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Decreasing risk factors for later alcohol use and antisocial behaviors in children in foster care by increasing early promotive factors



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ABSTRACT

Children in foster care are at high risk for poor psychosocial outcomes, including school failure, alcohol and other substance abuse, and criminal behaviors. Promoting healthy development by increasing broad-impact positive skills may help reduce some of the risk factors for longer-term negative outcomes. School readiness has been linked to a number of positive outcomes across childhood, adolescence, and adulthood, and may also boost intermediary positive skills such as self-competence. This paper presents findings from a longitudinal study involving 192 children in foster care who were 5 years old at the start of the study. They participated in a randomized controlled trial of a school readiness program to prepare them for kindergarten. Outcomes were assessed at third grade (9 years old) on variables associated with risk for later involvement in substance use and delinquency. These included positive attitudes towards alcohol use, positive attitudes towards antisocial behaviors, and involvement with deviant peers. Results showed that the intervention decreased positive attitudes towards alcohol use and antisocial behaviors. Further, the mediating role of children's self-competence was tested. The intervention positively influenced children's third-grade self-competence, which in turn, decreased their involvement with deviant peers. Findings suggest that promoting school readiness in children in foster care can have far-reaching, positive effects and that increased self-competence may be a mechanism for reducing risk.

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1. Introduction

Youth with a history of involvement in the child welfare system are at risk for a number of negative outcomes across their development. As children, they are more likely to have difficulties controlling their own behaviors, making friends, and succeeding in school (Leve, Fisher, & DeGarmo, 2007; Loman et al., 2013; McDermott, Westerlund, Zeanah, Nelson, & Fox, 2012). Consequently, they are more likely to engage in a number of risk behaviors during adolescence and adulthood including alcohol and other substance use and abuse, delinquency, and criminal involvement (Aarons, Brown, Hough, Garland, & Wood, 2001; Pilowsky & Wu, 2006). Such behaviors place the next generation at risk, as youth with a history of foster care are also likely to have children at younger ages (Dworsky & Courtney, 2010), increasing the odds that their offspring will become involved in the child welfare system. Thus, preventing negative outcomes in youth in foster care may have multigenerational consequences.

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1.1. Early intervention to promote positive development

Decades of research have shown that the roots of negative long-term outcomes lie in childhood experiences and that the risks for negative trajectories accumulate over time (Dodge, Greenberg, Malone, & The Conduct Problems Prevention Research Group, 2008). For example, a child who is maltreated and removed from their biological home may show deficits in attention and behavior that lead to early problems in learning and with peers. Such problems might interfere with academic achievement and lead to rejection by prosocial peers in elementary school. This in turn puts the child at risk for association with deviant peers in middle school, which cascades into risks for involvement in substance abuse, risky sexual behaviors, and delinquency in high school. For children in foster care in particular, the earlier the start of adverse events, the more severe the potential damage if steps to intervene are not taken (Loman et al., 2013).

Selecting the most efficient points of involvement is key to early intervention (Bartik, 2014). Programs that target particular behavioral or skill deficits might help to reduce those difficulties. However, by their nature, targeted programs address only specific issues, which may limit their utility for an entire group or population. Rather than taking a problem-focused approach, promoting skills that may help children to become resilient in the face of adversity may protect vulnerable

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children from negative long-term outcomes. Strengthening positive skills and behaviors early in development can have what Spoth, Guyll, and Shin (2009) refer to as a "shielding effect" by preventing risks for becoming exposed to or involved in later negative behaviors. Such programs may also be more accessible to children in foster care and their foster caregivers, who already face stigma for their involvement with the child welfare system and thus might avoid problem-focused programs for fear of further stigmatization (Blythe, Jackson, Halcomb, & Wilkes, 2012; Farmer, Selwyn, & Meakings, 2013).

One promising target for early skill-promoting interventions that can have comprehensive and long-lasting positive effects for children is school readiness. Children who begin school with the behavioral, social, and early academic skills necessary for long-term positive school adjustment have better behavioral and educational trajectories than their less prepared peers (McClelland, Acock, Piccinin, Rhea, & Stallings, 2013; Ramey & Ramey, 2004). In turn, positive school adjustment protects children against a number of risk behaviors such as criminal involvement, substance use, and early parenthood (Campbell et al., 2014; Reynolds, Temple, Ou, Arteaga, & White, 2011). For children in foster care in particular, higher educational attainment appears to confer greater benefits than for youth in the general population (Okpych & Courtney, 2014), and having a high school diploma may decrease the likelihood of arrests for foster care alumni, especially women (Lee, Courtney, & Tajima, 2014).

The three central components of school readiness (early literacy, prosocial skills, and self-regulation) have all been linked to better long-term adjustment for children. Early literacy skills positively predict later reading and math outcomes across elementary and middle school (Duncan et al., 2007). Children who read proficiently by Grade 3 are more likely to graduate from high school (Hernandez, 2012). Conversely, poor reading ability has been linked to behavioral difficulties at school (Halonen, Aunola, Ahonen, & Nurmi, 2006; McIntosh, Reinke, Kelm, & Sadler, 2013). Prosocial skills are also key to school readiness, and individuals who show greater prosocial skills at school entry are more likely to graduate from high school, complete college, and obtain full and stable employment in young adulthood (Jones, Greenberg, & Crowley, 2015). Further, higher levels of prosocial skills in kindergarten predict lower rates of being on medication for emotional or behavioral issues in high school, and of being arrested or binge drinking in young adulthood (Jones et al., 2015). Finally, self-regulation, or children's abilities to voluntarily regulate emotions and behaviors in different situations to prevent themselves from disrupting academic performance and social relationships, are fundamental to learning both early literacy and prosocial skills (Brock, Rimm-Kaufman, Nathanson, & Grimm, 2009; Graziano, Reavis, Keane, & Calkins, 2007). In the long term, selfregulation predicts a number of positive outcomes. For example, higher self-regulation prior to school entry is associated with a higher likelihood of completing college in young adulthood (Casey et al., 2011; McClelland et al., 2013). Conversely, poor self-regulation in childhood is predictive of a higher likelihood of adverse long-term outcomes such as drug use (Ayduk et al., 2000).

Notably, early school readiness may increase other positive skills that in turn promote better outcomes. One such corollary of early school readiness is self-competence. Confidence in one's own abilities has been linked to lower rates of delinquency and substance use in adolescents (Barry, Grafeman, Adler, & Pickard, 2007; Church et al., 2012; Veselska et al., 2009; Wheeler, 2010). Additionally, higher self-competence can protect at-risk youths from becoming involved with deviant peers, leading to decreases in such associations across time (Stepp, Pardini, Loeber, & Morris, 2011). For children in foster care in particular, self-competence appears to have promotive effects, contributing to positive academic and employment outcomes, peer relations, and relationships with adults (Drapeau, Saint-Jacques, Lépine, Bégin, & Bernard, 2007; Legault, Anawati, & Flynn, 2006).

Based on prior findings that early achievement is positively associated with later self-competence (Chapman & Tunmer, 1997; Guay, Marsh,

& Boivin, 2003), interventions to increase school readiness might also be expected to promote self-competence. Children who understand the expectations of the school environment and can meet those expectations are likely to have higher feelings of competence in general. In fact, for older children, self-competence mediates the association between lower academic achievement in early grades and increased externalizing behavior in later grades (Zimmermann, Schütte, Taskinen, & Köller, 2013). Thus, it might be a link in the association between improving school readiness and decreasing risky behavior for children in foster care.

1.2. Early risk factors for alcohol and other substance use, antisocial behavior, and deviant peer association

Early intervention is particularly important in preventing some of the most common negative outcomes for children in foster care because the roots of these problems lie in early development. Although young children might not directly display substance use and antisocial behavior, their early attitudes and beliefs may place them at risk for later involvement in these behaviors (Andrews, Hampson, Barckley, Gerrard, & Gibbons, 2008). Thus, early interventions to promote positive skills that impact these early norms and attitudes could reduce the long-term risks for developing these behaviors during adolescence and adulthood.

For example, alcohol seems to be the most commonly used and abused substance for youth in foster care (Aarons et al., 2001; Keller, Salazar, & Courtney, 2010). More positive subjective norms about alcohol use in childhood (e.g., believing in wider use among peers) predict greater willingness and intention to use alcohol (Andrews, Tildesley, Hops, Duncan, & Severson, 2003; Nargiso, Friend, & Florin, 2013) and higher actual use in middle and high school (Andrews et al., 2008). Children in foster care might be at particularly high risk for developing positive norms about alcohol and other drug use (Haight, Ostler, Black, Sheridan, & Kingery, 2007) because they frequently have been exposed to substance use in their home environments (Young, Boles, & Otero, 2007).

Similarly, early positive attitudes towards and overestimates about how many of their peers are engaging in antisocial behaviors (e.g., stealing) can influence the likelihood that children will later engage in these behaviors (Dishion, Spracklen, Andrews, & Patterson, 1996; Jacobs & Johnston, 2005). Overestimation and endorsement of antisocial behavior may be expressed in deviant peer talk, which predicts escalation of antisocial behavior in both childhood (Snyder et al., 2005) and adolescence (Dishion et al., 1996). Children who have been placed in foster care may be at greater risk for forming such positive attitudes towards antisocial behaviors because they have been exposed to criminal activities and behavior in their biological families (Haight et al., 2007). This is borne out in their higher risk for engaging in antisocial behaviors at early ages (Courtney & Dworksy, 2006), leading to higher rates of delinquency in adolescence and engagement with the criminal justice system in adulthood.

Another well-documented early marker for later negative outcomes is association with peers who are engaged in antisocial behavior (see Dishion & Tipsord, 2011 for a review). The contagion of disruptive and antisocial behavior from one peer to another begins in early childhood (Hanish, Martin, Fabes, Leonard, & Herzog, 2005; Snyder et al., 2005) and continues through adolescence (Dishion, Véronneau, & Myers, 2010; Dodge et al., 2008). Children in foster care are no exception to the general trend; association with deviant peers predicts increased substance use, delinquency, and risky sexual behaviors in children in the child welfare system and those aging out of the foster care system (Leslie et al., 2010; Shook, Vaughan, Litschge, Kolivoski, & Schelbe, 2009; Thompson & Auslander, 2007).

Overall, children in foster care are much more likely than their peers to become involved in a number of negative behaviors in adolescence and adulthood (Courtney & Dworksy, 2006; Keller et al., 2010). Given

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