

Youth perspectives on parents' involvement in residential care in Israel

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Abstract

- **Summary:** This exploratory study deals with biological parents' involvement in residential placement in Israel from the point of view of 79 youth who left care. It presents youth's retrospectives on their parents' involvement in care and the degree to which the placement staff involved parents in reality. The youth functioning while in care and after leaving were also examined according to their parents' involvement.
- **Findings:** Results show that only a quarter of the youth reported that staff involved their parents on a regular basis. T-tests and chi square tests showed significant differences in functioning between young adults with high and low parental involvement. Youth whose parents were more involved had better educational achievement in care and after and reported significantly lower involvement in risky behaviors than those with lower parental involvement. However, no group differences were found regarding outcomes in adjustment to military service and financial status.
- **Applications:** The findings emphasize the gaps in parental involvement in care by staff and the potential contribution of engaging biological parents in the lives of their children while in care and toward emancipation.

Keywords

Social work, child and family welfare, risk, social work practice, young people, social work theory

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Of the 2.1 million Israeli children and youth, 75,000 are living in different types of out-of-home settings (National Council for the Child, 2009), according to their family background, personal characteristics, and needs. Among these youth, 10,000 are placed in residential care facilities supervised by the Ministry of Welfare (of which 20% are placed with foster families), and 24,000 are placed in educational residential settings (Mash, 2001).

Professionals who work with children in care frequently mention the importance of the parents in their children's adjustment to care and after leaving care (Haight, Kagle, & Black, 2003; McWey, 2000). However, in practice, there seems to be a gap between the professional acknowledgment of biological parents and their contact with their children and the encouragement and maintenance of that contact by staff (Garfat & McElwee, 2004; Grupper & Mero-Jaffe, 2008).

Despite their removal from home and the complexity of their relationships with their parents, youth in care wish to maintain some form of contact with their birth parents (Moyers, Farmer, & Lipscombe, 2006; Sinclair, Wilson, & Gibbs, 2001, 2005b), and report contact with their biological parents, especially with their mothers (Collins, Spencer, & Ward, 2010; Courtney & Dworsky, 2006; Reilly, 2003; Samuels, 2008). However, earlier studies suggest that parents' involvement with their children in care is complex and diverse (Haight et al., 2003), indicating mixed results as to the influence these relationships have on youth outcomes both in care and after emancipation. While some studies found a positive association between parents' involvement in care and their children's functioning both in care and after emancipation (Fratter, Rowe, Sapsford, & Thoburn, 1991; Landsman, Groza, Tyler, & Malone, 2001; McWey, 2000; Moyers et al., 2006; Oyserman & Benbenishy, 1992; Sinclair et al., 2005b), others did not find a significant correlation between parents' involvement and youth's functioning (Hukkanen, Sourander, Bergroth, & Piha, 1999; Vorria, Wolkind, Rutter, Pickles, & Hobsbaum, 1998).

Research on parents' involvement in the lives of youth in care in Israel is scarce (Grupper & Mero-Jaffe, 2008). However, given the central role of biological parents in the lives of their children it is important to examine their contact while in care and its impact upon youth's functioning in care and through their challenging transition to adult life. Therefore, the goal of this exploratory study is to describe adolescents in youth villages' perspectives on their parents' involvement in care by staff and examine whether there is a gap between youth's wishes for it and parents' involvement in reality. The present study also explores whether there are differences in youth's functioning while in care in relation to their perception of their parents' involvement in terms of school achievement and risk behavior (e.g. involvement with the law, alcohol use, and drug abuse) and in relation to their status in adulthood in terms of their functioning outcomes in the areas of education, employment, income, risk behaviors (substance abuse and law involvement), and contribution to the community.

Biological parents' involvement in care

Those involved in the field of out-of-home settings throughout the professional world have been increasingly aware of the importance of encouraging parents to be involved in their children's lives while the children are in care (Garfat & McElwee, 2004; Grupper, 1998). Empirically, evidence has emerged that supports the significant role of birth parents in better outcomes of youth who left care (Daining & DePanfilis, 2007; Pinkerton & Dolan, 2007; Sulimani-Aidan, Benbenishty, Dinisman, & Zeira, 2013; Wade, 2008). Nevertheless involving parents in the lives of their children in out-of-home settings poses great challenges to staff for various reasons, including the professional staff's attitudes toward these parents, limited time, and resources (Garfat & McElwee, 2004; Grupper, 1998), as well as the parents' characteristics and life circumstances (Oyserman & Benbenishy, 1992). As a result, parents' involvement in their children's lives while in care may be low to nonexistent.

Despite the fact that youth in care have been removed from their parents, studies indicate that they wish to maintain some form of contact with their birth parents (Moyers et al., 2006; Sinclair et al., 2001, 2005b). Earlier studies found that youth in care reported being close to one or more members of their biological families, especially their mothers, grandmothers, and siblings (Collins et al., 2010; Courtney & Dworsky, 2006; Reilly, 2003; Samuels, 2008). Other studies also show that the absence of contact with family members, especially where children clearly wish for contact, can be problematic and potentially damaging (Schofield, Beek, Sargent, & Thoburn, 2000).

Staff in care and caseworkers, in particular, play a central role in influencing both the degree and quality of contact of biological parents with their children (Sen & Broadhurst, 2011). However, research suggests that there is a gap still between staff's expressed attitudes and intentions toward parents–children's relationships in care and their actions in reality (Garfat & McElwee, 2004; Grupper & Mero-Jaffe, 2008). Therefore, the first goal of this article is to examine the perspective of youth regarding their parents' involvement in care and to explore the gap between youth's desire for their parents' involvement and their parents' actual involvement by staff during their stay in care.

The role of birth parents in youth's functioning while in care and after

Research regarding parents' involvement in care focuses on the quantity of contact in care and the quality of contact. Findings on the quality of contact between youth in care and their parents indicate that the quality of their contact is correlated with the youth's psychosocial status in care (Hukkanen et al., 1999; McWey, 2000). However, results on the frequency of contact show mixed results. While some studies did not find a significant correlation between parents' involvement

and youth's functioning in care (as shown by their frequency of encounters) and outcomes in adulthood (Haight et al., 2003; Hukkanen et al., 1999; Vorria et al., 1998), others found a positive association between parents' involvement in care and the children's overall well-being and functioning (Attar-Schwartz, 2008, 2009; Landsman et al., 2001; McWey, 2000), placement stability (Fratter et al., 1991; Moyers et al., 2006), better emotional status, and higher behavioral and intellectual outcomes (Cleaver, 2000).

In addition to the potential benefits of parents' involvement to their children's adjustment while in care, earlier studies showed that parental support is one of the most important factors influencing youth's outcomes and adjustment after the transition to independent living (Cusick, Havlicek, & Courtney, 2012; Festinger, 1983; Wade, 2008). For example, support from parents was correlated with better adjustment and higher well-being after leaving care (Collins, Paris, & Ward, 2008; Dinisman & Zeira, 2011). In their longitudinal study, Sulimani-Aidan et al. (2013), who examined the associations between parents' contact and support while in care and youth's outcomes after emancipation, found that these relationships predicted youth's higher economic status, stability in housing, and higher satisfaction in accommodation after emancipation. However, these studies focused on general positive support from biological parents rather than their involvement in the care placement.

Due to the fact that the contribution of parental contact to children's outcomes is controversial, the current study aims to explore the involvement of parents in care in relation to youth status while in care and outcomes after the transition to adulthood.

Conceptual framework

In this study, we use the attachment theory (Bowlby, 1973) as the main conceptual framework. Attachment theory posits that attachment to a caregiver is a basic and biological need of every human being. According to this theory, children's attachment to the primary caregiver at an early age has an impact on their relationships during their life course with authority figures, friends, and intimate partners. Bowlby theorized that a child's early attachment to their primary care giver allows them to build up expectations in the form of an internalized representation or "working model" of relationships and the way they perceive their environment. These expectations influence in turn the child's self-esteem and feelings of being worthy of love. Bowlby also asserted that these childhood attachments have long-term effects on how people experience and cope with stress and are associated with emotional and cognitive development (Bowlby, 1988; Gittleman, Klein, Smider, & Essex, 1998; Iwaniec & Sneddon, 2001). It was argued that in extreme cases, such as maltreatment and acute neglect, attachment relationships may have far-reaching consequences that might last into adulthood. This assumption might be of great relevance to youth in care due to their possible history of maltreatment and neglect. Their parents' characteristics, parenting problems, and difficult life circumstances could lead to poor bonding between them and influence the youth's

internal working model's functioning and outcomes (Allen, Moore, Kuperminc, & Bell, 1998; Haight et al., 2003; Styron & Janoff-Bulman, 1997).

The theory also posits that there are several possibilities that might change the "impaired" working model over time. These possibilities include providing support for parents, or significant life-changing experiences, such as an experience of an intimate and secure relationship. Therefore, concerning youth in care, it is possible that a positive substitute parental figure, such as a foster parent or social counselor, can compensate for earlier disadvantaged attachment relationships (Hess, 1982; Howes, Brandon, Hinings, & Schofield, 1999; Iwaniec & Sneddon, 2001). Therefore, it is possible that residential care enables youth to experience positive relationships that emotionally compensate by giving them the opportunity to be cared for by other adult figures (Schiff & Benbenishty, 2006).

In addition, research supports the assumption that children who remain in contact with their biological parents while in care experience emotional growth and better functioning in adulthood (Ainsworth, 1989; Hess, 1982; Weiner & Kupermintz, 2001). It is possible, however, that these two aspects are connected and that the therapeutic interventions and continuity of relationships with biological parents facilitate the youth's formation of new relationships with others and the rehabilitation (Bowlby, 1988; Hess & Proch, 1988; McWey, 2000) of their relationships with their parents.

Research goals

The purpose of the present study is to describe the way young adults who left care perceive their biological parents' involvement while they were in care and examine the correlations between their parents' involvement and their functioning in care and outcomes after emancipation. The findings were gathered from care leavers' own perspectives as adults and therefore their retrospective evaluation of the role of their parents' involvement while in care is of great value. Also, care leavers' experiences and outcomes might provide us with a helpful understanding of the role of their biological parents during their stay and in their transition to adulthood. These insights could help us design programs and services to enhance their beneficial adjustment in care and support their transition to independent adult life. Therefore, the research questions are as follows:

1. What are the young adults' perspectives on their wishes to involve their parents in care and their parents' involvement by staff in reality?
2. Are there differences in outcomes between youth in care who reported higher involvement of their parents and those who reported lower involvement? (e.g. school achievements, involvement with the law, alcohol use, and drug abuse).
3. Are there differences in outcomes after leaving care between youth who reported higher involvement of their parents and those who reported lower involvement? (e.g. education, employment, income, risk behaviors, and contribution to the community?)

Method

Participants

The sample included 79 young adults who emancipated from youth villages in Israel. Youth villages in Israel are a type of out-of-home setting that is overseen by the Ministry of Education. These residential placements were originally created to respond to the challenges of massive waves of immigration to Israel and their aim was to support and enhance assimilation of mostly adolescent immigrants (mostly from the Former Soviet Union and Ethiopia) into Israeli society. Today placements in these settings are voluntary in most cases, and the majority of adolescents in these placements come from underprivileged and vulnerable Israeli families, mostly from the geographical or social periphery of Israel (Mash, 2001).

The participants in the study were young adults between the ages 21 and 25 who had emancipated two to six years before the survey took place. About 60% left care two to four years before the survey, while 40% left care four to six years previously. Among the 79 care leavers, 82% were young men and 18% were young women. A third were serving in military service (mandatory in Israel) and half were employed; almost 70% did not complete their high school diploma. The majority (67%) were living at home with their parents and nearly half (45%) had stayed three to four years in care before emancipation ($M = 3.3$, $SD = 1.13$).

Procedure

After obtaining approval from the Ministry of Education's ethics committees and from the inspectors of the youth village, the research staff was given the names and phone numbers of all youth who left care two to six years previously ($N = 120$) and approached all the young adults over the phone. The selection criteria were young adults in their early emerging adulthood (18–26) who spent at least two years in residential care settings. The young adults were given an explanation of the study goals and were asked for their consent to participate in the study. Those who voluntarily agreed to take part in the study ($N = 79$; 66.6%) were interviewed by especially trained research assistants. Each phone interview lasted approximately 25 minutes. During the interview the young adults were first asked demographic questions (e.g. time spent in care, age, gender). In addition, they were asked questions (structured questionnaire) about their parents' involvement in care, status while in care, and outcomes after emancipations.

Instruments

The questionnaire consisted of several components:

Parents' involvement. The young adults were asked questions about the staff's involvement of their parents in their care, both as they had wished for it to be and as it occurred. These questioned were designed by the study researchers for the

study's goals: (1) "To what degree do you think parents/family should be involved in care?" (ranging from 1 = "not at all" to 5 = "very much involved"); (2) "To what degree did staff involve your parents/family while you were in care?" (1 = "too little," 2 = "exactly as needed," 3 = "too much"); and (3) "In what cases did staff involve your parents/family while you were in care?" (1 = "in no case," 2 = "only in special cases or with specific problems," 3 = "on a regular basis").

Youth's functioning in care. The young adults were asked about their status while in care (Benbenishty & Zeira, 2008). The areas included were as follows: (1) school achievements (e.g. up to 11 years/12 years diploma); (2) alcohol use and drug abuse (rarely/sometimes/often); and (3) law involvement, e.g. "Did you have a criminal record during the time you stayed in care"? (yes/no).

Outcomes in adulthood. The young adults were asked a series of questions regarding their current status after leaving care, taken from Benbenishty and Zeira's (2008) study in the areas of: (1) education, e.g. "what type of matriculation (high school diploma) did you achieve?" (1 = "haven't completed 12 years of study," 2 = "completed only 12 years of study," 3 = "completed half matriculation," and 4 = "completed full matriculation"); (2) risky behaviors, e.g. involvement with the police/using alcohol and/or drugs; (3) employment, e.g. "what is your employment status?" (fully employed/employed half-time/unemployed); (4) income compared to the average income (much lower than average/below average/average and above); and (5) contribution to the community or volunteering (yes/no).

Individual characteristics. Individual characteristics included both demographic variables (e.g. age and gender) and placement history (e.g. length of stay in the placement).

Data analysis

First, descriptive statistics were used to describe the youth's perspectives on their parents' involvement while in care. Descriptive statistics were also used to describe the young adults' status in care and current functioning after emancipation. Then, the status was calculated both for the total sample and for two groups separately, divided by high parental involvement and low parental involvement. Finally, T-tests and chi square tests were used to check for significant differences in functioning between young adults with high and low parental involvement.

Results

Young adults' perspectives on their parents' involvement

Tables 1 to 3 describe the young adults' perspectives on their parents' involvement while they were in care. Almost all care leavers thought that parents should be

Table 1. The distribution of the degree young adults believe their parents should be involved in care ($n = 59$).

| | None | Little | Little | Moderately | Very\Very much | <i>M</i> | <i>SD</i> |
|---|------|--------|--------|------------|----------------|----------|-----------|
| In what degree do you think parents should be involved in care? | 2% | 12% | 12% | 26% | 60% | 3.74 | 1.06 |

Note. Participants responded on a scale: 1 = not involved, 2 = little involved, 3 = moderately involved, 4 = very\very much involved.

Table 2. The distribution of the degree young adults reported their parents were involved in care ($n = 58$).

| | Too little | Exactly as needed | Too much | <i>M</i> | <i>D</i> |
|--|------------|-------------------|----------|----------|----------|
| In what degree did staff involved your parents while you were in care? | 17% | 76% | 7% | 1.84 | 0.48 |

Note. Participants responded on a scale: 1 = "Too little," 2 = "Exactly as needed," 3 = "Too much."

Table 3. The distribution of cases parents were involved in care by staff ($n = 59$).

| | In no case | Only in special cases or problems | On a regular basis | <i>M</i> | <i>SD</i> |
|---|------------|-----------------------------------|--------------------|----------|-----------|
| In what cases did staff involved your parents while you were in care? | 10% | 66% | 24% | 2.19 | 0.6 |

Note. Participants responded on a scale: 1 = "In no case," 2 = "Only in special cases or with specific problems," 3 = "On a regular basis."

involved with their children's lives while in care (Table 1). Two-thirds (60%, $n = 35$) thought that parents should be very or very much involved, and about a quarter (26%, $n = 15$) thought that parents should be moderately involved. Only eight (14%) young adults thought that parents should be involved as little as possible.

With regard to their parents' involvement by staff in reality, 76% ($n = 44$) of the youth thought their parents were involved as much as needed and 20% ($n = 10$) thought that their parents' involvement by staff was low (Table 2).

However, when asked about the cases in which their parents were involved (Table 3), most of the young adults thought that staff involved their parents only in special cases or when there were problems (66%, $n = 39$) or not at all

Table 4. Youth’s functioning while in care according to parents’ involvement.

| | Low involvement n = 14% | High involvement n = 44% | Total sample n = 79% |
|---|----------------------------|-----------------------------|-------------------------|
| School achievements | | | |
| Up to 11 years | 35.7 | 6.8 | 16.5 |
| 12 years diploma | 64.3 | 79.5 | 69.6 |
| Complete high school with diploma (full matriculation) | 0.0 | 13.6 | 13.9 |
| Risk behaviors | | | |
| Law involvement (police record) | 20.0 | 80.0 | 43.0 |
| Alcohol abuse | | | |
| Rarely/not at all | 50.0 | 61.4 | 62.0 |
| Sometimes | 35.7 | 27.3 | 25.0 |
| Often or always | 14.3 | 11.4 | 12.7 |
| Drugs abuse | | | |
| Rarely/not at all | 100.0 | 95.5 | 97.5 |
| Sometimes | 0.0 | 2.3 | 1.3 |
| Often or always | 0.0 | 2.3 | 1.3 |

(8%, n = 5), whereas a quarter reported that their parents were involved by staff on a regular basis (24%, n = 14).

Young adults’ functioning in care

Table 4 shows that most young adults in the study expected to complete 12 years of study and achieve their matriculation (69.6%). Many reported being involved with risky behaviors including committing a felony and substance abuse prior to care and during their stay—almost half of the young adults had a police criminal record (43%) and a third reported regular alcohol use (12.7%).

All of the young adults who reported higher involvement of their parents in care had significantly higher school achievement (79.5% versus 63.3%; $\chi^2(2) = 8.66$, $p < 0.01$). Involvement with the law was also nearly significantly lower among those who reported higher parental involvement (20% versus 80%, $\chi^2(1) = 8.66$, $p = 0.59$). In addition, among those who reported lower parental involvement, substance abuse was higher and alcohol was used more often (14.3 versus 11.4). However, these differences were not significant.

Young adults’ outcomes after leaving care

Table 5 presents the young adults’ overall outcomes in adulthood and separately for those who reported higher parental involvement compared with lower involvement. The young adults’ educational achievements after emancipation were not high. Only 13.6% completed their high school studies with diplomas (matriculation), while the majority completed 12 years of studies (69.6%). Fewer proceeded

Table 5. Outcomes after leaving care according to parents' involvement while in care.

| | Low involvement n = 14% | High involvement n = 44% | Total sample n = 79% | Group differences |
|--|-------------------------------|--------------------------------|----------------------------|--------------------------------|
| Education | | | | |
| Without high school diploma (under 11 years) | 35.7 | 6.8 | 16.5 | $t(56) = 3.00,$ $p < 0.05$ |
| Complete high school (12 years) without diploma-partial | 79.5 | 64.3 | 69.6 | |
| Complete high school with diploma | 0.0 | 13.6 | 13.6 | |
| Complete Higher education | 7.1 | 4.5 | 6.4 | |
| Employment | | | | |
| Full time | 28.0 | 72.2 | 44.9 | |
| Part time | 0.0 | 100.0 | 9.0 | |
| Self-employed | 0.0 | 100.0 | 2.6 | |
| Unemployed | 25.0 | 75.0 | 6.4 | |
| Military service/National service | 28.6 | 71.4 | 37.2 | |
| Income | | | | |
| Much lower than average | 11.1 | 88.9 | 37.2 | |
| Below average | 20.0 | 80.0 | 39.5 | |
| Average and above | 16.7 | 83.3 | 23.3 | |
| Risk behaviors | | | | |
| Law involvement (police record) | 100.0 | 0.0 | 9.1 | |
| Alcohol abuse | | | | |
| Rarely or not at all | 22.9 | 77.1 | 60.8 | |
| Sometimes | 22.2 | 77.8 | 28.9 | |
| Often or always | 40.0 | 60.0 | 7.6 | |
| Drugs abuse | | | | $t(56) = 1.35,$ $p < 0.001$ |
| Rarely or not at all | 97.7 | 92.2 | 97.4 | |
| Sometimes | 0.0 | 2.3 | 1.3 | |
| Often or always | 7.1 | 0.0 | 1.3 | |
| Contribution to the community/ volunteering | 37.5 | 62.5 | 28.8 | |

to acquire a higher education (6.4%). Also, almost half of the young adults were serving in military service (37.2%) or working full time (44.9%), mostly earning between a below average income and a much lower than average income (76.7%).

With regards to risky behaviors after leaving care, a relatively small number of the young adults were involved with the law (9.1%) compared with their status during their stay in care (43%). However, a third reported frequent and regular use of alcohol.

Besides involvement with risky behaviors, the young adults were asked about their involvement with their community. Almost one-third reported that since leaving care they had contributed or volunteered in the community (28.8%).

Overall, the educational achievements of the young adults who reported high involvement of their parents in care were significantly better than those who reported lower parental involvement ($M = 1.93$; $SD = 0.42$; $M = 2.36$; $SD = 0.49$; $t(56) = 3.00$, $p < 0.05$). Among the group who reported lower involvement, 35.7% completed only 11 years of studies compared with 6.8% among those who reported higher parental involvement. More young adults with higher parental involvement completed their high school diplomas (13.6% versus 0.0). However, there were no significant differences between the groups in higher education.

With regards to risk behaviors, surprisingly, the young adults who reported having police records after leaving care reported higher parental involvement in care. Higher rates of these young adults reported rare or no substance abuse compared with those who reported lower parental involvement (97.7% versus 92.9%); and more young adults with lower parental involvement reported substance abuse more often than those who reported higher parental involvement in care (7.1% versus 0.0%). Overall, young adults with higher parental involvement reported significantly lower use of drugs ($M = 1.03$; $SD = 0.15$) than those with lower parental involvement ($M = 1.14$; $SD = 0.53$); $t(56) = 1.35$, $p < 0.001$).

Income was average and above among 83.3% of those with higher parental involvement compared with 16.7% of those with lower parental involvement with no significant differences. However, more young adults among the group with lower parental involvement had full-time jobs (in terms of working hours) ($M = 100\%$, $SD = 0.0$; $M = 91.92$, $SD = 18.33$) $t(31) = 2.24$, $p < 0.05$).

More young adults who reported higher parental support in care joined mandatory military service (74.4% versus 28.6). Volunteering and contributing to the community was also higher among young adults with higher parental involvement (37.5% versus 62.5%). Both, however, were not significant.

Discussion

This exploratory study describes the way young adults in Israel who left care perceive their biological parents' involvement in care and examines the correlations between their parents' involvement and their functioning in care and outcomes after emancipation. The aim is to provide us with a helpful understanding of parental contact while in care and the role parental involvement has in the status of youth in care and after their transition to adulthood.

Youth perspectives on their parents' involvement in care

The majority of the young adults thought that parents should be involved with their children's lives while in care to various degrees of contact. Most of them (60%) thought that parents should be very or very much involved, or moderately

involved (26%). This finding is reinforced by earlier studies suggesting that youth in care wish to maintain some form of contact with their birth parents (Moyers et al., 2006; Sinclair et al., 2001, 2005b). Indeed, earlier studies found that despite their removal from home and possible neglect or abusive history, youth in care report being close to one or more members of their biological families, especially their mothers, grandmothers, and siblings (Collins et al., 2010; Courtney & Dworsky, 2006; Reilly, 2003; Samuels, 2008). However, in addition to these studies, this study indicates that youth not only wish to preserve closeness with their parents, but also wish for their parents to be involved in their lives while in care.

With regards to their parents' involvement by staff in reality, 76% ($n = 44$) of the youth thought their parents were involved as much as needed by staff, and almost a quarter thought that their parents' involvement by staff was low. However, most young adults thought that staff involved their parents only in special cases or when there were problems. Although a relatively small number of the young adults reported that their parents were not involved at all in their lives in care, still only a quarter of the parents were involved on a regular basis.

As the first study in Israel that examined this aspect, it might be possible that parents' involvement differs significantly between residential placements due to lack of formal policy on this matter. It would also be reasonable to say that despite the complexities of parents' involvement in care, most professional staff understand that parents' consistent visitation is an important aspect of family preservation efforts and significant for the parent-child attachment relationship (Haight et al., 2003). However, this study's finding might indicate a certain "working model" with parents, in which staff tend to involve parents only when problems occur with their children, instead of involving them with their children's routine, achievements, or progress, thus allowing them to play an integral role in their children's lives while in care.

Parents' involvement by staff is especially important among youth in care because as opposed to youth who live in the community, youth in care live away from their families and most of their parents' responsibilities are transferred to the residential placement. Also, as time passes, youth's image and perception of their parents' importance and significance can alter and that might lead to communication problems during their stay in care and after reunification with them, in addition to the relationship problems with which they might already be struggling (Buchbinder & Bareqet-Moshe, 2011). Therefore, keeping the parents involved and informed as to their children's status in care can allow them to preserve some of their parental roles and maintain their status as well as their duties as parents, both for themselves and for their children.

Parental involvement and youth functioning in care

The second goal of this study was to examine the correlation between parental involvement and youth functioning in care and outcomes after emancipation. We found that young adults who reported higher parental involvement in care

performed better at school, were less involved with the law, and reported lower rates of alcohol and drug use, compared with those with lower parental involvement. Also, the differences between the groups were significant with respect to school performance and marginally significant with regards to law involvement. However, they were not significant in the area of substance abuse. A possible reason for this insignificant result could be that the young adults were referring to their involvement in risky behaviors prior to their placement.

Sen and Broadhurst (2011) claimed that regular family contact has three key beneficial outcomes: (1) increased prospects of reunification with birth parents; (2) fewer placements; and (3) enhancing children's emotional, behavioral, and intellectual development. The present study supports the third outcome, indicating that parental involvement in care benefits youth's school achievements. Although not tested in this study, it is possible that parents' involvement was also correlated with youth's emotional status, since in many cases with at-risk youth, school achievements are linked with improved emotional and behavioral status. The connection between parental involvement in care and their children's adjustment was also evident in earlier studies that found that parents' contact with their children in care was positively correlated with better well-being, emotional and behavioral status (Cantos, Gries, & Slis, 1997), and reunification (Davis, Landsverk, Newton, & Ganger, 1996). In addition, an evaluation study of a program in Israel that was designed to improve parent-child relations through parents' workshops, "family days," and children-parent summer camp revealed that the program improved the parents' parenting skills, strengthened the connection between the staff and the parents, and decreased the children's behavioral problems (Grupper & Mero-Jaffe, 2008).

Parental involvement and youth functioning in care and after

This study's findings not only support the value of parents' involvement to youth's functioning in care, but also their role in some of the outcomes after leaving care. Care leavers' status in this study was consistent with earlier studies that examined the status of care leavers in Israel and other countries, showing that their outcomes are poor in adulthood in core areas including educational achievements, economic and employment status, and risky behaviors (Cashmore & Paxman, 2006; Courtney & Dworsky, 2006; Shimoni & Benbenishty, 2011; Stein, 2012; Sulimani-Aidan et al., 2013; Weiner & Kupermintz, 2001). Consequently, more studies began to focus on the factors that could contribute to their resilience and successful transition to adulthood, indicating family support as one of the most important factors in care leavers' outcomes (Collins et al., 2008). This study's findings add to the previous studies, suggesting that parents' involvement in care by staff has a significant impact on the youth's outcomes in educational achievement and involvement in risky behaviors. For example, another finding showed that young adults' income with lower parental involvement was five times lower than those who reported higher parental involvement. This might indicate that the

young adults with lower parental involvement in care were also less supported by their parents after leaving care.

Parental support was established in many earlier studies as one of the most important factors influencing care leavers' successful adjustment after the transition to independent living (Cashmore & Paxman, 2006; Collins et al., 2008; Daining & DePanfilis, 2007; Reilly, 2003; Sulimani-Aidan et al., 2013; Wade, 2008). Although this study focused only on the general parental involvement by staff and not on the quality of their contact as manifested by parents' social support, still the findings support the connection between parents' contact with youth in care and their outcomes in care and after. Therefore, it is likely that parents' involvement in care could be a central component on the way to strengthening parent-child relationships and increasing the parents' support during care and after.

Several explanations might account for this trend: first, it is possible that contact with parents in care benefits the youth while they are separated from their families and familiar environments, especially in the first period of their removal from home, and allows them to adjust gradually to this overwhelming transition. Second, as discussed earlier with regards to the attachment theory (Bowlby, 1988; Hess & Proch, 1988; McWey, 2000), parent-child contact can be maintained, strengthened, and improved due to the transition to a safe environment and the compensating relationships with other adult figures. These adults build trust with the youth, while the secure surroundings might allow them to rehabilitate their relationships with their parents and make them more positive and supportive. Enabling youth the opportunity to repair these attachment relationships with their parents while they are in care could strengthen their resilience. Third, parents who are more involved in care possibly receive more support and guidance from caseworkers concerning their parenting skills. Finally, parents who are involved by staff on a regular basis and not only when problems occur are able to learn more about their child's interests and strengths and provide additional feedback and positive support. Also, the formation of closer and more positive relationships with their parents in care possibly allows youth to rely on them more after leaving care, when they are more vulnerable and lose many of their social network ties (Wade, 2008). All these reasons for engaging parents in the lives of youth in care could eventually allow them to resolve issues of loss and trauma (Scott, O'Neill, & Minge, 2005), strengthen their relationships, and allow parents to be more supportive of the youth in care and after.

It is important to note, however, that parents' involvement in care was positively associated with some of the outcomes but not with others. This finding is consistent with the mixed results found in the literature regarding parent-child relationships in care, showing that in some cases parental visitations in care may be emotionally distressing (Moyers et al., 2006), or lead to emotional and behavioral problems (Fanshel, Finch, & Grundy, 1990), rather than positive outcomes. These controversial results might indicate that in some cases parents' involvement should be mediated and supported by staff to some degree.

Implications for practice

In light of the gap between youth's desire for their parents' involvement and their involvement in reality by staff, the first conclusion of this article is that residential placements should seek to engage parents more often in their children's lives in care. Assuming the complexity and diversity of parents' visitations, caseworkers should be offered proper training and more professional tools in order to work successfully with the challenging parent-child dyad in addition to working with youth. The gap in parents' involvement could also point to staff's attitudes toward biological parents. It is possible that parents are viewed by staff as inadequate and as possessing few if any strengths (Minuchin, Colapinto, & Minuchin, 2007). Therefore, it is important to learn more about staff's perspectives and concerns regarding the involvement of parents, while highlighting the benefits of their involvement to the youth's functioning. This should also include changing their perspectives to seeing parents as partners and as a valuable resource, and focusing on their strengths instead of emphasizing their weaknesses.

This study indicates that parents' involvement could benefit youth's functioning in care and outcomes in adulthood. Although more research is needed in this area, it is important to view parents as an integral part of the youth's intervention plan.

Limitations and future studies

This study is an attempt to better understand the involvement of parents in their children's lives in care and the possible benefits of their involvement. As an exploratory study, it suffers from several limitations that should be indicated. First, a relatively small number of participants were interviewed in one network residential placement (nonrandom sample) regarding their retrospective perceptions on their parents' involvement while in care. Thus, generalizations to other out-of-home settings are limited. Second, the study focused on a specific aspect of parent-child connection in care. Future studies could expand our understanding of parents' involvement by examining it from different perspectives such as the types of their involvement, the reasons for which parents are involved, or the quality of their contact with their children in care. In addition, although some correlations were found between parents' involvement and youth's outcomes, the study was limited in its ability to perform more sophisticated analyses or control other variables that might impact or mediate parents' involvement. Therefore, the contribution of parental involvement to youth's lives in care needs further examination (Cusick et al., 2012). Finally, care leavers' psychological distress and well-being was not examined, even though it is an important aspect of functioning in adulthood (Rutter, 2000; Weiner & Kupermintz, 2001).

Ethics

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