



Outcome of the solution-focused self-efficacy enhancement group intervention for adolescents in foster care setting

Viktorija Cepukienė^{a,*}, Rytis Pakrošnis^a, Ginte Ulinskaite^b

^a Department of Psychology, Vytautas Magnus University, Jonavos st., 66-329 Kaunas, Lithuania

^b Day center of Ruklos Jono Stanislauskos school, Laumes st. 8, Rukla, Jonavos, Lithuania

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ABSTRACT

Previous research data suggest that the interventions based on solution-focused approach have a potential to increase adolescents' self-efficacy. Nevertheless, no research has attempted to study the impact of the solution-focused interventions on self-efficacy in foster care settings, where a substantial level of this personality characteristic is crucial for successful adjustment. Moreover, there is a lack of evidence that an increase of foster care adolescents' self-efficacy during psychological interventions relates to better outcomes in their broader psychosocial functioning. A present study is aimed at evaluating changes of foster care adolescents' self-efficacy and psychological functioning during the solution-focused self-efficacy enhancement group intervention for adolescents. In addition, the question is raised whether the anticipated increase in self-efficacy will be related to positive changes in psychological functioning after the intervention.

The study, conducted at three foster care homes in Lithuania, was a quasi-experimental non-randomized real-life practice intervention trial with an intervention (n = 29) and control (n = 29) groups. The Intervention consisted of 3 weekly sessions unified by a common narrative of the train journey towards a higher self-efficacy. Self-Efficacy Scale and Adolescent Psychological Functioning Questionnaire were applied to measure the outcome of the Intervention. Results revealed that participants of the intervention group reported a significant increase in the general self-efficacy with a large effect size as compared to the control group. However, the Intervention had no significant effect on the social self-efficacy. In addition, the relationships between the participation in the Intervention and the improvement in two areas of psychological functioning of foster care adolescents were mediated by the positive change in the general self-efficacy.

1. Introduction

Research data on mental health and psychosocial functioning of adolescents in foster care collected in different countries throughout many decades do not leave any doubts: adolescents in foster care usually experience many adversities and problems as compared to those living with their biological families. They suffer from emotional and behavior problems, low self-esteem and self-efficacy, experience lack of bonding, feature low academic achievements and even various mental health disorders (Farineau, Wojciak, & McWey, 2013; Stoner, Leon, & Huller, 2015) due to different hurtful negative experiences, such as neglect, exposure to family violence, psychological, sexual and physical abuse, loss of family bounds, negative experiences of growing up in foster care, multiple foster home placements, etc. (Stoner et al., 2015; Woods, Farineau, & McWey, 2012).

Nevertheless, even though psychosocial services and special programs, usually focused on fighting risk factors and problems of foster

care adolescents, have been offered for decades, the number of foster care adolescents experiencing mental health problems is still high (Stoner et al., 2015). Therefore, recently in the light of the positive development theory, the necessity of nurturing protective factors for foster care adolescents, such as their resilience, instead of fighting risk factors or negative mental health outcomes, has been emphasized (Rodriguez & Loos-Sant'Ana, 2015; Shpiegel, 2016). Research data shows that a stronger resilience is closely related to better psychosocial functioning outcomes among adolescents from different risk groups (Shpiegel, 2016).

Self-efficacy is an especially critical protecting attribute of resilience for foster adolescents. Studies reveal that foster care adolescents are usually characterized by a low self-efficacy which is much lower than in the general population, while self-efficacy is crucial for a successful functioning and positive developmental outcomes (Rodriguez & Loos-Sant'Ana, 2015; Yap & Baharudin, 2016). Self-efficacy is defined as one's beliefs about their own abilities to cope, manage and master

* Corresponding author.

E-mail addresses: viktorija.cepukiene@vdu.lt (V. Cepukienė), rytis.pakrosnis@vdu.lt (R. Pakrošnis).

different/various situations that precede developmental and change outcomes (Cramm, Strating, Roebroek, & Nieboer, 2013; Herts, Khaled, & Stanton, 2017; Rodriguez & Loos-Sant'Ana, 2015; Yap & Baharudin, 2016). As stated by Bandura (1993, p. 135) "...beliefs of personal efficacy can shape the course lives take by influencing choice of activities and environments. People avoid activities and situations they believe exceed their coping abilities. But they readily undertake challenging activities and select situations they judge themselves capable of handling." Results of different studies are quite clearly outlined, and they mostly claim that a lower self-efficacy of adolescents relates to more negative outcomes of mental health and vice versa – a higher level of self-efficacy leads to more positive outcomes and a stronger sense of wellbeing (Cramm et al., 2013; Drapeau, Saint-Jacques, Lepine, Begin, & Bernard, 2007; Herts et al., 2017; McKay, Dempster, & Byrne, 2014; Yap & Baharudin, 2016). Moreover, the theoretical background as well as a number of studies confirm that self-efficacy is not only a very important cognitive personal characteristic but can be a changeable one too (Brown et al., 2014; Herts et al., 2017; Wong, Lau, & Lee, 2012; Yap & Baharudin, 2016). It is claimed that an increase of self-efficacy levels during an intervention can lead to better outcomes in adolescents' psychosocial functioning (Brown et al., 2014; Jenkins, 2014).

Therefore, it all goes to suggest that helping foster care adolescents to increase their self-efficacy could make a huge impact on the foster care system as such interventions "...may enhance multiple areas of the previously traumatized child's successful adaptation and functioning, and store up strengths for adult life" (Schofield & Beek, 2005, p. 1298). There has been little focus switched on searching for useful interventions aimed at increasing levels of self-efficacy for foster care adolescents in terms of published attempts so far. However, a qualitative study of Nsonwu, Dennison, and Long (2015) reveals that adolescents transiting from foster care system to adulthood benefit from a long-term intervention program Foster Care Chronicles aimed at increasing adolescents' self-efficacy through creative activities based on narrative and drama therapies. Authors have noticed that creative techniques aimed at adolescents' self-reflection and a group-format of the intervention fostered a deeper sense of self, connectedness and bonding leading to a higher self-efficacy and, as a result, to even a broader experience of empowerment (Nsonwu et al., 2015). Authors studying interventions for the enhancement of adolescents' self-efficacy in other than foster care risk groups have reported promising results for the Calm (Co-ordinated Anxiety Learning and Management) program based on a cognitive behavioral therapy for adolescents with multiple anxiety disorders (Brown et al., 2014), a school-based leadership program aimed at increasing students' learning capabilities, self-esteem and self-efficacy (Wong et al., 2012), an intervention for adolescents with chronic conditions aimed at increasing their general self-efficacy and disease management self-efficacy (Cramm et al., 2013; Herts et al., 2017). All these studies support the idea that self-efficacy is an important agent in helping risk group adolescents to strive for better developmental outcomes and well-being. It also encourages the search for self-efficacy enhancement interventions leading as a result to a better psychosocial functioning among foster care adolescents.

A literature review by Marks, Allegrante, and Lorig (2005) suggested that self-efficacy can be increased by strategies such as skills mastery, goal setting, modeling, homework, involving significant others, encouragement, and small-group interventions. Similar strategies are an important part of interventions based on the solution-focused brief therapy (SFBT), a postmodern therapy model rooted in the research on effective elements of psychotherapy and based on the constructivist and systemic thinking (de Shazer et al., 2007). When participating in interventions based on the SFBT, clients choose personally meaningful goals, explore their strengths, resources and successes, plan and implement actions, receive encouragement and social support in order to achieve their goals (Cepukiene & Pakrosnis, 2011; Kvarme et al., 2010). Single studies, systemic literature reviews and meta-analyses confirm that the SFBT is effective when working with

children and youth in school, foster care and other settings, and makes a positive influence for their mental health (Cepukiene & Pakrosnis, 2011; Gingerich & Peterson, 2013; Kim & Franklin, 2009; Koob & Love, 2010).

Key components of the SFBT which foster changes of a client are believed to be communication processes that change perceptions through co-constructive language, combined with collaborative goal setting and the use of solution-building techniques (Kim & Franklin, 2009). In addition, while focusing conversations and therapeutic processes on goals, successes, resources, actions and changes, the solution-focused approach is aimed at facilitating clients' disengagement from problem-focused thinking and breaking cycles of rumination that often keep clients focused on weaknesses and deficits. Furthermore, actively working on developing solutions in the pursuit of personally valued goals is likely to increase self-efficacy, resilience and psychological flexibility (Grant et al., 2012).

Supporting these theoretical assumptions, a number of the SFBT process studies (for the extensive review see McKeel, 2012) has shown that SFBT therapists and the atmosphere are perceived by clients as rather collaborative, empowering, supportive and acknowledging their skills and achievements (McKeel, 2012) while some qualitative research provided direct proof that the sense of self-efficacy develops or is reinforced during SFBT sessions (Beyebach et al., 2000; Lloyd & Dallos, 2008).

The literature analysis allowed allocating five studies where self-efficacy was considered as an outcome measure of solution-focused group-work with children and adolescents. A study by Viner, Christie, Taylor, and Hey (2003) revealed a significant increase of the diabetes related self-efficacy after 6 SFBT and Motivational Interviewing group sessions among 11–17-year-old diabetic adolescents. The study by Baratian et al. (2016) suggested that participation in 6 SFBT group sessions resulted in a significant increase in self-efficacy among female high school students comparing to a no intervention control group. Kvarme et al. (2010) conducted a large-scale study where a standardized solution-focused group intervention (the "Reteaming" program by B. Furman) was applied by trained school nurses in primary schools for socially withdrawn 12–13-year adolescents. After 6 weekly group sessions the general self-efficacy scores increased significantly among girls in the experimental group compared to those of the control group. The study of Sarvi and Ghazi (2016) revealed that self-efficacy of fifth grade primary school female students increased significantly after 5 sessions of solution-focused group counseling comparing to the control group with no intervention. Results from the study of Dastbaz, Younesi, Moradi, and Ebrahimi (2014) indicated that self-efficacy and adjustment of high school male students increased after 8 sessions of the solution-focused group counseling comparing to the control group with no intervention. Besides, the meta-analysis revealed that SFBT group interventions demonstrated a large effect size ($ES = 1.03$) for self-efficacy among elementary school children (Park, 2014).

All above-mentioned data suggest that the SFBT, especially on the group mode, has a potential to increase adolescents' self-efficacy. Nevertheless, no research has attempted to study the impact of solution-focused interventions on self-efficacy in foster care settings so far, where a substantial level of this personal quality, as mentioned earlier, is crucial for successful adjustment and positive developmental outcome especially. Moreover, even though a high self-efficacy is beneficial for the foster care adolescents functioning, there is a lack of evidence that an increase of foster care adolescents' self-efficacy during psychological interventions relates to better outcomes in their broader psychosocial functioning. Thus, this study is aimed at evaluating changes of foster care adolescents' self-efficacy and psychological functioning during the solution-focused self-efficacy enhancement group intervention for adolescents. In addition, the question is raised whether the anticipated increase in self-efficacy will be related to positive changes in psychological functioning after the intervention.

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