

**SOCIAL SUPPORT SYSTEM FOR CHILDREN IN  
GOVERNMENT RESIDENTIAL CARE  
INSTITUTIONS IN PATTANI,  
THAILAND: CHILD CAREGIVERS'  
PERSPECTIVES**

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GOVERNMENT RESIDENTIAL CARE  
INSTITUTIONS IN PATTANI,  
THAILAND: CHILD CAREGIVERS'  
PERSPECTIVES**

by

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## **LIST OF ABBREVIATIONS**

CRC	Convention on the Rights of the Child
FGD	Focus Group Discussions
MCA	Malaysian Child Act
MSF	Ministry of Social and Family Development
NGO	Non-Governmental Organizations
UNCRC	United Nations Convention on the Rights of the Child

## **LIST OF APPENDICES**

Appendix A Interview Guidelines (English version)

Appendix B Interview Guidelines (Thai version)

**SISTEM SOKONGAN SOSIAL KANAK-KANAK DALAM INSTITUSI  
PENJAGAAN KERAJAAN DI PATTANI, THAILAND: PERSPEKTIF  
DARIPADA PENJAGA KANAK-KANAK**

**ABSTRAK**

Di Negara Thailand, institusi pusat penjagaan dan kediaman kanak-kanak sektor kerajaan merupakan pilihan terakhir untuk kanak-kanak yang terdedah dan kurang bernasib baik bagi melindungi golongan ini daripada bahaya dan menyediakan kualiti hidup yang lebih baik. Tujuan kajian ini adalah mengkaji sistem sokongan sosial kanak-kanak dalam institusi penjagaan dan kediaman agensi kerajaan di wilayah Pattani, Thailand. Penyelidikan ini bertujuan menyiasat bagaimana institusi penjagaan dan kediaman kanak-kanak boleh meningkatkan potensi jalan penyelesaian dalam untuk mengukuhkan dan meningkatkan kesejahteraan kanak-kanak. Dalam kajian ini, 12 responden dipilih untuk ditemubual dengan menggunakan kaedah temubual separa struktur yang terdiri daripada pekerja pengasuh kanak-kanak dan dua perbincangan kumpulan fokus dijalankan dalam kalangan pegawai dan pekerja khas kanak-kanak yang berkaitan dengan perkembangan kanak-kanak di Pattani Home for Girls. Fokus perbincangan dan data dikumpulkan bagi melihat bagaimana sistem mekanisma terbaik daripada pelbagai agensi kerajaan bagi membantu ke arah kesejahteraan hidup kanak-kanak. Kaedah analisis tematik telah dijalankan bagi menganalisis hasil penyelidikan ini. Hasil kajian menunjukkan bahawa sokongan daripada pelbagai sektor adalah penting untuk menentukan cara yang ideal untuk menyokong perkembangan kanak-kanak dalam penjagaan kediaman kerajaan. Kajian itu juga mengesyorkan sistem kebajikan kanak-kanak kerajaan perlu mengukuhkan rangkaian sokongan untuk kanak-kanak

dalam penjagaan kediaman kerajaan, terutamanya persediaan para responden bagi menghadapi kehidupan selepas mereka meninggalkan pusat jagaan. Tambahan pula, hasil kajian menunjukkan bahawa pemahaman dari aspek budaya, bahasa, sistem sikap, kepercayaan dan nilai masyarakat adalah penting untuk membangunkan dasar kebajikan yang sesuai di Wilayah Selatan Thailand.



**SOCIAL SUPPORT SYSTEM FOR CHILDREN IN GOVERNMENT  
RESIDENTIAL CARE INSTITUTIONS IN PATTANI,  
THAILAND: CHILD CAREGIVERS' PERSPECTIVES**

**ABSTRACT**

In Thailand, government residential care for children is an option for vulnerable and disadvantaged children when no other options exist to protect them from harm and to provide a better quality of life for them. The purpose of this study was to examine the social support system for children in government residential care in Pattani, Thailand, and to investigate how such sectors associated with the children could indeed enhance potential solutions in the support system to strengthen and improve child wellbeing. In this qualitative study, 12 semi-structure interviews of child caregivers and two focus group discussions of officers and child special workers related to the development of children at Pattani Home for Girls were assembled to gather perspectives on child support from various sectors and to generate adequate support for the children. Following that, a thematic analysis was carried out. The results of the study indicate that support for various sectors is important for determining the ideal ways to support the development of children in government residential care. The study also recommends that the government child welfare system should strengthen the support network for children in government residential care, particularly in terms of coping with life after they leave care. Furthermore, the study suggests that understanding a society's culture, language, attitude system, beliefs, and values is critical for developing appropriate welfare policies in places such as Southern Thailand.

# **CHAPTER 1**

## **INTRODUCTION**

### **1.1 Introduction**

This study investigates the impact of the social support system on children who were placed in government residential care in Pattani, Thailand. Specifically, it discusses the importance of the social support system and the wellbeing of the children. This chapter contains the background of the study, the statement of the problem, the research questions, the purpose of the study, the significance of the study, and the scope of the research.

### **1.2 The Background of the Study**

Globally, destitution and social avoidance are considered critical driving variables in settling children into alternative care (Ramu, 2018; Greer, 2019). Poor families give away their children to elective care because of financial problems and the inability to protect them from harm and related dangers (Pac et al., 2017). In some instances, evidence suggests that some of these indigent families believe that giving away their children affords the children the opportunity to access basic and fundamental care such as education and social wellbeing. As such, there has been an increase in placing children in elective and residential care as an alternative to supportive interventions.

Available global statistics indicate that more than 2.7 million children are living in residential care homes (Petrowski et al., 2017), and sadly, most of these children require such support because of prior histories of maltreatment, abuse, and neglect (Steenbakkens et al., 2018). Characteristically, painful experiences from

maltreatment and disconnect from the children's biological parents may eventually affect the developmental and mental health of the children. A shortfall of this situation is that children exposed to varying levels of risk are voluntarily and involuntarily admitted into foster care. Accordingly, while voluntary placement may occur when a biological parent or lawful guardian is unable to care for a child, involuntary placement occurs when a child is removed from their biological parent or lawful guardian due to the risk or actual occurrence of physical or psychological harm. However, the main reasons for the voluntarily and/or involuntarily admission of children into elective care are primarily for better wellbeing and stability (Turney & Wildeman, 2017; Cage, 2018; Fernandez et al., 2019).

For Thailand, recent data (2019) from the Department of Children and Youth shows that 6,513 children and youth are staying in 30 government residential care homes around Thailand, managed under the Ministry of Social Development and Human Security. Around 45% of children who are placed in government residential care have special needs, including behavioral problems and abused children, at around 25%. Children with physical disabilities were at 11.5%, children who are HIV+ or affected by HIV were at around 10%, children and around 1% of children who have multiple problems.

Child wellbeing is a holistic approach that entails strategies and indicators for understanding children, the quality of life they require, and the attendant factors required to improve their social and mental capabilities (Wong et al., 2019). Also, self-realization and improving the general conditions of children are critical components of children's wellbeing (Chu et al., 2010). Where the above are not in place, especially in transition processes, it has been noted that children who experience multiple transitions in family structure may fare worse developmentally,

behaviorally, psychologically, and otherwise than children raised in stable two-parent families and maybe even stable single-parent families (Fomby & Cherlin, 2007; Hurren et al., 2017; Rackin & Gibson-Davis, 2018).

Basically, behavioral problems contribute to children's poor long-term outcomes (Octoman & McLean, 2014), and instability within a family portends potentially harmful and negative consequences for the lives of children and their families at large. Furthermore, children who live under the conditions of poverty and deprivation face a growing risk with the combination of all factors, such as environmental conditions, access to education, the conditions of schools, and health services. Hence, in order to improve the wellbeing and the provision of basic needs of children in foster care facilities, having a strong social support system in place to support this care and upbringing of children in foster care is worthwhile.

A social support system is the one resource clearly likely to be the most effective in ensuring the wellbeing of children in residential care, as such systems help address the impact of challenging behaviors and their exact needs (Octoman & McLean, 2014). Social support plays a critical role in the upbringing of children, especially as they transit from childhood to adulthood (Fomby & Cherlin, 2007; Okpych et al., 2018; Leon & Dickson, 2019). Besides, social work intervention may be one aspect of the support system that helps improve the wellbeing of children in residential care with a holistic social services approach to commitment to human rights and advocacy within a multidisciplinary and multi-agency environment. Social workers help reduce the effects of trauma, contribute to child-centered planning and the increased stability of placements (Zufferey & Gibson, 2013). However, the experiences and perceptions of child welfare professionals are important in working progress with the children in foster care placement and affect the wellbeing of the

children as well (Hong et al., 2011).

As well, it is critical that children receive support from a variety of sources, including friends, relatives, neighbors, and support groups, in addition to the formal support provided by various services tasked with the protection of individuals and social services. This type of support reduces the risks for the children and eventually prepares them for life outside of residential care (Fuentes-Peláez et al., 2016).

Moreover, because the United Nations Convention on the Rights of the Child (UNCRC) stresses the importance of family in children's lives and emphasises the direct responsibility of governments to promote family care and reunification, and to provide appropriate alternative care for all children who have lost the care of their parents. In the same way with the Convention on the Rights of the Child (CRC), which is an agreement between countries to obey the same laws to protect children's rights, the right toward a good quality of life for all the children.

The CRC states that every child has the right to live with his or her parents or to stay in touch with them, unless this would harm the child's development (United Nations, 1989). Thailand has been a party to the CRC since March 27th, 1992 (United Nations, 1995) and ratified, among others, the provision of foster care, where it provides that a child who is temporarily or permanently deprived of a family environment is entitled to special protection and assistance provided by the state. Children who are unable to live with or who have to be separated from their parents for certain reasons, such as the death of the parents, abandonment, neglect, or abuse, have the right to protection and assistance from the government. Alternatively, the government has the obligation to provide alternative care for these children, for instance through foster placement, adoption, or, if necessary, institutional care (Assembly, 1989).

Pattani is one of the provinces in Thailand that has government residential care for children called "Pattani Home for Girls". Most children admitted to this facility had family histories of infelicitous care, poverty, abandonment, and life experiences characterised by abuse, neglect, domestic violence, and parental substance abuse. The Pattani Home for Girls has the aim of providing a safe space and strengthening the capacity of the children and youth in the institutions to live happily in society after discharge (Annual Report of Pattani Home for Girls, 2019). In 2019, the Department of Children and Youth of Thailand selected Pattani Home for Girls as a residential care model to develop a plan of reintegration with a productive life after their discharge from residential care.

The department further submitted that it would be good to focus on the social support system as a way of taking care of the children, as it will help them while they are in residential care and thereafter. As such, conducting this study in a residential care home for children like Pattani Home for Girls will be a worthwhile research endeavor. The findings will aid in the development of a model for the evidence-based integration of social support systems that is diverse enough to meet the needs of children in residential care, particularly those with special needs.

It is on the basis of the above submissions that this study is being embarked upon to identify the proper social support system that can be put in place to support the development of children in residential care settings. This study intends to specifically examine the social support system with a specific focus on children with special needs. Basically, the development of the wellbeing of children is one of the reasons for necessitating the strengthening and building of child-friendly institutions to help better the lives of children and prepare them for society at large upon their leaving residential care settings. This empirical endeavor is thus worthwhile.

### **1.3 The Problem Statement**

Children in residential care represent a special-needs population due to their prior trauma, risk of adverse outcomes, and unmet mental health care needs (Jee et al., 2010). Moreover, for fostered young people, many underlying vulnerabilities from past experiences surface and affect their capacity to manage the tasks of adolescence. Foster care children are also at risk of developing a range of behavior disorders, such as empathy difficulties, oppositional reluctance, and sexualized behaviors. Hence, the effects of these disorders are considered in the context of multiple risk determinants, particularly those of tireless abuse connected to persistent maltreatment (Oswald & Goldbeck, 2009; Gypen et al., 2017; Pirttimaa & Väливаara, 2018). Additionally, these disorders also affect their academic performance, which has led to abysmal grades in a number of subjects (Zima et al., 2000; Häggman-Laitila et al., 2018). Succinctly put, children who are in residential care often experience different kinds of trauma and severe relationships with their peers and people of related and unrelated socio-demographic characteristics around them (Schwartz, 2010).

Children and youths in residential care are noted to present poorer psychosocial functioning than children with their biological parents. Children in residential care have high rates of emotional and behavioral problems, with attendant psychopathological challenges (Oswald & Goldbeck, 2009). They are also likely to have experienced abuse, neglect, and pre-placement trauma (Jee et al., 2010), which eventually affect their entire being and existence (Octoman & McLean, 2014). These and related issues have been shown to have a negative impact on these children even after they have been released from residential care (Rubin et al., 2009). On a related note, children in residential care, while faced with the challenge of adjusting to

temporarily leaving their biological families, are also faced with the challenge of being able to cope with forming relationships with new adults and peers, along with all the other challenges thrown at them for being in residential care (Swick, 2007). Following on from the problems mentioned above, conducting comparative research aimed at identifying similarities and differences in the support provided for the children and identifying better intervention strategies is appropriate (Whittaker et al., 2016; Islam & Fulcher, 2017).

In Thailand, government residential care for children is a choice when no other choices are available to vulnerable and disadvantaged children so as to protect them from harm and with the aim of providing a better life for them (Kamolirisakul, 2017). It is thus the government's responsibility to assist and protect children in finding meaning in their lives. Although the government-run residential care for children in Thailand has provided services in various fields, the children still have problematic behavior, difficulty adapting to other people and low self-esteem while living in the residential care. Furthermore, according to an annual report of the Department of Children and Youth in 2019, only 10% of the children who were placed in government residential care can conduct them effectively after they leave government residential care.

A more holistic approach to caring for children and youths in residential care in Thailand has encountered difficulties, particularly in government-owned residences. One of the development plan's strategies focuses on the issue of supporting children and youths at the community level, which requires collaboration and support from a wide range of multi-sectorial settings (i.e., family, school, formal and informal organizations, and community) to determine the best way to protect and uplift the children over the long term (The National Child and Youth Development



Promotion Commission, 2017). However, less attention has been paid to determining the best way to protect and uplift the children over the lengthy period. Along with the lack of a standardized and shared child database, there are still gaps in delivering individualized care, undertaking thorough case management, and reintegrating children into family-based care (Hemmanee & Kaewpila, 2018). Inadequate information exchange and coordination across sectors and organizations engaged in the management of children in government residential care is another issue (UNICEF, 2015). In addition, the official plan for residential care for children by the Thai government lacks clear roles and responsibilities for each agency, as well as ways to communicate, coordinate, and hold people accountable (Quinley, 2018; UNICEF, 2015).

Unfortunately, residential care for children in Thailand still lacks the fundamentals, including qualified personnel, adequate resources, specialized care and assistance at the community level, and most crucially, social workers for children with special needs (UNICEF, 2015; Boonmaneeprasert, 2018). In consequence, staffing and space limitations hinder the facility's ability to offer individualized care for children. In addition, further research is required to determine the best possible care for these children (Boonmaneeprasert, 2018).

In addition, the Committee on the Rights of the Child attempted to harmonize diverse Thai national legislation pertaining to the care of children. They developed overlapping and uncoordinated duties and responsibilities across government entities, which previously hindered the effective operation of different initiatives, intended to improve the lives of children in residential care in Thailand (UNICEF, 2015). Subcommittee appointments are made from the top down, and membership is typically changed every two years. In rare instances, subcommittee terms are

unexpectedly cut short. This finally led to a gap in the continuity of initiatives designed to improve the lives of children living in residential care institutions controlled by the government. Similarly, it had a detrimental influence on the creation and execution of programs and welfare policies intended to improve the lives of children in government residential care institutions (UNICEF, 2015).

Several empirical studies have been conducted to investigate specific government plans for reintegrating children from residential areas into multicultural society (Quinley, 2018; Suwanasaeng et al., 2018; Karnjanavanich et al., 2014). Unfortunately, these studies are limited in scope and do not capture the basic essence of the government's plan to address the psychological, physical, and emotional needs of children in residential care, especially those with special needs. In addition to the above, the southern Thailand border provinces, which have a diversity of cultural and social differences, do not have standard government policies and specific plans for addressing the needs of children with special needs in residential care (UNICEF, 2015; Annual Report of Pattani Home for Girls, 2019).

Studies on the social support system for children in residential care are scarce, and more so for children with special needs. Empirical submissions also noted the almost unavailability of studies on child welfare plans in Thailand, and there is limited knowledge about the current and long-term holistic social support outcomes of government residential care for children with special needs in specific Thai contexts. The presence of these would have facilitated the availability of evidence-based strategies for the design of policies and attendant programs aimed at the better management and care of government-owned residential care and special-needs children (Quinley, 2018; Boonmaneeprasert, 2018; Gomaratur et al., 2018; Pantayang et al., 2018; Chanarnupap & Tongkachok, 2017; UNICEF, 2015). The

above positions have been supported by related studies (Suwanasaeng et al., 2018; Pantayang et al., 2018; UNICEF, 2015), but attempts to validate and revalidate these positions have been lacking. To add to it, the current report on the relationship between the policy of the Thai Child Protection Act 2003 and the intervention of children in residential care is still thin (Pantayang et al., 2018; UNICEF, 2015).

Furthermore, according to a UNICEF report on the situation of children in government residential care in Thailand, there are limited resources and a lack of community-level support and expert care for children in government residential care, particularly for children with special needs and specific identity areas. As well, the findings of several polls (Karnjanavanich et al., 2014; UNICEF, 2015; Quinley, 2018; Suwanasaeng et al., 2018) show that there is no clear-cut direction from the government on how to prepare children for integration into a heterogeneous community like Southern Thailand, as this position is also supported by the annual report of the Pattani Home for Girls 2019.

Overall, there is little knowledge (Boonmaneeprasert, 2018; Gomaratut et al., 2018; Pantayang et al., 2018; Quinley, 2018; Chanarnupap & Tongkachok, 2017; UNICEF, 2015) about the current and long-term holistic social support outcomes of government residential care for children in the Thai context. It is thus expected that this study is capable of facilitating evidence-based findings for the design of a proper policy plan to give a better life to children eventually (Quinley, 2018). Also, there is a need for research that should elicit views from children in residential care in Southern Thailand who are noted to be from diverse multicultural backgrounds.

Also, the previous studies (Suwanasaeng et al., 2018; Pantayang et al., 2018; UNICEF, 2015) showed that it is important to include the reflection of government

welfare from the bottom to the top, since the structure of government residential care plans for the children in residential care in Thailand was written based on the convention on the rights of the child (CRC) and the Thailand Child Protection Act 2003, so that the reflection from the children will be necessary to study as well. To add to it, the current report on the relationship between the policy of the Thai Child Protection Act 2003 and the intervention of the children is still thin (Pantayang et al., 2018; UNICEF, 2015).

In view of the above submissions, this study aims to holistically examine the social support system at any level of the children who have risen from government residential care in Thailand. Additionally, this study bring to light the forms of care that best supported the children, with a view towards further improving their overall wellbeing while in government residential care. Furthermore, this study identified the possible ways to implement suitable child support in terms of providers for the children in order to improve the children's lives in the future.

#### **1.4 The Study Questions**

Given the issue experienced by children in government residential care for children in Pattani, Thailand, this research seeks to explain these questions:

1. What is the current social support system received by children in government residential care in Pattani?
2. What are the challenges or issues of social support system for children in government residential care in Pattani?

3. What are the social supports needs of children in government residential care in Pattani?
4. How to focus on strength of the social support system for children in government residential care in Pattani?

### **1.5 The Study Objectives**

The main aim of this study is to examine the social support system and wellbeing among children living in government residential care for children in Pattani province of Thailand. Specifically, the aims of this study are:

1. To explore the current social support system for children in government residential care in Pattani.
2. To analyze the challenges of social support system for children in government residential care in Pattani.
3. To examine the social support needs for children in government residential care in Pattani.
4. To suggest possible solutions for strengthening the social support system for children in government residential care in Pattani.

### **1.6 The significance of the Study**

This study contributed to the understanding of the social support system and wellbeing among children in a government residential care institution in Pattani, Thailand. According to the information provided before, children who experience many transformations in family structure are at a greater risk than children from

stable families. A deficiency of this scenario is that many children are forced to remain in residential care, which was established by the government to offer a greater standard of living and safeguard them from the risks of being unattended. Consequently, the objective of this study is to investigate the role of the social support system in the transition to wellbeing of children in government residential care in Pattani, Thailand. This study attempts to provide an understanding of the challenges faced by social support systems at all levels and the support needs of children.

On the basis of the effect of social support challenges and children's support needs, the study's findings recommended a solution for increasing the social support system for sectors involving children in government residential care institutions and ensuring proper child welfare. In addition, the finding has contributed to social work education and practice, particularly in terms of empowering children and interacting with the community around them, as well as the development of specialized assistance programs or plans pertaining to certain aspects of children's lives. Moreover, the findings were used to develop a specific child welfare program based on Thailand's government policy for children and the culture of the area, especially in southern Thailand. The goal was to build a strong community that would aid the children in becoming productive adults and assist the children in the long term when they leave residential care.

### ***Significance to Social Work Practice***

Since social work is a unique profession aimed at ensuring the wellbeing of people, and especially children (O'Hare, 2015), children's social workers are devoted to helping children the best they can in their environment. Also, a children's social

worker provides services to children in need, helping them obtain benefits and services from various government welfare and community support schemes for coping with significant changes in their lives and for better wellbeing (Schütz et al., 2015; Haslam et al., 2012; Butler & Hickman, 2011). For this study, the following additional significance is noted:

1. The study assists the children to identify and resolve or minimize problems arising out of disequilibrium between themselves and their environment, which contributes to the wellbeing of the children in government residential care institutions.
2. The findings assist social workers in determining an appropriate social work practice to improve the wellbeing of children, especially those with special needs.
3. Knowledge is an identified resource of social support that uplifts the children in government residential care and provides networks for social work intervention with these children.
4. The government can tap into the findings to improve the effectiveness of social work with the children in government residential care institutions in a specific area.

### **1.7 The Scope of the Study**

This study focused on children in government residential care institution in Pattani, Thailand. However, it was imperative to note that the findings from this study were only applicable to the government-supervised children examined and was not representative of all children in residential care in Thailand. This study

theoretically focused on the current social support system, the challenges of the social support system, and the social support needs of children in residential care based on the children's support system while living in government residential care. The requirements of children and experiences of child caregivers, officers in government residential care, and specialist workers from outside sectors were examined in the course of this research.

## **1.8 Organization of the Thesis**

The thesis was organized into five chapters. Chapter 1 is an introduction to the background of the study and the statement of the problem. It then explains the specific research objectives, research questions, and significance of the study.

Chapter 2 presented a review of the literature that involves the wellbeing of children in alternative care, the social support system for children in government residential care, social work practices, government residential care for children, as well as previous studies regarding government residential care for children in Thailand. This chapter shows the theoretical framework and conceptual research model of this study.

Chapter 3 described the methodology and research design of the study. It shows the sampling plan, research instruments, data collection process, data analysis approach, and ethical considerations.

Chapter 4 discussed the findings of the study and provided a concise overview of data analysis. A thematic analysis was employed, and the identified main and sub-themes are presented based on the theoretical and conceptual framework. Results from the data analysis used to answer the four research questions



raised in Chapter one.

Chapter 5 concludes the thesis by discussing the research results and providing recommendations to further improve the social support system for children in government residential care in Thailand.

## CHAPTER 2

### LITERATURE REVIEW

#### 2.1 Introduction

The objective of this chapter is to provide a review of the relevant literature concerning the social support system and the wellbeing of children in government residential care. There are five sections in this chapter. The first section begins with a review of the wellbeing of children in alternative care. This section clarifies the wellbeing of children in residential care, which includes the wellbeing of children, children in multicultural societies, and the risk of children in residential care. The second section describes the social support system that involves children in government residential care, such as the impact of children's development on social support, social support in multicultural society, the child welfare system for children in residential care, and the support and role of non-government organizations and other sectors of aid. The third section elaborates on social work practice and children in residential care. The fourth section focuses on government residential care for children. This section consists of government welfare for children in government residential care in any region, government welfare in Thailand, government residential care for children in Pattani, and also previous studies regarding government residential care for children in Thailand. Finally, this chapter presents the theoretical and conceptual framework of the current study.

## **2.2 Wellbeing of Children in Alternative Care**

### **2.2.1 Wellbeing of Children**

The World Health Organization has described wellbeing as a state of complete physical, mental, and social wellbeing, instead of simply the absence of illness. As well, wellbeing has evolved as an overarching concept that is widely accepted to describe people's quality of life (Rees et al., 2009). Conceptualizations of “wellbeing” arose from a larger trend of demedicalizing health and encouraging governments to consider a wider variety of factors that contribute to poor health other than illness or its non-availability.

According to the Government Office for Science Foresight Report on Mental Capital and Wellbeing (Beddington et al., 2008), wellbeing is indeed a dynamic state that is amplified once persons are capable of achieving their personal and social targets while also feeling a feeling of mission in society. Rather than being static, happiness emerges from how people interact with the world around them at different levels of resolution. It is not always the same as being happy, because nervousness, depression, and frustration are all ordinary parts of life. Furthermore, self-concept matters; people who have a positive self-image obtain more, are healthier, happier, and do more with life. Hence, strengthening one's self-concept is essential for psychological wellbeing and maximizing human potential, from slightly earlier development and school success to wellness and wellbeing, and empowering the potential of our most underprivileged and awarded groups. As a result, self-concept presents a potential platform for notifying approaches to reduce some of today's social matters (Marsh & Craven, 2006).

Adamson et al. (2007) carried out a comparative study of children's wellbeing in rich countries, including children living in extreme poverty, children living in homes with no employed adult, and children living in homes with few educational materials as factors of low wellbeing within the scope of “material wellbeing”. Moreover, there is growing recognition that objective criteria of happiness are insufficient for policy development, and that subjective indicators based on individuals' identity of aspects of life such as happiness, social connectedness, perceived quality of life, and life satisfaction are also considered necessary.

As per the Child Wellbeing in Europe study, there is no link between poor child wellbeing and the pervasiveness of damaged families. A recent review of the evidence on family breakdown and children's wellbeing also came to a conclusion. The extent to which parents and children “get along” appears to be more important to children's subjective wellbeing than family structure. A survey of schoolchildren conducted by the Children's Society (Rees et al., 2009) discovered that family conflict had the strongest correlation with child frustration, and that a simple measure of how families were getting along could explain 20% of the variability in children's wellbeing. As well, the study by Gutman and Feinstein (2010) indicated that positive family relationships were linked to improvements in children's wellbeing.

According to the findings of Uyan-Semerci and Erdogan (2014), children living in poverty and deprivation face an increasing risk due to the interaction of all factors such as environmental conditions, school access, school conditions, medical services, and specialist workers. Children raised in stable, two-parent families experience more stress than children raised in stable, single-parent families, and possibly even more so. Their levels of behavior problems, for instance, are

comparable to children from single-parent families but larger than children from two-biological-parent families (Fomby & Cherlin, 2007). Correspondingly, children born into poor families have lower child wellbeing, which can have long-term consequences (Pickett & Wilkinson, 2015).

Moreover, as evidenced by Manner's (2015) findings, cohabitation is associated with a number of factors that have the potential to negatively impact children's wellbeing. Most relevantly, cohabitation is frequently a sign of family instability, and family instability is strongly linked to poorer outcomes for children, as children born to cohabiting parents perceive their parents divorce more frequently than children born to married parents. In reality, being born into a cohabiting family prepares children for later instability, as children born to cohabiting parents appear to have shortfalls in psychosocial wellbeing. Furthermore, Stable cohabiting families with two biological parents, on the other hand, appear to provide many of the same health, cognitive, and behavioral benefits as stable married biological parent families. Since there are so many potential pathways in and out of families during adolescence, family transitions are associated with delinquency, depressive symptoms, drug use, and earlier age at first sex, teenage motherhood, lower school engagement, poorer grades, and lower graduation.

Besides the fact that the average child stays in foster care for about two and a half years (AFCARS, 2006), foster care placement is aimed to be a temporary living arrangement whereas resettlement or adoption goals are decided to pursue. During a foster care episode, more than half of all children (56 percent) will have at least one placement interruption. Moreover, 11 percent of these displaced foster children will have three placements, 6 percent will have four different foster homes, and 10 percent will have five or more different foster placements (AFCARS, 2006). Such

repeated placement disruptions have been identified in the literature as having a negative impact on the wellbeing of foster children (Kenrick, 2000).

Recent legislation aimed at accelerating the permanent placement of foster care children in order to reduce the number of placements experienced during long-term foster care. The Adoption and Safe Families Act of 1997 (PL105-89) called for more timely development of a permanency plan and termination of parental rights where appropriate. Many child welfare departments utilize concurrent planning to expedite the foster care and permanency processes. In fact, it entails pursuing multiple permanency plans at the same time to reduce the length and number of placements in the foster care system. Alternative solutions, such as adoption or permanent placement within the wider family, are also being investigated as soon as possible while family reunification is ongoing.

Despite the fact that reunification is the preferred outcome for children in foster care, situations involving intractable intra-familial abuse and neglect frequently prevent this goal from being realized (Arad, 2001). Fewer than half of the 517,000 children in foster care in 2004 maintained the case goal of family reunification (AFCARS, 2006). It has been demonstrated that children who have experienced the most abuse and neglect prior to being placed in foster care are also the least likely to be reunited with their biological families (Schweiger & O'Brien, 2005). As a result, more research is needed to determine how the social support system could help reduce posttraumatic stress reactions and improve wellbeing, including social reunification for children who have been taken into care.

### **2.2.2 Children in Multiculturalism Society**

Multiculturalism may also have huge consequences for overall success and better national functioning (Schwartz et al., 2006). Multiculturalism is also associated with higher academic achievement in children and adolescents (Regner & Loose, 2006). When these academically successful children grow up, they might well be able to make important contributions to society.

Different acculturation attitudes are linked to different patterns of change in psychosocial outcomes over a year. Those with "integrationist" attitudes showed the steepest (and significant) temporal increases in social competence and peer acceptance, while those with other perceptions changed much less (and not significantly). Eventually, it was offered that those with "integrationist" attitudes had rising emotional problems at a later time point, even when prior individual differences in emotional problems were controlled for. Finally, the majority of ethnic minority children displayed an "integrationist" orientation, indicating that they felt comfortable engaging with the majority culture while also sustaining their own cultural identity. As a result, the challenge for parents, teachers, and community leaders will be to discover ways to encourage the former and overcome the latter. (Brown et al., 2013).

Moreover, Ladlia (2010) conducted a study on early childhood children's tolerance in a multicultural group in Yala, Thailand. The findings revealed that the principle of the teaching model to improve early childhood children's tolerance in the multicultural group in Yala province, Thailand, was the respect for differences between individuals through the use of local and national literature for the children. This had an influence on the children's satisfaction of learning and spending time

with their friends. Furthermore, parents and the community participate in the learning organization, which leads to improvement in learning together as well as value understanding from tolerance and a desire for the children's lives to be productive. Most importantly, those using teaching model in their classroom must really be culturally neutral. They should also understand each society's culture, language, mindset system, beliefs, and value systems.

In addition, multicultural education should be two-way in order to maintain a balance between cultural diversity and cultural unity. It must also encourage all children to learn about their differences and similarities. Children will be encouraged to bond with one another, and sharing their experiences with others will help them to see redundancy and uniqueness (Choi, 2010).

### **2.2.3 Risk of Children in Residential Care**

A child who has been stripped away from their biological parent's home and placed with a foster family or in government residential care may have many reasons to expand their horizons. Substance abuse, physical or emotional neglect, caregiver domestic violence, or even mental illness in the parent or caregiver may all be reasons for the child's removal. Children in the foster care system constantly encounter difficulties in life (Palmieri & La Salle, 2017).

Residential care for children is a living arrangement and intervention designed for children who are found to be living in at-risk home environments by a child protective services worker or a court (Bruskas, 2008). In most cases, placement in alternative care is intended to be a temporary arrangement. The goal of returning children to their communities and families as early as possible after concerns about their welfare and protection has been clarified (Carbone & Friends, 2007).



Robin et al. (2009) investigated the impact of placement stability on the wellbeing of children in residential care. The findings demonstrated that, regardless of a child's problems at the time of admission, placement stability can impact wellbeing for children including out care. Despite of a child's baseline risk for instability, children who did not achieve placement stability were approximated to have a 36%–63% increased risk of behavioral problems compared to children who did accomplish any stability in foster homes.

Berger et al. (2009) presented findings from a study on the impact of out-of-home placement on child wellbeing that addressed the issue of selection bias. They discovered that out-of-home placement is linked to an increase in child behavior problems. In relation, Jee and colleagues (2010) presented a study on the social emotional problems of young children in residential care, which revealed that children in residential care are at a high risk of developing social emotional problems, particularly if they have experienced abuse, neglect, or trauma. Foster care children require specialized mental health care due to the risk of negative outcomes.

Sylvia et al. (2010) showed that foster care youth exhibit poorer psychosocial functioning than their peers. For instance, high rates of emotional and behavioral problems, as well as psychopathology, have indeed been evidenced in this population. This study also found high rates of PTSD in foster children, and also a difference in PTSD risk depending on the type and length of time of maltreatment. The lack of developmentally appropriate diagnostic criteria complicates the identification of trauma-related disorders in foster children. Foster children have a wide range of developmental problems and psychopathology. The causative agents of these disorders will be discussed in light of multiple risk factors, particularly persistent maltreatment.