study population from among the youth

served by both agencies, on the grounds that the possibility of agency comparison would divert attention from the care-leaving experience itself to the relative efficacy of different service-delivery cultures. Furthermore, I considered that halving the sub-groups yet again rendered each group too small to be useful.

The Children's Aid Society of Metropolitan Toronto (CASMT), the largest of the child welfare agencies, agreed to my request for collaboration in this research. One hundred and sixty five of their service population met my selection criteria, including slightly more males (86 -- 52%) than females. This number was sufficient to support the random selection of a gender-balanced study sample, even if a relatively high proportion of those selected did not participate. Randomizing the study sample increased the generalizability of the findings. Avoiding self-selected or worker-selected samples was particularly important to my exploration of care-leaving outcomes, since outcome is value laden and reflects upon the individual whose outcome it is as well as others who may feel responsible for it. The potential for bias was evident when some social workers who had randomly selected individuals on their caseloads suggested that others would be better candidates, and by the positive response of youth to being chosen by having their name picked from an envelope, rather than because of their behaviour or characteristics.

A limitation to generalizability of particular importance to the question of the Canadian care-leaving reality is that Metropolitan Toronto is significantly different than most other parts of Canada, and the child welfare population and the care-leaving experience would reflect that difference. Within Metro Toronto, the child welfare population served by CASMT is itself a sub-set of the entire child welfare population. Child welfare services are delivered by (at the time) three child welfare agencies whose catchment populations are defined by religious affiliation, which has cultural and racial implications. CASMT has the residual and therefore most broadly-defined population; it serves families who are not Roman Catholic or Jewish (and later, when a fourth CAS was mandated, Aboriginal).

Metropolitan Toronto was (at the time) an amalgam of six boroughs, including the City of Toronto. Together they have a population in excess of three million people. The Toronto CMA, which I selected as the contextualizing population, includes most of the surrounding five municipalities, each of which delivers its own child welfare services. Because of the location of suitable placements, many CASMT children are placed outside the CASMT catchment area but within the CMA. The CMA has four million people, which comprises 14% of the Canadian population and 39% of the Ontario population (Orok, 1993). This includes the majority of immigrants to Canada, as well as many migrants from elsewhere in

Canada. In 1991, 38% of the Toronto CMA population, 1.5 million people, were immigrants (Badets, 1993). The migrant and multi-cultural nature of the Metro Toronto population is reflected in the CASMT population. A sample drawn from this population, therefore, would be much more racially and culturally varied than elsewhere in Canada, except perhaps Vancouver and Montreal.

An additional limitation to generalizing the findings of this research to Canada as a whole is that child welfare is a provincial jurisdiction, and is therefore delivered within twelve different legislative frameworks. The eleven rooted in British tradition (the twelfth, Quebec, is rooted in the French tradition) are more alike than different with respect to care-leaving legislation and regulations (Martin, 1996). Nevertheless, the differences that exist in legal structure and cultural milieu must be considered in applying the findings of this research to other child welfare populations. Furthermore, CASMT is a very large organization compared to most Canadian child welfare delivery services, and the influence of this must also be considered in generalizing findings.

4.2.7 Summary

Each of the five questions that I intended to address in this research covers a very broad range: the geography and culture of an entire country, an important developmental transition, the effect of gender, the outcome of a multifaceted institutional intervention, and child welfare at the point of practice. Together, the five questions proscribe a huge area that a single research project could not be reasonably expected to address. And yet, the large picture is an essential frame. Without it, we risk losing sight of the right of every individual to effective assistance in achieving optimal development and full citizenship. The research questions are not meant to be answered definitively, but only to guide the investigation. The investigation is, at base, an on-going consideration of the relationship between the parts and the whole. In this section, we have considered the relationship between the research questions and the research design.

The design calls for 30 participants, 15 of each gender, randomly selected from among a study population of 165 youth who reached 18 years of age the year before data collection commenced, and who were in the care of a large Canadian metropolitan child welfare agency after their 16th birthday. Each participant would be expected to attend four data collection events, the first the completion of the Census 1991 Long Questionnaire presented on a notebook computer, the second the direct scribing of a self-narrative about how the adolescent transition was experienced, the third the collaborative analysis of the narrative,

and the fourth a gender-specific group discussion of gender differences.

I perceive research to be praxis, action and reflection to change the world. The research is designed to be useful to the participants, as well as to myself as researcher, and to those who have access to its conclusions. The generalizability of the conclusions that can be drawn from this particular study is enhanced by having randomly selected participants, four protocols for data collection which include four reflexive loops, and full disclosure of the procedures used in gathering and analyzing the data, including the input of the researcher on the same plane as the researched. Generalizability may be constrained by the use of a sample from a metropolitan centre culturally different than elsewhere in the country. By the same token, the diversity of race and cultural backgrounds included among the study participants may enrich the applicability of the qualitative data.

4.3 PILOTING THE PROTOCOLS

In order to identify and address problems in the planned protocol before beginning data collection, I tested it on seven youth, five girls and two boys. The testing was sequential, that is, I asked each participant for feedback after each session and modified the protocol to incorporate the learning, and used the modified version with the next pilot participant. I discontinued piloting when I was satisfied that the protocols for the individual sessions were good enough to proceed with data collection. A pilot run for the group protocol was postponed until I had a clearer idea of what the focus should be. This didn't occur until well into data collection, by which time the pilot participants were difficult to locate and engage, with the result that the group discussion protocol was never piloted.

I located the pilot participants through enquiries with prior colleagues in two programs that served youth who had been involved with child welfare. Girls were much more readily available than boys, and I shared a network of mutual acquaintances with many of them. The pilot process was therefore not a fair test of engagement issues, especially with boys, with whom I anticipated -- and in the pilot phase, experienced -- the most difficulty. The boys were also less helpful than the girls in critiquing the protocols. I concluded from the pilot experience that engaging boys in the project was a real problem that should remain part of the research proper, rather than resolved in advance. I thought engaging boys would require a higher level of skill and effort from me as a researcher, but that the protocol as piloted was robust enough to withstand the challenge. This turned out to be the case, as will be discussed in detail later.

4.4 THE FINALIZED DESIGN

4.4.1 Selecting the sample

CASMT made available a computer-generated list of files of youth born in 1976 who were in care in 1992, the year they turned 18, that included file number, gender, date of birth, date of last entry to care, and date of last termination of care where that had occurred. From this information, I could identify those who were in care after their 16th birthday, a total of 165 youth. These constituted the study population or sampling frame. These data were analyzed for gender differences.

From this sampling frame of 165, I randomly selected potential participants by drawing 15 slips of paper containing file information from each of two envelopes, one for each gender. The agency provided the names of current social workers for potential participants whose files were still open, and made closed files available in microfiche form. Unfortunately, because of a backlog in preparing files for archival storage, most microfiched files included only medical information.

When I was unable to locate a potential participant, or s/he was deemed inappropriate or declined to take part in the research, another file number was selected from the appropriate envelope. A total of 48 file numbers were drawn in order to achieve a sample of 15 males and 15 females. The specifics of the search and engagement process for the 18 youth, 13 males and 5 females, who were selected but did not participate was carefully noted and analyzed. The sampling frame of 165 was compared with the 30 participants to ensure that they did not differ in any significant way with respect to the computer-generated data.

4.4.2 Engaging the participants

The engagement process was quite different for youth whose files had been closed and those whose files were still open. The latter had negotiated to receive extended care which entailed regular contact with their social worker. CASMT administration sent a memo to all supervisors and social workers whose caseloads were likely to include a youth in the study population, informing them of the nature of my research, requesting their cooperation, and advising them that they could share information with me as if I were an agency employee, for the purpose of locating and engaging participants. The engagement process for potential

participants whose files were open started with a request to the current worker that they ask the youth to call me to discuss participating, or get the youth's permission for me to call him/her. Although the workers were similarly informed, their understanding about and enthusiasm for the research project was varied, which influenced how they played their gate-keeping role.

With most closed cases, I began the search with contacting the last recorded worker or supervisor. Sometimes they had informal contact with or information about the youth, and/or were able to suggest someone who might have more recent information. Sometimes I contacted foster parents or parents or other family members, using information from the file. Family members also played a gate-keeping role; in one case a relative said she knew where the youth was but would not put me in touch with him because she didn't want him to be upset by talking or thinking about his past. Where youth were known to be oriented to the street, I queried the agencies that provide service to this population. Some agency staff were constrained by confidentiality, but others were able to speak more freely, and to offer to pass along information, my card, a letter if/when the youth appeared. Often other youth shared information, particularly when the individual was known to have left town.

The gate-keeping role was even more powerful in cases where the child welfare file had been closed but the youth was known to be involved with a mental health or community agency that could not even confirm a connection with the youth because of confidentiality constraints. In some cases, I negotiated directing a letter to the youth through the agency, but in no case did this achieve contact. I was equally unsuccessful with getting information from the welfare department, although other government agencies were more cooperative (e.g., Workman's Compensation Board). Although information about adults in the prison system is theoretically public information, in no case was I able to locate individuals through this route. I was able to get a court transcript where I had specific information about the date of trial and presiding judge, information included in newspaper coverage. The telephone directory and information system was of limited use, in part because of the sheer size of the city, the transience of the people I sought, the probability that a phone would not be listed under their name, and, not least, their discomfort with unexpected phone calls. In one case, a friend with a West Indian accent was able to find a youth of Caribbean background at the same number at which I had been told she was unknown.

In the initial contact with the potential participant, usually by telephone, I explained that they had been selected from among youth their age who had been in CASMT care by pulling their name out of an envelope, and that I wanted them to help me in my study of how young people thought about and managed the transition to adulthood. They were asked to commit

to four meetings within the next half-year or so, for each of which they would be paid \$20 (£10) and out-of-pocket expenses such as transportation or child care. Their concerns were addressed as they were identified, and sometimes several conversations took place before a final decision about participation was made. In a few situations where youth did not have telephones, the invitation and agreement to participate was conveyed through their social worker, who sometimes also introduced me at the first meeting. The selection process took place over four months.

As each participant agreed, s/he was offered a meeting in the very near future, and a choice of venue at his/her home, my home office, or a neutral location (e.g., CAS, agency or school office). Two-thirds of the interviews occurred in the homes of participants, a slightly higher proportion among the girls (71% girls, 62% boys); 12% took place in a neutral place, and 22% in my home office. In some cases the choice of venue was dictated by logistics and convenience (e.g., me traveling out of Toronto by car rather than them coming into Toronto by public transportation, parenting youth avoiding the trouble of taking baby out), sometimes by caution (e.g., two boys and one girl whose workers advised me/them to meet on neutral territory invited me to meet them in their homes for subsequent interviews), and sometimes because there was no alternative (e.g., youth in jail). Those who met in my home office, which is readily accessible by public transportation, were sometimes curious to see me in my context, but more often were clear that their homes were not places to which they were comfortable inviting people. More interviews with boys than girls took place in my office (26% boys, 18% girls.)

Youth in jail posed a special problem. With those who were incarcerated briefly, we simply organized the interviews to take place when they were in the community. Three youth, however, were in jail for the long term, one male in a Young Offenders unit in Toronto (chosen name, "Joey"), a female in an adult unit in the same institution (attributed name, "Susie"), and a male in an adult unit outside of Toronto (chosen name, "007"). The negotiation for contact took place with two different administrations. The institution outside Toronto had no difficulty arranging for me with my computer to meet with 007 in a private office. At the institution in Toronto, the social worker attached to the Young Offenders' Unit readily arranged for me to meet privately with Joey but needed permission from senior administration to include my computer. To expedite matters, the social worker arranged for Joey to complete the first interview by telephone from his office, thus avoiding the usual 5-minute limit to inmate telephone conversations. Staff in the adult female unit in the same institution (custodians rather than social workers) could not offer anything other than the usual visiting arrangement (an echoing room with 6 inmates simultaneously talking by telephone with their

visitors who are separated from them by a glass wall, limited to 20 minutes). They were very cooperative in conveying my request, in detail, to Susie and returning indication of her interest in participating after her charges had come to trial, which she and staff anticipated would happen imminently. Permission to bring a computer into an interview, however, could only be granted by senior administration. After some delay, the administration determined that such permission was the mandate of the departmental research branch, and involved them approving my research design. I submitted the extensive documentation they requested and was denied permission, on the ground that my design was unacceptable (their response is in Appendix E). I was unable to find a way to have this decision appealed or modified. This also rendered further meetings with Joey impossible.

I retained these three youth in my sample, however, because Joey and 007 had begun the process, and 007 and Susie were likely to be transferred to a federal jurisdiction when their charges came to trial, and I could then negotiate with a different administration. I met personally with 007 and Susie to affirm their agreement to this plan of action. As circumstances unfolded, however, Susie's trial was repeatedly delayed until December 1995, and when it finally took place, she was sentenced to two years less a day, which meant she remained in provincial custody and therefore would not be permitted to participate. Because of the timing, two months after I had interviewed the last of the other participants, I chose not to select a replacement. Susie is uncomfortably (for me) visible in my study as the participant from whom I have no direct data. The CAS file was very limited, but I acquired a copy of the judge's reasons for sentencing from which answers to most of the first interview questions could be gleaned. After much consideration about the principle of 'information from' rather than 'information about', I opted to use document-based data in a very limited way, including only incontrovertible facts. I had no concern about including Joey's data, even though his data was given over the telephone rather than in a computer-mediated interview.

007 was sentenced to a federal penitentiary several hundred miles away. I advised him by telephone and by letter of the process that he needed to initiate in order for me to be approved to meet with him for research purposes, as well as conveying my request directly to the Warden of the institution, but received no response.

In the end, one of the participants, Susie, gave me no data; five including 007 and Joey gave me first interviews only; and 24, 12 of each gender, completed all three individual interviews. An example of a complete individual data set is included in Appendix F. The group discussion was attended by 8 girls and 6 boys.

4.4.3 First session: Agreement to participate and the Canada Census 1991 Long Questionnaire

The goals of the first meeting were to clarify expectations and responsibility in this joint endeavor, to gather information that located participants within their age cohort, and to establish some familiarity and comfort with them working with me on the computer.

The interview began by discussing the research project again in as much detail as participants wanted or needed to be informed and comfortable with that to which they were agreeing. We both signed a consent form (included in Appendix A), in which they agreed to attend all four sessions (modified for youth in jail for whom that was known to be impossible), chose a *nom de plume* and agreed to use only that name in relation to the research process and data, as did I, in order to protect their rights and those of whom they might speak. They also agreed to maintain confidentiality as agreed among the participants who attended the discussion group, and to allow me to share a picture of them so that each participant could know, without real names being used, who was attending the group. This was a complicated issue that, in the end, posed a different problem than was anticipated. The original concern was that because the participants were the same age and had been in care of the same agency, they might know each other and/or have acquaintances in common, a shared history that might have strong emotional elements. Therefore, I felt they should know in advance who might attend so they could consider in advance what they wished to share and/or make a good decision about attending. In spite of quite extensive consultation, I overlooked that a connection could be made between real identity and chosen name if the participants used their chosen names in the group discussion and knew each other in real life. Participants identified this error as we approached the group meeting. The final resolution was to use real names in the group discussion, which, ironically, put both myself and the participants in breach of the initial consent agreement.

After this sometimes quite extensive preparation to work together, the participants and I completed the Canada Census 1991 Long Questionnaire (see Appendix B), with two additional questions about their child welfare experience, presented on the screen of a notebook computer. This interview worked quite well as an introduction to direct scribing. The participants had to look at the screen in order to see the questions and choice of responses, so the convention of sitting beside me and instructing me seemed a reasonable request. They found the material thought-provoking, somewhat to my surprise. Some offered that

they had never thought about themselves in that detail before. Many were surprised to find how little they knew about the people with whom they shared living space, and they mused about whether that was "normal" and how it was the same as or different than previous living situations. The responses to the added questions about child welfare were more-or-less direct scribed, thumb-nail sketches of their time in care and the moves they had made since leaving their last child welfare facility. I prompted for factual detail (what age, how long, what was the relationship with the people they lived with) without scribing my questions, except where generalizations or categorizations were made (e.g., a street-oriented youth who couldn't recall how many places she had lived in, but counted those that she "could actually call home").

Almost without exception, the participants enthused about the technology; they loved my note-book computer and portable printer. It provided some with social status points, for example, a participant taking a phone call during a subsequent interview said she couldn't talk just then because "the lady with the cute computer I told you about" was there. Participants were offered copies of their completed questionnaires. Some refused because they didn't think it was important, others didn't want to have the material around in case it fell into the wrong hands, and others took it to check the facts they had given about the people they lived with. One or two took a copy just to see how the printer worked.

4.4.4 Second session: Copyright agreement and telling a narrative

The second interviews, which took place two to six months after the first, started with signing a joint copyright agreement, making explicit the assumption that the written text that was about to be created was dependent on the different but equal contribution of the participant and myself, and that each of us was free to do with it as we pleased as long as the agreement signed in the first interview, to not use real names, was honoured. Each could keep whatever gain ensued, and each was legally liable for his/her actions. (See Appendix C.) My reason for including this complex and legalistic step was a sense of jeopardy in case the material produced was misused by participants and became the subject of legal action that expanded to impact on me professionally or financially. I also wanted to be legally free to use the material beyond my doctoral thesis without having to locate the participants and get their specific permission. The reaction of the participants was surprise at how much trouble I'd gone to ("They make you do this stuff at your school, eh?"), blended with indulgence and a dawning sense that the stories they were about to tell could possibly be valuable.

I then instructed them on narrative, point of view, and my definition of the adolescent transition, somewhat as follows:

What I want you to do today is to tell a story about the adolescent transition. Say that this (drawing a large ellipse) is The Larger World, and this (drawing a smaller circle within) is Adolescence. The Adolescent Transition is the path from Adolescence, which I am defining as when you were the responsibility of someone else, to The Larger World, where you are responsible for yourself. The Transition is a process, sometimes quite a long process, that goes (drawing a line from within the smaller circle into the larger) from early in Adolescence, sometimes, to far into adulthood. It isn't just stepping over the fence (dots on either side of the smaller circle), but a much longer journey. And it isn't a one-way street, either; one sometimes slides back into being taken care of when things get tough (drawing an arrow head on the beginning of the line) and then goes ahead again, is more independent, when things are easier (adding arrow head to other end of line). And that might happen any number of times. So *that* (circling the double-arrow line) is what the story I want you to tell, is about.

Now I want to say something about telling stories (writing "I", "me" and "they" beside the diagram). "I" is the person who tells the story, called the Narrator. The job of the Narrator is to choose from among all the things that *could* be included in the story, what things *will* be included, and *how* they will be included. The Narrator is the boss: s/he has absolute authority about how to build the story. Because *you know* that there are many ways to tell the same story and each, although different, is still true. For example, if you were going to tell a story about what happened when you were out last Friday night, you would tell it differently if you were telling your (opposite sex) friend than if you were telling your (same sex) friend, and differently again if you were telling your (adult friend/authority). But all of them are true, just differently true. So the Narrator's job -- that's you -- is to figure out what of all the things you could put into the story you will put in, and how you'll string them together to make what points. As much as possible, I'd like you to tell the story as if you were talking to yourself as an audience. So, that's the "I".

The "me" is who the story is about, which in this case is also you. You are the subject of the story, as well as the teller of the story. About "they", I want to say that other people play a part in stories that we tell about ourselves, sometimes by what they say or do in real life, and sometimes by what we think they might or would like to do or say. Even when things don't happen in real outside life, they influence us. And that too, what "they" did or didn't do, can be part of your story. And truth is whatever you as the Narrator says it is, from your point of view, whether or not other people share your perception.

So the story I would like you to tell now, as if you were talking to yourself about yourself, is how you managed the adolescent transition, from being the responsibility of someone else to being responsible for yourself. I'm going to direct scribe the story, type whatever you say. You should watch the screen and correct me if I make a mistake, or tell me if you want to take back or change something you said. When you've come to the end of your story, I'll ask some questions to make sure I understand what you mean by what you say. I'll ask the questions on the screen as well, so that we are both on the record in the same way.

Often the first entry was a request for clarification or prompting, and sometimes there was brief testing to see if the rules operated as I had described, and/or working out an

accommodation for limited literacy. Some participants, probably mostly those with reading deficits, spoke very quickly at first and/or didn't watch the screen. This put me at a disadvantage but didn't advantage the participant, a lose-lose situation. I modeled a win-win alternative by motioning with a frantic hand to slow down and echoing the oral while typing the written word, thus establishing a relationship between our respective contributions that depended differently but equally on each of us doing our part as well as we could. When we got out of sync, I read *soto voce* what I was typing to indicate where my work was relative to theirs. I asked for confirmation that I had captured their words accurately in catch-up situations by pointing to their words on the screen while reading with a question in my voice that continued when my hands returned to the keyboard, thus pacing the participant.

These approaches allowed participants, even with very poor literacy or attention-focusing skills, to become competent partners. With very few exceptions, they settled into thoughtful production of dense, rich, eloquent material. They progressed from instructing me to erase oral fillers such as "y'know" and "like" to speaking without them, becoming comfortable with silences during which they organized their thoughts. Some spontaneously returned to themes to clarify or develop them, others responded to or asked for my questions to do so. When my questions explored absences in the story, themes that I expected to hear but didn't, most participants responded positively, either to say that they had chosen to not include that material, and sometimes to explain why; or that it had not occurred to them to include it, and usually to add it; or that it simply wasn't part of their experience.

Participants were left with a hard copy of the material, both their story and the dialogue. Inevitably, as the printer worked, the 'interview after the interview' took place, as if, once started, the narrative process continued. Sometimes I urged the participants to get this material 'on the record' next session. Other times the post-scribing session turned unmistakably into counseling, in which I offered resources that might be useful and/or they asked for general feedback of what I had heard, or for my opinion about something in particular. Initially this blurring of the researcher and social worker roles caused me great angst, until I could incorporate this exchange as part of the effect of the research/researcher on the researched that is itself a legitimate contribution to what can be learned.

4.4.5 Third session: Analyzing the narrative

The third meeting was scheduled, when possible, within one or two weeks of the second, at the suggestion of pilot participants, who reported a sense of unfinished business, a

preoccupation, that dragged the time between the two interviews. A second reason was to reduce the probability that the participants would move and have to be found once more. In the third session, we approached the narrative as a piece of written text and analyzed it in various ways to ensure that it represented as accurately and thoroughly as possible what they meant to say about their transitional experience, before the story is launched, independent of its author, into the world. Mindful of the impact that telling a story has on the narrator, the session ends with a closure and "re-packaging for storage" exercise. Again participants received hard copy at the end of the meeting.

Most of the third session work was on screen, much of it direct scribed. We started with my reading their story aloud and making any typographical or capitalization corrections that missed the electronic edit at the end of the previous session. The participants were encouraged to bring hard copy of the story to the session, and many did. Some were dog-eared from use, others pristine. Several participants reported that they had shared their story with others, often as the occasion to discuss life events, sometimes to elicit a reciprocal story-telling. One participant's girlfriend had taped a photograph of him on the file cover, and tucked inside a plastic bag containing a lock of his hair.

Participants were then invited to edit and/or amend the story. Some limited their editing to eliminating oral fillers and changing "yeah"s to "yes"s. More added substantive material, sometimes things that had come up in the post-scribing part of the prior session, sometimes things they had remembered in the interim. Sometimes I had questions that had emerged. This was direct scribed.

Then I explained that all stories had a form, often a simple story arc, and participants were asked to identify the beginning, middle and end of their narrative. This also gave some indication of the chronological scope of their view of the adolescent transition, as imaged in the double-headed arrow. For some, the journey started very early, when they realized they were responsible for younger siblings or that the family situation was seriously troubled. For others, it began with coming into care and/or realizing that they could not be confidently secure that the child welfare system would act in their best interests. Others describe a personal epiphany; a girl "hit rock bottom and realize(d) things have to change"; for a boy who resented being "thrown out" at age 15, it "just seemed that I turned into the person that I despised. And I kinda wished that I was like a kid and not realized any of this because I wouldn't feel that pain." On the other hand, one participant stated very clearly that she was not independent and would not be for some while, so for her the journey had not begun. Most felt the end of the transition had not yet happened, although some identified current

events, (e.g., becoming a parent, settling into a stable place) as the beginning of the final stage.

Participants were then asked to name the events, defined as "things that happened, either externally or internally", that they had selected to carry their narrative. These were listed as named, briefly, for example, "came into care", "got moved to a foster home", "went to jail", "son was born". The number of events named ranged from 8 to 23, reflecting less the scope of their story than personal preference for detail and capacity to categorize.

Next, I explained that events in a story, as in life, can either help or hinder the subject in achieving his/her goal, that the strength of the force can be big or little, and that how one evaluates the impact of the event on the overall story can change over time. After giving an example to illustrate what I meant, I asked participants to rate each event on a scale between -3 ("a major drag") to +3 ("a major bonus"), and to say how the rating had changed over time if that applied. An example might be that moving out of a placement one didn't like could be seen initially as a strong help in getting on in life, but the problems one encountered living on one's own could make it in retrospect seem to be an important drawback in achieving goals like going to school, so perhaps in hind-sight that event would be evaluated as a less positive or even a negative force. I copied electronically the participant's list of events and interjected their impact responses, direct scribed. Few participants had difficulty in carrying out this instruction, although they approached it in various ways. Some participants seemed to be learning something about themselves as they went through the exercise, and others responded as if relating something familiar. A few expanded their stories as they realized that understanding how one event was experienced required the inclusion of another. More frequently, events were conflated as themes unfolding over time. For example, a series of living situations which may have had different problems but were all unsatisfactory became one event called, perhaps, living in the community, that was given a strong positive at the outset, and a negative as problems became evident.

I then explained that the research protocol was drawing to a close and that the time was nearing when the story would become independent of its author and exist on its own in the world. In preparation for this, since we had just pulled it apart and examined it in detail, I wanted them to "re-package" their story for storage and safe-keeping. I again copied the list of events on the screen and asked them to select from it the six most important events, from that the four most important, then the two most important, and lastly, the most important event, from a personal and private point of view. They were asked to say only the numbers of the chosen events, which I scribed, not their reasons for making the choice. When they

made the final selection, I asked them if the event they chose, reading its name, felt like it really was the most important event. All affirmed that it was, and most found this part of the protocol an interesting and thought-provoking exercise. The contradictions identified by their selection of events gives some insight into the complexity of their problem-solving. For example, a participant selected the birth of her only sister when she was 9 and first came into care as most important, over the birth of her son who had just gone into care. Conversely, a male participant chose the birth of his son over being kidnapped at age 8 from a mental health institution by his father. Another participant selected feelings of blame at child welfare staff, over his drinking problem. Another selected a long-term problem with shoplifting over having to leave on his 18th birthday one of the few homes in a wandering life that had suited him.

Finally, as a closing ritual, I invited each of them to say briefly what their story meant, and direct scribed their response. They were invited to think of this as a benediction as they sent it out into the world, or as the introduction they would make if they were reading their story to a live audience, or as what they wanted to say about the intent of the story. Participants found this challenging but interesting. Many gave it serious thought, although a few appeared a bit flippant. Some thought for some while and produced rich tinctures, others after similar thought gave what appeared to be remnants that escaped the censor's scissors. One young man, for example, ended a highly detailed account of his time in and since care with simply,

"This is a story about change, about now knowing the wrong paths to take."

A young woman presented this extensive precis:

"This is how I became me, today. Or at least how my perspective has been coloured. I was in a difficult situation, and then I got out of it and into another one, and so on, until I found the right place for me to be in. Where I feel I should belong is very far from where I began. I am now in a place that I didn't even know existed until I was about 15, but I now call it home. I don't know if it's modern society, or just society in general, but in my experience I have found it is best to be able to make choices for yourself. Sometimes your original blood relatives may not know how to care for you as well as complete strangers. I will always love my parents, unconditionally. They are not bad people, just a little confused about themselves and how to raise their daughter. In that way, it is ironic that my god-parents, who don't have any children, seem to be handling me better than my original parents. I guess because everything messed up when I was young, I was at the point where a lot could be damaged, and therefore a lot had to be fixed, which led to more complications."

Most of the participants spontaneously indicated that they had enjoyed taking part, some offering to meet again even without being paid. They were invited to attend a gender-specific focus group meeting up to six months hence. The prospect of meeting other participants drew a mixed response, and in the end, only half attended the group discussion. In some

cases, they were not free to come (in jail, unable to get child care, working), and some faced quite a lengthy journey to attend, but why others who indicated intent to come did not arrive is not clear. Almost certainly some of these de-selected themselves at some level of awareness.

4.4.6 Fourth session: The discussion groups

The two group meetings were scheduled to take place the same day, boys in the morning and girls in the afternoon, with a lunch for all participants provided on site. In exchange for helping me with transportation expenses, which were significant because the participants were so far-flung, CASMT negotiated the opportunity to discuss with the group during the lunch break some recent changes to the agency Mission Statement with respect to long-term care.

I presented the same discussion protocol (see Appendix D) to each group. It consisted of displaying the Adolescent Mandala and directing one or two questions in each sector based on gender differences as described in the literature and/or raised by my experience while collecting data. It was a very ambitious agenda, both in length and complexity, with which each group dealt very differently. It provided an opportunity to discuss their perceptions of gender differences directly, which previous interviews by and large did not. The group discussion was co-facilitated by a young (early 30s) colleague from a care background. Her role during the group discussion was primarily to monitor the audio-taping equipment and to keep a record of speaking order, which made transcription much more efficient; she participated a little in the discussion. She also consulted with me to assure the accuracy of the transcription.

The boys' group was smaller than the girls' and more pressed for time, as it started late and was truncated by lunch. The core group consisted of 5 individuals, including two who spoke very little. Both the non-speakers were cognitively handicapped, one by developmental delay and another by a memory that, he says, "doesn't work so good" and is "embarrassing", and which indeed appeared in the individual interviews to make some quite odd connections. A sixth participant arrived an hour into the discussion and took part enthusiastically and appropriately for a half-hour, until he had to leave. A seventh boy arrived for the final few moments of the group and attempted to negotiate (unsuccessfully!) to make his contribution to me individually over lunch in order to qualify for his stipend.

The boys took part in the group discussion very carefully, directing their comments to me rather than to their colleagues, in a 'spoke in wheel' pattern. Spontaneous circular

discussion occurred only when tangential material was under discussion (e.g., the relative morality of bats versus fists in gang fights, the relative value of gold versus paper as legal tender). They frequently presented extreme and harsh opinions, insensitive to other perspectives that might be in the group (e.g., re substance abuse, parenting difficulties). Sometimes the positions they adopted were in contradiction to the opinions and attitudes they had offered in individual interviews. They had difficulty discussing gender differences generally, agreed heartily that it was not reasonable to expect them to understand or explain a female perspective because...they were not girls.

The boys acted as if they did not enjoy the group very much, as if this kind of work were difficult and unpleasant. But when the girls arrived, a melee of giggling and yelling and hugging and passing around the attendant babies, the boys became much more animated and enthusiastic. Two sets of girls knew each other and some knew or knew of the boys through mutual acquaintances. The boys were unknown to each other and didn't appear to even consider investigating the possibility of indirect connections, whereas the girls were very assertive in this regard. Most participants took an active part in the agency consultation, particularly those who had issues to air or complaints to make. The exchange was quite free and frank. The boys, as the lunch-time activities drew to a close, offered to stay and "help" the girls with their discussion group, and some of the girls were interested in this possibility, but I was not.

Eight girls in all attended for the group discussion. Two brought their babies although I had specifically asked that they make alternate care arrangements for which I would reimburse them (motivated by concern for the quality of the recording). One mother, after taking a very active role in the agency consultation and collecting her stipend, left before the group discussion began in order to take her baby to a medical appointment. The other mother was from out of town and had no child care alternative when the baby's grandfather reneged on his agreement to help out, so her baby joined the group (and did, in fact, impact significantly on the quality of the recording!). One participant joined the group a bit late but readily integrated.

The girls' group had the advantage of interacting socially and intellectually before they began the protocol. They were less pressed for time because they started early and went a bit late. They felt advantaged by not having had to do this "thinking work" in the morning. They valued focus and competence from the outset, were thoughtful and sensitive in their opinions, and spontaneously adopted the very democratic procedure of hearing from each participant on each issue before moving on. They acknowledged and incorporated prior comments in

their responses. They had absolutely no difficulty in hypothesizing and discussing male perspectives. With one exception (who became upset and excused herself early), they enjoyed themselves and would have liked to continue longer.

4.5. ANALYSIS

4.5.1 The quantitative data

Data from the CASMT computerized data base was entered into SSPS/PC for analysis with respect to gender differences among the study population. In the course of examining other data in the 48 cases selected for participation, some problems affecting the quality of the data became evident. For example, sex was incorrect in one case, the admission date was in the birth date field in another, and several had closure dates that varied considerably from the perceptions of workers and/or youth. Admission dates tended to be more consistent with other information, and where there were differences, they could often be adequately explained. The findings of this analysis are discussed in length in the next chapter.

Data from the Census '91 Questionnaire were collated manually. I did not use SPSS/PC because I did not anticipate doing statistical analysis more complex than percentages either within the study sample or between the sample and the Census cohort. Within the sample, the identity of the person with the characteristic was often more important than how many shared that characteristic. Analysis of the Questionnaire data straddled quantitative and qualitative strategies.

The Census data was made available to me, free of charge, by the Centre for International Statistics, a not-for-profit organization in Ottawa. It is derived from the Statistics Canada public use sample tape, a 2% sample of Long Form respondents, for youth aged 18 and 19 in the Toronto CMA. In the end, I used almost exclusively the data for 18-year-old youth because all but one of the participants was 18 when s/he completed the questionnaire. Initially my rationale in using Toronto CMA data was that the youth would live in that area. As the study unfolded, that tended to be far less true than I anticipated; in the end, 50% of those who contributed full data sets lived most of the time in Metro Toronto, 21% in the Toronto CMA, and the remaining 29% further afield. A more precise breakdown follows:

Table 1: Geographic Location of Participants

	Toronto	CMA	Outside	Total

Full sample: female	10	2	3	15
Full sample: male	6	5	4	15
Totals	16	7	7	30
Full data set: female	8	1	3	12
Full data set: male	4	4	4	12
Totals	12	5	7	24

While there may be some question as to the appropriateness of using Toronto CMA census material, the more difficult question is what census tract might be more appropriate. The participants who did not live in the Toronto CMA lived in quite divergent settings, from small villages (population 3000) to small cities (population 80,000 to 180,000) to larger cities (population 325,000) in several counties. Furthermore, the participants were very mobile before and during data collection, and quite likely beyond, rendering geographic placement somewhat irrelevant. In analysis, I sometimes invoked information with a broader base, such as the age cohort in the country or in the province.

4.5.2 The qualitative data

Qualitative data was analyzed using NUD*IST (an acronym for Non-numerical Unstructured Data Indexing Searching and Theorizing, but itself memorable!), a computer software package designed to assist qualitative analysis. Because I was learning the program in the course of analyzing thesis material, to a large extent by trial and error, my use of the program was far from efficient. I used it primarily to sort material quickly, thoroughly and resource-efficiently (i.e., with minimal paper), but did not approach using the upper reaches of the program's capacity. I do think, however, that I have a good start at understanding how they might be used in another project, which relates to the art of conceptualizing coding relationships. As well, I underutilized NUD*IST as a record of theorizing (although the record of theory testing is evident) because my insights often developed away from the computer screen, and were committed first to pen and paper.

Data from the open-ended questions added to the Census '91 questionnaire, the second and third interviews, field notes, and group discussion transcription were introduced into NUD*IST as source documents, 149 documents in total, of varying size. The basic 'text unit' (NUD*IST terminology for coding unit) can be coded in as many ways and sorted in whatever combinations desired, with source information embedded. I elected to use the paragraph as

the text unit. In the initial coding pass, I allocated to each participant (and individuals selected who did not participate) all data by and about him/her from whatever source. In the second coding pass, I identified material relating to 9 subject areas: parenting, offending behaviour, drink and drugs, productivity (i.e., education and employment), health, sexual abuse, religion, social networks and migration. Frequently data were coded in more than one category, for example, if a participant said that having a baby had brought her closer to her mother, I would code this under both parenting and social networks. Later, I coded for 'beginning' statements, and housing data from all sources (including field notes, which were a rich resource because of the number of home-based interviews). Male/female sub-sorts were readily achieved in any category.

Finally, I coded for data that reflected Gilligan's 'caring' and 'justice' constructs, and when that proved unsatisfactory, the obverse, 'problems of attachment' and 'problems of inequality'. The final two sorts on this theme, exploring gender affiliation and content association, were carried out with hard copy, for reasons I don't fully understand. I had by then almost committed to memory much of the data and could lay my hands on it faster than I could find it in NUD*IST, so that the program was an impediment rather than an aid. Also I was using more data than had made it into the rights/caring sort, including abstractions that were not included in the computerized material but arose from my experiences with the participants and a reconsideration of my observations of and thoughts about them from a new perspective. Finally, I had given up hope of proving my point by displaying my data, since my point existed in a gestalt of the data, and could be achieved in joining certain points and disregarding others, as one does in discerning a constellation in a starry sky. When all the data was given equal profile, I lost the gestalt. It is very likely possible to use NUD*IST to solve this type of problem, but I couldn't abstract my thought process enough to juxtapose it to the program's orientation in order to figure out how the program could be helpful.

The shortcomings of a computer program as a research partner become very evident in the later stages of analysis, as do the difficulties involved in a qualitative researcher working alone. The rules that bind quantitative research also free it for application, with limited consultation, to new data: a number is a number, with limited and predictable variability. Within qualitative analysis, however, there is much less agreement about the language and the logic. Without a second cognitive presence equally familiar with the raw data, dialogue mediated by that reality is unavailable, debate is shallow, confidence in one's conclusions is impossible. One can be creative, but one cannot be confident that a private view of a private world will prevail in the larger world. This brings us, of course, to dissemination.

4.6 DISSEMINATION

Coming as I do from a social action and community organizing background, my original intent was to partner with the participants to amplify their words. I envisioned the possibility of participants presenting their material directly to each other and to service delivery and social policy people. However, I misapprehended how much time would pass between data collection and data dissemination. Had this been a more collaborative effort and had I been more self-confident, I think this might have been foreshortened. I did not anticipate the geographic scatter and transience of the participant group, although even at this distance from data collection, I expect a small core from among them could be re-invigorated for a further role. CASMT has a history of supporting this kind of direct feed-back from service consumers, but it has not to date indicated interest in hosting such an event, perhaps because, like most social agencies in the current political environment, it has much more pressing issues at hand. I do not rule out the possibility of such a dissemination event, although I am not optimistic.

The other route to amplification of muted and scattered voices is through the written word, which this project is well designed to do. The basic issue for me, however, has been *whose* words: their words about their world, or my words about their world? In the end this document, which is my treatise, must be my words about them. But I am still deeply committed to bringing their words, whole, to a larger audience. I fantasize about a small book of their narratives and analyses, including their dialogue with me about those stories, which I think might through its meanderings lead readers to new understandings. Its value would be in demonstrating a way of thinking into issues that varies from the usual academic or professional approach. Thoughts, like rivers, follow the contours of their geography; I was frequently surprised by how the thoughts of participants flowed and intrigued by what that might convey about their interior geography, and I expect others might be similarly enlightened. An article that consists of little more than the narratives and dialogue with me of two participants, entitled *Tales of Transition: The Stories of Julie and Tim*, was published in *Community Alternatives* (1997) 9, 2, a publication based in Minnesota. Responses of readers may give some indication of how useful the raw narratives are.

In more traditional ways, some of the conclusions of this project have been shared with the professional and academic community. The quantitative material included in the next chapter has been published in an anthology entitled *Youth in Transition: Perspectives on Research and Policy*, edited by Burt Galaway and Joe Hudson, published in 1996 by Thomson Educational Press in Toronto. A paper on direct scribing as a technique has been

published in *Child & Family Social Work* (1998) 3, 1, a journal edited out of the University of East Anglia. Earlier versions of these papers were presented to conferences in Alberta and McMaster University, Ontario, in the spring of 1995. A poster presentation was given at the 1997 Annual General Meeting of the Laidlaw Foundation, which has financially supported this work. A brief presentation of the entire work was presented to the staff at the University of Regina School of Social Work; they were particularly interested in the application of Gilligan's concept of a gender-differentiated world view to the material, a part of the work that had not, to that point, been publicly aired.

There are other subject areas that will not be exhausted -- in some cases, hardly even touched -- by their treatment in this thesis. The matter of partnering and parenting warrants an extended discussion, including gender differences in private and public perspectives, fertility management, impact on social networks, and life course implications, and perhaps some conjecture about the changing valence of procreation as productivity in the context of the declining right to paid employment. The role of offending behaviour is barely touched on, nor the intent and impact of drug and alcohol use by the participants themselves or by others in their historic or current social network. The issue of migration, from within the perspective of being a visible minority and from the Caribbean, is incompletely explored in this work. The matter of spirituality is a small but interesting bit of data. The material offered by the pilot participants is as yet unshared, but it is a rich resource on these and other issues.

This chapter began with a recapitulation of my research questions, followed by a discussion of the issues and rationale that informed the development of the research methodology I used in this piece of work. The protocol is then described in detail, including how it adapted to the research reality as it unfolded. In the next three chapters, a detailed analysis of the findings will be presented, beginning with an examination of how youth leave child welfare care.

CHAPTER 5: HOW DO YOUTH MANAGE EMANCIPATION?

In this chapter, I discuss the process by which young people leave child welfare care, within the context of the experience of their age peers. After reviewing the legal age markers that are central to Ontario's child welfare legislation, I discuss gender differences within the study population of 165 youth with respect to two elements of their care career, entering and leaving care. Then I consider differences in the care-leaving experience when legal emancipation occurred early, at the age of majority, or was attenuated through extended care. Qualitative data from the 30 research participants are used to differentiate between the two kinds of care-leaving, termination of legal status and leaving child welfare facilities, and to illuminate the participants' perceptions of the adolescent transition as I defined it, the transition from being the responsibility of someone else to being on one's own.

5.1 THE STRUCTURE OF EMANCIPATION

Emancipation is a legal marker that represents societal agreement on a norm, in this case that an individual, upon reaching 18, the age of majority, is mature enough to no longer require parental protection and is therefore responsible for him/herself: 'independent'. Like any norm, the number represents a general truth and, simultaneously, an expectation of variance. A norm is intended to locate an individual in a group; when applied rigidly and out of context, it loses its viability. For example, the norm for life expectancy for women in Canada is 81.3 years, yet we don't plan for our mothers to die four months after their 81st birthday. Canadian women have a fertility rate of 1.7 children each, but no one is or is expected to be .7 of a child. We may know that one in ten people with lung cancer does not survive, but what is important is whether that one is someone known. The number in each case is *factitious*, created by the art of mathematics.

Perhaps because variation is implied in the determination of factitious numbers, legal markers often initiate a further process of qualification, such as becoming *eligible* to apply for a driving licence or for old age pension. The age of majority, however, is applied automatically and varied only through a legal process to disallow it: unless one can be proven mentally incompetent, one acquires adult status. To have the *right* to adult independence is quite different than being required to assume it. Usually an individual grows into his/her rights over a period of time, his/her progress moderated by relationships that personalize, prioritize and negotiate the elements that constitute the legality. This project demonstrates how youth in the child welfare system (and very likely others as well who lack the buffer of family and community) are impacted strongly and negatively by the ineffectually moderated application of a factitious norm.

For youth in care, the implications of reaching the age of majority are dramatic: their 18th birthday is the occasion on which, since wardship ends, they can no longer occupy agency facilities. They must leave 'home' and live 'independently'. For many, the move out of care facilities happens earlier, in anticipation of the legal marker. For some, it happens much earlier, when the fit between the living circumstances the youth wants/needs and what the agency has to offer is so unsatisfactory that the youth moves on his/her own in the community when it is legally possible, i.e., upon reaching the age of 16. This is often referred to as 'independent living', although youth receive financial support from the CAS and remain on a caseload.

Sixteen is another factitious norm with special implications for youth in the child care system. The Child and Family Service Act limits temporary care (including, cumulatively, non-wardship agreements) to 24 months before the child must return to parental care or become a permanent ward (CFSA, 1990, 70 (1)). Furthermore, permanent wardship must commence before age 16 (CFSA, 1990, 37 (1)). The effect is to shorten the 24-month limitation for adolescents who come into care after the age of 14. Because only permanent wards are eligible for extended care (CFSA, 1990, 32), those who enter care late must make decisions quickly, in anticipation of turning 16, that have far-reaching implications.

These limitations are intended to prevent 'drift' in the system, which makes some sense when applied to younger children where it may serve to keep parents working briskly at solving the problems that necessitated care, and to retain the option of providing a stable permanent home for the child in the event the parents are unable to do so. With adolescents, however, the 24-month limit may undermine the work to be done. Adolescents admitted to the child welfare system may be seen as contributing to family dysfunction, and changes in their behaviour may be a primary goal. With all the developmental changes taking place in adolescence, and the additional task of learning how to manage living in the child welfare system, externally imposed and apparently irrelevant time limits are not helpful. Nor can the right to a stable permanent home commence at adolescence, when the thrust, developmentally and socially, is to increasing self-sufficiency.

One of the participants, Julie, who entered care at 14, had this to say:

What happened...was when we turned 16, we had to decide [between] crown [permanent] ward, or are you going to go home to your parents. And that was absolutely the worst decision that I've ever had to make in my entire life. I wasn't ready. I was in a new foster home. I hadn't had time to integrate properly into my new surroundings, and already they were saying (smacks hand on table) [do you want to be a] nameless, faceless crown ward? Whatever that meant. I was 15 and I didn't fully understand it. I got several different interpretations and they didn't all match, they didn't look the same to me. But I had to make the decision when I

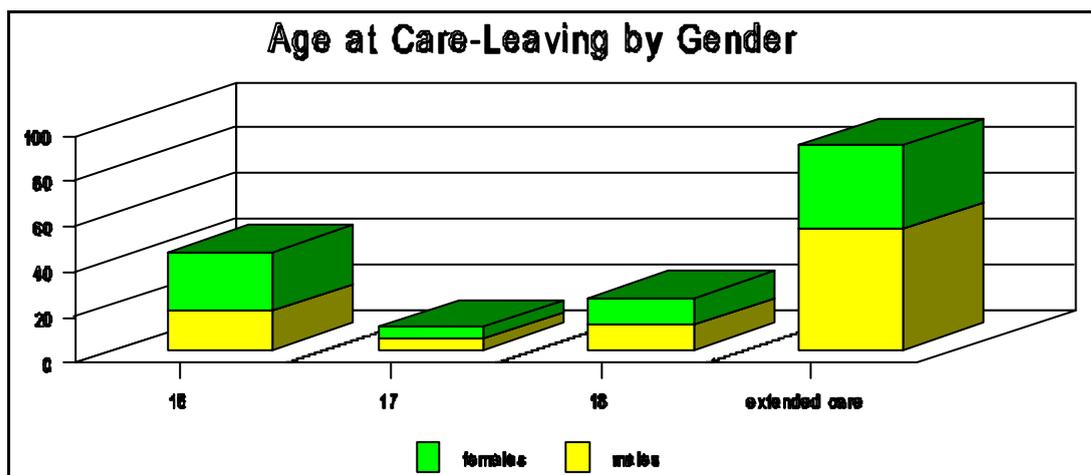
turned 16. I didn't have a choice: I had to make a choice...I wasn't ready. I had no idea. I hadn't experienced the system long enough to know what I wanted. I hadn't had a chance to see how my family was doing, to see if I could want to be with them...[It was] exactly the wrong time. As soon as you're 16, y'know, you've just gotten used to your period, I mean, like all of these things are happening...You're in high school, and you start worrying about your future...It's like the carpet is being pulled out from under you. You can't deal with it at that time.

Julie's narrative demonstrates how legislation based on normal reality, expressed as factitious numbers that give age and time particular significance, interact with abnormal life circumstances to create unfortunate and probably unintended choices. We look now at the larger population of which Julie is a part.

5.2 GENDER DIFFERENCES IN CARE-LEAVING AMONG THE STUDY POPULATION

Within the Toronto Census Metropolitan Area (CMA), 92% of those 18 years old in 1991 still lived with their parents, which was obviously not the case for the study population as they turned 18. From CASMT computerized data on all youth born in 1976 and in their care after reaching age 16, I calculated age at entry and discharge (in this case, termination of legal status) and time in care. These data demonstrate some hitherto unnoted differences between males and females in this population, displayed graphically below:

For 75 of the 165 youth in the study population, 45%, legal status terminated before or at age 18. The event occurred at age 16 for 56% of this group, compared to 13% at age 17 and 31% at 18. Of those who left at 16, 60% were girls and 40% were boys, a greater gender



imbalance than is evident in the other two age categories, and the major contributor to the gender differential of those who received extended care.

Other findings from the study population data are:

- Males slightly outnumber females, 86 to 79.
- Males come into care earlier than females. This reaches statistical significance at the .01 level (2-tailed test for unequal variance). At last admission, the mean age for males was 11 years, 3 months and for females 12 years, 11 months.
- The frequency distribution of last admission to care is flatter for males than females. Males are over-represented among those who entered care as pre-schoolers: 15 of 20 in this category are males. Children who remain in care from a very early age may do so because they require specialized services. Among the 6 cases selected randomly from the population but rejected as inappropriate for participation in the qualitative study, 5 were male, and of these, 4 were severely developmentally delayed and in long-term institutional care. This is consistent with the greater vulnerability of males in early development reflected in the literature (for example, Jacklin, 1989).
- Males are more likely to receive extended care: 65% of males and 49% of females were not discharged at 18.
- Youth of either gender who came into care late, leave early. Males who left care at or before age 18 were in care for an average of 46 months compared to 43 months for females. Males receiving extended care were in care for 89 months (to their 18th birthday) compared to 70 months for females receiving extended care.
- Youth of either gender who are not offered extended care leave care earlier rather than later: 60% of those who were not offered extended care left care at age 16, 14% at age 17, and 24% at 18.
- Males use the care system more than females. Because they enter earlier and stay longer, they spend more time in care (excluding extended care, which they also use more). This gender difference reaches statistical significance at the .01 level (2-tailed t-test for unequal variance).

Although the gender differences evident in the study population are exaggerated among the research participants, the sample does not differ significantly from the population from which it was randomly drawn with respect to the variables considered, as shown below:

Table 2: Comparison of Sample with Population

Variables	Population	Sample	Test of goodness of fit	p
Age at last admission	mean = 142.7 mo. 11 yrs 11 mo	mean = 153.2 mo. 12 yrs 9 mo	2-tail test for equal variance	.288
Age at Discharge	mean = 199.1 mo 16 yrs 7 mo	mean = 204.9 mo 17 yrs 1 mo	2-tail test for equal variance	.421
Time in care	mean = 67.0 mo 5 yrs 7 mo	mean = 58.4 mo 4 yrs 10 mo	2-tail test for equal variance	.410
Files closed at/by 18	yes: 41% no: 59%*	yes: 43% no: 57%*	Pearson chi-square	.852

* excludes 13% of the population who turned 18 too close to when data were obtained for closures to be entered.

By examining the details offered by the 30 youth chosen randomly from the study population who participated in this research, we can learn something about the impact of child welfare policy, in interplay with individual life experiences and social circumstances, on the lives of young people leaving care. We now consider the qualitative data.

5.3 THE EXPERIENCE OF EMANCIPATION

Participants are sorted into categories of care-leaving in the following table. I have used the chosen names of individuals so that the reader can, if s/he wishes, draw some biographical connections between the many bits of voice data used to create and illustrate themes in this and following chapters. The numbers in parenthesis after the names of those offered extended care indicates the age at which they left the last CAS facility.

Table 3: Participants Sorted by Age at Care-Leaving:

	Early leavers (age 16)	Early leavers (age 17)	Aged out (18th birthday)	Extended care	Totals
Females	Margaret Diane Julie Melissa Rachel	Veronica	Susie Kim Samantha	Marie (16) Teresa (16) Victoria (18) Shawna (18) Lacey (18) Vanessa	15
Males	Joey Pianist	Spirit	Clark Johndoe	Dominic (16) Tim (16) 007 (16) Joe (16) Steve (18) Steven (18)	15

				Raquan (18) Humphrey (18) Affrenaway (18) Jason	
Totals	7 = 23%	2 = 7%	5 = 17%	16 = 53%	30

Although all of the participants are displayed here, only some of their stories will be used to illustrate various elements of the experience in each category. Those whose stories are not included here may not have given relevant information, or it may be subsumed in the story of another, or it may be included elsewhere to illustrate another aspect of the care-leaving experience.

5.3.1 Early care leavers

Among the 30 participants, 5 girls and 2 boys had legal status terminated at 16. Four of the girls (Margaret, Diane, Melissa, Julie) and one of the boys (Joey), all of whom came into care at adolescence, did not qualify or could not opt for permanent wardship at the expiration of temporary wardship. Margaret, Diane and Joey were deeply into street life and/or crime, probably as a sequelae of failed family reconciliation, and the latter two moved into the juvenile justice system. One of each gender had permanent wardship canceled at 16, Rachel when she became a mother, and Pianist when he was returned to his mother's care after spending most of his life in the child welfare/mental health/juvenile justice system in another province. Pianist, like Melissa and Julie, returned home with the expectation that the problems that had necessitated coming into care had been sufficiently resolved for a reconciliation; when this failed to be the case, they were too old to re-enter the child welfare system and had to undertake 'independent living' in the community without that support. We have heard Julie on the problems involved in making a decision of this nature within the time allowed.

Adolescents who are in care but out of control pose a serious problem to the child welfare system. Workers and the child welfare system as a whole are caught between the proverbial rock and a hard place: the youth is in care to be protected (in theory from inadequate parenting) but cannot or will not allow his/herself to be controlled sufficiently (by surrogate parents) for his/her their safety to be assured. At 16, when the youth has the legal right to live as s/he chooses, the child welfare service, reciprocally, has less of an obligation to provide the setting of their choice. With increased freedom comes increased responsibility, but freedom does not necessarily offer the choices one might wish. Diane is a case in point. She came into care just before she turned 14, when neither of her separating parents could

manage her.

I looked back at the first day I went into the group homes, which was stressful and at that point I looked at myself as not being stable, as not being self-confident or independent. I started running away at my first group home, solely because my father had abandoned me: that's how I felt. He told me many times that he'd be there to take me out if I'd stay there however many weeks he'd set forth, but when time came and I did what he asked, he never took me out. So I'd run, pretty much to teach him a lesson, to say "You're not going to do what you're supposed to, I'm not gonna do what I'm supposed to!". After a few months of that, the relationship with my father deteriorated to almost nothing. I lied to him, stole from him, pretty much to teach him a lesson.

...And then I got into using drugs and drinking. Then my life seemed to go right downhill from there. At first it was good, I liked it, then I guess the novelty wore off and it seemed to become boring.

...When I was 15, I realize[d] that CAS was not so much discontinuing their support but not being there so much. I was a chronic runner and I didn't feel CAS had much to offer me after that. At that time I felt I needed to set myself up for independence on my own, knowing that I couldn't go back to my father's or my mother's. I started looking for ways to be self-efficient, to rely on myself and not others.

... I started getting in trouble with the law.... met a lot of friends through detention centres, courts... And the more I associated with them, the more trouble I got into, to the point where the group homes were pretty much a hotel for me. I'd come and go as I pleased. They'd ground me and I'd turn around and tell them to fuck off. My attitude had gotten really bad. I had no respect for anybody. At that point I don't even think I had any respect for myself.

When I finally hit rock bottom with my school, I realized that I have to make up for what I lost in school and become street smart now. I had to learn the ways of the street, things to do, who the right people are to talk to, who's not. And that's when I started associating with Scott. Scott was a drug dealer. He was a pimp, and he thought it would be fun if I tagged along with him. Pretty much a girlfriend, but a lot more on the side. Next thing you know I was holding his drugs, selling his drugs, collecting money from his prostitutes. And then one day he hit me and I told him that it was over, I was leaving. That's when I realized that I had finally hit rock bottom with everything. He pulled a gun to my head. I thought my life was over.

Her story continued through many more street adventures, drug addiction, physical abuse, and juvenile justice involvement, to the present, where she is trying to decide how to deal with her father, who disapproves of her partner, and her partner, a man who has spent 17 years in jail for murder and who returned to jail for breaching parole shortly after their son was born.

Are the non-compliant at higher risk for leaving care early? One can't make that case from this data, Diane notwithstanding. However, it does come to mind that of the 5 males and 2 females who were selected but refused to participate, all but one (a male) appeared to have been relatively unsettled in care; and of the 3 males and 2 females who were selected and couldn't be located, all but one (a male) appeared to have been unsettled in care. Among the

6 participants who did not contribute full data-sets (Margaret, Rachel, Susie, Joe, Joey, 007), all could be said to have been unsettled in care. It seems likely that being unsettled in care may well be a factor in early termination of status, and that the design of this study did not allow the capture of the data.

Are the vulnerable at high risk for leaving care early, as is suggested in the literature? Or does early leaving engender vulnerability, wear down even the 'tough'? Among the participants, Pianist is the only one of the 7 who left care at 16 who looks chronically vulnerable, exhibiting odd social behaviours and complaining of a memory that doesn't work right. (Others who appear chronically vulnerable, as we will see in more detail later, have remained in care longer.) The others describe various kinds and intensities of vulnerability:

- Julie, a bright and socially adept girl, suffered rape in the time between leaving home (for the second time, after refusing permanent wardship) and negotiating privately her current very positive and overtly protective living situation;
- Diane, for all her intelligence and toughness, is emotionally and physically abused by her partner;
- Joey, a chronic juvenile offender, has the wariness and bravado of a cornered animal.

Other participants who left care later, however, display similar vulnerability to circumstances. Perhaps there is little to choose between the disadvantage of leaving early and the disadvantage of aging out, and that is why even youth who could stay in care longer do not take the opportunity to do so.

5.3.2 Later leavers

An almost equal number of males and females in the study population had wardship terminate on their 18th birthday, 11 males and 12 females who together comprised 14% of the population. An additional 5 males and 5 females, 6% of the study population, left care when they were 17. Among the participants, 5 of the full complement of 30, 17%, had wardship terminate on their 18th birthday. One of these (Susie) had temporary wardship expire while her whereabouts were unknown; the remaining four (Kim, Samantha, Clark, Johndoe) had permanent wardship lapse. Two other participants (7% of the sample) left care while they were 17; Spirit's temporary wardship expired, and Veronica's permanent wardship was canceled when she returned to her mother's home. Of these 7 participants, at the time of legal termination of care, 5 were actively involved in street life and the justice system, another (Samantha) was living transiently in the community, and the remaining one (Kim) moved planfully out of her group home into her own apartment, supported by welfare, and

gave birth to a baby a month before her 18th birthday. For these 7 participants except Kim, leaving CAS facilities preceded legal termination by some time. The act of leaving agency facilities, rather than termination of legal status, is what the youth usually call leaving care.

For some participants, the last CAS placement was a preparation for independence program.

In describing this experience, some participants demonstrate how the (presumed) intent of a program is transformed by how it is delivered at the front line and/or how it is experienced by the individual youth. Clark, for example, was placed in a staged behaviour modification program. He understands perfectly how it works, but he uses it to map rather than modify his behaviour. Although it was called independent living, it had little in common with living on one's own in the community, the other situation also called independent living. It may even have taught skills or attitudes that were dysfunctional when applied to community living.

Clark describes his preparation for emancipation and the actual event:

I just got sick of being [in an unsatisfactory group home], so I kept running away so I'd get sent somewhere else. So my worker came to get me and she told me about 'FourSquare', a group home in [a suburban town]. She told me it was a really good program, and when I got there, it was really clean and really in order. I made friends very fast there; there were 10 other guys living there. It was in a nice area. There were a lot of nice things around. And the chores there were reasonable. You only had to do one a day and you got a lot more allowance there. And you also got a clothing allowance there every month, and it was really good. And the curfews, on Level 1 you had to check in every hour, on Level 2 check in every 2 1/2 hours, and Level 3 check in every 8 hours. And if you got good points through the week by doing your chores and everything, you got sent to Phase 2, which is less staff and more responsibility: it's called independent living.

I spent 2 years in Phase 1, then I ended up leaving FourSquare to live with my ex-girlfriend. Then I ended up getting arrested. FourSquare came to bail me out and they gave me a chance to make it to Phase 2 if I did everything right for a couple weeks. I ended up making it to Phase 2 and then screwing it up there and going back to Phase 1. And everything was going okay in Phase 1 until they hired this new staff named "Tony" and because I was the oldest and the biggest guy in the house, he always picked on me in the morning, telling me if I take him down one-on-one, he'll give me \$50 or whatever. So one morning I got up and I was in a really cranky mood, and on my way downstairs he started on me again, and I really freaked out. And I told him if he was man enough to take me on, to come outside and I'd take him on. And he didn't have the guts to come outside, so he called on other staff members to come over to the house to help him out. And one of the nice staff guys who knew me really well was "Steve" and he just sat down and talked to me and asked me what happened. And that day they had a staff meeting about me and they ended up sending me to a Phase 3 in [another suburban town] to see how I'd handle independent living again.

Phase 3 was going okay. Then I ended up getting into a fight with one of the boys and they shipped me off to Phase 4, the very last phase in FourSquare. And they told me if I didn't make it in Phase 4, that was it, they were just gonna let me go. Phase 4 went all right, and then I ended up meeting up with some of the guys that I was in FourSquare with in Phase 1. And we did a lot of stealing cars and stuff and FourSquare had to keep bailing me out. So I was in jail for a couple of months, and when I got out FourSquare wanted to give me one more chance in phase 2 again. I

ended up going back to Phase 2, and I ended up getting arrested again. And when it came down to court time, the staff at Phase 2 said that if I ended up going to jail, getting convicted, that was it, I'd be out of his program. And I got convicted so I went to jail thinking that that was it, when I got out I would have no place to go.

Anyways, a week before my sentence was out, my worker came to visit me in jail and told that when I got out, I was to go back to Phase 2. And I was like, you guys told me that once I got convicted, I was out, but he denied it, and so I said fine, and he said it's only till my 18th birthday. So once I'm 18 I'm out of the program.

A week before my 18th birthday I ended up moving in with a friend of mine, "Tracy", and her mother. I was paying rent there, and her mother was like a real crazy person. Like she was a few fries short of a happy meal, I guess. And she had a serious drinking problem. Even though I was paying rent, she was giving me curfews and wouldn't let me have people in, and generally acting like she was my mother. Even though I was paying rent. And I wanted to move out of there as fast as I could but she wouldn't give my rent back, so I had to leave there with nothing.

Samantha also found herself unprepared for living independently in the community, in spite of having tolerated preparatory training.

And they finally moved me for the last time to [a residence for girls] to teach me responsibility. And I could not stand it there. They had the stupidest rules and the place was an old dump. So I kept on bugging my worker to let me go independent, and she kept on denying it and denying it and denying it, and wouldn't let me. Finally, one time, they all got together, the staff at [the residence] and my worker, and they finally came to agreement that they would let me, and they would only be giving me so much money.

And then I moved out to [a smaller town where I had lived with an aunt earlier] on my own, and met a whole bunch of new friends. And I was living at the house for a year, but I wasn't there most of the time. I quit school. And living at one place but also paying rent at another. Then I moved out with a couple of my friends and it wasn't the greatest situation. We couldn't live together like we thought we could. And I left and moved in with another friend of mine temporary. And then I got my own place again. I moved out, then I moved into another place. And then I got pregnant. In the middle of my pregnancy, the father left me...

These two participants did not apply themselves to learning what others thought they needed to know to 'go independent', as Samantha phrases it, and Clark was grateful for his last taste of belonging somewhere. But it may be that, no matter how well-designed the preparatory program and how motivated and eager the youth to take advantage of it, the challenges of being on one's own at 18 overwhelm even the most sturdy. Finding a way to attenuate the emancipation process to something closer to the social norm is a logical response.

5.3.3 Extended care

Fifty-five per cent of the study population, 62% of the boys and 47% of the girls, were given extended care. Although the quality of information is very poor in most jurisdictions about

what proportion of young people receive extended care (Martin, 1996), this is undoubtedly a laudatory level of support. Among the participants, 6 girls and 10 boys received extended care, a proportion similar to the study population. Like the early leavers we've already considered, 4 boys (Dominic, Tim, 007, Joe) and 2 girls (Marie, Teresa) left child welfare facilities at 16 or early 17 because they had difficulty managing in them. However, these participants maintained wardship while living independently in the community and/or in Young Offender facilities. A second group of 8 participants, 3 girls and 5 boys, left agency facilities when they were near 18, some planfully (Victoria, Steve, Shawna), others reluctantly (Steven, Raquan), and others truculently (Humphrey, Affrenaway, Lacey). A third grouping of two (Jason, Vanessa), had exceptional arrangements made for them to remain in agency facilities.

5.3.3.1 Extended care recipients who left child welfare facilities early

The 6 participants who left CAS facilities early but qualified for extended care were likely offered extended care as a way to maintain a connection, however tenuous, with unstable and high-risk youth who, while they may not have been able to follow through on plans, were willing to accept support. Many of this group (Dominic, Tim, Marie) had been in care for a long time. Others had lost connection with their families in other ways; Joe was returned to care when his adoptive family split up, Teresa's mother was deported to Trinidad because she had no immigration status, and 007's long-term criminal involvement had exhausted his family's loyalty.

Dominic's story gives the flavour of how carefully and creatively the agency nurtured the connection, bending regulations to the breaking point, and the convoluted ways that support was helpful and appreciated. Dominic came into care at 3 and lived in one foster home to age 7 and then a rural foster home to 16. He left at 16 to live for 18 months with an older sister in suburbia, then with a series of friends' families in the area in which he had been in care, and finally with his mother and her partner in a lake-side cottage under less than ideal circumstances. Dominic speaks of how leaving the foster home and receiving extended care was negotiated:

My worker...thought it would be best for me to stay with the CAS until I get a good foundation going, when we both thought I was ready to cut all sever's with them... [A]t first I didn't want to go for it, because I thought maybe another placement somewhere. Because she was recommending a group home down in Toronto somewhere. Which I've lived in the country all my life, so I'm used to the slow traffic. But then I actually started thinking about it and realizing the benefits of it, and it wasn't really all that bad. In that I didn't have to, if I didn't want to, move down to Toronto. Which I didn't choose to. And I guess the other thing I didn't really want to do at first was sign a contract. But it pays off in the end...[I]t's got me used to living on my own, being able to manage.

5.3.3.2 Extended care recipients who left child welfare facilities at/near 18

Of the 8 participants who left care at or in relation to their 18th birthdays, 3 (whom I described as leaving care truculently) made the transition through the juvenile justice system. They don't draw a connection between the two events, although Marie served time for assaulting group home staff, and Affrenaway says he was using drugs heavily at the time, both of which could be related to, as Thompson & Newman (1995) suggest, the stresses of digesting a difficult past and anticipating a bleak future. Humphrey spells out the connection more clearly. He describes his first care-leaving at age 15.

I felt that I was just kinda thrown out. Kinda like "here's the real world: go see it.!" That was the beginning, short and sweet, they didn't take much time saying "Get the fuck out."...They threw me into a boarding house, and they handled my money. The only time anybody came by was when there was money involved. Like they never came by just to see how you were, or to give you a hug if you felt like you needed it.

After about a year, he

had some trouble with the law, so I was put into a semi-independent group home in [a small city outside Toronto]. I lived there for about 2 years and then moved out on my own with my...girlfriend and my daughter. That was [the date of my 18th birthday]. I was kicked out: it was, like, "You're out, don't let me see you back here."

One wonders if Humphrey commenced a family in anticipation of leaving care at 18 to guard against the loneliness he experienced during his first attempt at being on his own. Although he is technically on extended care, he has received no services for several reasons, including that he lives a distance from Metro Toronto and that he is negative about the CAS (although he wouldn't mind getting 'CAS welfare', since it is more generous and less hassle than general welfare). The agency is not optimistic, given his history, that he would honour an extended care agreement, and in fact he receives services similar to what they could offer through the combination of his probation worker, with whom he has a goal-oriented contractual agreement, and general welfare. Furthermore, he and the worker on whose caseload he now is are strangers, whereas he has a lengthy and positive relationship with his probation officer.

Raquan takes a more measured perspective on the value of what he is losing, his fears in living on his own, and his attempts to manage the challenge.

I was living with a family, not like the first foster home family I was living with. They were Eastern European, and I was black, so what was I doing here now? I said to myself, what the hell, might as well get along because you've moved around so much you should know how to adapt to certain circumstances. So I just tried to start proving to my family that I was reliable, I was starting to teach myself how to be my own man. I told them of my goals, that I wanted to get a job. I wanted to finish school. Most of this information I was talking to my grandma about, because she was like the head connection of my family, and whatever I would say to her my family would know. Because I thought if I start to succeed, they will think different

of me, rather than thinking of me as a thief. And that's when I started not stealing any more. I didn't see any point in it any more, because I was finally where I wanted to be, in a family environment where I would be able to depend on the foster parents for support, and get to know who they are and know their children, just so that I can improve my social skills, just a little bit more. Because when you're going to be on your own, you're going to have to know how to get along with different people.

Three years I was with them, and then my 18th birthday finally came around, and they said you can stay one more week, and then you have to move along because since we're not going to get supported, then we can't allow you to still stay at our place for free. They weren't necessarily greedy, they were just trying to say, you gotta go sometime and this is the time.

At first I thought they were gonna have more sympathy than this, but what could I expect? My social worker, my foster parents, and I already went over what was going to happen months before I was supposed to move out.

Raquan moved in with an acquaintance from an earlier placement, his only choice since his friends still lived at home. He was financially manipulated by his room-mate and they lost the apartment because of non-payment of rent. He sought another option.

I picked [my present] apartment (really a rented room in a private home) because they seemed like a nice couple that would understand what I was going through, like my friends. But unlike my friends, they are older and wiser and they know things that I'll need to know in the future, that I should get to know now. They're sort of, like, my parental advisors, suggesting their knowledge of what are the wisest moves.

...I'm not lonely from not having family contact as I did before. Because I have personally selected the people who I consider to offer the same qualities as a family. It's sort of like a surrogate family. But when you move around enough, as I did, you can adapt, using the knowledge from previous experience.

Raquan was one of the few participants who did not change residence during the first three interviews, but when I called to invite him to the discussion group several months later, the couple with whom he lived said he'd "got in a bit of a scrape" and no longer lived there. Raquan may be an example of someone who is highly motivated, taking advantage of every opportunity to learn, getting as much support as the agency can give -- and remaining very vulnerable.

Might we hope that the 3 participants who left care facilities planfully and without stated reluctance have had more satisfactory experiences? Their stories are somewhat more optimistic. Victoria left a long-term group home the summer before she turned 18, and after a less-than-satisfactory month in shared accommodations with an older woman, moved into a women's residence/shelter, where she remained (more or less) throughout data collection. Her personal life, however, is fraught with difficulties. Shawna, who was not as forthcoming as some participants, describes that she left a foster home that she liked at 16 because it

was being closed down by the agency, and after a year or so in a group home arranged to move into an apartment with one of her foster sisters. After several other shared living arrangements, and a brief return to the home of her ex-foster mother, she and two of her foster sisters arranged to share an apartment while they all attend post-secondary education.

On a less positive note, Steve left a group home in which he felt quite comfortable and settled into a small apartment in the same town the summer before he turned 18. On his first night alone, he set out to visit a nearby group home in which he had once lived. He became involved in a car theft and abortive joy-riding episode which frightened him, and talking about it led to his first criminal charges. He also was afraid that boys at school would make good on their threats to trash his apartment. Eventually a combination of being unable to live alone and poor skills in living with others led to his becoming homeless.

5.3.3.3 Extended care recipients who remain in child welfare facilities

The final category of youth who received extended care are 2 who continued to live in child welfare facilities. Jason, who is physically and mentally handicapped, remained in a special foster home in which he might remain well into adulthood, with a transfer of financial responsibility from the child welfare system to adult protective services. Vanessa has a diagnosis of what she described as a mild form of schizophrenia, and was permitted to remain in a semi-independence home (a house with 3 or 4 girls in their final placement before moving on their own, and one live-in staff on rotation) to be supervised in taking medication. She suffered a severe psychotic break on the evening of her high school graduation ceremonies, which she attributes to the stress of anticipating changes in her life (i.e., moving out and starting post-secondary education), and not taking her medication consistently. She spent the summer in hospital, and was permitted to remain in the independence home until December, rather than leaving at the beginning of the academic year, as was originally planned. Even this period of prolonged protection and preparation, a year and 2 months after she turned 18, did not deliver a smooth transition to living on her own; she and her friend lost their apartment within two months, and Vanessa discontinued attending community college to move to Toronto to find hostel accommodations. She appeared to be in good mental health, however, through these moves.

It is not readily evident what differentiates the youth who receive extended care from those whose care has been terminated. Even under detailed examination, their circumstantial similarities outweigh their differences. The differences may lie outside this data, perhaps in the way the stories of these youth might be told if narrated by the workers who negotiated extended care, or failed to do so. The recommendation for extended care initiates with the

caseworker and is approved by senior management within the responsible CAS, making extended care ripe ground for street-level bureaucracy (Callahan, 1993), the capacity of workers in direct contact with clients to negotiate an agreement within the constraining rules. Extended care is seen as appropriate for those who have earned it by right of being good clients, and for those who need it because they are (to put it somewhat callously) pitiable, too handicapped or wounded or alone to be cast off. What is defined as worthy or pitiable is negotiated within the value sets of worker and client, and hinges on culpability, the availability and appropriateness of other personal and institutional resources, the intent and capacity to try, and most importantly, the ability of the two individuals to come to an agreement. The nature and strength of the relationship between the worker and the youth is therefore crucial to the outcome of the decision. This element is largely invisible in this data.

5.3.4 How participants see the beginnings of the transition to being on their own

There are some very real differences in the care careers of the participants that influence how they perceive the transitional experience, specifically, that the majority of girls entered care as adolescents (all but Samantha and Lacey) and the boys as younger children (all but Affrenaway, Clark, Joey, Joe, 007). This had a major impact on how they conceptualized the beginning of the transition to being on their own. Most of those who entered care late described the beginning of being on their own as the circumstances that dislodged them from their families and brought them into care. Among those who came into care early, an equal number describe their transitions in terms of leaving as of entering care. Many of these youth mention remembering or reconsidering entry to care, or events that occurred within care, as another kind of beginning, a dawning awareness that they were responsible for themselves differently than other children, or that adults assumed responsibility for them differently. For example, Dominic says:

...one family I lived with went on a holiday to Florida, and we moved to another family, but when they came back, we went back to them. And the other foster family, they were deaf...[W]hen I was about 7, turning 7, the first foster home placement had a baby girl and they were telling CAS that I was going to be like my father and molest her. So they quickly removed me from that situation....And then I moved up to [a rural area] and that's where I spent 9 years.

It seems that whether youth came into care early or later, they begin the transition to adulthood when they realize that adults cannot be relied upon to care for them adequately, whether the adults are parents or care-givers. Some convey a sense of going through childhood with one eye tracking what adults are doing, or not doing, that may herald a change in life circumstances. Others, particularly the girls who came into care at

adolescence, clearly assumed parental responsibility for themselves, younger siblings, and sometimes parents themselves. Although most participants are quite clear that coming into care was the best available option for them, there is little sense that it delivered a carefree childhood. Rather it presented a different way in which they were expected to assume responsibility for themselves, and a measure of freedom from being responsible for others.

Perhaps because these youth tend to experience life as a series of changes, many unpredictable and out of their control, they do not award the event of leaving care as central a role in the transition to adulthood as leaving home is for many adolescents. For Dominic, for example, who was relatively settled in care with only two placements in 13 years, the important thing about leaving his foster home of 9 years was that it was his decision, taken unilaterally, without consultation. However, it did not bring the stability he hoped, but rather a continuation of isolation and lack of control, now visible as transience.

I guess what I'm trying to say is that this transition period has really had its toll on me. Like because people move around a lot, I get flashbacks of people's faces and I don't even know who they are. But I guess overall, my emotions are what have really been hit the hardest. Because you don't know, you have friends one day and the next day you're gone. And everyone knows -- well I think everyone knows -- what it's like to move into a new town and not know anybody. You have to start from scratch again. But sometimes I didn't think it was worth it because I didn't know if I was going to be there the next day.

It may be that the essential ingredient in managing adolescents in care is to support their sense of agency, building on their history of being responsible for themselves, while continuing to provide support and encouragement from a non-authoritarian position. This is, in fact, the parental stance that the literature describes as most effective with adolescents; it is, however, very difficult to approximate within the legal rigidities and philosophical lacunae of the child welfare system.

5.4 CONCLUSION

The care-leaving that the child welfare system requires is an abnormally early emancipation, delivering youth to 'independent living' when the vast majority of their age cohort remain within the material and emotional protection of the family. The rigidities of a legal system that marches to a legislated tempo, interacting with the self-protective autonomy of youth raised in situations in which authority was suspect, cause many youth to leave care facilities even earlier than the law requires. This is a huge disadvantage that extended care does not ameliorate. In part this is because extended care provides primarily material support that is inadequate to the need, but the abrupt termination of social relationships because of the requirement to move out of agency placement and perhaps away from the community is also

abnormal and damaging. The participants' stories demonstrate the difficulty of negotiating continuity. The double impact of losing social and material connections simultaneously may indeed create a potential killer from the factitious reality of equating the age of majority with the age of independence.

We turn now to a consideration of how youth leaving care compare with their age cohort in terms of several of the variables included in the Census '91 Questionnaire.

CHAPTER 6: PARTICIPANTS IN PEER CONTEXT

In this chapter, we will examine how the participants managed their adolescent transition by considering them within the context of their Toronto CMA age cohort on several variables from the Census 1991 questionnaire, augmented with qualitative data. Almost one-third of the participants are visible minorities and more than one-quarter immigrated to Canada, introducing an additional cultural and historical complexity into the developmental task of adolescence. In preparing for early and irrevocable emancipation from child welfare care, the foundations for productivity take on exaggerated importance. We will consider the participants' educational achievement and labour force attachment as they acquire the adult expectation of fiscal independence. At care-leaving, the participants lose their physical home and the associated social network and must create an alternative. This is for many participants just another of many moves in a socially and geographically transient life. We look at how they try to 'settle down', for many by moving on to the next stage in the life cycle, family creation.

6.1 ETHNICITY AND IMMIGRATION

Five males (Spirit, Pianist, Raquan, 007, Affrenaway) and 6 females (Susie, Kim, Rachel, Melissa, Vanessa, Teresa), 37% of the sample, are visible minorities, compared to 30% of the CMA cohort. All but one are black and claim Jamaican heritage, often in combination with other Caribbean backgrounds. Teresa is Trinidadian of Indian heritage, and Melissa grew up in Trinidad. In Toronto CMA, although 39% of the population are immigrants, only 6% came from the Caribbean in 1981-91 (Badets, 1993:10), which suggests that Caribbeans, and particularly those of Jamaican heritage, are over-represented among the participants.

Three males (Spirit, Raquan, Affrenaway) and 4 females (Susie, Kim, Melissa, Teresa) immigrated, all between the ages of 11 and 14. All came to families in Canada they did not know. Census data defines a pattern that 18-year-old immigrants to Toronto CMA are most likely to have arrived before age 4 (32%) or between the ages of 15 to 20 (28%). To arrive at age 10-14, as these participants did, is a slightly less common circumstance, shared by 20% of the age cohort. The 4-year period during which the participants immigrated, 1987-90, were years of heavy migration, with about twice as many people arriving as in earlier 4-year periods. Perhaps a combination of developmental stresses within the family because of the age at which the children arrived to become dependent on strangers, and overload on reception or settlement services played a role in the family breakdown that brought these youth to child welfare attention.

The female participants who immigrated came directly from stable care-giving situations in their country of origin to a biological parent (mothers, except in the case of Kim), but the males had much more transient childhoods among a variety of care-givers in more than one country. Affrenaway, although of Jamaican heritage, never lived in the Caribbean, but moved between the USA and Canada. Raquan also spent some time in the USA as well as the Caribbean.

Four or 5 participants (Melissa, Kim, Spirit, Teresa and perhaps Susie) are not yet Canadian citizens. Teresa has the particularly pressing problem of having no migration status whatsoever, because she came to Canada illegally, as did her mother and brother, but she was exempted when they were deported because she was in care. Without status, she is unable to legally attend school, draw welfare, work, or receive health benefits. CAS coverage is bridging the gap while she applies for landed immigrant status, but because the immigration bureaucracy moves very slowly and legal representation is costly (and her responsibility, as she understands it), there is no guarantee that status will have been granted by the time she turns 21 and is no longer eligible for extended care.

The special vulnerability of immigrating children, as well as the burden of being a visible and cultural minority, may not have been given the attention necessary to provide the help and guidance these young people needed. However, there is no evidence that as a group they are more disadvantaged than the other participants. In fact, where they have a strong sense of ownership of their culture, it seems to operate as a protective factor. The wandering boys who were passed from care-giver to care-giver, like a sack of potatoes, as Raquan says, and in this way alienated from their history and culture and rooted sense of self, feel fragile and vulnerable, like their similarly unrooted non-black counterparts.

6.2 ECONOMICS, PRESENT AND FUTURE

With adulthood comes the expectation that the individual will move away from being taken care of and toward making a contribution to society. Adolescence and, increasingly, young adulthood is a time for laying the educational and experiential foundation for eventual contribution to society, both productive (i.e., economic) and reproductive (i.e., bearing and raising the next generation). Early emancipation truncates the preparation period and catapults the individual prematurely into the challenge of becoming economically self-sufficient.

6.2.1 Education

More than three-quarters of Canadians 20 to 24 have at least one educational qualification. Full-time attendance at school for 18 to 21-year-olds is recently up considerably (Kerr et al (1994:29, 31). In the Toronto CMA, 85% of 18-years-olds attended school in the academic year of 1990-91, as did 67% of the participants in the academic year preceding data collection (1993-94). However, this is a much rosier picture of academic attachment than is warranted, since the Census '91 question to which this is a response is "In the past nine months...was this person attending a school, college, or university?" (I phrased the time frame in terms of academic year with the participants.) Many participants could answer "yes" when in fact their engagement with school was minimal and transient.

There is little question that in Canada, a high school education -- at least -- is essential to employment. There is a pattern in Canada of a prolonged period of mixing education and employment (Krahn, 1991), which may operate as protective for youth leaving care, in that finishing later may be more normative than in some other cultures, and that one can fund education through employment. However, increased credentialism (requirement for formal certification), combined with escalating cost of education (post-secondary tuition is increasing exponentially across the country) and decreasing public support (replacement of grants with loans) means that students who have no resources other than those provided by the state will find it increasingly difficult to get the education that employment requires. Familial support is expected to extend deep into the life cycle: 2/3 of youth remain in the family home to their mid-twenties (Boyd & Norris, 1995). Family support is not available to youth leaving care, however, and although many CASs are struggling to assist youth who aspire to post-secondary education, their needs must compete with rising pressure from many other directions. Furthermore, given the difficulty of affording extended education, many youth may early on rule out the possibility and fail to get the academic foundation required.

The complexities of the Ontario educational system, which also makes tracking and reporting educational progress within the care system exceedingly difficult, renders a meaningless picture from the participants' response to the Census '91 about "highest grade attended". But there is little question that they are disadvantaged, relative to their age cohort. Only 4 participants were close to graduating high school. Vanessa completed high school during data collection, and Kim was close to graduating. Vanessa and Shawna were granted equivalency and accepted into post-secondary courses, both in community college. Julie is a promising student in a supportive environment who warrants optimism about

eventual post-secondary achievement. All of the participants who appear to be within reach of succeeding academically are girls; the boys are even more disadvantaged.

In addition to the 'hard' information the participants provided, I had occasion to draw some conclusions about their academic and intellectual functioning in the course of gathering data. Although it was informally done and can have no claims to reliability, it may be useful in exploring an issue which has huge implications for the future of youth leaving care. One participant (Jason) self-identified and is 'officially' evaluated as being severely developmentally delayed. He is not able to consistently and quickly recognize the alphabet. At least 4 other participants (Steve, Lacey, Steven, and Johndoe) appeared to me to have low literacy and/or cognitive limitations, and give some evidence that leads one to suspect attention deficit disorder, fetal alcohol syndrome, and/or dyslexia. Four participants (Teresa, Diane, Dominic, and Pianist) said their education was impeded by emotional elements. Teresa, for example, has rape flashbacks in school because her rapist helped her with homework. Diane was preoccupied with her street life and Dominic with the problems of living on his own. Pianist, as mentioned earlier, seems to have a malfunction of some sort, perhaps cognitive, perhaps psychiatric. Vanessa describes that until she came into care, her family was very transient and her schooling suffered, but she overcame this difficulties and is the only one among the participants to get her high school diploma as a regular student (i.e., not as a mature student or with equivalency credits). She did have the very unusual advantage of being allowed by plan to remain in a semi-independence program until she graduated 9 months after turning 18. On the other hand, she had to cognitively and emotionally overcome what she described as the dulling effect of psychotropic medication.

The participants are very aware of the importance of education and feel time pressing on them. Raquan is most clear.

I keep thinking about getting to my goal, for my career. I have to get my credits, do the best that I can so that in the future, I just have the quickest way possible to reach my goal.

He has a tight plan worked out, which, if everything goes well, he hopes will provide him with the education, employment and social connections he needs to make the school to work-and-school transition.

Steven figures he has "grade 8, grade 9" and chronic trouble with school, but nevertheless has to find a way to return to school, even though it can't possibly be accomplished within the time he has left on extended care and in a subsidized and supported living arrangement.

He hints at the problems posed by school for those who carry special responsibility as children.

Hardly ever went to school, though. Didn't stay in school. Just sitting in a classroom drove me nuts. I grew up pretty fast. I had to. I felt that I was more mature than all the other kids and just being around them made me sick. I don't like being around immature people for some reason. Everyone in group homes I find grows up really fast...I know I have to go back eventually and get my grade 12.

If childhood in troubled families or in care does not deliver the circumstances necessary to be a student, perhaps education as an adult is a solution. Some of the girls who became mothers (Kim, Diane) were given renewed support to continue with their education in anticipation of preparing themselves to support their children. Kim attended a high school with an on-site day care, so that she continued to breast feed her baby for more than a year. Diane was enrolled in correspondence lessons, but could ask a tutor to visit her at home to give her additional assistance. Diane was absolutely clear that becoming a mother not only increased her motivation to apply herself academically, but also the possibility of getting the support she would need to do so. Incarceration gave some participants another opportunity to continue their education. Susie, for example, was able to advance her education during the 17 months she was in jail awaiting trial. This may also have been the case for boys who were incarcerated for longer periods of time, but because I was unable to interview them, the information is not included in the data.

What becomes clear from the experience of these participants is that educational achievement needs to be assessed early on and consistently and vigorously supported, if youth in care are to achieve sufficient education to compete in the work force. At one level this involves paying attention to academic details as a supportive parent would, a consistently-identified problem and recommendation in the care-leaving literature. But it may also require a broader analysis and intervention. King & Peart (1996) describe a pattern common among Ontario students, parents and teachers, where each interpret low marks as lack of motivation or hard work on the part of the student. This must be particularly damaging for students who, like these participants, are preoccupied with adult concerns, whether as young children in dysfunctional families (e.g., Vanessa) or in care (e.g., Steven), or as adolescents with the child welfare metronome beating loudly in their heads (e.g., Raquan) or struggling with trauma (e.g., Teresa). If surrogate care cannot reinstate a somewhat carefree childhood, it may be that classrooms will need to learn to accommodate prematurely parentified children, if children in care (and perhaps others in difficult living situations) are to be effectively educated.

Given the bits of early history that emerged in the data, one wonders if biologically-based impediments to learning such as fetal alcohol syndrome and neurological damage as a result of injury or poor nutrition are adequately explored as factors affecting education. Steven, for

example, had 2 severely alcoholic parents and lived in exceedingly violent circumstances as a child; does his reported inability to sit still have a neurological component in addition to the emotional component he identifies? If that were so, one can see how defining the problem more precisely might help Steven understand and manage himself. But, if it were the case, how would it affect what is expected of him, and what services are provided him? A reluctance to diagnose is natural where no remedial options are available.

The issue of the proper approach to emotional impediments is similarly difficult. Getting an education has gone within a generation from being a privilege to becoming the primary duty of childhood. Failure to do so is, at bottom, held to be a personal failure, the student's failure. While there is general agreement that good parenting and good teaching is useful, maybe even essential, in creating good students, there is little agreement about who is responsible to intervene when they are absent, and what interventions would be remedial. Children and youth in the care system are prime victims in this attenuated debate. In pressing for better academic performance from youth in care, we must take care not to blame them, but to find ways to offset the consequences. We have as a society accepted the challenge of educating physically disabled children. Perhaps it is role of the child welfare system to advocate for children with invisible emotional and social disabilities to be granted similar consideration.

6.2.2 Employment

As discussed in some detail earlier, youth are among the most disadvantaged group with respect to employment, and their disadvantage increases in the absence of education. Given this context, it is not surprising that the participants were not doing well with respect to employment. Six participants had never worked (4 girls and 2 boys, 20%) compared with 18% of the 18-year-olds in the Toronto CMA in 1991. However, 14 participants (47%) worked less than one week in the year preceding answering the questionnaire (1993), compared with 7% of their age cohort in 1991. Given that youth unemployment is relatively stable, it is unlikely that overall employment rates influence the difference; if that were a factor, however, 1991 as a year of recession would have been the more difficult time to find employment.

But employment signifies something quite different for youth leaving care than for their age cohorts, since any source of income support available to them after they leave care facilities, whether it be welfare or extended care or student assistance is insufficient to live on in Toronto, where the cost of living is high. The rate of extended care was harmonized with general welfare rates in 1993, set at \$663 per month, less than \$8000 per year. This is

slightly more than half the poverty line in Toronto for a single person (Monsebraaten, 1995), and slightly more than the cost of raising an 18-year-old in his/her family in Toronto in 1991 (Social Planning Council of Metro Toronto, 1992). While most youth may work to buy clothes or entertainment, or to save for post-secondary education, youth leaving care need to work to augment any financial support they can qualify for in order to meet a basic budget.

If youth are supported by welfare, they are allowed to earn only \$100 per month; anything in addition is deducted dollar-for-dollar from their benefits. Fraudging welfare becomes a survival necessity, unless youth can qualify for subsidized housing (which is very difficult), use food banks, eat at soup kitchens and cadge food and other necessities from friends, who may themselves be under-resources. Extended care has much more generous earning limitations, and many CASs also give the youth a public transportation pass, and clothing or book allowances either routinely or on negotiation. Increasingly, CASs allow youth to receive extended care in addition to student assistance (for post-secondary students), which goes some way to addressing the inequity of their needing to support themselves during the summer vacation while saving the amount expected by the government (which presumes that living costs will be subsidized by parents), and reduces somewhat the debt load amassed by a self-supporting student.

Not surprisingly, much of the employment that participants reported was 'under the table' work, that is, legal work but paid in cash to avoid mandatory employee contributions (income tax, pension and employment insurance). Rachel, the one participant who earned more than \$10,000 in 1994, did so as a table dancer, for which she estimated she was paid \$1570 per week in salary and tips, earning almost \$50,000 before a second pregnancy ended her job. Working under the table is not always lucrative, and the worker forfeits any protection against exploitation or dismissal that the law provides. (Melissa's partner, for example, earned \$200 for a 60-hour week of car body repairing, far below minimum wage; he was in Canada on a visitor's permit and therefore not allowed to work legally.) Many youth have little choice because they are not competitive in the regular job market, they can't afford to contribute in the present to income tax or employment insurance, even if it might be returned in the future, and the absence of an official record of employment offers some protection against proof of welfare fraud. Most participants who received welfare also received undeclared money, ranging from significant earning (e.g., Rachel, who also was living with a partner, which is grounds for ineligibility, in a house owned by his parents), to occasional modest gifts of money from boyfriends.

Some participants avoided the potential exploitation of under-the-table work by doing illegal work. Joey, for example, claims to be able to find as much employment as he wants

stealing cars on order for a large operation that specializes in exporting luxury cars, for which he is paid \$1000-2000 per car, and "moving" less desirable cars domestically and for a lower rate. Clark claims similar rates of pay for similar work, but preferred making a steady \$100-150 per day on small drug sales.

Some participants took part in supported jobs intended to teach employment skills. Some found these enjoyable, although not in the end a useful entrée into paid employment. Diane, while in a Young Offenders setting, was required to take a work preparation assignment and enjoyed the feeling of independence that came with earning money.

So they got me into a Futures program. I was making \$250 every 2 weeks. And once I started to make money, I felt like I was gaining something back. This was my money, I'd earned it. Now that was the first that I had some financial income.

Steven, who hated school, loved working with horses, for which he got academic credit and a career goal, to be a horse trainer or assistant vet.

I wanted to be there every day. Before I left the group home, I was the best rider there. I got 98.9% on my final equine studies exam. The highest mark ever given in the group home. I was the best rider ever there. I could do everything, ride standing on my head, just about.

On the other hand, Clark worked 100 hours a week as a sales trainee, selling cleaning products door to door, being transported to and from the area with the sales team who included stopping for a drink (or several) on the way home as part of the job. For this he was paid \$50 a day as part of a government-funded job creation program (i.e., all employment costs were recovered by the company from the government). He quit after 16 weeks.

Some of the girls saw parenting as full-time work that warranted public support. Marie defended this position vociferously in an unrecorded exchange with Jason's foster mother during a lunch-time discussion on the day of the group meetings, stopping just short of pointing out the parallel between the work Marie was doing with her infant son and the foster mother was doing with handicapped adults, for which both received government money.

For others, the importance of social networks -- knowing the right people -- was felt to be a vulnerability for youth leaving care, since they lost access because of geographic and social mobility, or perhaps simply never made useful connections. Clark married into a large family that he anticipated would incorporate him into their work world through a construction job from his wife's uncle. Raquan worked hard at perfecting his social graces and identifying people who could be useful to him. He also planned to take co-operative education courses (work for academic credit) in the hope that they would provide a connection with an employer and/or mentor in his chosen field.

Given that occupations often follow family lines, a glaring absence in the data is information

about what the parents of the participants did. Some, of course, may have had employment difficulties themselves, but although several participants mentioned their parents being involved with working, no one mentioned what kind of work they did. Only Tim saw himself as following in his father's profession, and that, unfortunately, was as a drinker of Jack Daniels whisky.

6.2.3 The participants' perspectives

The participants were very aware of the complex connection between education, employment and financial self-sufficiency, and of their relative disadvantage. Many were resigned to somehow solving the dilemma. We heard earlier from Steven, faced with an impossible task. Similarly, Johndoe plans to take a bar-tending course -- as soon as he can save up the entrance fee. He also had a claim before the Workman's Compensation Board for a back injury incurred while he was working in a bakery, possibly under a government-supported work preparation program. He felt he would be jeopardizing the claim if he worked before it was resolved. He therefore "grabbed a rim or two" (i.e., petty theft) whenever he needed to augment his welfare cheque.

When participants became parents, they seemed to feel an increased need to succeed at work and/or education in order to provide properly, both materially and as a role model, for their children. However, particularly for the boys, the means to do so was not enhanced in any way, so the net effect was to increase feelings of guilt and pressure. What is also missing, sadly, is a sense of vocation, the idea of a contribution that the individual could make to the world, a skill, a passion, a dream. Some participants identified employment goals -- Johndoe to be a bar tender, Stephen to train horses, Marie (with 2 credits toward the 30 required for a high school diploma) to be a mechanic or a lawyer -- but the massive impediments to achieving these was reflected in their voices, a tinge of defeat, a realistic assessment, perhaps, of the probability of succeeding. There were 2 exceptions: Julie plans extensive university training and demonstrates the intellectual capacity to do so, and lives with 2 god-parents with PhDs who share her assessment of this as a reasonable and attainable goal, and will support her in achieving it. Kim is very close to finishing high school and wants to be a policewoman; she has a stable relationship with her long-term boyfriend and his family and expects they will marry soon. She may have a competitive advantage as the Toronto police force recruits visible minorities and women to balance their long-standing conservative hiring practices. Kim demonstrates courage and a passion for justice in her narrative. The third exception is of another order: Dominic has not done well in school and during data collection was working hard at getting an old car running so he could have transportation to get to a job in the rural area in which he lived. In fact, he missed the group

discussion because he had just started a job as a stock-boy in the local supermarket. But he has a dream.

Well, I hope to be a successful chef. My goal is to own 3 restaurants, placed in different parts of the world.

Whether or not he achieves it, one has the feeling that it contains an important essence of his *real* identity that comforts him as he slogs through a difficult prolonged struggle to survive physically and emotionally.

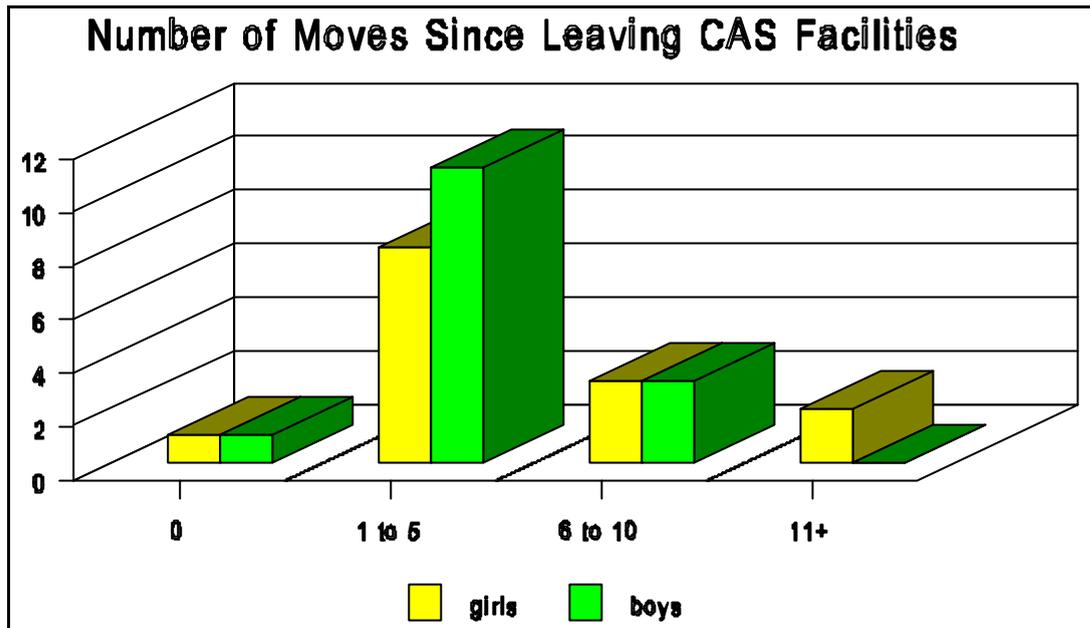
Boyd & Norris note that "Although leaving home is considered part of the natural progression to adulthood, it can have devastating effects on those who go when they are too young or without skills." (Boyd & Norris, 1995:15). Youth leaving care have no choice but to leave both a physical home and a commitment of care when they are too young, and the effect *is* devastating, in the short run as they try to continue education, where they are often discouragingly delayed, and in the long run as they compete from a very disadvantaged position in the labour market. A logical analysis would suggest that we do not expect youth leaving care to make a successful transition to productive adulthood, any more than we would expect someone with their legs tied together to win a race. This structural disadvantage might be assuaged by access to good social resources who can buffer the transition.

6.3 SOCIAL RESOURCES

Youth leaving care who leave their placement at or in anticipation of the legal requirement to do so lose not only the social network that surrounds it, but, if they move away from the community, dislocate their larger social network as well. We have established that participants tended to move out of care facilities even before status is terminated, in a sense rushing to meet their destiny. In this section we examine the specifics of whom they lived with after leaving care facilities, and explore the interface between social and economic resources.

6.3.1 Post-leaving living circumstances

Participants were asked to specify the number and kinds of living situations they had lived in since leaving CAS facilities. The range of responses was from "none" (Jason and Vanessa remained in agency facilities) to "more than I can remember" situations. The period of time ranged from 7 to 48 months. The average time between participants leaving CAS facilities and answering the questionnaire was 25.4 months, with very little gender difference. The number of moves that participants made in that time, identified by gender, follows: (N=29; data on Susie is missing)



It appears that the girls moved slightly more than the boys. They were out of agency facilities an equal time, and out of agency supervision longer than boys. We might conjecture that the agency allows boys more latitude while under supervision, whereas girls need to leave agency support to get 'freedom', real or imagined. Perhaps boys, who are more involved with the justice system, are stabilized by court requirement. Perhaps the girls are more vulnerable living in the community, and therefore move more often. Perhaps the girls are more comfortable negotiating and therefore move more readily or identify more options. There are fragments of all these possibilities within the data, but no clear patterns emerge.

6.3.2 Living alone or with room-mates

Obviously most participants tried a number of living situations. The golden dream is living alone, having an apartment (nice, of course, with plumbing that works and pleasant neighbors). This option is largely unaffordable and unavailable, since youth leaving care are not preferred tenants (Martin & Palmer, 1997). Furthermore, many participants found it lonely and scary. Steven, who preferred being restrained to spending times in isolation rooms while in care, was clear.

I didn't want to move out on my own.... I thought I'd be in my own apartment by myself all the time, drive me nuts.

He moved into a rented room with access to kitchen and bathroom, the usual affordable option for youth.

That was pathetic, just fucking pathetic. I'm renting this place for 2 months, \$300/month. The only rooms I'm allowed to use in the house -- I'm just renting a room -- is the bedroom I was renting and the kitchen and the bathroom. Could only do laundry once every 2 weeks, which I needed to do it at least once every 3-4 days. Couldn't go into the living room. Couldn't do jack shit, man!

Visitors are often a mixed blessing, on one hand company, on the other an expense. (I didn't ask how a superintendent fit in this situation, since he was renting a room in a house; perhaps Steven meant the landlord.)

Then one of my friends from [the group home] got me kicked out of there. I brought him into my house, let him spend the night one night, but he didn't know when to go home. All night long, breaking dishes, playing the radio way too loud when I was sleeping, smoking in my room when you weren't allowed to smoke in the house, eating other people's foods. Just making a total dick of himself. And how I got kicked out for sure was he was being really noisy so the super[intendent] told me (sic) to go out for a while, cool down, come back. And my friend started getting mouthy, and then the super for some stupid reason spit on him, and then slammed the door. So my friend turned around and kicked in a \$300 door: there goes my last month's rent.

The girls were also vulnerable to 'friends' taking over their apartments. Diane was set up nicely in the community when she graduated from a Young Offenders facility. But she couldn't maintain control.

[M]y house became a party house. I had people smoking drugs, drinking, bringing their girlfriends over to have sex in my house. Then I felt like I lost control in my own place....So I moved and left everything.

Samantha, as we heard earlier, was similarly vulnerable to transiency.

And then I moved out to [a small city] on my own, and met a whole bunch of new friends. And I was living at the house for a year, but I wasn't there most of the time. I quit school. And living at one place but also paying rent at another. Then I moved out with a couple of my friends and it wasn't the greatest situation. We couldn't live together like we thought we could. And I left and moved in with another friend of mine temporary. And then I got my own place again. I moved out, then I moved into another place.

As Samantha indicates, living with room-mates, although the usual sequence for young people when they leave home, is not as easy as it looks. Raquan points out that the pool of people from whom to choose is limited, and they are likely to share the same disadvantages, which in a sense increases vulnerability exponentially.

I saved up just enough to move in with my former opponent at the independent program that I was in before I was at the foster home.... I saw that since he was more likely to be a future room-mate than my friends at school, I decided to move out with him to an apartment....It turned out not to be what I thought it would be, to move out on your own. Because my roommate turned around and stiffed me out of our place by siphoning money off me monthly because I didn't know how to write cheques. He was paying off his loans or payments for products that he received from various department stores. The landlord decided to kick us out because we had not paid some bit of rent, because of my room-mate's actions. Another mistake I had made because I assumed it was a wise decision to move out with this

person before finding out who he really was.

It seems to me that Raquan had a pretty good idea about his room-mate's shortcomings, but little choice because all the 'good guys' were still at home with their parents.

6.3.3 Being transient or homeless

These multiple vulnerabilities rendered many participants transient or near homeless on occasion. A slightly higher proportion of girls (6 of 14) than boys (4 of 15) reported having used shelters or hostels, been homeless or transient with friends. Margaret and Joey, both street-oriented, reported having frequently been in this situation. Individuals had varying but strong opinions about hostels; for some they were intolerable options of last resort, but others used them more matter-of-factly and saw sleeping in stair-wells as the worst to be had. This may have influenced their reporting patterns; 007 and Veronica, for example, described staying with different friends each night, in what seemed a very random arrangement, but denied having been transient or homeless. In the course of data collection, an additional 3 girls (Samantha, Vanessa, Lacey) lived in hostels and 2 boys (Spirit, Steve) were homeless.

Even where homelessness or under-housing was not a factor, the participants were a very transient lot, continuing the pre-research mobility well into data collection and very likely beyond. Of all the participants who *could* move during data collection, only 3 of each gender did not (Julie, Kim, Victoria, Pianist, Steven, Jason)

6.3.4 Returning to family

While there is a sense in the care-leaving literature that reuniting with biological family happens fairly frequently (e.g., Bullock, 1995), there is little agreement on what this signifies, whether it is a positive, negative or neutral outcome. My data suggest that it may be any of these. Among the participants, 13 (8 girls, 5 boys) lived with biological family at some point after leaving care facilities. For 7 of these (Melissa, Julie, Lacey, Veronica, Pianist, Steven, Dominic), the move was the first after leaving the care facility, with some sense that a reconciliation was possible or ought in any case to be attempted. For the remainder (Diane, Shawna, Margaret, Samantha, Spirit, Affrenaway) it occurred after other moves. As we heard earlier, Julie returned home because she couldn't be sure that it was an unworkable option in the time she had available to decide, considering as well other developmental priorities. For others (Pianist, Melissa) returning home looked like a good option and by the time they knew otherwise, child welfare status could not be reinstated. Some seemed desperate: Samantha, pregnant, escaped the chaos we have just heard her describe to live

with her mother; Lacey went to her mother after she served time for assaulting group home staff; Affrenaway needed to learn self-control and discipline and saw his father as his only resource. For Dominic, although the living situation was far from ideal, and a previous attempt to live with an older sister had not worked out, returning home offered him an opportunity to get to know his mother and to strengthen his sense of familial connection, as well as to save a bit of money. Clearly returning to parental care is, from a personalized perspective, a very mixed bag. If it works it is very powerful. Steven, for example, talks about reconnecting with his father, even though they couldn't live together.

Me and my dad get along a lot better now. Me and my sister got him to stop drinking....[H]e hasn't had a drink for over a year now. And I'm proud of him and my sister is proud of him, and he's proud of himself. He used to drink 24-7 (i.e., 24 hours a day, 7 days a week).

He also has an important connection with his sister.

I think if I had to go a month without talking to my sister, I'd go nuts. We're just so close now.

Although it should seem obvious that legal separation does not equal emotional separation, it seems that family roots are not always given the importance they warrant. Even 'bad' parents are valued. Vanessa, for example, felt she had to manipulate to gain access to her father, who had a history of drug abuse.

Losing contact with dad...was the hardest thing because I was so close to my dad....There was a time when my mom was in the hospital and he was really there for her, cooked for her, cooked for us, took care of the house while she was gone...[E]verybody else couldn't care less if I saw him, they thought he was the worst thing that ever happened to me, but I didn't care....My mom sorta understood that I wanted to get back in touch with him. My workers tried to say that I didn't need him, but I kinda convinced them that I did. I was so happy to see him when I did find him, and he was happy to see me, and we took it from there. We were happy to reunite.

In the absence of information about family, there is an emptiness, a fragility, a rootlessness. Humphrey, for example, who had no idea of his ethnic background and little information about how and why he came into care, sees his life in the mirror of his daughter (living with the maternal grandmother under CAS supervision), a costly way to gain an understanding of one's history.

From all the documentaries on my life that was written up for me, [my parents] didn't seem all that bad. They seemed like people, like myself, that just needed guidance. It's not like they abused me or hit me or tried to kill me or anything. They just didn't know how to do it right. And that's not something that they should be punished for. Because taking someone's kid away I feel is the worst kind of punishment.

6.3.5 Partnering and parenting

A number of youth addressed housing issues by partnering, which has all the pitfalls of living with room-mates but the possible advantage of loyalty and/or affectionate companionship.

Marie had 2 different live-in partners in the course of data collection. Her motive is very clear.

I don't like being alone. I'm scared to be alone, especially with a child. If I didn't have anybody helping me with baby, I might go stir-crazy, or crazy, period...

She is aware of a down-side.

[but] sometimes having adult company isn't what I need. Because sometimes people get me mad and I start getting pissed off at them because of certain things they say or certain things they do. Because I lose my temper pretty quick and I try to control that now because I have a baby.

She has developed a procedure over time.

I don't look for any specific guy. It's just if they're nice to me and nice to my child, then they can come and stay with me. But if they become butt-heads, I throw them out.... I don't offer them nothing. Except for a place to live and companionship.

Their presence is a mixed blessing. The companion she threw out during data collection smoked crack cocaine, stole money and compromised her with police. His presence also jeopardized her eligibility for welfare, although she seemed unconcerned (perhaps unaware) about that possibility. In the end, she thought four-footed friends might be the best bet.

Pets...keep me company because they come and cuddle with me when I'm feeling upset. And they're quiet and not rowdy, like a baby is. Ha ha.

The relative advantage of partners depends upon their ability and willingness to manage life challenges. As Quinton & Rutter (1988) suggest, success in choosing partners, like choosing room-mates, depends on the quality of the candidates in the pool to which one has access. Just as early emancipation and a lack of family resources reduces material options, so a limited and malfunctioning social network reduces social options, and therefore the probability of making a good match.

At the time of the first interview, 5 girls (Rachel, Melissa, Margaret, Diane, and Marie, who refused to describe her relationship as common-law) and 3 boys (Humphrey, Clark, Affrenaway) had what they described as partners. Over the period of data collection, there was much change: Samantha moved in with 2 boyfriends sequentially, Victoria claimed to be living with her partner most of the time while maintaining her room in a women's residence, Affrenaway split up with his partner, Melissa and her partner lived separately for practical reasons, Diane's partner went to jail long-term, Tim shared a room and occasionally a bed with his partner even after they split up, because of bail requirements.

The girls tended to have same-age or older partners (Diane's partner was twice her age, Melissa's 27 years old) whereas the boys had same-age or younger partners (Humphrey's girlfriend was 17). Some partners had children from other than the present relationship: Marie's companion had 3 children elsewhere, Melissa's partner had a child in Trinidad, Victoria believed her partner to have had 3 children, all deceased, Affrenaway's partner had a

toddler who lived with them. The partners tended to be unemployed, although some had been involved with the labour market and had identified skills (e.g., butcher, auto mechanic, welder, drugstore clerk).

Some of the participants with partners also had children with them, and some were parenting without partners. Five girls (Diane, Kim, Marie, Rachel, and Veronica) and 3 boys (Tim, Clark and Humphrey, more or less) were parenting their own child; 4 boys (Affrenaway, 007, Joey, and Clark, his first child) and one girl (Samantha, more or less) were not parenting their own child. Affrenaway briefly parented his partner's child. Melissa intended to parent a child lost in a late miscarriage.

Some of these partnerships brought strength to the participants. Rachel, for example, got some financial support from her partner and his family, who were their landlords. Kim was emotionally and instrumentally supported by her partner and his family. Clark was able to leave crime behind to become a "happy little family" with the mother of his second child, after being unable to do so in an earlier relationship. Tim was living under the same roof as his estranged girlfriend in an arrangement that, although stressful, allowed him to be out of jail awaiting trial; he also found friendship and practical support among her friends and relatives. Melissa finds companionship and understanding with her partner, as did Teresa at a prior time when she felt very alone and abandoned.

On the other hand, some of the partnerships were fraught with difficulty. Humphrey's younger girlfriend was even less able than he to assume adult and parental responsibility; he explained that he had assaulted her when she was afraid to stay with the baby alone and followed him as he tried to walk away from an altercation. Diane's partner emotionally and physically abuses her. Veronica's boyfriend and the father of her child is largely unavailable, perhaps because of tension between him and Veronica's mother, with whom she lives. The father of Samantha's father rejected her mid-way through her pregnancy, and she has had at least one equally unsuccessful relationship since giving birth.

Participants did not, with one exception (Tim), admit to making conscious decisions to have children. The decisions about continuing or terminating unplanned pregnancies fell to the girls, who in most cases "just couldn't" opt for abortions, even when they were cognizant of the problems that parenting would entail. Some girls persevered with pregnancies in opposition to their partner's wishes (Kim, Marie), and one (Shawna) terminated the pregnancy in spite of her partner's mild opposition. Some male participants (Affrenaway) also felt that abortion was not a choice, and the one (Clark) who admitted advising abortion was happy that his partner had rejected his advice.

Given this very high rate of reproduction at age 18/19, 16 children in all from 30 participants, (9 from females, 7 from males, 2 children from one of each gender), some exploration of why they got pregnant might be in order. Some gave explanations in hindsight of the reason for getting pregnant. Two (Diane, Tim) wanted to please their partner. Tim says:

And [my girl friend] asked me, she goes, would you want a son? I said, for me, I don't know, I don't know if I'm ready. But she wanted one, so I said I'd do my best so she could have a kid, and that's what happened.

Diane's consultation took place post-conception.

We talked about kids and we talked about our future, but we never thought to have kids now, not this soon. He was ready to have kids, he felt his life was almost over--he was 36 years old. But I wasn't ready. I was only 17, I had everything to look forward to. I wanted to finish school, I wanted to get a start on my career. But I couldn't change that now.

For some, becoming a parent affirmed adulthood and independence. Victoria says she gave birth at 13 to a child conceived in an incest-type relationship, and that it was institutionalized with congenital abnormalities and soon died. Within the context of thinking that she was again pregnant, she says:

I think I wanted to have kids, because it meant that I can be an adult, and yes, society already recognizes me as one, but my mother can no longer tell me what to do, because I have kids, I have a life of my own. I'm getting married, and she can't tell me what to do...[M]y mother can no longer hurt me.

Others had a *bone fide* birth control failure (Kim) or used birth control inconsistently (Veronica, Shawna). Marie continued with a pregnancy to expiate her guilt at an abortion she had at 13 which she felt was forced upon her. The most common explanation, however, was no explanation: getting pregnant was something that "just happened" in the course of chaotic lives. Being responsible about procreation takes resources and energy that may have been lost as these young people struggled for material and psychological survival.

In spite of the limitations that early parenthood imposes on both parent and child, most participants were happy to be parents. How heavily parenting weighed on them tended, as in the larger society, to be gender-affiliated. Of the 8 girls who had babies, 4 of their partners stayed involved (Kim, Diane, Melissa, Rachel), not always positively. Of the 6 boys who fathered children, 3 were personally involved with parenting them (Humphrey, Tim, Clark) and another (Affrenaway) was inclined to be helpful although he had little idea of what was expected of him. Several of the participants saw parenthood as a settling factor (Kim, Veronica, Diane, Humphrey, Tim, Melissa, Clark with his second child, likely Rachel); others weren't able to settle down (Samantha, Tim's partner) or saw little connection between their life style and parenting (007, Joey, neither of whom had seen their child). Clearly, early

parent prevention programs need to be based on a many-faceted and in-depth understanding of what the event signifies and the social conditions under which it takes place. There is little evidence from these participants, for example, that would justify approaching birth control through sexuality, and a lot that would suggest approaching it through generational linkage (i.e., a sins-of-the-fathers or a like-mother-like-daughter approach). Certainly punishing young parents is not an effective deterrent but only increases the probability that another generation will be sacrificed (Fulton & Factor, 1993). Among these participants there is a clear association between good support, whether programmatic or personal or a combination of both, and optimism about a good outcome.

6.3.6 Other dependencies

Another group of youth extended their dependency in various ways. Two remained in agency facilities, Jason because of severe developmental delay as a result of being injured by his father as a toddler, Vanessa because of a psychiatric diagnosis. Steven moved into a supported living situation administered by an agency other than CAS which had a slightly older live-in "mentor" and several male residents whose rent was subsidized. Lacey moved into a long-term hostel/residence late in data collection, similar to the residence that Victoria remained in throughout (more or less).

Other youth, mostly boys, moved somewhat seamlessly from the child welfare system to Young Offenders facilities and adult jail. Joey describes, almost with pride, that he has not been out of jail for more than a couple of weeks since a few months after he came (back) into care at age 14. Joe tried to interrupt a serious commitment to car theft by moving in with the family of a friend, but soon left and is believed by his friend to be re-involved with crime and drug abuse, and/or back in jail. Susie has been in jail since a month after her 18th birthday on a murder charge. Tim and Humphrey are in and out of jail with substance abuse and anger management problems, and Johndoe does time whenever he gets caught doing petty crime to balance his budget.

The line between CAS and justice resources is, from the participants' perspectives, very thin and to some extent unimportant. Diane, for example, found closed custody more useful than group homes because she couldn't stop running from group homes but had no choice in custody. Tim found himself an equal, in the good sense, with the guys he met in jail, whereas in group homes he felt that he was being discriminated against because he came from CAS (i.e., had done nothing wrong) and other residents were Young Offenders. Clark hated the limitations of jail but managed group homes well and found them to be loyal to him

beyond his expectations. Steven loved his highly-structured group home in which he was frequently restrained, but his juvenile justice involvement was minimal. What is important in how useful participants found the resources was a highly personalized sense of fit or lack thereof, which might be derived from individual workers, for better (Tim) or worse (Clark); and other residents, for better (Shawna) or worse (Raquan, Diane, Veronica).

Although I did not ask participants directly if they had criminal charges, the majority of participants indicated they were involved with the justice system. Five girls (Lacey, Marie, Diane, Veronica, Susie) had been charged and all but one (Veronica) had served time. (Margaret and Rachel probably also had charges but did not serve time.) All the boys but one (Jason) had been involved in criminal activity. Steven seems to have been buffered from charges by the intervention of his group home, and 2 others were given non-custodial sentences, but 12 served time in jail, several establishing what could be called a criminal career. For many, this is a self-defining characteristic, a social identity that influences, even defines, their social network. Tim, for example, found a compatible social network in jail that is helpful to him outside jail as well. He says:

[I moved in with my posse.] And my buddies were right there for me. Like I had everything, a king-size water bed, heated. A TV in my room. Ghetto blaster. Everything. Supper cooked for me. For once a real family. That's why I get along with all my friends, because they're like a family. Like my buddy Chas, I call him "brother" because we're like brothers. And that's the one I met in jail. Like he'll have problems with his girlfriend or something, I don't see him turning to his mom or anything, he turns to me and we spend an hour and a half on the phone and sort it out. The day he gets out of jail he spends with his girlfriend, but the next day he spends with me. Because we care.

I observed discussions with Tim's network during data collection that covered helping him with child care, talking him through stressful times with his ex-partner, advising him on how to get access to recreational resources in the community paid for, and pre-arranging an optimal work placement in jail.

6.3.7 Discussion

We established that the participants were disadvantaged in economic competition, lacking the education and work experience necessary to qualify for the jobs they needed in order to support themselves. Similarly, they are socially disadvantaged, lacking a stable, well-resources network of people upon whom they can call as a matter of right, and a relatively limited package of resources with which to barter reciprocally. Nevertheless, like any human being, they need and want social connection. They find it where they can; they 'buy' the best they can afford. To the extent that their social world is small and their social assets

limited, the social connections they make are at risk to be less than what they need. As Quinton et al (1993) point out, there are many structural impediments to participants making the kind of social connections that would offset their economic disadvantage.

And there is a danger that competence is a liability within a needful social community. If the philosophy of one's social community is egalitarian, the gross effect on personal change is neutralized because one can only get out what one puts in. If the philosophy is Marxist, those who have more are expected to give more and those who need more receive more. To some extent this is the practice within the child welfare system, where, as the saying goes, 'the squeaky wheel gets the grease'. In a contained network that excludes the well-resources, however, this operates as an impediment to competence. The resolution, which some participants found, is to negotiate a reciprocal relationship in which needs and resources are juxtaposed in a way that maximizes the contribution of all, where the strength of one addresses the weakness of another and vice versa so that as an entity they are whole and healthy. The outstanding example among the participants of this optimal negotiation is Julie, who became a loving and rewarding surrogate daughter to a childless couple, who in turn gave her the material and emotional support she needs in order to develop her potential.

As Boswell (1988) demonstrated from the world of antiquity, when children in care are institutionally laundered to remove the stain of social shame, they also lose the markers that locate them in society. They become outsiders who lack the tender to negotiate entry. They cannot commence a negotiation for betterment until they are granted entry. To have a social location is more important than that the location is positive. (Indeed, to expect it to be positive is probably unwarranted, naive.) One could say the participants in this study are using the social capital they have to acquire the markers they need to locate themselves in society. The locations available are limited, primarily student, mother and criminal. Each of these can be construed as having a future over which the individual has some control. In recognition of this, society makes resources available (more or less) to support a positive outcome. By occupying these roles, the individual has the possibility of qualifying for social investment, this time in him/herself directly, rather than, as was the case in child welfare, indirectly via the system. From this perspective, the participants look like canny consumers in the world of the adult rather than flawed outputs from the world of the child.

6.4 CONCLUSION

The discourse of most care-leaving literature is about youth becoming 'independent', achieving self-sufficiency, and doing so by the factitious age of majority or such extensions as can be negotiated. An examination of the situation of the participants in this study,

however, suggest that they continue to be dependent, or in good scenarios, interdependent within well-negotiated and adequate relationships. A certain amount of dependence is age-appropriate, and the goal of interdependence (I would assert along with feminists and others) is a much more positive and healthy outcome in any case. The impediments to such an outcome are the overt expectation of independence at 18, inadequate attention to the precedents to normal development and skill acquisition, insufficient recognition and inadequate intervention to remediate difficulties arising from pre-care or in-care trauma, unacknowledged and unaddressed social and historical displacement: in short, abnormal surrogate parenting that is as inadequate and damaging, although perhaps differently so, as the biological parenting it replaced in a stated intent to serve the best interests of the child.

If one accepts the abnormality of the surrogate parenting structure, the behaviour of the individual youth within it begins to look quite normal and goal-oriented. Mostly, they are just doing the best they can with what they've got, managing the transition by doing what they can to meet their material and social needs. They see their choices as limited, which, from a comparative productive and social point of view, they are. Within this limitation, many applied for the best productive roles for which they were qualified: for the girls, motherhood; for the boys, illicit business. Most had some awareness that these choices jeopardized or limited their future, but they couldn't afford the luxury of making plans for the long run when the present threatened to engulf them. The choices they make determine their social and economic placement in the larger world in the present and influence it profoundly for the future, and as such they are outcome indicators of the care experience. Any improvement on the life trajectory of an individual must be attributed to the individual and/or to the resources s/he subsequently finds and uses, and cannot ameliorate what must be an indictment of a sadly insufficient system of surrogate care.

The vocational choices youth make, however, may have as a common and largely unstated characteristic the possibility of re-invigorating social investment in themselves, personally, and therefore providing a means to expand both material and social resources. There is, intertwined within the participants' stories of hard times and disappointment, a sense of optimism that is infectious and engaging. Most of them plan to have a better life than they have experienced to date, to avoid the mistakes their parents made, to break the generational legacy of failure. And they are, by and large, believable. They demonstrate courage and tenacity, pragmatic creativity, dogged determination in dealing with the daily ramifications of a history that has to date not been fair. What is the secret of their

optimism? Is it whistle-in-the-dark bravado? Small embers of spirit that have been banked and waiting to be fanned into flame by the winds of the larger world? The freedom to relocate themselves, re-invent themselves, independently of families and systems that weighed them down and held them back?

We turn now to a consideration of how the participants conceptualized their adolescent transition. We have said that it started very early, when first they realized that childhood was not synonymous with carefree dependence. The transition into care and the transitions within care were, for many, early variations on what awaited in the transition to adulthood, an apprenticeship. With adult cognition and legal adulthood comes new capacities and greater opportunities, the resources -- finally -- to do the job that many of the participants felt had been theirs from earlier times.

CHAPTER 7: THE STRUCTURE OF RESISTANCE

One of the difficulties that the research protocol presented is that the participants were free to take the general question of how they thought about and managed the transition to adulthood in any direction that suited them, and they did indeed take it in many directions. Even within a single issue area, such as parenting or education, for example, there are almost as many perspectives as participants. This may serve to illustrate that this population shares the heterogeneity that has been noted in most other studies on youth leaving care, and to increase our appreciation for the complexity of the work required of child welfare and child care workers, but it is a researcher's nightmare! How is it possible to draw meaningful generalities within this diversity?

In the end, I opted to focus on the structure of what the participants offered, the shape of their stories, rather than the specific content, in analyzing the qualitative material. The motivation to do so arose from a contradiction that was central and palpable throughout data collection, not so much between boys and girls as I had expected, but between the cognitive and the emotive. That is, while participants spoke of very difficult times historically, in the present, and in the foreseeable future, many of them emanated a sense of optimism, a stalwart intent to overcome and to succeed in life, that was believable even though it was not reasonable. Often the participants were not clear on *how* they were going to succeed, but they knew or believed that they *would* succeed, and I experienced many of them as convincing. Eventually, after many attempts to find a way to understand this that included their diverse realities, I came to see this as an expression of resistance, a refusal to passively accept a destiny, an intent to challenge life trajectory. Resistance encompasses internal and external realities, but centers on how the two are juxtaposed, which presumably is a learned skill. An exploration of the structure of resistance, then, might produce some insights into how to be helpful to individuals in difficult circumstances, and how to modify the practice of the individuals and institutions that work with them.

The route to this end was long and circuitous, and tracing the path of my enquiry is the purpose of this chapter. The felt tension between cognition and emotion recommended that I start with the work of Carol Gilligan, applying her construct of gender-affiliated ethical orientations to my data. This was less than satisfactory, although there was a preoccupation in the data with ethical issues. I therefore incorporated Gilligan's definition of

the problematic, the absence or obverse of each of the ethical orientations, functionalizing it with the transition from care experience in mind. This fit the data more satisfactorily, but problems emerged with trying to attribute a single ethical orientation to an individual on the basis of their description and discussion of a lengthy and convoluted process. It appeared that applying a particular ethical approach was not so much a characteristic of an individual (although consistency was evident in some cases) or gender (although there were some trends), but related to the nature of the problematic circumstances.

I returned to Gilligan's work for further guidance. Having legitimized an ethic of caring by proving its existence in females, she applied it to the external world as an act of resistance.

Thus, a care focus, which otherwise can be viewed as one aspect of moral reasoning, becomes a critical perspective on an interpretive level, challenging the prevailing world view." (Gilligan, 1988:xxiii).

The idea that applying an ethic of care to a situation postulated within an ethic of justice/order as an act of resistance fit well with my experience of the child welfare system. It is an institution defined by legislation -- predicated in an ethic of order -- co-existing with its function, to support and surrogate parenting -- predicated in an ethic of caring. The role of workers in the child welfare system is to modify the rigidities of the legislated framework to meet the variable needs of human beings: an act of resistance without which good and satisfying work is not possible. It seemed reasonable that children and youth raised within the system might use a similar strategy.

I reconsidered the data, summarizing each participant's material from all sources to display connection between ethical orientation and nature of the problem. What I perceived was participants using a language of order when speaking of the external, public, institutional world, and a language of caring when referring to their internal, personal, intimate world. Some of Gilligan's colleagues had worked in this area, demonstrating that while there was a gender predisposition to one or another ethical orientation among most (but not all) individuals, many could readily invoke the alternate orientation upon request, or make a choice of orientation based on the subject matter (Johnston, 1988). They could, in essence, be ethically bilingual, more or less fluently.

As I combed through my data exploring the relationship between language and content, I became aware of a strong relationship between linguality and my subjective assessment of their vulnerability. The most vulnerable participants were those who were silenced or

echoing, who did not have or did not own their own words. Only slightly less vulnerable were those who were unilingual, able only to apply one orientation to their story. I felt more optimistic about those who were bilingual, and especially optimistic about those who demonstrated confidence and consistency in matching language and content. This suggested that having a language to use is a survival factor, being bilingual provides the possibility of a strategy of resistance, and being able to make conscious choices in the use of language depending on the circumstances, highly protective. Furthermore, it was a skill that could be taught.

I then reconsidered gender as a factor in what now appeared to me to be a learned skill, being able to perceive a difference between one language and another and to choose an appropriate language. Is 'mother tongue' gender-affiliated? While the supporting evidence had been highlighted in much of Gilligan's earlier work, moderating evidence was given more play as her basic contribution was more broadly accepted. The influence of maturation and motivation need also to be taken into consideration in understanding gender differences in my data.

7.1 ORDER AND CARING

Although the renaming of 'justice' to become 'order' happened at the end of the analysis of the qualitative material, it seems reasonable to discuss the rationale for doing so at the outset. Since my first encounter with Gilligan's work, the dialectic between 'justice' and 'caring' seemed slightly amiss, nagging like a picture hung just askew. The choice of 'order' as a replacement appeared in my mind as it was saturated with the narratives of the participants, and I embraced it because it fit: the nagging lifted. I then sought to rationalize the exercise, but in the end it seemed a you-say-potato-I-say-potato argument, which, like the song, loses itself in print. I think it is deeply rooted in relative cultures, that the litigious American culture in which Gilligan and her colleagues work thinks in terms of justice, and I as a queuing Canadian think in terms of order. My reasons for re-naming the categories as I do, are, at this stage, nothing more than that it feels better to do so.

To allow the reader to make his/her own choice, I offer Nona Lyons' (1983) functionalized definitions of the two moralities, which seems the common standard, as follows:

Table 4: Gilligan/Lyons' Definition of Morality of Justice/Morality of Care:

A MORALITY OF JUSTICE	A MORALITY OF RESPONSE AND CARE
Individuals defined as SEPARATE/OBJECTIVE IN RELATION TO OTHERS: see others as one would like to be seen by them, in objectivity;	Individuals defined as connected in relation to others: see others in their own situations and contexts;
tend to use a morality of <i>justice as fairness</i> that rests on an understanding of RELATIONSHIPS AS RECIPROCITY between separate individuals, grounded in the duty and obligation of their roles.	tend to use a morality of <i>care</i> that rests on an understanding of RELATIONSHIPS AS RESPONSE TO ANOTHER in their own terms.
Moral problems are generally construed as issues, especially decisions, of conflicting claims between self and others (including society); resolved by invoking impartial rules, principles, or standards,	Moral problems are generally construed as issues of relationships or of response, that is, how to respond to others in their particular terms; resolved through the activity of care,
considering (1) one's role-related obligations, duty, or commitments; or (2) standards, rules, or principles for self, others or society; including reciprocity, that is, fairness --how one should treat another considering how one would like to be treated if in their place;	considering: (1) maintaining relationships and response, that is, the connections of interdependent individuals to one another; or (2) promoting the welfare of others or preventing their harm; or relieving the burdens, hurt, or suffering (physical, psychological) of others;
and evaluated considering: (1) how decisions are thought about and justified; or (2) whether values, principles, or standards were/are maintained, especially fairness.	and evaluated considering (1) what happened/will happen, or how things worked out; or (2) whether relationships were/are maintained or restored.

(Lyons, 1983, reprinted in Gilligan et al, 1988:35; emphasis in original)

I created a working definition for coding justice/order and care by simplifying and conflating Lyons' work. I defined the ethic/perspective/language of justice as having the qualities of *rules, roles and reciprocity*, and the ethic/perspective/language of caring as having the qualities of *inclusiveness, responsiveness, and reduction of harm*.

The first step was to go through all the data from the 24 applicants (12 of each gender) from whom I had at least three interviews, and code for ethic of caring and ethic of order. The coding criteria were not clearly evident in much of the data. I understood the difficulty to be that the data were not produced in response to a question about ethics or to a specific problem, as were data in the work of Gilligan and her colleagues. Because the participants

were coming to it from various angles, the view was obscured, so to speak.

7.2 RIDDLES OF RESISTANCE

The concept of ethics was central to the data, however, and most clearly evident in discussions of problems. It included information about the nature of the problem, as well as about the approach taken to the problem. Gilligan's orientation to problems is as follows:

From a developmental standpoint, inequality and attachment are universal human experiences; all children are born into a situation of inequality and no child survives in the absence of some kind of adult attachment. The two dimensions of equality and attachment characterize all forms of human relationship, and all relationships can be described in both sets of terms -- as unequal or equal and as attached or detached. Since everyone has been vulnerable both to oppression and to abandonment, two moral visions -- one of justice and one of care -- recur in human experience. Gilligan & Attanucci, 1988: 73-74)

I adapted this approach to develop a matrix with functional definitions of ethic of caring and ethic of order under the conditions of equality, problem of inequality, condition of attachment and problem of detachment. Reasoning that the existence of a problem called for a decision to either act to resolve the problem or to live with it, I developed two options in each of the problem areas, one for acquiescence (A in the table) and another for resistance (R in the table). The functional definitions are shown below.

Table 5: My Functional Definitions of Ethical Orientation in Relation to Circumstances

	ETHIC OF ORDER	ETHIC OF CARING
CONDITION OF EQUALITY	A = you play by the rules and win a reasonable amount of the time.	A = you are loved by those who care for you and they are competent.
PROBLEM OF INEQUALITY	A = you play by the rules and lose because of inadequate resources. R = you bend the rules to win by adding resources.	A = those who love you are unable to care for you; you are unable to grant yourself equal right to self-care. R = you assert your right to be cared for equally with others.
CONDITION OF ATTACHMENT	A = you have satisfactorily reciprocal roles with separate (distanced) people.	A = you are loved by those whom you love.
PROBLEM OF	A = you are unable to create/maintain reciprocal	A = you are abandoned,

DETACHMENT	roles, you are self-sufficient, isolated. R = you search for roles, train to play them well, join with others in order to increase resources.	rejected. R = you search for and engage in relationships for their own sake, forgive and re-invest in caring, (re)learn to trust and to build and maintain relationships.
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Resistance within an ethic of order had primarily to do with amassing sufficient material resources, and within an ethic of caring with engaging social resources. Youth leaving the care system are likely to be disadvantaged both materially and socially and therefore must engage additional resources in order to survive as they make the transition into being on their own and lose the right to resources provided by others. At this stage in my work, I was focusing on whether or not they resisted, that is, whether they articulated a condition that they posed as a problem and took action to resolve, or not. Secondly, I was focusing on how they conceptualized the problem and/or the resolution, whether as a lack of material resources to be addressed by getting more resources, probably by bending the rules, or as a lack of social resources to be addressed by engaging people.

I allocated each of the 24 participants into a cell, taking into consideration all available information, with the following result:

Table 6: Participants Sorted by Ethical Orientation and Circumstance

	ETHIC OF ORDER	ETHIC OF CARING
CONDITION OF EQUALITY	1.	5. Julie
PROBLEM OF INEQUALITY	2. A = Jason, Steve, Lacey R = Johndoe	6. A = Diane, Victoria, Spirit, R = Teresa, Tim
CONDITION OF ATTACHMENT	3. Clark, Marie, Melissa	7. Kim, Steven, Shawna, Vanessa, Veronica
PROBLEM OF DETACHMENT	4. A = R = Raquan	8. A = R = Humphrey Dominic, Samantha, Affrenaway, Pianist.

They did not fit easily. As I coded, I became very aware of my own subjectivity, the absence of any means of establishing the reliability of my decisions, and the sense that I was straining to put square blocks into round holes. But I felt there was some validity to what I

was doing, that the grouping of the participants made sense in some way. Although my analysis later subsumed this categorization, I offer it here to illustrate an essential step in the development of my thinking, and to familiarize the reader with the complexity of the data.

7.2.1 Ethic of order, condition of equality

The language of an ethic of order speaks of the separateness of individuals who relate through roles, rules, and reciprocity, without recognizing a need for emotional attachment. A condition of equality is a state of sufficiency and strength. No participant was placed in this cell because nobody had sufficient material resources to play by the rules and 'win' in the larger world, even a reasonable amount of the time.

7.2.2 Ethic of order, problem of inequality

7.2.2.1 Acquiescing

Three youth (Jason, Steve, Lacey) are placed in this category, because they use the language of order and are following the rules as best they can but with insufficient resources to succeed without external initiative. None speaks of the need for attachment, although this may in part be because of limitations in the data and/or a self-censoring. These participants displayed limited self-reflection and sense of agency and did not respond well to probing. Steve seemed to have little more to offer than what was contained in his first response. Lacey quickly became truculent and frequently sounded like she was repeating a recent lecture or sermon. Jason may have self-censored because his care-giver was consistently within hearing, or alternately, may have lacked the cognitive skills to deepen his analysis. All 3 present as vulnerable, as will be discussed in more length later.

7.2.2.1 Resisting

Johndoe is placed in this cell because he feels he cannot survive on his material resources and he manipulates the rules in order to add to his resources. He routinely engages in criminal behaviour to get what he needs, and is sanguine about paying the consequences. He sees the longer-term resolution in terms of being able to legally earn more resources.

I'll end up grabbing some rims or something off a car, because I'm having trouble

with the way I'm living off of welfare, and it's hard to get a job in this community. And crime is what I know best, so it's like a little fall-back when I need something. Sometimes you get caught and sometimes you don't. But I always expect the consequences if I do get caught...I think the government expects this, that's why they took the increase off the [welfare] check and are putting it into more jails...It's not a life that I like to live, but it's the only life that I know how to live right now. And I'm still young. I'm sure I'll get over this thing soon. I've already had my mind going for a course in bar-tending. I just got to come up with some money for it.

Johndoe speaks of his social needs in order terms as well, and in spite of attempts to make a "posse", the care system, and later a series of surrogate families into a satisfactory emotional arrangement, has not been able to do so. In the later stages of data collection, he spoke of a competing with his best friend for a girl, but thought that perhaps if she could be won *by* him, she might also be won *from* him in a later competition. There is an evident absence of the care elements of inclusiveness, responsiveness or minimizing harm in his approach.

7.2.3 Ethic of order, condition of attachment

The 3 youth in this category (Clark, Marie, Melissa) say they have satisfactory arrangements with one or a variety of people and do not at present identify a problem that requires to be solved for their current contentment. They speak of social connections in order terms, that is, in terms of satisfactorily interlocking roles, shared rules, and adequate reciprocity.

Clark was quite content with his current situation as part of a "happy little family" with his wife and their daughter, anticipating a well-paying job with his wife's uncle. He used the language of an ethic of order exclusively to describe his entry to care, his time in the care system, his involvement with the justice system, and negotiations with the mothers of his 2 children, the second of whom, "Monica", he married in the course of data collection. He attributes his ability to "hang up my crow-bar" to Monica relentlessly pursuing him throughout the pregnancy and making an offer that was more attractive than the continuing cycle of criminal activity and jail. He, like Johndoe, is matter-of-fact that if he were unable to support his family with legal earnings, he would have no alternative but to return to crime, even though he hates jail. However, he sees Monica, her large extended family and their good-will and involvement as strong protection against that possibility. Although Clark gives

Monica loving him and her persistence in pursuing him in the face of his outright rejection as the reason that they are together, he is unable to articulate why she might feel this way, to describe his connection to her and the baby in emotional terms, or to conceive of her leaving him. In the boys' discussion group, he explains the limits on exposing himself emotionally.

If I had a problem, I'd talk to my friend about it....I wouldn't be able to talk to my wife or my mom...I could talk to an adult male if he's up front. If he's a family member, I couldn't do it. I couldn't talk about my problems to my family..I could talk to a female as long as she's a friend, but if she's my girlfriend or my wife or my mother, I couldn't do it....I'd feel too feminine...I'd feel like one of the girls, you know what I mean?

Maria, throughout data collection, assiduously negotiated a broad spectrum of relationships that transformed the rights and responsibilities of motherhood into the acquisition of material resources. She was relatively content throughout because she was absolutely clear and articulate that she was not equipped to be independent and had no aspirations to that goal, at the very least until her son was much older, maybe grown up. Her relationship with her son did not seem to be in itself important, however, but, like Clark, a means to improve her negotiating position. She also had a series of male companions with whom her relationship was very pragmatic. There was little evidence of an ethic of caring.

Melissa is a bit difficult to place in the matrix with confidence, partly because of the quality of data that she provided and because of what I perceive to be a cultural gulf of significance which undermines my confidence in analyzing what she offers. She uses the language of order to describe a history of negotiating roles to surround herself with the material and emotional resources she needs, although perhaps there is evidence of a language of caring. I am uncertain if she is content with her present circumstances, or if partnering and becoming pregnant was an act of resistance. Melissa came to Canada from Trinidad in early adolescence to join a mother she scarcely knew. She perceived that her mother wanted her primarily to baby-sit a younger half-sibling and do housekeeping, and she soon rejected that role and subsequently came into care. She and her mother never came to an agreement about living together, although they maintain frequent contact; for example, Melissa spent time in her mother's apartment while her mother worked, rather than in her own cold and miserable rented room. There may be evidence of an ethic of caring in Melissa's relationship with her partner. She visited Trinidad and came back with an older man by whom she soon became pregnant, although she miscarried late in the pregnancy. She said she wanted a child to love as she had not been loved, but also indicated that she believed her partner

fathering a child would improve his chances of getting landed immigrant status. She was cognizant that motherhood qualified her for a higher rate of welfare support, and confident that her partner, when he was granted landed immigrant status, could earn well. Although Melissa did not live with her partner for much of the time for practical and logistical reasons (e.g., disqualification from receiving welfare), she said consistently that he was important to her as a companion and a friend.

7.2.4 Ethic of order, problem of detachment

7.2.4.1 Acquiescing

No youth were placed in this cell because none presented as socially isolated and self-sufficient but content.

7.2.4.2 Resisting

Raquan is located in this cell because he presents himself as socially isolated but trying to change the situation by figuring out and following the rules well enough to be adequately loved. Raquan's mother died when he was a baby and he was "passed around through the family", both sides, in three countries. The most important care failure was when his grandmother sent him to the CAS at 13 because she could no longer tolerate his shoplifting. He describes a series of failures of attachment, including the CAS

The staff tried to act like they were your parents, but they weren't there when you were going crazy and you didn't know what to do. They kept changing so you wouldn't be able to attach to a certain staff.

As we heard earlier (in 5.3.3.2), he had some success after moving to a foster home he liked, where he was able to change his behaviour in a way that he hoped might also re-engage his family, but he was required to leave when he turned 18. He moved into an apartment with an acquaintance from an earlier group home, a person whom he saw as causing him to leave the group home, who, as he sees it, again disrupted his living situation by getting them evicted for non-payment of rent. He then moved in with an older couple whom he felt could give him good advice. He is very aware of material and social insufficiency.

I know since my parents aren't around and there's no one to sign their signature for a

car loan or whatever, so I'm going to have to work reallllly hard to achieve what others can simply get because their parents are around...

Because when I'm on my own, and I have no one to enjoy what I have, then I don't really feel like I'm enjoying it...

Since I became independent, I have, like, a girlfriend that understands me, that's why I chose her. It's hard to find, like, someone of the opposite sex to like you because they're scared of you and you're scared of them. And they don't know who you are, but you're hoping they'll find out.

I find Raquan's story to be a valiant and persevering saga of resisting social detachment and isolation, but there is a robotical quality to his strategy that renders it fragile. Although his life is a continuous crisis of attachment, metaphorized, I believe, in stealing to "get what I needed or wanted", he has only a language of order with which to think it through. He is painfully aware that his resources are insufficient unless he can "start meeting the right people that I have to know in order to proceed", and he is desperately applying all he has to that end.

I placed twice as many youth, 16 in comparison to 8, on the ethic of caring side of the chart. This may well have reflected my orientation, the nature of my probing, and their response to being probed in this way. Participants were placed in this ethic of caring category if they perceived their world in terms of responsiveness, inclusiveness and reduced harm.

7.2.5 Ethic of caring, condition of equality

Julie was placed in this cell because she is adequately resources and describes it primarily in the language of caring. She had recently made a private arrangement to live with and be cared for by loving, competent "god-parents", who were formerly her foster parents, a situation she felt met her social and material needs adequately. Her route to that end involved difficult choices of giving self-care precedence, i.e., overcoming emotional inequality. She negotiated herself into care at 14.

I felt that I was taking too much responsibility for my family and not enough for myself. I felt that I needed to be taken better care of. And I hoped that I would be able to find a better environment for myself. I just wanted to grow in a positive way.

At this age, I wasn't very clear on, nor did I consider, who I was. I always wanted to be perfect and I always wanted to do things for others. In that way, this was the most selfish decision I ever made. And one where I truly put myself ahead of my family.

After a foster home placement that failed to meet her emotional or material aspirations, she asked for "two professionals that listened to classical music and could be parents and role models for me." A mutually beneficial match was made with a professional couple who both had PhDs.

They weren't able to have their own children, and they only wanted one, and I managed to slide right in there somehow....They also needed an older child, since they both have extremely busy schedules. So we fit each other perfectly.

Julie left their home when she left care at 16 (because she was not ready to make a decision to become a permanent ward), but negotiated with them directly to return to live with them when the situation with her family became untenable and she was unable to manage living on her own in the community. She describes the arrangement to the girls in the discussion group:

[W]e had more an emotional bond, I think that was important...They said "Fine, you're not allowed to go on welfare, you have to be working and/or in school. If you're in school you have to have a job because we'll give you room and board but that's it." So if I want to actually leave the house with a bus ticket in my hands or a dollar, I have to do that, I have to handle that. So that was fine. I went to school, I got a job, I did all that stuff. They don't really have a curfew on me, but of course I'll be nagged. And they just keep me going in the right direction. They keep me straight.

She goes on to say that even if she had adequate material resources, she would flounder without the emotional support and guidance her god-parents offer. The rules and roles in Julie's world have elements of an ethic of order, but are constructed within the context of emotional connectedness and interdependence.

7.2.6 Ethic of caring, problem of inequity

Participants were located in this cell if they were in a disadvantaged position that they perceived within the context of caring.

7.2.6.1 Acquiescing

Three youth (Diane, Victoria, Spirit) were placed in this cell because they describe sacrificing themselves to gain the love of others, that is, they cannot give their right to self-care equal salience with the rights of others. The two girls are relatively classic examples of women who confuse sacrifice with love, and both trace the roots of this into their childhood. Diane,

for example, sees that she provoked her loving father into placing her in care so that she would improve her behaviour. But she could not meet his requirements to return home, and vacillated between trying to please him and punish him. She engaged in escalating street-oriented activity in which she was abused and exploited, eventually alienating both her parents. The final straw for her father was her relationship with "JJ", a man twice her age (i.e., close to her father's age) who was on parole after serving 17 years in jail for murder. This relationship continuously disappoints Diane, but she can neither improve it nor leave it, particularly after they had a son. She describes her dilemma after the first time JJ seriously abused her.

Everybody at that point in time said it was time to leave him, time to move on in your life, you're going to have a kid. But I said no, I love him, I wanted to stay with him. I lied for him, I did everything in my power, anything that I could think of to do, I did, to keep him out of jail, to keep him with me.

She explains her lack of will-power, which is at odds with her experience of herself in other circumstances and with how she is generally perceived, in classical terms.

In one sense, he made me feel like I couldn't get anybody else, and I'd rather have him than no one. But in another sense, it was my heart speaking instead of my mind.

When their son was born, Diane again tried to improve the situation by orchestrating a situation in which the two men whom she loved, her father and her partner, would between them decide who would assume responsibility for her and their son/grandson. The partner "won", but he soon after re-offended and returned to jail. Diane moved to a small town near the jail to facilitate him seeing his son. She, like Johndoe, sees the need for a partner to provide additional resources, but in her case the resources she wants are emotional, whereas Johndoe articulates the need for material resources. Like Marie, she sees that having a son simultaneously improves and complicates her negotiating position, but unlike Marie, she articulates a responsive and inclusive consideration for him.

Victoria is also a victim of self-sacrifice, as yet unable to value herself on an equal with others. She was placed in care in early adolescence by her mother in a private arrangement, on the pretext of sexual promiscuity, but perhaps to conceal long-term sexual assault by a family friend. Victoria tried unsuccessfully to return home in order to continue a parenting role with her younger sisters, but eventually settled into group home care. She describes this as a glimpse of what carefree childhood might have been, but at 18, too soon for her, she had to move out. She is now living in a residence for women.

When I was living here, I found friends and began to have an adolescence when I should be learning and evolving into an adult. Which I'm doing, it's just that it's my carefree adolescence as well. (Big sigh) I still want to be a teen! I wish my life had been better. I wish I would have experienced all of the things I should have

experienced when they should have happened. Like being an infant when I should have been an infant, being a child when I should have been a child, and being an adolescent when I should have been an adolescent. Instead of having my infancy taken away, being an adolescent, so to speak, when I should have been a child, a carefree child. And now it's time for me to move on to adulthood, and I haven't experienced the joys of being a teenager. It's not fair!

She developed a relationship with David, who is close to her age and from a similarly dysfunctional background. Like Diane, she is in love with him and cannot let him go, but the relationship is frequently unsatisfactory. She reports, for instance, being forced into a ménage à trois, and an incident in which she and her boyfriend were raped by the same man. And like Diane, her relationship with her parent mirrors and complicates the relationship with her boyfriend. As we heard earlier (in 6.3.5), Victoria postulates having a child with David in order to protect herself from her mother, whom she describes as "emotionally abusive". Material matters have no part in Victoria's concerns, perhaps because she is living in a women's residence in which her practical needs are met, much as they were when she was in care.

Spirit has a problem of both emotional and material insufficiency and shares the theme of self-sacrifice through passivity or "stuck-ness". He came into CAS care at 15 when his father, a stranger to whom he and half-sisters (also strangers to him) had been sent from Jamaica, was physically abusive under the rubric of discipline. Spirit was nevertheless glad to be in Canada. He saw his mother, a single parent in Jamaica, as having done her best by finding for him a variety of living situations in Jamaica and then the opportunity to emigrate. He was unable to manage the constraints of foster care for long, although he maintains contact with the foster parents and is appreciative of their efforts with him. Since leaving care, he has lived in a variety of circumstances, sometimes with a cousin, sometimes transiently with friends, nearly homeless. He developed a relationship with a girl from a stable Jamaican family who was a few years younger than he, and attributes this relationship to turning his life around. His dilemma is that in discontinuing a criminal life to please her, he has lost the material means to court her, and therefore perhaps the psychological status to give her the guidance she requires as a younger person. In the course of data collection, he described that he acquired a car so that he could see her more frequently (she lived out of town) and perhaps resolve some escalating conflicts between her and her mother that might cause her to leave home prematurely. While the details are somewhat confusing, it appears that the acquisition of the car played a role in Spirit going to jail, shortly after data collection ended.

(There may also be a problem with the data in this scenario, in that Spirit describes himself

as having a "sweet" and a "normal" side that "gives trouble", and a limited ability and motivation to show people his sweet side. I experienced him as sweet but cautious, warming slowly to providing details. He may have been giving me a fantasy resolution, a description of what might have happened if his sweet side were in control, or if he had a chance of qualifying for a nice stable girl with caring parents, or if he were a nice boy able to accept the discipline of caring parents. In any case, whether his narrative happened in real life or not, he is like Diane and Victoria in that he describes a future sacrificed for love, unable to assert his right to care equal to that of others.)

7.2.6.2 Resisting

In this cell are 2 youth (Teresa, Tim) who are resisting disadvantage by asserting their rights to be cared for equally with others. Teresa is dealing with intra-familial rape, whereas Tim is dealing with a much more ambiguous situation more deeply rooted in history.

Teresa came from Trinidad when she was 13 to join her mother. She describes an idyllic domestic situation until a year later when she was raped by her mother's boyfriend, a man whom she trusted and valued. She quickly disclosed the assault, however, and refused to yield to her mother's emotional coercion to subvert the legal proceedings intended to protect her. This destroyed the relationship between Teresa and her entire family, and Teresa came into care. Her mother and her brother were later deported because they lacked immigration status, but Teresa was allowed to remain. She is struggling with anorexia, school phobia, depression, and relationship difficulties, as well as the practical problem of having no immigration status, but believes the worst of her trouble is behind her. She says

I couldn't believe that my mother would actually do something like this to me. But then I realized it's only me that loves myself and only me that had to do certain things, and there was no way that I was going to let someone get away with hurting me so bad, no!

...I still have a way I will choose other people over me now, but that's just how I am, just the way I am. But I have to keep remembering about myself.

Tim also found himself disempowered, in his case within the care system, and made the move to leave. His lack of power in the care system was, he felt, making him dangerously angry, and/or not teaching him anger-management techniques that could work for him

outside the care system.

And staff will push your buttons to see how far they can push you, and when you get mad, then they try to restrain you, but like if they restrain you and you hit them by accident, you get charged and they tell you, we had to control you....But when I leave there, when I'm in the community, who am I going to turn to, are you going to be there to restrain me when I get mad? Because you get so dependent on it when you get mad and stuff...So then, when I turned 16, I thought my wise decision would be to leave, to get out of there.

His initial choice, like Clark, was to capitulate to the persistent request of a girl who wanted him. But, differently than Clark (his articulation, at least), Tim began to value the relationship for itself.

My ex-girlfriend. I went to the same high school with her, and she kept on asking me out for 2 1/2 years and I kept saying no because I was in a group home and my mind was pretty screwed up. So I waited and finally went out with her. It was good at first because I was just moving out of the group home, putting that behind me. We were getting along good, talking about things, and going to parties and spending time with each other.

She wanted a baby, and he, unlike Clark, agreed.

At first, I wasn't so keen on the idea, having a kid. But I said, I did love my girlfriend and I'd give anything for her. And if she wants this, I'd do anything for her.

Becoming a father radically changed his life perspective, making it clear that he wanted to give his son better than he had experienced.

...I just love having [my son] around and being with him. Each day he's doing something different, having a good time. Like I didn't have when I was a kid. So I'm giving him something that I didn't have when I was a kid and it makes me feel so good. Like when he's sad, you're there for him and when you're in a bad mood, he's there for you. It's awesome having a son. It's a lot of responsibility, too, but I'd take those any day.

His ability to do so is tenuous, however, since his girlfriend, by his account, rejected parental responsibility, and Tim occasionally abuses alcohol and becomes physically assaultive, and then spends time in jail, where, as we heard earlier (in 6.3.6), he made a network of friends with whom he feels equal and valued. Tim is aware that in order to be an adequate father to his son, he needs to resolve some historical issues around his father.

That's where I get a lot of my anger from, still not having dealt with my dad passing away. That's why I probably do half the things I do, like my childhood, like they're there and then they're gone. Everybody says they'll [be there] for you and then they fuck up -- like my dad and my mom and foster parents -- and I move out of there. So I started thinking fuck, Tim, you just have to stick by yourself. So when I have problems I just keep them to myself and then I just lose it, for no reason sometime. Like I'll just blow up... Like if I'm arguing with someone, I'll just assault that person. It's not a whole lot like I'm mad at that person, it's just like there's a lot in my head and I can't think, and I just lash out at people.

He needs also to make some accommodation with the mother of his child.

Right now, I hope not [to get back together with my girlfriend]. But for my son's sake, I hope so. Because...I want a family setting for him. But I think if I was living somewhere else, I'd get along better. And it would be better for the baby, us not mouthing each other off and stuff. If we spent more time apart, that's when it was good, before.

In spite of the significant difficulties that remain to be worked out in many aspects of his life, Tim is finding ways to have his emotional and material needs met so that he can care for his son.

7.2.7 Ethic of caring, condition of attachment

The 5 participants located in this cell (Kim, Steven, Shawna, Vanessa, Veronica) are currently content with their circumstances, which they perceive in terms of having their social and material needs met and which they describe in a language of caring.

Kim and Veronica have formed families by having babies. Kim has a very supportive relationship with the father of her child and his family, plans to marry, and eventually hopes to help her mother and siblings immigrate from Jamaica. She maintains a good relationship with peers, informally with her ex-CAS workers and care-givers, and with teachers at the school she attends. Veronica lives with her mother, but the relationship is strained and the tension between her mother and the father of her child is a factor in his diminishing support. Her mobility is limited with care of her baby, who has colic, but she maintains contact with friends. She plans to return to school when the baby is a bit older. The quality of Veronica's emotional attachments does not appear to be as high as that of Kim's and perhaps the others in this group, but she is satisfied that things are working themselves out and can't be rushed. Veronica is the only one of the five in this cell who experienced material need in making the move out of care facilities, and she identifies it as influencing her decision to return to her mother's home.

Both Shawna and Vanessa used social resources identified through their time in care to meet their needs. For Shawna, this is a personal relationship with her ex-foster mother and foster sisters. Shawna stayed with her foster mother while making a difficult decision to terminate a pregnancy (in which material considerations played a part), and moved in with two ex-foster sisters in order to attend post-secondary education, thus addressing both material and emotional needs. Vanessa was permitted to remain in a semi-independent

group home until she finished high school, and felt that the staff would remain available to her when she moved out to go to the local community college. Her stay in the group home was again extended because of a mental health episode, and her relationship with the staff seemed less positive when she eventually left, although she was still confident that they would provide the emotional support she needed.

Both Shawna and Vanessa had assumed parenting responsibilities for their younger siblings before coming into care, and Shawna felt she initiated coming into care, much like Julie, in order to get the care she needed for herself. Both were assertive while in care to find arrangements that were satisfactory to them, and both maintain carefully managed contact with their parents and siblings.

While all 4 of the girls in this cell felt they, to varying extent, initiated coming into care, Steven, who came into care earlier and from a more abusive situation, did not. He did, however, use CAS resources well. He used a highly structured rural group home setting to address a serious anger management problem, and to forge a positive connection with his father and sister, and to a lesser extent his mother. He attributes to the combined efforts of himself and his sister that his father is recovering from a long history of alcoholism. While he cannot live with either of them, he has a strong relationship with both. Steven maintains contact with 2 female staff from his group home with whom he had a particularly strong connection, and works well with his CAS worker. He has a good relationship with the mentor, and gets on well with the other residents in the rent-subsidized shared-living house in which he lives. Steven acknowledges that at some point in the near future, he will need to address the problem of going to school and/or getting employment in order to support himself materially, neither of which will be easy for him, but for now, he is content with his current material and social circumstances.

7.2.8 Ethic of caring, problem of detachment

Participants were placed in this cell if they identified a lack of attachment in terms of inclusiveness, responsiveness, and minimizing harm.

7.2.8.1 Acquiescing

Humphrey is initially placed in this cell because he presented as being passively abandoned and rejected. As data collection proceeded, however, there was evidence that he was beginning to take some action to address his problem of detachment, which moved him to the next category.

7.2.8.2 Resisting

Four youth in this cell (Dominic, Samantha, Affrenaway, Pianist) addressed a problem of detachment by returning to a parent, and Humphrey in a sense found the parent within himself. In all cases, the reunion with parents has been less than an easy or sufficient solution to the problem. Pianist perceived that the decision to return to a parent was taken on his behalf, but the others initiated the return after having tried other alternatives with less than satisfactory outcomes. In all cases, the alternatives were very limited. All of these youth have pressing material problems, and limited capacity and/or interest in continuing their education or getting adequate employment with the education they have. Two, Affrenaway and Dominic, have succeeded in engaging the CAS to bend the rules in order to offer extended care (i.e., by supporting them financially when they have returned to live with biological parents).

The paucity of alternatives is perhaps most evident with Pianist. He was returned to his mother at 16 after spending his childhood in care, much of it in what sound like mental health and forensic psychiatry settings. They disagreed a lot and he finally moved out. After a time in hostels, he moved into shared accommodations with an older man a few doors down the street, arranged by his mother. She has also helped him get into school, arranged for him to work after school for cigarette money with a friend of hers, and keeps track for him of what sound like probation obligations. Pianist spends quite a bit of time with his mother, but denies any emotional attachment.

I go there because she has a better TV than I do, so I can watch cartoons and stuff and I can watch whatever movies are on. And that's basically it.

But he also describes having cognitive difficulties that make him doubt that he can manage normally in the world, and conveys a sad sense of hope that, regardless of their disagreements, his mother may continue to be available to him. Pianist indisputably perceives both material and emotional inadequacy, but it is difficult, because of his stated passivity, to argue that he is resisting. However, I experienced him as powerful, albeit in a counterproductive way, in data collection, and therefore see him as resisting, although not very effectively.

Affrenaway is also struggling to reconnect with family, specifically a father who has never parented him. Affrenaway has a high regard for his mother, who sent him to his father because she was unable to control him when he was 14 years old. When his father couldn't care for him, Affrenaway came into CAS care. After a time in group care and one stay in a Young Offenders facility, Affrenaway attempted to live on his own in the community, with a girlfriend and her child, and then a friend's family. He decided that he needs more control and structure than he can self-impose, or ask from surrogate families, in order to complete high school and get employment. Living with his father was the option that remained. To this point Affrenaway's reasoning better fits an ethic of order, the anachronistic application of interlocking roles for the purpose of addressing material need. The decision to live with his father coincided with Affrenaway learning that he had become a father. As with Tim and Humphrey, although less dramatically, this highlighted his historical difficulties with his father -- or, more accurately, the absence of his father -- and gave profile to the ethic of caring within the decision, wanting to take an action that would prevent the replication of inadequate parenting into yet another generation. He says:

[M]y dad was never really there for me, so I'm trying hard, even though I know it's my blood, I'm trying to be there for [my daughter]. Like father, like son, how people say that. Even though I know so many people that their fathers left them when they were young, and they swear on their graves that they're not going to be like their fathers, but they are going to be like their fathers.

Samantha returned to her mother's care mid-way through a pregnancy after the father of the child rejected her, both hoping that they could resolve long-standing tension to produce a different outcome than resulted from the almost identical circumstances surrounding Samantha's birth. They were not successful.

7.3 EXPLORING BILINGUALITY

As I continued to work with the material, it became evident to me that there were some 'cross-over' strategies, that is, that problems of material insufficiency were sometimes addressed by engaging people in care terms, so that the both social and material needs were addressed simultaneously. Julie is perhaps the best example of this, in that she assertively negotiated an arrangement with care-givers who respected her middle-class aspirations and could support her emotionally and materially in achieving them. Clark is perhaps the best example of something that looks the same on the outside, that is, making

a social arrangement that meets material needs, but doesn't in fact 'line up his ducks' because he doesn't acknowledge any emotional needs. It is not that they aren't satisfied, it is that they are not there. (Or are not being articulated, in spite of vigorous probing from me.) Just as not everyone can see both the vase and the two facing profiles in the classic image used to demonstrate perception of figure and ground, Clark can only see -- or admit to seeing -- one, no matter how hard he looks.

One could describe this difference by saying that Clark is unilingual, limited to seeing and saying the world in only one language, whereas Julie is bilingual, speaking both languages of caring and order. There are also participants who, while they speak both languages, seem to confuse them, to speak caring in a situation that calls for order and vice versa. Diane, for example, sees and talks about inequity in her relationship with her partner, but allows her heart-thinking to over-rule her head-thinking, even though she knows that this undermines her roles as mother and daughter. There are, in addition, participants who seem to speak neither language very much, who are passive recipients of whatever life has in store for them, unable to pose their circumstances to themselves as a problem to be solved.

Once more I sorted through the 24 sets of data to allocate the participants into yet another matrix, this one connecting the nature and efficacy of their orientation. While the affiliation of an ethic of order with external circumstances and an ethic of caring with internal circumstances had initially tweaked my perception, it now seemed to me that what was effective was not necessarily *matching* orientation with circumstance, but applying whichever orientation was necessary to a situation in order to achieve a desired outcome, that is to say, *addressing* circumstance with orientation. Whereas Gilligan postulates the application of an ethic of caring as a technique of resistance, I came to see either ethic as equally able to correct a situation, depending on the relationship with the nature of the problem. Kay Johnston (1988), working with younger children (ages 11 to 15) responding to fables, came to a similar understanding. The difference, however, was that solving the problem posed in the fable was at most an interesting exercise, whereas for the participants in my research, solving problems was potentially a matter of survival. I was therefore interested not only in what they did, but in what could be gleaned about how they came to it, or what seemed to impede them in doing so. In allocating the participants to the cells in the matrix, I focused on their relative vulnerability, as evidence of the absence of efficacious strategies.

Table 7: Participants Sorted by Gender and Linguality

	MALES	FEMALES
1) SILENCED/ECHOING	Jason, Steve, Pianist	Lacey
2) UNILINGUAL - ORDER	Johndoe, Clark, Raquan	Marie
3) UNILINGUAL - CARING		
4) BILINGUAL - CONFUSED	Affrenaway, Spirit, Humphrey, Tim	Melissa, Victoria, Samantha, Diane
5) BILINGUAL - APPROPRIATE	Steven, Dominic	Julie, Teresa, Shawna, Kim, Vanessa, Veronica

7.3.1 The silenced and the echoing

Belenky et al developed a system of categorizing how women learned. In the lowest category are the silenced, whom they describe as follows:

Because the women have relatively underdeveloped representational thought, the ways of knowing available to them are limited to the present (not the past or the future); to the actual (not the imaginary and the metaphorical); to the concrete (not the deduced or the induced): to the specific (not the generalized or the contextualized): and to behaviors actually enacted (not values and motives entertained). (Belenky et al, 1986:26-27).

The second category are those who accept as their own the words of others, who "believe that all knowledge originates outside of the self" (Belenky et al, 1986:48), whom I am calling the echoing. Belenky and her colleagues are clear that interventions can move individuals along the spectrum, that women are in these categories because they have been taught to be there and/or have not been taught how to move out.

Among the participants in this study, 3 boys (Jason, Steve, Pianist) and one girl (Lacey) were placed in this category. They are a mix of Belenky's 2 categories, in that their capacity for representational thought is limited and they adopt the thoughts of others as if it were their own. To attribute an ethical orientation to them, personally, then, is not appropriate, but the orientation of the current influence may be audible. Situationally, to the extent that they are seen as chronically handicapped so severely that they cannot be expected to manage on their own, they may be offered ongoing protection. This assessment occurs at the point of delivery of service, making them particularly vulnerable to the relationship with the worker and/or care-giver.

Jason suffered a head injury as a toddler and is physically and mentally handicapped as a result. His worker predicts that he will remain in protected living and work settings well into adulthood. This coincides with Jason's view of the future, and that of his foster mother. Data collection took place within hearing of the foster mother, and Jason frequently asked her what he thought. He was reluctant to identify other than medical problems in his life (and when he did so, mildly displeased his foster mother), but when pressed, cautiously regretted that he has not been able to maintain or restore a connection with his birth mother, a family with whom (his foster mother clarifies privately) he was unsuccessfully placed for adoption, and a peer he remembers from a prior placement. He has made some enquiries which have not achieved connection with these people, and he said he was satisfied with that outcome for the present. His foster mother privately expressed a sense of hurt that he values people who rejected him but didn't mention the care-givers. Whether Jason is really, as he presents, a relatively compliant and satisfied client of the child welfare system, his future well-being lies in the capacity and willingness of others to care for him and in his rights as a handicapped adult.

Lacey was in and out of care from a young age, left care facilities after a physical altercation for which she was charged and spent time in jail. She has contact with her biological family but doesn't get along with them. She ascribed family roles to a series of friends, a "street family". Her plans and living circumstances varied wildly from one contact to the next. Frequently she responded to questions in data collection as if she were repeating a speech from elsewhere. She had a brief attention span and became aggressive when asked to expand or explain what she had said. She seemed not to differentiate between order and caring. For example, in describing a situation where what she anticipated would be consensual sex with one person became a gang rape, she identified that what was wrong was that they didn't use condoms and so endangered her life by possibly exposing her to AIDS, and that if they had cared about her, they would have used condoms. Lacey terminated her extended care agreement in order to end CAS "interference", but after the rape allowed her worker to re-instate an agreement so as to locate more stable housing and more adequate support. In the absence of proactive intervention within a relationship that will allow Lacey to accept it, both of which will terminate officially at the latest when she turns 21, it seems unlikely that she will manage well.

Steve, like Lacey, appears to have a limited cognitive capacity, although he is less feisty than she. He also has a more distant relationship with his worker because he lives in a city

30 miles distant. A local person on a voluntary basis gave him advice and advocated on his behalf to solve serious housing instability evident during data collection, but Steve opted for the freedom of living with a "friend" rather than in a more structured environment and as a result became homeless. Logistical complications in working directly with his worker eroded his already limited ability to comply with the terms of his agreement. His extended care agreement was terminated shortly after data collection ended.

Pianist describes problems with long-term memory, and makes very unusual segues in informal discussion and in his data. His attitude varied during data collection from cooperative to combative, and overall he presented as quite an odd young man. His wardship was terminated for reasons he claims not to know, and he is now protected from a world he thinks he cannot manage by only his mother's good will. Nevertheless, he has taken some actions in the past (for example, "turning her in" for welfare fraud after she made him move out) that, if repeated, may jeopardize their future relationship.

These latter 3 participants have trouble making rules work for them and they don't trust people: they are equally handicapped in both ethical orientations. Jason has a good chance of maintaining the protection he needs as long as he is satisfied to be dependent and compliant, and as society is prepared to support him. The other 3, unfortunately, seem unlikely to be offered or to be able to accept the protection they need.

7.3.2 Unilingual in the ethic of order

Three boys (Johndoe, Clark, Raquan) and one girl (Marie) are in this category as well. Each of the boys identifies that they need relationships in order get what they need. Raquan works heartbreakingly hard to practice his social skills and to make the connections that will deliver him the resources he needs. Johndoe thinks that he may grow out of this phase of needfulness, which he speaks of as if it were primarily material, although the history of his search is a litany of tried and failed relationships. Clark thinks that he has left behind a time when he could only get ahead by criminal activity, and that his future is secure in the affection of a woman who loves him and who, through relatives, has the means to render him economically productive, as Clark believes husbands and fathers should be. There is a fragility in the stance of these 3 boys, a sense of being at risk for what they cannot see, a tinge of whistling in the dark to keep the ghosts at bay.

Maria presents somewhat differently, as tough, manipulative, persistently pragmatic, with no illusions that caring counts for anything useful. Nevertheless, she maintains contact with her CAS worker long after the file is closed, and keeps a great many helpers of various other sorts quite busy. She described her career goals as being either a lawyer or a mechanic; in life, it appears to me, she studies the rules as assiduously as any lawyer in order to keep herself, as a very damaged vehicle, on the road.

7.3.3 Unilingual in the ethic of caring

There are no participants in this category because, in the end, I could find no one who did not deal in some part of their data with rules, roles and reciprocity. Perhaps because all the participants had spent time in the child welfare system where most official interactions start with a review of the rules that apply, none could escape having learned at least basic fluency in the ethic of order. (As well, inability to work within an ethic of order would render them unable to participate in this research.)

7.3.4 Bilingual but confused

Eight participants were allocated to this category. Of the 4 boys (Affrenaway, Spirit, Humphrey, Tim) and 4 girls (Melissa, Victoria, Samantha, Diane) included, I will limit discussion to one of each gender of whom we have not already heard a great deal, to illustrate the vulnerability of confused bilinguality.

Humphrey barely escaped being categorized as silenced because he has only recently come to find a voice, a reflective self, or a sense of agency. He locates the beginning of this process vaguely.

I didn't really start being in tune with myself until not too long ago, maybe a year or two. I just took a look at myself, at how my life was going.

He is more clear about the impediments to self-reflection.

Because it's usually when I have time to think that I get mad. So generally I find myself pretty busy because I don't like thinking of my past and sometimes my present. Just thinking about all this scares me. Because I've had a rotten past,

what's my future going to be like?

The confusion between placement changes, presumably an issue of order, and being good or lovable, an issue of caring, started early.

When I was a kid, I thought I was this terrible kid. I always tried not to be, but kids make mistakes, that's a part of learning, and so they used that as an excuse to move me around. Make me think it was my fault....They said that I was taken out of foster homes because I was a bad kid. But what could I do so terribly wrong from the ages 3 to 7 to mess that up?

A confusion between justice and care continued to be evident in the recent past, when an acquaintance who was involved in the drug business was shot dead just after delivering a pizza to Humphrey. Humphrey concludes that the acquaintance was killed because of his drug involvement, but the lesson he takes from it is, "[It] just showed me that people don't care." He confused friendship and a business deal and got cheated out of rent on at least two occasions, one in the course of data collection. A similar ethical confusion got him into trouble with the law.

Even though I was getting into the trouble, it didn't feel like I was doing anything wrong. And people were stealing off me and using me for money, whatever, and I didn't know why they would do that to me, especially when I haven't done that to them. ...Some people have to steal for a living, to keep their baby fed. Or scam. And I'm kinda confused right now what is right or wrong. Because they're doing basically what a hard-working person does, brings food home for their kids and their wife, keeps a roof over their head.

Humphrey has a daughter with his girlfriend, who is two years his junior. He describes that he rescued her from sexual exploitation in her home and in the community. He loves his girlfriend, although she is not able to care well for herself, let alone their child. But also, when drunk, he has assaulted her on more than one occasion. The baby is in the care of his girlfriend's mother. Humphrey thinks this is not a good situation, but he is unable in the short run to offer a better one. He searches for himself in the mirror of the past.

I think it's your past that rules you out. I really think that, because my life is some ways is a replay of my history. Like what happened to me is happening to my kid....And sometimes I feel that we've lost her because of me being in CAS practically all my life and CAS itself doesn't feel they did a good enough job with me, so they have to watch.

He desperately wants to learn the rules.

And now I wish there was someone there to guide me, like when I was a kid.

But he is handicapped by his inability to trust his own judgement about who is trustworthy. During the period of data collection, the movies, once a refuge from reality,

[W]hen I'm watching a movie, the rest of the world can just go away.

are now as safe an instructor as is available. He says:

I watch a lot of movies, and I try to pick the good stuff from it, like what is normal from the movies, and I pick out what the right thing is from it.

By the time Humphrey attended the boys' discussion group, several months later, however, he had made amazing progress. He announced proudly that he had not had an alcoholic drink for several weeks, his contribution to the discussion was articulate and thoughtful, and he spoke appropriately in both ethical orientations. Because there was some suggestion that he still occasionally attracted criminal charges (which I did not, however, have the opportunity to check out with him in detail), I was reluctant to graduate him to the next category, where some consistency between talk and action is implied. Nevertheless, Humphrey stands as an interesting example on one hand of the vulnerability of lingual confusion, and on the other of the ability to learn a more efficacious approach. Because the bulk of the curve happened after Humphrey did his individual interviews, much of the transitional material is not available to this study.

Tim is in many ways similar to Humphrey, in that becoming a father initiated a quest for competence as men and fathers that exceeded that which they had experienced as children. Tim has strong negative feelings about his mother, whereas Humphrey's parents are an undifferentiated mass. Both boys are early in the process and have substance abuse problems to conquer, which both see as rooted in an historical reconsideration of themselves. Both may have replicated their parents' relationships in their choice of partner. Both have anger management issues. Tim has developed strong bonds with men who, like his father and himself, have criminal careers, but he also had a strong positive relationship with a foster father that, as he sees it, he ruined with his rage when his biological father died. Humphrey has also spent time in jail but seems to value his female probation officer (which is reciprocated) rather than his colleagues in crime. He identified no strong relationships from his time in care. While both Humphrey and Tim are far from out of the woods, and there are many reasons to predict a troubled future, I, against my rational sense, feel optimistic about their eventual outcome.

The optimism curve goes in the opposite direction for Samantha. She has a life-long relationship with CAS, frequently finding herself in situations both in and out of care where she took care of adults who were supposed to be taking care of her. She negotiated living on her own in the community as soon as she could after reaching 16, but was not able to establish a satisfactory living situation. She became pregnant during a transient and

vulnerable time and returned to her mother, hoping to find the support she needed to become "adjusted to being a mom" and independent, which she defines as "let[ting] me do what I wanted when I wanted." The arrangement she proposes is a mirror image of the situation that Samantha believes her mother experienced during her pregnancy with Samantha.

Because she had me at 16 and her mom didn't help her very much, and she was having a hard time, so I thought she would change what her mom did and try to better herself and help me out as much as possible.

The experiment is no more successful, and Samantha's son came into care, just as Samantha had done.

7.3.5 Bilingual and appropriate

There are 8 participants in this category, 6 girls (Julie, Teresa, Shawna, Kim, Vanessa, Veronica) and 2 boys (Steven, Dominic). All of them elicited in me a feeling of optimism, a sense that they would somehow overcome their difficulties and have a better life than one might anticipate given the disadvantages of their histories, and the significant practical impediments they faced in the present. This was independent of whether I liked them (that is to say, it was a judgement using an ethic of order rather than an ethic of caring), although I *did* like them, but I also liked youth about whom I could not feel optimistic.

Of the 2 boys, Steven has been presented in some detail. Dominic came into care early and experienced problems of detachment soon after, when a foster family abandoned him to strangers (as he experienced it) while they went on holidays, and then asked for him to be moved and separated from his sister who remained, when a new baby arrived because (as he understands it) of his father's history of sexual molestation.

[W]hen I first left my home, then I guess that's when the feeling of being alone actually took place....I knew they weren't my family and when they started planning other things around you, moving you around when they're planning a holiday, they can say you're part of the family but in actuality you're not.

Dominic was in a second foster home for the remainder of his time in care, not feeling connected to them by other than their reciprocal roles, biding his time to leave at 16. He presents a picture of withstanding patiently a prolonged situation of detachment because he lacked the means to do otherwise. He resisted as soon as it was possible by seeking

family. He lived with an older sister for 18 months after leaving the foster home, which did not deliver the sense of attachment he craved. He then lived with a series of families of friends, and eventually, negotiated to return to his mother's home. Dominic is clear about the importance of connection, its dangers and uncertainties, and his hope of finding it in family.

...a lot of people think they can do it themselves, but you always need someone you can fall back on. In my case, my family. Just as a means of moral support.

...[F]or me I don't think it's really alone where there's no one to talk to. I think it's alone inside, that you can't trust anyone, that it's just you against all odds. And you can only rely on yourself and not others....because through my life a lot of people have lied to me, deceived me, and in a lot of people, I have very little faith and rely solely on me. Because I don't want to take that risk of getting hurt the way I was in the past

[W]hen I was going through foster care, I didn't really have that much contact [with my mother] and I didn't really acknowledge who she was. But over time, as I spent more time with her, actually getting to know her, now she's trying to make up for lost time. That she didn't have, didn't spend, with us....[W]hen I asked to stay there, my mom was all for it, like actually having some of her family back.

The sister with whom Dominic had initially been placed in care had also returned to their mother's home, and the two planned to pool their meager resources and move out together, since their mother's home was small and there was conflict with her husband. Dominic continued to receive extended care throughout this time, clearly having to be convinced by his worker that an arrangement acceptable to him -- including living with his family -- could be worked out. This is one of several impressive displays of workers bending the rules to deliver what they saw as being an essential service. While the material problems facing Dominic are daunting, he has a stolid patient approach that one feels will eventually overcome. Whether he finds a way to address his interior loneliness is a more difficult question, but at least he knows what the problem is and is doing what he can to address it, again in a patient and painstaking way.

Among the 6 girls in this category (Julie, Teresa, Shawna, Kim, Vanessa, Veronica), we have not heard in detail about Veronica. She came into care at adolescence because she was out of the control of a rigid and anxious single mother. She quickly rejected the surrogate family flavour of in-care options in favour of the street, where she managed to survive until she reached 16 and could qualify to live independently, with CAS support, in the community. While her orientation to this part of her life is couched in a language of order, she was emotionally close throughout with a girlfriend, who in the end succumbed to addiction. Although Veronica felt badly about abandoning her friend when she left the street,

she was clear that staying because her friend needed her would have no benefit for either of them. Similarly, of her long-term non-street-oriented boyfriend who is the father of her daughter but not very attentive, she says

...my boyfriend, if he [doesn't] learn to take more responsibility...I'll definitely dump him.

Veronica also does sharp business with her mother, who invited her to live in her apartment, to which Veronica agreed because she needed better accommodations for the baby than she could afford. But the arrangement was that she would take over the apartment as soon as her mother, who had just finished an upgrading course, got a job and could afford something better. This was happening much more slowly than was expected, leaving the three of them in somewhat strained circumstances, since her mother had very little involvement with the baby, and actively disapproved of Veronica's boyfriend. Veronica was consistently able to differentiate between actions and emotions, between what people should and did do and how that might be understood in terms of emotional connections. Like Dominic, she is careful about how much she trusts others emotionally, but she knows what she is missing and she has a plan, over time, to address her needs. And like Dominic, she presents as determined to overcome the impediments to being economically productive.

7.4 RECONSIDERING GENDER DIFFERENCES

Having sorted the participants in this manner, I then considered similarities and differences within each category and within each gender. The first impression, looking at the gender splay of participants within the categories, was to confirm my visceral sense that girls were advantaged relative to boys. The boys were almost equally distributed among the four occupied categories, whereas 10 of 12 girls were in bilingual categories.

Secondly, the lack of any participants in the Unilingual Caring category is thought-provoking. It resonated with the participants in various ways saying that they had no carefree childhood. Perhaps only a dependent child in competent and caring hands can afford to have only an ethic of caring. Developmentally, we begin to expect children in their second year to appreciate the necessity for rules. A world without rules, roles and reciprocity is as dysfunctional as a world without inclusiveness, responsiveness and a concern for least harm. Each is 'good' only if balanced, which was Gilligan's initial important contribution, bringing out of the shadows the unnamed image.

The most substantive impression, however, was that unless a participant could take a position outside his/her history from which to reconsider him/herself, s/he was impeded in developing bilinguality. This repositioning is what is variously called the ability to self-reflect, the assumption of personal agency, becoming a subject in one's life, posing one's life as a problem to be solved; by whatever name, it is an essential first ingredient in any helping or healing process.

Youth raised in dysfunctional families and in care have a particular problem with respect to this task, however, in that their histories are defined as bad, flawed, inherently unhappy stories, and as Tim and Humphrey note, are uncomfortable to think about. My approach to the research was an effort in part to allow participants the opportunity to air and amend these stories. At this stage of analysis, it is instructive to look for gender patterns in how they carried out this task.

Looking first at the 4 boys and 4 girls in the Confused Bilingual category, what struck me was that the participants were struggling with differentiating themselves from their families and fearing that they were indistinguishable from their histories. In comparison, the 2 boys and 6 girls in the Appropriate Bilingual category saw themselves as separate from although influenced by their histories, and in charge of changing the trajectory.

Among the 4 girls in the Confused Bilingual category, 3 (Samantha, Diane, Victoria) had a series of relationships with men where they are exploited and abused. All of them, (including Melissa and Victoria, whose babies died), see having babies as catapulting them into adulthood, which in some cases, most notably Samantha and Victoria but perhaps also Melissa, gives them a more even playing ground on which to do business with their mothers. Interestingly, these 3 girls see themselves as having subsidized in childhood their mothers' shortcomings. Diane is the only one to come from a 2-parent family, and her CAS involvement began when her parents' marriage ended. She considers her mother a peer and is preoccupied with her business with her father: perhaps she also feels she subsidized her mother, by allowing her to be a companion rather than a care-giver.

To look at the 4 boys in this category from the same viewpoint, Humphrey feels unparented

by either parent, but Affrenaway and Spirit both claim strong mothers whom they see as having delivered them for good reason into the hands of fathers who are unfortunately ineffectual. There may be a sense that they have subsidized their fathers' shortcomings, by staying after their fathers left. Tim is just beginning to question his idolization of his father, as he seeks to be a better father to his own child and recognizes that his father, although there was mutual love, is not a good model. He was, however, resoundingly resistant to my suggestion of a parallel between his mother and the mother of his child. Whatever the specifics, all the participants in this category seem to be preoccupied with the parenting models they experienced as part of their search for self, in the case of 3 of 4 boys, initiated by themselves becoming a parent. This focus is not evident in other participants' data, even though it might be true in their histories.

There may, then, be the suggestion of a pattern among the Confused Bilinguals of a pre-occupation with parental role, which is for the boys their father, and with the girls their mothers. All but one of the boys (Clark) and 2 of the girls (Kim, Veronica) who are parents are in this category, a large proportion.

The participants in the Appropriate Bilingual category, 2 boys and 6 girls, demonstrate a sense of being in charge of their own lives, some, as Dominic articulated, from quite a young age. They are in the process of working through their feelings about the shortcomings of their significant parents, and at the stage of seeing themselves as impacted by their parents' behaviour but not defined by it. Their peer relationships do not appear to mirror family dysfunctions (at least within the data I have) as do the Confused Bilinguals. Their dominant preoccupation is not with partners, but with getting their own lives in order, of which partners may be an element but are not the central issue. They are focused on solving practical problems, like getting education and employment, which the Confused Bilinguals are less able to do because of the press of their personal problems.

The gender difference, if there is one, is that there are fewer boys in this category and that the practical impediments facing them are much larger. The nature of the developmental struggle seems to be the same.

The Appropriate Bilinguals feel more mature than the Confused Bilinguals, much like the

difference between junior high and high school students. (The Unilingual Order participants, using this same yardstick, feel like premature and tenuous adults, whereas the Silenced feel like perpetual children.)

7.5 DISCUSSION

Having forged beyond the early beginnings of Gilligan's theory of gender-affiliated ethical orientation, what can be learned about gender differences among this population that would be useful in child welfare and social work practice? The girls continue to look more likely than the boys to have a positive outcome from the perspective of the structure of their stories, just as they did from the content. Their advantage, as I have defined it, is in a superior ability to be fluently ethically bilingual, that is to have two ethical perspectives/languages and to be able to apply them appropriately to circumstances to bring about a desired outcome. Gilligan and her colleagues, in their later work, normalized bilinguality (Gilligan et al, 1988:80), and began to focus on how and why people of either gender chose particular orientations. They consider two factors: motivation and maturation.

Approaching this through the metaphor of 'real' bilinguality, it makes sense that a unilingual person is less motivated to learn a second language if everyone can and will speak the language s/he knows. Therefore the disadvantaged, (in Gilligan's early work, women, and in her colleagues' later work, the materially disadvantaged of either gender, but particularly females) have a greater necessity to become bilingual as they prepare to undertake responsibility in the world.

The assignment of responsibility in the world is a gendered matter, and to the extent that one gender is expected to assume more or a certain kind of responsibility, the need for bilinguality is affected. For example, babies can not be cared for well in the absence of an ethic/language of care; it could in fact, as the mirasmus complex demonstrated, kill them. On the other hand, maintaining a clean and operational home requires a good dollop of the ethic of order. To the extent that individuals are expected to assume a broad spectrum of responsibility for whatever reason, whether because of their gender, their life circumstances, or the philosophy of their society, they may need and be motivated to acquire a good grasp of both languages.

Learning requires motivation but also teaching. How is bilinguality taught? By exposure. Children learn their 'mother tongue' by immersion in it, without questioning their need or ability to do so. In a fluently bilingual home, they can learn two mother tongues equally easily. Where they are not immersed, they can be tutored. Most impediments in capacity and propensity can be overcome.

Maturation, including practice, is also a factor, both in acquiring a language and in using it appropriately. We who stumble with second languages know how embarrassingly inept we are, misusing clichés, misunderstanding idioms, missing humour. Speaking a language is one skill, writing it another, understanding its grammatical construction another. I see no reason why fleshing out the fullness of Gilligan's idea of a second language should be any less complex.

But is it, or some part of it, gender affiliated? There is nothing in this data that leads me to conclude that boys and girls are not equally capable of becoming fluently bilingual. But I think that they have been differentially trained, first in their families, secondly in the care system, and thirdly in the larger society. A high proportion of the girls in this project identified that they had been parenting children, that is, that they as children had assumed responsibility for siblings and sometimes parents. While a few of the boys referred in passing to protecting their siblings and mothers, they didn't give this factor the centrality the girls did. It may be that the care-giving role in families is only assigned to or recognized in females, just as the girls in this project were more readily recognized and supported when they became mothers than were the boys when they became fathers, even when the wish to actively parent was similarly strong. Many of the girls presented that they negotiated themselves into care, whereas the 2 boys who came into care as adolescents presented that they had become too strong for their mothers to handle. Again, there is a sense of agency within the family belonging to the females, be they mothers or daughters.

Half the 24 participants had empty spaces where their fathers should have been, and another one-third experienced their fathers as abusive. All but 3 participants had engaged mothers. Half the participants presented their mothers as inept, victimized or unprotective, 1/4 as basically good, and 1/6 as abusive. Most participants identified as a goal that they wished to do better for their children than their parents had done for them. The importance of youth in care undertaking a critical analysis of their own history in preparation for taking charge of

their own lives seems self-evident.

There was easy and general agreement among the participants that boys and girls were managed differently within the care system, particularly in the group home environment. The boys were emotionally vulnerable because they had few strategies to deal with staff who "pushed their buttons", whereas girls were seen as taking control through emotional volatility. Boys were at double risk in physical altercations: if they didn't engage, they were seen as weak, but if they did and hurt somebody or damaged something, they might be charged. The most confused and confusing image, however, is of restraints, where 4 staff sitting on a youth is a therapeutic intervention, but if the youth strikes a staff while being restrained, s/he (but more frequently the boys) may be charged with assault. It was generally agreed that girls were less likely to be restrained because they could charge (male) staff if physical contact was experienced as sexually inappropriate. Again, the females, whether youth or staff, seem to be seen as more equipped to cope, just as they were in families. Their advantage could be seen to lie in bilinguality, being able to analyze, act and resist in either ethical language.

The data that supports conjecture about genderism in the larger world is from the group discussions, where in response to a similar task, the girls spontaneously demonstrated an ethic of care in how they interacted with each other, and the boys demonstrated a significant lack of it, even with fairly overt suggestion and even when the individuals involved had in other data collection events shown their capacity for bilingualism. This suggests to me that conventional role modeling, the macho man and the nurturing woman, reigns in public.

Youth in the child care system have particular reason to understand the shortcomings of conventional roles, because the failure of their parents to perform them adequately is a pivotal point in their histories. While it may be an artifact of the protocol, it is nevertheless interesting to me that the youth who seemed best prepared for a positive outcome were also those who had a cognitive analysis of their history, while the other participants seemed to be working on a more experiential basis. Is it that history that is not understood is being repeated? If we believe the maxim to be true, we have an obligation to equip our youth with the means to conduct a critical analysis of their history in the context of their world -- in two ethical languages.

CHAPTER 8: CONCLUSIONS AND RECOMMENDATIONS

My initial intent in undertaking this research was to examine what is known about adolescence and apply it to adolescents in the child welfare system, with the idea that the state should bring all available resources to the difficult task of surrogate parenting, and balance normal developmental needs with the reparative work that might also be required. I encountered two major problems, however. The first is that most of what is known about adolescence doesn't apply to atypical circumstances, in fact is predicated on adolescence taking place in the context of a nuclear family. Whether or not the nuclear family exists in reality, it is what youth in child welfare by definition do not have. Secondly, the participants in this research articulated very clearly that they have not experienced the normal developmental rhythms. Some did their adolescent work early, in childhood; for others it arrived unexpectedly at emancipation; and for another group, it was not on the agenda -- they planned perpetual or at least long-term dependence.

This necessitated a reconsideration of the task of parenting and the business of the state in a parenting role. What becomes evident is that effective parenting involves providing both order and caring, and that the state can only legislate the order part of the formula, leaving the caring to those who deliver service, particularly at the interface of child and care-giver. This reflects a traditional gender affiliation: law and policy makers are primarily male and service delivery personnel primarily female. It is structurally vulnerable to gender bias as incorporated in the broader society. Given the low economic value attached to the care of children, the scene is set for child welfare to intensify class affiliation, rather than, as the rhetoric suggests, to transform class trajectory.

Child welfare achieves an optimal outcome, at either the individual or systemic level, when there is a balance of order and caring, when reality is perceived, talked about and acted upon according to both a construct of order, characterized by rules, roles, and reciprocity, and caring, characterized by inclusiveness, responsiveness, and least harm. This requires that those who deliver service know the rules that apply, and that those who make the rules know the life reality to which they apply. Most child welfare systems are set up to ensure the former much more than the latter.

This shortcoming can be addressed by developing procedures for amplifying the voices of

those who receive service — telling their stories — in such a way that the people who make the rules and those who pay for them, the public, can understand reality using both perspectives and can make decisions based on the knowledge of both head and heart. This work is hopefully a small step in that direction, both in its methodology and in its conclusions.

Within the context of this conceptual journey, I will address the conclusions that can be drawn to each of the five research questions posed. Because they overlap to some extent, I will emphasize different elements in each.

8.1 WHAT IS THE CANADIAN CARE-LEAVING REALITY?

To the extent that the reality of a randomly-selected group of young people making the transition out of the care of a metropolitan child welfare agency can be said to be typical of the Canadian reality, this research supports the assertion that the Canadian care-leaving situation is very similar to that described in the literature based on American and British populations. It is warranted to apply their findings to our circumstances, with due diligence about the impact of cultural differences. Similarly, there is room for a discussion of the impact of cultural differences within Canada on the care-leaving reality, which are in many cases as large as those between Canada and other countries. Nevertheless, the high level of concurrence among youth in cross-country studies, such as those sponsored by the NYICN, suggests that the similarities exceed the differences, that there is a Canadian homogeneity. The prevalence of a youth perspective may encourage a consistent focus on the practical essentials.

A snapshot of the 29 randomly-selected participants at age 18, emancipated from care and on their own for up to three years, in comparison to their age cohort, shows the following:

- one lived with family, whereas 92% of their age cohort do;
- 8 lived with a common-law spouse, 29%, compared to 1% of the cohort
- 8 girls were or were imminently due to become parents, 53% compared to less than 4% of the female cohort;
- 6 boys were or were imminently due to become parents, 40% with no comparative figures from the male cohort;
- none had educational certification, compared to 45% of the cohort;

- although a similar proportion had never worked, 12 participants worked less than a week in the prior year, 41%, compared to 7% of the cohort;
- 17, 59%, mostly male, received extended care;
- 11, 38%, mostly female, received welfare;
- three did not move in the previous year, 10% compared to 82% of the cohort.

Youth appear to be living on their own much earlier than their age cohort, transient, disadvantaged educationally and occupationally, and to move early into parenting and partnering.

Youth leaving care are positioned to be the canaries in the mine shaft among youth, the early indicators of systemic shortcomings, because they lack the protection of family and community in off-setting the inadequacy of public support. It is essential to keep them within the ambit of their age cohort, so that their circumstances cannot readily be dismissed as the consequence of personal inadequacy, and in order that the lessons they have to teach are not lost to other youth. Youth in Canada are, as a group, disadvantaged by the demographic lump known as the Baby Boomers, now entering their fifties, who anticipate dependency but have not yet quit the posts of power and productivity. This demography (which Canada shares with the USA and Australia, but not Britain) exacerbates the shifts initiated in global reorganization, leading to the intensification of class and the increasing privatization of social supports previously publicly funded.

Nevertheless, to do better than one's parents was the goal articulated by many of the participants in this research. In most cases, they were referring not to material progress, but to interpersonal well-being, being able to give and receive love in relationships, to provide the basic necessities of life, to treat their children as if they loved them. Many, in spite of sharp criticism of their experiences within the child welfare system, thought that this outcome was more likely because they had been removed from their families and spent time in care. On the basis of this research, the view of care-leaving in Canada must be simultaneously critical and supportive: it is far short of good enough, but better than the alternative.

This seems oxymoronic, but from within the child welfare system it is a functional position, perhaps even a survival stance. Most people have no experience of the child welfare system, which is good, as a measure of the health of a society. But it is also a liability, because

child welfare has to compete in public for its mandate and funding, and establishing the need for what it does without demeaning the people with whom it works is a very difficult assignment. That child welfare is required at all offends our sensibilities and piques our anger. How then, should we assess the efficacy of that which should not, in a good world, be necessary at all? As some of the participants in this research demonstrate, the answer begins with accepting that inexplicably bad things exist in the world and must be accommodated as best they can. Humanity lies in knowing what must be accepted and what can be changed. Research and discourse, to be helpful, must struggle continuously with drawing and re-drawing that line. The Canadian research literature, particularly when it amplifies voices from within the child welfare reality, makes at least as valuable a contribution as any to that end.

8.2 WHAT ARE THE *OUTCOMES* OF CARE-LEAVING?

The validity of measuring outcome in the midst of transition is hard to justify except on the basis of pragmatic necessity, which prevailed in this research, as in much other research. Because the adolescent transition is not synonymous with leaving care, it is essential to be clear that what is being measured is not a developmental outcome but an administrative one, the consequence of a status coming to an end. This research demonstrated that it is grossly abnormal in Canadian society for youth to leave home upon reaching the age of majority, even though that is legislatively required for youth in the child welfare system. This requirement is demonstrably at odds with the requirements of the education system and the labour market. The logical implications for life cycle decisions are clear, although disregarded in public discourse. In the absence of other routes to grown-up roles, early parenting and attachment to the illegal work force become attractive alternatives, if only because they are, or appear to be, the *only* available choices, at least in the short term.

Defenders of the child welfare system might say that it is also doing the best it can under difficult circumstances, and might argue that preparation for independence programs and provision for extended care provide the means to overcome the disadvantages of early emancipation for those who avail themselves of the opportunity. This returns responsibility for outcome to the sphere of the individual: the help they need is there if they want it and use it to advantage. But is it there and is it adequate? In this study, $\frac{1}{3}$ of females and $\frac{1}{2}$ of males received extended care for some time after emancipation, probably (although

comparative numbers are not available) a relatively high proportion. Even within a single agency, however, there is an inexplicable variability in who is offered what resources. The participants tended to regard post-care resources as a kinder gentler version of welfare, with all the diminution and parsimony that implies. Preparation for independence programs and activities, as described by the youth, seemed to have more to do with demonstrating the right behaviours to 'graduate' to the next phase than learning the essential skills, with the irony that graduation means losing resources, and furthermore, that leaving care and losing resources is inevitable whether or not the necessary skills were acquired. The programs that purport to buffer the consequences of abnormally early emancipation tend to fall far short of providing the resources, whether material or social, that are required to support adult success.

This is not to say that adult success is precluded, but only that it is achieved in spite of the shortcomings of the child welfare system, and to reiterate that even with its shortcomings, a system of surrogate care is essential. It works best when caring individuals adapt the rigid rules to human need. Whether this occurs before, during and after care, its function is to keep the individual integrated in society, to celebrate personal strengths and to nurture social connections. The youth then brings to adulthood a sense of agency (an 'I' that can do) and the capacity for praxis (action and reflection/analysis to change the world).

Many of the participants had moved early into the next stage of the life cycle, parenting and partnering. Eight of the girls were mothers, one of 2 children. Of the children, one was lost in a late miscarriage and another was reported to have died young of congenital difficulties. Another was admitted to hospital and came into care shortly after birth. Four of the girls had long-term relationships with the fathers of their children, and another a relationship that only slightly preceded the pregnancy. Of these 5 relationships, 2 were said during data collection to be problematic. The other 3 situations were socially and materially supported by extended family, in 2 cases, that of the fathers.

Six of the male participants reported being fathers, one of 2 children. Two had no relationship with the mothers and had never seen the children. Another had just learned that he was a father and was working out an arrangement that did not include living with the mother or parenting the child. Three were actively parenting, one his second child only. The relationship with the mother of the child was problematic in 2 of these situations, and one had attracted child welfare intervention and placement of the child in extended family care.

One “happy little family” was socially and materially supported by the mother’s extended family.

Although adolescent parenthood is generally accepted as a negative outcome, the participants overwhelmingly described parenthood as the most significant and often most positive event in their lives. For many, including the boys, it was an epiphanic event. Being responsible for a dependent human being was reason, in some cases, to make significantly different choices about life style, to ‘settle down’ as adults. Girls who became mothers became eligible for supports that were not available to them previously. Boys who became fathers seemed to be denied similar eligibility, although it is not clear how vigorously they sought it.

Although the participants were all somewhat disadvantaged educationally, and therefore occupationally, the girls were somewhat better off. Two were within reaching distance of completing high school, 2 acquired post-secondary admission in the course of data collection, and a third was well on her way to doing so (and subsequently succeeded). Of these, only one was parenting. Two other mothers also returned or planned to return to school as single parents; both were bright girls who had discontinued school as they became involved in street life. The girls tended not to work except at parenting and education.

The boys seemed much less academically inclined. There were no potentially stellar students. Two boys were working assiduously at school and 3 others attended school more as a daytime activity. Most did not see education as playing a role in their future. Most of the boys were already part of an illicit or underground work force that included working ‘under the table’ and in criminal activity ranging from drug and gun sales to car and other theft, along with everyday scamming. All but one of the boys had been or was involved with the justice system. This, like early parenting, is generally accepted as a negative outcome, and yet many participants saw it as providing the best social identity available to them. Some appreciated the material and social support it offered, either structurally (e.g., good nutrition and recreational facilities) or informally (e.g., a social network that straddled incarceration).

There is a sub-group of participants about whom one feels a lifetime of dependency awaits. For some, whose need for dependency is socially acceptable (e.g., Jason who is physically

and mentally handicapped because of injury in early childhood, inflicted by a parent), this may be made available somewhat positively and pleasantly. For others who do not fit the criteria of 'acceptable dependency', a more difficult time awaits. It seems inevitable that they will be personally blamed for their inability to make the transition to a productive adulthood, even though the ways by which they might make this transformation are by no means evident. They seem not to have the resources to make either parenthood or criminality work for them. They seem to have reached the limit of what child welfare care and formal training can give them. They resist help or accept it on difficult terms. There is no easy answer — and perhaps there is *no* answer — about how they might be brought to an adequate level of self-sufficiency or, on the other hand, into arrangements that will deliver enough social stability and material adequacy to survive. To the extent that this is so, they are vulnerable to the adequacy of a social net that is universally available. Given the current dismantling of that net, one contemplates their futures with trepidation.

8.3 WHAT ARE THE GENDER DIFFERENCES IN CARE-LEAVING?

The primary gender difference at care-leaving, briefly, is that boys leave care later than girls. This is not inconsistent with home leaving in the larger society. Boys leaving child welfare do so after a longer involvement with the child welfare system, in a more attenuated manner, and with more reliance on structured systems. This research is not able to differentiate between cause and consequence, but it raises a number of questions.

The pattern of child welfare engagement that this study demonstrated is that boys come into care early in life and stay to emancipation or beyond, whereas girls enter care at adolescence and leave early. In the sampling frame for this research, boys came into care an average of 19 months younger than girls. Among the participants, an almost equal number of boys came into care before and after adolescence, but only 2 of 15 girls entered care before adolescence. The two patterns, early-in-late-out and late-in-early-out, create 2 gender-associated 'classes' of children and youth in care, which could be called 'long term' and 'visitors'. These classes may also be affiliated with legal status, permanent wardship for long-term youth and temporary wardship or voluntary care for visitors, to which are attached differential rights (e.g., the right to extended care is limited to permanent wards).

The way in which each of these classes is managed within the child welfare system is often differentiated. Intake units pay attention to assessing risk and intervening to amend it. The perception or definition of risk includes a developmental element, so that younger children are more likely than adolescents to be seen as at risk, and adolescents are more likely to be held responsible to some extent for the situation in which they find themselves. There may also be a gender differential in defining or perceiving risk and intervention that intensifies with the age of the child/youth. We tend, for example, to be more concerned about the sexual activity of girls than of boys, perhaps at any age, but particularly as they become sexually mature. There is also a gender imbalance in the personnel that delivers service, with a preponderance of females. The investigation/intake process is by its nature rule-oriented, marching primarily to an ethic of order. This may work fairly well with adults and on behalf of little children, but it is somewhat incompatible with the *modus operandi* of adolescents, in particular their volatility and their tendency to resist and critique existing organization. The inability of the system *per se* to care about the individual is nowhere more evident and distressing than on initial meeting. The culture of the work, the way in which it is practiced, discourages offsetting order with caring: the expectation and obligation of the investigating worker is to competently and impartially procure facts and use them to draw a logical conclusion that can, if necessary, hold up in court. Because girls are more likely to enter care at adolescence, their experience of the system, their analysis of it, must be different than for boys who are more likely to enter earlier.

Because boys are in care longer, they have greater exposure to child welfare socialization, which I am postulating intensifies class affiliation. Girls as visitors have less exposure to this influence. Or they may be visitors *because* they reject it. For many of the girls who participated in this research, gender intensification preceded adolescence, as indicated by their assumption of parenting responsibilities within their natal families. They looked to child welfare to provide the opportunity for a 'normal adolescence' (i.e., an opportunity for social transformation), and when they did not find that, left care or were let go. Class and gender forces meet in a consideration of competence, which at care-leaving is a crucial factor.

There are two problems in discussing competence: how to define it, and how to value it. How competence is defined is gender-related, an essential element of gender intensification. The child welfare system, as a female-oriented system, is more familiar with female

competence. Readiness for care-leaving and support to care-leaving is couched in terms of female competence — domestic skills, and, recently, a concern with relationship skills. Male competency, to the extent that it is defined at all, may have to do with productivity and power, either of which tend to be unavailable to youth in general, and to lower-class youth in particular. Males approaching care-leaving, then, may find themselves in a double vacuum, suffering not only the absence of an articulated general outcome, but also the lack of a male model that they have any realistic chance of emulating. Becoming competent in a feminine way may be doubly difficult under these circumstances, first by lack of training and expectation, and secondly as a betrayal of an appropriately gendered future.

The second factor is how competence is valued. Ambiguity about this is central to the child welfare system and becomes potentially lethal at care-leaving. Competence may be required in order to qualify for preparation for independence or extended care, but it may also be the reason for discontinuing it. Incompetence, except severe debilitation, does not preclude termination and may, if it is seen as willful or noncompliant, be reason for early termination. To the extent that competence is defined as having domestic skills, girls are both more likely to have been taught them and more likely to be judged uncooperative if they don't demonstrate them, and therefore more likely to leave the child welfare system once they have left care facilities. Becoming a mother is reason for discontinuing care unless there is a concern with incompetency, in which case extended care may be discontinued in favour of mandatory monitoring. Becoming a father, on the other hand, doesn't seem in this research to influence decisions about terminating care.

Girls are more likely, then, to be judged competent on a domestically-oriented measure and to discontinue child welfare service, whereas boys are likely to continue to receive service while everyone tries to figure out what good would look like. For the vast majority of boys in this research, another system stepped in to help the boys learn to be good or to punish them for not being good: the justice system, both juvenile and adult. The child welfare system seemed much more willing to share the boys with a public structure of support, the justice system, than it was to share the girls with a private system of support, even when it seemed indisputable that the public justice system was meeting the needs of the youth more adequately than the private family system. Perhaps the choice of private versus public support was taken as a measure of social skill, in which demonstrated competence was rewarded by withdrawal of child welfare services. More likely, in my opinion, practical

support of family life lies outside the purview of child welfare, whereas compensating for its absence is perceived as its primary task. The child welfare system operates to replace mothers in their role of caring for children, not fathers in their role of providing the means of living. Girls becoming mothers, then, is for the child welfare system a less ambiguous transition to adulthood than boys becoming criminals; in fact, boys becoming criminals might be taken as evidence that further parenting is required.

The omnipresence of the justice system in this research also suggests an unacknowledged partnership for bringing youth to adulthood, an organizational strategy to teach and monitor female skills through one system and male skills through another. Because the participants most deeply involved with the justice system did not provide full data, this research is poorly located to explore this question further. But it does seem possible that the justice system takes up where the child welfare system gives up in teaching young people how to deal with matters of power and aggression. The mental health system may be another partner in this business, although again the exclusion of youth transferred to that system from this research -- in some cases with discourse about protecting them from this incursion, whereas the justice system was much more clear that it was protecting itself, not the youth, from exposure -- renders this research unable to examine the matter in more depth.

We have been discussing the dominant gender difference in care-leaving, attenuated care, from the perspective of how the child welfare system might have operated to offer extended care more to boys than girls. From another perspective, it might be postulated that boys receive extended care because they are more needful. Being in long-term care without having been placed for adoption might be taken as an indicator of dysfunction. And the boys in this research do seem more vulnerable than the girls.

Could this be attributed to the circumstances that brought them into care? The data on which this research is based did not focus on social history, and therefore cannot support such a comparison. The boys, having come into care earlier, do not have personal access to family history but know it as interpreted by the child welfare system, which might be expected to focus on the malfunctions that necessitated coming into care. The girls have access to a more balanced set of 'facts' and, as well, have had the opportunity to continue their analysis with the increased reasoning capacity of adolescence. The importance of developing an understanding of one's history is noted by several participants, particularly

those who seemed positioned to manage adulthood. Perhaps it is not the circumstances of early childhood, but access to the means to bring this history into the transition to adulthood that impacts on developmental progress. If this were so, it would recommend that the in-care protocol give sustained attention to amassing and reviewing information about the family of orientation, including but extending beyond the conditions that resulted in the child coming into care, and being sure to include multiple points of view. This might include the youth undertaking direct research as his/her skills, interest and needs warrant.

There are other ways to consider the differences in circumstances at entry to care that create the basis for gender-associated classes of youth in care. Perhaps family dysfunction is differentially problematic for boys and girls, or gender-affiliated childhood behaviour is harder for dysfunctional families to manage, or exacerbates dysfunction differently in families. For example, if boys act out and girls internalize reactions to trouble, boys might jeopardize family functioning more and/or be more likely to come to public attention. Girls might then be retained and boys jettisoned, even if the *extent* of family dysfunction were similar. A corollary might be that the child welfare system reacts differently to circumstances in which gender is a factor; for example, the system might be more compelled to protect against physical violence, in which boys might be more likely to be involved, than against domestic exploitation or neglect, where girls might be more at risk.

There are also differences in the in-care experience that could set the stage for gender differences at care-leaving. For example, one might postulate that the child welfare system is differentially effective with preparing boys and girls for adulthood in that it provides a variety of female role models, whereas male role models are largely missing from the day-to-day operation of child welfare, as well as the families that come to child welfare attention. Where males are available as models, they may be, or be seen to be, vocational rather than parenting models. From another perspective, it could be postulated that child welfare, like any institution, teaches compliance and conformity, skills that undermine independence, which differentially disadvantages boys, for whom independence is more socially expected, and who also have longer exposure to child welfare socialization because they enter earlier. This research is not well positioned to explore these issues further, and one might say that it falls outside the purview of care-leaving in any case, but certainly they seem to be pieces of the puzzle that surround the matter under consideration.

8.4 WHAT IS THE RELATIONSHIP BETWEEN THE NORMAL

ADOLESCENT TRANSITION AND CARE-LEAVING?

The short answer to this question is: very little. The two co-exist but are very different creatures, even though a relationship is implied when termination is cloaked in developmental language. This research suggests that adolescence as it is theorized, as an extended moratorium during which the individual reconsiders him/herself and makes choices for the future, may not exist at all for youth in the child welfare system. Rather they are rushing to catch up with childhood tasks and to hurry up with adult tasks. It is readily evident that a legal adulthood that is unusually like functional adulthood arrives early and summarily for youth in care, relative to both the age cohort and the theoretical construction.

What is less evident but demonstrable in this research is that childhood, the foundation on which adolescence is predicated, may also be missing for children who come into care. It may have existed precariously in the family, subsumed by the needs of the family as the child's competence developed. Or, as the malfunction of the family exceeded the competence of the child, the child or youth may have come into care where, in spite of discourse and protocols that suggest otherwise, childhood is also delivered only occasionally and for the short term. Child welfare delivers legal belonging and an acceptance, perhaps even an expectation, of dependency that looks like but is not synonymous with childhood, just as care-leaving looks like but is not synonymous with adulthood. In the tight torque between vulnerability and responsibility that is equally characteristic of dysfunctional families and the child welfare system, there is seldom opportunity or energy for the internally-focused work/play of childhood.

When care-leaving happens and the dependent child role gives way to the independent adult role, the optimal synthesis from both a theoretical and a practical point of view would be the interdependent young adult. With whom can the young person leaving care become interdependent, supposing s/he has the interpersonal skills to negotiate the relationship? To the extent that the youth has been isolated within the child welfare system, the options available are generally flawed. They include peers that are equally under-resourced materially and socially, natal families that have been judged unable to assume responsibility, siblings parented by the same inadequate family and/or in care, foster families that have negotiated a termination of care and may already be involved with a subsequent foster child, and case workers and group home staff whose spaces immediately fill. Youth who have good social skills and/or fresh and positive connections with the larger community have the

advantage; these are likely to be girls, given that they are more likely to value and be good at social connections and to have come later into care. We do recognize as a society that partnering is a potentially transformative prism, particularly for women, and we allow ourselves individually and collectively to advise against negative refraction, to recommend patience and perspicacity in choosing a partner. This begs the issue of access to a pool in which such potentially positive people await, and of acquiring the resources, the discourse and the accoutrements, to do business with them.

If this were posed as a problem to be solved, it would recommend that we focus a great deal of attention on developing the kind of social connections and social skills among youth in and leaving care that would allow them social mobility. The impediment to doing so is philosophical as much as practical, a Pygmalion problem: we *could* make class transformations, but *should* we amend the ordained social structures? That we don't track our progress, let alone celebrate our successes, suggests that we do not consider social transformation to be our business. On the contrary, it seems that our business may be intensifying class by positioning child welfare as a finishing school for failure. We do this by personalizing parenting failure and punishing it, and by so doing marginalizing and stigmatizing children in care. We isolate them from society with transience and shame. We give them a psychological rather than a social analysis by which to understand who they are and whence they came. We require that they exchange the courage and creativity that helped them deal with dysfunctional families for conformity to an inexplicable and implacable system. Finally, we send them away early and unprepared. And then we blame them, as we did their parents, for what they failed to achieve.

Erikson's theory of adolescence assumes that nuclear families are the normal structure within which children are raised. Whether or not this was ever so, it is decreasingly the situation as opportunities for productivity undergo massive gender and class changes. Adolescence as a developmental stage needs to be re-theorized, and while that is far outside the scope of this research, the perspective of individuals who have been failed by what families are supposed to be, and who are attempting to weave the facts of failure into a fabric that can sustain the families they produce may be instructive to such an undertaking.

8.5 WHAT ARE *PROTECTIVE AND REMEDIATING STRATEGIES*?

I have two recommendations for intervention:

- that we consistently support the telling of stories in which the subject of the story is also the narrator, and by so doing support self-reflection, a growing sense of agency, critical thinking and a developing analysis of one's personal history;
- that we consciously strive to balance order and caring in how we perceive, talk about and act in the child welfare system, and by so doing teach a balanced way of seeing the world that is essential to successful adulthood.

I avoid recommending system or policy changes, even though the shortcomings of the child welfare system and how it is applied are omnipresent in the data, because the assumptions underlying the system need to be exposed and corrected before a useful discussion is possible. This requires an everyday critique of the system conducted from beneath and using two ethical orientations, in order to expose the underlying ideology and to validate the missing pieces. From this derives the material for a dialogue with those who are outside the system, who are as ignorant of what goes on in child welfare as Boswell's citizens of yore were of what went on behind the convent walls that held the door through which unwanted children were passed. The same walls of ignorance that alienate children raised in care from mainstream society also prevent mainstream society from learning what they need to know to act more humanely towards the unfortunate. The telling of stories from within that brings the fullness of the reality of being in care to public consciousness can make the wall disappear.

My recommendations, then, include creating stories and telling them. Who should the narrators be? Clearly, they should first and foremost be the children and youth raised in care. To ask a child to tell a self-narrative will address the vacuum I have identified, the absence of an articulated goal for the child. In order to tell a self-narrative, s/he must create a world occupied by people with plans or forces with projects that impact on his/her life, and make them resolve into a believable conclusion. The child will articulate the goal as s/he sees it; the vacuum will be filled. To the extent that these stories are private stories, hidden as they now tend to be, there is no need for the characters in the story to have an opinion on the acceptability of the roles and motives assigned them. As the stories become public, those about whom stories are told must incorporate this reality into their view of themselves. As more stories are told, pressure builds for the child welfare system that encompasses the stories to own its contribution, and for the society that creates and maintains the system to own its contribution.

Researchers with a feminist orientation will recognize in this scenario the characteristics of Harding's 'studying up' and of Smith's (and others') posing the everyday world as problematic. In a sense we are all researchers in our lives; we seek, as researchers do, to amass data and to comb through it again and again in order to understand our reality in a new and deeper way. This is nowhere more evident than with children and adolescents as they develop a sense of who they are and how they fit into the world and what their impact on that world should be. To apply it to child welfare, where we fall so short of providing what is optimal for the development of children and adolescents who have been already been once-failed (at least) by our world, seems inarguable.

This is not a new idea. Roger Clough said "remembering that in many families a life-story is learnt by repetition of sagas[,] it is as if some young people have to learn their song and then be helped to sing it." (1988:30). And yet the system continues to narrate on behalf of children and others in their lives from the perspective of an institution that holds no future for the individual. The Looking After Children protocol moves some way toward creating a more multifaceted history of care, but still it appears to be a story about rather than a story by the subject of the record, and the record of an intervention into a life rather than of the life itself. I hope that the methodology of this research demonstrates, for any who wish to see, how simple and instructive it can be to encourage narrative. The use of scribing may help us move from our positions of power, and to learn/practice the art of listening and asking, but the same end could be achieved in other ways, if there were the intent to do so.

The ownership of narration is particularly important in working with adolescents who tend to be learning/practicing the art of telling and rejecting listening/asking. Treating them as if they were children (i.e., telling them) is not effective, as anyone who works with adolescents can attest. What does work is listening, asking, supporting them in structuring their thoughts. Furthermore, hearing what they have to say is often thought-provoking. What are the impediments to evoking their voices? I can only suggest that giving away one's power is hard at any time, and giving it away to adolescents who are potentially out of their own control and immune to ours is difficult indeed. And that brings us to my second recommendation, that we consciously balance order with caring.

Nowhere are the shortcomings of a unilingual ethic of order more evident than in dealing with

adolescents. They critique rules, change roles with abandon, and engulf reciprocity with egocentrism. An ethic of caring, however, can include their many selves and realities, be responsive to their changing needs, and work toward minimizing harm, which is as good as it gets as they go into the larger world. While an ethic of caring supports engagement, it is vulnerable to being drawn into and neutralized by the chaos of change. *Both* order and caring are needed to optimally support adolescence.

The child welfare system, as befits a legislated body, operates on an ethic of order, and therefore is inordinately ill-prepared to deal well with adolescents. Programmatic responses to care-leaving are inadequate to the extent that they are more of the same. Participants in this research describe preparation for independence programs and extended care in terms of the rules by which they can be manipulated rather than in terms of the skills that were learned. On the other hand, care-leaving programs are valuable in the same way the child welfare system as a whole is valuable, in that it provides a stable, predictable reality with which one can learn to do business. Youth in care spend a great deal of time figuring out what the rules are (Martin & Palmer, 1997), and participants in this research expressed frustration when they experienced the rules as changing without explanation.

The ethic of caring in child welfare resides with individuals who deliver service, and only the naive believe that 'it', the system, cares for or about them. Sometimes participants in this research saw caring as subverting the rules, and in these circumstances it became exploitive 'head games' where youth were disadvantaged by their weakness, or vulnerability to being manipulated where youth were disadvantaged by their power. Only when caring coexisted with order, so that the terms of relationship could be negotiated and renegotiated as changing circumstances required, and the youth was allowed to give as well as take, was it seen as helpful.

How difficult would it be to establish a discernible dialogue between order and caring in the child welfare system? The answer lies beyond the authority of this research, but it seems to me that we now require people to use a specialized language when they enter the system, and therefore are already in the business of influencing how people name their world. The order-care dialectic is a way of *understanding* or analyzing how we name the world, including how we impose our way of naming on others or, conversely, how others' ways of naming the world is imposed on us. It exposes power relationships, not as something bad — someone

has to decide in which language a discussion will take place, else Babel reigns — but as an integral part of the communication. The attractiveness of an order-caring dialectic is that it is relatively easy to demonstrate how both contribute to understanding the world more fully, and to reach agreement that one is not superior to the other but merely different. It may be that my Canadian heritage with its fundamental preoccupation with balancing polarities and its celebration of language as a signifier of culture makes this seem an easier route to transforming practice than others would perceive it to be. The idea of ethical bilinguality transformed and enriched how I saw the world, allowed me to switch lenses with confidence, knowing how I was clarifying my perceptions and thoughts. Whether it will be as easily accessible to others, and to what extent it will be helpful awaits the application of the idea to practice.

8.6 IN CLOSING...

At the end of chapter 2, I articulated my ideals for adolescence. I repeat them here:

- that they live well in their bodies and in circumstances that are bearable;
- that they live well in the communities in which they find themselves, balancing what is needed with what is available, valuing holism, interdependence, the intangible and the unremunerated;
- that they live well in the global world, valuing balance between what can and should be changed and what must be accepted as it is.

I believe that these ideals can be achieved in a variety of circumstances. Perhaps they are most easily acquired in a well-functioning family that takes a critical stance to how it positions itself in the larger world. But they may equally well be acquired in any circumstance that balances order and caring, and that creates and re-creates itself in self-reflective narrative. The challenge is to use our resources and our resourcefulness to create good-enough conditions for every child, one at a time, to become the adults we need them to be. It is a task as old as humanity; it is the work of humanity; it is the work on which human kind depends.

This work has explored thirty tales of transition to adulthood from 18- and 19-year-old youth leaving child welfare care at emancipation. Their narratives are a testament to the resilience

and courage and creativity of the youth, as well as of those who care for them. It is a mother lode of lessons on how we might do better the job of apprenticing the stewards of our future. This treatise mines only a small portion of what is available, and describes a process by which this small bit is transformed into a tool potentially useful to others. I hope that it serves to encourage us all to be miners, not only to search for gems among the till, but also to undertake the work of smelting riches from rubble.

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