

**Relational Bonds regarding Professional Parents and Birthparents:
Perspective of Adolescents in Family Treatment Homes**

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Abstract (ENG)

Relational bonds between out-of-home placed adolescents and their professional parent(s) (i.e. PP) and their birthparent(s) (i.e. BP) might play a role in the occurrence of *breakdowns* (i.e. unscheduled, disrupted placements). In this study, the perspective of adolescents regarding their relational bond with PP and BP is examined and put to practical recommendations for PP and BP. Following the principles of Empirical Phenomenology, transcriptions of in-depth interviews with 19 adolescents were analyzed first. The results formed the base of vignette-based interviews with 7 adolescents. Results of in-depth interviews indicate four different situational patterns in which adolescents show different relational utterances with both PP and BP; (A) PP and BP positive, (B) PP positive, BP ambivalent, (C) PP ambivalent, BP positive, and (D) PP and BP ambivalent. Results of vignette-based interviews indicate different recommendations associated with these different situational patterns. This study describes that, in order to achieve the situation in which both relationships are positive, specific tasks have to be fulfilled by either PP or BP. The acceptance of a placement by BP in an early stage and the supportive attitude of PP during all stages of a placement are of key relevance in a long-term placement in a FTH.

Keywords: placement breakdown, relational attachments, loyalty issues, caregivers, adolescents.

Abstract (NL)

Wanneer er spanning is in de relatie tussen uithuisgeplaatste jongeren en hun gezinshuisouders (GHO) en/of biologische ouders (BO) kan dit *breakdowns* veroorzaken (i.e. ongeplande, onderbroken plaatsingen). In deze studie zijn de relationele uitingen van jongeren over hun GHO en BO onderzocht en vertaald naar praktische aanbevelingen voor GHO en BO. Transcripties van diepte-interviews met 19 adolescenten zijn eerst geanalyseerd, gebaseerd op de principes van de Empirische Fenomenologie. De resultaten vormden de basis voor de vignetten-interviews met nog

eens 7 adolescenten. Resultaten van de diepte-interviews tonen vier verschillende patronen in de in relationele uitingen aangaande zowel GHO als BO; (A) GHO en BO positief, (B) GHO positief, BO ambivalent, (C) GHO ambivalent, BO positief, en (D) GHO en BO ambivalent. Resultaten van de vignette-interviews vormen verschillende aanbevelingen voor de verschillende situationele patronen. Deze studie beschrijft dat, om de situatie te bereiken waarin beide relaties positief worden ervaren, er specifieke taken volbracht moeten worden door GHO of BO. De acceptatie van de plaatsing door BO in een vroeg stadium en een ondersteunde attitude door GHO gedurende alle stadia van de plaatsing zijn van hoognodige relevantie voor een langdurige plaatsing in een gezinshuis.

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Introduction

Problem statement

Between 2014 and 2016 the prevalence of adolescents growing up in family-treatment-homes has been increased by 50 percent (from 1.728 to 2594) (Wunderink, 2017). These are adolescents who, due to several reasons, can't live with their birthparent(s) and now live in one of the 764 family-treatment-homes (i.e. FTH) across The Netherlands (i.e. *out-of-home placed adolescents*). The aim of placement inside a FTH is *permanency* (i.e. an uninterrupted, long-term placement), which contributes to the development and wellbeing of the adolescent (Moran, McGregor & Devany, 2017). However, this permanency is regularly disrupted by unscheduled placements out of the FTH (i.e. breakdowns), due to escalating problem behaviors of the adolescent (Sallnäs, Vinnerljung & Kyhle Westermark, 2004). Conflicts between adolescents and their birthparent(s) (i.e. BP) and/or the family-treatment-home parent(s) (i.e. professional parent(s); PP) play a role in the occurrence of breakdowns (Andersson, 2009).

Family-treatment-home care. In The Netherlands, municipalities are obligated by law to place out-of-home children into other types of family like settings, like foster care or, regarding this study, FTH care (Jeugdwet, Artikel 2.3.6). FTH care is a specialized juvenile care in which youth (between 0-24, M = age 12) are being admitted into a small-scale resident of PP with one or more other out-of-home children (Wunderink, 2017). An average of three - four out-of-home children live in FTH in which it is often seen (60%) that these homes also include the children of the PP (Meuwissen, 2011). Within a FTH, at least one educated PP provides care, education and guidance on a professional manner to out-of-home children 24/7 a day, in which minimal one parent receives a salary or payment for their services as PP (Wunderink, 2017). Professional parenting means the conscious and specific use of parenting skills, to react in a sensitive and responsive way to promote the development and to reduce and stabilize the problems of out-of-

home children (Van der Steege & de Vries, 2013). It is often seen that youth in FTH, in comparison with foster care and residential care, show more attachment related problems, severe behavioral problems, attend special education, have a history of sexual abuse and have a large history of placements in foster and residential care (+/- 5 years) before they were able to get a FTH placement (Leloux-Opmeer, Kuiper & Scholte, 2015). Placement duration has an average of 2.7 years (Meuwissen, 2011). Research regarding FTH is still in an early stage and for that reason this study also includes empirical literature regarding foster care and foster parents (i.e. FP) by assuming that foster care and FTH care are similar in context (Leloux-Opmeer et al., 2015). The wellbeing and coping of the adolescent, as well as the need for further development are all influenced by a stable and sustainable placement, which is provided by the attention and support of PP (Hermanns, 2005; Moran et al., 2017).

Breakdown. Not all out-of-home children are able to experience and receive an uninterrupted placement. 65% of the PP state that they have experienced a breakdown (Gardeniers & De Vries, 2012). Van Oijen (2010) showed that 45.7% of the placements in foster care ended due to a breakdown within eighteen months. Unfortunately, accurate numbers of breakdown prevalence within FTH in The Netherlands are still missing. In this study, a breakdown is defined as a situation in which any of the parties involved initiates a premature termination of care (Sallnäs, et al., 2004). Risk factors for the occurrence of a breakdown amongst out-of-home adolescents are the presence of antisocial behavior and/or mental health problems (Sallnäs et al., 2004), a long history of residential care and previous placements, an older age at placement (Oosterman, Schuengel, Slot, Bullens & Doreleijers, 2007) and BP whom do not support the placement (Van der Vliet, 2017). Most commonly, a combination of these risk factors are associated with a breakdown (van der Vliet, 2013). The reduction of the amount of breakdowns and the increase of continuity of a placement is in the best interest of adolescents regarding attachment and wellbeing

(Juffer, 2010). A higher quality of care and the involvement of BP are protective factors to reduce breakdowns (Oosterman et al., 2007). More insights into the relational bonds between adolescents and their PP and BP may contribute to a reduction of breakdowns among adolescents in FTH.

Theoretical basis

The relation and interaction between the adolescent, PP and BP are viewed as a *family-centered approach*, in which, from an socio-ecological perspective, a partnership with and between BP and PP has a central role in the care and development of the child (Geurts, Boddy, Noom & Knorth, 2012). Several theories are presented in order to show the underlying mechanisms in the occurrence of a breakdown. Based on the *attachment theory* (Bowlby, 1969/1997; 1973/1998; 1980/1998), a child is born with an inclination to form attachment bonds with a possible caretaker, in order to receive protection from this person. That is, secure attachment between a child and caretaker is needed in order to promote and support a child's need to explore and master the physical and social environments (Baker, Creegan, Quinones & Rozelle 2016, p. 178). The temporary or permanent loss of bonding to an existing attachment figure (e.g. BP) leads to distress amongst children, which can only be resolved when they are able to form new attachments with alternative caregivers (e.g. PP/FP) (Oosterman et al., 2007).

Out-of-home adolescents whom have experienced a history of maltreatment by BP even have formed attachments with these caregivers, though often insecure and disorganized (Cyr, Euser, Bakersmans-Kranenburg & van Ijzendoorn, 2010). A study by Strijker, Knorth and Knot-Dickscheit (2008) presented the relation between the presence of an attachment disorder, placement history and externalizing problems, which in combination could lead to the increased risk of a breakdown. Thus, within this family-centered approach it is difficult for abovementioned adolescents to (re)form secure attachments with BP or PP, which is likely to increase the risk of a placement breakdown.

Another theory that may substantiate a breakdown incident, is the so-called *invisible loyalties theory* (Boszormenyi-Nagy & Spark, 1973). This entails that invisible loyalties to BP make it difficult for a child to develop new attachments to other caregivers. When out-of-home adolescents are placed within foster care, they experience a source of emotional stress, not only because of the disconnection of old attachments and shaping of new ones, but also from experiencing divided loyalties due to having two sets of parents, which requires a great amount of adaptation (Baker, Mehta & Chong, 2013). Contact with BP can become a source of stress and loyalty problems when they confront the values of FP in presence of the adolescent (Chateaufneuf, Turcotte & Drapeau, 2018). Yet, evidence supports that continued, frequent involvement of BP into the lives of their children has a positive influence on their development and wellbeing (McWey, Acock & Porter, 2010). A way for PP to prevent loyalty problems is to speak in a respectful and positive way about and towards BP (Jagersma-van Dommelen, 2013). Both theories help us understand the underlying mechanisms within the family-centered approach and the occurrence of breakdowns.

Empirical basis

Keeping the family-centered approach and previous theories in mind, the perspective of the adolescent should always be taken into account. Adolescents are active agents in building a positive relationship with PP and BP, expressing their views by responding to changes in circumstances (Larkins et al., 2013). Research regarding the perspectives of adolescents on their relational bonds with their PP and BP shows that adolescents in foster care can be classified into three patterns; (1) adolescents who are confident and well-adjusted with the foster home placement and feel loved by both FP and BP, (2) adolescents who feel an insecure bonding with FP, but have strong feelings of belonging towards BP (i.e. indication of loyalty towards FP) and (3) adolescents who experience a strong membership towards FP alongside a weakened relational bond towards BP (Ellingsen,

Shemmings & Størksen, 2011). In a longitudinal study by Andersson (2009), a distinction was found between adolescents with a secure attachments towards FP and/or BP and adolescents with insecure attachments towards FP and BP. He found that adolescents with a secure attachment towards BP, also encountered support from FP in contact with BP. Adolescents with insecure attachments expressed themselves with anger and ambivalence regarding FP and BP (Andersson, 2009). Other research found that 83,3% of the maltreated youth blamed themselves for, and also minimalized, the bad behavior of BP, yet many adolescents (93.8%) felt relieved that they were placed in out-of-home care (Baker et al., 2016). This shows how complex the views of the adolescents regarding their relational bonds with FP and BP can be. Further research should indicate if similar patterns in relational bonds and needs are also present amongst adolescents in FTH.

With respect to the relationship between adolescents and FP, previous studies demonstrated that adolescents have certain expectations of FP regarding communication and rituals (Hedin, 2014; Mahat-Shamir, Davidson Arad, Shilo, Adler & Leichtentritt, 2016). Factors for the construction of a positive relationship between adolescents and FP are; good and open communication (Mahat-Shamir et al., 2016), the possibility to argue, talk about sensitive subjects with FP and having a vote within family decisions (Hedin, 2014; Hedin, Höjer & Brunnberg, 2011; Steenbakkens, Van der Steen & Grietens, 2016). Also, an open family setting by participating in various family activities (Hedin, 2014), providing warmth, structure and a sense of belonging (Hedin, Höjer & Brunnberg, 2012), and simply having kind family members that listen and support the adolescent (Hedin, 2014) contribute to quality of the relationship. Regarding the relationship between adolescents and BP, studies show that by not agreeing to the placement or having a troublesome relationship between BP and FP could lead to an increased risk of loyalty issues (Van den Bergh, Weterings & Schoenmakers, 2011; Van de Vliet, 2013). Breakdowns or difficulties are

thus often the result of an unsatisfied relationship or conflict between adolescent, FP and BP (Andersson, 2009).

Research shows that a thorough matching between adolescent, PP and BP is of importance to accomplish a stable and permanent placement and also reduces the possibility of a breakdown (van de Vliet, 2013). The relationship between FP and BP has an important influence on the bond between FP and the adolescent (Andersson, 2009; Moyers, Farmer & Lipscombe, 2005), because a positive attitude of FP facilitates the support of BP to their children (Hedin, 2014; Salas Martínez, Fuentes, Bernedo & García-Martín, 2016). Also the quality of the relationship with FP and BP depends on mutual respect, stable visitations, recognition of biological parenthood by FP and a clear assignment of BP into the life of the adolescent (De Baat, van den Bergh & de Lange, 2015). Perspectives of adolescents regarding the relational bonds within FTH have not been specifically taken into account in previous research, nor has research regarding to differences of adolescent's relational utterances towards PP and BP.

Current study

In this article, outcomes are presented of a study answering the following research question: *How do adolescents in family treatment homes view their relationship with the professional parent(s) and birthparent(s)?* To do so, in-depth interviews and vignette-based interviews with adolescents are examined answering the following questions: (1) What kind of relational utterances do adolescents generally express when talking about their PP and BP? (2) Which recommendations do adolescents have in enhancing a constructive relationship with PP and BP? It is expected that the experiences and perspectives of adolescents dependent on the quality of the relationship with BP and PP, in which it is often seen that a placement can be successful when there is a secure attachments with FP and support from BP (Oosterman et al., 2007). Contribution to the literature

field of FTH care is made by specifically examining the experiences and perspectives of the adolescent regarding their relational bonds towards PP and BP.

Methods

Design

This study has a qualitative design based on the principles of Empirical Phenomenology (Husserl & Ideas, 1962). This implies a practical application in which the central role of theory is acknowledged (Aspers, 2009). The aim of this study is to describe and improve the current practice by focusing and describing on the experience (Boeije, 2010). The design of this study allows for a triangulation approach in which a theoretical base is supplemented with an empirical base in order to come to recommendations for improvement. The flexible character allows the researcher to switch between data collection, analysis and theory in order to expand, confirm or deepen the assertions made (Boeije, 2010). The empirical study was conducted in a two-phase framework in which in-depth interviews are followed by vignette-based interviews.

Procedure

Starting data. The 20 in-depth interviews, which were used for the first part of the empirical study, are part of a larger collection of in-depth interviews which are decreased as part of a large research project 'Jouw Gezin, Mijn Zorg'. For this project 60 in-depth interviews were taken from both PP (N=20), BP (N=20) and adolescents (N=20). The focus of the interviews was on the different perspectives on cooperation between PP and BP. A first analysis of the interviews with adolescents showed that they have difficulties formulating ideas on cooperation (Van de Koot & Noordegraaf, 2018). However, adolescents do formulate their experiences with both PP and BP, which is the starting point of this current study.

In-depth interviews. In-depth interviewing is a technique in which participants are asked to tell in-depth stories of their lives as far as it relates to the subject (Mortelmans, 2007). A

theory-based sample was chosen in which associated FTH-organizations delivered the participants. Inclusion criteria comprised; (1) the placement of the adolescent must show future perspective, and (2) the adolescent should be between twelve and twenty-one years (i.e. N=19, exclusion of one adolescent). The adolescents, all of Dutch heritage, were primarily female (73%) with a mean age of 15.57 years ($SD = 2.27$). Placement duration in current FTH ranged from 9 months to 12 years ($M = 4.68$ years, $SD = 3.36$). The in-depth interviews were conducted by three different researchers. The next topics followed each other consecutively: (1) demographic variables, (2) placement duration and history, (3) relational bonds with PP and BP, (4) perspectives on cooperation between PP and BP and (5) specified situations of cooperation between PP and BP. All interviews were conducted with only the adolescent within a private room in their FTH, with a duration ranging between 30-60 minutes.

Analyses. The 19 transcriptions (i.e. participant 1-19, see Appendix I) were analyzed following the principles of thematic analyses using AtlasTi as a software tool (Braun & Clark, 2006; Guest, MacQueen, Namey, 2011). The transcriptions were divided into fragments that are of meaning to the aim of the study. These fragments were grouped, labeled and summarized by the use of codes (Boeije, 2010). Axial coding have led to the reorganization of the codes into code families and patterns (see Appendix II) (Charmaz, 2006). Theory served as an incentive for identifying the codes, themes and patterns (Patton, 2002). Aim of these qualitative analyses was to bring structure and find patterns in the expressed experiences of the adolescents with their PP and BP. Internal validity and reliability are guaranteed through a review of procedure in the analyses phase by the supervisor in order to come to the same encoding. This process of coding led towards the distribution of four situational patterns in which adolescents show differences in the combination of relational bonds towards both PP and BP.

Vignette-based interviews. The qualitative vignettes technique is best described as short stories of hypothetical characters in specified circumstances, to whose situation the interviewee is invited to elicit their perceptions, opinions, beliefs and attitudes (Barter & Reynold, 1999; Finch, 1987). The aim of using vignettes for this study was to explore different kinds of actions and occurrences in different kinds of situational contexts and to elucidate variables, in order to provide practical recommendations and to reconstruct theory (Barter & Reynolds, 1999; Charmaz, 2006). All four situational patterns are transformed into typologies that are constructed from actual experiences and pronunciations of the adolescents coming from the in-depth interviews. These vignette-based interviews were conducted with seven adolescents living in FTH who were approached as co-researchers and experts when it comes to living in a FTH (Gubrium & Holstein, 2002). A convenience sample was chosen in which seven adolescents were recruited based on their conformity to the inclusion criteria; (1) minimal age of fifteen years old (2) cognitive capabilities to look to possibly personal situations from a third perspective. Four of them already participated in the in-depth interviews, three were newly recruited. Adolescents of Dutch heritage, were primarily male (N=5) with a mean age of 16.8 years (SD = 1.64). Placement duration in current FTH ranged from 5 months to 13 years (M = 6.68, SD = 5.38). Important to note, these adolescents all resided in the same FTH.

The vignettes were incorporated into a semi-structured topic list (see Appendix III), alongside an interview tool (see Appendix IV) that includes a visual representation of the four different situational patterns of relational towards with PP and BP and a hypothetical story (i.e. vignettes) for each situation (i.e. situation A, B, C & D). The interview guide and interview tool were reviewed by other researchers for its intersubjectivity, in order to test the usability of the operationalization. The vignette-based interviews took place in a private room at one FTH, which housed all of the participants. Interview duration ranged from 33-41 minutes. Emphasis was laid

on the respondents reactions to the vignettes as if they spoke from what a third party ought to do, feel, need & wish for in the specific situation. The following topics followed each other, per situation, consecutively; (1) positives and negatives, (2) changeability of the situation, (3) positioning responsibility for changeability and (4) needs and wishes. Afterwards, all situations were compared and individually rated with a score (i.e. 1-10) for preferability.

Analyses. The seven vignette-based interviews were first carefully re-listened and transcribed by only stating quotes and fragments that answer the questions of the topic list (i.e. respondent 1-7, see Appendix V). This purpose-driven way of transcribing forced the researcher to only focus on quotes and fragments that support the aim of the study, which for this study were quotes regarding recommendations for enhancing a positive relationship with BP and PP in a hypothesized situation (Bailey, 2008; Boeije, 2010). The analysis of the fragments followed the principles of the thematic analyses (Braun & Clark, 2006; Guest et al., 2011). Next, the fragments were per interview, per situation coded, to be compared next with the other interviews, per situation (see Appendix VI) (Boeije, 2010; Charmaz, 2006). Theory served as an incentive for identifying patterns, the construction of recommendations for practice, and new theory development (Patton, 2002).

Results

In-depth interviews

Relational utterances. During in-depth interviews with nineteen adolescents there was found that they, while answering questions, speak out about the way they perceive their relationship with their PP and BP. These disclosing items, or relational utterances, in the interviews were collected for all adolescents and analyzed. This analysis showed that relational utterances of adolescents towards PP and BP differ from each other. Nineteen adolescents were categorized

following their relational utterances regarding PP and BP. Relational utterances towards PP and BP are divided into positive (i.e. strong connection towards) and/or ambivalent (i.e. contradictory feelings and attitudes towards). The distributions of adolescents' relational utterances into the different patterns are shown in Table 1.

Table 1

Adolescent relational utterances (i.e. positive or ambivalent) towards PP and BP distributed in patterns including sample size, (M) age in years, (M) placement duration in current FTH in months and Gender

<u>Situational pattern (SP)</u>	<u>N</u>	<u>(M)age</u>	<u>(M)duration in FTH</u>	<u>Female%</u>
A: PP positive – BP positive	6	14.83	19.5	100
B: PP positive – BP ambivalent	10	16.40	82	50
C: PP ambivalent – BP positive	2	14	39	0
D: PP ambivalent – BP ambivalent	1	15	24	100
Total	19	15.57	54.5	73

Next, the different patterns are separately explained and substantiated by quotes out of the in-depth interviews with adolescents.

SP-A. Characterizing for these adolescents is that they do not blame their BP for not being able to raise them in their own home. They put their BP before their PP by describing their bonds as special. BP and adolescents meet and have contact on a regular base, with weekends at home and calls or messages throughout the week. The BP are also often seen as family, but the differences lie in that PP are seen as caretakers, whereas BP are seen and called as true parents: *“They take over the tasks of a mother, so that’s the same, just, your own mom is always more important, because she is your real mother and no one can replace her”* (participant-6). The BP accomplish

this by trying to always get closer (i.e. emotionally and physically) to the adolescents, saying sweet things and doing fun activities.

SP-B. Characterizing for these adolescents is that they experience a constant emotional conflict regarding their BP. There are irregular (i.e. maximum once a month) or no contact moments with BP. These adolescents do not want to live with their BP anymore, yet find it important that BP are involved in certain aspects of their lives (i.e. special events). The FTH is experienced as a safe haven and the members of the FTH are seen as family: *“If I went somewhere, it felt like a very thick layer of protection was missing and if I’d return home it came back to me. That layer comes from PP, he offers a lot of protection and I have always liked it”* (participant-5). The PP provide stability from where the adolescent has the opportunity to personally develop.

SP-C. Characterizing for these adolescents is they have utterances mostly in favor of their BP. They prefer living with their parents over living in a FTH: *“Well, if it is up to me, they can drop me off at my mother and never come back.”* (participant-1). There is regular contact between adolescents and BP. The connection towards BP often stands in the way of building a relationship with PP. Living with PP feels as a punishment for these adolescents and there is no understanding why they are placed inside a FTH.

SP-D. Most characterizing for this adolescent is that she has conflicted emotions regarding both PP and BP: *“Yes, but it is not entirely up to me and when I’m there it sometimes goes bad and then goes [00:11:03] not just one time, than goes [00:11:09] not only because of me, that’s my mom’s so that’s [00:11:12] learned that I should stop being stubborn about my preferences to live there.”* (participant-4). Contact with PP is often for practical purposes and contact with BP is irregular.

Vignette-based interviews

Situational pattern recommendations. Next, the vignette-based interviews with seven adolescents showed that they have very aligned views when asked about the different patterns in relational bonds towards PP and BP. The focus of these perspectives lies in the attitudes and tasks adolescents, PP and BP should carry out, which were collected and analyzed. Analyses of the vignette-based interviews have shown that there was a difference per pattern distribution on how to act properly, viewed from every persona, (i.e. adolescent, PP and BP) in the given situation. Seven vignette-based interviews with adolescents answering on hypothetical situations were analyzed. First, Table 2 shows the average mark the adolescents have given to the preferability of the situation on a 10-point Likert scale.

Table 2

<i>Average mark of preferability to situational pattern, 10-point Likert scale</i>	
Mean scores per situation	
<u>Situational pattern (SP)</u>	<u>(M)Score</u>
A PP positive – BP positive	6.64
B PP positive – BP ambivalent	9.83
C PP ambivalent – BP positive	4.71
D PP ambivalent – BP ambivalent	1.29

Table 3 shows the top three advices per situation in sequence which were most often mentioned.

Table 3

<i>Top three advices given by adolescents per situation</i>
SP-A: PP positive – BP positive
1. This situation is seen as ideal for a placement within FTH and should be strived for (N=7)

-
2. PP may never abolish or reject the right to a visitation scheme to BP (N=1)
 3. Always facilitate and support the contact between adolescents and BP (N=1)
-

SP-B: PP Positive – BP ambivalent

1. The visitation scheme with BP should be on a regular base with fixed moments and clear appointments that will be honored by all (N=5)
 2. When PP notice that contact between adolescent and BP is difficult, PP should ask the adolescent about the problem and how may to help in order to enhance contact between BP and adolescent (N=4)
 3. PP should have contact with BP in order to possibly motivate contact between adolescents and BP (N=3)
-

SP-C: PP ambivalent – BP positive

1. BP should explain in a conversation with adolescent the reason for placement in FTH and why they can't take care of the adolescent (N=4)
 2. BP should agree with the transfer of care onto the PP. It involves a mental approval and insight that the adolescent can receive better care with PP (N=4)
 3. PP should focus their attention to the adolescent, to look for the possibilities in contact, try to involve them in the daily family routine, talk to the adolescent about preferences and put themselves in a vulnerable position opposite to the adolescent (N=4)
-

SP-D: PP ambivalent – BP ambivalent

1. PP should cooperate with BP and be on the same line in order to help the adolescent. PP should be initiating this contact (N=5)
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2. PP should invest in the contact with the adolescent. They should be able to adjust their attitude towards the adolescent, open to the possibilities in creating some form of connection and getting involved into important aspects of the adolescent (N=4)
 3. PP should ask for help from an external professional (N=3)
-

Next, an overview per situation with substantiating quotes will be presented.

SP-A. Within this situation, all respondents stated that this is the highest achievable in a relationship with both PP and BP: *“This situation is the goal.”* (respondent-1). Furthermore, respondents mentioned, regarding this situation (it may also be taken as a general recommendation independent of situation), that every adolescent has the right to a visitation regulation with BP independent of the wishes of PP, which should always be facilitated and supported by PP. An adolescent in this situation might be in the position to consider their own development (i.e. education and self-dependence): *“The wish is to keep developing, to do well in school and sport, to eventually become independent.”* (respondent-5).

SP-B. Within this situation, adolescents suggested that the visitations by BP should be on a regular basis with fixed moments: *“I would rather have regular contact with my parents, because a child wouldn't understand much of it if they'd have irregular contact with your parent. Or if they might think that they would go to their parents, but eventually it would be called off for some sort of reason.”* (respondent-2). This quote states that it is important that appointments must be honored by all parties. Four respondents mentioned that PP most initiate help and support in enhancing the relational bond between BP and the adolescent: *“If PP perceive that the bond between adolescent and BP is not going well, PP could ask the adolescent what's going on or what's the problem. Then you also know exactly where you can help as PP.”* (respondent-3). Three respondents mentioned

that PP should motivate BP in initiating contact with the adolescent, whilst other respondents mentioned that PP shouldn't try to involve with BP too much.

Other recommendations given were; PP should talk with respect about BP, BP should initiate contact with adolescents without pushing it too much, investment into the relationship between the adolescent and BP comes from both sides, and all parties must come together to look at wishes and compromises for all part. Furthermore, adolescents described the importance of a good relational bond with PP, because adolescents reside most of their time in a FTH where sufficient support can be given by PP. Still all respondents mentioned that any form of contact with BP is very important.

SP-C. Within this situation, four respondents suggested that BP should explain to the adolescent why they were placed within FTH: *“Those BP could talk and explain to the adolescent, it depends on the situation, those parents could certainly tell why they can't live with them anymore.”* (respondent-3). When this is difficult for BP, PP could help them. Next, four respondents stated that BP should agree to the transfer of caretaker role by PP, in order to give the adolescent the freedom to acclimate to the FTH: *“PP can be of greater meaning to adolescents if they want to live within the FTH. So, if adolescents don't want to live in FTH, they don't understand why living in FTH and only want to live with BP, I don't think that a PP could be of any meaning to these adolescents.”* (respondent-3). This quote illustrates the importance acceptance of the BP for the placement of the adolescent within a FTH. Also, PP's first priority, stated by four adolescents, is with the adolescent by initiating contact, involving them in the FTH and having an open attitude towards them.

Other recommendations given where; PP should ask BP to or either be advised by BP or try to cooperate with each other in favor of the adolescent, PP should involve BP into the life of the adolescent by informing them of activities done together, and this situation should be handled

with help from an external professional. Furthermore, adolescents describe this situation as being more difficult than a situation where the relational bonds are reversed (i.e. PP positive – BP ambivalent): *“Because adolescents spent more time with PP than BP. If your ‘living place’ feels like living in a punishment, not trusting your PP, you’d literally live within a punishment.”* (respondent-3). Importantly, it is also stated that this situation is most likely to set stage at the beginning of a placement.

SP-D. Within this situation, five respondents suggested that PP should cooperate with BP for the interest of the adolescent: *“In order to solve this situation, PP and BP should sit around the table with the adolescent, looking for what the adolescent wants and how PP and BP can meet him in his wishes.”* (respondent-3). This quote shows the importance of involving the adolescent. Four respondents recommended that PP should invest in adolescents by adjusting attitude, creating connections and involvement into their lives. Three respondents stated that this situation would be better helped with the involvement of an external professional: *“first, seeking contact with BP. Next, reaching out an external professional for help. Afterwards with all parties around the table.”* (respondent-5). This quote illustrates that the involvement of a professional should be considered as a final resort. Respondents stated that they would wish for to build a positive relationship with either PP or BP, preferably both at the same time, in order to show an open attitude towards them and building trust.

Discussion

This paper examined the experiences and perspectives of adolescents living in FTH regarding their relational bonds with their PP and BP. Analyses from the in-depth interviews showed that the differences in relational utterances amongst adolescents can be distributed into four situational patterns regarding positive or ambivalent relations towards PP and BP, in which it is considered interesting that sixteen adolescents experience a positive relationship towards PP. Next, analyses

from the vignette-based interview presented recommendations for PP and BP regarding attitude adjustments whenever a pattern is situated within a FTH. In general, most important findings illustrated that a situation is preferred where relational bonds with both PP and BP are positive, where a constructive relationship between PP and BP is present and where PP and BP both respect and accept each other's role regarding the adolescent's life. Conform these results, previous research regarding foster homes states that breakdowns occur as a result of ambivalent relational bonds between adolescent, FP and BP (Andersson, 2009).

Adolescents relational utterances towards PP and BP can be subdivided into positive and ambivalent utterances (Andersson, 2009). It is of importance to note that no adolescent expressed themselves only negatively about either PP or BP, which can be explained, forthcoming out of Bowlby's attachment theory (1969/1997; 1973/1998; 1980/1998), by need for protection and personal development by forming attachments with a possible caretaker (Baker et al., 2016). Still, when only looking at utterances towards BP, results showed that eleven adolescents experience ambivalent relationships towards them. An explanation can be found in a possible history of (sexual) abuse (Steenbakkens, Ellingsen, van der Steen & Grietens, 2017). Unfortunately, this wasn't taken into account during data collection. On the other hand, ten out of those eleven were able to form positive relations with PP, showing that it still is possible for adolescents with a troubled history to form positive and supporting relationships with other caregivers (Oosterman et al., 2007). Which raises the question of how, by whom and in what situations is that possible.

Regarding the distribution of relational utterances into situational patterns, overlap can be found in the studies of Ellingsen et al. (2011) and Andersson (2009). Although both studies used a different design (i.e. Q-methodology and longitudinal in-depth study), similarities can be seen in the distributions and overall sample size. For instance, Ellingsen et al. (2011) found three factors which show great resemblance in content to factor A, B and C of this study. Noticeably, they found

that most adolescents (N=15) in foster care had formed positive relationships towards both sets of parents, in contrast with only a mere portion of this study's sample (N=6). On the opposite, the study of Ellingsen et al. (2011) found a greater portion of the adolescents (N=10) experiencing ambivalent relational bonds towards BP and positive relational bonds towards FP, in contrast to the findings of three adolescents. Thus, adolescents in FTH seem to have more problems with remaining attached towards BP than adolescents in foster care. Previous research already focused on the differences between adolescents in foster care and FTH (Leloux-Opmeer et al., 2015), yet differences regarding their attachments towards several caregivers should be examined.

Recommendations given by the respondents differ per situational pattern. Interestingly, when looking from another perspective, it shows that each person within this family-centered approach (i.e. adolescent, PP and BP) has its own tasks regarding the construction and maintenance of positive relationships (Geurts et al., 2012). Research shows that a positive relationship with and between PP and BP is in the best interest of the child regarding a placement with perspective (Andersson, 2009; De Baat et al., 2015). Within this study positive relational bonds with both sets of parents is seen as the highest preferable, but also timewise seen as the situation which eventually will be or is strived to become. Meaning that all other situational patterns can be seen as developmental stages, in which one or more person(s) (i.e. adolescent, PP or BP) have a task which needs to be fulfilled in order to reach that stage of positive relational bonds towards PP and BP. In reality, the transition of these phases are not static as presented within this study, but are experienced as dynamic in which patterns do not always follow each other up. When looking from this perspective, it shows us which recommendations are essential in order to develop positive relationships in FTH.

So, which tasks need to be fulfilled, when and by whom in order to develop positive relations? At the beginning of a placement, adolescents often have ambivalent relations towards PP and positive relations towards BP (i.e. situational pattern C) by presumably experienced divided loyalties (Baker et al., 2013). Presented tasks mainly focus on the acceptance by BP of the placement of the adolescent and the support of PP to involve them into FTH. Van der Vliet (2013) already stated that not giving consent to the placement might leave the child in elongated loyalty issues, increasing the risk of placement breakdown (Andersson, 2009; Oosterman et al., 2007). This states the urgency of passing through this phase. Next, a change in preferred relational bonds by adolescent may take place, because a positive relationship with PP is seen as more of a necessity than positive relationships with BP when looking at the transition dynamics between situational pattern B and C. This suggests that when consent is given by BP, adolescents feel the need of stable caregiver(s) (i.e. PP) who help them regain the relational bonds with their former caregivers (i.e. BP) and helps them in their personal development (Oosterman et al., 2007). Within these transitions the overall tasks of PP are to support the adolescent in a practical and emotional way, enable contact with BP when possible and to look for the potential of change into better relational bonds with and between all involving parties (Larkins et al., 2013; McWey et al., 2010).

It is no coincidence that sixteen adolescents experienced positive relationships with PP, because the average duration of placement within this sample is four and a half year, resulting in a selection bias. Research states that a successful placement depends on the duration of a placement (Oosterman et al., 2007). Although, when looking at the average duration of placement per situational pattern, it is interesting that situational pattern A has the lowest average placement duration. Future research should take this into account by including adolescents who are recently placed within a FTH. Also, the reflective skills might not be fully developed with some of the respondents in the vignette-based interviews. The younger adolescents mentioned that it was really

hard to place themselves out of their own situation into a hypothetical one, so some results might be biased by looking at situations from their own perspective and history (Barter & Renold, 1999).

This study contributed to the rather small field of research regarding family-treatment-homes by explicitly describing the perspectives and experiences of adolescents from different angles. More insights into the differences in perceived relational bonds between adolescents and their caretakers and how to face difficulties within these relationship contributes to longer healthy placements and less breakdowns. Future research should incorporate a larger set of respondents in order to enforce the results of this study with more causality regarding differences in relational bonds. Next, a longitudinal study should be conducted, following adolescents who were recently placed within a FTH in order to examine how differences between adolescents in relational bonds towards PP and BP may develop over time. Finally, this study emphasizes the important tasks and cooperation of PP and BP, showing that more research regarding these fundamental assets within FTH should be examined.

References

- Andersson, G. (2009). Foster children: a longitudinal study of placements and family relationships. *International Journal of Social Welfare*, 18(1), 13-26.
- Aspers, P. (2009). Empirical phenomenology: A qualitative research approach (The Cologne Seminars). *Indo-Pacific Journal of Phenomenology*, 9(2), 1-12.
- Baker, A. J., Creegan, A., Quinones, A., & Rozelle, L. (2016). Foster children's views of their birth parents: A review of the literature. *Children and Youth Services Review*, 67, 177-183.
- Baker, A. J., Mehta, N., & Chong, J. (2013). Foster children caught in loyalty conflicts: Implications for mental health treatment providers. *The American Journal of Family Therapy*, 41(5), 363-375.
- Barter, C., & Renold, E. (1999). The use of vignettes in qualitative research. *Social research update*, 25(9), 1-6.
- Bailey, J. (2008). First steps in qualitative data analysis: transcribing. *Family practice*, 25(2), 127-131.
- Boeije, H. (2010). *Analysis in Qualitative Research*. Sage: London.
- Boszormenyi-Nagy, I., & Spark, G. M. (1973). *Invisible loyalties: Reciprocity in intergenerational family therapy*. Harper & Row.
- Bowlby, J. (1969/1997). *Attachment and Loss: Volume 1. Attachment*. London: Pimlico.
- Bowlby, J. (1973/1998). *Attachment and Loss: Volume 2. Separation*. London: Pimlico.
- Bowlby, J. (1980/1998). *Attachment and Loss: Volume 3. Loss*. London: Pimlico
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.

Charmaz, K. (2006). *Constructing grounded theory. A practical guide through qualitative analysis*. London: Sage

Chateaufneuf, D., Turcotte, D., & Drapeau, S. (2018). The relationship between foster care families and birth families in a child welfare context: The determining factors. *Child & Family Social Work, 23*(1), 71-79.

Cyr, C., Euser, E. M., Bakermans-Kranenburg, M. J., & Van Ijzendoorn, M. H. (2010). Attachment security and disorganization in maltreating and high-risk families: A series of meta-analyses. *Development and psychopathology, 22*(1), 87-108.

De Baat, M., Van den Bergh, P., De Lange M. (2015). *Richtlijn Pleegzorg voor jeugdhulp en jeugdbescherming*. Retrieved from http://richtlijnenjeugdhulp.nl/wp-content/uploads/2015/08/Richtlijn-Pleegzorg_Onderbouwing_Beveiligd.pdf

Ellingsen, I. T., Shemmings, D., & Størksen, I. (2011). The concept of 'family' among Norwegian adolescents in long-term foster care. *Child and Adolescent Social Work Journal, 28*(4), 301-318.

Finch, J. (1987) The Vignette Technique in Survey Research, *Sociology, 21*, pp.105-14

Gardeniers, M. & de Vries, A. (2012). *Continuïteit in gezinshuizen. Ervaring gezinshuisouders en onderzoeksgegevens verzameld*. Retrieved on: 01-02-2018, from <https://www.gezinspiratieplein.nl/publicaties/over-gezinshuizen/48-continuïteit-in-gezinshuizen/file>

Geurts, E. M., Boddy, J., Noom, M. J., & Knorth, E. J. (2012). Family-centred residential care: the new reality?. *Child & Family social work, 17*(2), 170-179.

Gubrium, J. F., & Holstein, J. A. (Eds.). (2002). *Handbook of interview research: Context and method*. Thousand Oaks: Sage.

Guest, G., MacQueen, K. M., & Namey, E. E. (2011). *Applied thematic analysis*. London: Sage.

- Hedin, L. (2014). A sense of belonging in a changeable everyday life—a follow-up study of young people in kinship, network, and traditional foster families. *Child & Family Social Work, 19*(2), 165-173.
- Hedin, L., Höjer, I., & Brunnberg, E. (2011). Settling into a new home as a teenager: About establishing social bonds in different types of foster families in Sweden. *Children and Youth Services Review, 33*(11), 2282-2289.
- Hedin, L., Höjer, I., & Brunnberg, E. (2012). Jokes and routines make everyday life a good life on 'doing family' for young people in foster care in Sweden. *European Journal of Social Work, 15*(5), 613-628.
- Hermanns, J. (2005). *Handboek jeugdzorg - deel 1 en 2*. Houten: Bohn Stafleu van Loghum.
- Husserl, E., & Ideas, A. (1962). *General Introduction to Pure Phenomenology*, trans WR Boyce Gibson. Collier: New York.
- Jagersma-Van Dommelen, M. (2013). Zicht op loyaliteit bij adolescenten. Hoe loyaliteit tot uiting komt en wat dat betekent voor de hulpverlening. In M. Noordegraaf en G. Vierwind: *Hulpverlening aan jeugd en gezin. Stysteemgericht werken met adolescenten*. Bussum: Coutinho.
- Jeugdwet, Hoofdstuk 2, Artikel 2.3.6. (2014, 01 maart). Retrieved on 31-01-2018, from <http://wetten.overheid.nl/BWBR0034925/2018-01-01#Hoofdstuk2>
- Juffer, F. (2010). Beslissingen over kinderen in problematische opvoedingssituaties. *Inzichten uit gehechtheidsonderzoek.[Deciding on children in problematic parenting situations]*. Retrieved from <https://www.politieacademie.nl/kennisenonderzoek/kennis/mediatheek/PDF/78544.pdf>
- Koot, D. & Noordegraaf, M. (2018). *Samenwerking in gezinshuizen door de ogen van jongere, ouders en gezinshuisouders*. Rapport in preparation.

Larkins, C., Ridley, J., Farrelly, N., Austerberry, H., Bilson, A., Hussein, S., ... & Stanley, N.

(2013). Children's, young people's and parents' perspectives on contact: Findings from the evaluation of social work practices. *British Journal of Social Work*, 45(1), 296-312.

Leloux-Opmeer, H., Kuiper, C., & Scholte, E. M. (2015). *Typerende kenmerken van*

uithuisgeplaatste kinderen in pleegzorg, gezinshuizen en open residentie-de startsituatie. Retrieved from

[https://consensep.nl/sites/default/files/150630%20DEF%20doelgroeprapport%20onderzoek%20uithuisplaatsing%20\(rapport%20202\).pdf](https://consensep.nl/sites/default/files/150630%20DEF%20doelgroeprapport%20onderzoek%20uithuisplaatsing%20(rapport%20202).pdf)

Mahat-Shamir, M., Davidson Arad, B., Shilo, G., Adler, R., & Leichtentritt, R. D. (2016). The

family in the view of Israeli adolescents in foster care. *Journal of Social Work*, 1468017316656092.

McWey, L. M., Acock, A., & Porter, B. E. (2010). The impact of continued contact with

biological parents upon the mental health of children in foster care. *Children and youth services review*, 32(10), 1338-1345.

Meuwissen, I. (2011). *Een landelijke sectorverkenning. Kenmerken van en opvoeding binnen*

gezinshuizen (masterthesis). Retrieved from <https://www.gezinspiratieplein.nl/lezen-weten/publicaties-per-thema/over-gezinshuizen/39-kenmerken-van-gezinshuizen/file>

Moran, L., McGregor, C., & Devaney, C. (2017). *Outcomes for Permanence and Stability for*

Children in Long-term Care. Retrieved from

http://www.tusla.ie/uploads/content/Outcomes_for_Permanance_and_stability_for_chi ldren_in_Long_Term_Care_Appendices_Digital.pdf

Mortelmans, D. (2007). *Handbook of qualitative research methods*. Acco: Leuven/Den Haag.

Moyers, S., Farmer, E., & Lipscombe, J. (2005). Contact with family members and its impact on adolescents and their foster placements. *British Journal of Social Work, 36*(4), 541-559.

Oosterman, M., Schuengel, C., Slot, N. W., Bullens, R. A., & Doreleijers, T. A. (2007). Disruptions in foster care: A review and meta-analysis. *Children and Youth Services Review, 29*(1), 53-76.

Patton, M. Q. (2002). *Qualitative Research & Evaluation Methods* (3rd ed.). Sage: Thousand Oaks.

Salas Martínez, M. D., Fuentes, M. J., Bernedo, I. M., & García-Martín, M. A. (2016). Contact visits between foster children and their birth family: The views of foster children, foster parents and social workers. *Child & Family Social Work, 21*(4), 473-483.

Sallnäs, M., Vinnerljung, B., & Kyhle Westermark, P. (2004). Breakdown of teenage placements in Swedish foster and residential care. *Child & Family Social Work, 9*(2), 141-152.

Steenbakkens, A., Ellingsen, I. T., van der Steen, S., & Grietens, H. (2017). Psychosocial Needs of Children in Foster Care and the Impact of Sexual Abuse. *Journal of Child and Family Studies, 1-12*.

Steenbakkens, A., van der Steen, S., & Grietens, H. (2016). 'To talk or not to talk?': Foster youth's experiences of sharing stories about their past and being in foster care. *Children and Youth Services Review, 71*, 2-9.

Strijker, J., Knorth, E. J., & Knot-Dickscheit, J. (2008). Placement history of foster children: A study of placement history and outcomes in long-term family foster care. *Child Welfare, 87*(5), 107.

Van den Bergh, P., Weterings, T., & Schoenmakers, M. (2011). Gehechtheid en loyaliteit bij pleegkinderen. Een analyse vanuit de theorie en de praktijk. *Tijdschrift voor*

Orthopedagogiek, Kinderpsychiatrie en Klinische Kinderpsychologie, 36, 128-143.

Van der Steege, M. & de Vries, A. (2013). *Opgroeien van langdurig uithuisgeplaatste kinderen*.

Retrieved on: 01-02-2018, from <https://www.gezinspiratieplein.nl/lezen->

[weten/publicaties-per-thema/over-de-zorgorganisaties/langdurig-opgroeien/37-](https://www.gezinspiratieplein.nl/lezen-weten/publicaties-per-thema/over-de-zorgorganisaties/langdurig-opgroeien/37-)

[kennisagenda-langdurig-opgroeien/file](https://www.gezinspiratieplein.nl/lezen-weten/publicaties-per-thema/over-de-zorgorganisaties/langdurig-opgroeien/37-kennisagenda-langdurig-opgroeien/file)

Van der Vliet, E.J.M. (2013). *Redenen van uitplaatsing van kinderen uit gezinshuizen*

(masterthesis). Retrieved from

<https://www.gezinspiratieplein.nl/publicaties/themas/over-gezinshuizen/56-redenen->

[van-uitplaatsing-van-kinderen-uit-gezinshuizen/file](https://www.gezinspiratieplein.nl/publicaties/themas/over-gezinshuizen/56-redenen-van-uitplaatsing-van-kinderen-uit-gezinshuizen/file)

Van Oijen, S. (2010) *Resultaat van pleegzorgplaatsingen: een onderzoek naar breakdown en de ontwikkeling van adolescentie pleegkinderen bij langdurige pleegzorgplaatsingen*

(Disseratie). Rijksuniversiteit Groningen, Groningen.

Wunderink, A. (2017). *Factsheet gezinshuizen 2016*. Retrieved on: 31-01-2018, from

<https://www.gezinspiratieplein.nl/lezen-weten/publicaties-per-thema/over->

[gezinshuizen/112-factsheet2016/file](https://www.gezinspiratieplein.nl/lezen-weten/publicaties-per-thema/over-gezinshuizen/112-factsheet2016/file)

Appendix I

Transcripts of nineteen in-depth interviews with adolescents

The 236 pages regarding the transcripts of 19 in-depth interviews were not included in this file due to possible problems when submitting via Safe Assignment.

Appendix II

Schematic view of code families, codes and number of quotation

Code Families

HU: INTJO JGMZ loyaliteit codering

Edited by: Super

Code Family: Overig

Codes (1): [Overig]

Quotation(s): 11

Code Family: Relational utterances birthparent

Codes (3): [Beleving relatie BP -] [Beleving relatie BP ?] [Beleving relatie BP+]

Quotation(s): 117

Code Family: Relational utterances professional parent

Codes (3): [Beleving relatie PP -] [Beleving relatie PP ?] [Beleving relatie PP +]

Quotation(s): 111

Appendix III

Topic list vignette-based interviews (NL)

Topics	Vragen:
<u>Introductie</u> Persoonsgegevens	Kun je iets over jezelf vertellen? - Hoe oud ben je? - Waar ga je naar school? - Wat zijn je hobby's?
<u>Specificaties rondom plaatsing</u>	- Hoelang woon je al in het gezinshuis? - Is dit het eerste gezinshuis? - Of heb je nog ergens anders gewoond? - Hoe oud was je toen dat gebeurde? - Hoe is het contact met je ouders? - Hoe spreek jij je gezinshuisouders aan? - Hoe spreek jij je ouders aan?
<u>Doorspreken vragen per vignetten</u> Percepties t.a.v. de situaties Attitudes ter verbetering situatie Samenwerking gezinshuisouders en ouders Wens t.a.v. de situatie	Situatie A. - Wat zijn de voor- & nadelen van de situatie? - Wat heeft deze jongere nodig om de situatie beter voor hem/haar te maken? - Van <u>wie</u> heeft de jongeren <u>wat</u> nodig om de situatie beter voor hem/haar te maken? - Wat kan de gezinshuisouder in deze situatie doen? - Wat kan een ouder in deze situatie doen? - Wat kan een jongere in deze situatie doen? - Wat kan de gezinshuisouders samen met de ouder doen in deze situatie? - Wat kan een ouder samen met de gezinshuisouders doen in deze situatie? - Waar zit de wens van de jongere in deze situatie?
<u>Doorspreken vragen per vignetten</u> Percepties t.a.v. situaties	Situatie B. - Wat zijn de voor- & nadelen van de situatie?

- Attitudes ter verbetering situatie
- Wat heeft deze jongere nodig om de situatie beter voor hem/haar te maken?
 - Van wie heeft de jongeren wat nodig om de situatie beter voor hem/haar te maken?
 - Wat kan de gezinshuisouder in deze situatie doen?
 - Wat kan een ouder in deze situatie doen?
 - Wat kan een jongere in deze situatie doen?
- Samenwerking gezinshuisouders en ouders
- Wat kan de gezinshuisouders samen met de ouder doen in deze situatie?
 - Wat kan een ouder samen met de gezinshuisouders doen in deze situatie?
- Wens t.a.v. de situatie
- Waar zit de wens van de jongere in deze situatie?

Doorspreken vragen per vignetten

Situatie C.

Percepties t.a.v. situaties

- Wat zijn de voor- & nadelen van de situatie?

Attitudes ter verbetering situatie

- Wat heeft deze jongere nodig om de situatie beter voor hem/haar te maken?
- Van wie heeft de jongeren wat nodig om de situatie beter voor hem/haar te maken?
- Wat kan de gezinshuisouder in deze situatie doen?
- Wat kan een ouder in deze situatie doen?
- Wat kan een jongere in deze situatie doen?

Samenwerking gezinshuisouders en ouders

- Wat kan de gezinshuisouders samen met de ouder doen in deze situatie?
- Wat kan een ouder samen met de gezinshuisouders doen in deze situatie?

Wens t.a.v. de situatie

- Waar zit de wens van de jongere in deze situatie?

Doorspreken vragen per vignetten

Situatie D.

Percepties t.a.v. situaties

- Wat zijn de voor- & nadelen van de situatie?

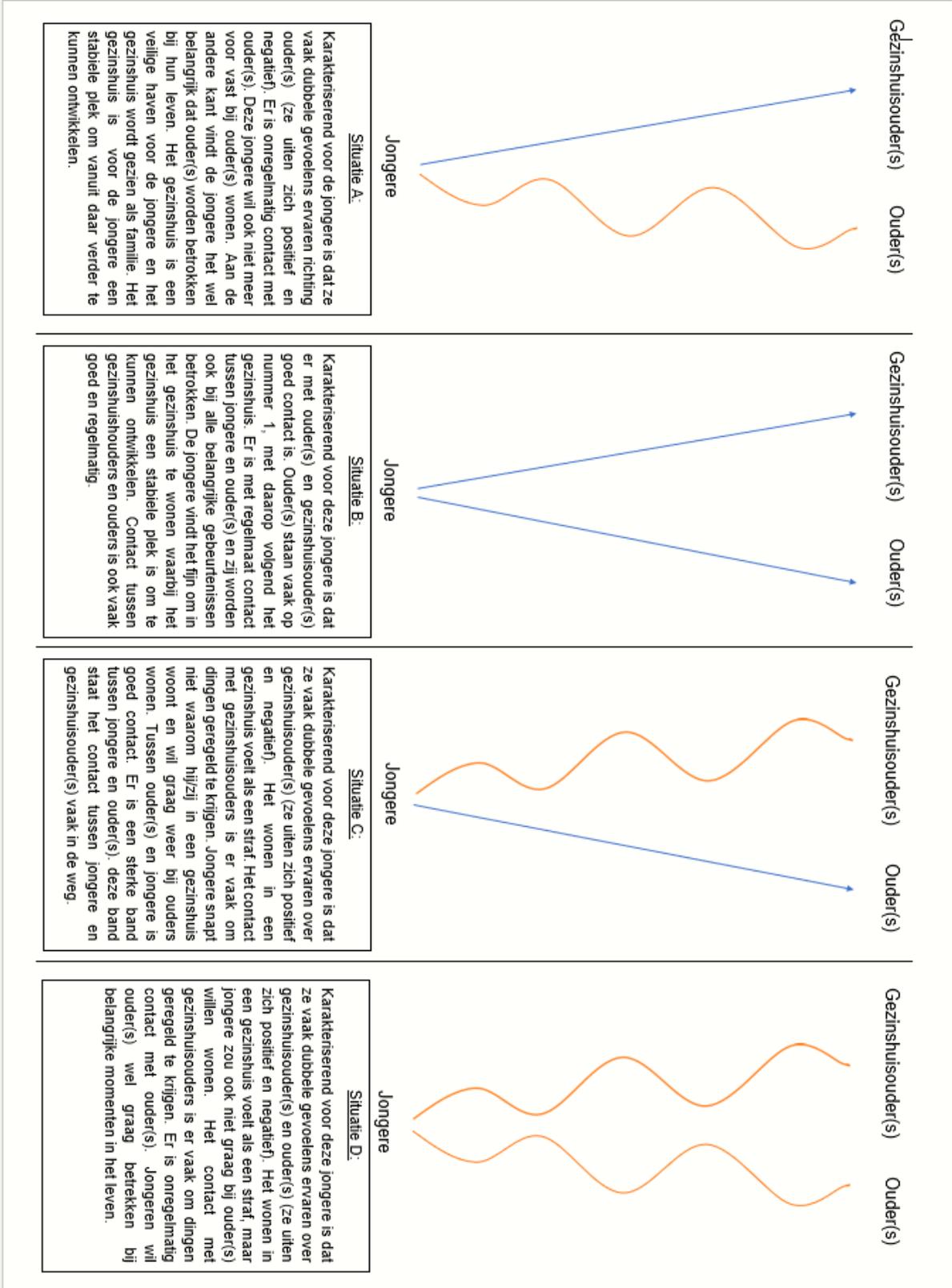
Attitudes ter verbetering situatie

- Wat heeft deze jongere nodig om de situatie beter voor hem/haar te maken?
-

Samenwerking gezinshuisouders en ouders	<ul style="list-style-type: none"> - Van <u>wie</u> heeft de jongeren <u>wat</u> nodig om de situatie beter voor hem/haar te maken? - Wat kan de gezinshuisouder in deze situatie doen? - Wat kan een ouder in deze situatie doen? - Wat kan een jongere in deze situatie doen?
Wens t.a.v. de situatie	<ul style="list-style-type: none"> - Wat kan de gezinshuisouders samen met de ouder doen in deze situatie? - Wat kan een ouder samen met de gezinshuisouders doen in deze situatie? - Waar zit de wens van de jongere in deze situatie?
<u>Situaties vergelijken</u>	<ul style="list-style-type: none"> - Valt je iets op als je de situaties zo naast elkaar ziet liggen?
Voorkeuren t.a.v. situaties	<ul style="list-style-type: none"> - Wat is volgens jou de beste situatie om als jongere in te zitten? - Wat is volgens jou de slechtste situatie om in te zitten? - En de twee die overblijven?
Beoordelen van situaties	<ul style="list-style-type: none"> - Hoe zou jij elke situatie beoordelen op een score van 1 tot 10?
Slot	<p data-bbox="597 1094 1451 1161">Is er nog iets wat je belangrijk vind om te zeggen over de samenwerking tussen je ouders en gezinshuisouders?</p> <p data-bbox="597 1199 1273 1228">Zou je eventueel willen meedoen aan vervolgonderzoek?</p>

Appendix IV

Interview tool



Appendix V

Transcripts of seven vignette-based interviews with adolescents

The 37 pages regarding the transcripts of seven vignette-based interviews were not included in this file due to possible problems when submitting via Safe Assignment.

Appendix VI

Schematic view of code families, codes and number of quotation

Code Families

HU: Vignette-based transcripts + coding + families
 Edited by: Super

Code Family: Algemene aanbevelingen en voorwaarden
 Codes (4): [ADO-ATT-algemeen] [BP-ATT-algemeen] [OPV-ALGEMEEN] [PP-ATT-algemeen]
 Quotation(s): 31

Code Family: Attitudes
 Codes (15): [ADO-ATT-A] [ADO-ATT-algemeen] [ADO-ATT-B] [ADO-ATT-C] [ADO-ATT-D] [BP-ATT-A] [BP-ATT-algemeen] [BP-ATT-B] [BP-ATT-C] [BP-ATT-D] [PP-ATT-A] [PP-ATT-algemeen] [PP-ATT-B] [PP-ATT-C] [PP-ATT-D]
 Quotation(s): 101

Code Family: Opvattingen
 Codes (5): [OPV-A] [OPV-ALGEMEEN] [OPV-B] [OPV-C] [OPV-D]
 Quotation(s): 139

Code Family: Puntenscore
 Codes (7): [PUNT-RES-1] [PUNT-RES-2] [PUNT-RES-3] [PUNT-RES-4] [PUNT-RES-5] [PUNT-RES-6] [PUNT-RES-7]
 Quotation(s): 7

Code Family: Situatie A
 Codes (6): [ADO-ATT-A] [BP-ATT-A] [GEV-A] [OPV-A] [PP-ATT-A] [WENS-A]
 Quotation(s): 84

Code Family: Situatie B
 Codes (6): [ADO-ATT-B] [BP-ATT-B] [GEV-B] [OPV-B] [PP-ATT-B] [WENS-B]
 Quotation(s): 28

Code Family: Situatie C
 Codes (6): [ADO-ATT-C] [BP-ATT-C] [GEV-C] [OPV-C] [PP-ATT-C] [WENS-C]

Quotation(s): 84

Code Family: Situatie D

Codes (6): [ADO-ATT-D] [BP-ATT-D] [GEV-D] [OPV-D] [PP-ATT-D] [WENS-D]

Quotation(s): 52

Code Family: Transities in situaties

Codes (1): [OVERIG]

Quotation(s): 8

Code Family: Wens&gevoel

Codes (8): [GEV-A] [GEV-B] [GEV-C] [GEV-D] [WENS-A] [WENS-B] [WENS-C]
[WENS-D]

Quotation(s): 30