

HSRC RESEARCH OUTPUTS

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????? ? ? (Dr Catherine Ward)

(HSRC)

? ?????????? (Dr Mark Tomlinson
(MRC)

Andy Dawes (andawes@hsrc.ac.za)

Outline

Introduction
What is Tool Design
Tool Design: The art of the possible

Tool design
Tool design: A discipline of engineering

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Tool Design: The art of the possible

Residential Care & Child outcomes

1. Long history of evidence on the negative effects of residential care on children's outcomes

- Developmental delay
- Increased aggression
- Increased mental health problems (e.g. depression)
- Risks for long-term poor outcomes

A Negligent Management Life

Effective Management Deficit

Elly experiences a long period of time after her son's birth in which she is unable to leave the house. She has no social support system, and her children are still very young.

Other parents in the neighborhood are able to leave their children at home while they go to work or run errands.

The experience of being a mother is a component of Elly's identity.

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ARK Bulgaria

**Goal 1: Direct Foster Care (including subsidies for
direct placement of children in foster care)**

Goal 2: Develop foster care capacity.

Policy
Measures
Programs
Budget

Shelter care

Bulgaria has a high rate of child abuse, with 1 in 50 children in Bulgaria

The TOR for the Work

Produce Assessment Tools for the M&E of the DI programme

Delivery: 12 months from the start of the programme (0-30 months)

Adolescence (12-17)

Assess the following areas:

Place of residence, quality of care & stimulus, general environment

Adolescent behaviour, social support, self-esteem

Assess the following areas:

Place of residence, quality of care & stimulus, general environment, adolescent behaviour, social support, self-esteem

Developmental Programme Model

Conditions
→ Implications on Child Outcomes

INTENT
→
IMPLEMENTATION
→
IMPACT

Research Process 1

Step 1: Establish the outcomes of intervention for children of different ages.

Step 2: Use existing measures that can be applied to the children.

Children's development needs take off the child's development over the course of time. This is called the **Age Progression** (e.g. development at 1 year old).

Age Progression

needs

Child's age

Age Progression

Research Process 2

Step 3. Identifying variables and measurement

outcomes) and which existing measures would be appropriate for each outcome.

Choosing

Step 4. Choosing measurement choices: Consider different types of instruments that can measure the same outcome.

Choosing

- i. Institutional vs. Non-institutional Placements
- ii. Number of children in household
- iii. Household Structure, Child care arrangements
- iv. Information about other children living in the household
- v. Child's relationship with the child (NISAP) (see slide 10)
- vi. Child's social skills and functioning, SDQ (3-4 yrs)
- vii. Psychosocial problems, Rutter CBO, CDS, CFS, Adjustment Questions
- viii. Observed child behavior
- ix. Child Care Behavior
- x. Child's temperament
- xii. Child's mental health

Measurement of Attachment Deficit

Measures of attachment and the associated behavior were used to measure the attachment deficit. We did not have it.

We measured attachment by somononal correspondence counts from the following statement:

E.g. **1995-1996**

How often did you leave
the house to go to a
public place)?

00
1
6-1

"Does your child take
any role to get away if you
try to sephyse him/her
or make you angry?"

0

C-III. Risk Factors & Indicators & Measures

1. Institutional or Institutional Placement History	Child care arrangements. Child care arrangements. Degree of structure and order in the home. Degree of movement of the carer within the community.
2. Child Abuse and Neglect	Care Relationship with the child. (NLSAH) Care relationship with the child. (NLSAH)
3. Child Psychosocial Functioning. SDQ (4 -16 yrs)	SDQ
4. Psychosocial and behavioural problems. Rutter CBQ	Rutter CBQ
5. Vellbeime	Vellbeime
6. Obstruction	Obstruction
7. Caregiver behaviour	Caregiver behaviour
8. Caregiver mental health	Caregiver mental health
9. Caregiver social support	Caregiver social support
10. Caregiver social and risks at home	Caregiver social and risks at home

12.17

Measures & Measures

Institutionalization Placement History

Place of residence, Child care arrangements, Degree of structure and order in the home, etc.

Observation of the degree of involvement of the carer with the child and children's behaviour with their carers.

Relationship (NLSA-H) Caregiver (NLSA-H) Discipline, Etc., Supervision SAHA

Child Psychosocial functioning, SDQ (4 - 16 yrs)

Syndrome SAHA, Friendships and Veltor

Job

and social relationships with the carer

epo

epo

The Tools we Developed: Contents

• Computerized medical and school records
• Institutionalization placement conditions,
 Data collection schedule

• Computerized observation schedule for medical and school staff

• Computerized child descriptions / ratings
 • Computerized arrangements of child placement

Computerized Observation Schedule (COS)

Child descriptions / ratings
Child placement arrangements
and 12 - 17 years

• Computerized medical and care

• Computerized mental health services

Process, Piloting, Validating and Training

Final section drafts in SA.

Hand:

Bulgarian version checks for face validity;

Then:

Travel to Bulgaria, train and pilot in Stara Zagora, Visiting relevant government agencies with Ministry of Environment and Energy, more pre-

paredness, training, the original

Training in Bulgaria? Yes or No?

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The answer is Yes, but there are some important factors to consider.

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Conclusion

Outcome:

Tools for measurement measures aligned with levels of complexity.

Measures include:

ADK (Adolescent Drinking

Inventory) based on self-reporting of alcohol use.

Instrument unaffected for M&E purposes, and can be administered with 75 minutes by staff who have received training.

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ADK
Inventory

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