

## THE MIDDLE PERIOD IN INSTITUTIONAL PLACEMENT

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**T**HIS paper will attempt to describe briefly the middle period in institutional placement. This is defined as the period immediately following intake and initial acclimation to group living away from home up to initiation of discharge. The very fact that there is a middle period at all means that there has been some acceptance on the part of child, parent and agency that placement is to continue. Since each of these contribute to the movement of the case, a discussion of the middle period must involve each individually and in reaction with the others.

The child comes into this middle period on the wave of the impact, often shock, of separation. The quality of his experience is influenced by many factors, among them the basic parent-child relationship, his previous experiences, type of institution in which he finds himself, its preparation to absorb him into its daily life, etc. It is readily observable, therefore, that there is a wide range among the children who come into intake in the same institution and indeed into the middle period as well. To name just a few of these differences: the age range itself at Homecrest is from six to sixteen years of age. Current practice reflects the ever increasing recognition and re-

spect for the ability and responsibility of adolescents to take a near equal role to their parents in establishing eligibility for placement as well as for placement goals. There is a wide variation, therefore, in the point at which children at either end of this age range begin the middle period in placement.

Again, there is the factor of separation itself and its effect upon the child. An analysis of the present population in our foster care institution and a check of intake in the last several years revealed that for many this does not represent initial separation from parents. In almost all cases there has been previous separation from at least one parent, and for one half of our present under care population, there has been previous separation or separations from both parents for a significant period. These separations have varied from a makeshift, haphazard private placement to planned, professionally directed separation in foster homes or other institutions.

This high incidence of previous separations among children coming into institutional placement is not accidental. It is one sidelight on the types of children the present day institution is called upon to serve. It reflects a universality

of agreement that whenever possible families should be helped to remain together. Short of this goal other services of a familial type, such as foster home care, more appropriately meet children's needs. It is only when a child cannot be reasonably well served in a foster home setting, usually as a reflection of a deterioration in his own familial relationships, that he is referred for institutional placement. Either his behavior is so acute that the other type of placement is unrealistic, or his parents who cannot satisfactorily care for him, cannot permit other parents to do so either. These children inevitably find their way into an institution, sometimes directly when these qualities in parent-child are immediately recognizable but more often after these children have suffered a series of upsetting placement changes.

The first few weeks in placement in the institution are frequently characterized by almost daily contacts between the child and the worker. In Homecrest, which is a small institution with its casework offices situated right in the center of daily activity, spontaneous contacts are quite possible in addition to regularly planned interviews. The first step towards the middle placement period is the absorption of the child into the varied group and individual contacts available within an institution, with a corresponding abatement in the tempo of unplanned or semi-planned casework contacts. This represents a child's recognition of need of adjustment to the separation experience. He is aware that to some extent the frequency of desirable events, such as parental visiting, special requests, etc., are related to this initial adjustment into Homecrest activities. In his mind they often appear as simple cause and effect at this stage in his development. There are many aspects of institutional living, especially in its group aspects, to which he can adjust.

Because of its very differences from family living, he can do this without undue guilt or fear of family repercussions even though he had not made a similar adjustment at home. It is not uncommon to find during this early period sharp contrasts to former behavior in such areas as school, food habits, cleanliness, sociability, etc. Casework content still deals largely with home, regularity of visits, etc., and as these start to become a reality, a new quality begins to emerge in the casework discussions. There is often pressure on the part of the child to quicken the tempo, so that in these areas he may be considered on the same level with the other Homecrest children. It is for the child both an acknowledgment that placement is to be of longer duration, and an attempt, on his part, to influence the worker towards the reduction or elimination of the tentativeness of his placement status.

The factors of difference among the children coming into the middle period, mentioned earlier, refer equally to their parents, in terms of previous separation, age of children, quality of acceptance of continuing placement, etc. During the initial separation while there is not necessarily the constant seeking out of the worker, there is a readiness and sometimes an acceptance of frequent contacts with him. More or less corresponding in time with the child's movement toward assimilation into the institution, there is a perceptible shift on the part of the parent to an assertiveness in terms of his own self and his need for living outside the parent-child-worker relationship. It is an attempt on the parent's part to get into the beginning of the middle and away from the threat of the tentativeness in placement.

The parent may communicate this to the worker directly in words or may, through the unvarying quality and content brought to casework interviews,

demonstrate to the worker the need for just living in a new situation. Almost at the same time, therefore, that the child is starting to absorb himself more fully into the life of the institution, the parent may be starting to divorce himself from this same life, to absorb himself in a new life in the community. This is understandable and indeed necessary. For the parent intake has represented the means and conditions for discarding a kind of living with which he could not satisfactorily cope. The middle period is the time for him to test out and examine what can be possible within these new conditions.

Here again the group nature of the placement, which has assisted parent and child through the intake phases of placement, acts as a propelling force into the beginning of the middle period. It does so not only because of its reduction of guilt feelings through its difference from their former life together, as was mentioned before, but also because of its greater ability to absorb somewhat unacceptable behavior and its ability to accept less than intimate relationships, leaving child and parent free to regroup themselves for closer relationships between themselves or with other significant persons at a later point of greater readiness for such involvement. The significance of this beginning middle period, with both parent and child beginning to engage themselves in their new lives, may be overlooked. Its casework implications call for the greatest professional balance and sensitivity. If we are to respond only to parent-child movement away from casework contact, there is the danger of creating a vacuum in time and movement. Too many cases demonstrate this need on the part of the clients to act totally along one line, obliterating other important aspects of their complex situations, only to ricochet later on with deep feelings of wasted

time and worker participation in failure and even in deception. At the same time what must be recognized are the indications of the client's spontaneous development and a refreshed movement into life. This must find its reflections in changing use of structure and relationship to the client, lest we impede incipient strivings towards new ego development. The casework relationship therefore should be focused not only upon the denial of problem, but also the movement towards new health.

What do we mean by "new health" and what is its relation for discharge? The reality of eventual discharge pervades the whole of placement, beginning with the professional intake process itself. The actual terms and conditions of discharge, however, while they may be somewhat anticipated in relation to relative strengths within the parent and child clients, cannot be accurately predicted, especially since they will be related to dynamic rather than static factors. Bearing in mind the degree of problem our clients present, can we realistically accompany them into the middle period, with discharge dependent solely on the parent finding satisfactory employment, seeking remarriage, etc., or the child growing to a less dependent age, modifying his behavior, etc.? Where there are parents who can conceivably care for their children in the future, casework should be directed towards the children's return to their own homes. This characterizes the casework goals at Homecrest and has resulted in the actual return of a preponderance of children to their own homes, in the main, in a two year period. This is not to say that we are always convinced that this return home is reasonably permanent or that it is consummated without some trepidation on our part. Perhaps it is the lack of predictability as to how placement will end that makes for the

difficulty in structuring the middle period. For we cannot predict how it will end. Parents can and do meet with serious accidents, protracted hospitalization, death, during their children's placements. There is also the possibility of the return of the other parent, or the emergence out of nowhere of a relative or other principal person in the life of the family. The greatest variable is the parent's use of and ability to use the therapeutic possibilities available in his new way of life. He must first be immersed in it before his reactions to the relinquishing of the familiar parts of the parental role can be truly assessed and evaluated.

While this uncertainty regarding the future should give use pause, it need not become an actual block in the casework direction, in the middle period. It has been recognized that institutional placement is one step in casework treatment, sometimes one step of several. Casework values, therefore, need not rest solely upon the child's movement from the institution directly into his own home. In the final analysis health in the parent-child relationship rests on the parent's responsibility and ability to provide a family, a home, guidance, warmth and opportunities for growth for the child. Casework skills should be geared towards freeing the parent to provide these for the child and towards helping the child incorporate them. These may not be immediately available in the parental home itself. This, however, does not negate parental responsibility and ability to provide it elsewhere and/or through others. To some degree they are carrying out their parental role in using the services of the institution. The inter-relatedness of child and family is present and must be recognized from the outset.

Casework holds out to the clients the rightness of this relatedness and helps

to strengthen it. It is hard to classify this relationship as weak or strong. In some areas our parents can be almost frighteningly well mobilized. One parent, who had reared her son through a governess and had attempted to have an in-law carry the parental role in placement, seethed within herself when her son called his counsellors Mom and Pop, even in an institutional setting. It is rather most appropriately described as "confused," threatening and guilt-laden. Often it is a reflection of or reaction to community attitudes towards parenthood. It is to these feelings and derived attitudes that casework addresses itself. Movement towards the more normal familial type of living such as the small group home or foster family need not contradict or stand in rivalry to the child's return to his own home. It can substantiate and reinforce it. The parent's growing ability to make possible this type of care for his child, and the child's ability to move towards it, represent firm steps in the direction of new health. It must spring from a new kind of affirmation of the parental role. The price for predicating placement only on the direct return of the child to his own home can be heavy. These are the long stagnating cases in which the parent endlessly pursues marital plans, and adequate apartment or a salary increase. At this late stage and at point of failure and changelessness, the introduction of a different type of care may be felt only as rejection and may precipitate a discharge to home based on the sudden and questionable "return to health" of the parent. If introduced from the outset of placement and kept alive in the middle period within a defined time structure such precipitate action might be avoided.

It is out of our definition of agency role that the middle period derives its form and content. We have noted the

beginning of the middle period coincides with child and parent absorption into their individual new environments. While keeping open and alive the reuniting of the parent and child, essentially casework can treat effectively at this point with the clients' adjustment to separate existences. It is a period of action and of examination of action. In this phase the structure of a small institution is of invaluable aid in a casework awareness of the interactions of the child with his environment. The child's daily life is available to casework scrutiny not only through client interviews but by means of the observations of the worker, child's supervisor, teacher, Hebrew instructor, Director, and the many other staff members on the scene. The many variations in the built-in program in the institution offer to the child wide choices from which to select and in which to succeed. As he chooses or fails to choose program activities, relationships, the child reveals aspects of his personality structure and his characteristic ways of meeting situations.

Casework with the parent in this early middle period must correspond to his movement beyond intake and acknowledge that placement has been effected. He is at a cross-roads at this time between being a parent and being an independent person. This can give rise for great conflict. To help the parent deal with this conflict, we must be ready to treat him not only as a parent but as a person. Child and parent must first adjust to placement before they can venture deeper into treatment. This does not imply a steady, consistent improvement in individual behavior or in the inter-relationship of the clients. More often than not, there is a reaction to the initial middle period of quick adjustment. Old patterns of misbehavior, irresponsibility, etc., re-emerge as the motivation behind initial adjust-

ments and are not quickly satisfied. At a later stage perhaps the child can more easily tell you "I thought if I were good right away, I would go home right away," or the parent might say "my employer took me only because I was cheaper than the rest," or "all I could do when I got home after work was to fall into bed," a far cry from her mental picture of her new freedom.

These efforts and reactions of the parent and child towards a better way of life form the content of the rest of the beginning stage of the middle period with which the caseworker must deal. In large measure the parent and child again struggle to define themselves and their relationship, with different conclusions perhaps, in terms of what used to be, the caseworker in terms of what can be. The parents conceive of present failures in total terms, the worker often in partial terms. This is a stormy period with the clients projecting their despair on each other and on to the worker, and the worker identifying with their feelings, while helping the clients to see that the *forms* of health alone, new job, good behavior, etc., cannot fully resolve their situation. What has broken down between our clients, or may never have existed, has been a sharing with each other, a communication on a deeper level between them.

We have given considerable emphasis to the casework relationship with the parent. Actually the middle period is the time in which the child comes into his own. In intake much of the decision has focused in the mother. Now the child's fuller participation in the placement is confirmed. He is seen regularly and often by a caseworker, undergoes psychological testing, goes to school in small classes. There are opportunities for organized play or for private quiet contemplation. Some work with a psychiatrist, others with a remedial instruc-

tor, etc. A special milieu may be created for a child. For example, Bob is identified with his mother, a woman who is in open rebellion with her former dependent self-effacement. As one manifestation of this, Bob has attempted to organize and rule over younger or weaker children. As this became more apparent to the worker, this boy suddenly found himself in a classroom situation where the topic was "slavery," in a club group discussing bullying, etc. With his worker, who has structured the environment for him, he has been helped to relate his feelings about this concentrated threat and to explore his own motivations and responsibility for his predicament. An institution can provide this highly individualized experience for each child and as he responds to it, sets off a chain reaction in his family. Just as growth in the mother stimulates growth in the child, so is the reverse true. It can serve, too, to make the other more available to casework help.

While placement should be limited in time, our treatment goals cannot be superficial. Institutions serve troubled children from disturbed family relationships with personality distortions manifested in unproductive behavior. These call for a corresponding intensity in the casework relationship and in related therapies. One danger is that in response to the intensity of this relationship, children may manifest extreme and unacceptable behavior, and parents either vigorous or extremely passive reactions to the worker because of the internal pressures the relationship creates for them. At this time an agency may too quickly question its ability to continue to serve on the basis of such behavior alone rather than on the bases of psychiatric, psychological and casework evaluation of the personality structures of parent and child and of their

relationship to each other. Often this is a point when the client is most available to treatment. Such engagement of the clients with an accompanying resurgence, in a new form perhaps, of their relationship feelings can be an absolute prerequisite towards a satisfactory discharge. It is a springboard into what we conceive of as the middle part of the middle period following the clients' struggle and resistance to their need to explore and react to their "feast or famine" contributions to their relationship.

The middle part of "the middle period" covers the reaction of the clients to their efforts at adjustment in placement and their feelings related to the way in which it meets their needs. It includes the reorganization of parent and child through casework engagement towards new uses of themselves in their relationship. The ending of the middle period occurs when parent and child translate this new insight and readiness into activity towards growth. This is a period marked by togetherness and sharing which includes the worker during planning rather than after it. A child, who is adjusting to the group and the program within Homecrest, can now venture more out of it and take part more fully in community activities. Or he may come down to complain to the worker or the Director of mistreatment by a teacher or a supervisor, rather than present this as a justification for bolting from the classroom or leaving his bed undone. A similar quality is seen in parental feeling. However ordinary to others, this changing approach to meeting problems is of deep significance to our clients. It is out of joint sharing of these experiences and of those involving parent and child that we move into the discharge stage, sometimes initiated by the clients, sometimes by the agency.

Some mention should be made of the adolescent for whom placement is sought usually with an acknowledgment of the serious nature of family disruption. Placement of so grown a boy cannot be so easily explained by the parent on such circumstances as the mother's need to work, the absence of the father, etc., or similar circumstances *per se*. There is a greater tendency on the part of the parent to share with the worker the rebellious nature of the family conflict and on the part of the child his own dissatisfactions with his present way of life. Successful treatment must include intense casework relationship with the adolescent himself dealing with his personality distortions and his normal strivings for independence and away from envelopment by parental ties. To an even greater degree than for the young child, his return to his family often rests more heavily on his ability to effect an adjustment through his changing concepts and attitudes to his family. In intake more has been demanded of him in terms of his needs for community adjustment and internal change, and these factors figure prominently in the decision to go on into the middle period. What can be more clearly and firmly held up to the adolescent and what he can be helped with

is his own preparation for life beyond the institution and indeed beyond the family itself. It is a worker's responsibility to make every opportunity for the adolescent to share in an examination of his mode of adjustment, in the boy's relationships with his family, with the staff, and in the use of the worker himself. Short of this dynamic interaction, an adolescent may be technically discharged eventually, but may remain psychologically still embedded in the middle period of placement.

In attempting to describe the middle period we have kept in mind the direction of the case through the various stages to the initiation of discharge. Actually in many cases before true movement to discharge, there are abortive movements in that direction which must be carefully evaluated as to their quality. Out of our experience child or parent who has lived through a meaningful casework experience in the institution is not truly ready to resume family living under their former conditions, once they have undergone these new experiences in living and relationship. Settling for less, and we do not mean material things, is justifiable grounds for re-evaluating casework involvement of the clients and the validity of the movement towards discharge.