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The influence of extra-curricular activities on resiliency in foster children

Amanda Louise Wilson
Mary Anne Stoever

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THE INFLUENCE OF EXTRA-CURRICULAR ACTIVITIES
ON RESILIENCY IN FOSTER CHILDREN

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Amanda Louise Wilson
Mary Anne Stoever
June 1999
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A Project
Presented to the
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Amanda Louise Wilson
Mary Anne Stoever
June 1999

Approved by:

Dr. Matt Riggs, Project Advisor
Social Work

Dr. Rosemary McCaslin, Chair of
Research Sequence, Social Work

Date 6/14/99
Assigned Responsibilities

This was a two person project where authors collaborated throughout. However, for each phase of the project, certain authors took primary responsibility. These responsibilities were assigned in the manner listed below.

1. Data Collection:
   Assigned leader  Amanda Louise Wilson
   Assisted by     Mary Anne Stoever

2. Data Entry and Analysis:
   Assigned leader  Mary Anne Stoever
   Assisted by     Amanda Louise Wilson

3. Writing Report and Presentation of Findings:
   a. Introduction and Literature
      Assigned leader  Amanda Louise Wilson
      Assisted by     Mary Anne Stoever
   b. Methods
      Assigned leader  Amanda Louise Wilson
      Assisted by     Mary Anne Stoever
   c. Results
      Assigned leader  Mary Anne Stoever
      Assisted by     Amanda Louise Wilson
   d. Discussion
      Assigned leader  Mary Anne Stoever
      Assisted by     Amanda Louise Wilson
ABSTRACT

This study examined the relationship between extra-curricular activities and resiliency in foster children. A survey was used to collect information from 64 foster parents. Through a positivist approach, data was collected regarding participation by the foster children in extra-curricular activities and the foster parent’s perception of resiliency in their foster child. Additionally, qualitative data was collected regarding the foster parent’s opinion of the relationship between resiliency and extra-curricular activities. Results revealed that the quantitative data did not fit the hypothesis that extra-curricular activities contribute to resiliency. However, through the analysis of qualitative information provided by the foster parents, support for the hypothesis was found.
ACKNOWLEDGMENTS

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INTRODUCTION

In the past two decades, research on at-risk children has challenged the common meaning of risk and redefined the odds against children in at-risk populations. Professionals have observed an unpredictable something in some at-risk children which enables them to become responsible and capable adults despite early histories of prenatal substance abuse, disability, child abuse, domestic violence, poverty, separation from parents, or poor parenting (Brooks, 1994; Gjerde, Block & Block, 1986; Schwartz, 1994; Werner, 1984). Such research has also attempted to discover whether it is possible for professionals and caretakers to foster resiliency in at-risk children.

In order to determine what activities contribute to resiliency, it is first necessary to define resiliency and to gain a working understanding of the evidence of resiliency in children. Webster’s New World Dictionary (1980) defines resiliency as the “ability to recover rapidly, as from misfortune: buoyancy” or “the property of a material that enables it to regain its original shape after being bent, stretched, or compressed: elasticity” (p. 1210). When applied to describe coping behaviors in
children, resiliency refers to the child’s ability to recover from adversity and to return to pre-adversity levels of adaptation.

Werner (1984) defines resiliency as “the ability to recover from or adjust easily to misfortune or sustained life stress” (p.68). Rak and Patterson (1996) refer to indicators of resiliency as “protective factors...that appear to have buffered the negative impact of the identified risks” (p. 369).

Garmezy (1993) emphasizes that resilient does not mean invulnerable. The ability to spring back to functional coping after adversity does not mean that a resilient child is not emotionally harmed or injured by the adversity. Garmezy (1993) writes, “Emotional distress per se would not nullify the copresence of resilient behavior” (p. 130). The resilient child experiences and recovers from the impact of the adversity of at-risk conditions.

Although some adversity is necessary for the development of resiliency, the more risk factors a child is exposed to, the more likely it will be for that child to become brittle instead of resilient (Garmezy, 1993). Chronic poverty causes numerous risks including poor nutrition and inadequate health care both prenatally and in
childhood, and later problems in school. School failure may later cause low-paying jobs or chronic unemployment, which creates transgenerational poverty. Even for a resilient child, the constant bombardment of risk factors causes permanent emotional injury.

According to Garmezy (1993), the development of resiliency in the multi-risk atmosphere created by chronic poverty depends on children's temperament, family, and external supports. External supports may include adults other than family members, or a community institution, such as a church, which function as maternal substitutes. However, the most important factor in promoting resiliency is to alleviate the constant bombardment of stressors on the child. Even a child with the right temperament, family relationships, and external supports for resiliency can become brittle in situations of constant stress from poverty or abuse.

Problem Statement

McCann and Austin (1988) define at-risk children with respect to three characteristics. First, they are at risk for not achieving the goal of completing their education, which means they will not acquire the knowledge, skills, and dispositions to become productive members of society.
Second, at-risk students are children who exhibit behaviors that interfere with success in school and in broader society. Third, at-risk students are those whose family background characteristics place them at risk.

Poverty is a family characteristic that has been identified as putting a person at risk for drug abuse, teen pregnancy, child abuse, violence, and school failure (McCann & Austin, 1988). Poverty is often accompanied by other risk factors including high unemployment rates, lack of adequate education, and alcohol abuse (Rubio-Stipec, Bird, Canino, Bravo, & Alegria, 1991). Parental alcoholism is another family characteristic that puts children at risk. Researchers have identified parental alcoholism as associated with adverse family environment and increased risk for maladjustment in the children (Rubio-Stipec, et al., 1991).

Policy makers, the media, and researchers have often referred to “at-riskedness,” as a personal characteristic of youth, their families, and their cultures. Even though this approach sometimes succeeds in getting needed services to children and families, it also leads to stereotyping, labeling, lower expectations, prejudice, and discrimination (Benard, 1991). Yet according to Werner and Smith (1992),
a high percentage of at-risk children grow up to be not only successful by societal indicators but also confident, competent, and caring persons. Looking at children through a deficit lens obscures a recognition of their capacities and strengths, as well as their individuality and uniqueness (Bernard, 1991).

Research has identified resiliency as the determinant of whether children will succeed in school, resist substance abuse, and avoid juvenile delinquency problems despite significant stress and adversity in their lives (Bernard, 1991). Resiliency can be fostered through relationships with family members, educators, or other care providers who have direct contact with youth. Research with adults who have been abused as children but proved to be resilient revealed that, as children, they knew adults who treated them with empathy, encouraged them, and inspired confidence in them (Gootman, 1996). These adult relationships help children to develop friendship skills, effective problem-solving skills, and self-confidence.

Literature Review

In a review of research on resiliency, Werner (1984) found common reports of four central characteristics of resilient children. Resilient children actively approached
problem-solving. They learned from life experiences, even if the experiences caused them pain or suffering. From infancy, resilient children demonstrated the ability to gain positive attention from others, especially adults. Resilient children also used faith to sustain belief in the meaningfulness of life.

In a study of resiliency in children with attention-deficit and or hyperactivity disorder (ADD/ADHD), Brooks (1994) divided the components that lead to resiliency into internal resources and characteristics of the family climate. As internal resources, he described self-esteem and temperament. Self-esteem was equated with self-efficacy. Temperament can determine how people will respond to a child as early as infancy. Children with less happy temperaments elicit less empathetic or less positive responses, creating a cycle of less effective coping skills.

Characteristics in the family climate which lead to resiliency include "warmth, affection, emotional support, and clear-cut and reasonable structure and limits" (Brooks, 1994, p. 546). If these characteristics are absent in the child's home, they can be provided by an adult outside the nuclear family. The researcher emphasizes that resilient
children all have at least one significant relationship outside the family with an adult who is unconditionally accepting and supportive. For the ADD/ADHD children, teachers were often the providers of this unconditional support.

Using Block and Block's California Child Q-set (CCQ) as an instrument, Gjerde, et al. (1986) described the most common characteristics of resilient children. Resilient children were energetic and lively, showed resourcefulness in initiating activities, showed curiosity, were self-reliant and confident, were creative, responded to humor, were attentive and able to concentrate, were competent, used reason and responded to reason, and had an active fantasy life. In contrast, children who were not resilient showed rigid repetition under stress, were inappropriate in their emotions, were inhibited, felt themselves to be unworthy or "bad," became worried in unpredictable environments, were fearful and anxious, sulked and whined, had somatic reactions from tension, withdrew under stress, and overreacted to minor frustrations.

Schwartz (1994) lists the following characteristics as predictors of resiliency in children who do not live with their biological parents. Resilient children have a
strong, supple sense of self-esteem, a high level of personal discipline and a sense of responsibility, "insight into one's own feelings and those of others, and the ability to communicate these in an appropriate manner" (p. 205). In addition, resilient children have "focus, a commitment to life, and a philosophical framework through which personal experiences can be interpreted with meaning and hope, even at life’s seemingly most hopeless moments" (p. 205).

Brooks (1994) focuses on self-esteem as essential for developing resiliency. Self-esteem is equated with self-efficacy, confidence, hopefulness, and a realistic feeling of personal control. He describes self-esteem as the ability to confront challenges, to learn from successes and failures, to respect self, and to have faith in one's ability to affect change. Children with low self-esteem attempt to avoid challenging situations by quitting, cheating, clowning, bullying, or denying. These responses are used as defense mechanisms that lead to brittleness, not resiliency.

Common themes in the literature on resiliency provide the basis for the researchers' hypothesis. Researchers of resiliency agree that a high level of self-esteem,
unconditional acceptance, supportive relationships with adults outside the nuclear family, and faith in the meaningfulness of life are major components of resiliency.

Research on Resiliency

A review of the research on resiliency revealed two major trends. First, the literature attempts to predict the consistency of resilient coping mechanisms from infancy to adulthood. Werner (1984) summarizes the characteristics of resiliency in children as they grow from infancy to adolescence. In infants, resilient children were considered good-natured and easy to deal with. In preschool, resilient children demonstrated a strong sense of autonomy alongside well-developed sociability. School-age children sought out new experiences and were self-reliant, but they knew how to get help when they needed it. In middle childhood and adolescence, resilient children were helpful. Some cared for younger siblings or helped to manage the household. Being helpful in order to meet a family need was one way resilient children developed a strong self-esteem.

Arend, Gove, and Stroufe (1979) hypothesized that adaptation techniques remain constant from infancy until kindergarten age. The researchers studied 48 preschool and
kindergarten age children who had as infants participated in research on adaptive mechanisms. The researchers found that securely attached infants scored highest on indicators of resiliency when they reached kindergarten age. Although this was not a very large study, it does have a longitudinal aspect which points to the children's internalization of adaptive mechanisms that have worked for them since infancy. The implication of the research is that resiliency as a coping mechanism begins early in life and has a tendency to remain constant even past kindergarten age.

Gjerde, et al. (1986) furthered the research on consistency in coping mechanisms throughout the lifespan with a longitudinal study of resiliency from preschool age to early adolescence. This study focused on non-egocentric thought, or perspective taking, as an age-appropriate indicator of the ability to adapt to changes in the environment. The subjects of the study were 111 children who were followed from age three to age 14. The study reflected a diverse population, with about two-thirds of the subjects Caucasian, one-quarter African-American and one-twelfth Asian-American. Subjects primarily lived in urban settings and their parents represented many different
levels of socioeconomic status and education. The children were assessed for consistency in adaptive and coping behaviors at ages 3, 7, 11, and 14. Although the findings of the study did not support the hypothesis that non-egocentric thought is a consistent indicator of resiliency, except at a basic level in boys, the study did show that resilient coping mechanisms remained relatively constant from preschool through adolescence.

In a 1996 study, Robins, John, Avshalom, Moffitt, and Stouthamer-Loeber researched whether resiliency was a definable personality type as opposed to an achievable characteristic. Previously, in 1987 through 1988, the authors had studied the same 300 twelve and 13-year-old Caucasian and African-American boys to determine risk for criminal behavior. Of the participants in the first study, 202 boys were considered not at risk and 98 were considered high-risk for criminality.

In this first study, researchers used Block and Block’s California Child Q-set (CCQ) as an instrument to describe and define individual personality and to measure extraversion, agreeableness, conscientiousness, emotional stability, openness, ego resiliency, and ego control. The
results divided the boys into three different personality types: Overcontrolling, Undercontrolling, and Resilient. The results of the research provided an in-depth description of the characteristics of a resilient child. Resilient boys were described as well-adjusted, but not necessarily agreeable. Resilient subjects were confident, were able to make up their own minds, knew how to stick up for themselves, and pursued what they wanted. They were able to communicate clearly and understand spoken communication well. They were energetic and straightforward and had a sense of humor. They were able to pay attention and concentrate, and were considered "smart" even if they were not currently receiving high grades in school. Resilient boys did not have unpredictable or shifting moods. They were not shy. They did not act immature or give up when faced with stressful situations. They did not get upset or easily frustrated over little things.

Robins et al.'s (1996) second study used multiple informants and data collection tools to get information on 292 of the same boys. Measures included a Weschler Intelligence Test (WISC-R), the teachers' ratings on school performance and conduct, the subjects' self-reports on
juvenile delinquency, and parent or caregiver's responses to a behavior checklist.

The results of the second study were consistent with the researchers' expectations. Undercontrolling (non-resilient) boys had significantly lower IQ's, had worse behavior in school, and had more instances of juvenile delinquency than resilient boys. Overcontrolling (non-resilient) boys did not participate in more delinquency than the resilient boys, but their behavior indicated more severe types of delinquency. Resilient boys were most likely to be free from psychopathology, whereas Overcontrolling boys were more likely to have internalizing problems and Undercontrolling boys were more likely to have externalizing problems. No significant differences in the IQ, school behavior, and incidence of delinquent behavior between Overcontrolling and Resilient boys were found. Robins et. al. (1996) provide an in-depth description of the Resilient personality type, but it is not certain whether the findings are generalizable to females, adults, or ethnicities other than Caucasian or African-American.

The literature on resiliency discussed thus far has shown that some characteristics of resiliency are consistent in children from infancy to adolescence and
possibly into adulthood. The second trend in the literature consists of suggestions of how caretakers and professionals who work with children can help to foster resiliency in children who have not had a chance to develop resiliency since infancy.

Brooks (1994) describes how adults can help children raise self-esteem by letting children assume realistic ownership for their achievements, giving them responsibility, and empowering them to assist with decision-making within the family. Environmental structure, especially one in which the child's decision-making is encouraged, is very important. An environment of unconditional acceptance is necessary to let the children know that failure and mistakes are expected, and acceptable.

The children's contributions to their environment should be encouraged by allowing the child to be helpful, especially in areas of real need and areas of the child's perceived competence. Adults should emphasize the child's own perceived areas of competence, giving children opportunities to achieve and accomplish, to take responsibility, and to increase pride. Humiliation and constant focus on inappropriate behavior must be avoided.
Instead, empathy for the children’s insecurities is essential to raise a child’s self-esteem and encourage resiliency.

Schwartz (1994) reports on the challenges of the nonbiological caretakers (foster parents, adoptive parents or relatives outside the nuclear family) in helping develop resiliency. Children removed from their biological parents often have more difficulty than other children in developing resiliency. The author lists four aspects of resiliency that may require extra effort to foster in one’s nonbiological children. First, self-esteem is especially hard to develop in children facing the feeling that their biological parents did not want them. Second, if the children, especially in adolescence, try to emulate what they perceive to be irresponsibility on the part of their biological parents, personal discipline and responsibility may be difficult to foster. Third, the ability to understand and communicate feelings will be more complicated for the child who is unable to understand the actions and motives of the absent biological parents. Fourth, a faith in the meaningfulness and hopefulness of life can be especially difficult for a child whose life has been inconsistent and unpredictable.
In recognizing the stresses and difficulties of developing resiliency in one's nonbiological children, the researcher calls for additional outside supports for substitute parents. These outside supports should include training on how to foster resiliency in children, parent support groups, respite care, and other community resources.

Werner (1984) also emphasized the need for supports outside the nuclear family. Resilient children are especially adept at actively recruiting surrogate parents. Resilient children develop close relationships with significant adults to whom they go to confide, to seek counsel, to get unconditional acceptance and support. Often these significant adults are chosen because they are seen as role models for what the child perceives to be his or her own strengths and abilities. The researcher reports that the three most common significant adults in the lives of resilient children are a favorite teacher, a good neighbor, or a member of the clergy.

Werner (1984) gives the following suggestions for the adult who wants to help foster resiliency in children: Accept the child’s personality and idiosyncrasies. Give them opportunities that challenge them but do not overwhelm
their existing coping mechanisms. Teach them to be responsible and care for others and reward them for their responsible behavior. Model a conviction that there is meaning to life which remains regardless of life's inevitable adversities. Encourage them to develop positive relationships with adults outside of the nuclear family.

Rak and Patterson (1996) suggest ways in which school counselors and other professionals can promote resiliency in at-risk children and adolescents. The authors propose a solution-focused approach to counseling children in order to teach and model problem-solving skills and coping skills. Individual and group counseling for parents is recommended to provide support that diminishes the stressors on the family system. Providing environments of unconditional nurturing and acceptance in the school and community can provide support and advocacy for at-risk youth.

Although existing literature on resiliency gives practical suggestions on how to foster resiliency in children, the implications are not based on empirical research and have focused only on what professionals and caretakers can do within a one-on-one relationship with a child. For foster parents who would like support in
encouraging resiliency in their foster children and for professionals who are unable to see the children they work with on a daily or weekly basis, suggestions of other sources that promote resiliency may be more appropriate.

Garmezy (1993) summarizes the role of external support systems in the development of resiliency in children. He quotes Werner as writing: "external support systems, whether in school, at work, or church, that reward the individual’s competencies and determination, and provide a belief system by which to live" are some of the most important influences in helping children become resilient (p. 32). Werner (1984) also states that resilient children rely on informal networks of neighbors, peers, and in times of crisis. Rak and Patterson (1996) list outside the family as adults as those commonly relied in extra-curricular programs, including teachers of after-school programs, coaches...workers in city centers, clergy, and good neighbors" (p. 369).

Extra-curricular Activities

In a two-decade study of children on the island of Kauai, Werner (1984) found that "resilient children often find a refuge and a source of self-esteem in hobbies and creative interests" (p. 69). Werner described the
resilient children encountered in his study as "not unusually talented, but they displayed a healthy androgyny in their interests" (p. 69). Resilient children in Kauai engaged in extra-curricular activities that were not narrowly sex-typed in their culture, including fishing, swimming, horseback riding, and hula dancing. They gained pride in themselves through these activities, and also used these hobbies as coping mechanisms, immersing themselves in the activities as a refuge when things fell apart in their lives.

Christianson, Christianson, and Howard (1997) found that skills learned in extra-curricular activities were indicators of resiliency. These authors stated that children who successfully negotiate the challenges of trauma or other difficult life events have an interest, hobby, or skill that gave them positive recognition. Although the children may not necessarily excel in their chosen interest, they have a point of focus and produce achievements that bring them attention and recognition. This positive feedback gives them a means of developing and maintaining self-esteem, self-efficacy and personal value, therefore increasing resiliency.
Extra-curricular activity can also offer children emotional support, an opportunity to be a part of a cooperative effort, and a chance to help others (Werner, 1984). The author mentions team sports, 4-H, Big Brothers and Big Sisters, church groups, YMCA and YWCA as extra-curricular activities that help children to become resilient.

In addition to the clubs and teams, physical recreational activities have been associated with resiliency in children. Boyd and Hrycaiko (1997) studied the relationship between physical activity and self-esteem. Participants were 181 pre-adolescent and mid-adolescent females ranging in age from 9 to 16 years old. An experimental pre-test/post-test design measured children's self-esteem during activities such as tumbling, skipping rope, aerobics, and playing various sports including volleyball, hoops, and gymnastic vaulting. Additionally, a video showing women as positive role models was played at the beginning of one of the classes. Results showed that the pre-adolescent group benefited the most from the intervention and experienced a rise in self-esteem scores while the adolescents experienced these effects more conservatively.
Butcher and Hall (1988) describe another program where physical recreational activities helped to foster resiliency. Team Lincoln was a service learning program implemented at an urban elementary school where the student body consisted of many youths considered at-risk. Because of a lack of resources, these children were often not involved in productive play, sports, or recreational activities. The goal of Team Lincoln was to provide the children with adequate, safe, play experiences as well as appropriate role models who would display positive social behaviors. This program's ideological format was the "global village" concept that involves the surrounding network of families, neighborhoods, schools, businesses, churches, synagogues, media avenues, parent-teacher associations, universities, and other institutions that make up the fabric of children's lives. The participating children expressed positive reactions to this creative partnership.

Potential benefits derived from extra-curricular activities in regards to grade point average, lower rates of school absence, and higher rates of college attendance were studied by Barbar (1999). One thousand two hundred fifty-nine high school age adolescents participated.
Activities considered were prosocial (church and volunteer), performing arts (drama, marching band), and academic clubs (science, foreign language club). The researcher noted that these activity settings provided a peer group for the adolescent along with the activity. Therefore, the researchers hypothesized that participants would develop friendships with other participants and that the collective behaviors of the group would influence the members as a whole. Results indicated that participation in extra-curricular activities during high school helped to increase academic success and reduced involvement in risky behaviors.

Arts, crafts, and dance may also increase resiliency in children. Shields and Cicchetti (1997) emphasize creativity as being a primary indicator of resiliency in children. Strayer and Roberts (1989) found resilient children to be highly imaginative. Werner (1984) found that resilient children excel not only in school, but also in extra-curricular activities such as sports, drama, or music. "Even if they are not usually talented, they put whatever abilities they have to good use" (Werner, 1984, p. 70).
Resiliency may also be fostered when an adult encourages a child's participation in religious activities. Belgrave, Townsend, Cherry, and Cunningham (1997) found that the spiritual/religious dimension a valuable resource for helping children resist drug use. Spirituality was conceptualized as attendance of religious services and discussions of religion and spiritual topics within the home. The spirituality of the children in the study most likely reflected the spirituality of the parents and other adults in the home. The researchers found that in households where there are spiritual and religious attitudes and behaviors, there were fewer opportunities for youth to experiment with drugs, indicating a lowering of "at-riskedness" in the children.

In general, the social interaction afforded by extra-curricular activities may be a promoter of resiliency. Asendorpf and van Aken (1991) found that resilient people consistently demonstrated socially desirable personality traits throughout the lifespan. The specific personality traits changed along with developmental tasks, but remained highly socially desirable.

For example, Asendorpf and van Aken (1991) found that as young children developed, their personality traits
changed "from a focus on emotional stability and good peer relations to a focus on school achievement" (p. 701). The researchers found that the children with the most consistent personalities (i.e.: the most resilient) grew up in stable, predictable environments. The questions remains as to whether consistently socially desirable traits can be instilled through other means, such as extra-curricular activities, for at-risk children who do not have the benefit of a stable living environment.

Purpose of the Study

The guiding theoretical framework for this study assumed, as indicated by existing literature, that (a) resiliency helps children to work through difficulties by maximizing self-efficacy, self-esteem and the instillation of hope, (b) interactions between children and parents, teachers, and caregivers can foster the development of traits of resiliency in children, and (c) the development of these traits create in the child coping mechanisms that can lead to positive outcomes in adult life.

The present study proposed that a relationship exists between extra-curricular activities and the development of resiliency in foster children. On the basis of the literature reviewed, it was hypothesized that foster
children who participate in extra-curricular activities would show higher levels of resiliency.

The first and second parts of the research were positivist in nature. These sections measured the extra-curricular participation of children and their level of resiliency. The third part of the study was a qualitative measurement of foster parents' perception of how extra-curricular activities contribute to their foster children's development of resiliency.
METHOD

Participants

Responses were elicited from 64 foster parents attending foster parent training classes at Riverside County Department of Social Services Training Center on March 6, 1999, and March 15, 1999 (Appendix A). Participants were foster parents who already had children placed in their home; newly licensed foster parents were excluded. Some respondents were foster parents with other counties (3.2%, n=2) or with private Foster Family Agencies (6.3%, n=4). The majority of respondents (90.6%, n=58) were licensed through Riverside County. The sample was drawn from a pool of foster parents which reflected the ethnic and socio-economic diversity of Southern California. Ninety surveys were distributed to foster parents; 64 responses were returned at least partially completed. Foster parent participation was voluntary and informed consent was given by participants (Appendix B).

Subjects

Respondents were instructed to answer the questionnaire based on their observations of one of the foster children under their care. The subjects of the questionnaire were almost evenly divided between boys
(45.3%, n=29) and girls (51.6%, n=33) with two responses regarding the child’s sex left unanswered. The subjects’ ages ranged from 9 months to 17 years. Only one subject’s age was not recorded on the questionnaire. The ages of the children subjects were well-distributed and created a curve that approached normal.

Table 1.

Age of Subjects

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<th>Age</th>
<th>N</th>
<th>Percentage</th>
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<tr>
<td>Infants, Birth to Two Years</td>
<td>11</td>
<td>17.5%</td>
</tr>
<tr>
<td>Preschool, Three to Five Years</td>
<td>12</td>
<td>19.0%</td>
</tr>
<tr>
<td>School Age, Six to Twelve Years</td>
<td>25</td>
<td>39.7%</td>
</tr>
<tr>
<td>Teenagers, Thirteen to Seventeen Years</td>
<td>15</td>
<td>23.8%</td>
</tr>
</tbody>
</table>

The length of time that the subjects had been in the respondents’ homes was also measured. Respondents gave the length of time in whole years, half years, or in months. The distribution of the length of time the subjects had been in the homes of the respondents were strongly skewed, with most of the foster children (77.8%, n=49) having been in the respondents home for a maximum of 3 ½ years. Only
one respondent did not include the length of time on the questionnaire.

Table 2.

**Subjects' Length of Stay in Foster Home**

<table>
<thead>
<tr>
<th>Time</th>
<th>N</th>
<th>Percentage</th>
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<tr>
<td>Less than 6 months</td>
<td>13</td>
<td>20.6%</td>
</tr>
<tr>
<td>Less than 1 year</td>
<td>11</td>
<td>17.5%</td>
</tr>
<tr>
<td>One to Two Years</td>
<td>16</td>
<td>25.4%</td>
</tr>
<tr>
<td>Two to Three Years</td>
<td>6</td>
<td>9.5%</td>
</tr>
<tr>
<td>Three to Four Years</td>
<td>5</td>
<td>8.0%</td>
</tr>
<tr>
<td>Four Years and Over</td>
<td>12</td>
<td>19.0%</td>
</tr>
</tbody>
</table>

Design and Scoring

The survey consisted of a three-part questionnaire (Appendix C). Foster parents were instructed to fill out the survey while keeping in mind one particular foster child under their care. Each question had a Likert scale to rate the child. The first and second sections of the questionnaire were quantitative measures and were scored with numeric values. The first section asked questions regarding the child’s participation in extra-curricular activities outside of the home and school. The seven-point
Likert scale ranged from “Never” to “Daily.” The second section measured resiliency through questions that were based on components found in the literature and on consultation with J. Block, who developed the California Q-set instruments for measuring resiliency (Appendix D). For the questions on resiliency, the corresponding five-point Likert scale responses ranged from “Never” to “Always” with “Half the time” at the center of the scale.

Scores were calculated for each subject to indicate the child’s extra-curricular participation as measured by the first section of the questionnaire and the child’s resiliency as measured by the second part of the questionnaire. Extra-curricular participation was scored two ways. First, values of 0 through 5 were assigned to the questionnaire responses, with an answer of “Never” earning a score of 0, “Few times a year” earning a score of 1, etc., and “Daily” earning a score of 5. The responses of “Weekly” and “Few times a week” were both scored as 4 due to the printing of the questionnaire; the two responses ran together and were circled by respondents a single response.

The second way extra-curricular activity was scored was to assign a value of 1 for any participation in that
activity, regardless of the level of participation. A second total resiliency score was computed by summing the scores for all 20 questions.

Scores for the resiliency measure were attained by assigning the values of 0 through 4 to the five-point Likert scale responses. Six respondents did not answer the questions pertaining to resiliency, but wrote down comments that their foster children were too young for the questions to be appropriate. For the 58 completed sections, a response of “Never” was scored as a 0 and a response of “Always” scored a 4. Due to the opposite framing of the questions, scores for the resiliency questions #3, #6, #7, #14, #15, and #18 were reversed, with an “always” response given a 0 and a “never” response given a 4. Total resiliency scores were computed by summing the scores for all 20 questions. When responses to isolated questions were missing, the mean item score for that subject was inserted to avoid missing data when most of the survey was complete. This was true for nine responses. Seven of the responses were for infants under two years of age and the missed questions were developmentally inappropriate for the child’s age.
other two responses were provided by foster parents who were primarily Spanish speaking and it is likely that they did not fully understand the questions they skipped.

The total scores were well distributed, and the curve produced by the total scores approached normal. A Crombach Alpha Reliability Coefficient analysis of the resiliency scores revealed adequate reliability, with an alpha score of .84. Natural breaks in the distribution of the total scores showed three discernable clusters. Low scores ranged from 23 to 37.5, middle scores ranged from 40 to 56.84 and high scores ranged from 57 to 71.8.

The resiliency scores are meaningful in that a higher score indicates more resiliency; however, any amount of resiliency in children is desirable so lower scores do not necessarily mean that the child will not be resilient. It is appropriate to conclude, though, that the children with high scores will be more resilient than those with low scores.

The third section of the questionnaire comprised the post-positivist section of the research. The foster parents were asked for their own opinion as to whether or not the child's extra-curricular experience was providing the necessary components of resiliency. The options for
responses ranged from "Never" to "Always" with "Half the time" at the center of the scale. Additional space was given for respondents to write in any opinions or comments they would like to share with the researchers.
RESULTS

The qualitative aspects of this study provided the researchers with information about how foster parents view extra-curricular activities. Comments written at the end of the questionnaire demonstrated consensus among foster parents regarding the positive role of extra-curricular participation. Some foster parents remarked on the difference extra-curricular activities have made in the lives of their foster children. Respondents remarked that extra-curricular "gives them [foster children] confidence," "he enjoys being out of the house and doing things with others," and "it lifts his self-esteem. He feels talented."

One parent wrote the following about a child who scored very high both on extra-curricular participation and on resiliency: "Our child is very special, extra bright and strong, much stronger than the average foster child. We have two foster children and the 10-year-old [the subject of this survey] is so well-adjusted, we are amazed. She is loved everywhere." Another parent commented on the effect of participating with the other adults outside of the home: "we are a single parent family. For us, these extra-
curricular activities offer my children (especially the boys) a positive role model.”

In further analysis of the responses of foster parent attitudes toward extra-curricular activities, foster parents reached agreement on several of the questions, with a majority of respondents answering that extra-curricular activities “Usually” or “Always” do the following: help foster children build self-esteem (80.4%); help foster children learn to trust (65.5%); allow foster children to develop relationships with adults (52.5%); and give foster children new and different experiences (80.3%).

A majority of the foster parents agreed that only “Sometimes” or “Never” do foster children experience unconditional acceptance through extra-curricular activities (50.8%) nor do extra-curricular activities help foster children find meaning in life (55.7%).

These findings indicate that, although extra-curricular activities may help foster children develop some of the components needed for resiliency (such as trust, self-efficacy, and relationship with others outside the home), extra-curricular participation does not develop some of the other components necessary for the foster children to become resilient (such as faith, purpose, and
unconditional regard). If this is true, then other means of helping a child to develop those missing characteristics are needed in addition to the extra-curricular participation.

This finding may help to explain why the quantitative findings of this study did not coincide with previous research on resiliency. A Pearson correlation (bivariate, two-tailed) revealed a significant negative correlation between extra-curricular participation and resiliency ($r = -0.39, p = 0.007$, see Appendix E). Adjustments consistent with various limitations of the data were attempted, but the negative correlation remained. Neither the age of the child nor the length of time that the child had been in the foster home had any significant effect on the negative correlation. No significant differences between genders were found. No cluster of activities or individual activity produced different results.
DISCUSSION

Recognition of the fact that foster children often have multi-faceted problems due to the trauma of child abuse and removal from the family of origin has led many counties to institute programs of specialized foster care. Specialized foster care programs (also known as therapeutic foster care or treatment foster care) differ from regular foster care programs in several ways. The children in specialized foster care have serious emotional and behavioral problems, which make them more appropriate for group home care than foster home care. Meadowcroft, Thomlinson, and Chamberlain (1994) report, “the children entering treatment foster homes may exhibit twice as many presenting problems as children entering group care; they are more likely to exhibit aggression, school problems, and sexual acting out.”

The reason for the strong negative correlation between resiliency and extra-curricular participation for this population may be explained by either of two theories. Perhaps these foster children were more in need of family life and care within the home rather than activities outside of the home. A comment made by one of the foster parents was, “There should always be a bond with you and
your children, but most of these items I have answered should be given first at home. Then, extra-curricular activities should enhance your teachings to your children."

This "bond" or attachment is seen as a transaction between mother or caregiver and child (Ainsworth, Blehar, Waters, & Wall, 1978; Bowlby, 1969). From her study of attachment in young children, Ainsworth (1978) concluded that neglected children may become unable to trust or attach themselves to others and often lack confidence and have difficulty with problem solving. The early life experiences of children in foster care may compromise a foster parent's ability to establish a nurturing relationship with their foster child. According to Kobak and Sceery (1988), this ability to bond or attach with a foster parent has a significant relationship to resiliency.

An alternative theory to explain the negative correlation may be the level of emotional damage already inflicted upon these victims of child abuse. Most of the literature reviewed examined at-risk children. Indicators of "at-riskedness" as defined in the literature review includes poverty, poor nutrition, lack of adequate education, and parental alcohol abuse (Rubio-Stipec et. al., 1991). Perhaps the fact that the foster children
studied in this piece of research were victims of child abuse or maltreatment as well as removal from their natural parents may place these children in a category of already “traumatized” as opposed to “at-risk.”

Children who are dealing with emotional issues due to pre-placement neglect or abuse often experience increased difficulty with concentration and behavior (Hart & Risley, 1995; Duncan, Forness, & Hartsough, 1995). These characteristics could compromise a child’s ability to participate in extra-curricular activities. Foster parents commented on the surveys, “Extra-curricular activities can and have been beneficial to most of my foster children. Problems happen when they are cut from a team and they are not as ‘good’ as others. They have a hard time facing the reality of their limitations sometimes;” and that they are “Usually are either kicked out, or I must go supervise” due to problem behavior.

Children in foster care placement are known to have more emotional disturbances and a higher frequency of problems requiring special education compared to children in the general population. Studies have found the incidence of these types of problems to be at least twice as frequent and up to 15 times as frequent as the overall
population (Clark, Prance, Lee, Boyd, McDonald, & Stewart, 1994). The number of different placements has been found to correspond to the incidence of behavior disturbances in foster children (Smucker, Kauffman, & Ball, 1996). Perhaps the foster care experience, as well as the reasons for placement, make the definition of "at-risk" inappropriate, and a designation of "traumatized" more appropriate.

Specialized foster homes offer such children individualized treatment plans, specially trained foster parents, more involvement by the social worker, extended therapeutic treatment in and out of the home, and a team approach to helping foster children become more successful in social and academic arenas (Meadowcroft et al., 1994). These specialized homes have produced greater improvements in emotional functioning and behavior than other types of programs (Clark et al., 1994). Studies have also found specialized foster care to produce in children greater self-esteem, sense of identity, and personal worth (Meadowcroft et al., 1994).

Limitations

The county under study in this research (Riverside County, California) has a specialized foster care program, such as described above, called Enriched Foster Care.
Enriched Foster Care parents did participate in the questionnaire; however, our research design did not gather information about which respondents were foster parents in the Enriched Foster Care program as compared to other foster care programs.

The inclusion of shelter homes, or foster homes which provide only short-term, emergency care, may also have affected the research. One respondent commented, "Because of being in the shelter program, it is hard to enroll children as they are not with you any length of time."

Neither did our research measure the severity of emotional and behavioral problems in the children, or the improvement in such problems since the commencement of participation in extra-curricular activities. The research design may not have provided enough information to fully measure the benefits of extra-curricular participation for children with serious emotional and behavioral problems.

Another limitation of the research was that the questionnaire asked the same questions regardless of the age of the child. As discussed in the literature review, resiliency in infancy appears as a good nature and temperament; in preschool as autonomy and sociability; in school age as self-reliance, an ability to get help when
needed, and the pursuit of new experiences; and in adolescence as non-egocentric thought and perspective taking (Gjerde, Block & Block, 1986; Werner, 1984).

Several respondents included comments about the inappropriateness of the questions for infants and small children. Respondents wrote, "this survey may not be a good measure since our child is younger." Similarly, the instrument may not have been appropriate for older children in the developmental stage of increasing independence. One respondent reported of a 16-year-old subject, "this child has a mind of her own and lots of times I ask her to join in activities and she won't. She likes to do what she wants to do." Further research on this subject should take into consideration the ways resiliency manifests itself differently throughout the lifespan.

Because studies on resiliency have shown that a crucial aspect of resiliency is the development of relationship with an adult outside of the home, the importance of interaction with primary caretakers was not taken into consideration in this study of how extra-curricular involvement affects resiliency. It is possible that previous researchers based this conclusion on the fact that at-risk children often do not get their emotional
needs met at home, and that was why it was so important for them to develop relationships with trusted adults outside of the home (Garmezy, 1993; Gootman, 1996; Brooks, 1994). For foster children, a strong relationship with the caretaker may produce the same resiliency as other out-of-home relationships in at-risk children.

Implications

As evidenced by the profundity of available research, resiliency is a very important topic to social workers and other professionals who specialize in work with at-risk children. This piece of research seeks to further the information available on resiliency. Although this piece of research did not support the hypothesis that extracurricular activities correlate with resiliency in foster children, this study did provide some interesting and helpful information about resiliency in foster children. Additionally, a different outcome may exist if the same study was replicated with non-foster care children as subjects. Hopefully others will continue the research with more in-depth studies of what activities promote indicators of resiliency.

Werner (1984) writes "There is a special need to strengthen such informal support for those children and
their families in our communities which appear more vulnerable" (p. 71). Our research has helped clarify that extra-curricular activities are not enough to help foster children become resilient. Continued study should focus on pinpointing other areas of support for these children and their foster parents.
February 19, 1999

Amanda Wilson
Mary Anne Stoever
8655 Barton Street
Riverside, CA 92508

This letter is to officially acknowledge that permission is given to Amanda Wilson and Mary Anne Stoever, to conduct a graduate research project - "The Influence of Extra-curricular Activities on Resiliency in foster Children", as detailed in the proposal submitted to Laurel Brown dated January 25, 1999.

We are very interested in the results of the research and look forward to discussing it with you when it's completed.

Sincerely,

Nancy Lopez, LCSW
Dear Foster Parent:

Thank you for your willingness to complete this anonymous survey! With your input, we hope that this study will provide social workers with a better understanding of how to help children overcome the effects of child abuse and neglect.

We are two social work graduate students who are completing a research project as part of our program requirement for our M.S.W. Degree. Our research project is a study of resiliency. Resiliency is that inner ability some children have to which allows them to overcome difficult childhood experiences and become well-adjusted adults. We are asking your help in answering a few questions regarding your foster child’s involvement in extra-curricular activities and the child’s degree of resiliency.

It’s important that you answer the questions as honestly as possible. If you don’t believe extra-curricular activities play a role in resiliency, we’d like to know that as well.

Often foster parents think that they are unappreciated for their hard work in helping to raise children who have had very difficult childhood experiences. We are asking for your help in this project because we think you know the children best. This is an opportunity for you to share some of the knowledge you have gained by raising children who have had rough lives before they came to you.

It should take you 5-10 minutes to complete this survey.

This study is being conducted by Amanda Wilson and Mary Anne Stoever under the supervision of Dr. Matt Riggs, and this study has been approved by the Human Participants Review Board at California State University San Bernardino.

The University requires that you give your consent before participating in this research study. If you consent, please sign below anonymously with an “X.” Neither your name nor any other identifying mark will be included on this study. All information will be held in strict confidence. This study is completely confidential and anonymous.

Please understand that your completion of this questionnaire is totally voluntary. If you have any questions regarding this study or want a report of its results, please contact Matt Riggs at California State University San Bernardino (909) 880-5501.

Please give your consent to participate in this study by

marking an X here: ________________________________

Today’s date: ________________________________
FOSTER PARENT SURVEY

Please check one:  
   ______Foster parent licensed by Riverside County

   ______Foster parent licensed by another county (which county?___________)

   ______Foster Parent certified through a Foster Family Agency

Please keep in mind one specific foster child as you answer the questions.

How long has this child lived with you? ________________________________

How old is this child? _______  Is this child a boy or a girl?__________________

I. The child's involvement in extra-curricular activities:
Please circle the answer that you think is closest to what this foster child actually does:

Which of these activities does this child participate in?

Dance classes

Never few times a year monthly few times a month weekly few times a week daily

Choir or singing lessons

Never few times a year monthly few times a month weekly few times a week daily

Music lessons or band

Never few times a year monthly few times a month weekly few times a week daily

4-H, Boy’s Club, Girl’s Club, YMCA or YWCA clubs

Never few times a year monthly few times a month weekly few times a week daily

Art lessons or classes

Never few times a year monthly few times a month weekly few times a week daily

Playing with neighbors

Never few times a year monthly few times a month weekly few times a week daily

Team sports/Athletics

Never few times a year monthly few times a month weekly few times a week daily

Competition sports/Athletics

Never few times a year monthly few times a month weekly few times a week daily
Boy Scouts or Girls Scouts

Never  | few times a year | monthly | few times a month | weekly few times a week | daily

Religious Clubs (ex: AWANA, Missionettes, Wednesday night clubs, etc.)

Never  | few times a year | monthly | few times a month | weekly few times a week | daily

Other clubs

Never  | few times a year | monthly | few times a month | weekly few times a week | daily

Religious services or meetings

Never  | few times a year | monthly | few times a month | weekly few times a week | daily

II. The child's resiliency:
Please circle the number of the answer that best describes this foster child, as far as you know.

1. This child makes a good first impression on others.
   Never  | Sometimes  | About half the time | Usually | Always

2. This child looks forward to new and unusual experiences.
   Never  | Sometimes  | About half the time | Usually | Always

3. This child has difficulty with changes.
   Never  | Sometimes  | About half the time | Usually | Always

4. This child can point to several adults outside the family that he/she can trust.
   Never  | Sometimes  | About half the time | Usually | Always

5. This child confides in friends.
   Never  | Sometimes  | About half the time | Usually | Always

6. This child feels like he/she has no control over events in life.
   Never  | Sometimes  | About half the time | Usually | Always

7. This child hates challenges.
   Never  | Sometimes  | About half the time | Usually | Always

8. This child likes to develop relationships with adults other than family members.
   Never  | Sometimes  | About half the time | Usually | Always
9. This child likes to help others.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

10. This child knows what he/she is good at.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

11. This child thinks carefully before acting.

<table>
<thead>
<tr>
<th></th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

12. This child is generous with friends.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

13. This child is more curious than most people

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

14. This child lacks special interests.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

15. It takes a long time for this child to get over being angry

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

16. This child is very energetic.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

17. It is easy for this child to get over being startled.

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<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

18. This child dislikes being around people.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

19. This child enjoys trying new foods he/she has never before tasted.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

This child likes to do new and different things.

<table>
<thead>
<tr>
<th></th>
<th>Never</th>
<th>Sometimes</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>
### III. Your experience as a foster parent:

*Please circle the answer that best describes what you have seen as a foster parent. “Extra-curricular activities” refers to activities outside of home and school.*


<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

2. Extra-curricular activities help foster children learn to trust.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

3. Foster children develop relationships with adults in extra-curricular activities.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

4. Foster children experience unconditional acceptance through extra-curricular activities.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

5. Foster children feel emotionally supported by people at extra-curricular activities.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

6. Extra-curricular activities help foster children find meaning or purpose in life.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

7. Extra-curricular activities teach foster children that things will work out for the best.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

8. Extra-curricular activities give foster children new and different experiences.

<table>
<thead>
<tr>
<th>Not at all</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

9. Extra-curricular activities help foster children feel they have control over their own lives.

<table>
<thead>
<tr>
<th>Never</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

10. Extra-curricular activities help children develop faith that things will turn out O.K.

<table>
<thead>
<tr>
<th>Never</th>
<th>Sometimes</th>
<th>About half the time</th>
<th>Usually</th>
<th>Always</th>
</tr>
</thead>
</table>

**Thank you for your comments and your participation! Is there anything else you would like us to know about your foster children’s experiences in extra-curricular activities?**
APPENDIX D

Scale Name: Ego Resiliency Scale

Source: Block, J., Department of Psychology, University of California at Berkeley, Berkeley, Calif., 94720.

Response format: True-False (In this study, a four-step response format was used)

Abbreviation: RES

Number of items in original scale: 14
Number of items included in LTTPI: 14
Number of items in final scale: 14

Items of Scale interspersed among others items: Yes

Scale Reliability = .76

Purpose: To index ego-resiliency with a new rational and somewhat empirical scale that has proven to correlate well with observer judgments of resiliency.
<table>
<thead>
<tr>
<th>ITEM NO IN BPI</th>
<th>ITEM TEXT</th>
</tr>
</thead>
<tbody>
<tr>
<td>45.</td>
<td>I am generous with my friends.</td>
</tr>
<tr>
<td>76.</td>
<td>I quickly get over and recover from being startled.</td>
</tr>
<tr>
<td>270.</td>
<td>I enjoy dealing with new and unusual situations.</td>
</tr>
<tr>
<td></td>
<td>I usually succeed in making a favorable impression on people.</td>
</tr>
<tr>
<td>307.</td>
<td>I enjoy trying new foods I have never tasted before.</td>
</tr>
<tr>
<td></td>
<td>I am regarded as a very energetic person.</td>
</tr>
<tr>
<td></td>
<td>I like to take different paths to familiar places.</td>
</tr>
<tr>
<td></td>
<td>I am more curious than most people.</td>
</tr>
<tr>
<td></td>
<td>Most of the people I meet are likable.</td>
</tr>
<tr>
<td></td>
<td>I usually think carefully about something before acting.</td>
</tr>
<tr>
<td></td>
<td>I like to do new and different things.</td>
</tr>
<tr>
<td></td>
<td>My daily life is full of things that keep me interested.</td>
</tr>
<tr>
<td></td>
<td>I would be willing to describe myself as a pretty &quot;strong&quot; personality.</td>
</tr>
<tr>
<td></td>
<td>I get over my anger at someone reasonably quickly.</td>
</tr>
</tbody>
</table>
APPENDIX E

Resiliency and Extra-curricular Activity Scatterplot
REFERENCES


to prosocial behavior. Journal of Applied Developmental Psychology, 10, 227-239.
