

UNIVERSITY OF EDUCATION, WINNEBA



**SOCIO-EMOTIONAL EXPERIENCES, CHALLENGES, AND COPING
STRATEGIES OF FOSTER CHILDREN IN BREMAN ESIAM
COMMUNITY, GHANA**

SAMUEL CATO

MASTER OF PHILOSOPHY

2024

UNIVERSITY OF EDUCATION, WINNEBA



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STRATEGIES OF FOSTER CHILDREN IN BREMAN ESIAM
COMMUNITY, GHANA**

**SAMUEL CATO
(200041448)**

**A thesis submitted in the School of Graduate Studies in partial
fulfilment of the requirements for the award of the degree of
Master of Philosophy
(Guidance and Counselling)**

**Department of Counselling Psychology
University of Education, Winneba**

MARCH, 2024

DCLARATION

Student's Declaration

I, Samuel Cato, declare that this thesis, with the exception of quotations and references contained in published works which have been identified and acknowledged, is entirely my own original work, and it has not been submitted, either in part or whole, for another degree elsewhere.

Student's Name

Student's Signature: **Date:**

Supervisor's Declaration

I hereby certify that the preparation and presentation of the thesis was supervised in accordance with guidelines and supervision of thesis laid down by the University of Education, Winneba.

Supervisor's Name: Prof. Mrs. Patricia Mawusi Amos, PhD. (Supervisor)

Supervisor's Signature: **Date:**

DEDICATION

This work is dedicated to my beloved wife Mrs. Gifty M. Cato, and my children Nhyira, Nana Adom, and Aseda Cato.

ACKNOWLEDGEMENTS

The completion of this thesis has been possible due to the remarkable contributions of some people. My sincere appreciation goes to Prof. (Mrs.) Patricia Mawusi Amos, my supervisor for her immersed contributions, time and patience towards my work. Also, my sincere appreciation goes to participants, who through their contributions made this work a success. Finally, I am grateful to my family for their prayers and love showed me all this while.

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ABSTRACT

Bowlby's attachment theory suggests that children experience lasting effects of disconnection if separated from their primary caretaker. Foster children are legally removed from their primary caretakers, yet the socio-emotional experiences of these children as well as the challenges, and coping strategies they use is unknown. Therefore, this study explored socio-emotional experiences, challenges, and coping strategies of foster children in the Breman Esiam Community, Ghana. The study used interpretivism paradigm together with qualitative research approach. The study further used phenomenological research design. A sample of 15 participants were selected using snowballing sampling techniques. Semi-structured interview guide was used to collect data in this study. Data were analysed using themes and the direct quotes. It was found that loss and longing, resilience and connection, building trust and attachment, identity and belonging and loss and grief were key social-emotional experiences of foster children. Also, socio-emotional challenges facing foster children included: navigating loss and abandonment, building trust and attachment and identity and self-worth. Furthermore, resilience and inner strength, forming supportive connections, supportive friendships, and creative outlets, finding support in friendship were major coping strategies adopted by foster children to navigate the complexities of their socio-emotional challenges. Additionally, therapeutic counselling, mentoring, role models and life skills training, educational assistance and advocacy to family-based support were the social support services available to foster children. It was concluded that socio-emotional experiences of foster children highlighted the unique challenges faced by this helpless population and the importance of understanding and addressing their needs. Further, social support systems, including mentorship, role models, educational support, family-based support, counselling, and life skills training helped these foster children in promoting resilience and coping abilities to socio-emotional challenges. It was recommended, among other things, but a resource should be established to offer counselling services to address the unique needs of foster children.

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

According to Buttfield (2019), child development is a broad range of physical, cognitive, emotional, and social changes that take place from birth through the early stages of adulthood (Buttfield, 2019). Over time, children gradually shift from complete dependence on parents or guardians toward greater autonomy and self-reliance. This developmental process involves the acquisition of diverse skills across the lifespan, with socio-emotional development representing a central and foundational domain (Buttfield, 2019). Socio-emotional experiences encompass the ways children understand themselves, manage their emotions, relate to others, and develop a sense of personal worth and well-being. These experiences are shaped through daily interactions, emotional expression, and social engagement within their environments (Kelly, Zilanawala, Booker & Sacker, 2018). In essence, socio-emotional development reflects how children learn about their feelings, interpret social cues, and form expectations about relationships. It includes the ability to build and sustain social connections, regulate emotions appropriately, and explore the surrounding world through interaction and curiosity (Help Me Grow, 2021).

For children in foster care, socio-emotional experiences are often influenced by distinctive and sometimes challenging life circumstances. Separation from biological parents, adjustment to unfamiliar households, exposure to neglect or trauma, and the level of emotional and social support available in foster settings all play a critical role in shaping their development (McLaughlin, Sheridan, Winter, Fox, Zeanah & Nelson, 2014). Within this context, four core dimensions of socio-emotional development are commonly identified: temperament, which reflects a child's typical responses to

different situations; attachment, referring to the formation of emotional bonds with caregivers; social skills, which involve interacting effectively with peers and adults; and emotional regulation, the capacity to manage emotions and reactions across diverse contexts (Alam, 2021).

The concept of fostering does not have a single universal definition, as its meaning varies according to cultural, social, and legal contexts. Broadly, fostering involves the temporary care of a child without the assumption of full legal guardianship. According to Margan, Heather, and Elliot (2019), foster family care refers to the placement of a child with a family other than their biological one due to difficulties within the birth family or while longer-term arrangements, such as adoption, are being finalised. Foster care therefore functions as a full-time alternative caregiving arrangement, providing children with a safe and supportive home environment outside their original family structure. A foster parent is generally defined as an individual who provides care for a child who is not biologically their own, often because the child's parents are unable to do so for various reasons. This role includes offering full-time care and meeting the child's daily needs (Government of Ghana, Ghana Statistical Service & Inner-City Fund, 2018). Foster parents are entrusted with the temporary custody of children who may have experienced abuse, neglect, or other forms of serious adversity. Their responsibilities mirror those of biological parents, including ensuring access to education, healthcare, nutrition, and emotional support (Ghana Statistical Service & Inner-City Fund, 2018).

Foster parents account for approximately 45 percent of foster care placements, while the remaining children are placed with relatives, in group homes, or in other alternative care arrangements determined by child welfare systems (Rush, 2018). A foster child, in this context, refers to a child who is raised by caregivers other than their biological or

adoptive parents. This term also encompasses vulnerable or orphaned children living within foster families or receiving support through community or charitable interventions (Li, Chng & Chi, 2017). In Ghana, the Ghana Statistical Service and Inner-City Fund (2018) define foster children as individuals under the age of 18 who reside in households where neither their biological mother nor father is present. National survey data indicate that approximately 5.4 percent of households in Ghana include at least one foster child, highlighting the relevance of foster care within the country's child welfare landscape (Ghana Statistical Service & Inner-City Fund, 2018). The 2018 Ghana Demographic and Health Survey found that about 4% of children under the age of 18 were living with someone other than their biological parents (Ghana Demographic and Health Survey, 2018). This included children living with grandparents, other relatives, or non-relatives. The survey also found that about half of these children were living in rural areas, and a majority were living in the poorest households. The survey found that these children were more likely to have worse health outcomes and educational outcomes than children living with their biological parents (Ghana Demographic and Health Survey, 2018).

The survey also found that foster children living in foster care tend to experience poorer health and educational outcomes compared to those residing with their biological parents. (Ghana Demographic and Health Survey, 2018). They were also less likely to attend school and had lower literacy rates. However, the survey also found that foster children who lived with a parent figure who had at least a secondary education were more likely to have positive health and educational outcomes (Ghana Demographic and Health Survey, 2018). Again, the survey found that girls in foster care were more likely to marry before the age of 18 and to have their first child during adolescence than their counterparts living with biological parents. Similarly, boys in foster care were more

likely to be out of school and engaged in child labour. These patterns point to significant vulnerabilities faced by foster children and underscore the need for targeted policies and interventions aimed at improving their access to education, healthcare, and social protection services (Ghana Demographic and Health Survey, 2018). In addition, the survey found that foster children were more likely to be living in households where at least one adult had experienced emotional or physical abuse (Ghana Demographic and Health Survey, 2018). This shows that addressing the issue of foster children requires addressing the issue of domestic violence and other forms of abuse in the community (Ghana Demographic and Health Survey, 2018).

Despite these challenges, fostering can be a deeply meaningful and rewarding experience for many families. Foster parents often report personal and family growth arising from their involvement in caring for children outside their biological homes. Some families describe becoming closer as they unite around a shared purpose of supporting vulnerable children (Ahn, Greeno, Bright, Hartzel & Reiman, 2017). Others emphasise the sense of fulfilment that comes from being able to provide stability and care to a child in need (Geiger, Hayes & Lietz, 2013). Foster parents also report feelings of satisfaction when they witness positive emotional, behavioural, or developmental changes in the children placed in their care (Preston, Yates & Moss, 2012). Nevertheless, the entry of children into foster care is often preceded by a difficult and emotionally demanding transition. Removal from the biological home typically involves a series of losses, including separation from familiar caregivers, extended family members, friends, and known routines. These disruptions can be confusing and distressing, particularly when they occur alongside previous experiences of trauma or neglect. As Thibodeau (2013) notes, such transitions are frequently accompanied by anxiety and uncertainty about the future, which may hinder children's emotional

recovery and their ability to form new attachments. The combination of adverse pre-placement experiences, separation-related losses, and instability in care arrangements can further complicate children's healing processes (Thibodeau, 2013).

Maintaining continuity in relationships, with biological family members, is therefore considered an important need for children in foster care (Kothari, McBeath, Lamson-Siu, Webb, Sorenson & Bowen, 2014). Contact with siblings, in particular, can provide emotional stability during periods of uncertainty, as siblings often share similar life histories and experiences (Waid & Wojciak, 2017). At the same time, forming warm and supportive relationships within the foster family is essential to children's well-being. Research consistently highlights the importance of caregiver relationships characterised by trust, emotional closeness, a sense of permanence, and secure attachment (Bell, Romano & Flynn, 2015; Quest, Fullerton, Geenen & Powers, 2012; Steenbakkens, Steen & Grietens, 2018). Attachment theory, traditionally associated with infancy, also applies to older children and adolescents in foster care, as they similarly require caregivers who can serve as a secure base (Ashley & Brown, 2015). Beyond foster parents, other adults, including neighbours, extended family friends, and professionals, can play a valuable role in the social networks of foster children by offering practical assistance, emotional support, and relational continuity (Bell et al., 2015). Positive peer relationships and friendships also contribute significantly to children's sense of belonging and emotional adjustment while in care (Clausen, Ruf, Von Wiederhold & Heineman, 2012).

To foster healthy socio-emotional development, children in foster care must be placed in environments that are safe, stable, and emotionally nurturing (Leloux-Opmeer, Kuiper, Swaab & Scholte, 2017). Foster parents can strengthen children's sense of

security by being consistently available, supporting emotional regulation, reinforcing self-worth, and helping children feel accepted as valued members of the household (Steenbakkens et al., 2018). Evidence suggests that when children perceive their relationship with caregivers as high in quality, their risk of developing depressive symptoms is reduced (Leloux-Opmeer et al., 2017). But it is not very clear that socio-emotional experiences of children living with foster parents in Ghana. It is against this backdrop that the present study seeks to explore the socio-emotional experiences of foster children living in the Breman Esiam community in the Central Region of Ghana.

1.2 Statement of the Problem

Foster care is designed to offer a protective and nurturing environment for children who cannot remain with their biological families because of experiences such as abuse, neglect, or other difficult life conditions. It seeks to ensure that these children have access to stable caregiving, emotional reassurance, and a sense of security during periods of family disruption. Despite its protective purpose, children in foster care frequently face complex socio-emotional challenges arising from separation from primary caregivers, exposure to trauma, and unstable placements (Leve et al., 2012; Oswald et al., 2010; Simms et al., 2000). While these challenges are well documented, current research largely focuses on the outcomes of foster care rather than on children's lived experiences, leaving critical gap in understanding how foster children interpret, respond to, and cope with socio-emotional challenges in their daily lives. Moreover, although socio-emotional adjustment is shaped by cultural and social settings, there is insufficient evidence on how foster children's cultural identities and local community dynamics influence their socio-emotional experiences and coping mechanisms (Ungar, 2013). Much of the existing literature is situated in western countries such as England, the United States, Finland, and Columbia, where foster care

systems are formalized and supported by structured services (Denenberg, 2016; McCullough, 2017; Kiovula & Huttunen, 2018; Doubledee, 2015). Consequently, these findings cannot be directly applied to Ghana, where foster care is predominantly informal, kinship-based, and culturally embedded, highlighting a significant knowledge gap regarding the socio-emotional realities of foster children in local Ghanaian communities.

In Ghana, research on children has largely focused on family narratives or general development rather than the specific socio-emotional experiences of foster children, particularly aged 11 to 18 years (Hosny, Danquah, Berry and Wan, 2020). This absence of child centred qualitative evidence marginalizes the voices of foster children and limits understanding of how foster care arrangements affect their emotional well-being, daily coping strategies, and overall resilience. As result, the appropriateness and effectiveness of the foster-family care model in addressing socio-emotional needs remain largely unexamined (Thompson, DeYoung & Plummer, 2020). Furthermore, while social support services are recognised as essential for promoting foster children's well-being (Lopez & Allen, 2017; Zetlin et al., 2018; Cuddeback, 2004), there is limited understanding of which forms of support are most accessible, effective, and relevant to foster children in Ghanaian contexts. Policies and guidance mechanisms intended to protect foster children's socio-emotional welfare are often weakly enforced, and practical interventions remain insufficiently evaluated, this creates a critical practice gap, where the needs of foster children are systematically addressed despite their vulnerability to neglect, maltreatment, and emotional distress.

In Breman Esiam Community in the Central Region of Ghana, anecdotal evidence suggests that some foster children are exposed to neglect, maltreatment, and socio-

emotional distress, yet these experiences have not been systematically investigated. The absence of empirical evidence on foster children's socio-emotional experiences, challenges, and coping strategies in this local context restricts the development of evidence-based policies, guidance services, and culturally responsive interventions that could enhance their well-being. Therefore, this study seeks to address these gaps by providing a contextually grounded exploration of experiences, challenges, and coping strategies of foster children in the Breman Esiam Community, and available support systems in the Breman Esiam Community. By foregrounding the voices of foster children, this study seeks to fill a critical knowledge gap regarding their lived experiences and a practice gap by generating evidence to inform culturally sensitive foster care practices, guidance services, and child welfare policies in Ghana.

1.3 Purpose of the Study

The purpose of the study was to explore socio-emotional experiences, challenges, and coping strategies of foster children in the Breman Esiam Community, Ghana. The findings aim to deepen insight into the specific challenges these children face and to provide evidence that can guide the design of context-appropriate interventions to strengthen their socio-emotional well-being.

1.4 Research Objectives

The specific objectives of the study are to:

1. Examine the socio-emotional experiences of foster children in the Breman Esiam Community.
2. Identify the socio-emotional challenges facing foster children in the Breman Esiam Community.

3. Explore the coping strategies adopted by foster children to manage the socio-emotional challenges they face in the Breman Esiam Community.
4. Assess the social support services available to foster children in the Breman Esiam Community.

1.5 Research Questions

The study was guided by the following research questions:

1. What are the social-emotional experiences of foster children in the Breman Esiam Community?
2. What are the socio-emotional challenges facing foster children in the Breman Esiam Community?
3. How do foster children cope with the socio-emotional challenges they face in the Breman Esiam Community?
4. What are the social support services available to foster children in the Breman Esiam Community?

1.6 Significance of the Study

The study seeks to explore the socio-emotional experiences, challenges, and coping strategies of foster children in the Breman Esiam Community, Ghana. This study seeks to generate practical evidence that can support the development and strengthening of policies aimed at protecting foster children at both community and state levels. What sets this research apart is its emphasis on listening directly to foster children who have lived with foster parents and are able to speak about their socio-emotional experiences in a safe and supportive setting. The study is grounded in the view that these children carry meaningful stories, insights, and expectations about their lives and futures, and that their voices are essential to understanding what it truly means to grow up within

the foster care system. Existing research highlights that certain stages of childhood are especially vulnerable, and that the absence of a stable and consistent caregiver during these periods can have long-lasting negative effects (Chittom & Geraldine, 2018). When combined with the knowledge generated by this study, professionals working with foster children may be better equipped to intervene early and help prevent outcomes such as chronic emotional distress, homelessness, involvement with the criminal justice system, substance abuse, or exploitation later in life.

The findings may also serve as a valuable resource for counselling psychologists and social workers who support foster children before they transition out of care. Insights from the study can guide more thoughtful practice, including making careful placement decisions, building trusting relationships with foster children, regularly monitoring foster placements, and listening attentively to both children and caregivers. Collaboration with schools, religious institutions, and community-based organisations may further strengthen support systems for these children. Likewise, school counsellors may use the findings to better identify and address academic and emotional challenges that commonly affect children in foster care. Beyond individual practice, the study has important implications for the education system as a whole. By improving understanding of foster children's backgrounds and experiences, educators and counsellors can make more informed decisions about classroom placement and learning support. At the policy level, the findings may inform the creation or revision of laws designed to protect this vulnerable population. State and county agencies may also draw on the evidence to organise training programmes that ensure teachers, caregivers, and parents are aware of existing and emerging policies related to foster care.

Schools may need additional resources to train teachers and counsellors and to put effective support structures in place early in a foster child's life. Importantly, this study also has the potential to strengthen training for new and prospective foster parents by helping them better understand the socio-emotional needs of children in their care. More broadly, the findings may offer clarity and reassurance to individuals seeking guidance, while encouraging collaboration among educators, healthcare providers, law enforcement agencies, and community organisations. Through such coordinated efforts, the study contributes to the broader goal of improving life outcomes for foster children and fostering more hopeful futures for generations to come.

1.7 Delimitaion of the Study

This study focused specifically on the socio-emotional experiences of children living with foster parents. It was further limited to foster children aged 11 to 17 years who reside in the Breman Esiam Community, Ghana. This age group was selected because the researcher believed that these children would be able to reflect on and share their experiences, providing valuable insights to address the research questions guiding the study.

1.8 Limitations of the Study

The study was conducted with a relatively small group of participants, which limits the extent to which the findings can be generalised to all foster children in the Breman Esiam Community. Consequently, the children included in the study may not fully represent the broader population of foster children in the area. Additionally, the study relied on self-reported information from participants, which could be influenced by social desirability. Some children may have provided responses they thought the researcher wanted to hear rather than fully expressing their own experiences or feelings.

Nevertheless, these limitations do not appear to have significantly affected the overall insights and conclusions drawn from the study.

1.9 Operational Definitions of Terms

Abilities: A foster parent's sense of competence or capacity to effectively care for and respond to foster children, particularly those with behavioural challenges.

Attachment and Bonding: Refers to the strength and quality of emotional connections formed between individuals, especially in relationships with caregivers, peers, or close companions.

Challenging Behaviour: In this study, this term describes any behaviour that a foster parent perceives as difficult, problematic, or demanding to manage.

Challenging: Describes situations or tasks that are perceived as demanding and that test a person's abilities or skills.

Emotional Regulation: The ability to manage, control, and express emotions appropriately, including the use of coping strategies to respond to stressful or triggering situations.

Emotional Responses: Observable expressions of emotion, including feelings such as happiness, sadness, anger, fear, or anxiety, as well as the intensity and duration of these reactions.

Empathy and Empathic Responses: The capacity to understand, share, and respond appropriately to the emotions of others with care, concern, and support.

Foster Care: For the purposes of this study, foster care refers to a home-based, non-kin foster family certified in Ghana for at least six months to provide care for children outside their biological families.

Foster Children: Children aged 0–17 years who live with relatives or non-relatives rather than their biological parents, as recorded in household data.

Foster Parent Training: Refers to the preservice and ongoing training that foster parents receive to equip them with the skills and knowledge needed to care for children in their homes.

Foster Parent: Individuals or couples who provide temporary care and a supportive home for children who cannot live with their biological parents, often due to abuse, neglect, or other family-related challenges.

Knowledge: A foster parent's understanding of the behavioural needs of foster children and their perceived ability to respond effectively to these challenges.

Resilience: The capacity to cope with, adapt to, and recover from life stressors or adverse experiences.

Self-Concept and Identity: How an individual perceives themselves, including their values, beliefs, and sense of self-worth.

Skills: A foster parent's perceived proficiency in managing and caring for foster children, particularly in addressing behavioural or emotional needs.

Social Interactions: Observable behaviours and activities through which individuals connect with others, such as making friends, participating in group activities, or seeking support.

Social-Emotional Issues: Matters that affect a foster child's thinking, emotional well-being, perception of reality, or behaviour, potentially resulting in distress or problematic actions.

Socio-Emotional Experience: An individual's personal experiences that involve the interaction of thoughts, feelings, and behaviours in response to social situations or relationships.

1.10 Organisation of the Study

The study report is organised into five chapters. Chapter One provides the background to the study, outlines the statement of the problem, presents the theoretical framework, and explains the purpose of the study along with the guiding research questions. This chapter also highlights the significance of the study, as well as its delimitations and limitations, and includes operational definitions of key terms. Chapter Two discusses on the literature review, examining previous research and scholarly work relevant to the study topic. Chapter Three describes the research methodology, including the research paradigm, approach, and design. It also details the researcher's role, the study area, the population, sample, and sampling techniques. In addition, this chapter explains the data collection instruments, procedures for ensuring trustworthiness, data collection processes, data analysis methods, and ethical considerations. Chapter Four presents the results of the study and provides a discussion of the findings. Finally, Chapter Five summarises the study, draws conclusions, offers recommendations, and suggests areas for further research.

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

The purpose of this study was to explore the socio-emotional experiences, challenges, and coping strategies of foster children in the Breman Esiam Community, Ghana. This chapter presents a review of the related literature and is organised under the following subheadings:

1. Theoretical framework
2. The concept of foster care
3. The concept of social-emotional experiences
4. Socio-emotional challenges facing foster children
5. Coping strategies used by foster children for socio-emotional experiences they face
6. Social supports services available to foster children
7. Research gaps identified
8. Chapter summary

2.1 Theoretical Framework

This study is anchored in Person-Centered Theory and Attachment Theory. These theories provide complementary lenses for understanding the socio-emotional experiences, challenges, coping strategies, and social support systems of foster children in the Breman Esiam Community. While Person-Centered Theory foregrounds children's subjective meanings, agency, and emotional expression, Attachment Theory explains how early relational disruptions shape emotional regulation, trust, and coping patterns. Together, the theories align closely with the exploratory and phenomenological objectives of the study.

2.1.1 Person-Centered Theory

Person-Centered Theory, developed by Carl Rogers (1951), is a humanistic approach to counselling and psychotherapy that emphasises individuals' subjective experiences, self-concept, and inherent capacity for growth. The theory posits that people are best understood from their own perspectives and that psychological well-being is fostered in environments characterised by empathy, unconditional positive regard, and genuineness (Rogers, 1951; 1959). This theory is particularly relevant to the first objective of the study, to explore the socio-emotional experiences of foster children. Foster children lived experiences are often shaped by loss, displacement, and emotional insecurity. Person-Centered Theory legitimises these experiences by prioritising children's voices and meanings, rather than imposing externally defined interpretations of their well-being. In this study, the theory supports an approach that allows foster children to describe their emotions, perceptions, and daily realities in their own terms.

The theory also informs the second objective, which seeks to examine the socio-emotional challenges facing foster children. Many foster children experience trauma, neglect, or emotional invalidation, which can lead to suppressed emotions and difficulties with self-expression (Lago et al., 2015). A person-centered lens interprets these challenges not as deficits, but as adaptive responses to environments that have lacked acceptance and emotional safety. In relation to the third objective, *coping strategies*, Person-Centered Theory emphasizes autonomy, self-direction, and self-efficacy (Bohart & Tallman, 1999). Foster children, who often experience limited control over life decisions, may develop coping strategies that reflect attempts to regain agency. The theory helps explain how supportive, non-judgemental environments enable foster children to recognise their internal resources, articulate their coping efforts, and develop healthier emotional regulation strategies (Greenberg et al., 2013).

Finally, Person-Centered Theory also connects to the fourth objective on social support. From this perspective, social support is effective not merely because it exists, but because it is perceived as empathetic, accepting, and validating. The theory therefore provides a framework for examining whether available support services genuinely meet foster children's emotional needs or merely function at a structural level. Overall, Person-Centered Theory strengthens the study's emphasis on meaning-making, emotional expression, and empowerment, making it theoretically congruent with the study's qualitative design and objectives.

2.1.2 Attachment Theory

Attachment Theory, proposed by Bowlby (1969), focuses on the significance of early caregiver, child relationships in shaping emotional security, social competence, and coping across the lifespan. Secure attachment develops when caregivers are consistently responsive and emotionally available, while insecure attachment often emerges from neglect, abuse, or inconsistent caregiving. This theory is central to achieving the first and second objectives of the study. Foster children often enter care following disruptions in attachment bonds due to separation from biological parents. Such disruptions may manifest as emotional dysregulation, mistrust, fear of rejection, or difficulty forming stable relationships (Dozier et al., 2008). Attachment Theory provides a conceptual explanation for these socio-emotional experiences and challenges, allowing the study to situate children's emotional struggles within relational histories rather than individual pathology.

Attachment Theory also informs the third objective concerning coping strategies. Children with insecure attachment patterns may adopt coping mechanisms such as emotional withdrawal, hypervigilance, compliance, or aggression as ways of managing

perceived relational threats (Stein et al., 2009). The theory explains how coping strategies are often relationally shaped and context-dependent, rather than purely individual choices. This perspective is critical in understanding how foster children in Breman Esiam manage stress within foster homes that may or may not provide emotional security. Regarding the fourth objective, Attachment Theory provides a framework for examining the quality not just the availability, of social support services. Support systems that promote consistent caregiving, emotional responsiveness, and trust-building are more likely to facilitate secure attachments and positive socio-emotional outcomes (Fisher et al., 2015). Conversely, support services that are inconsistent or emotionally distant may reinforce insecurity and emotional distress.

Additionally, Attachment Theory helps explain how maltreatment or emotional neglect within foster placements can exacerbate feelings of helplessness and threat, thereby worsening socio-emotional experiences (Bath et al., 2018). This insight is particularly relevant for interpreting children's narratives about fear, belonging, and emotional safety.

In the nutshell, Person-Centered Theory and Attachment Theory provide a robust framework for addressing the study objectives. While Attachment Theory explains why foster children may experience emotional distress, insecurity, and relational challenges, Person-Centered Theory explains how they make meaning of these experiences, cope with them, and respond to available support. The integration of both theories ensures that the study captures both structural relational influences and individual subjective experiences, thereby strengthening the theoretical foundation and analytical depth of the research.

2.2 The Concept of Foster Care

Children need safe and supportive environments to grow, especially when their biological parents are unable to provide adequate care. The United Nations Convention on the Rights of the Child (UNCRC) recognises this responsibility. Article 20 specifically emphasises that children who are temporarily or permanently separated from their families must be provided with suitable alternative care (United Nations General Assembly, 1989). Foster care is one form of such care, offering children family-like settings that help them develop socially, emotionally, and cognitively. It is widely accepted as an appropriate option for children who cannot remain with their birth families (Ministry of Gender, Children and Social Protection, 2018).

Globally, child protection frameworks stress that governments should act in the best interests of the child, ensuring their survival, development, and protection. Foster care, however, is implemented differently depending on the context. In many Western countries, it includes kinship care, formal foster care, and network care. Researchers have examined these forms extensively, exploring their impacts on placement stability, wellbeing, and long-term outcomes for children (Nelson & Horstman, 2017; Petrowski, Cappa & Gross, 2017). While these studies provide valuable information, they often focus on measurable outcomes, leaving less room for understanding the everyday experiences and emotional lives of foster children.

In Africa, formal foster care is relatively new and less studied. Kinship care has traditionally been the most common form of alternative care, with children being placed with extended family members when their parents cannot care for them (Nelson & Horstman, 2017; Petrowski, Cappa & Gross, 2017).

In Ghana, very little is known about the experiences of children in formal foster care or the perspectives of the caregivers themselves (Foster Care Operational Manual, 2018).

Yet, these experiences are crucial: the quality of relationships between foster children and their caregivers, as well as the overall environment in foster homes, has a major influence on children's emotional adjustment, social development, and the stability of their placements (Maaskant, van Rooij, Bos & Hermanns, 2016).

Historically, foster care has evolved over centuries, particularly in Western countries. In the United States, its origins can be traced back to the English Poor Law of 1562, where children without families were placed with wealthier households, often in return for labor (Jones, 2018). Over time, foster care shifted from a survival-based arrangement to a system focused on protecting children from unsafe or neglectful family situations. Significant legislation, such as the Adoption and Safe Families Act, the Indian Child Welfare Act, and the John H. Chafee Foster Care Independence Programme, has been introduced to safeguard children, provide support to older youth, and address systemic challenges in care provision (Benbenishty, Siegel & Astor, 2018; National Conference of State Legislatures, 2020). Despite these reforms, critiques highlight ongoing challenges, including fragmented implementation across states and limited attention to the emotional and social needs of children in care.

While Western countries have a wealth of research on foster care, there remains a notable gap in Africa, particularly in Ghana, regarding formal foster care. Much of the literature is descriptive, documenting practices or historical developments, rather than analyzing the effectiveness of placements, children's coping strategies, or the quality of social support available. This gap highlights the need for studies that explore the real-life experiences of foster children, the challenges they face, and how caregivers and communities support them. Such research is vital to develop interventions that are culturally relevant and meet the emotional, social, and developmental needs of children

in alternative care. Overall, while foster care has been well-documented in Western contexts, the experiences of foster children and their caregivers in Ghana remain underexplored. Understanding these experiences is essential for creating supportive, child-centered care environments that promote stability, wellbeing, and healthy development.

2.3 History of Foster Care in the Western World

Foster care in the United States dates back to the early 1600s, but it underwent significant changes in the late 19th century with the rise of the Children's Home Society movement. During this period, more children were being removed from their families due to abuse and neglect (Yuri, 2015). The Children's Home Society focused on placing children who could not remain with their parents into family home settings, laying the foundation for the foster care system as it exists today (Leve, Fisher & Kintner, 2019). In the 1960s, there was a strong push to make child protection and welfare services public and accountable to the government. This shift extended to foster care, with state agencies taking responsibility for investigating cases of child abuse and neglect and ensuring that children who could not safely live with their parents were placed in nurturing family homes (Leve et al., 2019). Today, foster parents play a crucial role in supporting child welfare goals, such as reunification with biological parents or placement in adoptive homes, by providing safe and stable environments for children (Chittom & Geraldine, 2018).

People choose to become foster parents for various reasons. Some wish to support children during times of crisis, others hope to adopt, and most are motivated by a genuine desire to help children who have experienced abuse or neglect (Chittom & Geraldine, 2018). All states require prospective foster parents to undergo a vetting

process that includes background checks and educational training. This training equips foster parents to understand the trauma histories of children in their care and clarifies expectations for managing behaviours and providing safe care (Chittom & Geraldine, 2018).

Foster parents receive financial support based on the needs of the children placed in their homes, ensuring they have the resources to provide proper care. However, fostering is not always easy. It can be a demanding and sometimes thankless role, particularly when support systems are limited and training on trauma-informed care is insufficient (Yuri, 2015). Recruitment and retention of foster parents is an ongoing concern across the United States because their role is essential in providing children with stable, safe, and supportive environments (Yuri, 2015). Research has focused on ways to educate and support foster parents to help them continue providing care, reducing placement disruptions and promoting stability for children (Moore, McDonald & Cronbaugh-Auld, 2016; Solomon, Niec & Schoonover, 2017). Foster parents' direct experience in caring for children removed from their homes gives them invaluable insight, making their perspectives vital for understanding the foster care system and improving outcomes for children.

2.4 Foster Care in Ghana

The Children's Amendment Act of 2016 (Act 937) provides clear guidelines on foster care and adoption in Ghana, with family reunification being a major goal of the system (Foster Care Operational Manual, 2018). According to Section 62 of the Act, poverty, whether financial or material, should not be the basis for placing a child in foster care. In Ghana, any person of high moral integrity who is over 21 years old may become a foster parent. However, individuals who are at least 18 years old may foster a child if

they are a relative, while non-relatives must be at least 21 years old to qualify (Children's Amendment Act, 2016). Foster care arrangements in Ghana can be short-term, lasting six months or less, or long-term, extending beyond six months to a year or more, depending on the unique needs of each child. Foster children are entitled to the same rights as children living with their biological families, and placements must consider the preservation of family ties and principles of non-discrimination. Children with disabilities are also eligible for foster care.

Additionally, foster parents may care for a maximum of seven children, including their own biological children (Ministry of Gender, Children and Social Protection, 2018). Currently, there is no official national data on the number of foster children in Ghana. Unpublished reports from the Foster Care Services Unit of the Department of Social Welfare (DSW) indicate that, as of May 2020, 115 children were in foster care, supported by 213 certified foster parents. Another 260 prospective foster parents had yet to be certified. Recruitment involves community awareness campaigns, talks at religious centres, and rigorous screening and training before children are placed with carers (Mawutor, 2015). While the Department of Social Welfare (DSW) does not provide direct financial support to foster parents, some in-kind assistance and coverage for additional expenses may be available (Ministry of Gender, Children and Social Protection, 2018). Sections 72 and 75 of the Children's Amendment Act also establish a foster care fund to support children in foster care, particularly those with special needs (Children's Amendment Act, 2016). Some foster care agencies provide financial support, though it is often limited and accompanied by challenges (Mawutor, 2015).

Fostering in Ghana has different cultural connotations. Historically, it has included the temporary exchange of children between families, often to provide education or

services such as domestic labour (Hampshire, Porter, Agblorti, Robson, Munthali & Abane, 2015; Grant & Yeatman, 2012). Demographers note that child fostering has been widespread across Ghana and other African countries, often without formal state intervention (Owusu & Adjei, 2009). Kinship fostering has been a longstanding tradition since before independence (Frimpong-Manso, 2014), and informal fostering has served as a buffer for children from poor families, allowing them to access better resources and opportunities (Child and Family Welfare Policy, 2015; Grant & Yeatman, 2012).

From the early 1990s to the present, residential care has been the primary form of alternative care for vulnerable children in Ghana (Frimpong-Manso, Deliege, Wilson & Norman, 2019; Mawutor, 2015). Many children in foster care have previously experienced residential care, and research shows that institutionalisation can negatively affect a child's well-being (Petrowski, Cappa & Gross, 2017). In 2007, Ghana launched the Care Reform Initiative (CRI) to address the challenges of residential care and to provide children with more stable, family-based alternatives. This initiative aligns with the United Nations Guidelines for Alternative Care of Children and the United Nations Convention on the Rights of the Child, advocating for deinstitutionalisation and promoting family, and community-based care while prioritising the best interests of the child (UNICEF, 2017).

Despite the establishment of formal foster care, it remains underutilised in Ghana. A 2014 report from ten priority districts revealed that only 32 children were in formal foster care placements, supported by 98 approved foster parents nationwide (Ministry of Gender, Children and Social Protection, 2018). Ghanaian culture places high importance on family and extended family involvement in child-rearing. Children are

often seen as products of the broader society, not just the nuclear family. When immediate families are unable to care for a child, extended family members or the community may step in to provide care without formal procedures (Hickmann & Adams, 2018; Frimpong-Manso, 2014; Imoh, 2012). In cases where children have been harmed, community interventions often prioritise restoring harmony within the family rather than strictly upholding the child's rights (Child and Family Welfare Policy, 2015). This cultural approach underscores the need to understand foster care in Ghana within the context of family preservation, community involvement, and evolving formal systems of alternative care.

2.5 The Concept of Social-Emotional Experiences

Socio-emotional experiences refer to the interactions, emotions, and social aspects of a child's life that shape their overall well-being and psychological development (Lopez & Allen, 2017). For foster children, these experiences are often complex and multifaceted, shaped by circumstances such as separation from biological families, adjustment to unfamiliar environments, and transitions between caregivers (Zetlin, Weinzierl & Shea, 2018). At their core, socio-emotional experiences describe how thoughts, behaviours, and physiological responses interact during social interactions, enabling individuals to form meaningful connections (Riquelme & Montero, 2016; Goleman, 2015). McLaughlin (2018) expands this view by highlighting the interplay between personal abilities and social contexts, which together influence how relationships are built and maintained. Similarly, the Merriam-Webster dictionary (2020) frames socio-emotional experiences as subjective reactions to people or situations, often reflected in observable changes in emotion or behaviour.

A central feature of socio-emotional development is emotional regulation. Day-Hass (2018) conceptualises this as a three-stage process: first, children learn regulation through guidance from caregivers; next, they begin to internalize rules but may not consistently apply them; and finally, they develop self-regulation, independently managing their emotions. This process underscores the role of supportive relationships in fostering empathy, self-awareness, and appropriate social responses (Garner & Parker, 2018). Across these perspectives, a common thread emerges: socio-emotional experiences are dynamic, shaped by internal processes and external social environments.

The functional importance of socio-emotional experiences has been explained by several scholars. McLaughlin (2018) describes them as personal “alerts” guiding social interactions, while Goleman (2015) notes that they prepare individuals to respond effectively in social contexts. Fielding (2017) emphasises that specific emotions carry distinct functions: happiness motivates collaboration, anger signals boundaries, sadness prompts support, and fear drives self-preservation. Yet, these emotional responses are deeply personal, influenced by individual differences in sensitivity, awareness, and prior experiences (Moore, 2019). This variation highlights the importance of tailored approaches to emotional education and coping strategies, particularly for foster children who may experience heightened vulnerability.

2.6 Effects of Socio-Emotional Experiences on Development of Foster Children

Researchers have emphasised that socio-emotional experiences are valuable for all children, particularly those facing complex challenges such as family difficulties, learning disabilities, socio-economic disadvantages, or other risk factors that may hinder their development (Domitrovich, Durlak, Stanley & Weisberg, 2019). To

support this development, educators implement various strategies, including modelling appropriate social behaviours in response to stress, promoting group reflection, and encouraging peer interactions, all of which foster socio-emotional growth (Barret, Eber, McIntosh, Perales & Romer, 2018). These approaches highlight the importance of continually developing and enhancing children's socio-emotional skills. A deeper understanding of socio-emotional experiences also supports the improvement of a range of individual abilities. For example, socio-emotional regulation in school settings has become a central focus in educational research because of its influence on self-confidence, academic achievement, and social engagement (Housman, Denham & Cabral, 2018; Butler, Schnellert & Perry, 2017). Riquelme and Montero (2016) noted that skills such as attention, curiosity, and motivation are strengthened when children learn to relate effectively to their peers in classroom and school contexts.

Socio-emotional self-awareness is a key starting point for sharing emotions and managing personal challenges. Recognising and understanding one's own feelings is foundational to building healthy relationships with others (Akgün & Karaman, 2019). Goleman (2015) similarly emphasised that individuals are responsible for managing their own emotions, while McLaughlin (2018) pointed out that socio-emotional experiences are shaped by how children perceive themselves, how they feel about themselves, and how they behave within social settings. Vygotsky's concept of the Zone of Proximal Development (ZPD) further supports the role of adult guidance in promoting both intrapersonal and interpersonal growth (Eun, 2019). Positive relationships with teachers and peers provide a platform for enhancing socio-emotional experiences (Housman et al., 2018). Early supportive connections, whether from foster parents, teachers, or advanced peers, enable children to develop skills and knowledge responsibly (Riquelme & Montero, 2016). In classrooms, teachers can mediate peer

interactions, encouraging students to reflect on their socio-emotional behaviours and interactions (Elley, 2014). Consequently, schools, parents, and teachers are critical environments where young learners can cultivate strong socio-emotional skills, with educators serving as influential role models.

Despite extensive research on socio-emotional development, much of the studies often catalog skills, stages, or interventions without systematically comparing effectiveness or considering contextual influences such as culture, institutional support, or caregiver stability. There is limited research on how foster children themselves experience socio-emotional challenges, how they cope, and how caregivers or educators support these processes in contexts like Ghana. This represents a significant gap, as understanding lived experiences is essential to design interventions that are contextually appropriate, culturally sensitive, and responsive to the unique needs of foster children.

2.7 Range of Socio-Emotional Experiences

The literature consistently identifies a broad range of socio-emotional experiences among foster children, including attachment disruptions, grief, trauma, instability, educational challenges, identity struggles, and resilience. While these themes are well documented, much of the research remains descriptive, cataloguing categories of experiences rather than analytically examining how these dimensions interact, vary across contexts, or evolve over time.

2.7.1 Attachment Disruptions

Research by Oswald et al. (2015) emphasises that early neglect, abuse, and separation from primary caregivers disrupt attachment formation, leading to difficulties in developing secure relationships in foster placements. While this aligns with attachment theory and is strongly supported in the literature, many studies treat attachment

disruption as a static condition rather than a dynamic process influenced by placement quality, caregiver sensitivity, and systemic stability. Furthermore, attachment difficulties are often presented as inevitable outcomes of foster care, without sufficiently differentiating between children who recover relational security and those who do not. The absence of comparative analysis between stable and unstable placements limits deeper understanding of moderating factors.

2.7.2 Loss and Grief

Simms et al. (2015) describe foster children's experiences of separation as producing feelings of abandonment and unresolved grief. Although this perspective acknowledges the emotional cost of removal from birth families, the literature often frames grief as an individual psychological response rather than examining the structural realities that create prolonged uncertainty, such as delayed permanency planning or repeated placement breakdowns. Additionally, few studies explore how cultural beliefs about family and belonging shape the experience and expression of grief, particularly in non-Western contexts.

2.7.3 Trauma and Stress

Leve et al. (2013) highlight the long-term impact of trauma and adverse childhood experiences on foster children's emotional regulation and stress responses. This body of research is robust and often empirically grounded; however, it tends to adopt a deficit-oriented lens, focusing primarily on pathology. Comparatively fewer studies investigate how trauma interacts with protective factors such as supportive caregiving, community belonging, or cultural identity. Moreover, trauma is frequently conceptualised as pre-care adversity, with insufficient attention given to trauma that may occur within foster placements themselves.

2.7.4 Adjustment to New Environments

Lopez and Allen (2017) discuss the instability caused by multiple placement transitions, noting that each move requires emotional and social readjustment. While this highlights the disruptive nature of foster care mobility, many studies fail to examine the cumulative impact of repeated transitions or distinguish between short-term adjustment stress and long-term developmental consequences. Additionally, there is limited analysis of systemic drivers of instability, such as resource shortages or policy failures, which shifts the focus from institutional responsibility to child adaptation.

2.7.5 Educational Challenges

Zetlin et al. (2018) connect placement instability to school disruption and academic difficulties. Although this literature effectively links educational instability with socio-emotional outcomes, it often portrays foster children as passive recipients of disadvantage. There is limited exploration of how schools may function as protective environments or how supportive teacher relationships could buffer against emotional distress. Comparative analyses across different education systems are also scarce, restricting understanding of contextual variation.

2.7.6 Identity and Self-Concept

Cuddeback (2014) highlights the identity struggles foster children face, particularly stigma and confusion about belonging. While identity is recognised as central to adolescent development, research in this area often lacks developmental nuance, failing to distinguish between identity challenges in early childhood versus adolescence. Furthermore, identity is rarely examined within broader socio-cultural frameworks, such as ethnicity, community norms, or national child welfare policies, limiting theoretical depth.

2.7.7 Resilience and Coping

Ungar (2013) shifts the narrative by emphasising resilience and adaptive coping among foster children. This strengths-based approach offers an important counterbalance to deficit-focused studies. However, resilience research sometimes risks romanticising adversity by highlighting positive adaptation without adequately addressing systemic inequities that necessitate resilience in the first place. Additionally, resilience is often conceptualised as an individual trait rather than a product of relational and environmental supports. Across these themes, the literature convincingly demonstrates that foster children experience complex and multifaceted socio-emotional challenges. However, the dominant approach remains descriptive, categorising experiences rather than critically analysing their interconnections, developmental trajectories, or contextual influences. There is limited integration of structural, relational, and cultural perspectives, and insufficient attention to comparative differences across placement types, age groups, or geographic settings. Moreover, much of the research is Western-centric, with minimal contextualisation for African foster care systems. This gap highlights the need for context-specific, analytically grounded research that not only documents foster children's socio-emotional experiences but also interrogates the systemic and relational factors shaping those experiences.

2.8 Studies and their findings on socio-emotional experiences of foster Children

Research consistently indicates that foster children face heightened emotional and behavioural difficulties compared to their peers in the general population, reflecting the cumulative effects of early adversity, maltreatment, and placement instability. However, a closer analysis of the literature reveals nuances in risk and protective factors, as well as gaps in how interventions are studied and applied.

Van der Steen, IJzendoorn, Hessen, and Bakermans-Kranenburg (2017) conducted a meta-analysis examining multiple studies on foster children's socio-emotional well-being. They found that, on average, foster children exhibit higher levels of emotional and behavioural problems, while stable and supportive foster care placements emerged as key protective factors. This finding is supported by Dorsey, Jaffee, and Jackson (2015), whose longitudinal study demonstrated that frequent placement changes significantly increase socio-emotional difficulties over time. Comparing these studies highlights that stability is a foundational determinant of well-being, though meta-analytic evidence offers generalizability, whereas longitudinal studies provide insight into developmental trajectories. Trauma exposure adds another layer of complexity. Gabrielli, Jackson, and Sellers (2018) found that foster children with histories of trauma show heightened emotional reactivity to social cues, underscoring the need for trauma-informed interventions. While placement stability mitigates some risks, trauma-focused care is crucial for addressing the underlying emotional dysregulation. Similarly, Dubowitz et al. (2014) linked maltreatment to both socio-emotional and academic difficulties, suggesting that interventions must simultaneously address emotional, behavioural, and cognitive domains.

Systematic reviews by Leijdesdorff, van Doesum, Popma, and Klaassens (2017) reinforced these findings, showing consistently lower socio-emotional functioning among foster children compared to non-foster peers. This review complements the longitudinal work of Leve, Kerr, Harold, and Natsuaki (2012), who demonstrated that multiple placements exacerbate attachment challenges and lower self-esteem. Dozier, Albus, Fisher, and Sepulveda (2012) further clarified the mechanisms behind these outcomes, showing that early neglect often leads to insecure attachment styles, which in turn affect trust and relationship-building with foster caregivers. Collectively, these

studies suggest a cumulative risk model, where early adversity, trauma, and instability interact to heighten vulnerability. Critically, while the literature identifies key risk and protective factors, it remains largely descriptive. Few studies systematically evaluate how these factors interact, how interventions can be tailored to individual histories of trauma, or how socio-cultural contexts influence outcomes. Most research is conducted in Western settings, leaving significant gaps regarding foster care experiences in African or non-Western contexts, including Ghana.

Implications for practice emerge clearly from this comparative analysis: effective support for foster children requires integrated approaches combining placement stability, trauma-informed therapeutic interventions, attachment-focused caregiving, and educational support. However, implementation strategies often lack guidance on prioritization or sequencing of interventions, representing a critical area for future research. In conclusion, foster children are disproportionately at risk for socio-emotional difficulties due to early adversity, maltreatment, and unstable placements. While stability, trauma-informed care, and supportive relationships are protective, the literature emphasizes the need for more analytical and context-sensitive research that examines how multiple factors collectively shape foster children's socio-emotional development.

2.9 Socio-Emotional Challenges facing Foster Children

Jone and Woodward (2016) provide a detailed overview of the pathways into foster care, identifying abuse, neglect, and unsafe home environments as primary reasons for placement. Their work is valuable in establishing structural causes of foster care entry; however, it remains largely categorical, offering limited analysis of how different forms of abuse differentially affect socio-emotional outcomes. For instance, physical abuse,

sexual abuse, and neglect are often grouped together, despite evidence suggesting they may lead to distinct emotional and behavioural trajectories. Furthermore, while Jone and Woodward acknowledge contextual factors such as parental substance abuse and incarceration, the literature tends to treat these as background variables rather than actively analysing how they compound children's emotional vulnerability. This descriptive emphasis limits the explanatory power of abuse-focused studies and leaves a gap in understanding the long-term socio-emotional consequences of specific abuse profiles.

2.9.2 Attachment and Bonding Disruptions

Attachment-related challenges are among the most frequently cited socio-emotional difficulties in foster care research. Cavazzi, Guilfoyle, and Sims (2014) emphasise the negative influence of biological parents on foster children's behaviour, while Schofield et al. (2013) and Blythe et al. (2012) highlight the emotional strain caused by separation from foster caregivers. Although these studies provide important insights, they tend to focus on caregiver experiences rather than critically examining children's internal attachment representations. In contrast, Hernandez and Kufeldt (2016) and Nilsen et al. (2016) move the literature forward by linking attachment security directly to socio-emotional functioning. Nilsen et al.'s findings that securely attached foster children demonstrate better emotional regulation and coping suggest that attachment is not merely a consequence of foster care experiences but a central mediating mechanism. However, these studies rely heavily on clinical or Western samples, limiting their generalisability.

Research by Koh et al. (2020) extends attachment discussions to sibling relationships, demonstrating that sibling separation exacerbates emotional distress and instability.

Yet, sibling dynamics remain under-theorised, often treated as secondary rather than integral attachment figures. While Shpiegel and Dozier (2018) and Dozier et al. (2018) provide stronger analytical depth by examining attachment-based interventions, much of the literature still stops short of comparing which attachment disruptions are most detrimental or which interventions are most effective across developmental stages. Conversely, Greeson, Thompson, and Ali (2015), through a randomised controlled trial, demonstrate that structured social support can significantly enhance socio-emotional well-being during the transition to adulthood. This study stands out methodologically but focuses narrowly on late adolescence, leaving early and middle childhood comparatively underexplored.

2.9.3 Trauma and Emotional Regulation

Trauma-related research consistently identifies emotional dysregulation as a core socio-emotional challenge among foster children. Maluccio, Pine, and Tracy (2017) provide practice-oriented insights into how trauma and disrupted attachments shape emotional development. However, their work, like much of the social work literature, prioritises intervention strategies over critical examination of trauma pathways. Pilowsky et al. (2016) strengthen the evidence base by demonstrating significantly higher rates of psychiatric disorders and substance use among foster youth. While statistically robust, this study adopts a deficit-oriented framework, offering limited discussion on resilience or protective factors. Similarly, Maikovich-Fong et al. (2013) describe how trauma impairs emotional regulation but do not sufficiently explore how placement stability or caregiver sensitivity might moderate these effects. Overall, trauma studies converge on the presence of emotional dysregulation but diverge in explanatory depth, with most emphasising outcomes rather than processes of recovery or adaptation.

2.9.4 Identity and Self-Esteem

Identity formation and self-esteem are increasingly recognised as critical socio-emotional domains. Intervention-based studies by Taussig and Culhane (2016) and longitudinal work by Ahrens et al. (2018) demonstrate that mentoring and supportive adult relationships can significantly enhance self-esteem and emotional well-being. These studies contribute analytical value by identifying modifiable protective factors. Smokowski et al. (2015) add a cultural dimension, showing that strong cultural identity and social networks buffer socio-emotional risks. However, cultural considerations remain peripheral in most foster care research, often treated as contextual rather than central variables. Hatch et al. (2019) further illustrate how disrupted family environment's complicate identity development but stop short of comparing identity challenges across placement types or cultural settings.

2.9.5 Educational Experiences

Berridge and Brodie (2018) highlight the socio-emotional consequences of educational instability, linking frequent school changes to alienation and low academic self-esteem. While this work effectively connects educational and emotional domains, it remains descriptive and does not fully explore how schools might act as protective environments or how educational continuity could mitigate emotional distress.

2.9.6 Mental Health and Well-Being

Meta-analytic evidence from Fan and Chen (2019) confirms elevated rates of mental health problems among foster children, reinforcing earlier findings by Tarren-Sweeney (2018). These studies provide strong empirical support but primarily quantify prevalence rather than examining service effectiveness or access disparities. Pecora et al. (2016) critically highlight systemic barriers to mental health services, shifting the

focus from individual pathology to structural constraints. However, few studies integrate systemic, relational, and psychological factors into a unified analytical framework. Intervention studies by Taussig and Culhane (2015) demonstrate positive outcomes but remain limited in scale and long-term follow-up.

2.9.7 Transitions to Adulthood

Courtney et al. (2015) provide one of the most analytically robust contributions, demonstrating how lack of social support and housing instability exacerbate socio-emotional vulnerability among youth aging out of care. Nevertheless, the literature largely treats the transition to adulthood as a discrete phase, rather than as the cumulative outcome of earlier socio-emotional disruptions. Overall, while the literature clearly documents the range and severity of socio-emotional challenges facing foster children, it remains predominantly problem-focused and descriptive. There is limited comparative analysis of risk factors, insufficient attention to interaction effects among abuse, attachment, trauma, and identity, and a strong Western bias. Most studies identify *what* the problems are, but fewer explain *why*, *for whom*, and *under what conditions* these challenges persist or improve. This gap underscores the need for context-specific, analytically driven research, particularly in underrepresented settings such as Ghana, that examines foster children lived socio-emotional experiences, coping strategies, and sources of resilience.

2.10 Behavioural and Emotional Problems

International research consistently reports elevated behavioural and emotional difficulties among children in foster care compared to their peers in the general population (Lawrence et al., 2016; Maaskant et al., 2016). While this consensus strengthens the evidence base, much of the literature adopts a deficit-oriented

perspective, emphasising prevalence rather than interrogating causal mechanisms or contextual moderators of these difficulties. Lawrence et al. (2016) provide quantitative evidence that behavioural problems often intensify shortly after foster care placement, suggesting that transition-related stress may temporarily exacerbate difficulties. However, their comparison with children who remained in disadvantaged yet adequately supportive home environments raises conceptual questions: the study does not sufficiently disentangle whether behavioural increases reflect placement disruption, pre-existing trauma, or heightened surveillance within foster care systems. This limitation illustrates a broader trend in foster care research, where behavioural outcomes are measured without fully accounting for environmental and systemic influences.

Longitudinal studies offer stronger analytical insight by examining behavioural trajectories over time. Bolger et al. (2015) and Newton et al. (2015) demonstrate that multiple placement changes significantly predict both internalising and externalising problems, positioning placement instability as a key structural risk factor. These findings are reinforced by James et al. (2014) and Fisher et al. (2017), who identify a cyclical relationship between behavioural difficulties and placement disruptions. However, although these studies identify correlations and threshold effects, they stop short of critically examining whether behavioural problems are causes or consequences of placement instability, leaving the directionality of effects insufficiently theorised. Several studies extend the focus beyond children to include foster caregivers. Blythe et al. (2012) highlight foster carers' experiences of social isolation and disempowerment, drawing attention to the relational context within which children's behavioural challenges unfold. Yet, caregiver well-being is rarely integrated analytically into child outcome models, despite evidence that caregiver stress may amplify behavioural

difficulties. This separation reflects a fragmentation in the literature, where child and caregiver experiences are often studied in isolation rather than as interdependent systems.

Research on service utilisation further reveals structural constraints. Havlicek et al. (2019) report increased use of mental health services among foster youth with socio-emotional difficulties, yet persistent barriers such as stigma and limited access undermine intervention effectiveness. While this study appropriately shifts attention from individual pathology to systemic barriers, it remains largely descriptive, offering limited evaluation of which service models are most effective or culturally responsive. Doyle and Peterson (2017) contribute practitioner perspectives, identifying emotional, behavioural, and trauma-related challenges as pervasive concerns. However, reliance on professional reports may introduce institutional bias, as children lived experiences and coping strategies are largely absent. This highlights a recurring methodological limitation across the literature: the marginalisation of children's voices in understanding behavioural and emotional problems.

Intervention-focused studies, such as Yatchmenoff and Wolf (2014), strengthen the literature by demonstrating that targeted therapeutic support can reduce both internalising and externalising behaviours. Nevertheless, these studies often lack long-term follow-up, limiting conclusions about sustainability of behavioural improvements. Similarly, Thompson et al. (2020) synthesise evidence linking behavioural difficulties to early adversity and attachment disruption, yet their review reiterates known risk factors rather than advancing integrative or comparative theoretical frameworks. Importantly, Rubin et al. (2016) introduce a comparative dimension by examining kinship versus non-relative foster care placements. Their findings that kinship care is

associated with fewer behavioural problems challenge assumptions that foster care is a uniform experience. However, kinship care is frequently idealised, with insufficient attention to potential stressors such as caregiver poverty, role strain, or limited access to formal support services. This suggests that placement type alone does not determine behavioural outcomes; rather, quality and stability of care are critical mediating factors. Collectively, the literature establishes a strong empirical link between foster care involvement and elevated behavioural and emotional problems. However, it remains largely descriptive, prioritising identification of difficulties over critical comparison of pathways, protective factors, and contextual differences. There is limited integration of child, caregiver, and system-level variables, and insufficient exploration of resilience, coping strategies, and cultural contexts, particularly in non-Western settings. These limitations point to a clear gap for analytically driven, context-specific research that examines how behavioural and emotional challenges are experienced, interpreted, and managed by foster children themselves, and how social support, placement stability, and caregiving practices interact to shape socio-emotional outcomes.

2.11 Maltreatment of Foster Children

The literature on the treatment of foster children consistently documents experiences of unequal treatment, harsh disciplinary practices, and limited protection from maltreatment. While these studies collectively establish that foster children are vulnerable to abuse and poor treatment, many adopt a descriptive approach that focuses on reporting experiences rather than critically examining the structural, cultural, and systemic factors that sustain such practices. Kuyini et al. (2014), in their exploratory qualitative study on traditional kinship foster care in Northern Ghana, provide contextually rich evidence that foster children often feel marginalised within foster households and fear punishment when requesting basic necessities. The strength of this

study lies in its inclusion of children's voices and its relevance to African kinship care systems. However, the study does not sufficiently interrogate how cultural norms, power imbalances, and weak child protection enforcement interact to normalise unequal treatment, limiting its analytical depth.

Similarly, studies on corporal punishment, such as those by McFadden and Ryan (2012) and Gershoff (2013), demonstrate the harmful socio-emotional consequences of physical discipline. Simons and Wurtele (2016) extend this discussion by linking corporal punishment to intergenerational cycles of violence. Although these studies offer strong theoretical explanations, they are largely based in Western contexts and tend to generalise their conclusions without adequately accounting for cultural differences in child-rearing practices, particularly in foster and kinship care settings in developing countries. Research by Tarren-Sweeney, Hazell, and Jamieson (2015) further strengthens the evidence by showing that repeated maltreatment compounds socio-emotional difficulties among foster children. This study advances the literature by moving beyond single-incident analysis to examine cumulative harm. Nevertheless, it remains deficit-focused, paying limited attention to resilience, protective factors, or the conditions under which foster children successfully cope despite adversity.

Overall, while the literature clearly establishes that poor treatment and maltreatment negatively affect foster children's socio-emotional well-being, it remains largely descriptive. There is limited critical engagement with how policy gaps, cultural expectations, and systemic power relations shape foster children lived experiences. This gap underscores the need for context-specific research that critically examines treatment practices within foster care systems, particularly in under-researched settings such as Ghana.

2.11.1 Foster Children's Involvement in Decision-Making

Research on foster children's participation in decision-making highlights persistent exclusion from decisions that directly affect their lives. Studies consistently show that although children express a desire to be heard, their views are often overlooked or minimally considered within foster care systems. Höjer, Sebba, and Luke (2013) and Hestbæk (2018) provide empirical evidence that foster children are rarely consulted prior to major decisions regarding placements or care arrangements. Hestbæk's findings, which reveal that a majority of children in out-of-home care are neither consulted nor informed, offer strong quantitative support for this claim. However, these studies tend to conceptualise participation narrowly, equating it with consultation rather than examining whether children's views meaningfully influence final decisions.

Graham and Fitzgerald (2015) advance the literature by arguing that participation must be informed and meaningful to positively impact children's well-being. This perspective exposes a key limitation in earlier studies that treat participation as symbolic rather than substantive. Similarly, Nordenfors (2016) introduces an age-sensitive analysis, showing that older children are more likely to be involved in decision-making than younger ones. While this highlights developmental considerations, it also reveals systemic age-based inequalities that remain largely unchallenged. Studies focusing on biological children of foster carers (Twigg & Swan, 2014; Maaskant et al., 2016) broaden the discussion by recognising foster care as a family system. However, these studies provide limited critical insight into how competing family interests may further marginalise foster children's voices. Outcome-focused studies by Cashmore (2017) and Hedin et al. (2013) demonstrate that meaningful participation improves satisfaction, compliance, and smoother transitions,

whereas McCredie and Horrox (2015) caution that participation without adequate information can undermine adjustment. In summary, although the literature strongly supports children's participation in decision-making as beneficial to socio-emotional well-being, it remains largely descriptive and fragmented. There is limited critical examination of power dynamics, institutional constraints, and cultural norms that restrict meaningful participation, particularly in non-Western contexts. This gap reinforces the need for empirical research that centres foster children's voices and critically evaluates how participatory practices can be effectively implemented within local child welfare systems.

2.12 Coping Strategies used by Foster Children for the Socio-Emotional

Challenges they Face

The literature conceptualises coping primarily as a regulatory process aimed at managing emotional distress and environmental demands (Bagnall, 2020). Lazarus's Transactional Theory of Stress and Coping provide the dominant theoretical framework, emphasising the dynamic interaction between cognitive appraisal, emotional responses, and coping behaviours (Bagnall et al., 2021). This model's strength lies in its recognition that stress is not inherent in events themselves but arises from individuals' subjective interpretations. Consequently, it offers a flexible and context-sensitive lens for understanding coping across diverse life challenges. However, while the transactional model robustly explains *how* coping processes unfold, it has been critiqued for placing heavy emphasis on individual cognition, often underplaying structural, relational, and contextual constraints. For vulnerable populations such as foster children, stressors are frequently chronic, externally imposed, and beyond personal control. In such cases, the assumption that individuals

can meaningfully reappraise or resolve stressors through personal coping strategies may be theoretically limited.

The distinction between problem-focused and emotion-focused coping (Bagnall et al., 2019) is widely adopted and analytically useful, as it clarifies different adaptive pathways. Problem-focused strategies are typically associated with better outcomes when stressors are controllable, whereas emotion-focused strategies may be more adaptive in situations that cannot easily be changed. Nevertheless, this dichotomy has been criticised for oversimplifying coping processes. In real-world contexts, individuals often employ blended or sequential strategies, and the literature does not consistently examine how these strategies interact over time or vary across developmental stages. The appraisal process, primary and secondary appraisal, is a central strength of the transactional framework, highlighting how perceptions of threat and available resources shape coping responses (Bagnall et al., 2019). The concept of coping efficacy builds directly on this process by capturing individuals' beliefs in their capacity to manage stress. Empirical studies in contexts such as depression (Bajwa-Patel & Devecchi, 2014) and divorce (Beaty, 2019) demonstrate that higher coping efficacy is associated with better emotional adjustment. These findings suggest that coping efficacy may serve as a protective factor, buffering individuals against psychological distress.

Despite this, the literature on coping efficacy remains fragmented and context-specific. While it is theoretically linked to self-esteem, emotional stability, locus of control, and self-efficacy (Bosacki, 2016), empirical studies often examine these constructs in isolation rather than as interrelated dimensions of a broader coping system. This limits conceptual clarity and makes it difficult to determine whether coping efficacy offers

unique explanatory power beyond established psychological constructs. A further limitation is the narrow focus of existing research contexts. Although coping efficacy has been explored in clinical and family-related transitions, its role during educational transitions, such as moving from primary to secondary school, remains underexplored. This gap is significant, as such transitions involve simultaneous academic, social, and emotional demands. The absence of robust longitudinal or comparative studies in this area restricts understanding of how coping efficacy develops over time and whether it predicts adjustment across different transition contexts.

Overall, while the literature provides a strong theoretical foundation for understanding coping and coping efficacy, it remains largely individualistic and context-limited. There is insufficient attention to how social support, environmental stability, and structural constraints shape coping processes, particularly among vulnerable groups. Future research would benefit from integrative approaches that examine coping efficacy alongside relational and contextual factors, and from studies that explore its role during critical developmental transitions. Such work would not only strengthen theoretical models but also enhance their practical relevance for informing interventions and support systems.

2.13 Types of coping strategies used by foster children

Studies have established varied coping mechanisms used by foster children in dealing with socio-emotional challenges they go through. They include: resilience and coping mechanisms, therapeutic interventions, social support networks, educational support, self-esteem self-efficacy, group interventions and strengths-based approaches. Next is a discussion on how these coping mechanisms are used by foster children.

2.13.1 Resilience and coping mechanisms

Foster children are exposed to a range of adverse experiences that place them at heightened risk for socio-emotional challenges. These experiences ranging from separation from biological parents to multiple placements require the development of resilience and adaptive coping strategies. Research indicates that many foster children respond to adversity by drawing on personal strengths, social networks, and structured interventions to manage stress and navigate challenges (Stein, 2018; Smokowski, Rose & Bacallao, 2016). For instance, cultural assets, such as a strong sense of identity and connection to heritage, have been shown to promote adaptive coping and reduce internalising symptoms among foster adolescents, highlighting the protective role of culture in resilience.

2.13.1 Resilience and Coping Mechanisms

Resilience is closely linked to the capacity to employ effective coping strategies. Foster children often rely on social support, extracurricular engagement, hobbies, and creative expression to process emotions and manage stress (Vanschoonlandt, Vanderfaeillie, De Maeyer & Van Hoen, 2016). Longitudinal and qualitative studies underscore that children who cultivate these strategies tend to demonstrate better socio-emotional outcomes, including reduced anxiety, improved self-regulation, and enhanced social adjustment (Unrau, Font & Rawls, 2018). Importantly, the literature suggests that coping is not uniform; children differ in their reliance on internal resources versus external supports, and maladaptive strategies, such as withdrawal or aggression, may coexist with adaptive approaches (Rees, Stone & Halfon, 2016).

2.13.2 Therapeutic Interventions

Evidence-based interventions have been shown to bolster foster children's socio-emotional functioning. Trauma-focused cognitive-behavioural therapy addresses the impact of traumatic experiences, improving emotional regulation and coping skills (Deblinger et al., 2016). Attachment-based interventions are particularly effective for children with insecure attachment styles, enabling them to build secure, trusting relationships with caregivers (Shpiegel & Dozier, 2018; Dozier et al., 2016). Furthermore, research demonstrates that structured interventions targeting specific stressors—such as identity-related or racial stress, can mediate the effects of adverse experiences, promoting more adaptive coping in children facing complex socio-emotional challenges (Williams & Fan, 2013). Collectively, these studies indicate that interventions are most effective when tailored to the child's developmental needs, attachment history, and contextual circumstances.

2.13.3 Social Support Networks

Social support is a critical buffer against the negative effects of adversity in foster care. Foster children benefit from a multilayered support system comprising foster parents, mentors, caseworkers, peers, and educators (Harden et al., 2017; Greeson, Thompson & Ali, 2015). Positive, stable relationships foster a sense of security, enhance coping abilities, and mitigate the effects of trauma. For instance, sibling connections and maintenance of family ties can serve as additional protective factors, supporting emotional stability and identity development (Koh, Chivese & Plummer, 2020). Research also emphasizes the role of mentoring and independent living programs in strengthening resilience during transitions to adulthood, highlighting the need for coordinated and consistent support (Ahrens, DuBois, Richardson, Fan & Lozano, 2018; Thompson, Deyoung & Plummer, 2020). However, the literature reveals that not all

foster children have equal access to these supports. Disruptions in placements, separation from siblings, and socio-economic constraints can limit access to both formal and informal support networks (Hjern & Porter, 2017). This underscores the necessity of proactive strategies to ensure that foster children can engage with and benefit from multiple support sources, reinforcing both emotional and practical coping mechanisms.

2.13.4 Educational Support

Education provides a critical context for fostering socio-emotional development. Access to tutoring, mentorship, and academic guidance not only improves educational outcomes but also enhances self-esteem, problem-solving abilities, and coping skills (Pears et al., 2015; Dozier, Zeanah, Wallin & Shaffer, 2013). Schools that cultivate supportive environments enable foster children to form peer networks, practice adaptive coping, and integrate socially, which collectively contributes to resilience. This highlights the interconnection between academic engagement and socio-emotional functioning, emphasising schools as pivotal sites for fostering well-being in foster children.

2.13.5 Self-Esteem and Self-Efficacy

Internal resources such as self-esteem and self-efficacy significantly influence how foster children navigate social and academic transitions. Children with higher self-efficacy demonstrate better adjustment, stronger peer relationships, and more effective problem-solving skills, while low self-esteem is linked to challenges during transitions (Bailey & Baines, 2012; Clair-Thompson et al., 2017). Emotional self-efficacy, in particular, predicts resilience during transitions and reduces sensitivity to social threats,

underscoring the importance of fostering both academic and emotional competence in school and community contexts (Nowland & Qualter, 2020; Madjar & Chohat, 2017).

2.13.6 Group Interventions

Group-based interventions provide opportunities for foster children to share experiences, develop coping strategies, and build a sense of belonging. Support groups and group therapy foster peer connections and offer social reinforcement that mitigates isolation and emotional distress (Thompson et al., 2015). Similarly, training foster parents to provide nurturing, structured care enhances children's socio-emotional outcomes, demonstrating the interdependence of caregiver and child interventions (Hodes, Wolverton & Blythe, 2017).

2.13.7 Strengths-Based Approaches

Strengths-based approaches focus on identifying and building on the capacities of foster children, fostering resilience, adaptive coping, and socio-emotional competence (Vanderfaellie et al., 2016). Evidence indicates that children in kinship care often exhibit higher resilience and adaptive coping due to the stability and emotional support offered by familiar caregivers (Dubowitz, Feigelman, Zuravin & Tepper, 2014). Adopting strengths-based frameworks can inform intervention strategies by emphasising existing competencies, rather than deficits, and by leveraging these strengths to support coping and emotional development. Across these studies, several key points emerge: first, coping and resilience are shaped by both internal resources and external supports; second, therapeutic interventions and educational supports complement social networks in promoting socio-emotional growth; and third, stability, consistency, and quality of support matter more than mere presence. Despite extensive descriptive work, there remains a need for analytical research examining the interaction

of multiple support systems, cultural context, and placement history on foster children's long-term socio-emotional development, particularly in under-researched settings such as Ghana

2.14 Social Supports Services available to Foster Children

Social support is widely acknowledged as essential for psychological health and overall well-being, particularly for foster children who often face disrupted attachments and emotional instability. It is a multidimensional construct encompassing the size of social networks, quality of relationships, and frequency of interactions (Southwick, Sippel, Krystal, Charney, Mayes & Pietrzak, 2016). Positive social connections do more than meet emotional needs, they influence practical outcomes, such as encouraging adaptive behaviors, reducing risky activities, mitigating stress, enhancing self-efficacy, and fostering effective coping through social modeling. Mastoras, Saklofske, Schwan, and Climie (2015) emphasize that self-esteem and personality are shaped by feeling valued and appreciated by significant others. For foster children, who often experience repeated changes in caregivers, stable and supportive relationships are particularly crucial. This highlights a gap in the literature: while many studies acknowledge the importance of support, few evaluate how stability and consistency of these relationships affect long-term socio-emotional outcomes.

A critical distinction emerges between formal and informal support. Family-like support, whether from foster parents, kin, or mentors, can provide guidance, emotional warmth, and modeling of prosocial behavior. Meanwhile, peers, teachers, and community members act as supplementary sources. While the compensatory role of secondary supports is recognised, research seldom examines the comparative effectiveness of formal versus informal networks, or how these networks interact to

buffer foster children against emotional and behavioral challenges. Another gap is in the evaluation of support quality versus mere presence. It is not enough for foster children to have access to mentors, caseworkers, or teachers; the effectiveness of these relationships depends on relational trust, cultural sensitivity, and sustained engagement. For instance, parenting strategies that promote resilience are shown to be effective in shaping specific character traits, but their impact can be limited if broader social support networks are weak or inconsistent.

Finally, most studies focus on the individual sources of support without sufficiently critiquing their interplay. For foster children, optimal socio-emotional outcomes likely depend on a combination of internal coping resources (resilience, self-efficacy) and external social supports (family, peers, mentors). Research in African contexts, including Ghana, remains particularly scarce, limiting understanding of how culturally embedded networks and community structures contribute to foster children's well-being. In sum, social support services play a central role in fostering self-esteem, coping, and socio-emotional competence among foster children. While the literature clearly identifies multiple sources of support, it remains largely descriptive. There is a need for analytical studies that evaluate the quality, stability, and cultural relevance of these supports, and examine how formal and informal networks collectively influence long-term outcomes for foster children.

2.14.1 Types of social support services available to foster children

Next is a discussion on some of the social support services that are commonly used by foster children in deal with their social-emotional challenges.

Attachment-based interventions

Foster children face unique socio-emotional challenges arising from family separation, frequent changes in placements, and disrupted attachment relationships. These experiences shape not only their emotional regulation but also their social interactions, coping strategies, and overall well-being (Lopez & Allen, 2017; Riquelme & Montero, 2016). Evidence consistently highlights the importance of social support networks, including informal sources (family, friends) and formal services (counseling, mentorship, educational support), in mitigating these challenges and promoting resilience (Vanderfaeillie, Van Holen, Trogh & Andries, 2016).

Vanderfaeillie et al. (2016) demonstrate that foster children with access to formal support services such as counseling or therapy show improved socio-emotional outcomes compared to those with limited access. Similarly, Shpiegel and Dozier (2018) highlight the effectiveness of attachment-focused interventions, particularly for children with insecure attachment styles, emphasizing that secure relationships with caregivers foster emotional regulation, social competence, and resilience. These findings collectively suggest that structured interventions and access to professional services are essential for addressing the complex emotional needs of foster children. Shlonsky and Wagner (2015) further argue that evidence-based frameworks, integrating actuarial risk assessments with clinical judgment, are vital in child protective services to allocate resources effectively. By identifying children at higher risk of socio-emotional difficulties, agencies can target interventions and support systems more strategically, thereby optimizing outcomes. This approach illustrates the importance of data-informed decision-making in designing support programs that are responsive to individual needs.

Foster youth often face significant challenges during life transitions, including entering adulthood or higher education. Cook and Ciarico (2018) report that college students formerly in foster care with access to mentors, academic advisors, and campus resources navigate these transitions more successfully. Collins, McFadden, and Wilgus (2019) similarly highlight the benefits of coordinated support across caregivers, caseworkers, schools, and community organizations, which collectively enhance socio-emotional well-being. These findings underscore that social support is most effective when it is multi-layered, consistent, and coordinated across domains of the child's life. Perceived social support significantly affects mental health, life satisfaction, and self-esteem in foster children (Kang, Park & Wallace-Hernandez, 2018). However, disruptions such as parental separation, frequent home transitions, or inconsistent caregiving can weaken these networks, diminishing their protective effects (Amato & Anthony, 2014). Shek, Zhu, and Ma (2018) note that supportive and balanced parental guidance enhances adaptive coping and reduces risk behaviours; while overly controlling or psychologically unsupportive parenting can undermine self-determination and socio-emotional growth. These studies collectively indicate that both the quality and consistency of parental involvement are critical determinants of foster children's developmental trajectories.

Beyond family influence, educators play a central role in fostering socio-emotional development. Positive teacher-student relationships, academic encouragement, and classroom support contribute to resilience, social competence, and motivation (Leme, Del Prette & Coimbra, 2015; Abdullah & Singh, 2019). Parental engagement in education further strengthens these outcomes, enhancing confidence, behaviour, and academic achievement (Sapungan & Sapungan, 2014). Schools that cultivate a

supportive culture enable foster children to form informal peer networks, navigate social challenges, and participate actively in learning (Awang, Kutty & Ahmad, 2014). While these studies highlight the benefits of social support from multiple sources, the literature is largely descriptive. Most research catalogues sources of support, parents, peers, teachers, mentors without critically analysing how these forms of support interact or which combinations are most effective. There is also limited attention to contextual factors, including cultural norms, socio-economic conditions, and placement histories, which influence how foster children perceive and benefit from support. Gender differences, prior trauma, and attachment patterns are similarly underexplored, leaving gaps in understanding the mechanisms through which social networks promote socio-emotional resilience.

Foster children's socio-emotional development relies on an interconnected network of support spanning family, peers, educators, mentors, and professional services. Positive parental guidance, teacher support, mentorship programs, and structured interventions collectively enhance emotional regulation, coping strategies, and resilience. However, future research should move beyond descriptive accounts to examine the interplay between support sources, contextual and cultural influences, and the long-term effectiveness of interventions, particularly in under-researched settings such as Ghana. Addressing these gaps is essential for designing evidence-based, contextually relevant strategies that optimize foster children's socio-emotional outcomes and life trajectories.

2.15 Trauma-focused Cognitive-Behavioural and Parent-Child Interaction

Therapies

Foster children often face unique challenges that set them apart from their peers, including separation from biological parents, transitions between caregivers, and

adjustment to unfamiliar environments. These experiences profoundly influence their socio-emotional development, shaping how they perceive themselves, interact with others, and respond to stress. Socio-emotional experiences, encompassing the interactions, emotions, and social contexts of a child's life, are central to fostering resilience and psychological well-being (Lopez & Allen, 2017; Riquelme & Montero, 2016). For foster children, these experiences are not only complex but also deeply intertwined with the quality and availability of social support. Research indicates that supportive relationships play a critical role in promoting foster children's socio-emotional growth. Landsverk, Burns, Stambaugh, and Reutz (2016) found that evidence-based psychosocial interventions, including trauma-focused cognitive-behavioural therapy and parent-child interaction therapy, significantly reduce behavioural and emotional challenges, while enhancing overall well-being. Similarly, mentoring programs and structured skills groups have been shown to reduce symptoms of anxiety and depression and improve social competencies (Taussig, Culhane & Hettleman, 2018). These interventions demonstrate that when foster children have access to structured, intentional support, their capacity for emotional regulation and adaptive coping improves markedly.

Family and caregiver support is equally crucial. Jackson and Cameron (2013) highlight that foster children placed with caregivers who receive training, respite care, or access to support networks experience greater placement stability, which in turn promotes emotional security. Chor, McCabe, and Antony (2016) further note that consistent support from caregivers and caseworkers positively affects foster youths' transitions into adulthood, influencing education, employment, and independent living outcomes. However, research also shows that foster children often face limited informal social networks, with maternal figures typically serving as the most significant source of

support, particularly for girls (Pinchover & Attar-Schwartz, 2018). This underscores the need to strengthen broader networks that include peers and non-parental adults, in addition to caregivers.

Peers represent another critical layer of support. Positive peer interactions help foster children navigate social challenges, reinforce appropriate behaviours, and provide emotional validation (Wang et al., 2021; Sarı, Çeliköz & Süleyman, 2017). Peer relationships influence social cognition, communication skills, and risk-taking behaviours (Shin, Cho, Shin & Park, 2016; Ciranka & Bos, 2019), with shared experiences often making peer influence more resonant than family guidance during adolescence. While parental oversight remains important, peers frequently provide the emotional scaffolding that helps children cope with the uncertainties of foster care (Byrom, 2017; Bernardon et al., 2015). Non-parental adults, including teachers, mentors, community leaders, and religious figures, also contribute significantly to foster children's development. Strong relationships with these adults are associated with higher self-esteem, improved identity formation, and better coping strategies (Gordon, 2014; Jespersen, Korbin & Spilsbury, 2021). Teachers, for instance, provide not only academic guidance but also socio-emotional scaffolding, modeling constructive behaviours and supporting engagement in the school community (Ibrahim & Zaatari, 2019; Paolini, 2015). Mentorship programs allow foster children to access additional guidance, develop skills, and receive emotional support, particularly during critical transitions such as entering secondary school or transitioning into adulthood (Hurd, Varner & Rowley, 2013; van Rens et al., 2018, 2019).

Parenting practices remain a fundamental determinant of socio-emotional outcomes. Positive parenting fosters competence, strengthens family relationships, and reduces

negative behaviours, whereas harsh disciplinary methods are linked to hostility and rebellion (Akcinar & Baydar, 2016; Shubert, Wray-Lake, Syvertsen & Metzger, 2019). The literature suggests that fostering informal social support networks within families and communities is essential for safeguarding foster children's well-being, serving both as a coping mechanism and a platform for broader social interventions (Corwin et al., 2019). Despite strong evidence of the importance of social support, much of the literature remains descriptive, often listing types of support without critically examining their interactions, effectiveness, or cultural applicability. Few studies compare the relative contributions of caregivers, peers, and non-parental adults or explore how these supports function collectively to enhance socio-emotional resilience. Gender differences, socio-cultural contexts, and the dynamic quality of support networks are also underexplored, leaving gaps in understanding how best to design interventions that are contextually appropriate, especially in African settings such as Ghana.

In sum, foster children's socio-emotional development depends on a multi-layered network of support that includes caregivers, peers, non-parental adults, and structured interventions. These supports enhance emotional regulation, resilience, mental health, and life outcomes. Critically, fostering these relationships requires not only providing access to interventions but also ensuring that support is consistent, culturally relevant, and responsive to individual needs. Future research should therefore move beyond descriptive accounts to analyze the mechanisms through which social support shapes socio-emotional development, with particular attention to context, gender, and the interplay between formal and informal support networks.

2.16 Therapeutic Interventions

Foster children occupy a unique and vulnerable position in society, often facing challenges that significantly impact their socio-emotional development. Separation from biological families, placement in unfamiliar environments, and repeated transitions between caregivers disrupt the stability and security essential for healthy development (Lopez & Allen, 2017; Zetlin, Weinzierl & Shea, 2018). These experiences influence not only children's emotional well-being but also their social interactions, self-perception, and ability to cope with stress, highlighting the central role of socio-emotional experiences in shaping developmental outcomes (Riquelme & Montero, 2016; McLaughlin, 2018). At the core of socio-emotional development is the ability to recognize, understand, and regulate emotions. Day-Hass (2018) describes this as a three-stage process: initial regulation guided by caregivers, intermediate other-regulation where children partially internalize rules, and self-regulation where children independently manage emotions and behaviour. For foster children, whose caregiving environments may be inconsistent, access to supportive adults and structured interventions is critical for developing these competencies. Research shows that children who receive guidance from caregivers, teachers, and peers develop stronger empathy, interpersonal skills, and emotional resilience, underscoring the interplay between internal capacities and external social environments (Garner & Parker, 2018; Housman, Denham & Cabral, 2018).

Social support networks play a pivotal role in mitigating the socio-emotional challenges foster children face. Family, peers, non-parental adults, and structured programs collectively provide emotional, informational, instrumental, and appraisal support, each addressing different aspects of children's developmental needs (Malecki & Demaray, 2013; Males, Bate & Macnish, 2017). Jackson and Cameron (2013) emphasize that

caregivers who receive adequate social support, through training, respite care, or participation in support groups, promote placement stability, which is essential for emotional security. Chor, McCabe, and Antony (2016) further highlight that support from caregivers and caseworkers enhances foster youths' transitions into adulthood, influencing educational attainment, employment, and independent living outcomes. Yet, Pinchover and Attar-Schwartz (2018) note that foster children often have limited informal social networks, with maternal figures typically serving as primary sources of support and peers emerging as critical secondary sources, particularly for girls from separated families.

Peer relationships serve as another vital source of social support. Positive interactions with peers improve socio-emotional competencies, reduce behavioural problems, and provide emotional validation (Wang et al., 2021; Sarı, Çeliköz & Süleyman, 2017). Peer influence is particularly salient during adolescence, often surpassing familial influence due to shared experiences and common interests (Byrom, 2017; Bernardon et al., 2015). Peers help foster children navigate social challenges, reinforce prosocial behaviours, and buffer against feelings of isolation, supporting emotional development and resilience. Non-parental adults, including teachers, mentors, community leaders, and religious figures, further strengthen foster children's social support networks. These individuals provide guidance, model constructive behaviours, and offer emotional and practical assistance, contributing to self-esteem, identity formation, and adaptive coping (Gordon, 2014; Jespersen, Korbin & Spilsbury, 2021). Mentorship programs, for example, create structured opportunities for foster children to develop skills, expand social networks, and receive emotional support, particularly during critical transitions such as entering secondary school or preparing for independent living (Hurd, Varner & Rowley, 2013; van Rens et al., 2018, 2019).

Structured interventions and therapeutic services complement these support networks. Crea, Lopez, and McConnell (2014) highlight that trauma-focused therapy, mentorship programs, and support groups effectively enhance socio-emotional development. Landsverk, Burns, Stambaugh, and Reutz (2016) similarly show that evidence-based interventions reduce emotional and behavioural challenges while promoting overall well-being. Caregiver training in trauma-informed practices improves the quality of support children receive, enabling caregivers to provide consistent guidance and foster emotional security (Schneiderman, Smith, Palinkas & Fuentes, 2017). Early intervention programs, such as those studied by Fisher, Burraston, and Pears (2015), demonstrate that coordinated therapeutic and social support increases the likelihood of permanent placement and strengthens social functioning, highlighting the interconnectedness of interventions, social support, and developmental outcomes. Despite clear evidence of the importance of social support and structured interventions, much of the existing literature is descriptive, cataloguing types of support or interventions without critically analysing their relative effectiveness, interactions, or cultural applicability. Few studies examine how different sources of support, caregivers, peers, non-parental adults, and formal interventions, work together to enhance socio-emotional outcomes. Additionally, contextual factors such as cultural norms, gender, prior trauma experiences, and the socio-economic environment remain underexplored, limiting the ability to design tailored and contextually appropriate interventions, especially in African settings like Ghana.

Foster children's socio-emotional development depends on a multi-layered support system, where caregivers, peers, non-parental adults, and structured interventions collectively shape resilience, emotional regulation, and adaptive coping. Effective

interventions must integrate therapeutic services, caregiver training, mentorship, and peer support, while being sensitive to the individual and contextual factors that influence outcomes. Future research should move beyond descriptive accounts to critically examine how different forms of support interact, how cultural and contextual factors influence effectiveness, and how interventions can be optimized to meet the specific needs of foster children in diverse settings. Addressing these gaps will not only inform practice but also strengthen policies and programs designed to enhance the well-being and developmental trajectories of foster children.

2.16.2 Participation in Religious Programmes

Participation in religious programs can provide foster children with valuable support in coping with the challenges they face (Emmanuel & Delaney, 2013). Activities such as memorising and reciting Easter or Christmas speeches help foster children build confidence and resilience. For instance, a study of Australian youth aged 12–25 focused on Christian participants attending an Assemblies of God Church, highlighting the role of Pentecostal communities in fostering spiritual well.

2.17 Research Gaps Identified

Research on the socio-emotional experiences of foster children has expanded considerably, particularly in Western contexts. However, while existing studies have documented trauma exposure, attachment disruptions, and emotional distress, they often differ in emphasis, scope, and methodological orientation, revealing important gaps and inconsistencies. For instance, Shlonsky (2020) calls for more longitudinal studies to trace foster children's developmental trajectories over time. This recommendation reflects a limitation in much of the existing literature, which relies heavily on cross-sectional designs. Cross-sectional studies provide snapshots of

children's socio-emotional states but fail to explain how early foster care experiences evolve into adolescent or adult outcomes. However, while Shlonsky (2020) emphasises long-term developmental patterns, other scholars prioritise immediate intervention outcomes (Mandell, Benneth, Loschiavo, & Peet, 2019). This difference reveals a tension in the literature: some researchers focus on *developmental continuity*, while others focus on *programmatically effectiveness*. Few studies integrate both perspectives to show how specific interventions shape long-term socio-emotional resilience. This gap underscores the importance of context-specific exploratory research, such as the present study, which seeks to understand children lived socio-emotional realities as they unfold within a particular community setting.

Similarly, trauma-informed care has been widely endorsed as essential for foster children (Mandell et al., 2019). Yet, while trauma prevalence is consistently reported, evidence regarding which trauma-informed interventions are most effective remains inconclusive. Some intervention studies demonstrate short-term improvements in emotional regulation, but others report limited sustainability of outcomes. This inconsistency suggests that trauma-informed approaches may not be universally adaptable across cultural and socio-economic contexts. Notably, most intervention research has been conducted in high-income countries, raising questions about contextual transferability to communities such as Breman Esiam. The present study addresses this limitation by examining how socio-emotional challenges and coping mechanisms manifest within a Ghanaian socio-cultural environment, where formal trauma-informed systems may be limited.

Cultural considerations present another significant gap. Huang and Proctor (2021) argue that socio-emotional development is culturally embedded, yet much of the

dominant foster care literature is grounded in Western psychological frameworks. While these frameworks emphasize individual emotional expression and therapeutic intervention, they may underrepresent collectivist coping systems, extended family networks, and community-based resilience mechanisms common in African settings. This reveals a conceptual limitation in the literature: socio-emotional well-being is often operationalized using Western norms of attachment and autonomy, potentially overlooking culturally grounded interpretations of belonging, obedience, or communal identity. The present study therefore contributes by situating socio-emotional experiences within the local cultural context of Breman Esiam, rather than assuming universal applicability of Western constructs.

Research on sibling relationships further illustrates fragmentation in the literature. Conn, Williams, Elazer, and Keller (2020) highlight the emotional cost of sibling separation, emphasizing its negative impact on adjustment. However, other studies suggest that sibling placements can sometimes intensify conflict or competition for limited caregiver attention. These contrasting findings indicate that sibling dynamics in foster care are complex and context-dependent rather than uniformly protective or harmful. Yet, empirical exploration of these dynamics remains limited, especially in kinship-based foster systems common in Ghana. By exploring foster children's narratives directly, the present study allows for a more nuanced understanding of how sibling relationships function as either sources of support or stress.

Educational experiences also reveal mixed findings. Cook et al. (2016) stress the role of educational support services in promoting socio-emotional resilience, yet research frequently treats educational outcomes as separate from emotional well-being. Some studies frame academic performance as a predictor of self-esteem, while others treat

educational disruption as a structural issue disconnected from emotional processes. This conceptual separation overlooks how school instability, stigma, and peer relationships interact with children's internal emotional worlds. The present study integrates these domains by examining educational challenges as part of broader socio-emotional experiences rather than as isolated academic concerns.

Finally, while Strand (2019) advocates for the inclusion of foster children's voices, many studies continue to rely on caregiver reports, administrative data, or standardized psychological assessments. This methodological contradiction weakens the authenticity of findings, as adult interpretations may not accurately reflect children lived realities. Quantitative designs, though valuable for generalization, often fail to capture the depth of meaning embedded in children's narratives. The limited use of phenomenological approaches represents a critical gap. This study directly addresses that limitation by prioritizing foster children's own accounts of their experiences, challenges, coping strategies, and perceived support systems. In summary, although the literature identifies trauma, attachment disruption, cultural factors, sibling separation, and educational instability as important themes, it remains fragmented, contextually narrow, and often methodologically adult-centered. There are contradictions regarding intervention effectiveness, sibling dynamics, and the integration of educational and emotional domains. Moreover, there is a significant contextual gap in sub-Saharan African settings, particularly within community-based foster systems. Therefore, this study contributes to the literature by:

- Providing context-specific insights from Breman Esiam, Ghana.
- Centering foster children lived experiences rather than relying solely on adult reports.

- Integrating socio-emotional experiences, challenges, coping strategies, and social support within one analytical framework.
- Examining these phenomena through culturally grounded and phenomenological lenses.

2.18 Chapter Summary

The literature on the socio-emotional experiences of foster children highlights the unique challenges faced by this vulnerable population and the importance of understanding and addressing their needs. Studies have shown that foster children often experience higher levels of emotional and behavioural difficulties compared to their peers. These challenges can arise from various factors, including trauma, attachment disruptions, placement changes, and the lack of stable and nurturing relationships. Attachment theory has been widely used to explain the socio-emotional experiences of foster children. Research suggests that the quality of the child's attachment with their foster parents significantly impacts their socio-emotional well-being. Foster children with secure attachments tend to exhibit better outcomes in terms of emotional regulation, social competence, and resilience. Ecological systems theory has also been applied to examine the socio-emotional experiences of foster children. This framework stresses the importance of understanding the multiple environments that influence foster children's lives. These include their immediate family and home (microsystem), the connections between different settings like home and school (mesosystem), the wider community and local institutions (exosystem), and the overarching cultural and societal influences (macrosystem). The interactions among these systems collectively shape foster children's socio-emotional growth and overall well-being.

Studies have also explored the role of social support services in fostering positive socio-emotional outcomes for foster children. Research highlights the significance of comprehensive support systems, including mentorship, counselling, and life skills training, in promoting the resilience and coping abilities of foster children. Despite advancements in research, several gaps remain. Longitudinal studies are needed to track foster children's development over time, providing a better understanding of the long-term effects of foster care experiences on their socio-emotional well-being. Additionally, more research is required to explore the intersection of culture and socio-emotional development in foster children to develop culturally sensitive interventions. Thus, involving foster children as active participants in research and considering their perspectives is crucial to gaining insights that inform policy and practice improvements within the foster care system.

CHAPTER THREE

METHODOLOGY

3.0 Introduction

This chapter outlines the methodology used in the study. It covers the research paradigm, approach, and design, as well as the role of the researcher. The chapter also describes the study area, the population under investigation, and the sampling methods employed. In addition, it explains the data collection instruments, the steps taken to ensure the trustworthiness of the study, the procedures for collecting and analyzing data, and the ethical considerations observed throughout the research.

3.1 Research Paradigm

The study adopted the interpretivist paradigm, which is based on the idea that understanding human and social phenomena requires different approaches than those used in the physical sciences. Unlike the physical world, humans interpret their surroundings and act according to those interpretations (Hammersley, 2013). This paradigm was chosen because it allows researchers not only to describe events, people, or objects but also to gain a deeper understanding of them within their social context (Hammersley, 2013). Using the interpretivist approach enabled the researcher to conduct the study in a natural setting, applying methods that provide insider perspectives and more authentic insights into the subject of research (Bryman, 2015). It also facilitated interactive interviews, allowing the researcher to explore aspects that are not directly observable. Through this approach, participants' thoughts, feelings, values, beliefs, perceptions, and viewpoints could be examined in-depth (Bryman, 2015). Overall, employing this paradigm helped the study gather rich, meaningful data, offering valuable insights to guide further analysis and actions (Cohen, Manion & Morrison, 2018).

3.2 Research Approach

This study employed a qualitative research approach to explore the socio-emotional experiences, challenges and coping strategies of foster children in the Breman Esiam community. Qualitative research is particularly effective for understanding human experiences because it focuses on meanings, perceptions, and personal narratives rather than numerical data (Panke, 2018; Punch, 2013). This approach allowed the researcher to gather rich, in-depth insights into how foster children interpret their social and emotional worlds, capturing their thoughts, feelings, and interactions within their natural environment (Pratt, 2016). By prioritising participants' narratives, the study could explore the unique experiences of foster children, including the challenges they face and the coping strategies they employ. Observing and engaging with children in their community enabled the researcher to understand the social, emotional, and contextual factors that influence their well-being (Saunders, Lewis & Thornhill, 2016; Walliman, 2017). Overall, the qualitative approach provided the flexibility and depth needed to uncover foster children lived experiences, offering nuanced insights into their socio-emotional development that numbers alone could not capture.

3.3 Research Design

This study adopted a phenomenological research design to explore the socio-emotional experiences of foster children in the Breman Esiam Community, Ghana. This design was chosen because it focuses on understanding the lived experiences of individuals from their own perspectives, allowing the researcher to capture the essence of their feelings, thoughts, and experiences (Creswell & Creswell, 2018). Data were collected through in-depth, personal interviews with fosterchildren aged 11 to 17 years. Open-ended questions were used to give participants the freedom to share their experiences in their own words. This approach provided a deeper understanding of the participants'

socio-emotional lives and allowed the researcher to gain a complete and more nuanced picture of the challenges and coping mechanisms foster children experience in this community. Overall, the phenomenological design enabled the study to focus on the children's perspectives, offering rich and detailed insights into their socio-emotional development.

3.4 Researcher's Role

In qualitative research, the researcher plays a central role in shaping the study (Hammersley, 2013). In this study, I collaborated closely with participants to collect data, assuming four key responsibilities: gathering and analyzing data, reporting findings, maintaining participant confidentiality, and ensuring ethical conduct throughout the research process (Bispo, 2017; Yin, 2014). I took deliberate steps to minimize any influence on the participants' responses, ensuring that my actions and decisions were fair, respectful, and nonjudgmental, while fostering open and honest communication (Yin, 2014). I listened attentively, remained engaged, and probed, when necessary, without making participants feel interrogated (Yin, 2018). Although I identified potential participants, I remained impartial and did not influence their input (Bispo, 2017).

Respecting participants' rights and well-being was a priority. I obtained informed consent from all participants before their involvement, including consent to record interviews. I avoided including participants with whom I had personal relationships and ensured that my personal views did not influence the analysis (Marshall & Rossman, 2016; Cope, 2014). To guide the interviews, I developed a semi-structured interview guide, included in Appendix C (Castillo-Montoya, 2016).

3.5 Study Area

The study was conducted in the Breman Esiam Community, located in the Ajumako-Enyan-Esiam District of Ghana. The district capital is Ajumako, with a population of 138,046 according to the 2010 Population and Housing Census (GSS, 2010). Covering approximately 521.2 square kilometres, about 5% of the Central Region's land area, the district is predominantly rural. It shares borders with Assin North and South to the west, Effutu District to the south, Asikuma-Odoben-Brakwa to the northwest, and Gomoa West District to the east (GSS, 2010). Agriculture is the main economic activity, practiced alongside other livelihoods (GSS, 2010). Major crops include cassava, maize, plantain, citrus, and vegetables such as garden eggs and pepper, while non-traditional crops like cashew and pineapple are grown in areas such as Mando and Enyan Abaasa. Other activities include agro-processing (e.g., converting oil palm fruits to oil and cassava to gari), masonry, carpentry, and auto-mechanics.

Breman Esiam also hosts several tourist attractions, including the sacred Bell with unknown inscriptions, the Great Waterfalls, Ofabir Akotogua, and the Akwambo festivals celebrated across the five paramountcies: Ajumako, Abaasa, Denkyira, Enyan Maim, and Breman Esiam (GSS, 2010). Farming often involves vulnerable boys who work full-time in the fields, sometimes at the expense of attending school. Despite performing equal or greater work compared to adults, these children are frequently underpaid, highlighting their vulnerability in the community.

3.6 Population

In research, a population refers to the entire group of people, objects, or events that share certain characteristics and that the researcher is interested in studying (Braun & Clarke, 2021). The target population is the specific group from which the researcher aims to gather information and to which they hope to apply or generalize their findings (Miles et al., 2014). The target population included all foster children in the Breman Esiam Community. These are children who for some reasons are not living with their biological parents in the Breman Esiam Community.

3.7 Sample and Sampling Technique

Creswell and Creswell (2018) posit that qualitative studies typically involve between five and twenty-five (5–25) participants, depending on the nature of the phenomenon under investigation and the point at which data saturation is achieved. In the present study, the sample size was not determined solely by numerical guidelines but was guided primarily by the principle of data saturation. In qualitative research, data saturation occurs when gathering more information no longer produces new insights, themes, or meaningful details, signaling that the phenomenon under study has been thoroughly explored (Creswell & Creswell, 2018). This approach is particularly appropriate for studies that seek in-depth understanding of lived experiences rather than statistical generalisation.

Data saturation in this study was achieved through an iterative process of data collection and analysis. In line with Creswell and Luketic (2017), the researcher assessed saturation by examining three key indicators: the emergence of recurring themes or patterns, redundancy in participants' responses, and the absence of new information in subsequent interviews. During the data analysis process, the researcher observed that

similar ideas, experiences, and meanings repeatedly emerged across participants' narratives. The recurrence of these themes indicated that participants were describing comparable lived experiences, suggesting that the phenomenon under investigation had been sufficiently captured. Additionally, when further interviews failed to introduce new perspectives and instead reinforced existing categories, redundancy became evident, confirming that data saturation had been reached (Creswell & Luketic, 2017; Creswell & Creswell, 2018). According to Braun and Clarke (2021), qualitative inquiry emphasises that sample adequacy is determined by depth, relevance, and saturation of data rather than numerical size.

Based on this process, a total of fifteen (15) foster children was considered methodologically sufficient and appropriate for achieving rich, in-depth understanding of participants lived experiences within the bounded community setting. Qualitative methodologists argue that smaller samples are suitable for involving vulnerable populations, particularly children, where ethical sensitivity, emotional safety, and depth of engagement are critical. Creswell and Creswell (2018) demonstrate that thematic saturation in homogeneous populations often occurs between 12 and 15 interviews, especially when participants share similar contextual characteristics. Given that the foster children in Breman Esiam were exposed to comparable caregiving environments, cultural norms, and community structures, the sample of 15 was adequate for capturing recurring socio-emotional themes. This sample size is consistent with qualitative methodological recommendations for studies involving in-depth exploration of sensitive and complex social phenomena, particularly among hard-to-reach populations (Creswell & Poth, 2018; Guest, Bunce, & Johnson, 2006).

Participants were selected using the snowball sampling technique. The choice of this sampling strategy was deliberately informed by the setting of the study. Foster children in the Breman Esiam Community constitute a hidden and vulnerable population, with no formal records or accessible sampling frame from which participants could be readily identified. According to Creswell and Poth (2018), snowball sampling is especially suitable when potential participants are difficult to locate, socially marginalised, or reluctant to self-identify due to the sensitive nature of their experiences. Similarly, Patton (2015) argues that referral-based sampling is appropriate when studying populations that are not easily observable or publicly identifiable.

The sampling process began with the identification of one foster child through the researcher's interaction with children within the Breman Esiam Community. This initial participant served as a key informant and subsequently assisted in identifying other foster children who had similar lived experiences relevant to the topic under investigation. This approach enabled the researcher to gain access to participants who might otherwise have remained unreachable due to social stigma, fear of disclosure, or lack of formal recognition within the community. By relying on trust built within existing social networks, snowball sampling facilitated richer, more authentic accounts of participants' experiences (Creswell & Poth, 2018). Despite its suitability for the study setting, snowball sampling is acknowledged to have limitations. One key limitation is the potential for sampling bias, as participants are more likely to refer individuals within their social circles who share similar backgrounds or experiences, thereby reducing the likelihood of obtaining a diverse cross-section of the population (Creswell & Luketic, 2017). However, within the qualitative research paradigm, representativeness is not the primary goal. Rather, the emphasis is placed on depth, meaning, and contextual understanding of the phenomenon (Creswell & Creswell,

2018). In this study, the sample size of 15 and the use of snowball sampling were therefore justified as a pragmatic and methodologically appropriate strategy for accessing a rare and sensitive population and contextual relevance to the study, while data saturation was used as an important guideline to ensure that the sample collected was sufficient and that no new information or insights were being missed.

3.8 Data Collection Instrument

Semi-structured interview guide was used to collect data in this study. The study used this instrument because it encouraged two-way communication (Creswell & Luketic, 2017). Further, it provided opportunity to participants to clarify their stories that were shared. Again, it gave participants time to open up about sensitive issues concerning their stories (Creswell & Luketic, 2017). This interview guide had two sections: Sections A and B. Section A presented four questions on the demographic information of participants. For example, gender, age, class, and number of siblings. Section B had questions that focused on social-emotional experiences of foster children in the Breman Esiam Community, socio-emotional challenges facing foster children in the Breman Esiam Community, how foster children cope with the socio-emotional challenges they face in the Breman Esiam Community and social supports services available to foster children in the Breman Esiam Community. Examples of questions on the interview guide were: How do you relate with your siblings and peers at home and school?; What problems do you face as a result of being a foster child?; how do you manage the problems you face as a foster child? and what kind of help have you received so as to deal with the problems you face as a foster child?

3.9 Trustworthiness of the Study

The trustworthiness of this study was ensured through the four criteria proposed by Lincoln and Guba (1985): credibility, dependability, transferability, and confirmability.

3.9.1 Credibility

Credibility refers to the extent to which the study's findings are believable and reflect standard data collection procedures (Bryman, 2015). To enhance credibility, the researcher used probing and interactive questioning to gather detailed responses. Participants were often asked to clarify or expand on previous points through rephrased questions. Additionally, the interview guide was reviewed by course mates and supervisors, whose feedback helped refine the questions and offered fresh perspectives. Member checks were conducted by playing audio recordings of the interviews to participants, allowing them to confirm whether their responses were accurately captured. Reflexivity was also maintained by the researcher documenting personal biases, assumptions, and reflections in a journal throughout data collection, which helped ensure transparency and deeper understanding of participants' socio-emotional experiences (Creswell & Creswell, 2018; Yin, 2018). The researcher's professional background as a counsellor over the past twelve years provided both motivation and insight, shaping the selection of the research topic and guiding the interpretation of participants' experiences. Reflections captured during fieldwork helped maintain focus and continuously improve the data collection and interpretation processes.

3.9.2 Dependability

Dependability relates to the stability and consistency of research findings over time (Bryman, 2015). To ensure dependability, all research processes were clearly documented, including the research approach and design, allowing future researchers

to understand and, if necessary, replicate the study. Detailed reporting of methods and procedures enabled transparency, allowing others to assess the reliability of the findings (Denzin & Lincoln, 2013).

3.9.3 Transferability

Transferability concerns the extent to which findings can be applied to other contexts (Kothari & Garg, 2014). This study provided a thick description of foster children's socio-emotional experiences, allowing readers to compare these findings with other settings. While the study's small sample size may limit generalization, it offers valuable insights into the unique experiences of foster children in the Breman Esiam Community and provides a foundation for further research with larger populations.

3.9.4 Confirmability

Confirmability ensures that findings are shaped by participants' experiences rather than researcher bias (Lincoln & Guba, 1985). This study-maintained confirmability by clearly documenting the research paradigm, approach, and methodology. An **audit trail** was created to provide a transparent record of every step in the research process, from data collection to reporting, allowing others to verify the findings (Denzin & Lincoln, 2013).

3.10 Data Collection Procedures

An introductory letter was obtained from the Head of the Department of Counselling Psychology at the University of Education, Winneba, to formally seek permission from the relevant gatekeepers, including school heads, parents or caregivers, and the participants themselves. The purpose of the study and the intended use of the findings were clearly explained to all parties. Participants were assured that their identities would be protected and that all information shared would be treated with strict

confidentiality. Interview venues were carefully selected to ensure privacy and to prevent participants from being overheard. Data were collected through face-to-face interviews conducted in English. With the consent of participants, the interviews were audio-recorded to ensure accurate capture of responses and consistency across all sessions (Creswell & Creswell, 2018). The use of audio recording also allowed the researcher to pay closer attention to non-verbal expressions such as gestures, facial cues, and body language, while brief field notes were taken as a supplementary record. Each interview lasted about 20 minutes, with the first five minutes devoted to building rapport and helping participants feel comfortable. Data collection was completed within one week, and all participants were cooperative and engaged throughout the interview process.

3.11 Data Analysis Procedures

The data collected were analysed using thematic analysis and direct quotations from participants. This approach allowed the researcher to identify patterns and classify information according to the study's research questions, providing a clear and detailed presentation of the findings. Thematic analysis was particularly suitable for this study because it focused on interpreting the socio-emotional experiences, challenges and coping strategies of foster children, capturing their perspectives in-depth. Using this method also ensured a systematic approach to data analysis. It enabled the researcher to examine how frequently certain themes appeared across interviews and to link these patterns to the overall content, enhancing the accuracy and richness of the findings (Yin, 2014). Moreover, thematic analysis and direct quotes helped readers gain a clearer understanding of the key issues emerging from the study and the experiences shared by participants.

The process began with verbatim transcription of all interviews, followed by repeated readings of the text to identify recurring words, concepts, ideas, and patterns. These recurring elements were then cross-checked across different interviews to establish consistency and confirm the validity of emerging themes. Thematic analysis also involved a careful examination of the data to uncover recurrent patterns. The researcher systematically worked through the transcripts to identify topics of interest, which were then refined into initial codes. The data were reviewed line by line to ensure a thorough understanding and to facilitate a detailed micro-analysis. Next, the researcher grouped related codes into proto-themes, which were preliminary categories representing meaningful patterns in the data. Each proto-theme was reviewed by revisiting the original transcripts to ensure it accurately reflected participants' experiences. The proto-themes were further refined, defined, and supported with direct quotations, leading to the construction of the final themes. Each theme was reported with a clear description and illustrated with representative quotes to help readers fully grasp the participants' perspectives.

This careful approach allowed the study to explore the lived socio-emotional experiences of foster children in the Breman Esiam Community, providing valuable insights that can inform interventions aimed at supporting their well-being. The analysis followed a phenomenological approach, which is appropriate for understanding personal experiences in-depth. In this study, Interpretative Phenomenological Analysis (IPA) was applied in four main steps:

1. Familiarisation with the data
2. Generating initial codes and identifying potential themes
3. Reviewing and refining themes
4. Defining and naming the final themes

By following these steps, the researcher was able to produce a comprehensive, accurate, and meaningful interpretation of foster children's socio-emotional experiences.

The researcher began by carefully listening to all interviews and reading the transcriptions multiple times to gain a deep familiarity with the data. Next, initial codes were generated from the transcripts using the open coding method, and potential themes were identified. The researcher then examined the data for recurring patterns, highlighting similarities and differences across participants' responses. Finally, the themes were clearly defined, named, and organized into a thematic network to provide an overall summary of the findings. Given that qualitative research is highly interpretive, structured measures were taken to ensure accuracy and trustworthiness. The emerging themes and interpretations were reviewed and discussed with the research supervisors, who helped validate the findings. Direct quotes representing each theme were cross-checked to ensure that the analysis accurately reflected the participants' perspectives and maintained the integrity of their lived experiences (Yin, 2014).

3.12 Ethical Considerations

Access, informed consent, confidentiality, anonymity and plagiarism were ethical issues this study considered.

3.12.1 Access

To obtain permission for data collection, an introductory letter from the Head of the Department of Counselling Psychology at the University of Education, Winneba, was first secured. Copies of this letter were then provided to the gatekeepers and participants to formally request their approval. Following the granting of permission, suitable dates, times, and venues for the data collection were arranged.

3.12.2 Informed Consent

The researcher clearly outlined the purpose of the study, the intended use of the data, and its importance for the participants and their parents or caregivers. Since the participants were minors, their parents or caregivers had the opportunity to voluntarily decide whether to permit their foster children to participate in the study. Only those who provided consent had their foster children included in the research.

3.12.3 Confidentiality

Participants were assured that data would be kept confidentially. For example, audio-recordings of the interviews were not be shared to the general public. Also, interviews were undertaken at a conducive environment where no one could hear the voices of the participants. Further, apart from the research supervisor, no one was made to have access to the field notes and audio-recordings of the interviews.

3.12.4 Anonymity

Participants were encouraged not to mention any noticeable information (such as their names, name of school, house number and contacts) while sharing their stories. Likewise, no identifiable information of participants were stated in the reports or findings of the study. The researcher believed that this would make it very difficult for a third party to trace the responses to the specific participant who shared it. Furthermore, pseudo names such as foster child one (FC: 1) onwards were assigned to the interview data. Also, interview data were kept from the reach of other individuals.

3.12.5 Plagiarism

The researcher tried the best to acknowledge all in-text references under the reference column

CHAPTER FOUR

RESULTS AND DISCUSSIONS

4.0 Introduction

This study aims to examine the socio-emotional experiences, challenges, and coping strategies of foster children in the Breman Esiam Community, Ghana. This chapter presents and discusses the findings of the study and is organised into two main sections. Section A outlines the demographic characteristics of the participants, while Section B presents the findings related to the research questions and discusses these results in relation to existing literature.

4.1 Demographic Information of Participants

This section presents the demographic characteristics of the participants. Four items were used to collect this information, namely gender, age, class, and number of siblings. The data were analysed using frequencies and percentages, and the results are presented in the subsequent section. Table 1 summarises the demographic profile of the participants.

Table 1: Demographic Information of Participants

Item	Category	Frequency	Percentage (%)
Gender	Male	8	53.33
	Female	7	46.67
Age (in years)	11-12	4	26.67
	13-14	8	53.33
	15-16	2	13.33
	17 and above	1	6.67
Class	Basic 5	2	13.3
	Basic 6	3	20.0
	JHS 1	4	26.67
	JHS 2	4	26.67
	JHS 3	2	13.3
Number of Children with siblings	1	4	26.67
	0	3	20.0
	2	5	33.33
	3	2	13.33
	4	1	6.67

Source: Field data (2023)**Total Number of Participants=15**

In Table 1, in relation to gender, there were 8(53.33%) male children and 7(46.67%) female children. The results signify that majority of foster children in this sample were males than females. Also, for age, the table shows that 4(26.67%) children were between the ages of 11-12 years. Also, 8(53.33%) children claimed that they were between the ages of 13-14 years. Further, 2(13.33%) children indicated that they were between the ages of 15-16 years. Finally, 1(6.67%) child was 17 years old. The age

distribution showed that the largest group of foster children falls within the 13-14 years (53.33%), followed by 11-12 years (26.67%), and 15-16 years (13.33%).

Again, the table shows that 2(13.33%) of the children were in class five, 3(20.00%) were in class six, 4(26.66%) were in JHS 1, 4(26.66%) were in JHS 2 and 2(13.33%) were in JHS 3. It connotes that the educational level of these foster children is distributed across various classes. Finally, the table depicts that 3(20.00%) of the children did not have siblings. Also, 4(26.67%) of the children had 1 sibling. Further, 5(33.33%) of the children had 2 siblings. Besides, 2(13.33%) of the children had 3 siblings while 1(6.67%) child had 4 siblings. It therefore signifies that majority of foster children in this sample had 1 or 2 siblings (26.67% and 33.33%, respectively), 20.00% had no siblings, while 13.33% had 3 siblings, and 6.67% had 4 siblings.

4.2 Research Question

This section deals with the results relating to the research questions and discussion of findings.

Research Question 1

What are the social-emotional experiences of foster children in the Breman Esiam Community?

The objective of this question was to establish social-emotional experiences of foster children in the Breman Esiam Community. Next is the discussion of themes (bad and good emotions) obtained and direct quotes to support them.

Bad Emotions

Loss and longing

It was noticed from the comments given by foster children that they often grapple with feelings of loss and a longing for stability and permanence. For example, FC: 1 said:

“I miss my old home and my family so much. Sometimes, I lay awake at night, wishing I could go back and make everything right again” [FC: 1].

Similarly, FC: 10 said:

“It’s hard to get close to people when you know you might be moved to another home. I keep myself distant to protect myself from more abuse” [FC: 10].

Also, FC: 5 emphatically said:

“Saying goodbye to my mom was the hardest thing I’ve ever done. I miss her so much, and I keep hoping she’ll come back for me, but I know it’s not possible” [FC: 5].

FC: 8 also shared a similar view by saying:

“When I moved to my new foster home, it feels like starting all over again. I don’t know how long I’ll be here, and it’s tough not knowing where I’ll end up next” [FC: 8].

These comments suggest that these foster children regularly wrestle with the loss of their birth families and the uncertainty of their future.

Identity and belonging

Some of the comments given by some foster children suggest that perhaps they struggle with questions of identity and a sense of belonging. For instance, FC: 13 said:

“I never really felt like I belonged anywhere. I was constantly moving from one foster home to another, and it was hard to connect with people when I knew I might be leaving again” [FC: 13].

More so, FC: 14 said:

“After being let down so many times, it’s tough to trust anyone. I keep people far away from me because I’m afraid they’ll abandon me like others have” [FC: 14].

These comments imply that these foster children may have difficulty trusting others and forming secure attachments due to previous traumas and disruptions.

Loss and grief

It was identified from the comments given by some of these foster children that they often experience profound loss and grief due to separation from birth parents and uncertainty about their future. For example, FC: 12 said:

“I miss my mom every day. Even though she couldn’t take care of me, I still love her [FC: 12].

From these comments, it could be realised that some of these foster children that they regularly go through deep loss and grief as a result of the parting from their biological parents and doubt about their future

Building trust and attachment

It was discovered from some of the comments advanced by some foster children that they sometimes struggle to trust others and form secure attachments due to past traumas and disrupted relationships. For example, FC: 15 said:

“I want to trust my foster parents, but it’s frightening for me to do that. This is because I’ve been hurt before, and I don’t want to get hurt again”
[FC: 15].

Similarly, FC: 10 said:

“It took me a long time to feel safe with my new foster family. They were patient with me, and little by little, I started opening up to them” [FC: 10].

These comments reflect the emotional challenges and complexities that these foster children may have experienced. The comments also emphasised the importance of understanding and supporting these children as they navigate their unique social-emotional journeys.

Good Emotions

Resilience and connection

Comments from foster children also showed remarkable resilience and find solace in forming meaningful connections with supportive caregivers or friends. For instance, FC: 11 said:

“My foster mom has been there for me through difficult times. She makes me feel safe and loved, and I can’t imagine where I’d be without her”
[FC: 11].

Similarly, FC: 6 said:

“I finally made a friend at school who understands what I’m going through. It’s nice to have someone who really gets it and doesn’t judge me” [FC: 6].

These comments represent the emotional complexity and coping mechanisms that these foster children may experience in their unique circumstances. The comments further highlight the challenges they face while also shedding light on the strength and potential for positive connections. On this note, it was concluded that foster children went through bad and good social-emotional experiences in the Breman Esiam Community. It included: loss and longing, resilience and connection, building trust and attachment, identity and belonging and loss and grief were key social-emotional experiences of foster children in the Breman Esiam Community. This duality reflects the emotional complexity highlighted in Person-centered theory, which posits that individuals possess an innate capacity for growth, even in the presence of adversity, when provided with empathy, acceptance, and understanding (Rogers, 1951).

From an attachment theory perspective, experiences of loss, grief, and longing are consistent with Bowlby's (1969) assertion that separation from primary caregivers disrupts the child's internal working models of safety and security.

Foster children's struggles with trust and attachment observed in this study align with findings by Dozier et al. (2012), who reported that early neglect or abuse often results in insecure attachment patterns, affecting socio-emotional development. Similarly, Jackson et al. (2017) found that foster youth frequently experience delays in identity development due to instability in caregiving relationships, which corroborates the identity and belonging challenges identified in this study. At the same time, the emergence of resilience and connection among some foster children reflects Rogers' (1959) view that individuals can move toward psychological growth when they experience acceptance and positive regard from significant adults. This supports the conclusion that foster children's socio-emotional experiences in Breman Esiam are not uniformly negative but are shaped by the quality of relational support available to them.

Research Question 2

What are the socio-emotional challenges facing foster children in the Breman Esiam Community?

The objective of this question was to explore socio-emotional challenges facing foster children in the Breman Esiam Community. The following were themes obtained in analysing data for this research question.

Navigating loss and abandonment

Foster children often grapple with feelings of loss, abandonment, and the disruption of family bonds.

For example, FC: 13 said:

“When my parents couldn’t take care of me, I felt like they didn’t love me anymore. It’s tough not having them around, and I wonder if they ever think about me” [FC: 13].

Also, FC: 5 said:

“When I came to this house, I lost all my friends. It’s like I have to start making new friends all over again, and it’s tough to keep believing people when they might leave too” [FC: 5].

Moreover, FC: 7 said:

“I wish I knew why my parents couldn’t be there for me. I sometimes blame myself, wondering if I was just not good enough for them to stay” [FC: 7].

Building trust and attachment

It was established based on some of the comments given by foster children that they may struggle to form secure attachments and trust adults due to previous experiences of neglect or abuse. This was affirmed when FC: 15 said:

“I’ve been let down so many times that I find it hard to believe anyone really cares about me. It’s like I’m always waiting for them to give up on me” [FC: 15].

Similarly, FC: 1 said:

“Believing people, I do not know much is very dangerous to me. I’ve been offended before, and I don’t want to go through that again. I just wish someone could show to me that they won’t leave me too” [FC: 1].

More so, FC: 8 said:

“Sometimes, I have to forget some people before they offend me. It’s like I do not give them the chance at all, but I don’t want to be alone forever. I just want someone to show me they won’t leave” [FC: 8].

Identity and self-worth

As a result of the comments given by some of the foster children, it was discovered that some of these children possibly struggle with questions of identity and may encounter challenges in developing a positive self-image. For example, FC: 12 said:

“I don’t know who I am anymore. It’s like I’ve lost something important to me and I’m not sure where I fit in or what my future holds” [FC: 10].

Harmoniously, FC: 9 emphatically said:

“Living in different homes, I feel like I have to be a different person for each family. It’s confusing, and sometimes I wonder who I really am” [FC: 9].

Again, FC: 3 said:

“People always tell me I’m lucky to have a chance for a better life, but it’s hard to believe that when I feel bad within me. I wish I could see myself as importance of love and happiness” [FC: 4].

These comments denote complex emotional struggles that these foster children often face as they cope with the socio-emotional challenges of their past and strive to find stability and a sense of self-worth. This implies that each foster child’s experience is unique, and their socio-emotional challenges vary. It was upon this premises that a conclusion was drawn that socio-emotional challenges facing foster children in the Breman Esiam Community included: navigating loss and abandonment, building trust and attachment and identity and self-worth. The findings further indicate that foster children faced socio-emotional challenges such as navigating loss and abandonment, difficulties in building trust and attachment, and struggles with identity and self-worth. These challenges align strongly with attachment theory, which emphasises that inconsistent or disrupted caregiving can impair emotional regulation and relational security (Bowlby, 1969).

Consistent with this study’s findings, Dozier et al. (2018) reported that foster children often exhibit insecure attachment styles that hinder trust formation with caregivers. These attachment disruptions were also evident in the emotional regulation difficulties observed in the Breman Esiam foster children, supporting Maikovich-Fong et al. (2013) conclusion that trauma exposure significantly affects foster children’s ability to manage emotions. Additionally, Hatch et al. (2019) found that foster children often struggle with self-esteem and identity formation due to instability in family and social environments, reinforcing the present study’s findings on identity and self-worth challenges. From a Person-centered perspective, these challenges can be understood as

consequences of environments where children may not consistently experience unconditional positive regard or emotional safety. Rogers (1951) argues that the absence of such conditions can hinder self-concept development, explaining the emotional struggles reported by the foster children in this study.

Research Question 3

How do foster children cope with the socio-emotional challenges they face in the Breman Esiam Community?

The objective of this question was to ascertain how foster children cope with the socio-emotional challenges they face in the Breman Esiam Community. Next is a discussion on some of the themes identified and direct quotes to support them.

Resilience and inner strength

Comments from foster children suggest that they sometimes demonstrate remarkable resilience and inner strength in navigating their socio-emotional challenges they face.

For example, FC: 2 said:

“I’ve been through a lot, but I refuse to let my past define me. I may have scars, but they remind me of how strong I am and that I can overcome anything” [FC: 2].

Also, FC: 11 said:

“It’s not easy, but I’ve learned to pick myself up every time I fall. I won’t let my circumstances break me. I’ll keep fighting for a better future” [FC: 11].

The comments suggest that these children were able to bounce back from the socio-emotional challenges they faced. For that purpose, they were able to cope with the socio-emotional challenges they experienced.

Forming supportive connections

Foster children may actively seek and form supportive connections with peers, mentors, or caregivers to cope with their emotions.

For example, FC: 14 said:

“Having someone who listens and understands makes a huge difference. My friend from school had been there for me during difficult times and I’m grateful for that” [FC: 14].

Congruently, FC: 15 said:

“My foster mom is like a rock for me. She makes me feel safe and loved, and I can talk to her about anything. Having her in my life gives me hope” [FC: 15].

These comments infer that these children received supports from their acquaintances. For this reason, these children were able to deal with the socio-emotional challenges they go through.

Creative expression as outlet

It was established from the comments given by foster children that they may find solace in creative expression, such as art, writing, or music, to process and communicate their emotions.

For example, FC: 3 said:

“When I draw or paint, I feel like I can let go of all the pain inside me. It’s like my emotions come to life on the canvas, and I feel a bit lighter afterward” [FC: 3].

Consistently, FC: 10 said:

“Writing helps me make sense of my thoughts and feelings. Sometimes, it’s hard to talk about what I’m going through, but writing in my journal gives me clarity” [FC: 10].

Finding support in friendships

Comments given by some of the foster children signify that these children sometimes seek comfort and care in friendships, forming meaningful connections with peers who understand their experiences.

For example, FC: 8 said:

“Having friends who’ve been through similar things helps a lot. We can relate to each other and support one another when things get tough” [FC: 8].

Correspondingly, FC: 15 said:

“My best friend is like me. She listens to me, and I know she won’t judge me in any way. We’re like family” [FC: 15].

These comments highlight the diverse ways in which foster children cope with their socio-emotional challenges. Thus, through supportive friendships these children find strength and ways to direct the difficulties of their experiences.

In general, these comments reflect how these foster children draw upon their inner strength, form meaningful connections, and engage in creative outlets to cope with the socio-emotional challenges they encounter. It could be understood from these comments that foster children’s coping mechanisms can vary widely based on their personalities, interests, and support systems, but these comments demonstrate some of the positive ways they navigate their difficult circumstances. It was then concluded that resilience and inner strength, forming supportive connections, supportive friendships,

and creative outlets, finding support in friendship were major coping strategies adopted by foster children to navigate the complexities of their socio-emotional challenges in the Breman Esiam Community.

These coping mechanisms align with Person-centered theory's emphasis on self-directed growth and intrinsic motivation (Rogers, 1951). When foster children experience even limited emotional support, they are able to mobilise internal resources to cope with adversity. Attachment theory further explains that supportive peer and adult relationships can serve as compensatory attachment figures, offering emotional security when primary attachments have been disrupted (Bowlby, 1969). Harden et al. (2017) similarly argue that positive relationships with peers, mentors, and caregivers significantly enhance foster children's coping capacities. Stein (2018) also supports this finding, noting that foster children often develop resilience through social support and constructive engagement in activities. Empirical evidence from Ungar (2013) and Fisher et al. (2015) reinforces the idea that resilience among foster children is context-dependent and strengthened by stable, supportive relationships. Thus, the coping strategies identified in this study reflect both personal agency and relational support, consistent with both theoretical frameworks.

Research Question 4

What are the social support services available to foster children in the Breman Esiam Community?

The objective of this question was to identify social supports services available to foster children in the Breman Esiam Community. Next is a discussion on some of the themes identified and direct quotes supporting them.

Therapeutic support and counselling

It was found through the comments given by some of the foster children that they sometimes have access to therapeutic support and counselling services to help them process their emotions, trauma, and develop coping skills. For example, FC: 5 said:

“My school counsellor has been very supportive to me. Talking to her helps me understand my feelings better and gives me hope for a brighter future” [FC: 5].

In the same way, FC: 14 said:

“Our school counsellor has taught me ways to manage my past. It’s not easy, but I feel like I’m making progress, and I’m not alone in going through this problem” [FC: 14].

These comments signify that these foster children had access to therapeutic support and counselling services to help them process their emotions, past traumas, and develop coping skills.

Mentorship, role models and like skills training

Foster children may benefit from mentorship programmes and positive role models who provide guidance and support.

For instance, FC: 9 said:

“Having mentors in life is like having someone who believes in me. They show me that I can achieve my dreams despite my past” [FC: 9].

Equally, FC: 2 said:

“My mentors who happens to be some of my teachers had been there for me through challenging moments. They encourage me to work hard and never give up, even when things get tough” [FC: 2].

Further, FC: 7 said:

“The life skills workshops have been eye-opening. I used to worry about what happens when I leave foster care, but now I feel more confident about facing the future” [FC: 7].

From the comments given by these foster children, it could be deduced that these children benefited from mentorship programmes, role models and life skills training that prepare them for independence and a successful transition to adulthood.

Educational support and advocacy

It was found from the comments given by some of foster children that they may receive educational support and advocacy to ensure they have access to quality education and resources. For example, FC: 13 said:

“One of my teachers helped me catch up on missed lessons and supported me when I felt speechless. Thus, this teacher made sure I had everything I needed to succeed” [FC: 13].

Similarly, FC: 4 said:

“One madam at the foster care home fought for me to get into a school where I could succeed. This madam believed in my abilities and made sure I had the right opportunities” [FC: 4].

It could be comprehended from these comments that these foster children receive educational assistance and tutoring to help them succeed academically despite disruptions in their living situations.

Family-based support services

It was disclosed from some of the comments given by some foster children that they receive family-based support services to help them navigate the challenges of adjusting to a new home.

For example, FC: 6 said:

“Some of my family members check in regularly to find out how I am managing the situation I find myself in. This had helped me to come this far” [FC: 6].

Equally, FC: 1 said:

“I’m glad I have a family friend who comes by to make sure I’m doing okay. It’s nice to have someone we can turn to for advice” [FC: 1].

These comments demonstrate that some of the foster children had family members they received social support services from them, which aim to address their unique needs and socio-emotional challenges. In general, these comments illustrate the importance of counselling and social support services in the lives of foster children. It could be realised from these comments that counselling, mentorship, and educational support play a vital role in helping foster children heal, grow, and reach their full potential. Thus, these comments exemplify the diverse social support services available to foster children, ranging from therapeutic counselling, mentoring, role models and life skills training to educational assistance and advocacy. These services aimed to provide these foster children with the necessary tools and support to manage their socio-emotional challenges and thrive in their personal and academic lives. Upon this note, it was concluded that therapeutic counselling, mentoring, role models and life skills training, educational assistance and advocacy to family-based support were the social support services available to foster children in the Breman Esiam Community.

The study also revealed that foster children benefited from various social support services, including therapeutic counselling, mentoring, role models, life skills training, educational assistance, advocacy, and family-based support. These services directly reflect the principles of Person-centered therapy, which emphasises empathy, emotional validation, and empowerment (Rogers, 1951). Therapeutic counselling provides a nonjudgmental space where foster children can process trauma and rebuild self-worth. Empirical studies strongly corroborate this finding. Johnson et al. (2018) demonstrated that therapeutic counselling significantly improves emotional well-being and coping abilities among foster children. Similarly, Smith et al. (2019) found that educational support enhances academic engagement and socio-emotional stability, particularly for children experiencing placement disruptions. Brown et al. (2020) and Pecora et al. (2016) further confirm that mentorship and life skills training improve long-term outcomes for foster youth transitioning to adulthood. From an attachment theory standpoint, these services function as stabilising mechanisms that help repair attachment disruptions and foster emotional security (Bowlby, 1969). Kim and Barth (2015) and Vasquez et al. (2014) found that stable, supportive caregiving environments are critical for resilience and positive developmental outcomes, reinforcing the importance of consistent social support observed in the Breman Esiam Community.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATIONS

5.0 Introduction

The purpose of this study is to explore socio-emotional experiences, challenges, coping strategies of foster children in the Breman Esiam Community, Ghana. This chapter summary, conclusions, recommendations and suggestions for further studies.

5.1 Summary

This study explored socio-emotional experiences of foster children in the Breman Esiam Community. The following questions were formulated to guide this study:

1. What are the social-emotional experiences of foster children in the Breman Esiam Community?
2. What are the socio-emotional challenges facing foster children in the Breman Esiam Community?
3. How do foster children cope with the socio-emotional challenges they face in the Breman Esiam Community?
4. What are the social supports services available to foster children in the Breman Esiam Community?

The study used interpretivism paradigm. Also, qualitative research approach was used to underpin this study. The study further used phenomenological research design. A sample of 15 participants was used in this study. Participants were selected using snowballing sampling technique. Semi-structured interview guide was used to collect data in this study. Data were analysed using themes and direct quotes.

1. It was found that loss and longing, resilience and connection, building trust and attachment, identity and belonging and loss and grief were key social-emotional experiences of foster children in the Breman Esiam Community.

2. Socio-emotional challenges facing foster children in the Breman Esiam Community included: navigating loss and abandonment, building trust and attachment and identity and self-worth.
3. Resilience and inner strength, forming supportive connections, supportive friendships, and creative outlets, finding support in friendship were major coping strategies adopted by foster children to navigate the complexities of their socio-emotional challenges in the Breman Esiam Community.
4. Therapeutic counselling, mentoring, role models and life skills training, educational assistance and advocacy to family-based support were the social support services available to foster children in the Breman Esiam Community.

5.2 Conclusions

From the findings of this study, it was concluded that foster children in the Beman Community experience both negative and positive socio-emotional outcomes, characterised by loss, grief, longing, identity struggles, as well as resilience, connection, and efforts to build trust and attachment. The study further concludes that disrupted attachment, loss, and abandonment are major socio-emotional challenges facing foster children, significantly affecting their ability to trust parents, form secure relationships, and develop positive worth. The study also concludes that foster children demonstrate resilience and adaptive coping abilities, relying on inner strength, supportive friendships, and creative outlets to manage the complexities of their socio-emotional experiences. Finally, the study concludes that access to social support services, including counselling, mentoring, educational assistance, life skills training, advocacy, and family based support helped foster children in the Breman Esiam Community in promoting resilience and coping abilities to socio-emotional challenges.

5.3 Recommendations

Based on the findings and conclusions, the following recommendations are made:

1. Foster parents and caregivers in Breman Esiam Community should be trained in attachment-informed caregiving practices to help foster children cope with grief and difficulties in building trust.
2. Stakeholders, including social welfare agencies and non-governmental organisations, should ensure that foster children have access to regular counselling and psychological support. Therapeutic interventions should focus trauma healing, emotional regulations, identity development, and self-worth enhancement.
3. Schools, community leaders, and social workers should encourage structured peer support groups and social activities that promotes positive friendships among foster. These networks can serve as protective factors and enhance resilience and emotional well-being.
4. Educational support services, including, academic counselling, and advocacy within schools, should be prioritised to address learning disruptions and improve academic engagement and self-esteem among foster children.
5. Enhance the availability and accessibility of social support services by partnering with local NGOs and community-based organizations. This could include establishing a local resource center dedicated to offering counseling services, educational assistance, and mentorship programmes tailored to the unique needs of foster children.

5.4 Implications for Study

1. The findings highlight the need for child welfare policies that prioritise emotional and psychological support alongside physical care in foster placements.

Policymakers should integrate attachment-based and trauma-informed approaches into foster care guidelines and monitoring systems.

2. For social workers, foster parents, and counsellors, the study underscores the importance of consistent emotional support, empathy, and relationship-building in addressing foster children's socio-emotional challenges. Practitioners should adopt person-centred and attachment interventions to enhance foster children's well-being.
3. Schools in Breman Esiam Community should recognise the unique socio-emotional needs of foster children and provide inclusive support systems, including guidance counselling, peer mentoring, and flexible academic arrangements to promote emotional stability and academic success.
4. The study contributes to the limited empirical literature on foster children's socio-emotional experiences in Ghana. Future research should adopt longitudinal and mixed-methods approaches to examine how attachment, resilience, and social support influence foster children's long-term outcomes across different cultural contexts.

5.5 Suggestions for Further Studies

Future researchers may consider the following areas:

1. Long-term effects of foster care on social relationships within the Breman Esiam Community.
2. Bonding and Psychosocial Adjustment of foster children in the Breman Esiam Community.
3. Institutional support services available to foster children in the Breman Esiam Community.

4. Effectiveness of guidance and counselling programmes in assisting foster children cope with the socio-emotional challenges they face in public basic schools in the Breman Esiam Community.

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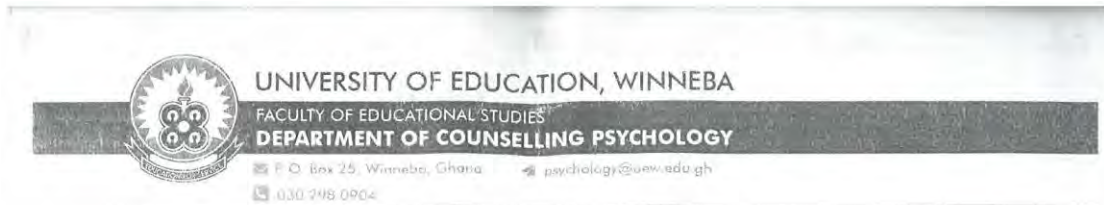
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APPENDICES

APPENDIX A

INTRODUCTORY LETTER



24th January, 2023

TO WHOM IT MAY CONCERN

Dear Sir/Madam,

LETTER OF INTRODUCTION: SAMUEL CATO (200041448)

I write to introduce to you the bearer of this letter, **SAMUEL CATO**, a graduate student in the Department of Counselling Psychology of the University of Education, Winneba.

He is reading for a Doctor of Philosophy Degree in Guidance and Counselling, and as part of the requirements of the programme, he is undertaking a research titled: **SOCIO- EMOTIONAL EXPERIENCES OF CHILDREN LIVING WITH FOSTER PARENTS IN BREMAN ESIAM COMMUNITY, GHANA.**

He needs to administer questionnaire to enable him gather information for his data analysis and he has chosen to do so in your institution.

I would be grateful if he is given permission to undertake this important exercise.

Thank you.

Yours sincerely,

DR. PAUL K. A. BEDU-ADDO
AG. HEAD OF DEPARTMENT



APPENDIX B
CHILD ASSENT FORM

**Section A- BACKGROUND
INFORMATION**

Title of Study:	Socio-Emotional Experiences, Challenges, and Coping Strategies of Foster Children in Breman Esiam Community, Ghana.
Principal Investigator:	Samuel Cato
Certified Protocol Number	

**Section B- CONSENT TO PARTICIPATE IN
RESEARCH**

General Information about Research

I am Samuel Cato MPhil student of University of Education, conducting a study to explore the experiences, challenges, coping strategies, and available social support systems of foster children.

You are selected to participate because you are part of the target group for the study. It will take about 20 to 30 minutes of your time to participate in this study. In this study, your personal information and other details will be handled discreetly and kept confidential. The aim of the study is to explore the experiences, challenges, coping

strategies, and available social support systems of foster children. The findings will serve as a valuable resource for counselling psychologists and social workers who support foster children before they transition out of care.

Benefits/Risks of the study

This study involves a non-invasive procedure and there will be no direct risk, harm or discomfort.

Confidentiality

All personal information gathered throughout the period of study will be kept confidential. Your identity will be protected from the general public by identifying the questionnaire you fill with codes and the information shall be kept under security conditions like using a password on a computer. The only people who can have access to your information is my supervisor and examiners.

Compensation

You will not be compensated for participating in this study.

Withdrawal from Study

You are at liberty to withdraw from participating in this study and this will come at no cost or damage to you, but your full participation will be much appreciated.

What happens after study or when the participant changes his/her mind?

This is a cross-sectional study so there would not be follow-up or further interactions with participants after the study. Data collected shall be stored for ten years in a data repository, after which it shall be deleted. Findings from this study shall be submitted to University of Education, Winneba, as a thesis in partial fulfilment of MPhil in Counseling Psychology. It may also be published in some academic journals.

Contact for Additional Information

For additional information on this study, you can contact Prof. Mrs. Patricia Mawusi Amos 0243..... If you have any questions about your rights as a research participant in this study you may contact the Administrator of School of Graduate Studies, University of Education, Winneba at graduateschool@uew.edu.gh +233-505581864.

Section C- CHILD PARTICIPATION AGREEMENT

"I have read, received answers regarding participation in this study, have talked to your parent(s)/legal guardian about this project, and agree to take part in this research, and I agree to participate in this study as a volunteer.

I will not have waived any of my rights by signing this child consent form. Upon signing this form, I will receive a copy for my personal records."

Your Signature

Printed Name

Date

Name of Parent(s) or Legal Guardian(s)

Researcher explaining study

Signature

Printed Name

Date

Section C- PARENTAL PARTICIPANT CONSENT

I have read, or have had someone read to me, all the information above about this study. I have been given the opportunity to ask questions and have received clear answers. I understand the purpose of the study, what participation involves, and any possible risks or benefits.

I am willing to give consent for my child/ward to participate in this study. I understand that by signing this form, I am not giving up any of my legal rights. I will receive a copy of this consent form for my personal records.

Name of Parent/Guardian

Signature or mark of Parent/Guardian

Date

If the parent/guardian cannot read or understand the form themselves, a witness must sign below:

I was present while the details, benefits, risks, and procedures were read to the parent/guardian. All questions were answered, and the parent/guardian voluntarily agreed for the child/ward to participate in the study.

Name of witness

Signature of witness/Mark

Date

I certify that I have explained the nature, purpose, potential benefits, and possible risks of this study to the parent/guardian named above.

Name of Person who Obtained Consent

Signature of Person Who Obtained Consent

Date

APPENDIX C

INTERVIEW GUIDE FOR FOSTER CHILDREN

Dear Participant,

This interview is intended to collect data for a study being conducted by Samuel Cato, a student from the aforementioned University in line with a Master of Philosophy (Counselling Psychology) thesis titled: **“Socio-emotional experiences, challenges and coping strategies of foster children in Breman Esiam, Ghana”**.

The information you provide will assist the researcher, guidance coordinators/counselling psychologists, basic school headteachers and teachers, as well as other educational stakeholders, to gain an in-depth understanding of the socio-emotional experiences, challenges, and coping strategies of foster children in Breman Esiam, Ghana. The findings will also provide empirical data to inform interventions and improve the situation of foster children through professional counselling at the basic school level.

This interview consists of two sections: Sections A and B. Kindly respond to all questions in each section. You are assured that all information provided will be treated with the utmost confidentiality, and your identity will not be disclosed in any publication arising from this study. Participation in this study is entirely voluntary, and you may withdraw at any time without any consequences.

Thank you in advance for your cooperation.

Yours sincerely,

.....

Samuel Cato

Section A

Demographic Information of Foster Children

1. Gender:

Male []

Female []

2. Age:

11-12 []

13-14 []

15-16 []

17 []

3. Class:

Primary 4 []

Primary 5 []

Primary 6 []

JHS 1 []

JHS 2 []

JHS 3 []

4. How many siblings do you have? Both foster and biological?

Section B

Social-emotional experiences of foster children in the Breman Esiam Community

1. Describe your relationship with your step parent?

Prompts: How does this relationship affect your social life and emotions?

2. Describe your relationship with your siblings?

Prompts: How does this relationship affect your social life and emotions?

3. Describe your relationship with the peers in your house and community?

Prompts: How does your relationship with the peers in your community affects your feelings?

4. Describe your relationship with your peers at school?

Prompts: How does your relationship with your peers at school affects your feelings?

Socio-emotional challenges facing foster children in the Breman Esiam Community

5. What are some of the difficulties you face as a step child?

Prompts: Describe how these difficulties you face affect your social life?

6. How do these difficulties you face affect your emotions?

Prompts: Tell me more.

7. In what ways do these difficulties you face affect how you relate with your step parent and other people?

Prompts: Tell me more.

Coping strategies used by foster children for the socio-emotional challenges they face in the Breman Esiam Community

8. How do you deal with the difficulties you face?

9. What do you think had kept you going till now?

10. Do you share your difficulties with someone?

Prompts: If yes, whom do you normally share your difficulties with?

Prompts: If no, what could be the reason behind you not sharing the difficulties you face with someone?

11. What actions do you take when faced with such difficulties?

Prompts: Tell me more.

Social supports services available to foster children in the Breman Esiam

Community

12. Are your biological parents living?

Prompts: If yes, what help do you receive from your biological parent when faced with problems?

Prompts: Apart from your parent, who else gives you support?

13. How do your friends/peers assist you in dealing with the difficulties you face?

Prompts: Describe how your siblings help you manage the difficulties you face?

14. In what ways do your teachers help you deal with the difficulties you face?

Prompts: Tell me more.

15. Describe how your school counsellor help you deal with the difficulties you face?

Prompts: Tell me more.

16. What assistance have you received from your religious group in your community?

Prompts: Tell me more.

17. What do you think opinion leaders (chief, queen mother, assembly member and others) have done to help you manage the difficulties you face?

Prompts: Tell me more.

18. If you are giving the chance to mention some things that will better the lives of foster children, what would you have mentioned?

Please, do you have any other information to share with me based on what we have discussed so far?