

CHILD WELL-BEING IN RESIDENTIAL CARE FACILITIES AND AFTER: A PROPENSITY SCORE APPROACH



WHY WOULD WE EXPECT DIFFERENCES?



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- Reintegration
 - Family-based Care
- Residential Care Facilities (RCF)
 - Difficult family and social backgrounds



THEORETICAL REASONS

- Attachment Theory
 - Removal from primary caregiver at RCF -> declines in mental and social well-being (RCF children)
 - Reintegration with families -> increased attachment with lifetime caregivers (reintegrated children)



PROPENSITY SCORE MATCHING

- Basic Idea: Replicate an experiment where no experiment occurred
 - Used in previous research to identify the (quasi-)causal effect of having children on marital quality, drug treatments on recidivism, policy evaluations, etc.
- How do we do this?
 1. Identify children who are similar on as many characteristics as possible (no limit to # of characteristics examined)
 1. Predict each child's probability of being reintegrated, whether they were or not

PROPENSITY SCORE MATCHING

3. Match RCF children (who were not reintegrated) with reintegrated children with similar probabilities
3. Compare outcomes between children of similar probabilities. RCF children who look otherwise identical to children who were reintegrated are compared on child well-being outcomes.

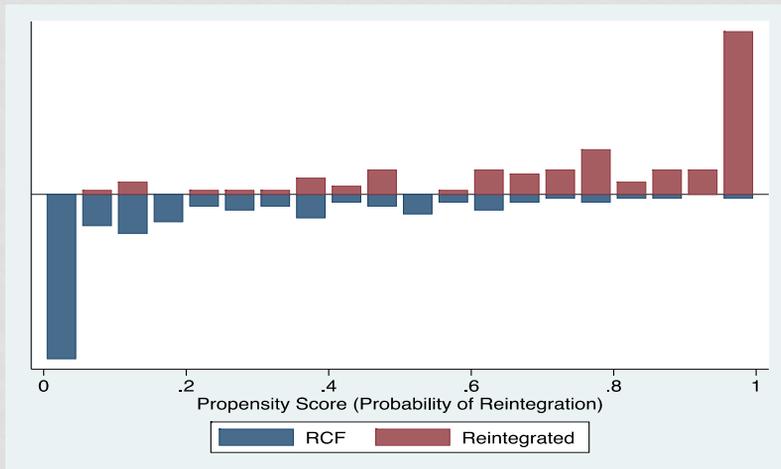
CHILD WELL-BEING OUTCOMES

- Strengths and Difficulties Questionnaire
 - range 1;-3)
 - Emotional Problems
 - Conduct Problems
 - Hyperactive Problems
 - Peer Problems
 - Prosocial Behavior
- Child Status Index
 - Range: 16-48
- Hope Scale
 - Hope Pathways
 - Range: 2-18
 - Hope Agency
 - Range: 2-18
- Attachment
 - Range: 0-14

CHARACTERISTICS USED TO MATCH RCF AND REINTEGRATED CHILDREN

- Gender
- Age
- Region of Country
- Duration of Stay in Orphanage
- Reason Went to Orphanage
 - Both parents are dead
 - One parent is dead
 - Victim of child labor
 - Extended family sent them
 - Child was abandoned
- School success
- Vaccination status
- Behavioral, mental, learning, or health problems/disabilities
- Sociability
- Responds well to authority
- Was hit or caned in orphanage
- # siblings
- Water and sanitation source
- # who sleep per room
- # household goods

RESULTS OF MATCHING



RESULTS

Well-Being Outcomes between RCD and Reintegrated Children in Ghana

	Matching Method #1	Matching Method #2	Matching Method #3
Emotional Problems	-0.61***	-0.61***	-0.83***
Conduct Problems	-1.18***	-1.18***	-1.26***
Hyperactive Problems	-0.63***	-0.63***	-0.74***
Peer Problems	-0.48***	-0.48***	-0.66***
Prosocial Behaviors	-0.06	-0.06	-0.05
Child Status Index	-2.60***	-2.60***	-1.06
Hope-Pathway	2.29***	2.29***	-0.48
Hope-Agency	2.27***	2.27***	-0.77
Attachment	2.99***	2.99***	3.64**

* p < .05; ** p < .01; *** p < .001

DISCUSSION

- Significant differences found on all but one outcome
- Reintegrated Children report fewer:
 - Emotional problems
 - Conduct problems
 - Hyperactive Problems
 - Peer Problems
- And greater:
 - Hope pathway
 - Hope agency
 - Attachment
- RCF children report higher levels on
 - Child Status Index

CAUTIONS

- Discrepancies across matching methods.
 - Some outcomes were significant across all three:
 - Emotional problems
 - Conduct problems
 - Hyperactive problems
 - Peer problems
 - Attachment
 - Final matching method was most rigorous and suggested results for some may not be as robust:
 - Child status index
 - Hope-pathway
 - Hope-agency

LIMITATIONS

- Sampling
 - Convenience sampling limits generalizability
- Geographic Limit
 - Ghana is (likely?) a unique case
- Propensity Scores are only as good as the characteristics you observed
 - The more characteristics you have, the better
- Selection into Reintegration
 - Are children who were reintegrated fundamentally different (for reasons we didn't observe) from children who remain in the care facilities?

CONCLUSIONS

- Replicating an experiment
 - After rigorously matching children on a variety of characteristics, reintegrated children appear to be doing better than their counterparts in RCFs
 - Exceptions: prosocial behavior (no differences) & child status index (RCF children higher).
- So what?
 - Reintegration appears to be **a good thing**, in general, for these Ghanaian children. Reintegrated children reported fewer problems and greater hope and attachment. But **MUCH more longitudinal research** needs to be done before we can make a solid pronouncement.
 - Little to no difference in CSI
 - Care facilities are doing a good job of meeting children's needs?
 - Reintegration is returning children to unstable and potentially problematic environments?
 - Absolute levels of reported child status (and most other outcomes) are comparatively low by international standards.