



Socio-environmental Factors as Determinants of Emotional Well-being of Adolescents in Foster Homes in South-Western Nigeria

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ABSTRACT

Aims: The study explored the socio-environmental factors as determinants of the emotional well-being of adolescents in foster homes in southwestern Nigeria.

Study Design: A descriptive survey research of ex-post-facto type was employed.

Place and Duration of Study: Foster homes in six states in southwestern Nigeria.

Methodology: multi-stage sampling was used in selecting 555 respondents for this study and the data collection was done using a semi-structured questionnaire and data analyzed using descriptive and inferential statistics.

Results: The study revealed that peer influence, academic performance and attitude of the foster family were significant to emotional wellbeing. All the components of social factors correlated with

the emotional well-being of the fostered adolescents show that appropriate schooling and educational services can strengthen them and are more likely to view their schools as a supportive and safe haven. Therefore, peers, the foster family and the foster adolescents' exposure to academics either directly or indirectly affects their emotional well-being. It also showed that the majority (54.1%) accepted that they can count on their carers to help them when the need arises. It is also revealed that the foster family attitude is an adolescent's source of emotional support and their psychological well-being which may increase self-esteem in the fostered adolescents. This study revealed that 44.3% of the respondents confirmed that they always get along well with their carers.

Conclusion: Adolescents in foster care face multiple threats to their healthy development, including poor physical health, attachment disorders, compromised brain functioning, inadequate and emotional skills

Keywords: Adolescents; emotional well-being; foster homes; socio-environmental factors.

DEFINITIONS

Here is the Definitions section. This is an optional section.

Term: Definition for the term.

1. INTRODUCTION

Adolescence is a period of complex development and transition from childhood to adulthood which is a stage of major growth and development in which significant physiological, cognitive, psychological and behavioural changes take place [1]. Mental health services can be stigmatizing, especially so at the ages of 13 to 17 [2]. Foster care placement is a relatively common experience for many children across the nation. There should be routine checks for the fostered adolescent to look for trauma symptoms, mental illness, and other related issues to ensure at-risk adolescents receive the help they deserve [3]. According to a study by Greeson et al. [4], when an adolescent is exposed to multiple forms of trauma by their caregivers, they are said to have experienced complex trauma which physical abuse, sexual abuse, emotional abuse, neglect, and domestic violence were identified as the five forms or types of trauma. These traumatic experiences are typically what precipitates foster care placement. It is expected that one would experience negative responses and associated symptoms to such events. However, these symptoms can be exacerbated by the sense of loss and separation that comes with being removed from one's home. It is crucial that the trauma is addressed by those caring for at-risk adolescents in addition to focusing on behavioural and emotional reactions [2]. The issue of adolescent fostering has been given serious attention in many parts of the world, and Nigeria is not left out. Given this serious effort, one would have thought that this danger will not persist.

The emotional well-being of the fostered adolescents is their ability to maintain a stable state that will allow them to exhibit positive self-esteem, self-concept and sustain good relationships with others. The fostered adolescents, most often, experience emotional disturbance due to their past experiences from their biological background or orientation [5]. Emotional abuse can be seen as an attitude, behaviour or inability to act on the part of a caregiver, which interferes with the adolescent's mental well-being, social development or sense of self-worth. Emotional abuse is common among fostered adolescents and this affects their self-concept, making them see themselves as insignificant and incompetent [4]. Depression is one of the most commonly diagnosed disorders for adolescents in the foster care system with an occurrence rate three times that of the general population of the same age cohort [6].

A child who has less healthy and responsive relationships with caregivers are less likely to develop these critical social and emotional skills. Children and adolescents residing in orphanages and foster care homes are also more likely to have a tragic history of behaviour issues, such as violence, abuse, parent-child conflict and school difficulties, or emotional problems, such as depression, anxiety and stress [7]. It has been shown that children and adolescents brought up in foster care homes and orphanages are exposed to various emotional and behavioural difficulties, such as anti-social behaviour, aggression, anxiety and depression [5]. They suffer from emotional and behavioural issues three to seven times more often than others of their age and from the same socio-economic status [8]. These conditions tend to lead to undesirable life consequences when left untreated and there is a sharp risk of developing psychiatric disorders in the future [9].

Although vast and rich research works exist on adolescence and the fostering system in Nigeria, most of these past studies have been conducted outside the realm of socio-environmental factors as predisposing factors for the better and solid emotional wellbeing of the fostered adolescents. These previous studies have concentrated on evaluating adolescents' violence [10], fostering social competence in adolescence through cognitive self-modelling and participant modelling strategies [11], foster home environment (Daniel, 2007); foster adolescents' psychological well-being [12], school adjustment of foster adolescents (Jennifer and Brenda, 2004) and mental health of adolescents in Foster Care [2]. It is against this background that this study sets to discover the socio-environmental factors as determinants of the emotional well-being of adolescents in foster homes in Southwestern Nigeria.

2. METHODOLOGY

2.1 Study Design

This study was descriptive survey research of *ex-post-facto* type which enabled the researcher to

get factual and detailed information about the opinion of the population with the influence of social and environmental factors as the determinant of emotional and social well-being of adolescents in foster homes in South-western Nigeria.

2.2 Study Area

This study was carried out in Southwestern Nigeria. Southwestern Nigeria comprises 6 states namely; Oyo, Ondo, Ekiti, Osun, Ogun and Lagos. Ekiti state has 16 Local Government Areas (LGAs), Lagos has 57 LGAs, Ogun has 20 LGAs, Ondo has 19 LGAs, Osun state has 30 LGA's and Oyo state has a total number 33 Local Government Areas. The population of Southwestern Nigeria was estimated to be 32.5 million as of 2012.

2.3 Study Population

The population of this study comprised all adolescents in foster homes in Southwestern Nigeria. The foster homes selected for this study are:

List 1. List of foster homes in south-western Nigeria

S/N	Name of homes In southwestern Nigeria	Population of fostered adolescents
1.	Juvenile Correctional Home, Sango, Ibadan	18
2.	Jesus Children Missions Outreach, Bodija, Ibadan	38
3.	Oyiza Orphanage Home, Oke-Ado, Ibadan	15
4.	Galilee Foundation (Kings kids Children Village), Ibadan	19
5.	Covenant Children Home, New Bodija, Ibadan	10
6.	Jesus Kids Home, Manotan, Ibadan	5
7.	Living Word Mission Home, Isale-Ososami, Ibadan	21
8.	Rosarian Voice, Sango, Ibadan.	1
9.	His Heritage Home, Oluyole Extension, Ibadan	10
10.	The Care People Foundation, Ibadan.	13
11.	Correctional Home, Ondo Road, Akure	23
12.	El-Rol, Street Children Rehabilitation Home, Ondo	13
13.	Children's Home Oba-Ile, Akure, Ondo State	18
14.	Correctional Home, Ikenne Road, Ado-Ekiti, Ekiti State	22
15.	Home for Jesus Children, Ado-Ekiti, Ekiti State	5
16.	Correctional Home, Testing ground, Osogbo, Osun State	31
17.	Abiye Orphanage Home Agowande, Oke-Onitea Osogbo, Osun State	19
18.	Our Lady of Fatima, Jaleyemi, Osogbo, Osun State	28
19.	Correctional Centre for Junior Boys, Birrel Yaba, Lagos	33
20.	Correctional Centre for Senior Boys, Isheri, Lagos	24
21.	Special Correctional Centre for Girls, Idi-Araba, Lagos	20
22.	S.O.S Children's Village, Isolo, Lagos	14
23.	Living Foundation Orphanage, Victoria Island, Lagos	19
24.	Little Saints Orphanage, Palmgrove Estate, Lagos	33
25.	Juvenile Correctional Home, Asero, Abeokuta, Ogun State	39

S/N	Name of homes In southwestern Nigeria	Population of fostered adolescents
26.	Stephen Children's Home, Aregbo, Obantoko, Abeokuta, Ogun State	44
27.	S. O. S. Children's Village, Owu-Ijebu, Ogun State	20
Total		555

2.4 Inclusion Criteria

This study included adolescents (10-19 years) in foster homes in the six states in Southwestern Nigeria, for which consent had been given and assent for those below 18 years.

2.5 Exclusion Criteria

This study excluded persons in foster homes in Southwestern Nigeria younger than 10 years and older than 19 years of age.

2.6 Sampling Procedure

A multi-stage sampling technique was used for this study. Simple random sampling was used to select 27 foster homes for this study; while a combination of proportionate, simple random and stratified sampling techniques was used respectively to select 575 respondents (i.e. 339 boys and 236 girls). The sample population was stratified into three (3) strata based on age; below 14 years, 15-18 years and 18 years and above.

2.7 Instruments for Data Collection

The data collection was done using quantitative (Questionnaire). The questionnaire used for data collection in this study contained four separate standardized instruments: Socio-Environmental Factors Scale (SEFS), Emotional Well-Being Scale (EWBS), Social Well-Being Scale (SWBS) and Adolescent Fostering Questionnaire (AFQ). These instruments were used to collect information on the impacts of Socio-Environmental factors on fostered adolescent well-being in private and government foster homes. The questions were adapted and modified which all the respondents completed the questionnaire because it checked for completeness

2.8 Validity of Instruments

The EWBS, SWBS was validated by the researcher's supervisor, the internal/external examiner and experts in the area of social work for vetting, proper structuring, adequacy and

contents validity of each of the items. The corrections were modified and suggestions were also incorporated before administration of the questionnaire to the study participants.

2.9 Reliability of Instruments

EWBS, SWBS, SEFS, AFS was pilot-tested and was conducted on 28 fostered adolescents from Helpline Initiative for the less privileged, Ikeja, Lagos, Olakunle Oluwole Foundation, Sadiku Street, Lagos with an internal reliability coefficient of 0.65, 0.67, 0.72, 0.69 respectively which shows that the instrument is reliable and can be trusted to measure what it is meant to measure.

2.10 Procedure for Data Collection

Prior permission was sought from the directors of all the registered fostered homes. Members of staff of the homes were approached for their cooperation and requested to spare their time for administering the questionnaires.

On the days of visits to the different homes by the investigators, all the fostered adolescents were present and were used for the study. The fostered adolescents were made to sit in the comfortable places that were provided by the directors of the homes and the questionnaires were administered, respondents were intimated about the opportunity to withdraw their consent freely at any point during the study. They were asked to fill in their personal information and educational background. The questionnaire was self-administered with the help of trained research assistants and the member of staff of the homes after they had rehearsed the entire routine of data collection technique. Instructions were given to the fostered adolescents before filing the questionnaire.

2.11 Data Management, Analysis and Presentation

The completed questionnaires were serially numbered to avoid the repetition of data. Data collected in this study were analyzed using descriptive statistics, such as simple percentages for the demographic data, multiple regression analysis for research questions and Pearson

product-moment correlation for the hypotheses and presented in tables.

2.12 Ethical Consideration

Approvals were gotten from the directors of the foster homes, the National Director, the Permanent Secretaries of the States Ministry of Women Affairs and social welfare, and the Ministry of Youth and Social Development of the participating states. Informed consent and assent for the minors were sought before administering the instruments and the participation was voluntary.

2.13 Limitation to the Study

The study only covered the six States in Southwestern, Nigeria namely Oyo, Ogun, Lagos, Ondo, Ekiti and Osun. If not for financial constraints, the study could have been carried out to cover the thirty-six states of the federation, for wider coverage. Again, in the six states, only government and private registered foster homes were covered. This is because others that are under kinship foster care or non-kinship foster care did not want to declare their foster care status. After all, they are ashamed of how people judged those who declare themselves, they were seen as if they did something wrong and this is a big constraint because they saw fostering as a stigma to them. There was also the problem of bureaucracy and bottlenecks in getting ethical approvals from the directors of some homes, the National Director, the Permanent Secretaries of the States Ministry of Women Affairs and social welfare, and the Ministry of Youth and Social Development in some other states to administer questionnaires and conduct the interviews. Even with the ethical approval at hand, some of the carers still refused to be recorded neither did they grant any discussion with the adolescents in their custody. Notwithstanding the identified problems, the outcomes of the study are cogent and empirically sustainable and could be generalized for all the fostering homes/institutions in Southwestern Nigeria.

3. RESULTS AND DISCUSSION

3.1 Social and Environmental Factors on Emotional Well-being of Fostered Adolescents in South-western Nigeria

It was shown in the Table 1a that the joint effect of all the two composite independent variables sub-related social and environmental factors on

emotional well-being of fostered adolescents were significant ($F_{(6,568)} = 8.370$; $R = 0.285$, $R^2 = 0.085$, $R^2 = 0.081$, Adj. $R^2 = 0.072$; $P < 0.05$). Besides, 8.0% of the variation was accounted for by the independent variables while the remaining 92.0% was due to chance. This, therefore, reveals that the emotional well-being of fostered adolescents in Southwestern Nigeria to a large extent is being determined by one or a combination of the two independent variables.

In addition, the result of Table 1b shows the relative contribution of each of the two independent variables on the emotional well-being of fostered adolescents for the study were as follows: Peer influence ($\beta = 0.091$, $P < 0.05$), Academic Performance ($\beta = 0.085$, $P < 0.085$), Attitude of the foster family ($\beta = 0.179$, $P < 0.05$), Domestic influence ($\beta = 0.023$, $P > 0.05$), Neighbourhood characteristics ($\beta = -0.006$, $P > 0.05$) and Drug/substance abuse ($\beta = -0.022$, $P > 0.05$), respectively.

It is noted from the above results that while peer influence, academic performance and attitude of the foster family were significant, domestic influence, neighbourhood characteristics and drug/substance abuse were not.

3.2 Emotional Well-being, Peer Influence, Academic Performance, Attitude of the Foster Family, Domestic Influence, Neighbourhood Characteristics and Drugs/Substance Abuse

To complement Tables 1a and 1b, Table 2 shows that there is a positive significant relationship between the emotional well-being, of the study's respondents and the components of social and environmental factors. They are as follows: emotional well-being and peer influence ($r = 0.188^{**}$, ($r = 0.189^{**}$, $P < 0.01$) and emotional well-being and attitude of the foster family ($r = 0.256^{**}$, $P < 0.01$); but there is no significant relationships between emotional well-being and domestic influence ($r = 0.081$, $P > 0.05$), Emotional well-being and neighbourhood characteristics ($r = 0.020$, $P > 0.05$) and Emotional well-being and drugs/substances abuse ($r = -0.020$, $P > 0.05$). This result shows that although all the components of social factors correlated with the emotional well-being of the fostered adolescents which shows that appropriate schooling and educational services can, additionally, strengthen them and are more probable to view their schools as a supportive and safe haven.

Table 1a. Joint predictions of social and environmental factors on the emotional well-being of fostered adolescents in Southwestern Nigeria

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	470.341	6	78.390	8.370	.000
Residual	5319.652	568	9.366		
Total	5789.993	574			

$R = .285, R^2 = .081, Adj R^2 = .072$

Table 1b. Relative predictions of social and environmental factors on the emotional well-being of fostered adolescents in south-western Nigeria

Source	Unstandardized coefficient		Standardized coefficient	T	Sig.
	B	Std. error	Beta contribution		
(Constant)	12.128	1.219		9.947	0.000
Peer influence	9.201E-02	0.045	0.091	2.055	0.040
Academic performance	0.109	0.058	0.085	1.893	0.059
Attitude of the foster family	0.117	0.031	0.179	3.738	0.000
Domestic influence	2.001E-02	0.037	0.023	0.536	0.592
Neighbourhood characteristics	-7.528E-03	0.054	-0.006	-0.139	0.889
Drugs/Substance abuse	-1.977E-02	0.038	-0.022	-0.525	0.600

3.3 Social Factors (Peer Influence, Academic Performance and Attitude of the Foster Family) on Emotional Well-being of Fostered Adolescents

The majority of the respondents (51.8%) believed that they get along well with their friends and that they enjoy each other's company. Hence, (28.9%) respondents submit that though they make friends with a few of their folks still they cannot trust them fully to meet their social needs. Therefore, peers, the foster family and the foster adolescents' exposure to academics either directly, or indirectly affects their emotional well-being. In the same vein, the majority (85.2%) of the respondents submitted that they go to school for these adolescents in foster care, appropriate schooling and educational services which are seen as social agents can additionally strengthen prospects for a stable future for them. Therefore, the majority of them embrace it, while 1.7% of them rarely go to school, 30.0% of the fostered adolescents, sometimes, go to school, 10.1%, occasionally, are absent at school for some logistic reasons. It also showed that the majority of the respondents (54.1%) accepted that they can count on their carers to help them when the need arises. On the issue of carers if they criticise the adolescents, either positively or negatively, almost 41.4% of the respondents believed that they were sometimes criticized by

their carers, either positively or negatively, when the need arises, while 25.9% of respondents feel otherwise, that is, they are rarely criticized by their foster parents.

It was shown in Table 3 that the joint effect of peer influence, academic performance and attitude of the foster family on emotional well-being of fostered adolescent was significant ($F_{(3,571)} = 16.597; R = 0.283, R^2 = 0.080, Adj. R^2 = 0.075; P < 0.05$). About 8.0% of the variation was accounted for by the independent variables while the remaining 92.0% was not due to chance. The result above also shows the relative contributions of each of the components of sub-related factors on the dependent: peer influence ($\beta = 0.090, P < 0.05$), academic performance ($\beta = 0.088, P < 0.05$) and attitude of the foster family ($\beta = 0.182, P < 0.05$). It is shown in the result above that all the independent variables were significant.

The result revealed that peer group has an important influence on the fostered adolescents while education also serves as an important socialization agent on them, it is also revealed that the foster family attitude is adolescent's source of emotional support and their psychological well-being which may increase self-esteem in the fostered adolescents.

Table 2. Correlation matrix between emotional well-being, peer influence, academic performance, the attitude of the foster family, domestic influence, neighbourhood characteristics, and drugs/substance abuse

	Emotional Well-Being	Peer Influence	Academic Performance	Attitude of the Foster Family	Domestic Influence	Neighbour hood Characteristics	Drugs/ Substances Abuse
Emotional Well-Being	1						
Peer Influence	.188**	1					
Academic Performance	.189**	.274**	1				
Attitude of the Foster Family	.256**	.406**	.422**	1			
Domestic Influence	.081	.059	.171**	.214**	1		
Neighbourhood Characteristics	.020	.106*	.076	.097*	-.178**	1	
Drugs/Substances Abuse	-.020	-.016	-.004	.017	.069	.179**	1
Mean	18.0035	16.7148	12.4122	25.9478	14.4887	13.5930	12.7635
Std. Dev.	3.1760	3.1554	2.4796	4.8353	3.6175	2.4823	3.4701

*Sig. at .05 level

Table 3. Relative predictions of social factors (peer influence, academic performance and attitude of the foster family) on the emotional well-being of fostered adolescents

Model	Unstandardised coefficient		Standardised coefficient	T	Sig.
	B	Std. Error	B		
(Constant)	11.985	.886		13.526	.000
Peer influence	9.108E-02	.045	.090	2.045	.041
Academic performance	.112	.057	.088	1.963	.050
Attitude to the foster family	.120	.031	.182	3.880	.000

Table 4a. Joint predictions of environmental factors on emotional well-being

Model	Sum of squares	Df	Mean square	F	Sig.
Regression	50.669	3	16.890	1.680	0.170
Residual	5739.324	571	10.051		
Total	5789.993	574			

$$R = .094, R^2 = .009, Adj R^2 = .004$$

Table 4b. Relative predictions of domestic influence, neighbourhood characteristics and drugs/substances abuse on emotional well-being

Model	Unstandardised coefficient		Standardised coefficient	T	Sig.
	B	Std. Error	B		
(Constant)	16.521	1.038		15.910	.000
Domestic influence	7.924E-02	0.037	0.090	2.120	.034
Neighbourhood characteristics	5.337E-02	0.055	0.042	0.966	0.334
Drug/substance abuse	-3.067E-02	0.039	-0.034	-0.787	0.432

3.4 Environmental Factors and Emotional Well-being of Fostered Adolescents in South-western Nigeria

This deals with the examination of the extent to which components of environmental factors influence the emotional well-being of fostered adolescents in South-west, Nigeria. This section is derived from the results presented in Tables 4a and 4b which were obtained from data collated on the research question four (RQ₂) states that: what is the relationship between environmental factors and emotional well-being of fostered adolescents in South-west, Nigeria. The data collected from the respondents on this were subjected to multiple regression, while the results were obtained.

It was shown in the Table 4a that the joint effects of domestic influence, neighbourhood characteristics and drugs/substances abuse on emotional well-being was not significant ($F_{(3,571)} = 1.680$; $R = 0.094$, $R^2 = 0.009$, $Adj. R^2 = 0.004$; $P > 0.05$). About 1.0% of the variation was accounted for by the independent variables while the remaining 99.0% was not due to chance.

The result shows the relative contribution of each of the independent variables on dependent; domestic influence ($\beta = 0.090$, $P < 0.05$), neighbourhood characteristics ($\beta = 0.042$, $P > 0.05$), and drugs/substances abuse ($\beta = -0.034$, $P > 0.05$). It is, therefore, noted in the result above that only one of the factors was significant (domestic influence) while the other two were not (neighbourhood characteristics and drug/substance abuse). As revealed by the

result, out of all the three components of the environmental factors, domestic influence has the highest contribution to adolescents' emotional well-being.

Also, the results from this study revealed that 44.3% of the respondents confirmed that they always get along well with their carers 25.9% of the respondents, sometimes, get along with their carers, while 20% rarely get along with their carers. Those few who could not get along with their carer argued that they require to have their freedom because they are of age to do things their way. The second group sometimes disagrees with their carers despite that they are caring for them, but then the carer should be able to understand their plights. The remaining 9.7% did not want interference from anyone.

3.5 Social and Environmental Factors on Emotional Well-being of Fostered Adolescents in South-western Nigeria

This study, like many before, also reveals the effects of the two independent variables on the emotional well-being of the fostered adolescents. This study, therefore, in tune with Chaplin and John [13], in their research on interpersonal influence on adolescent materialism, shows that Peer is important to influence. They are viewed as socialization agents that communicate consumption attitudes, goals and intentions to adolescents. They are also important sources of emotional support and psychological well-being which increase self-esteem in adolescents. This is detailed by Ayodele and Bello [14] that peer

influence quality is a key indicator of fostered adolescents' psychosocial adjustment. The nature of peer-group relationships among adolescents, especially on the fostered adolescents, differed as to the individual member themselves. Also, the entirety of one's relationship is affected in various ways by several other factors such as personality, attitudes and environmental factors. At one extreme, these peer influences can be personal and positive. This is when the fostered adolescents interrelate meaningfully, share common relationships and respect the dignity of others. Also, Abosede [15] and Salami [16] opined that as fostered adolescents develop, their relationships with selves and others become increasingly influential. This relationship, not only provides the foundation for a later adult relationship, but it also buffers the fostered adolescents from stress and lessens the risk of later emotional and behavioural problems. Yet, some fostered adolescents have difficulties in getting along with others because of shyness, conflict or any other challenges they are passing through.

Consistent with the findings of Huang et al. [17], their study showed that children who experience trauma due to exposure to Intimate Partner Violence (IPV) have been shown to exhibit higher than average rates of cognitive, psychological, and emotional impairments. All these may lead to undesirable outcomes for the adolescents and may affect their well-being, safety, and stability. They further stated that adolescents' issues associated with exposure to domestic violence include the following, behavioural, social and emotional problems, greater levels of aggression, anger, unfriendliness, antagonistic behaviour and disobedience, peer anxiety, withdrawal and depression, poor peer, sibling, and social relationships and low self-esteem, cognitive and attitudinal problems, lower cognitive functioning, poor school performance, lack of conflict arbitration skills, inadequate problem-solving skills, pro-violence attitude, and belief in firm gender stereotypes and male privilege.

DeJonghe et al. [18], in their research titled Resilience in children exposed to domestic violence, added some other problems they may further experience which include higher levels of adult depression and trauma symptoms, increased tolerance for and use of violence in adult relationships-fostered adolescent's risk levels, reactions to domestic influence exist on a continuum where some adolescents demonstrate

enormous resiliency while others show signs of significant adaptive adjustment.

The result further shows that while peer influence and attitude of the foster family have a significant impact on fostered adolescents, the remaining sub-related factors had very low significant effects on their emotional well-being. In further contradiction to the discoveries of the research, Katz and Linda [19], in their study in which they examined current clinical issues in separation and placement in child adolescents, stated that environment is known to be an individual's surrounding, which is supposed to be the natural world; but when a child coming from unhealthy environment continues to grow and enter into new stages of life, he or she may be unable to able to rise to a given challenge, they in turn run from any such challenge, too often. They have main learning blocks as they avoid any stimuli reminiscent of painful feelings and indirectly generalize these to affected subject areas. As a result of experiencing repeated traumatizing events in biological and foster homes, adolescents who receive no treatment for psychological scaring suffer adverse effects.

3.6 Emotional Well-being, Peer Influence, Academic Performance, Attitude of the Foster Family, Domestic Influence, Neighbourhood Characteristics And Drugs/ Substance Abuse

To further support the result of this study on the attitude of the foster family, the National Survey of Child and Adolescent well-being [20] stated that "the first comprehensive study of children in the child welfare system, more than 85.0% of children in foster care reported that they, like the people they are living with, feel like part of the foster family, and believe their foster parents care about them". Abosede [15] and Salami [16] also supported the outcome of the findings of peer influence, states that peer influence buffers the fostered adolescents from stress and lessen the risk of later emotional and behavioural problems. They further stated that when teens behave right, think positively and are socially successful, their relationship is a source of well-being, pride and identity.

However, the insignificant relationships between emotional well-being and environmental factors show that protective factors, such as social competence i.e., good peer influence, positive

attitude of the foster family, positive academic influence among others, will safely guide them from poor environmental factors and as such may not have a negative influence on them. Also, the intelligence of the fostered adolescents, their high self-esteem, their outward temperament, robust sibling and peer relationships and a supportive relationship with an adult, can help protect the adolescents from the adversative effects of exposure to domestic violence.

3.7 Social Factors (Peer Influence, Academic Performance and Attitude of the Foster Family) on Emotional Well-being of Fostered Adolescents

Elegbede [11], on fostering social competence in adolescence through cognitive self-modelling and participant modelling strategies, pointed out that peer influence can be both positive and negative, while we are inclined to think that peer influence leads teenagers to engage in unwholesome and insecure behaviours, it can inspire youths to study more in school, volunteer for community and social services and participate in sports and other productive endeavours. The findings of this study agree with the findings of "National survey of child and Adolescent well-being [20] the first comprehensive study of children in the child welfare system, more than 85.0% of children in foster care reported they like the people they are living with, feel like part of their foster family and believe their foster parents care about them".

Also, some carers go beyond their basic duty, not only ensuring their growth, safety, health, as well as protecting them from harm but also employing discipline strategies and motivating them when the need arises. This shows that protective factors, such as social competence, intelligence, high self-esteem, outward temperament, robust sibling and peer relationship and supportive relationship, with an adult, can help protect the adolescents from the adversative effects of exposure to domestic violence. However, the results disagree with the findings of Phillips [21] on factors associated with placement decisions in child welfare. In his study, he reported that children in foster care often lack the most fundamental resources for ensuring educational success which is a lasting relationship with a caring adult, who can observe their development over time, participate in their school lives, advocate on their behalf, and consent to evaluations and services.

Levin (2002) also contradicts the result of the findings. In his study, he reported that children in foster care, generally, do not perform well in school like other children, they often repeat classes, failing grades and performing substantially below grade level. While frequent changes in placement, delays in school enrolment, gaps in attendance and disproportionate health problems are all significant factors, contributing to poor school performance, children in foster care also face challenges to school success that are unique to their foster care experience. Children in foster care are often distracted by worries, peers and a sense of loss associated with separation from their family and placement in foster care. They may avoid making peer school connections because they are ashamed of their foster care status or anticipate challenges in school placement. They may have difficulty studying and completing homework without adult help after school.

3.8 Environmental Factors and Emotional Well-being of Fostered Adolescents in South-western Nigeria

As revealed by the result, out of all the three components of the environmental factors, domestic influence has the highest contribution to adolescents' emotional well-being. This is because, to most of the respondents, domestic influence is an environmental phenomenon that impacts every segment of the fostered adolescents. This is followed by neighbourhood characteristics and drug/substance abuse. Notably, the magnitude of neighbourhoods' impact on the life of fostered adolescents remains controversial because it is difficult to separate this impact from that of the family context, but from all perspectives, the neighbourhood does matter in the life of the fostered adolescent.

Like Thornberry [22], in his study on the co-occurrence of problem behaviours among adolescents, this study reveals that sustained foster family and community relationships are important in providing critical support to a fostered adolescent as he or she faces the challenges of young adulthood. No individual can completely escape the impact of the culture and society in which he lives, since he is an integral part of the whole, each individual is a product of his early experiences and learning [23]. In addition, Rathod [24] in his study based

on individual factors associated with drug dependence, his study revealed that as the individual grows up, he can adopt one of the three attitudes towards the values and attitudes which surround him. He can reject them (non-conformity) or submit to them (conformity) or he can stay neutral and form his values.

This result is contrary to various studies on the environment variables and the fostered adolescents Katz and Linda [19], in their study based on Adolescent's separation and placement, revealed that when a child is coming from an unhealthy environment he or she may not be able to rise to a given challenge, they, in turn, run from such challenge, too often they have main learning blocks as they avoid any stimuli reminiscent of painful feelings and, indirectly, generalize these to whole subject areas. Sawyer and Dubavitz [25] report that the experience of the adolescents before a foster care placement have lasting and profound effects on them; they may also find it difficult to develop relationships with other adults such as their foster parents and teachers, because of earlier disruption in their family. According to Ayasse [26], in the study on special education experiences of foster children, it was discovered that "Youths who are taken out of their homes and moved around different environments have a higher tendency to have difficulties in life, such as depression, behavioural issues, or psychological problems, which negatively impact their relationship with others".

4. CONCLUSION

Family stability is best regarded as a process of caregiving practices that, when present, can significantly expedite healthy child development. Adolescents in foster care face several dangers to their healthy development, including poor physical health, attachment disorders, compromised brain functioning, inadequate and emotional skills etc. Providing stable emotional and social well-being for them and nurturing families can meliorate negative impacts on their developmental outcomes.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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