ASIA-PACIFIC NAZARENE THEOLOGICAL SEMINARY

AN EXPLORATION OF RELATIONSHIPS
AND POTENTIAL FOR THE GROWTH OF LOVE:
A GROUNDED THEORY STUDY IN ORPHANAGE Q

A Thesis Presented to
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Introduction – An Opening Vignette

Mary was found in a trash bin in a Metro-Manila barangay (city neighborhood.) We can imagine that her first hours of life were spent hungry, scared, and crying. Around her there were many cars and jeepney vehicles. Likely, there were hordes of people walking from tricycles to work or home. In this dynamic, growing city where entrepreneurship abounds, the homes are both skyscraper condos and informal settlement dwellings. The latter is made of mismatched scrap metal and wood, pieced together to protect people from the heat of dry season and the downpours of rain in wet season. There may have been many people nearby. Many of them would likely care about finding a child similar to Mary sooner, if spotted. However, the cry of life and the buzz of growth and survival, in a place like this, is less like a solo melody and more like a chorus of many. Mary’s cry was probably a poignant part of the day’s song. Eventually she was found. Moreover, others like her are regularly found in the streets of Manila and Quezon City, Philippines lacking safe adults in place to care for them.¹

Let us imagine now that Mary is brought into a room full of children. Some children are actively playing all the while bumping into their peers. Some of the eldest children are sitting in a circle with an adult handing out afternoon snacks. Some of the youngest are sleeping in the infant room next door. There are orphanage staff members and volunteers walking from one floor to the next. A tour of graduate level students

happens simultaneously. The children seem to be used to the commotion. They are a part of the blur of activity. Amidst the waves of people moving around them, are they looking for the person who makes the biggest splash? Or are they intentionally glancing from side to side looking for someone who makes them feel secure? Are children like Mary looking for “Mama”? And can this person be found in residential care?
CHAPTER ONE
BACKGROUND OF THE PROBLEM

Global Concerns Regarding Attachment
And Care for Orphans and Vulnerable Children

This fictitious opening story, is based on real stories shared at Orphanage Q, as well as other Filipino orphanages visited by the researcher. Their stories include dark realities of abandonment, abuse, and arrival at a residential care facility. This opening vignette first conveys the dance of nurture seemingly missing in action. Is it possible to fill the existing gap of care in the life of this child? Is this a story that includes an adult who is up to that task? Or is this a story about an orphanage unable to meet child-attachment needs?

Children without meaningful connections to permanent, relationally attentive caregivers in Romanian state-run orphanages, prior to the turn of the 21st century are continually cited as those who faced dire developmental barriers and increased risk factors, namely “mental, intellectual, social, emotional and behavioral problems” as well as grave physical conditions and global delays. The entry of adoptive parents from the

2 Orphanage Q is the pseudonym used for the residential care setting where this study takes place.


West into these children’s lives spurred much research activity in those orphanages with deplorable conditions. Yet, this researcher asks, do shortcomings existing in the residential care model in general make the trauma already faced by OVC, too grave to overcome? Or can a unique cultural context and intentional attachment-informed practices make a difference in the outcomes of care for orphans and vulnerable children, even those living in residential care?

Attention to unique cultural contexts is often missing in attachment research. Few studies have examined possible variations present in the phenomenon of attachment observed in other cultures, as well as the need for an open stance when viewing the cultural-rootedness of attachment narratives present in Western contexts, where much of the attachment research has been written. This researcher examines an orphanage in a non-Western setting, serving children where attachment is a stated goal.

The developmental step of forming a secure relationship with a parent is often taken for granted as a part of healthy childhood. It increases the likelihood of the growth of love in future relationships. This researcher conducted an initial interview at Orphanage Q in the Philippines to learn more about the relationships existing between orphans and vulnerable children (OVC) in their care and the caregivers. The director suggested that her organization was building secure relationships, between those in the

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community who acted as parents and provided family-based care or caregivers in the orphanage who acted as a residential “Mama” and the children at Orphanage Q. Their intended goal was to enhance the likelihood of successful future adoption relationships awaiting many of the children. This understanding of foundational attachment prior to adoption runs contradictory to the idea that abandoned children must be cared for in a way that ensures “they do not get too attached” so that “we don’t make adoption hard.” This direct quote, spoken by a visiting, short-term American volunteer at a tour of another Manila-area orphanage suggests an alternative viewpoint, that less attachment would be beneficial.

Global child welfare is a complex problem in need of a dynamic solution. Many global children-at-risk are still awaiting that solution. As will be discussed in chapter two, there are many multi-sector representatives debating the role that residential care institutions should or should not play in the lives of OVC, yet, all understand that orphans and vulnerable children may have a decreased connection to those who keep them safe and secure. People on both sides of the orphanage debate want to see children in meaningful relationships. How many children worldwide suffer from the same un-met need of healthy attachment? How many children in Metro-Manila are “off-line” and still need an attachment figure and security? This researcher is asking: What is the nature

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8 This family-based care provided by community members is what is called the “foster parent system” in the West. Children are placed in temporary homes with guardians who act as foster parents.

9 Written Excerpt from Field Notes, Orphanage Visit, June 18, 2016.


11 Orphanage Q’s Director, interview by researcher, second visit to the site, September 5, 2016. She said that by far the children that were the most dysfunctional and damaged were the ones that were passed from place to place to place and were never attached to anyone and she called them ‘offline.’
of the relationships forged within residential care? Do they hold the potential for attachment-rich connections?

Though there is much research on the development of attachment in the West and the consequences of poor attachment in institutional orphan care, little exists in exploring the potential of attachment in institutional orphan care; nothing exists that represents the Filipino context. This researcher used a grounded theory approach to better understand the phenomenon of relationships in one Metro-Manila orphanage. Using constant comparative methods throughout data collection and analysis, this researcher engaged in an in-depth look at Orphanage Q through field observation, semi-structure interviews, and art experiences with children and orphanage staff.

The researcher used constant comparative data collection and analysis. The researcher maintained a reflexive stance attending systematically to the context of knowledge construction and researcher bias and documented this process in field notes and memos ensuring transparency and the creation of an audit trail. The theory that develops as a result of this study, thus, is intentionally grounded in the data. The theoretical framework serves the research, rather than the opposite, that is research prescribed by theory.

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Statement of the Problem

The central research question is: **what is the nature of relationships between children and caregivers in a residential care setting?** This question is broad by design and points to the researcher’s explicit desire to scaffold current theory for the Filipino cultural context, allowing a grounded Filipino theory to emerge. Keeping an open stance that allows a culturally grounded theory to emerge, the researcher attends to multiple dynamics, including:

1) How do the caregivers connect to and relate to the children at Orphanage Q?
   a. What characteristics describe these connections or lack thereof?
   b. How do the children respond?
   c. Are there children who respond uniquely?
   d. What factors might account for these unique responses?

2) How do the children initiate connections to the caregivers at Orphanage Q?
   a. What characteristics describe these connections or lack thereof?
   b. How do the caregivers respond?
   c. Are there caregivers who respond uniquely?
   d. What factors might account for these unique responses?

3) What other relationships exist at Orphanage Q
   a. Do other staff members make connections with the children?
   b. How do the children respond?
   c. Are their children who respond uniquely?
   d. What factors might account for these unique responses?
4) How do the children initiate connections with other staff members at Orphanage Q?
   a. How do the staff members respond?
   b. Are their staff members who respond uniquely?
   c. What factors might account for these unique responses?

5) Have you [caregiver/staff/child] experienced attachment and the growth of love at Orphanage Q?
   a. Have you experienced attachment with a child?
   b. What does this look like?
   c. What factors might account for this growth of love?
   d. Has a child expressed attachment with you?
   e. What does this look like?
   f. What factors might account for this growth of love?

6) Are there children lacking attachment and the growth of love at Orphanage Q?
   a. What does this look like?
   b. What factors might account for these children’s lack of attachment?

**Theoretical Framework - Attachment Theory**

A theoretical framework on attachment serves as a launch pad for this researcher. The use of existing theoretical constructs precedes the discovery of relational and cultural factors studied in Orphanage Q. Previous awareness of theoretical knowledge on attachment serves as additional data. It also provides the necessary stimulus needed to spark the researcher’s interest in this inquiry. GTM requires the researcher to be
transparent about those influences and forthcoming about the role that previous research plays in the resulting investigation.

To that end, this study’s theoretical framework utilizes attachment theory research, both seminal writers and modern attachment experts; therapeutic trauma-intervention specialists; and author-practitioner reflections on the potential ingredients necessary for the growth of love. These sources make mention of the best of cases, when there is an exquisite interchange that takes places between the child and primary caregiver. The child’s capacity for relationship and healthy dependence is under construction. This structure benefits this phase of life and all phases of life to come; fostering this relationship and all the relationships to follow. Developmental scientists and psychologists, such as seminal writer John Bowlby, and colleagues Mary Ainsworth, and Mary Main, have all heralded the necessity of this process of attachment. John Bowlby’s research was the first to define this more formally in his attachment theory research, beginning in the middle of the 20th century. Mary Ainsworth’s contributions parallels in importance in its development of attachment theory, as she is most known for development of a strange situation test,14 examining behaviors of connection and security between children and parents under the stress of separation and stranger stress. Ainsworth’s categorization of key types of attachment have proved critical to attachment theory. Mary Main’s contributions include the discovery of disorganized attachment patterns and its negative impact on infants, children, and adults.15 As well, Main has


increased the robustness of the theory by designing a protocol for attachment evaluation using the Adult Attachment Interview.\textsuperscript{16}

John Bowlby was first known for his study of delinquent boys in a clinic in London, England. His observation and investigation examined forty-four individual cases and noted their attachment behavior upon extended separation from their mother’s care.\textsuperscript{17} Bowlby early on, documented young children’s process of confusion, grief and inability to positively re-connect with a mother when taken away for days to receive medical treatment in a hospital.\textsuperscript{18} There are researchers who worked alongside Bowlby and explored the therapeutic role that substitute mothers or caregivers may play in the time children wait to be reunited with parents receiving medical care.\textsuperscript{19} This research was further developed and written on together with Mary Ainsworth.\textsuperscript{20}

Bowlby continued his exploration on this cycle of connection, separation, and re-connection as he carried out multiple studies with primates and baby monkeys. These experiments were used as means of observing the long-lasting impact of alternatively pairing baby monkeys to other female monkeys, not their mothers. He noted that their bond was significant, and often, very quickly established. His own writing explored the role that attachment behavior played in the relationships of foster and adoptive parents.


\textsuperscript{17} John Bowlby, \textit{Forty-Four Juvenile Thieves: Their Characters and Home-life} (London, UK: Tindall and Cox, 1947), 1-56.

\textsuperscript{18} Jean Mercer, \textit{Understanding Attachment: Parenting, Child Care, and Emotional Development} (Westport, CT: Praeger, 2006), 36.


those providing family-based temporary homes and adoptive permanent families). He critiqued the psychoanalytic approach to the phenomenon of attachment. Jean Mercer\textsuperscript{21} notes that Bowlby’s theory had six vital components:

1) Children’s attachment to mothers/caregivers as key factor, life-long phenomenon;
2) Infant behaviors as prompts for engagement; instinctual in human beings;
3) Infant’s capacity to meaningfully attach to a caregiver early, even if not parent;
4) Separation anxiety as state of protest, grief, and a need for reorganization;
5) Focus on typical and atypical infancy, toddlerhood, and preschool age attachment;
6) Attachment experiences seem to serve as “internal working model” -influence preferences, expectations, and attitudes in future security-seeking social behavior.

Bowlby took into consideration the agency, or social initiative, of both caregiver and child, simultaneously playing an important role in the resulting relationship patterns. He, together with Mary Ainsworth,\textsuperscript{22} explored the role that child and parent personality and interpersonal relating style played in maintaining meaningful connection. He stated, “Nothing in child psychiatry has been more significant in recent years than the increasing recognition that the problems its practitioners are called upon to treat are not often


problems confined to individuals but are usually problems arising from stable interactional patterns that have developed between two and more often several, members of a family. In both his animal and human studies, Bowlby noted the involvement of both the parent and the child’s behaviors, later defined as the attachment and the circle of security.

This research evolved into the attachment theory, and though initially influenced by evolutionism and behaviorism, its focus on relational and emotional ties has aided professionals and parents for decades. Alan Schore and Daniel Siegel, both present-day experts in modern day attachment theory, have built upon these early findings and incorporate the latest understandings of brain regulation and development in studying the impact of familial connections and relationship, and the lack there of. All of the attachment theorists informing this study suggest its sheer importance in a variety of diverse forms of growth. Research suggests that it leaves its mark on child development—accounting for right brain limbic system organization and growth and on long-term social-emotional trajectories, including the potential for future interpersonal relationships, both inside and outside of the family.

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25 Alan Sroufe and Daniel Siegel. "The Verdict Is In-Fifty Years of Research Has Confirmed that the Emotional Quality of Our Earliest Attachment Relationships is Central to Our Well-being as Adults." *Psychotherapy Networker* 35, no. 2 (2011): 34.

26 Alan Sroufe and Daniel Siegel, “The Verdict Is In-Fifty Years of Research has confirmed that the Emotional Quality of our Earliest Attachment Relationships is Central to our Well-being as Adults,” *Psychotherapy Networker* 35, no. 2 (2011): 34; 9-10. “The brain continues to remodel itself in response to experience throughout our lives, and our emerging understanding of neuroplasticity is showing us how relationships can stimulate neuronal activation and even remove the synaptic legacy of early social experience. Developmental trajectories are complex, often having ”islands” of positive relational
In addition to seminal attachment research and modern day attachment work, this theoretical framework is also made up of writing and research done by Karyn Purvis and David Cross in their studying and facilitating attachment among foster and adoptive parents and adopted children. Their attention on building connectivity and healing from past trauma provides additional input regarding what attachment-rich behaviors look like when interacting with children who have experienced extreme levels of trauma and loss.\(^{27}\) Children who’ve experienced loss and trauma need correcting, correcting, and empowering behaviors exhibited by adults who build trust and relationship.

The third key resource for this study is Dr. Keith White’s exploration of the five essentials of child development necessary for the growth of love,\(^{28}\) namely: security, boundaries, significance, community, and creativity. White’s input blends the fields of developmental psychology, theology, and education. As well, he speaks from his own experience in running a residential care facility in London that has been a part of his family for generations. He understands residential life as simultaneously a family model approach. His writing and practice, as well as his theological reflection and therapeutic perspective serve this study as a meaningful resource.

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experience, even within largely negative histories. Through therapeutic relationships and reflective practice, one can make contact with these islands—the "angels" in the nursery, to quote developmental psychologist Alicia Lieberman—and cultivate their growth to the benefit of parents, children, and adults alike. In this way, clinical practice can use the power of our attachment relationships to cultivate deep and lasting change throughout the lifespan and even stop the transmission of disabling early experiences across the generations.”


This researcher utilized these resources as they related to relationship and connection between children and primary caregivers. The theories and their cyclical relationship to one another are made visual in Figure 1. The arrows, pictured below, represent the circle of security present in the dance of attachment and primary relationships as postulated by identified theorists. Even so, key to the grounded theory method the researcher’s openness to discoveries ill-suited to pre-existing formulations of theory is a priority in this study. The researcher entered the study with anticipation for emerging data that may confirm, contradict, and/or expand on this theoretical framework.

![Visual Theoretical Framework](image)

**Figure 1. Visual Theoretical Framework – Attachment and the Growth of Love**

**Conceptual Framework**

This conceptual framework helps the researcher in asking and answering the who, where, when and how of this study. A visual tool for the researcher’s anticipated
flow of data input and output is represented in Figure 2. The study takes place within Orphanage Q where one hundred and twenty children and youth reside. The children and youth observed were age 3 months to 14 years old. These young people transitioned into this residential care facility, at various ages, due to various types of maltreatment and lack of care. This includes cases of differing forms of trauma due to abuse, neglect, sexual exploitation, or abandonment. Some of these cases may include the traumatic loss of attachment figures as well as cases where a lack of early attachment figures provided different kind of holistic trauma altogether. The researcher is interested to know if the phenomenon of attachment is both present and visible in the relationships observed in residential care.

![CONCEPTUAL FRAMEWORK — A GROUNDED THEORY](image)

**Figure 2. Conceptual Framework**
Significance of this Study

Essential to a child’s growth and development is the established security of at least one safe and nurturing adult-to-child caregiver relationship. Bronfenbrenner suggests, “In order to develop — intellectually emotionally, socially and morally — a child requires participation in progressively more complex reciprocal activity on a regular basis over an extended period in the child’s life, with one or more persons with whom the child develops a strong, mutual, irrational, emotional attachment and who is committed to the child’s well-being and development, preferably for life.”

Attachment theorists maintain, this adult is not just providing for the child’s physical needs but is acting as a home base —or secure base—from which the child may come and go for love, attention, consolation, and regulation. Security impacts a child’s willingness to risk, to step out of what they know, trusting that if needed they may safely return to the relationship they cling to.

Specialists in psychology, theology, and medicine have provided an overlap of scholarship examining the intricacies present in the dance of attachment and nurture. They have also worked to define the ways in which the detriment of such safety, security and responsive relationship proves to set the stage for detriment far-reaching in its


adverse impact, both to the individual child and to the network of relationships the child struggles to meaningfully engage throughout their lifetime.

In the most extreme cases, where children have experienced this trauma, that is a lack of responsive caregiving and reciprocal relationship, there are grave consequences.\(^{33}\) These children have little capacity to link their emotions and their behaviors with the emotions and desired behaviors of others. In addition to a decreased capacity to build healthy relationship, they are also prone to aggressive and maladaptive behavior, harming themselves and those around them. The cycle of violence is often rooted in a lack of identification with the emotions of the victim. An inability to empathically connect the dots between the ways relational behaviors reciprocally relate to both pre-existing and resulting emotions is of paramount importance for healthy relationships and healthy societies at large. This includes physical health and safety as well.\(^{34}\) The cognitive ability necessary to grasp sequential cause and effect behaviors may be impaired. The multitude of mechanisms impacted by this single negative impairment are simply too numbered to count. *Simply put—attachment really matters.*

The theoretical framework outlines what attachment theorists and trauma-informed developmental psychologists continue to discover in relation to children’s need

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\(^{33}\) American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders*, 5th Ed. (Washington, DC: American Psychiatric Association, 2013). DSM-5 notes the Symptoms of Reactive Attachment Disorder (RAD) includes: “Failure to develop normally; Poor hygiene; Underdevelopment of motor coordination and a pattern of muscular hypertonicity; Bewildered, unfocused, and under-stimulated appearance; Blank expression, with eyes lacking the usual luster and joy; Fails to respond appropriately to interpersonal exchanges.”

for bonding and nurture with at least one significant adult and caregiver. Considering ongoing innovative research, and the global initiatives and debates that continue to seek reform for residential care, this study’s stories may highlight the ways in which these international needs and concerns meet real-life children needing ongoing advocacy and support. Certainly, those doing outreach to children-at-risk within the church must do so with increasing awareness of how their projects may or may not meet developmental needs designed by the very God who created them for relationship and nurture.

Some of the research highlighted in this study, exhibits the growing belief that family based care is the ideal for our world’s children. Yet, these ideals may or may not touch the lives of children who at this very moment are not privy to them. As some networks discuss the need for children to be transitioned out of orphanages, thousands and thousands of children reside in them. As studies seek to evaluate the suggested increased risk of violence and maltreatment in group homes, many of our world’s children are left with whatever care they are afforded. Can family-based care be provided within the institutions many children call home?

Researchers and global child advocates continue to study the risks involved in different models of care. It can be argued that both models are often establishing children’s homes in places they have yet to build meaningful attachment. The findings of this study may offer valuable, grounded theory data informing the growth of love and attachment for at-risk children in the Philippines. The thick descriptions of qualitative


research may illustrate how attachment relationships may be created or how their growth may be thwarted, even as the orphanage debate continues in offices and meetings these children do not take part in.

Alternatively, this study may provide grounded theory-based warnings for organization leaders and donors, if, instead, an absence of love and attachment within residential care is missing in action. In the case of the latter, the present debate around residential care may benefit from a study that explores how even intentional, attachment-rich efforts fail to provide at-risk children foundational attachment relationships. If this were true, the findings may still be applicable for informing attachment-rich relationships in foster homes or family-based homes where child advocates hope to transition these children next. Otherwise, these new homes risk simply becoming additional places children lack attachment and need to transition out of, just as was the case in their original family homes.

This study may afford this researcher, as well as others, data that informs significant training protocols for social workers, caregivers, outreach, and ministry leaders. This includes those working with children in the Philippines specifically and other countries with a similar cultural context who have experienced the loss of parents and caregivers. Those providing care in orphanages, as well as the children themselves, may benefit from evidence of intentional, trauma-informed, attachment-rich caregiving. This may also inform compassionate ministry outreach carried out by the five Nazarene Child Development Centers doing outreach throughout the Philippines.

Furthermore, the grounded theory approach used within a Filipino orphanage, may bring to light research gaps or a need for global feedback on attachment theory
principles, mostly researched in Western contexts. The findings of this study may provide essential scaffolding, as it seeks to come alongside long-standing attachment principles, and allow for emergent insights in culture-specific relationship phenomena. This is of special interest to the researcher as time spent in globally diverse communities has suggested that those fiercely committed to attachment may deem differing behaviors as either detrimental to the growth of love and nurture or supportive of the same.

In a smaller previous qualitative research project, this researcher interviewed three mothers raising children in the Philippines. One mother was from China, one from South Africa (who had also raised her children for a season in both Nepal and Korea), and one from the Philippines. Of special interest was the South African mother and Chinese mother who had their semi-structured interview take place at the same time. They shared things they did to build close relationships with their young children. Noted was the fact that they both expressed what this researcher calls a *filling and depleting domain for nurture and attachment*. The filling domain consisted of things they committed to doing to make sure their child was loved. The depleting domain consisted of things that made their children and themselves sad, relating to separation either at night or on long trips, but they seemed resigned to the fact that these depleting domains were all right if the other filling domains were respected. These depleting domains were expressed as common and understood by families within their culture as normal.

Most striking was the fact that multiple filling and depleting domains had behaviors that the other mother placed in the opposite category. The Chinese mom considered it heartbreaking and nearly negligent to allow a child to sleep away from the mother’s bed in the earliest months and years. But the same mother noted that boarding
schools later in her own childhood, though sad, were a part of life and did not stop her from attaching to her own parents in her childhood. The South African mother, alternatively, noted that the sleeping apart in the early weeks and months was a necessary act of hard love for the family’s needed routines and the child’s growing independence, however, stated it uncomfortable and unacceptable that they would allow their children to be apart for travel without her and her husband, even as friends had suggested boarding school as a good alternative in the multiple countries they’ve lived with their young children.

This researcher noted this phenomenon as a possible emerging grounded theory and has termed it the FAD principle. This may be fertile ground for further research as Filling and Depleting Domains (FAD) may allow for more dynamic multi-cultural perspectives of what attachment behaviors, attachment insecurity, and attachment repair looks like within their own domains of cultural and familial values and expectations.

This, too, could provide significance to this study as there may be filling and depleting domains existing within the Filipino context of Orphanage Q that defines nurture and attachment differently. Additional input for attachment theory informed protocols may broaden the perspective of what the best model of care looks like for OVC in Metro-Manila. And there may be assumptions in best practice that fit a Western context but are not as good a fit for other contexts where culture informs participants differently on how to bond and connect meaningfully with their children. The field research analysis carried out among international mothers stated it this way:
As I reflected and analysed this interview, I noted that there were very specific moments when the parents I interviewed were conveying 1) when (and with whom) intensive bonding and nurturing was expected to occur and 2) when those moments of prolonged separation or time without the caregiver was also accepted. Carin suggested her commitment to breastfeeding and noted that she breastfed her son for nine to ten months and her daughter for two months. The latter was due to work pressures for travel. But she seemed to note the many ways that those changes in feeding routines and time apart were not essential to their attachment and bonding. Furthermore, she suggested she was very committed to teaching her children independence so that they would sleep on their own as an infant and seemed startled by her fellow interviewee who nursed her daughter past her second year and who, as a child herself, slept with her grandparents into her fifth or sixth year.

Yet, Carin also suggested her strong commitment to not be separated from her children while traveling and living abroad, …This seemed to contrast with Mae’s experiences as a child, who was also often left with her grandparents to be raised and left with a boarding school at a very young age. I noted that Mae said this was “sad” and “very sad” and yet it was also a common reality for her and others like her. And Carin said it was “sad” and “hard” to leave her children in another room when sleep training them as infants but she seemed to also see this as a common, if not necessary, reality for her children’s growth and well-being.

Cultures may have specific seasons of intimate connection as well as painful separation that they deem necessary or common and, therefore, accepted as essential to growth in infancy and childhood. It may be meaningful to document how cultural difference plays into this study’s field research. This could provide dynamic field data. The research participants in Orphanage Q are comprised of two specific sub-groups:

1) Traumatized infants, children, and youth, raised with unique understandings of what practices are “common” and “necessary” for them,

2) Filipino teachers, caregivers, caseworkers, and therapeutic professionals with their own sets of practices and beliefs about the same.

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The researcher wonders if the numbers of groups may expand upon the gathering of data. Of additional interest to this researcher was the way the international mothers redefined who the primary, or additional, caregivers were in the family.

It came out late in the interview that her most prominent caregivers, whom Mae* was sleeping with, assisting with errands and massaging, was her grandparents. This was very important and Mae* stated this practice was very common for all of China. Contrasting this was Carin’s* statement that she would stay with her grandparents for ‘a long time’ and for ‘two or three weeks’ during her school vacation when her parents needed to work and they needed extra care. I especially noted the times that Mae repeated aloud what Carin* had said, as I believe her soft-spokenness suggested that when she did choose to speak it meant she was most struck by a difference or was surprised by what she was hearing. She repeated, “Two to three weeks?” And this seemed to me, as the researcher, to suggest that she was struck by the fact that, compared to her years of sleeping alongside her grandparents in the same bed, she would not have defined a two-to-three-week period in Carin’s* life as being a long time.39

The significance of this study in Orphanage Q may be revealed in its intentional gathering of information from a diverse sampling of participants. This in turn may broaden the understanding of relationships in residential care. At the same time, this study gives readers an opportunity to view a unique cultural context where the phenomenon of attachment may or may not be evident, and to better understand what gives rise to the growth of love and/or what inhibits it.

Assumptions and Limitations

The first assumption in this study is rooted in the researcher’s previous exposure to a theoretical framework. There may be evidence of attachment theory principles made

visible in the data that is acquired. Having stated this, the researcher understands that though the theory highlights attachment behaviors as likely present, the grounded theory approach will require the theory to inform but not predict the circle of security at play,\(^{40}\) as defined by attachment theory. Furthermore, if attachment behaviors are maladaptively in place and the security needs of children-at-risk in Orphanage Q are not being met within the child-to-caregiver relationships, there may be other behaviors present in the phenomenon that need to be observed, recorded, and analysed in ways the theoretical framework has yet to account for. Whether the cycle of attachment is successfully or unsuccessfully in place from a Western perspective, the relational dynamics observed and documented throughout this study will build theoretical understanding of attachment in the Filipino context using a constant comparative approach.\(^{41}\)

In addition, this researcher assumes that based on decades’ worth of research\(^{42}\) informing multiple fields of study, an attachment figure is essential for children’s healthy development. Moreover, healthy attachment positively impacts children’s ability to learn, engage in relationship, and positively impacts holistic development. Though well beyond the scope of this study, some content will touch on the importance of brain development


\(^{41}\) Carla Willig, in “Grounded Theory Methodology,” in *Introducing Qualitative Research of Psychology* 2nd Ed. (Berkshire, MA: McGraw Hill Publishing, 2008): 80, says, “Charmaz and Henwood (2008: 241) sum up the defining features of the process of grounded theory as follows: We gather data, compare them, remain open to all possible theoretical understandings of the data, and develop tentative interpretations about these data through our codes and nascent categories. Then we go back to the field and gather more data to check and refine our categories.”

as one of the dynamic places in a child’s development where healthy attachment leaves its impact.

Lastly, this researcher assumes that attachment is both of global and local priority. Many orphans and vulnerable children are placed in residential care. The effectiveness of the residential care approach is central to much ongoing international debate. Furthermore, the existence of neglect, due to a wide array of life circumstances takes place inside and outside of residential care. Its maladaptive impact on child development because of attachment-deficit is a phenomenon existing around the world.

As the Center for the Developing Child of Harvard University states,

A breakdown in these reciprocal, serve and return interactions between adult caregivers and young children can be the result of a multitude of predisposing factors. These may include significant stresses associated with high levels of economic hardship, social isolation, and/or chronic disease, as well as a wide range of adult mental health impairments, including depression, anxiety, post-traumatic stress disorder, serious personality disorders, or substance abuse involving alcohol or illicit drugs. Caregivers who are at highest risk for providing inadequate care often experience several of these problems simultaneously. Neglectful acts or patterns occur in every culture, at all income levels, and within all racial, ethnic, and religious groups.43

This thesis project is set within one specific orphanage thus the delimitations of this study must clearly be taken into consideration. The influence of a Christian perspective will most likely act as an undercurrent within this study. No doubt, this researcher’s own faith will motivate her commitment in observation, reflection, compassion, and drive for ethical integrity. In addition, the culturally religious context will most likely play a role. This is because Orphanage Q is a Protestant Christian

residential care project and the Philippines is a country predominately Catholic (as well as animistic, Protestant Christian, and Muslim in its culturally, spiritual worldview.)

This researcher expects to see ways in which attachment theory engages the figure of a Father God. This may provide a vital layer to security, attachment-seeking behaviors, safe-haven, and relational repair within perceptions of spiritual relationship. This may be made evident in observations, interviews, and a category of coding in both conversation and analysis. Furthermore, the researcher anticipates that possible artifacts resulting in this study may reflect this influence. Additional analysis of the Christian scriptures’ *grand narrative of attachment* as written about in the Old and New Testament and reflected upon by pastors, theologians, and psychology practitioners may be mentioned in reference to professional journals and articles.

Possible limitations this study presents includes the reality that findings will be closely tied to a cultural and geographical context. The Philippines has its own complex history rooted in both centuries of rich traditions and nearly 350-400 years of colonization and foreign rule (Spanish, Japanese, and American.) The ways in which poverty impacts children separated from families and cultural support networks is connected to these historical factors. Both these historical factors and diverse economic

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44 Jack Miller, in “Religion in the Philippines,” *Asia Society Blog*, 2017, accessed March 12, 2017, http://asiasociety.org/education/religion-philippines writes, “The Philippines proudly boasts to be the only Christian nation in Asia. More than 86 percent of the population is Roman Catholic, 6 percent belong to various nationalized Christian cults, and another 2 percent belong to well over 100 Protestant denominations. In addition to the Christian majority, there is a vigorous 4 percent Muslim minority, concentrated on the southern islands of Mindanao, Sulu, and Palawan. Scattered in isolated mountainous regions, the remaining 2 percent follow non-Western, indigenous beliefs and practices. The Chinese minority, although statistically insignificant, has been culturally influential in coloring Filipino Catholicism with many of the beliefs and practices of Buddhism, Taoism, and Confucianism.”

factors will most likely remain beyond the scope of this research. It will not be this study’s intent to speak to these factors though it is assumed that their impact will leave a mark on this study’s findings, none-the-less.

As a qualitative researcher, this writer, an English speaking dual citizen of the United States and Canada, will be the key instrument used to collect data from one dynamic sampling of children-at-risk being served within their context. This outsider, or etic, perspective will provide a lens that sees contextual details as rich and novel. It will also leave some themes and realities unidentified and beyond this researcher’s grasp.

Orphanage Q was founded and continues to be run primarily by a Canadian director and American volunteers serve alongside Filipino staff. This will allow for a fair amount of English language to be utilized in observations and interviews. It is noted that many of the children in care are being prepared for international adoption. The majority, though not all, will speak in English with their “forever families.” Yet, most the staff and Mama-figures all utilize Tagalog as their mother-tongue or heart-language. Some of the children, especially upon arrival, will do the same.

The director of the project, though Canadian by birth and citizenship, is fluent in Tagalog and has lived in the Philippines for much of her life. For this reason, a limitation of this study will be the researcher’s own introductory level grasp of the Tagalog language. In anticipation of this, there are ample strategies and tools to be covered in Chapter three of this study so that additional efforts can be made in mediating communication and comprehension gaps. This includes the use of a translator and a Filipina peer debriefer. These gaps also require research ethics to especially be considered where power differentials exist and vulnerable populations are observed.
**Definition of Terms**

The following terms are operationally defined for use in this study. Some of these terms are referenced with differing international definitions. It is the researcher’s intention to use terms as they would most likely be communicated in the context of the Philippines where this study takes place. However, the international resources require clarification. The researcher strives to be forthcoming about how these definitions relate to emergent findings. In the observation guide and field journal forms, the details observed and analyzed will be described in a neutral description so as not to prescribe previous theory. Upon coding and constant-comparative analysis, the terms may be further defined and explored. Any additional definitions noted in the researcher’s audit trail of data will be evident. There are six operational definitions needed for forms of out-of-home care in this study: *adoptive, family-based, family-centered, foster, institutional,* and *residential* care.

**Adoptive Care**- This model of care provides children, previously separated from birth parents, with new parents who act as permanent caregivers and legal guardians for the remainder of the children’s lives. Some birth parents terminate parental rights to their children. Some parents lose their parental rights in the courts due to child-welfare considerations. Adoptions occur both locally and internationally.

**Family-based Care**- This model of care provides intentional family-style relationships for children lacking parents or guardians. Throughout this study this term is used most often for children placed inside foster care homes or kinship care homes. Kinship care are adults I the extended family members who act as guardians for OVC children.
**Family-centered Care**- This model of care, suggested by Orphanage Q within this study, includes intentional family-style care provided for OVC children within orphanages. This model suggests attachment-sensitive policies be implemented within residential care.

**Foster Care**- This model of care, often used in the West, includes foster parents who act as temporary licensed guardians in place of parents. Foster children have been taken out of their homes due to multiple factors, including abuse, abandonment, neglect, death of parents, and often, though not always, have had their parents’ parental rights terminated. In the West, the foster care system is usually regulated by state, county, or provincial systems and often mandate payment to the foster parents for their service. There are also private funded foster care programs.

**Institutional Care**- OVC Children living in institutions are most often provided group care in institutions most often called orphanages rather than family-based care. There is considerable concern about children worldwide in institutions lacking meaningful connection to caregivers.

**Residential Care**- This study refers to orphanages and institutions providing group care as residential care settings interchangeably. This is due to the Filipino child welfare context which often sites residential care as the term of choice. Orphanage Q also did so. This is an operational term for this study though the researcher notes that many global resources use the term institutional care instead.
CHAPTER TWO
REVIEW OF LITERATURE AND STUDIES

Orphans and Vulnerable Children (OVC)

Around the world there is an academic discussion taking place regarding the well-being of children and the needs of those most vulnerable. This conversation engages practitioners, be it educators, social workers, psychologists, and physicians, as well as scientists and policy-makers writing and researching on these matters. This study engages that existing conversation. Initially, this researcher reflects on those seeking to meet the needs of orphans and vulnerable children (OVC). OVC live (and die) in various contexts, so contextual variants are considered. In addition to this, this researcher highlights the work of seminal attachment theorists, modern-day attachment specialists, trauma intervention specialists, and those writing on the potential nurture and attachment—growth of love—for children around the world.

There are many questions to be asked; there are a many people attempting to provide answers for those questions. This study also proposes that a variety of diverse peoples may have vital input on attachment and are not, yet, invited into the conversation. Keller cites culture-specific attachment specialists, including, Van IJzendoorn and Sagi-
Schwartz, and Heinicke who note that Western attachment studies would benefit immensely by in-depth investigation of cross-cultural network-based approaches to attachment and relationship, building on the ongoing relevance of the Western dyadic perspective of attachment. She powerfully states that “the crosscultural database for attachment research is absurdly small.”

There is considerable evidence that attachment theory and research is based on the Western middle-class conception of development with the primary goal of individual psychological autonomy. There is also evidence that cultural contexts differ widely in their models of autonomy and relatedness, socialization goals, and caregiving strategies. To further develop attachment theory as a cultural conception of caregiver-child relationships, it is first important to define attachment from within cultural points of views.

This study seeks to further define attachment from within the Filipino cultural viewpoint. More specifically, to look at attachment as it pertains to children who have lost attachment figures and experienced early trauma. It makes sense, regardless of what part of the world orphans and vulnerable children reside, attachment that is not worth grieving as loss is probably not an attachment at all. Though grief is often understood as a negative emotion, especially in the lives of those who have already lost so much, attachment specialists now understand the opposite to be true. A child who has had


48 Heidi Keller, “Attachment and Culture,” Journal of Cross-Cultural Psychology 44, no. 2 (December 2012): 186. “Van IJzendoorn and Sagi-Schwartz (2008), who are experts on “culture and attachment,” acknowledge the contextual variations found when reviewing non-Western attachment studies. They attest to the need for a radical change from a dyadic perspective to a network approach for understanding attachment. Earlier, a similar claim was made by Heinicke (1995), who stated “that the study of attachment needs to be expanded ... to include multiple relationships.”

healthy nurture and attachment knows that their relationship(s) are worth fighting (or
grieving) for. This is not to be confused with a child’s insecure attachment that leads
them to cling to every person or visiting volunteer who enters an orphanage\textsuperscript{50}—this
phenomenon is equally detrimental if not guarded against.\textsuperscript{51} Networks of United Nations
representatives have been created in recent years in reaction to this need for safe-
guarding. One such network has noted:

A particular shortcoming of institutional care is that young children typically do
not experience the continuity of care that they need to form a lasting attachment
with an adult caregiver. Ongoing meaningful contact between a child and an
individual care provider is almost always impossible to maintain in a residential
institution because of the high ratio of children to staff, the high frequency of staff
turnover and the nature of shift work. Institutions have their own ‘culture’ which
is often rigid and lacking in basic community and family socialization. These
children have difficulty forming and maintaining relationships throughout their
childhood, adolescence, and adult lives. Indeed, those who have visited
orphanages are likely to have been approached by young children wanting to
touch them or hold their hand. Although such behavior may initially seem to be
an expression of spontaneous affection, it is actually a symptom of a significant
attachment problem. A young child with a secure sense of attachment is more
likely to be cautious, even fearful of strangers, rather than seeking to touch
them.”\textsuperscript{52}

\textsuperscript{50} Angelo Carlo D. Pilapil, “Unfolding the Psychological Well-Being of Orphans: A Qualitative
Study of Filipino Children in an Orphanage,” \textit{Journal of Social Science and Humanities Research} 3, no. 3
(\textit{July – September} 2015): 404, writes, “Disinhibited type of Reactive Attachment Disorder (RAD) was also
seen. There are two subtypes of RAD… inhibited and disinhibited… Disinhibited RAD can be expressed
through an insatiable need for adult attention, affection and closeness. This has also been described when
social promiscuity when children exhibit indiscriminately friendly behavior towards strangers…”

\textsuperscript{51} Aljazeera, in “Cambodia’s Orphan Business,” \textit{People and Power} 12, (\textit{June 27, 2012}): 42,
“The Cambodian government says it will clamp down on failing orphanages, and in 2011 launched a
campaign entitled ‘Children are not Tourist Attractions.’ Meanwhile UNICEF asserts that ‘orphanage
tourism’ and the related increase in the number of children in residential care is in contravention of the UN
Convention on the Rights of the Child.”

\textsuperscript{52} John Williamson, and Aaron Greenberg, “Families, Not Orphanages,” 1-26.
In other words, a child who is insecurely attached may struggle for years to come in exhibiting healthy discernment regarding when it is safe and appropriate to utilize their attachment-seeking behaviors. And a child who has been given opportunity to securely attach, may also be more likely to do so again—even in the wake of loss, there is the hope for that child that love can be found. Moreover, if institutions often have “their own culture which is rigid lacking in basic community and family socialization,” is there anything to be said for institutions whose culture is informed by a commitment to do otherwise?

The question from this study’s opening story remains, for little Mary in the orphanage is there an anchor, a security, or someone worth looking for amidst the sea of motion, waves of noise, and groups of people? In the same way, are the ministries and outreaches existing in our world’s residential care projects mindful of attachment relationships? Are they intentionally establishing them, fiercely committed to protecting them, and setting the stage for them in children’s future nurture?

Many international networks are demanding, in place of the existing orphanages, that extended family, kinship, and foster care be established instead. The International Society for Prevention of Child Abuse and Neglect (ISPCAN) has written on its focus on placing children into family based care. “A follow up project in 2004 (Browne et al, 2005) identified ways in which young children in instutionalised care were being de-institutionalised and returned to family-based care in seven European countries: Denmark, France, Greece, Hungary, Poland, Romania, Slovakia. Approximately one in five children returned to their parents or relatives, 63% entered a new family (foster care or adoption) and a quarter were moved to another institution (of 11 children or more).
The study found that countries with better community support services were more likely to base their decision on the child’s needs and to provide better preparations for the move.”

Craig Greenfield, founder of the dynamic Alongsiders organization and movement, writes in his book, *The Urban Halo, A Story of Hope for Orphans of the Poor*, about his unique experience of moving with his family for years of life and ministry into an urban poor slum. This up-close look allowed him to better understand the context of human need in communities with a high incidence of orphan care. Rather than making the problems and solutions clearer, it gave Greenfield a closer look at the complexity. Even the name of orphan is complex:

I spent several days with a couple of UNICEF consultants who were conducting the first comprehensive survey of ministry amongst orphans in Cambodia. These consultants counted twenty-one government orphanages and eighty-eight orphanages run by charities and other organizations such as churches and mission groups. Combined, these groups had over twenty thousand Cambodian children in their care. Knowing that the UN had estimated at least seventy-seven thousand children orphaned by AIDS alone in Cambodia, I wondered who was looking after the other tens of thousands of children; 57,000 AIDS orphans was a significant shortfall. Not to mention children orphaned by other causes… After surveying these orphanages, the UNICEF guys concluded that the number one reason for children’s entry into these institutions was actually not orphanhood but poverty. Looking through their data I was amazed to discover that the majority of children in orphanage care in Cambodia had at least one living parent, if not two. Since the Cambodian word for orphan is *kmeng kombria*, which is used to describe anyone who has lost one or both parents regardless of age, it made sense to a certain extent. But, digging further throughout their survey data, I found that

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54 Alongsiders is an international organization that began in Cambodia. It works with churches, communities, and marginalized children and youth. Children are intentionally paired with a young mentor who disciples them. Their work and research is available at website [http://alongsiders.org/](http://alongsiders.org/)
out of more than twenty thousand children in care, only 2,265 were known to have lost both parents.\textsuperscript{55}

Greenfield, like other concerned writers on this debate, is an avid supporter of community-based care. He states, “Community-based care allows children to stay within the network of people that have loved and nurtured them throughout their lives. The orphaned child who grows up in a family environment close to their original community will be able to remain connected with their family and heritage and this gives a sense of rootedness and stability that is vital in the midst of turmoil and change brought on by bereavement.”\textsuperscript{56}

Yet, some unique residential care facilities suggest it is possible to do both group caregiving and adult-child attachment within the same organization. There is ample reason to be suspicious of such a claim. This study intentionally selected one such place as a potential information-rich environment in which to observe if and how attachment-rich relationships are formed. The opportunity to do qualitative research will afford this researcher a chance to see these relationships through the eyes of the children being served and those who are serving them.

There are many children, around the world, awaiting a loving relationship with an adult they can trust. In some places, demographics impact the sheer number of those waiting and the conditions in which they are faced to do their waiting. Despite a decreasing birthrate in the West, throughout many developing nations, including some in of Africa, Asia, South Asia, South East Asia and the Middle East, there is an increasing

\footnotesize{\textsuperscript{55} Craig Greenfield, \textit{The Urban Halo: A Story of Hope for Orphans of the Poor} (London, UK: Authentic Media, 2007), 63.}

\footnotesize{\textsuperscript{56} Craig Greenfield, \textit{The Urban Halo}, 137.}
number of children and youth making up their demographics. This is something described by some researchers as a “youth bulge” global crisis, that is an extreme increase in the number of youth. These young communities are often also facing the weight of social ills as dire as poverty, neglect, child labor, sex-trafficking, HIV/AIDS, and violence. UNICEF notes that as an increase in youth co-exists with reduced resources and livelihood options, there is increased risk of harm and inadequate care for the young and vulnerable.

The global economic crisis has squeezed the incomes of workers across the globe through job losses, pay cuts and wage arrears, and further reduced the availability of decent work opportunities. The worsening conditions of labour markets have also forced many households to adopt a variety of coping mechanisms that have potentially severe and irreversible consequences, especially for infants and young children, including hunger and malnutrition, illness, lower educational outcomes, children being left alone and even abandoned, and increased vulnerability to ongoing and future shocks.

In the West, there exists an ongoing need for adults considering the responsibility of fostering and adopting children-at-risk. The U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau, published in their 2015 document, foster care, and adoption data trends for 2005-2014. There were

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http://www.unicef.org/socialpolicy/files/Global_Crisis_and_Youth_Bulge_-_FINAL.pdf

653,000 children being served, 415,000 in care as of September 30, 2014, 265,000 children entering care and 238,000 in exiting care. This document states 60,900 children had parents’ rights that had been terminated in that year alone. There were 50,600 children placed in adoptive families and yet, annual trends also state that 108,000 children were awaiting adoption in 2014. The number of children being served, as well as both entering and exiting the foster care system, though fewer than those reported in 2005, showed an increase from 2013, the year prior.61

Canadian trends suggest disproportionate amount of resources being allocated to the increasing needs in their at-risk children population as well. Farris-Manning and Zandstra document:

Over the last decade, studies have shown that in Canada, the vulnerable population of children in need of protection is increasing significantly (OACAS 2002; CWLC 2001). Despite the increase in children requiring placement in out-of-home care, proportionately fewer family-based care homes are available, due in part to problems with the recruitment and retention of foster families (OACAS, 2002; Barbell & Freundlich, 2001). According to the Ontario Association of Children’s Aid Societies (OACAS), although 21% more foster homes were used in 2001/2002 than in 1998/1999, the rate of placements increased by 38% (OACAS, 2002). Compounding the issue of insufficient supply to meet the demand is the issue of increased length of stay upon placement…One outcome of great concern is the growing number of children being served through group care and institutional/residential treatment…. a 58% increase has occurred since 1990 (Barbell & Freundlich, 2001, p. 23). This increase implies that there is a shortage of family-based resources, and thus many vulnerable children are inappropriately placed in group-care settings.62


Despite a higher standard of living throughout North America, when compared to developing nations, there exists many children in Canada who suffer from attachment deficit and lack of a caring place to call their home. “Lack of a sufficient number of foster homes and/or other resources for residential care were the main reasons given…for breaching the policy on the maximum number of children in a home.”

There are children awaiting a match with adults who can provide for their physical as well as their psycho-social needs of nurture and meaningful connection. The Child Welfare League of Canada suggests that children are waiting in the gap of care and, thus, suffer from forms of attachment disorder. Those tasked with studying these children’s need for more permanent caregiving in an adoptive or foster home note the cyclical detriment that compounds in their lives with time and additional transitions:

The unfortunate outcome for many children in limbo is that they become attachment resistant. Such children pose significant problems for their caregivers, and they consume an inordinate amount of professional time and expertise. They become vulnerable to further moves because their behaviour is difficult to manage; they tend to exhaust their caregivers and it is particularly difficult to devise care plans for them.

Barriers to fostering and adopting are even more staggering in nations with an increase in numbers of children-at-risk and a decrease in accessibility to resources. For many countries fewer systems and safeguards are in place for those children needing care outside of their families of origin. This creates a strained child-to-adult caregiving ratio

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64 Cheryl Farris-Manning and Marietta Zandstra, 7.

and sets the stage for an inadequate number of adults in place to foster the development of so many children and youth. The lurking effects of malnutrition, medical crisis, lack of job opportunity and family loss adversely impact the ability of existing parents, caregivers, and community members to meet the holistic needs of children. For nations, such as the Philippines whose children and youth population is about 40% of their total population\textsuperscript{66} the needs often outweigh the resources available to meet those needs.

The evidence shows that combating child poverty in the Philippines continues to be a challenging task. In fact, both the incidence and magnitude of income poor are increasing, which indicates that efforts have not kept up with the rising number of children living below the poverty threshold. In 2009, around 13.4 million (or 36\%) of all children aged below 18 years were considered income poor. There was an increment of around 2.3 million poor children since 2003. Because of the lack of inclusive economic growth and the persistently high population growth in recent years, the number of poor children is not expected to significantly drop within the next few years. In fact, the increasing frequency and severity of natural calamities could put more children at risk of income poverty when these calamities destroy their families' productive assets.\textsuperscript{67}

In the Philippines, there are reportedly sixty-plus residential care homes registered with the Department of Social Welfare and Development (DSWD). The Philippines has relied on a “project-based approach to child protection”\textsuperscript{68} and much of the time relies on center-based interventions for children needing care rather than governmental assistance or program support. This in part relates to a social welfare system or infrastructure that is


under-resourced to meet the needs of children and families in the community. “At the barangay (village) level, two to three social workers are deployed on average to serve a population of 20,000-40,000.” Many children simply fall through the cracks and do not receive the support they need. This study seeks a closer look at one orphanage where some of these children are receiving care.

“In the Philippines, residential care remains to be the primary response to child abandonment, neglect and abuse. Residential care, or care provided in any nonfamily-based group setting, such as places of safety for emergency care, transit centres in emergency situations, and all other short and long-term residential care facilities including group homes, is only one of the many forms of alternative care… Of the four priority areas included in this [Child Poverty in the Philippines] study, children in residential care received the least amount of attention in terms of research and documentation. In 2003, a total of 2,732 children were reported to have been deprived of a family environment and separated from parents. Of this number, about 98.31% or 2,686 children were brought to institutions. Males comprised the majority (1,655) compared to females (1,031) … The reasons for admission include economic difficulties and family problems such as separation, neglect and abuse, abandonment and death of parents. The length of stay of children ranges from six months to three years. The rate of discharge for male children is higher than for female children, especially those aged 6-12 years. However, older male children tend to stay longer. Among the factors hindering discharges are uncooperative parents, inadequate support for parents, slow judicial process particularly for court-related cases, limited manpower and unskilled staff. Forty-two percent of the 8,338 children admitted in 1998-2002 have been reunited with their families, 9 percent were transferred to other residential facilities for long-term care, 5 percent were placed for adoption, and 2 percent for an independent living programme. The remaining 42 percent were discharged for a variety of reasons, such as death and leaving the centre without permission/runaway.


70 The Department of Social Welfare and Development is the Philippines government arm overseeing government registered programs that serve vulnerable persons. Their website states, http://www.dswd.gov.ph/programs/residential-and-non-residential-facilities/about/ “The DSWD is the largest provider of residential care to the disadvantaged sectors of the society, managing a total of sixty-four (64) residential care facilities across the regions and seven (7) non-residential care facilities or centers with a total of seventy-one center and residential care facilities.” Other websites list additional organizations that may or may not be residential and may or may not be registered with DSWD. There are 72 orphanages, night shelters and care centers listed at http://grasya.org/list-of-orphan-care-centers-in-the-philippines/ and 112 orphan care centers listed online at http://www.webbline.com/orphan-centers/

71 Save the Children, Child Protection in the Philippines, 2011, 58.
Understanding the context of residential care more fully sets the stage for understanding the relationships within one orphanage. This broader national environment impacts each child and staff person participating in this study.

To complicate this problem there is often confusion in even the use of terms such OVC or “orphan” when discussing our world’s child statistics. “UNICEF and global partners define an orphan as a child who has lost one or both parents. By this definition there were over 132 million orphans in sub-Saharan Africa, Asia, Latin America and the Caribbean in 2005.” This number includes both those children who have lost one parent and those who have lost both parents to death. UNICEF goes on to explain, “Of the more than 132 million children classified as orphans, only 13 million have lost both parents. Evidence clearly shows that the vast majority of orphans are living with a surviving parent, grandparent, or other family member. 95 percent of all orphans are over the age of five.”

This usage of the term “orphan” allowed UNICEF to better define the far-reaching detrimental effect of the AIDS epidemic—as children were termed either a “single orphan” or a “double orphan” depending on how many parents they had lost in their fight with AIDS. It also creates confusion, creating false impressions in the West, regarding the numbers of global children living without the possibility of kinship care. It has served as inspiration for outsiders seeking to “rescue” and “relocate” children rather than coming alongside communities and families still existing in the children’s lives.

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There is ongoing research evaluating the unique challenges that kinship care and foster care provides for children these statistics represent. Yet, the stories and lives are complex. There does exist, for many, an ongoing threat to life and survival. Millions, still, have lost their most vital connections to family members, due to death, natural disasters, poverty, and familial abuse. And the term “vulnerable” can include all children that are orphaned as well as those children facing these risk factors with their parents, thus, making even their living with parents potentially harmful or partly detrimental.

No doubt Manila, Philippines, as one of our world’s mega-cities is a dynamic mix of families that are thriving and enjoying health and attachment as well as children and families experiencing incredible barriers to health. Manila affords this study an up-close look at many of the world’s children fighting for survival each day. UNICEF’s recent report suggests “close to 20 million or 60% of the 33.1 million children and youth in the Philippines are ‘in especially difficult circumstances’ such as the threat of exploitation.”

The Journal of Asian Mission highlighted in a recent issue the ways that poverty stricken Filipino children are living and working on the streets at an ever-growing rate: “The estimate of children living on the streets of Manila is between 50,000 and 75,000. Of these less than 10% are being served by one or more of the 110 nongovernment organizations (NGOs) with projects designed to assist street children.”

It is difficult for this researcher to find concrete numbers for those children receiving care in residential programs and foster-care families in the Philippines.


UNICEF Philippines states on their website there exists a need for a more efficient national child protection monitoring system, stating:

More children in the Philippines are becoming victims of abuse, violence, and exploitation. In addition, the country lacks reporting system to determine the exact number of children in need of special protection, such as victims of abuse, violence, and exploitation…Despite recent economic gains, 36.8 per cent of the population still lives in poverty, with 47.5 per cent living on less than US$ 2 per day. Poverty has pushed many children to work to fend for their families, which usually places them in situations of abuse and exploitation. According to a 2009 study by the National Statistical Coordination Board, at least 4 in 10 Filipino children live in poverty.77

The Early Childhood Care and Development (ECCD) Law of 2000 (RA 8980) has mandated comprehensive attention and governance for child welfare issues, including policy and funding development. Their desired outcomes seek to bring to fruition some of the United Nation’s Millennium Development Goals (MDG). However, enforcing participation in this initiative is reportedly difficult and progress is slow.78 The ECCD council has since increased its focus on child rights and on ensuring the potential of child development despite grave barriers. On a national level a legal framework has been created and there are initiatives reportedly in place to increase involvement on a regional, provincial, and municipal level—with programs designed to reach home-based, center-based, school-based, and clinic-based care, especially for children aged birth to six


years.\textsuperscript{79} These are programs the researcher has heard about first hand in talking with mothers in area informal settlements, or slums, representative of the at-risk families this national project seeks to serve in the Metro-Manila area.

When attempting to gain a more accurate look at how many children are placed in residential care, Save the Children states, in their 2011 report on \textit{Child Protection in the Philippines}, “There are no reliable and updated national figures regarding the numbers of children presently living in residential care. While it was reported that up to 100 children are abandoned and turned over to the DWSD every two months, there is no way to verify these numbers.”\textsuperscript{80} They go on to state that though children are placed in foster care, kinship care, family-based care and monitored independent living homes, the most prevalent form of care for children taken from the custody of their parents continues to be in places such as the Philippines’ DSWD-managed [Department of Social Welfare and Development] 61 residential care facilities. This despite also stating, “One of the most often observed impact of institutionalised care is a reduced potential to form secure, long-lasting attachments, and reduced access to individuals who take a real personal interest in the child’s problems and achievements.”\textsuperscript{81}

These children’s needs are not only physical in nature. UNICEF notes, “Early stimulation and interaction with parents and caregivers jumpstart brain development and promote well-being. Extensive research shows that nurturing, stimulating interaction


\textsuperscript{81} Save the Children, “Child Protection in the Philippines,” 28.
between young children and their parents and caregivers positively and permanently strengthens the ability to learn – and may even change brain function for life." All children everywhere are designed to thrive when intimately known in loving relationship.

If ever there was opportunity for the people of the church to come alongside children, fostering the growth of love within creative and diverse family models, now is the time.

If this opportunity is not seized, then there are long term impacts far reaching in the lives of children and in turn society-as-a-whole. For those children, who do not receive intervention, they are at an increased risk of disorganized attachment and deficient growth physically, socially, emotionally, cognitively, and spiritually. Even in the absence of physical and sexual abuse, the detriment of neglect is all-encompassing.

Recent research from Harvard University’s Center on the Developing Child, in collaboration with the US-based National Scientific Council of the Developing Child, explains:

Significant neglect or deprivation in the early childhood years influences the development of a variety of brain regions that are important for thinking, learning, focusing attention, controlling emotions, and managing stress. One particularly sensitive area is the prefrontal cortex (PFC), which serves as the brain’s “air traffic control system” by supporting the development of a wide range of executive functions, such as planning, monitoring, working memory, problem-solving, and behavioral self-regulation. In neuroimaging studies, adults and adolescents who report histories of severe neglect during childhood show smaller PFC volumes when compared with non-neglected individuals. Serious deprivation is also associated with abnormal activity in areas of the brain involved in emotion and stress regulation (i.e., the amygdala and hippocampus) as well as attention and self-control (e.g., the anterior cingulate cortex). Collectively, these findings

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83 Karyn B. Purvis, David R. Cross, Donald F. Dansereau, and Sheri R. Parris, “Trust-Based Relational Intervention (TBRI): A Systemic Approach to Complex Developmental Trauma,” Child & Youth Services 34, no. 4 (October 2013): 361: “Complex developmental trauma is a diagnosis that recognizes the global impact of trauma.”
indicate that significant deprivation disrupts the way in which children’s brains develop and process information, thereby increasing the risk for attentional, emotional, cognitive, and behavioral disorders later in life.84

This research goes on to explore the variety of conditions that are harmful to nurture as expressed specifically by the National Scientific Council:

A breakdown in these reciprocal, serve and return interactions between adult caregivers and young children can be the result of a multitude of predisposing factors. These may include significant stresses associated with high levels of economic hardship, social isolation, and/or chronic disease, as well as a wide range of adult mental health impairments, including depression, anxiety, post-traumatic stress disorder, serious personality disorders, or substance abuse involving alcohol or illicit drugs. Caregivers who are at highest risk for providing inadequate care often experience several of these problems simultaneously. Neglectful acts or patterns occur in every culture, at all income levels, and within all racial, ethnic, and religious groups.85

As stated previously, this need for the growth of love—or nurturing attachment-rich relationship—is of global concern. In addition to the need of loving relationships and support, within developing nation communities, there are those in the West who would greatly benefit from the cultural knowledge of those in contexts different from their own. The decreased family size and the ongoing breakdown of relationship in family units, leaves more children in the West isolated and at-risk.86 Furthermore, the decrease in spiritual nurture and community traditions, and an increase in materialism and commercialism, creates a climate of depression and hopelessness. “There are nearly two billion children in the world today- one third of the world’s population. And all of these


86 Dan Brewster, Child, Church and Mission (Penang: Compassion, 2011) 1.
children could be said to be at risk. Very many, of course, are at risk because of poverty-in danger of suffering, exploitation, neglect, and death…At the same time, millions of children are at risk due to prosperity. The post-modern mind set and modern materialism leave hundreds of millions of children with ‘everything to live with, but nothing to live for.’” 87

**Attachment Theory - Seminal Research**

It seems we were all designed for cyclical, reciprocal connection with those we love. John Bowlby would agree. Attachment research has come a very long way since John Bowlby’s original investigations already mentioned previously in chapter one. However, the circle of security and attachment continues to be discussed and taught in entry level psychology courses and child development trainings around the world. The advances of neuroscience have changed the discussion and deepened the in-depth investigation. The pendulum of the behaviorism approach to psycho-analytic psychiatry has also swung in recent years to role of affect and regulation. Yet, attachment continues to be understood as a foundational principle in nurture. Brown explains:

We can define attachment as a bonding process between infant and primary caregiver (usually the mother) that satisfies innate needs of the infant for physical contact, closeness, and safety (Bowlby, 1969). When these needs are fulfilled, at any level, an enduring bond is established. Attachment is like a dance. It occurs when the infant initiates proximity seeking behaviors, such as smiling and cooing and the adult responds with reciprocal behaviors, such as holding and feeding. Even when cultural variations intervene, the same reciprocal dance of infant proximity-seeking and adult response takes place (Rothbaum, Weisz, Pott, Miyake, & Morelli, 2000). The reciprocal behaviors, when functioning correctly, strengthens the bonding process (Parker & Forest, 1993). This bonding leads to the development of a sense of felt security that enables the infant to explore

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87 Dan Brewster, *Child, Church and Mission*, 1.
his/her world and to feel confident that as he/she ventures forth proximity to the caregiver is less needed.\textsuperscript{88}

These reciprocal behaviors have been studied at a variety of levels in both classic attachment theory and modern attachment theory, which is still developing dynamically today. Mary Ainsworth was the ground-breaking researcher who came alongside Bowlby after extensive research among Ugandan mothers—and later with at-risk Baltimore, USA youth—observing and assessing patterns of nurture, attachment, and resulting behavior patterns, in cross-cultural contexts. She carried out her research with an incredible amount of direct, in-home, field observation. After this depth of study, she developed the\textit{ strange situation test} which is still used in labs today to observe and monitor how well a parent and child navigate separation, protest, and security-seeking behaviors following a stressful absence or encounter with strangers. Initially tested in staged labs in the US, by 1988, Ainsworth went on to test 2,000 infant-parent dyads, or pairs, in her Strange Situation study in 32 separate studies in 8 different countries. In the years that followed, Ainsworth carried out the study globally with 6,282 infant-parent dyads, or pairs. Reportedly she found similar patterns of behavior displaying similar ratios of those children securely attached and those insecurely attached as those previously documented in the US studies.\textsuperscript{89}

Although Ainsworth expanded her strange situation study to include other contexts and cultures, the focus of the study was on the presence and/or absence of secure


attachments and the features of those attachments. She did not attend to the unique cultural contexts themselves in which attachment emerges. IJzendoorn and Kroonenberg\textsuperscript{90} suggest a need for an increased data base where various cultures, as well as diverse sub-cultures within those cultures and their attachment practices and ideals may be compared. They state, “It seems evident that data from less Western-oriented cultures such as Africa, South America, and Eastern European socialist countries will be needed to establish a more truly global and better informed cross-cultural perspective on inferences to be derived from differences in distributions of Strange Situation attachment classifications.” In recent years of study, culture-attachment specialists are directing attention to the gaps in attachment theory’s lack of examination regarding underlying theoretical frameworks regarding the ideal child and socialization goals.\textsuperscript{91} These inquiries examine the role that culture plays in the value placed upon independence and interdependence and the ways this informs parenting practices, values, and ideals.

Mary Main was the student of Ainsworth who went on to further develop the profiles of organized and disorganized attachment categories. Here dynamic investigation resulted in the articulation of a “Disorganized-Disoriented” attachment pattern that had not yet been named or examined. This was not simply an expansion of Ainsworth’s three classifications for attachment in the Strange Situation test. Main’s work on avoidant attachment behavior, especially for children who had been abused and traumatized, expressed the way some infants were found to be “avoiding any risk of being rebuffed

\textsuperscript{90} Marinus H. Van IJzendoorn, and Pieter M. Kroonenberg, \textit{Child Development}, 59.

\textsuperscript{91} Patricia M. Greenfield, Heidi Keller, Andrew Fuligni, and Ashley Maynard, “Cultural Pathways through Universal Development,” \textit{Annual Review of Psychology} 54 (2000): 466, state, “Culturally relevant developmental goals are represented in the form of implicit ethnotheories of development, i.e., a system of beliefs and ideas concerning the nature of the ideal child and the socialization practices necessary to achieve this ideal.”
and becoming distressed and disorganised; in addition, he is avoiding any risk of eliciting hostile behavior from his mother.”92 And, “The infant’s attempt to hold back the threat of losing control of their behavior to emotional flooding.”93

Main was also a key contributor in developing the Adult Attachment Interview (AAI)94 assessment tool that continues to inform researchers regarding the way in which mother-infant dyadic experiences have ongoing effects on adult emotional health and parenting styles. The interview answers are coded and scored, then classified as either secure or insecure, and more specifically in the subgroupings of anxious, avoidant, ambivalent, and disorganized95 in nature. It takes a very specific training to be able to score this test but the following descriptions convey the kind of behavior Ainsworth evaluated using observations, strange situation classification (SCS),96 adult interviews, scoring and assessment:

Contemporary attachment theory typically emphasizes at least four central tenets that are embedded within the attachment behavior system, defined as a collection of behaviors that serve to keep the infant close to a select number of caregivers for survival (Ainsworth 1989) ... the secure base refers to the availability of the caregiver, who acts as a source of support and encouragement as the child explores the world (Feeney and Thrush 2010). Next, the concept of exploration


describes the ability of the infant to safely explore his or her environment... Attachment behaviors are those that arise when a potential threat or dangerous situation develops when the child is exploring... These behaviors, such as signaling and proximity seeking, help the child to restore closeness with the caregiver (Clinton and Straub 2010) ... Bowlby, in collaboration with James Robertson, observed a predictable set of attachment behaviors that tend to take place... when children are separated from their parents for long periods of time—protest, despair, and detachment (Karen 1994). Finally, the safe haven concept describes the child reconnecting with the caregiver after exploring his or her world... These four attachment components tend to take place in a circular manner, ...as he or she re-attaches to the parent (Clinton and Straub 2010). 97

Speaking from personal experience, the training this writer received as an early childhood educator, teaching in British Columbia, Canada, was informed by a commitment, on a provincial and national level, to a set of Early Childhood Education best practice principles. These principles in caregiving are documented in an Early Learning Framework that speaks to essential areas of care and curriculum for children aged birth to five years. It serves as an agreed upon guide for all those working in the field with young children and seeking certification from the BC Ministry of Education. This framework recognizes the vital role that initial parents and caregivers play in a child’s life and learning. It states:

North American research on child development suggests that in order to establish a secure foundation to explore the world, infants and young children need to form a strong attachment to their primary caregivers. Strong attachments give young children the confidence they need to form meaningful connections with other children and adults, and with places and things in their communities. 98


This above guideline serves as just one example of ways that attachment research has impacted multiple fields of study. The determination of best-practice within various settings, where either child development, human wellness, education, or therapy plays a role, echoes Bowlby, Ainsworth, Main and modern day attachment findings even now. The research also continues to explore the intricacies of relationships and technology provides new avenues of investigation. Yet, gaps remain. Technology and ever-increasing cross-cultural engagement also avails researchers new avenues for investigation of culture-specific best-practice in nurture and social relationship. This researcher intends to investigate how these gaps of understanding may be further mediated with a grounded theory approach examining a Filipino context for relationship as well as its culture specific narratives on nurture and the growth of love.

**Modern Attachment Theory – Schore and Siegel**

In researching current trends in attachment theory scholarship, it is evident that change continues to abound. Much of the developing world has, for decades now, increased its interest in brain development. Brain imaging technology affords neuroscientists a peak into the inner-workings of brain mechanisms. The neurological information about activity occurring between neurotransmitters, neurons, and dendrites, is now understood to be at work, behind the scenes of behavior, cognition, and emotion. This has motivated some practitioners and academics to move their prevailing focus from
one of behavior and cognition alone, to also focus, even more, on the brain’s role in processing emotive responses and the ability to regulate physical impulses.99

Allan Schore states that modern day attachment is arguing for a shift, understanding attachment theory to now be a theory of regulation.100 Of much interest to the researcher is the work of psychologists, like Schore, who are tracing the nurturing connectivity between mother-child dyads to the activity of the right hemisphere of the brain. It is understood that affective-rich behaviors are lighting up the limbic system where pre-frontal mapping of the brain occurs within both participants.101 Schore suggests that this cycle of neurological engagement gives rise to future empathic behaviors of the child. Furthermore, it serves as powerful regulator,102 promoting calm and rest while decreasing the levels of arousal and stress on the child’s neurological and biological systems, ultimately impacting their interpersonal behavior and emotional wellbeing.

When this healthy nurture and neurological engagement does not occur, due to physical and/or social neglect or abuse, the stress on the limbic systems increases—a zone of the brain essential as pre-curser for higher functioning—and dysregulation occurs. This results in further risk of future behavior, cognition, and relationship.

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Without intervention, this risk often results in decreased *self-regulation, stress-regulation* and *emotion-regulation* within infants and children, as well as *right brain deficits*.\(^{103}\)

Developmental attachment, therapeutically necessary for brain development, takes center stage in the study of healthy child development, and the growth of empathy—both central foundations on which future relationships are built.\(^{104}\)

Attachment specialists have studied these central caregiving relationships as they relate to the infant-mother exchanges of both verbal and non-verbal communication. This communication is made up of soothing gestures, responsive touches, and tones of voice, as well as the ability to experience enjoyment together in a spirit of play and availability.

Psychologist, UCLA professor and director of the Mindsight Institute, Daniel Siegel, expounds on this:

> It is amazing that such a complex process as interpersonal communication and parent-child relationships can actually be understood in a fairly simple manner: Attachment at its core is based on parental sensitivity and responsivity to the child’s signals, which allow for collaborative parent-child communication. Contingent communication gives rise to secure attachment and is characterized by a collaborative give-and-take of signals between the members of the pair. Contingent communication relies on the alignment of internal experiences, or states of mind, between child and caregiver. This mutually sharing, mutually influencing set of interactions – this emotional attunement or mental state resonance – is the essence of healthy, secure attachment…Suboptimal attachments arise with repeated patterns of noncontingent communication. A parent’s communication and own internal states may be oblivious to the child’s, as in avoidant attachment. In contrast, an ambivalently attached child experiences the parent’s communication as inconsistently contingent; at times, it is intrusive, and yet at other times there is an alignment of their internal states. If the parent is a source of disorientation or terror, the child will develop a disorganized/disoriented attachment. In such a dyad, not only is communication noncontingent, but the messages sent by the

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\(^{104}\) Alan N. Schore, “Modern Attachment Theory,” 44:15/49:06.
parent creates an internal state of chaos and overwhelming fear of the parent within the child.\textsuperscript{105}

Siegel earlier notes that this does not mean the child and caregiver must always connect without need for repair. Instead this process of repair and reconnection in fact plays an important role, if it is not repeatedly disorganized, chaotic, and unpredictable, further stressing the importance of a young child’s need to anticipate security and care.

Repeated and expectable patterns of interpersonal connection between a child and an attachment figure are necessary for proper development. There are always times of disconnection, which can be followed by repair and reconnection. In each of the forms of insecure attachment, there is a problem with connection and repair. In the avoidantly attached dyad, connections are consistently infrequent and unsoothing; there is no repair. In the ambivalently attached dyad, connections are unpredictable and at times overwhelming and emotionally intrusive. There is inconsistent respect for the cycling of needs for interaction versus solitude. Repair in these situations may be over stimulating, such as an intrusive parent’s wanting to reestablish a connection and not letting the infant avert his gaze as a means of regulating his level of arousal/distress. Parents who persist at trying to make direct contact or alignment when attunement actually calls for them to back away from such efforts will overwhelm their children and teach them that there is no reliable comfort in connection with parents.\textsuperscript{106}

This description of adjustment and repair makes clear it is not just the tone of voice, or the level of eye-contact that can be described as security-promoting behavior in caregiving relationships for young children; it is instead the fine-tuning of reciprocity that allows a parent to change or regulate their own behavior depending upon the cues and clues their child gives. This enhances the child’s ability to seek and find a state of regulation. The significant adult in a child’s life is committed to adapting their responses to their young child’s emotional and physical state, working towards a common goal of

\textsuperscript{105} D. J. Siegel, \textit{The Developing Mind, second edition: How relationships and the brain interact to shape who we are} (New York: Guilford Press, 2012) 117.

\textsuperscript{106} Siegel, \textit{The Developing Mind}, 116.
decreased arousal (fear, sadness, anger) and increased personal equilibrium (warmth, pleasure, enjoyment.) The research of Elizabeth Meins suggests that there is a stronger correlation between comments and behaviors of parents that are appropriately attuned to the child’s arousal states and socio-emotional cues, with less correlation connected to behaviors that are categorized as sensitive in tone regardless of child’s needs. This deepens the understanding of what responsive caregiving looks and sounds like in relation to attunement and attachment.\textsuperscript{107} This study may provide concrete examples for caregivers regarding attachment practices that are or are not in tune with the child.

Furthermore, as Keller so well articulates, there are layers of cultural values and socialization ideals that may inform caregivers’ definitions of responsivity to a child’s inner and outer needs. As a more Western approach to caregiving focuses on the individual self as of paramount importance, children are even in their infancy urged into autonomous vocalization of individual preference. Whereas, cultures whose focus on social-relatedness is more pronounced, may instead understand autonomy as less about an individual’s inner-state and more about agency and action used to fulfill the meaningful goals and agendas of a broader community or family.\textsuperscript{108} Yet, this diversity of cultural perspective is under-represented in attachment research.

Diversity in cultures is often coupled with diversity in persons. This speaks to the importance of temperament in both child and caregiver. Individuals prefer different levels of arousal depending upon differing thresholds for discomfort and sensory stimulation.


This topic is beyond the scope of this paper, however, studies exploring personality and behavior supplement the research done on attachment and parenting styles. Simply stated, there simultaneously exists a complimentary—or contradictory—role between the child’s individual temperament\(^{109}\) and resiliency, in the incidence of both secure and insecure attachment.\(^{110}\)

When the child does not have secure attachment their need for security and trust does not disappear. They may show signs of at-risk behavior. The child’s behavior may be in a perpetual state of anxiety and protest because of unmet needs. Future negative behavior and responses result in compounded feelings of hurt and mistrust, as well as potential layers of harm and feelings of abandonment. Those working as foster parent, counselor, case-worker, teacher, or pastor may encounter children in their centers and churches who show signs of trauma and distress due to neglect, abuse, or sudden separation from an attachment figure.

As interventions for children in crisis are administered there is potential to serve as a significant adult doing what perhaps their parents were never able to do, namely to “mirror for the child” that they are “valued” and to meet the child’s needs consistently. Phyllis Kilbourn of Crisis Care International defines this intentional mirroring as counseling relationships. She explains:

Like the mother, you are a mirror for the child. When you view the person as valued and consistently meet his or her need for a stable, healthy relationship, the person acknowledges his or her own intrinsic value and develops the healthy expectation that he or she can trust you… For children who have not had a

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healthy or trusting attachment with their mothers, this may be the first healthy relationship they have experienced with an adult, where they know they are valued and their best interests are the counselor’s primary concern… The counseling relationship can provide an important corrective experience for the child who did not have a healthy, trusting relationship with his mother, or caregivers. You must be reliable, consistent and make the child’s needs your first priority to ensure that trust develops.\textsuperscript{111}

Maintaining a broad view on the phenomenon of relationship rooted in culture-specific contexts, this mirroring behavior may also be occurring in dimensions beyond that of the mother-figure and the child. This study determines to stand in the gap of research to better understand one unique context in the Philippines where relationships with orphans and vulnerable children are developed. Thus, this study has the potential to dynamically promote the expansion of the “absurdly small”\textsuperscript{112} and much-needed increase in culture-specific database of attachment.\textsuperscript{113}

Whether one is doing in-depth research on international child welfare or simply looking at the needs of children at-risk in their local city, there is no shortage of children needing safe adults who will make the child’s needs first priority. There are children who suffer the loss, or utter lack, of attachment in their birth family. While they lack a home with permanency, they also move from home to home, from courtroom to courtroom, from case worker to case worker. By the time, they are barely two years old, they may well have passed through the hands of more people than can be counted. Clearly, they are


at great risk of existing in a state of insecurity and disorganized regulation. Their needs increase and their ability to make a lasting connection is often deteriorating with time. The need for specialized treatment and care increases as children’s behavior becomes more extreme—or worse—eventually turning emotionally frozen and walled off from warmth and emotional engagement. These children may show signs of complex attachment disorders as extreme as reactive attachment disorder or attachment resistance, as previously mentioned. This may necessitate the presence of skilled child advocates doing therapeutic intervention, such as those trained by Karyn Purvis.

### The Connected Child

Karyn Purvis, who recently passed away due to a battle with long-term illness, has left a legacy of healing for many children-at-risk. Her research, together with David Cross, has especially touched the lives of attachment-deficient children in many adoptive and foster care homes. Purvis provides both theoretical and practical understanding in the Trust-Based Relational Intervention (TBRI) approach to intervention strategies. It is taught at Texas Christian University’s (TCU) Institute of Child Development in Fort Worth, Texas. Though relatively new, trainers now serve at-risk children every day. TBRI utilizes the original research of Purvis and Cross and the research of Dan Siegel, and the attachment theory principles of Bowlby and Ainsworth, all mentioned previously.

TBRI focuses on increasing the child’s sense of felt-safety and security. It is coupled with correcting and connecting practices, as well as empowering strategies, described in her book, *The Connected Child*:

Another way to describe this balance is to focus on connecting and correcting. When we’re connecting with our children, we promote a close, warm, interactive,
and safe relationship. We purposefully match their behaviors, initiate eye contact, play together and praise them for their efforts. These techniques build warm and positive interpersonal bonds, which are vitally therapeutic for impaired and harmed children. At the same time, you need to take on the role of teacher, gently correcting (not punishing) your child to help him or her master new skills and better alternatives to old maladaptive habits. Correcting means showing and coaching your child how to handle himself in a given situation and letting him practice safely, without shame, until he gets it right. You can use correcting to teach your child how to self-regulate, how to show respect, how to follow directions, and how to acquire a host of other social skills.\footnote{Karyn Purvis, David R. Cross, and Wendy Lyons Sunshine, \textit{The Connected Child, Bring Hope and Healing to Your Adoptive Family} (New York: McGraw Hill, 2007), 16.}

After early life seasons of abuse and neglect, loss and trauma, these children need adults who can lead the child in regulation-promoting behavior. These children often display neurological effects from increased arousal states, increased cortisol, or stress hormone levels, and impulsive “fight or flight” reactions to fear and perceived threat. This further aggravates their ability to have attachment needs met, instead habitually turning to aggression, isolation, and manipulation. “Isolation prevents the circuitry in a child’s brain from developing fully, eventually diminishing the child’s ability to concentrate, control his emotions, think logically, and process social cues.”\footnote{Karyn Purvis et al., \textit{The Connected Child}, 26.}

Purvis also highlights the powerful role of \textit{matching behaviors}\footnote{Karyn Purvis et al, \textit{The Connected Child}, 85-86.} which includes speaking to a child on their level, sitting on the floor with them, expressing respect, perceived value, as well as the sharing of power by reciprocating eye-contact and appropriate touch or proximity. Empowering behaviors also remind the caregiver to respond to the child’s tendency to aggression and protest with prevention whenever possible. This includes regular water, nutrition, and opportunities for exercise. These
principles are nearly identical to the needs that a mother provides for her infant in the earliest days of nurture. The matching that takes place during cuddling, nursing, cooing, and rocking are needs that have never been consistently or safely met for many. Purvis makes clear the ways these needs can still be met. The statistical data collected by TBRI after intensive camps and parent-support work are promising:

The qualitative data gathered from parents who attended the [TBRI] Hope Connection Camp, using the TBRI principles, has concluded that at the end of camp, 50% of campers improved in seeking proximity, 40% improved on eye contact, 60% improved on spontaneous affection, 50% improved on awareness of own behaviors and actions, 40% vocabulary advance, 30% increased in empathy, 40% increase in compliance, 60% in other positive behaviors.117

Many pastors, teachers, and caregivers, however, have not benefitted from extensive intervention training in crisis care and intervention strategies. It can be discouraging to see the sheer numbers of children in our world who need help and, yet, feel helpless at knowing how to help them. To this end, the director of the National Scientific Council on the Developing Child, chaired by Harvard’s Center on the Developing Child, Jack Shonkoff, suggests that the latest research encourages helpers to believe that the involvement of a strong, adult relationship is a key ingredient in resilience. He further states, “Resilience depends on supportive, responsive relationships and mastering a set of capabilities that can help us respond and adapt to adversity in healthy ways. It’s those capacities and relationships that can turn toxic stress into tolerable stress.”118

117Karyn Purvis and David L. Cross, TRBI Professional Training Program presented by TCU Institute of Child Development, Training at Texas Christian University, Fort Worth, Texas (June 2011).

This innovative research inspires hope for those caring adults who serve children in Sunday School classrooms, and on basketball courts, in community recreation clubs and in prayer meetings. These people can change the hearts and lives of the children who desperately need a consistent, caring adult to show-up and make a difference. “As a growing body of research is showing, the developing brain relies upon the consistent ‘serve and return’ interactions that happen between a young child and a primary caregiver.”\(^{119}\) Existing research convinces caregivers that the need is great, yet, the opportunities to connect, correct, and empower children with matching, as well as model serve and return behaviors, may provide the nurture and attachment that these children desperately need.

The researcher takes special note of the fact that the TBRI intervention camps took place within a whole community committed to a culture of connecting, correcting, and empowering behaviors. There seems to be an absence of discussing how this broader circle of connection provided another layer of relationship and connectivity. In what ways might this study investigate the layers of intervention and relationship that play a role in the progressive development of the children served? For communities of faith doing outreach to children-at-risk and OVC, are one-on-one meaningful relationships that are rooted in larger systems of care and concern being simultaneously explored?

This is not a ministry for the faint of heart. Yet, with consistency and commitment the chance to change lives and hearts, broken stories, and even brains, is ours to embrace. The Center on the Developing Child explains the value of such efforts:

Whether the burdens come from the hardships of poverty, the challenges of parental substance abuse or serious mental illness, the stresses of war, the threats of recurrent violence or chronic neglect, or a combination of factors, the single most common finding is that children who end up doing well have had at least one stable and committed relationship with a supportive parent, caregiver, or other adult. These relationships provide the personalized responsiveness, scaffolding, and protection that buffer children from developmental disruption. They also build key capacities—such as the ability to plan, monitor and regulate behavior, and adapt to changing circumstances—that enable children to respond to adversity and to thrive. This combination of supportive relationships, adaptive skill-building, and positive experiences constitutes the foundations of what is commonly called resilience.120

Once again, the researcher begs to ask, if powerful changes can occur for the good, based on the committed work of one supportive parent, caregiver, or adult in the life of a child, are their seemingly invisible networks of support simultaneously occurring that help to make this trust-based, relational intervention successful? Are these relationships hierarchical in nature or are their value and relevance of mutual importance? And how do these social phenomena relate to specific contexts of culture and place?

**The Growth of Love**

Another key resource that has been formational in this review of literature has been *The Growth of Love, Understanding the Five Essential Elements of Child Development* which stresses five key ingredients for holistic growth for global children. Throughout the author’s decades-long practice of ministry and therapy these essentials remained: *security, boundaries, significance, community,* and *creativity.*121 Keith J. White is director, together with his wife, of a UK based children’s residential program, Mill

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Grove. There his family has lived and served for four generations, caring for vulnerable children who have suffered loss and separation. White’s reflections are a result of a dynamic overlap in study of diverse fields, that of psychology, theology, and child development. He is author and speaker, theologian, and therapeutic practitioner.

White serves as chair of the Child Theology Movement and chair of the National Centre for Therapeutic Residential and Foster Care. He writes regularly in print and online for theological and therapeutic resources. Keith White shares the ways in which he has witnessed the growth of love in their lives. White’s writing and speaking extends beyond his Mill Grove London home. He has studied and lectured in diverse parts of the globe. White considers additional cultural contexts in *The Growth of Love*. This book poignantly describes the nurture of children in real-life, relevant ways.

White’s reflections are rooted first in the utter need for security in a child’s life. Building on attachment research, White reminds us that a child’s secure base is not only, grounded in place, but even more in the presence of at least one caring adult. White highlights this adult as one the child can depend upon no matter what; a parent or caregiver whose very glances speak *complex conversations without words*, due to their nearness of heart. He goes on to describe the paramount importance of establishing this security first and foremost in a child’s life:

My clinical experience tends to confirm the principle that, in order for a healthy sense of self to develop, there must be one other person on earth who is totally and unconditionally committed to me as an individual for a significant part of my life. For many children, however, there is no such person. Where this is so, it is my view that the primary task of all who seek to help a child at risk-in need,

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122 Keith J. White, *The Growth of Love*, 78, states: “Janusz Korczak, as he does in so many other aspects of the world of children, gets to the nub of things elegantly, simply and with precision when he talks of the child being able to read the parent’s face as adults try to read the weather. He emphasized that little children spend most of their time doing this, so they are experts in the field. He also talks of a mother and child being able to hold complicated conversations without words.”
vulnerable, or whatever term we use- is to identify a significant adult as a non-negotiable priority and then to introduce this person to the child in such a way that bonding is given every possible chance…

We are talking about a personal relationship that has nothing to do with labels and systems of care. It is based on genuine understanding, respect and affection. It is therefore not possible to substitute another person in the relationship. It has nothing to do with case files or groups and carers; it is about a person who knows a child by name and is known to the child by name. Both parties believe the other person to be of incalculable importance. The significant other delights in the child. It is not about calculated intervention and rational analysis so much as the joy of being together. It is about genuine and spontaneous reactions, not so much to particular events, words or products as to the soul and inner being of the child. There is not short cut to the soul of any person, so time is of the essence, and covenant-type commitment is the guarantor that the time will be available and respected.123

This feeling of safety and provision must be coupled with the presence of

boundaries that provide guidelines for a child’s growth. White speaks fondly of the corporate church that has throughout the ages lovingly provided a path to follow. With words of life, the corporate body of the church guides children in biblical wisdom. The plethora of children who have found refuge for over one hundred years on Mill Grove’s grounds stand as testament to our world’s need for peace and consistency. Prior to arrival many of these children may have only known chaos and harm. And so, these boundaries are not meant to be rigid and threatening. Instead they are permeable, flexible and at times, even playful in nature. White suggests, these boundaries serve as an anchor that, no matter the storm, will not cease to hold.

Understanding a child’s significance is central to the development of a child’s identity. The parent or caregiver, in the best of cases, is one who provides care not because of duty, or title, or policy, but instead due to the sheer delight that exists for both adult and child to behold. White speaks to the ways in which this desire, to deeply matter,

originates in our God-ordained design. The child is made—to be known—by a Father God who has made the child in his image and deemed him good. Good not only as a taker of relational goods but also as a giver, or agent of good, able to meaningfully contribute to the lives of others. This relational health is mirrored by caregivers who share the love of Christ; they take the time to connect to the child’s very soul.

White builds on this concept of relational health in pulling back the scope to view a larger scale. Community is vital for love to grow in a child’s life. This fourth essential considers the ways in which a child’s world is made up of multiple layers of family and society. When these layers are stripped away the child loses important means to understanding their own identity and the identity of others. Routines within the community’s practice of worship, ceremony, marketplace, and livelihood are a part of this formational process. For children, residing in residential care, is there both a community they have lost and a community they have gained? Are there things to be learned within specific cultural contexts that will enhance one’s understanding of attachment as it relates to significant people, as well as scaffold existing attachment theory in its articulating attachment to place and community systems?

White is quick to note the ways in which the Western world is often at a detriment regarding extended connectivity and community. There is special attention drawn to the ways in which international communities, sometimes more connected to extended families and social networks, have much to teach the West. He goes on to highlight the ways this is true even within economically depressed communities that are often undervalued as teachers on the world stage. This study seeks to intentionally take the
place of learner, as the children and caregivers in a Philippines-specific context act as
teachers regarding the phenomenon of relationship and social network.

The final essential noted in this reflection on developmental growth is that of
creativity. White does well to ask his readers if this topic is understood to be of little
value. After all, child’s play is considered, in some adult circles, to be a distraction to the
more serious work of growth. However, developmental research suggests the opposite is
true. A child’s play is the very place in which the soil of growth is tilled. 124 White brings
his readers attention back to the mother-child dyad to contemplate how nurture, already
discussed as foundational, is often a playful dance of sorts. One in which the key players
are connecting and communicating not only to meet physical needs but also for mutual
exploration and enjoyment, without pre-determined outcomes. In this sense, the growth
of love is play.

White also considers the ways in which a creative God, creator of all things,
invites his children into playful connection and conversation. With the help of the Spirit,
they enter life and prayer with a growing imagination. He continues to expand their
fullness of understanding, saying, “Do not be afraid.”125 He spurs his children, young and
old alike, to lovingly imagine what creative surprises await them next. White makes a
case for creativity as essential for this love to grow.

124 Anne Richards, and Peter Privett, eds., Through the Eyes of a Child, New Insights in Theology

125 Anne Richards, and Peter Privett, eds., Through the Eyes of a Child, New Insights in Theology
from a Child’s Perspective, 95: “In humans and higher mammals, novelty, strangeness, and incongruity
evoke fear, exploration and play. (Which of these responses occurs is dependent on other setting
conditions.) In the biblical accounts the normative response to an encounter with God is fear, and this in
turn often answered by a divine instruction not to be afraid, and an invitation to explore and even to play.
White’s book serves as resource for those who are investing in the growth of children, youth, families, and communities, including child coordinators, parent educators, pastors, and teachers as they reach children through relationships in home, in church, and community. White’s five essentials for love to grow, may foster the holistic development of the OVC children in their care. Their efforts in intervention, for vulnerable children specifically, may serve as a ministry of nurture, empowered by the love of Christ, lived out in equal parts security, boundaries, significance, community, and creativity, may change the lives of the children they invest in. Indeed, in places around the globe, children are awaiting adults to do just that. Those involved in outreach to orphans and vulnerable children, both inside and outside of the church, may benefit from this intentional instruction to focus on the five essentials as means of the growth of love. This study seeks to expand and enhance the knowledge base on attachment-sensitive practices by articulating how one Filipino orphanage’s stated goal to provide family-centered care to traumatized children and youth impacts the actual care they provide.

Summary of Resources

To summarize, attachment theory principles play a role in understanding bonding within mother-child, or child-to-caregiver relationships. This includes the vital circle of security and cycle of attachment, made up of ongoing and overlapping points: secure-base, proximity maintenance or attachment behaviors, separation distress and safe haven, or attachment repair. These concepts were first written by John Bowlby and expanded by Mary Ainsworth and Mary Main as seminal writers on Attachment theory. Siegel and Shore expand the exploration of attachment, in conjunction with the use of brain research.
technology. Their research especially notes the role of regulation and its impact on physical arousal states and the affective impact it has on interpersonal connection and relationship. In addition, Karyn Purvis’ and David Cross, authors of *The Connected Child* and *Trust Based Relational Intervention* (TBRI), present connecting, correcting and empowering behaviors as groundwork for healing from traumatic or attachment-deficient experiences. White, and his text, *The Growth of Love*, mandate the utilization of the five essentials for child development, which are: security, boundaries, significance, creativity, and community. The researcher understands that these elements of care may be visible (or missing) in the lives of children receiving care.

These researchers and writers provide a foundation of understanding of the phenomenon of relationship often present (or lacking) between children and primary caregivers. The combined findings of psychoanalytic, developmental, and neurological approaches to understanding how children grow and develop within the context of bonding and nurture, informs this researcher as she seeks to explore the phenomenon of relationship in one unique context in Metro-Manila, Philippines. Of particular interest is the intervention efforts provided for children with a deficit in affective-rich behavior and relationship due to maltreatment and neglect. These key themes serve as additional lenses through which this study’s data may be viewed. Yet, this researcher is committed to remaining open to additional viewpoints upon in-depth observation and a fierce commitment to the collection of emerging grounded theory data.

This research seeks to join the emerging voices and expand on attachment theory. There are those attachment specialists who recognize that the set of definitions often guiding and evaluating attachment studies all call the Western hemisphere their home.
With this, cultural convictions and values come defined by sets of attachment goals, serving both as means and ends. As this researcher noted, her previously cited discovery of the FAD principle\textsuperscript{126} suggests that some cultures may have alternative ways of organizing attachment behaviors in filling and depleting domains. Rothbaum articulates the role of culture in social relationship this way:

“What counts as social competence varies substantially from one culture to another. Because attachment theorists define competence largely in terms of Western values, they emphasize exploration, autonomy, efficacy, willingness to discuss, strong affect and to disagree with partners, sociability with peers and unfamiliar others, and a positive view of self. In Japan, where preservation of social harmony is particularly valued, social competence often entails dependence, emotional restraint, indirect expression of feelings, a clear differentiation between appropriate behavior with in-group versus out-group members, self-criticism, and self-effacement.”\textsuperscript{127}

The work of Rothbaum highlights that there is a richness to attachment based on cultural context that theorists and practitioners are missing. This researcher seeks to better understand the cultural differences associated with attachment in a Filipino context and expand on the ways that attachment-sensitive practices are both imagined, articulated, and realized. There is substantial learning to be explored. The researcher commits to allowing children and orphanage staff to act as teachers on the exploration of relationships and the potential for the growth of love at Orphanage Q.

\textsuperscript{126} Aisling Zweigle, “Qualitative Research Report, Final Data Analysis—Attachment and Nurture – Exploring Experience and Perception of Child and Parent Bonding,” page 55, as submitted to Dr. Clark Armstrong at Asia-Pacific Nazarene Theological Seminary, April 3\textsuperscript{rd}, 2016 for Qualitative Research class.

CHAPTER THREE
RESEARCH METHODOLOGY AND PROCEDURES

Overview

This study utilized a qualitative approach to investigating OVC care in one orphanage in the Philippines. More specifically the grounded theory method (GTM) was used as means to seek further understanding on the phenomenon of relationships within that context. This chapter examines what GTM is and how its dynamic process provides layer upon layer of both data and analysis. This chapter seeks to outline the research process, the data gathering strategies and instruments, the trustworthiness of data, and vital issues related to research ethics. In addition, the use of a research support team and pilot project is discussed as it provided the researcher increased transparency and reflexivity, further enhancing the validity of the study’s findings.

Purposeful attachment and connection, essential to a child’s growth and development, is missing in the lives of so many of our world’s children. Intentional intervention is needed. In orphanages and residential care facilities, during attachment needs, many questions abound. Grounded theory method as originally directed by Glaser and Strauss,128 and later by Glaser,129 requires researchers utilizing GTM to engage in an


129 B. Glaser, “Constructivist Grounded Theory?” Forum Qualitative Sozialforschung / Forum: Qualitative Social Research 3, no. 3 (2002): 12, accessed January 23, 2017. http://nbn-resolving.de/urn:nbn:de:0114-fqs0203125. This article highlights Glaser’s strong objections to the evolutions made to the original grounded theory as he developed it. It also highlights Charmaz as a strong
initial data collection phase prior to the formulation of a central research question, so as not to create a biased perspective. However, Corbin and Strauss also inform this researcher\textsuperscript{130} whose adaptations to an evolved grounded theory methodology allows for broad questions to spur the researcher into an initial exploration phase.\textsuperscript{131} As previously noted throughout the first two chapters, attachment theory knowledge is primarily based on understandings and observations coming from the West; there exists a plethora of insights emerging from the unique context of the Philippines in general and more specifically in an institutional orphan care setting. Therefore, this researcher selected to engage this inquiry using a GMT approach informed by Corbin and Strauss. This researcher’s central research question, which served as an open and flexible guide, was: \textit{what is the nature of relationships between children and caregivers in a residential care setting?} As stated previously, the researcher kept an open stance that allowed a culturally grounded theory to emerge, and the researcher attended to multiple dynamics, including:

1) How do the caregivers connect to and relate to the children at Orphanage Q?
   a. What characteristics describe these connections or lack thereof?
   b. How do the children respond?
   c. Are there children who respond uniquely?


d. What factors might account for these unique responses?

2) How do the children initiate connections to the caregivers at Orphanage Q?
   a. What characteristics describe these connections or lack thereof?
   b. How do the caregivers respond?
   c. Are there caregivers who respond uniquely?
   d. What factors might account for these unique responses?

3) What other relationships exist at Orphanage Q
   a. Do other staff members make connections with the children?
   b. How do the children respond?
   c. Are there children who respond uniquely?
   d. What factors might account for these unique responses?

4) How do the children initiate connections with other staff members at Orphanage Q?
   a. How do the staff members respond?
   b. Are their staff members who respond uniquely?
   c. What factors might account for these unique responses?

5) Have caregivers experienced attachment and the growth of love at Orphanage Q?
   a. Have caregivers experienced attachment with a child?
   b. What does this look like?
   c. What factors might account for this growth of love?
   d. Has a child expressed attachment with caregivers?
   e. What does this look like?
f. What factors might account for this growth of love?

6) Are there children lacking attachment and the growth of love at Orphanage Q?

a. What does this look like?

b. What factors might account for these children’s lack of attachment?

Additional research curiosities abound. Are there cultural factors that uniquely shape these relationships? What other adult-to-child relationships are observed within Orphanage Q? Specifically, how do Orphanage Q’s staff connect with the children in their care? Are attachment needs being met? What behaviors foster relationships? What behaviors hinder connection? What role does past trauma play in these relationships? Does the potential for the growth of love relate to the temperament of the child? Does the potential for the growth of love relate to the temperament of the staff? Or the combination, or goodness-of-fit\(^{132}\) of the two? If the “Mama figures” are intended to act as anchors of sorts, bringing the pieces of disjointed and damaged hearts together again, what evidence can be observed that the glue of security is holding children and mamas together? Is there a difference observed in the relationships of new arrivals as compared to long-term residents? How do the children’s behaviors, words, and drawings convey their perceptions and practices? How do the caregiver’s behaviors, words, and drawings convey their perceptions and practices? How would answers to these questions inform this research?

Method of Study – Qualitative Approach

This study explored the unique relationships between children and care-givers and meant to provide a detailed, thick-description account of multiple interactions between children and their caregivers (as well as others present) within one orphanage whose stated goal is the therapeutic care of extremely vulnerable children-at-risk, as well as their eventual placement and transition into permanent adoptive homes. Observation logs of these children, their caregivers, and each group’s own narrative of attachment were primary units of study. With this as its end goal, a qualitative approach is the one that best suited the context. The researcher’s intent was for the research design to be responsive to a complex set of participants in a dynamic setting with multiple viewpoints and perspectives. This researcher took her initial curiosities and questions mentioned previously into her study of Orphanage Q. In response to the unique context, this researcher made additional discoveries through documentation of what was observed and experienced further directing the research decisions that followed.

Grounded Theory Method (GTM)

As previously stated, this researcher selected the GTM in the present exploration. “The grounded theory approach is a qualitative research method that uses a systematic set of procedures to develop an inductively derived grounded theory about a phenomenon.”\(^{133}\) This process involves using multiple stages of data collection and the

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refinement and interrelationships of categories of information. Rather than using literature sources as means to identifying variables to be studied in a controlled environment and formulating a hypothesis to be tested by a researcher who remains set apart from the variables being tested, grounded theory investigates a phenomenon within the real world without preconceived ideas or hypothesis. This researcher used GTM in order to generate a culturally-contextualized understanding of relationships within a unique residential care setting in the Philippines. “The focus of GTM is uncovering basic social processes… and is ideal for exploring integral social relationships and the behavior of groups where there has been little exploration of the contextual factors that affect individual’s lives.”

The research design was carried out in a context which serves a marginalized group of children and youth in residential care and will include their caregivers who work in Orphanage Q. This researcher used the constant comparative method to develop concepts from the data by collecting and analyzing the data at the same time. The constant comparative method “combines systematic data collection, coding, and analysis with theoretical sampling in order to generate theory that is integrated, close to the data,

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and expressed in a form clear enough for further testing.”\textsuperscript{138} This data included what was noted in all observations and interviews. All this input impacted the key instrument of this study, that is, the researcher herself.\textsuperscript{139} As informants taught the researcher, the \textit{learner}, rather than the “know-it-all,”\textsuperscript{140} about concepts, experiences and perceptions related to their understanding of attachment and the growth of love, the eyes of the researcher and the resulting ongoing data analysis was better fashioned to articulate unique findings along the way. This emergent approach is central to a grounded theory method of study. Lofeland notes the profound journey this provided the researcher as a learner:

\begin{quote}
Naturalistic research is first and foremost emergent. Today’s solutions may become tomorrow’s problems; tomorrow’s problems may provide special research opportunities the day after. ‘Who’ you are at the beginning of the research is not necessarily the same ‘who’ that will emerge at the end… This emergent character is what gives ‘being in the field’ its edge, its complexity, its vigor, and, for many people, its excitement; it is also what necessitates flexibility on the part of the investigator.\textsuperscript{141}
\end{quote}

This flexibility provided challenges and a need for discernment. As Merriam suggests, “Although rich, thick description and analysis of a phenomenon may be desired, a researcher may not have the time or money to devote to such an

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\textsuperscript{139} Sharan B. Merriam, \textit{Qualitative Research: A Guide to Design and Implementation} (San Francisco: Jossey-Bass, 2009), 14: “The following four characteristics are identified by most as key to understanding the nature of qualitative research: the focus is on process, understanding, and meaning; the researcher is the primary instrument of data collection and analysis; the process is inductive; and the product is richly descriptive.”
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\textsuperscript{140} John Lofland et al., \textit{Analyzing Social Settings, A Guide to Qualitative Observation and Analysis}, 4th Ed. (Belmont: Thompson-Wadsworth, 2006), 46: “…one tried-and-true strategy for getting along in the field is to adopt a ‘learner’ or even ‘incompetent’ role. Since you are seeking to learn, it makes sense to act accordingly; the know-it-all or expert is not likely to be ‘taught.’”
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\textsuperscript{141} Lofland et al, \textit{Analyzing Social Settings}, 32.
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undertaking…The amount of description, analysis, or summary material is up to the investigator.”¹⁴² Even more, the researcher needed to continually evaluate decisions in light of new insights and data, considering further changes as necessary. As Yin states, “[W]hen you have arrived at a definition of the unit of analysis, do not consider closure permanent. Your choice of the unit of analysis, as with other facets of your research design, can be revisited as a result of discoveries arising during your data collection.”¹⁴³ This flexibility required the researcher to be self-aware and reflexive: Although grounded theory provides a structured and systematic process of analysis, all grounded theory research needs to establish credibility. In particular, it is important for the grounded theory researcher to recognize, first, that data do not stand alone and second, an emergent analysis can take various forms which may or may not be dependent on what the researchers consider as credible data. These two aspects suggest that the collection and understanding of data are not unidimensional and that understanding of data may be framed by researcher presuppositions about what is to be collected and how this is to be done.¹⁴⁴

Engward and Davis examine the ways in which the model of Alvesson and Skolberg¹⁴⁵ creates potential for a more robust and substantive grounded theory. This includes being mindful of data collection or problematizing collected empirical material; data analysis or engagement with the interpretive act, interpreting the role of context or clarification of the political-ideological context, and lastly, research communication, and


writing or consideration of questions of representation and authority. The researcher’s commitment to the role of validity is further accounted for in an exploration of the trustworthiness of data in this grounded theory study.

It was with a commitment to openness and ongoing learning that this study’s tentative research model was designed. This design is understood to be flexible and dynamic. This researcher’s curiosities and inquiries influenced the data collected and vice versa. Additional themes, objectives, and design decisions that dynamically corresponded to those future developments were anticipated. The arrows in Figure 3, at the end of this GTM overview, suggest a cyclical movement as changes and discoveries are made.

Grounded theorists are interested in the ways in which human actors negotiate and manage social situations, and how their actions contribute to the unfolding of social processes. Grounded theory assumes that social events and processes have an objective reality in the sense that they take place irrespective of the researcher and that they can be observed and documented by the researcher. This suggests a realist ontology. However, grounded theory also assumes that social realities are negotiated by human actors and that participants’ interpretations of events shape their consequences. Here, grounded theory subscribes to a symbolic interactionist perspective. This means that ‘the world’ that is studied by grounded theorists is very much a product of human participation and negotiation. It is a changing world, which means that the methods used for studying it must be sensitive to its dynamic properties. This is what grounded theory attempts to do by focusing on ‘process’ and ‘change’.

Essential to this dynamic process is the work of coding. Coding allowed for the flood of data, in all its dynamism, to be described, documented, and better understood.

“By constructing categories and establishing their relation to one another, distinctions can


147 Trustworthiness of data and the role of validity is explored on page 83 of this chapter.

be made between context, causal conditions, intervening conditions, strategies and consequences." Vital connections surface. The researcher worked to use theoretical sensitivity so that the perceptions, ideations, and theoretical concepts that potentially connected to the researcher’s perspective were also noted as additional data. The researcher was not meant to disregard these influences; instead, they were noted and written about in GTM memos and reflections and re-visited during different stages of analysis. Alternatively, existing theory that was recognized as inadequate for attempting to describe, understand, and conceptualize a phenomenon being studied allowed for the emergence of new theoretical concepts to be generated, like scaffolding constructed alongside, extending existing attachment theory constructs.

The decision made regarding emergent categories is at the root a philosophical one. It included choices about how knowledge is created or meaning is inferred. The paradigm or coding axis used by the researcher could not help but relate to some overarching construct of meaning, such as the sociological concepts of action and reaction within social action theory. These concepts were available to the researcher as part of a whole, which is a particular field of study or a cultural perspective. Udo states that those researchers “who want to employ macro-sociological and system theory perspective may feel that the use of the coding paradigm would lead them astray.”


this point, this researcher examined how even a theory as strong as attachment theory may have categories that provide longstanding insight on a micro-sociological level but may have gaps in its examination of macro-sociological and system theory perspectives. As means of further examination the GTM observation, coding, and emergent theoretical data characterized this study as visible in Figure 3.

![Grounded Theory Diagram]

**Figure 3. Grounded Theory Approach**

**Treatment of the Research Process**

This qualitative approach required the researcher to respond to the data less like a machine that needs systematic attention and statistical analysis and more like an organism needing ongoing interaction, assessment, and support. Furthermore, the grounded theory approach required that constant-comparative strategies were taking place at all times, from beginning to the end. Constant comparative methodology incorporates four stages: “(1) comparing incidents applicable to each category, (2) integrating categories and their
properties, (3) delimiting the theory, and (4) writing the theory.” Throughout the four stages of the constant comparative method, the researcher continually sorted through the data collection, analyzed, and coded the information, and reinforced theory generation through the process of theoretical sampling.

This required transparency and reflexivity in admitting that even as decisions were made about field site, location of observations, and sampling choices, analysis was already occurring. With this said, the researcher periodically asked in more direct ways, “Why does what I see matter?” Upon analytical reflections in the past and projections for the future, the researcher looked for patterns, groups, and means of organizations. This process of coding was documented and is articulated in Chapter 4. Data that supported coded categories were added to like kind. Those that were divergent and contradictory created their own differing code categories. It was the researcher’s commitment to emergent findings that lay the groundwork for a theory, truly grounded, or birthed from the interconnected process of ongoing data collection and analysis.

### Selection of Research Site

According to Patton,\(^{153}\) purposeful sampling strategies characterize qualitative investigations. The power of purposeful sampling lies in selecting *information-rich cases*: cases whose in-depth study illuminates the questions under consideration. This includes identifying and selecting groups of individuals and/or contexts that are especially

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knowledgeable about or experienced with the phenomenon of interest.\textsuperscript{154} This strategy is consistent with theoretical sampling, discussed below in Selection of Research Participants, which is a sampling strategy that is based on theoretically relevant constructs. It enables the researcher to select participants that maximize the potential to discover as many dimensions and conditions related to the phenomenon as possible.\textsuperscript{155}

The research problem statement which governed this researcher’s initial inquiries in Orphanage Q was, “What is the nature of relationships between children and caregivers in a residential care setting?” Orphanage Q’s intentional focus on building attachment rich relationships provided an information-rich environment in which to explore the child-caregiver relationship in a Filipino context. Orphanage Q is a residential care facility in Metro-Manila, Philippines that serves children who have experienced maltreatment, abandonment, neglect, or, alternatively, may have health and survival needs that their existing caregivers are ill-equipped or unwilling to handle. Orphanage Q’s promotion and donor materials, such as the organization’s online 2015 annual report, Appendix A, states clearly their intentions to provide healing and care tailored to these children’s needs. Their annual report document heralds their vision statement that reads: “To be a center for rescue and healing of children in crisis.” Their mission statement clearly states, “To provide family-centered care and hope for children who have experienced trauma.” Finally, their goal mandates: “To bring holistic intervention for


every child in our care.” Orphanage Q’s director stated in her own research (and practice) her belief that caregivers, working with a team of social workers, in a residential care setting can promote attachment:

> Caregivers promote attachment by implementing observable and intentional attachment promoting behavior, adopting the treatment plan given to them by the social workers and implementing it consistently throughout the child’s stay in the institution, and by engaging in regular and consistent communication with the social worker via personal and group discussions, and constant reassessment of each individual child’s progress.”

Orphanage Q’s stated commitment to allowing attachment needs to influence the design of its programs makes it an ideal site to observe relationships.

Orphanage Q’s director explores in her own graduate research thesis the importance of attachment and the potential to meet initial attachment needs within an orphanage like hers. She defines a child’s engagement in reciprocal relationships of love and security as foundational. She believes this foundation can be built, against all odds, in the middle of a Filipino residential care facility. This makes this research cite an ideal place for this GTM study. Furthermore, her own thesis research cites the importance of more studies being done in residential care settings like Orphanage Q. She writes of her own study exploring the attachment phenomenon:

> Likewise, this study will be an addition to the seemingly small amount of research done in this area of practice within the Philippines. There is little research done on the uniqueness of the culture and the inherent caregiving style that affects the Filipino child that is institutionalized… It is essential, therefore, to document this life changing process of successfully helping these children. More research needs to be done on the seemingly miraculous recovery that many of the children have

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156 [Director Q], “2015 Accomplishment Report: There is Hope in Love,” Quezon, PH: [Orphanage Q], 2015, accessed June 17, 2016. [Website anonymous]

already made and on the general care of the children in the institutional setting within the Philippine culture.\textsuperscript{158}

Selection of Research Participants

Data collection of grounded theory is directed by \textit{theoretical sampling}, which means that the sampling is based on theoretically relevant constructs. It enables the researcher to select participants that maximize the potential to discover as many dimensions and conditions related to the phenomenon as possible.\textsuperscript{159} This process includes coding, comparing, and accumulating data to form initial “categories and core categories, an on-going process” that targets new data as the previously acquired data sample directs. “The aim is to systematically select new participants or data which will guide the researcher to select data samples which are most salient for the research being undertaken.”\textsuperscript{160} All data collection is done with the intent to form new theory or add constructively to existing theory. Throughout the study, the sampling focus is meant to look at those participants with both similarities and differences to reinforce emerging categories and to promote the creation of new categories of meaning that differ from those already created.

The researcher engaged in weekly observation sessions, from the end of November 2016—the end of February 2017. Resulting in seventy-five hours spent at Orphanage Q. Most often, these visits took place on Mondays, mid-morning through the


afternoon. The regularity and uniformity of this researcher’s demeanor, mode of dress, and consistent visitation allowed for increased rapport and access to participants. It also encouraged the validity of research regarding routine care observed and documented. These layers of consistency in visits even allowed for the researcher to notice patterns and sometimes accurately anticipate the expected behaviors of participants.

Over time, the researcher was intentional about viewing diverse portions of the building whenever it seemed that some level of theoretical saturation had occurred with a group or part of the day’s routine. The month of March 2016 included visits where observation was made on alternative days and at differing hours of the day and night. The researcher hoped to watch for experiences and interactions not yet accounted for in the Monday morning and afternoon visits.

Selecting Participants for Observation

In initial observations, the researcher utilized general census sampling. Instead of focusing on certain children with certain characteristics, the researcher maintained an open stance towards all one hundred and twenty children and youth in care and all sixty-plus staff. This allowed for the research to convey the big picture. The overall environment, the complex, in-depth interaction of all those present, and the diverse child cases within those interactions were all potentially a part of the general census sampling observations.

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161 B. Glaser, *Theoretical Sensitivity* (Mill Valley, CA: The Sociology Press, 1978). Theoretical saturation is a GTM goal for the researcher as the emerging theory is tested and there is reduced additional data identified. However, due to the researcher’s limited time available in this study, saturation was admittedly never truly achieved, as more data, no doubt, could still be collected and tested with further investigation.
As data was collected, recorded, and analyzed, the researcher acted responsively, deciding on categories of what she was seeing related to the environment and the participants. Descriptive categories were coded for themes that further defined the caregiver-to-child relationships as well as other social phenomenon related to the relationships in Orphanage Q. These codes, though initially open and flexible, with time included axial coding, as Corbin and Strauss\(^{162}\) suggest. Or as Glaser suggests, this process moved initial observation coding categories from descriptive to conceptual\(^{163}\) as the data directed overarching themes and patterns deemed pertinent to this GTM study.

The researcher’s visits were spent observing children aged 3 months to 15 years, in morning, lunch, and afternoon routines. Children and youth attending school off-campus were only available for observation and engagement during non-school hours. They were required to finish breakfast by 6:00am in order to have time for their commute and they daily returned to Orphanage Q at approximately 2:00pm. Those children that attend the on-site home school program were available for observation and engagement every day of the week. The visits that took place during alternative hours in March allowed for the sampling of children and youth to once again be enlarged.

Initially, time was spent sitting alongside children engaged in art activities, clean-up, intermittent self-care supported by the primary caregivers, as well as meals and outdoor play. During the month of December there were daily parties put on by visiting

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\(^{163}\) B. Glaser and A. Strauss, *The Discovery of Grounded Theory: Strategies for Qualitative Research* (New York, NY: Aldine de Gruyter, 1967). There is considerable debate over the coding process as defined by the original GTM writings of Glaser and Strauss and later Glaser, and that GTM writings of Corbin and Strauss.
donors from Filipino companies and organizations. This meant that it took longer for the researcher to identify what was a normal routine for the rest of the year. However, this also provided dynamic interactions for documentation.

Of priority during the initial stage of observation was simply the building of rapport and trust with both children and staff in Orphanage Q. Experimentation with observer stance was important. Both a posture of participant observation and that of non-participant observation had its rewards and its challenges. Some children were quick to bring the researcher toys and sit pressed against her. The orphanage has a child protection policy that does not allow children to sit on the laps of volunteers or engage in frontal hugs with strangers. It was especially important that the researcher appropriately engage the children’s attention, yet, make sure not to reject or push away the children when they found the researcher’s presence novel. It was noted that the children with special needs, as well as those with more assertive personalities sometimes needed re-direction as means of respect for their wellbeing and this policy. Negotiating this was a bit of a dance but with time a somewhat mutual set of relational expectations arose between the researcher and the children.

It was also noted that some children seemed to engage the researcher with curiosity and smiles but were watchful and took their time to build a connection. These children sought out the researcher in their own time and showed preference to the researcher as someone novel in the environment but respected spatial boundaries. Most of the children called the researcher by name cheerfully when visits occurred. It was also noted that late in the researcher’s time at Orphanage Q there were new children who had
yet to adjust to the relationships and community. Their behaviors were markedly uninhibited around the researcher as later discussed in an analysis of divergent cases.

The caregivers, alternatively, seemed to naturally give the researcher plenty of space. It seemed they did not want to get in the way of what was being studied. This meant that there was more time to watch for child-to-child interaction until further rapport was built. When it seemed that the caregivers’ shyness and tendency to avoid the researcher was impacting the collection of data on both caregiver-to-child interactions and child-to-caregiver interactions, the researcher was encouraged by her advisor, Dr. Nicholas, to explain to a couple of the primary caregivers that she was “here to see how you connect with the children” and to verbally express a desire to “learn from you and what you do with the children in your care.”

This invitation to the caregivers to be the “experts” in the field seemed to positively impact the role that power played in the researcher’s presence. Rather than being viewed as someone taking notes to test or to challenge, it was if the researcher was viewed as a student with caregivers taking time to explain things to the researcher and ask if there were any questions. This occurred despite the researcher being a Caucasian foreigner, at times nearly twice the age of those caregivers she observed. This seemed to set staff persons more at ease and provide a seemingly more relaxed level of everyday connection with the children for the researcher to view.

To aide this development, the researcher often chose a non-participant stance, sometimes switching into a moderate participant stance. The researcher noted that if she sat near the children’s play, on the children’s level with smiles and a playful nature, but recorded notes about what she was seeing, she had only occasional invitations to
participate in moderate levels of play. As the researcher became less novel, though
greeted happily by name, the children would instead seek the regular attention of their
primary caregivers and peers, in both play and in meeting their needs.

Though the researcher is grateful for the second stage of observation, during
which the caregivers seemed to exhibit more typical, relational exchanges, it was during
the first stage of social awkwardness that it became clearer to the researcher the breadth
of relationships existing within residential care. Social workers, home school teachers, as
well as support staff all moved through their routines and interacted with the children.
The support staff included cleaners, kitchen staff, admin staff, and groundskeepers. The
researcher noted that the temptation to focus most on caregiver-to-child interaction may
provide a bias that could potentially hinder her observation of, and interaction with, an
environment more dynamic then originally considered.

A second phase of theoretical sampling of children and caregivers allowed the
researcher to zoom the lens in for a closer view of the preschool and elementary aged
girls and boys from three bedrooms. More extensive time was spent shadowing these
caregivers. Code names were utilized for these staff people. For confidentiality sake, they
are referred to as W1, W3, W4, and W5. These observations focused more closely on the
care and connections existing between these four caregivers and forty children. This
allowed for layers of rapport and trust to be built. The children anticipated the
researcher’s presence and a tentative routine of sorts was established. This time more
specifically allowed the researcher to spend intermittent time in the preschool girls’
bedroom for circle times, clean-up, free time, care routines, and later, the nighttime and
bedtime routine. The latter preschool sampling group included caregivers W4 and W5
alongside girls who care for preschool age and/or children at a preschool level of development.

Selecting Participants for Interviews

Consistent with the theoretical sampling process, insight gained during the observation phase of research was used to inform the initial sampling decisions for the caregiver interviews and child art experiences, which were later used as interviews. Demographic details outlining areas of similarity and diversity among participants were noted, as well as the coding themes that resulted in words spoken, behaviors observed, and the details of individual OVC stories and caregiving actions and reflections. Allowing for observations and interviews to take place in various locations in the center, at differing times and in various care-moments, ensured the data was truer to the depiction of attachment in Orphanage Q.

More important than the actual number included in the theoretical sampling is a commitment to describe why the sampling decisions were made in a manner responsive to the data collected. “The validity, meaningfulness, and insights generated from qualitative inquiry have more to do with the information-richness of the cases selected and the observational/analytical capabilities of the researcher than with sample size.”164 Through field observations it became clear that the support staff at the orphanage played an important role in the broader environment as they regularly interacted with children and caregivers as well as supported the routines and structures the children experienced at Orphanage Q. Sampling additional viewpoints from the study’s support people allowed for more adequate evaluation of the sampling’s size adequacy. “What is crucial is that the

sampling procedures and decisions be fully described, explained, and justified so that information users and peer reviewers have the appropriate context for judging the sample.”

Of the more than sixty staff members working in a variety of roles at Orphanage Q, the researcher more closely observed thirty staff members, Table 1, Observation Sampling. This included both those who provide direct care and alternatively, those who do support staff responsibilities. The researcher used name codes to protect the confidentiality of participants under observation. The confidentiality coding system can be understood: “W” signifying women or female staff, “M” signifying men or male staff, and confidential identifiers consisting of Arabic numerals given to each staff person.

Table 1 Orphanage Staff—Observation Sampling

<table>
<thead>
<tr>
<th>Position</th>
<th>Code Name</th>
<th>Gender of Children</th>
<th>Age Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Women or Men</td>
<td>Girls or Boys</td>
<td></td>
</tr>
<tr>
<td>Primary Caregiver</td>
<td>W1</td>
<td>B</td>
<td>6-14 years</td>
</tr>
<tr>
<td></td>
<td>W3</td>
<td>G</td>
<td>6-14 years</td>
</tr>
<tr>
<td></td>
<td>W4</td>
<td>G</td>
<td>4-9 years</td>
</tr>
<tr>
<td></td>
<td>W7</td>
<td>B and G</td>
<td>2-4 years</td>
</tr>
<tr>
<td></td>
<td>W9</td>
<td>B</td>
<td>3 mos.-1yr</td>
</tr>
<tr>
<td>Secondary Caregiver</td>
<td>W2</td>
<td>B</td>
<td>6-14 years</td>
</tr>
<tr>
<td></td>
<td>W5</td>
<td>G</td>
<td>4-9 years</td>
</tr>
<tr>
<td></td>
<td>W6</td>
<td>B and G</td>
<td>2-4 years</td>
</tr>
<tr>
<td></td>
<td>W8</td>
<td>B and G</td>
<td>2-4 years</td>
</tr>
<tr>
<td></td>
<td>W10</td>
<td>B</td>
<td>3 mos.-1yr</td>
</tr>
<tr>
<td></td>
<td>W23</td>
<td>B and G</td>
<td>2-4 years</td>
</tr>
<tr>
<td></td>
<td>M4</td>
<td>B</td>
<td>6-14 years</td>
</tr>
<tr>
<td>Additional Staff</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>W11</td>
<td>Medical Clinic Caregiver</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W12</td>
<td>Special Needs Caregiver*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W13</td>
<td>Home School Teacher</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W14</td>
<td>Early Shift Cook</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W15</td>
<td>Support Staff/Cleaner*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W16</td>
<td>Support Staff/Cleaner*</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W17</td>
<td>Older girl/orphan (mistaken as staff)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W18</td>
<td>Head Caregiver</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W19</td>
<td>Social Worker</td>
<td></td>
</tr>
</tbody>
</table>

Some staff were noted as deaf staff and communicated in sign language. Orphanage Q provides all staff and children ongoing sign language training so sign language, in addition to the English and Tagalog languages, is spoken to some degree by all communicative children/staff.

The theoretical sampling of staff prompted weeks and months of observations. After this data was collected and analyzed in a constant comparative fashion, the emergent findings resulted in the next phase of weekly semi-structured interviews, on Mondays, throughout February 2017. This included a diverse sampling of staff people responsive to the emerging observation data. The researcher wanted to seek input from additional staff with differing roles, including caregivers, social workers, coordinators, and the executive director. Increasing the diversity of perspectives allowed the researcher to test the patterns already observed and seek further clarification on relationships she documented in the categories or units of meaning. The sampling selection is made visible in Table 2, Interview Sampling. Of the more than thirty staff members working in a variety of roles at Orphanage Q, the researcher interviewed twelve staff including both those who provided direct care and alternatively, those who carried out support staff responsibilities.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>W20</td>
<td>Child Development Coordinator</td>
</tr>
<tr>
<td>W21</td>
<td>Home School Coordinator</td>
</tr>
<tr>
<td>W22</td>
<td>Director Q</td>
</tr>
<tr>
<td>M1</td>
<td>Guard/Vehicle Attendant</td>
</tr>
<tr>
<td>M2</td>
<td>Social Worker</td>
</tr>
<tr>
<td>M3</td>
<td>Sign Language Teacher*</td>
</tr>
<tr>
<td>M5</td>
<td>Older Orphan/Support Staff/Volunteer</td>
</tr>
<tr>
<td>M6</td>
<td>Support Staff*</td>
</tr>
<tr>
<td>M7</td>
<td>Health Clinic Patient/Turned Secondary Guard</td>
</tr>
</tbody>
</table>

*Some staff were noted as deaf staff and communicated in sign language. Orphanage Q provides all staff and children ongoing sign language training so sign language, in addition to the English and Tagalog languages, is spoken to some degree by all communicative children/staff.

**Table 2 Orphanage Staff—Interview Sampling**
Selecting Participants for Art Experiences

Art experiences were also a part of the member check process for the primary, secondary, and head caregiver(s). Staff that participated in both interviews and member checks, “MC,” are represented in both Table 2 and Table 3. Member checks allowed for the researcher to increase the validity of the research. Participants were given opportunity to view their transcribed words and confirm or make needed adjustments in what it was they most desired to express to the researcher. The gender of staff, using “W” for women and “M” for men, and age of staff person is noted. The gender and age of children in their care, and length of staff employment are also noted. Table 3 shows which staff participated in art experiences in the follow up member check meetings.

<table>
<thead>
<tr>
<th>Position</th>
<th>Code</th>
<th>Name</th>
<th>Age</th>
<th>Gender of Children</th>
<th>Age Group</th>
<th>Length of Employment</th>
<th>Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Caregiver</td>
<td>W1</td>
<td>20</td>
<td>B</td>
<td>6-14 years</td>
<td>18 months</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W3</td>
<td>31</td>
<td>G</td>
<td>6-14 years</td>
<td>9 months</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W4</td>
<td>20</td>
<td>G</td>
<td>4-9 years</td>
<td>3 years</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W9</td>
<td>35</td>
<td>B</td>
<td>3 mos.-1yr</td>
<td>6 months</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W5</td>
<td>38</td>
<td>G</td>
<td>4-9 years</td>
<td>2 years</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Additional Staff</td>
<td>W11</td>
<td>50</td>
<td></td>
<td>Medical Clinic Caregiver</td>
<td>10 years</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W14</td>
<td>22</td>
<td></td>
<td>Early Shift Cook</td>
<td>6 years</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>W18</td>
<td>22</td>
<td></td>
<td>Head Caregiver</td>
<td>4 years</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W20</td>
<td>26</td>
<td></td>
<td>Child Development Coordinator</td>
<td>5 years</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W21</td>
<td>26</td>
<td></td>
<td>Home School Coordinator</td>
<td>1 year</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>W22</td>
<td>45</td>
<td></td>
<td>Director Q</td>
<td>15 years</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>M2</td>
<td>22</td>
<td></td>
<td>Social Worker</td>
<td>2 years</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Table 3 Orphanage Staff—Art Sampling
During the researcher’s general census sampling in the first phases of child observation, she chose to conduct observation for part of each weekly visit downstairs in the common play area where children often engaged in free play or guided time with art materials. This allowed for observation of caregivers and children moving in and out of the infant room, the toddler room, the preschool room as well as the regular flow of older boys and girls coming from their rooms down the hall. At any given moment, the researcher was surrounded by 10-30 children and 2-8 caregivers, as well as 2-8 support staff passing through. Sometimes children would sit alongside the researcher and ask to use pen and paper for drawing. This, too, was general census in its open stance towards whomever chose to draw. This set the stage for art experiences that took place in the later phase of engagement with the children at Orphanage Q.

Selecting Child Participants—A Closer Look

Charts and tables allowed for the researcher to make better sense of the complex mix of children and youth, coded by age-group, as well as the various areas of Orphanage

<table>
<thead>
<tr>
<th>Position</th>
<th>Code Name or Men</th>
<th>Age</th>
<th>Gender of Children in their Care</th>
<th>Age Group</th>
<th>Length of Employment</th>
<th>Art</th>
<th>MC*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Caregivers</td>
<td>W1 20 B</td>
<td>6-14 years</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>W3 31 G</td>
<td>6-14 years</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>W4 20 G</td>
<td>4-9 years</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>W9 35 B</td>
<td>3 months-1yr</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secondary Caregiver</td>
<td>W5 38 G</td>
<td>4-9 years</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical Caregiver</td>
<td>W11 50 B and G</td>
<td>6 months-4 years</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Head Caregiver</td>
<td>W18 22 B and G</td>
<td>3 months-teen</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Q in which the children and youth reside. The case files of each child living in Orphanage Q describes their multi-floored facility this way [brackets inserted by researcher]:

[Orphanage Q] is a four-story building houses all the programs of [Orphanage Q] with approximately 800 square meters if usable space at [anonymous address] It houses [approximately] ninety (90) children between the ages of 0 and 15 … [Total number of children and youth in their care is now approximately 120] The first floor has a kitchen and eating area, two nurseries, a separate bedroom for toddlers (ages 2-4), preschoolers (ages 4-6), and three rooms for Big Kids (ages 7-12), boys and girls respectively. The 2nd floor houses the Big Boys room, a classroom, two administration offices, a conference room, a medical wing and pharmacy, and quarters for older male scholars and volunteers. The 3rd floor is a multipurpose room used for classes, workshops, and extracurricular activities. It also houses the adoption suite, the older girl’s room, the livelihood room, the office of the Executive Director and a small bakery. The 4th floor houses a rooftop half-basketball court and the home of the Executive Director and her family…”

When the children flowing in and out of observation over many weeks are considered, as well the art experiences later discussed, all together the sampling of children and youth climbs to 100 of the 120 children at Orphanage Q. A detailed description of all children observed are outline with extensive name coding in Appendix B. This appendix uses codes to ensure additional confidentiality. The codes describe children in the samplings as “G” signifying girl, “B” signifying boy, “I” for infant child, “T” for toddler child, “P” for preschool child. The “U” code signifies child or youth living upstairs away from the main lower floor rooms where many of the observations took place. “M” signifies children staying in the medical clinic for medical monitoring and/or palliative care. These codes are coupled with “B” or “G” to further identify gender. This serves as help in noting child age or their location in Orphanage Q. It is noted that sometimes this grouping refers to physical age and sometimes developmental

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166 Anonymous, Confidential Orphanage Q Case Study Report, 17.
age in the case of global developmental delays. Table 4 below aggregates and integrates this information in a simplified format using columns and rows in place of these codes.

Table 4 Child Participant General Census Sampling Chart

<table>
<thead>
<tr>
<th>Room Category</th>
<th>Age Range</th>
<th>Number in Care*</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants and Toddlers</td>
<td>1-3 years</td>
<td>1</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Medical Palliative Care</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Infants</td>
<td>3 months-1 year</td>
<td>8</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Toddlers</td>
<td>3-4 years</td>
<td>10</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Preschool</td>
<td>4-8 years</td>
<td>3**</td>
<td>14**</td>
<td></td>
</tr>
<tr>
<td>Elementary</td>
<td>6-12 years</td>
<td>21</td>
<td>21</td>
<td></td>
</tr>
<tr>
<td>Teen</td>
<td>13-15</td>
<td>5</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

*Additional children in foster care upstairs included in total orphanage number but not all were observed. Therefore, most but not all of Orphanage Q’s children and youth are in this table.

**The preschool age identification is not as clear as only a preschool girls room exists and the girls in that room are either 1) preschool age, 2) developmentally at preschool age with global delays, or 3) part of a sibling set. The preschool boys are either 1) receiving care upstairs with a primary caregiver, due to trauma-specific special needs or 2) integrated in the elementary room due to sibling sets.

The summarized and aggregated description of the forty children include in the theoretical child sampling is visually presented in Table 5. This includes the modal age, or most frequent age upon arrival, the mean or average age at arrival, and the modal or most frequent length of stay (thus far) at Orphanage Q for this sampling.

Table 5 Theoretical Sampling of 40 Child Participants Demographics

<table>
<thead>
<tr>
<th>Child Sampling</th>
<th>Modal** Age at Arrival to Orphanage Q</th>
<th>Mean Age at Arrival to Orphanage Q</th>
<th>Modal** Length of Time Living at Orphanage Q</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls 20*</td>
<td>4</td>
<td>4.65</td>
<td>2 years</td>
</tr>
<tr>
<td>Boys 14</td>
<td>4 years, 6 years</td>
<td>5.14</td>
<td>3 years</td>
</tr>
</tbody>
</table>

*Girls with ages unknown at arrival and unknown at present time = 6 girls
**Modal Age = Most frequently occurring age

Once semi-structured art experiences began to take place among the children at Orphanage Q, as further discussed in Art and Art Materials below, the researcher wanted the theoretical sampling to intentionally include older youth who had not yet had the
opportunity to participate. For this reason, a somewhat stratified group of children and youth from various age levels was invited to participate. The increased variety in age moved the sampling from 40 children to 50 children and youth discussed seen in Table 6.

**Table 6 Theoretical Sampling—Increased to 50 Children and Youth***

<table>
<thead>
<tr>
<th>Child Age Groups/Rooms</th>
<th>Boys</th>
<th>Girls</th>
<th>Observed</th>
<th>Art Experience (Interview) Boy/Girl</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant</td>
<td>8</td>
<td>0</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Preschool</td>
<td>3</td>
<td>8</td>
<td>11</td>
<td>0 6</td>
</tr>
<tr>
<td>Elementary</td>
<td>16</td>
<td>9</td>
<td>25</td>
<td>10 15</td>
</tr>
<tr>
<td>Teen**</td>
<td>1*</td>
<td>5*</td>
<td>1</td>
<td>1 5</td>
</tr>
<tr>
<td>Total</td>
<td>28</td>
<td>22</td>
<td>45</td>
<td>37</td>
</tr>
</tbody>
</table>

**The sampling increased to 50 children upon art experiences as teens were included at alternative times.**

**One teenage boy is grouped with younger age group in home schooling activities and roster and one teenage girl is grouped in original roster with elementary girls. Thus, there exists a small numerical discrepancy in the data when compared to general census sampling.**

The five main categories for cause of admission into Orphanage Q is outlined in Table 7. This information also pertains to the children’s legal status of guardianship. A much more detailed account of this information is included in Appendix C. Both Table 7 and Appendix C include children as either *foundlings, abandoned, surrendered, terminated in court,* or *long-term.* Children who are *foundlings* have no information about the whereabouts of their parents, families of origin, and/or their medical or residential history. Children classified as *abandoned* have in their files, due to considerable research and effort, some of the information about their families or places of origin have been obtained. Children who have identified parents have either parents that have *surrendered* their parental rights, had their rights *terminated in court,* or have parents that are
considered *long-term* because their cases are still being processed and understood. The latter meaning that they are in the custody and care of Orphanage Q but the status of their case is still undetermined. All or some of these cases in each of these five categories may have also involved some level of abuse, neglect, and/or trauma.

**Table 7**  
Theoretical Sampling of 40—Case Categories

<table>
<thead>
<tr>
<th>Gender</th>
<th>Foundling</th>
<th>Abandoned</th>
<th>Surrendered</th>
<th>Court-terminated</th>
<th>Long-Term Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Girls 26</td>
<td>2</td>
<td>3</td>
<td>15</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Boys 14</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

*Girls case info unknown = 3

The children at Orphanage Q have complex stories of past trauma and loss. Their experiences are part of what makes their participation in this study multifaceted. The researcher intends to honor their incredible pain, resiliency, and strength by including small excerpts of their case files and some of the staff’s descriptions of the children’s families of origin. No doubt many more stories could have been included. The intention is to further describe the dynamic sampling without exploiting their heartbreaking stories. The following describes the conditions in which one sibling set lived prior to arrival at Orphanage Q:

> From the neighbours we learned that the children [aged 1, 2, 3 and 4] were often left alone, without food or drink so the children would [‘take containers from the garbage’] to catch rain water which they would drink and the neighbors, taking pity on them, would give them food, because the children would go for days... The children’s home was dark, airless, and in disarray, with mounds of garbage on the floor, along with dirty diapers and baby bottles, food scraps. There was no furniture except for a small, filthy, stinky couch. The stairs leading to the sala [living room] was steep and littered with trash. The place looked like it was abandoned, as though no one had lived there for a very long time. A concerned citizen called to report neglect and children were rescued.

Orphanage Q Child Confidential Case File
One of the social workers further described the realities of the children’s lives that were in his care during his interview with the researcher. It is included here as means to further describe the participant sampling in this study. He explained, he is someone who knows most of the children’s stories:

**Researcher:** And you said, you know all of them personally? That means you know all of their stories?

**M2:** Yes, I know the majority of them. There’s a hundred of them. But my primary goal every day is to know more about the children here, to know what they experienced before they came, to know what has hurt them, what circumstances they’ve had. It’s really saddening. Every day I read these things in the children’s files and documents. And the children really had no support. The family is like the first support system that the child can have, they MUST have.

**Researcher:** I’m thinking about how you said that, “the support system that a child can have, that they MUST have.” I’ve done a lot of research on this topic and it is really important to me. Can you say more about what you mean, as a social worker for these children-at-risk in the Philippines, what do you mean by saying that this first support system is something they MUST have?

**M2:** Well, I believe in the Philippines we are really family-centered. I don’t know. The family is really the first system the child belongs to. He or she doesn’t have anyone to go to except the family at first. And our children here have, [sigh], really have sad backgrounds. I think without that, if the children here did not come to [Orphanage Q] they would die. They would slowly die. Or they would get killed. Or they would get sent to the mafia, or whatever. The family is really the one that is supposed to be there. But sadly, they are not. Some of the circumstances push the family to do things like drugs, etc.

**Researcher:** I know that it isn’t an easy topic. And I can guess at what you mean by “etc.” But for the sake of my research can you go ahead and explain more about what you mean.

**M2:** Doing drugs, some of the families have mental disabilities, some of them do not stop giving birth, to the point that they have 12 children. Some of them, the parents just literally lost hope. They did not want their children so they tried to abort them, basically, and then the children in the medical wing are examples of that. Some of them did not know that their wives were with another man and now their husband returns and they are forced to throw away the child. The abusive father hurt the mother and the children and they end up on the street. Those kinds of scary things.


**Researcher:** *OK, that helps me.*

**M2:** And some of them are even traffickers of minors. There’s really just one case that bothers me all of 2016 and up until now. The mother really had no identity, no real identity. The children are kind of stuck here and the other child really doesn’t have any formal identity… The categories [of children here] are from the dying, to the abused, to the neglected, to the abandoned.

*Social Worker M2, Feb 27, 2017*

Both the staff and children acted as key players in the relationships under investigation. Over time, a theoretical sampling of Orphanage Q staff was responsively chosen, observed, and interviewed. At the same time, the researcher maintained an openness to other participants as these ‘moving parts’ were orbiting around her at Orphanage Q. Some of the participants’ words during observations or interviews were recorded and analysed on a word by word basis. Their verbatim accounts were collected as data independent from one another and with time patterns of meaning and experience emerged.

**Data Gathering Strategies and Instruments**

The initial visits to Orphanage Q took place in June and September 2016. The following data collection period spanned the months of November 2016 through March 2017. The process involved three primary methods: field observation, semi-structured interviews, and art documentation. The strategies are discussed in detail below. The general flow and timeframes of these three methods are captured in Table 8.
### Table 8 Data Collection Timeline

<table>
<thead>
<tr>
<th>Month</th>
<th>Week</th>
<th>Observations</th>
<th>Interviews</th>
<th>Art</th>
<th>Data Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>June</td>
<td>July 18&lt;sup&gt;th&lt;/sup&gt;</td>
<td>3 hours</td>
<td>Director Q</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>September</td>
<td>Sept 5&lt;sup&gt;th&lt;/sup&gt;</td>
<td>3 hours</td>
<td>Director Q</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pilot Project Nov 24&lt;sup&gt;th&lt;/sup&gt;</td>
<td>2 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Pilot Project Nov 29&lt;sup&gt;th&lt;/sup&gt;</td>
<td>2 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>November</td>
<td>Pilot Project Nov 30&lt;sup&gt;th&lt;/sup&gt;</td>
<td>2 hours</td>
<td>Social Worker</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Nov 28&lt;sup&gt;th&lt;/sup&gt;</td>
<td>5 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>December</td>
<td>Dec. 1&lt;sup&gt;st&lt;/sup&gt;</td>
<td>5 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dec. 5&lt;sup&gt;th&lt;/sup&gt;</td>
<td>4.5 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dec 12&lt;sup&gt;th&lt;/sup&gt;</td>
<td>4.5 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>January</td>
<td>Pilot Project Jan 8&lt;sup&gt;th&lt;/sup&gt;</td>
<td>2 hours</td>
<td>Director T</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jan 9&lt;sup&gt;th&lt;/sup&gt;</td>
<td>4.5 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jan 16&lt;sup&gt;th&lt;/sup&gt;</td>
<td>4.5 hours</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jan 23&lt;sup&gt;rd&lt;/sup&gt;</td>
<td>5 hours</td>
<td>W1, W20</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jan 30&lt;sup&gt;th&lt;/sup&gt;</td>
<td>5 hours</td>
<td>Director Q,</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>February</td>
<td>Feb 6&lt;sup&gt;th&lt;/sup&gt;</td>
<td>5 hours</td>
<td>W3, W11</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Feb 13&lt;sup&gt;th&lt;/sup&gt;</td>
<td>5 hours</td>
<td>W4, W9, W14</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Feb 20&lt;sup&gt;th&lt;/sup&gt;</td>
<td>5 hours</td>
<td>W5, W21</td>
<td>4 children</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Feb 27&lt;sup&gt;th&lt;/sup&gt;</td>
<td>5 hours</td>
<td>M2, W18</td>
<td>3 children</td>
<td>X</td>
</tr>
<tr>
<td>March</td>
<td>March 14&lt;sup&gt;th&lt;/sup&gt;</td>
<td>3 hours</td>
<td>15 children</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>March 15&lt;sup&gt;th&lt;/sup&gt;</td>
<td>3 hours</td>
<td>15+ children</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td></td>
<td>March 20&lt;sup&gt;th&lt;/sup&gt;</td>
<td>3 hours</td>
<td>Member Checks</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>March 28&lt;sup&gt;th&lt;/sup&gt;</td>
<td>6 hours</td>
<td>Member Checks, Staff Art</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Pilot Project Orphanage T</td>
<td>4 visits</td>
<td>8 hours</td>
<td>2</td>
<td>0</td>
<td>X</td>
</tr>
<tr>
<td>TOTAL Orphanage Q</td>
<td>18 visits</td>
<td>75 hours</td>
<td>12</td>
<td>37</td>
<td>X</td>
</tr>
</tbody>
</table>

*March 15<sup>th</sup> included 18 children/youth but three were return children from previous art experiences.

It should be noted that, consistent with grounded theory, the processes of data collection and analysis happened concurrently and informed each other. Although, for clarity, data
collection and data analysis will be discussed separately, the reader should keep in mind that they were highly integrative processes.

Observations and Observation Guide/Field Journal

Marshall and Rossman defined observation as the “systematic description of events, behaviors and artifacts in the social setting chosen for the study.” As an outsider at Orphanage Q, this researcher needed time saturated in the environment, immersed in the everyday rhythm of the day’s routine before making theoretically sensitive decisions on responses to data. Participant observation is a method used for intensive fieldwork in which the researcher is immersed in the culture under study. Observation as a research tool includes the intentional documentation of sights, smells, sounds, and events; recording all that the senses experience while in the context being studied. This includes mindfulness of researcher’s feelings and thoughts as they arise in the field. Patton suggests that a study must, “take the reader into the case situation and experience—a person’s life, a group’s life, or a program’s life.”

According to Spradley, there are differences in the degree of involvement of the researcher when in the field collecting data. A researcher varies in his or her level of


168 Patton, Qualitative Evaluation and Research Methods.


involvement with the people and activities under investigation, ranging from nonparticipation to complete participation.

**Table 9 Types and Degrees of Participant Observation**

<table>
<thead>
<tr>
<th>Type of Participation</th>
<th>Degree of Involvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete</td>
<td>Total</td>
</tr>
<tr>
<td>Active</td>
<td>High</td>
</tr>
<tr>
<td>Moderate</td>
<td>Moderate</td>
</tr>
<tr>
<td>Passive</td>
<td>Low</td>
</tr>
<tr>
<td>Nonparticipation</td>
<td>No Involvement</td>
</tr>
</tbody>
</table>


As is highlighted throughout, the researcher moved from nonparticipation to passive participation and ultimately moderate participation with limited active participation.

For the purposes of this study, the researcher used the elements proposed by Merriam\(^\text{171}\) in documenting experiences in the field, combined with elements deemed critical to this investigation. The specific elements are outlined in Table 10.

**Table 10 Proposed Structure of Engaging in Observations**

<table>
<thead>
<tr>
<th>Aspect of Field Observation</th>
<th>Things to Consider</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Setting</td>
<td>What is the physical environment like? What is the context? What kinds of behavior does the setting promote or prevent?</td>
</tr>
<tr>
<td>The Participants</td>
<td>Describe who is in the scene, how many people there are and what are their roles. What brings these people together? What is allowed here?</td>
</tr>
<tr>
<td>Verbal Behavior and Interactions</td>
<td>Who speaks to whom and for how long? Who initiates interactions? What is the tone of voice, language, and dialect?</td>
</tr>
<tr>
<td>Activities and Interactions</td>
<td>What is happening? Is there a definable sequence of activities? How do people interact with the activity and with one another? How are people and activities connected or interrelated?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Frequency and Duration</th>
<th>When does the situation begin? How long does it last? Is it a recurring type of situation or is it unique? If it recurs, how frequently?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subtle Factors</td>
<td>What are the informal or unplanned activities? What are the symbolic and connotative meanings of words? What is the nonverbal communication such as dress and physical space? What does not happen – especially if it should have?</td>
</tr>
<tr>
<td>Outliers</td>
<td>Does anyone or anything stand out as different? What specifically is different? What factors may account for the difference?</td>
</tr>
</tbody>
</table>


Merriam explains, “Detailed description of particulars is needed so that the ... reader can assess the evidence upon which the researcher’s analysis is based... Of course, in order for a reader to vicariously experience a phenomenon, the writer must transport the reader to the setting. This is done through writing a vividly descriptive narrative of the setting and the situation.”173 As this researcher explored Orphanage Q, there was layer upon layer of data present in both environmental and relational interactions. The researcher was intentional about writing on these experiences and the decisions she made regarding her level of participation with descriptive details. This researcher observed the children and staff under investigation, moved patiently from engagement as a passive observer, acting as a friendly bystander, to more moderate participation, and eventually engaging in activities as participants initiated them.174

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172 Brenita Nicholas, “A Qualitative Investigation of the Creation and Use of Social Capital among Street Children in Bucharest,” (PhD Dissertation, Romania, 2011) 138. This chart was originally created and utilized by Nicholas. She presents Merriam’s observation engagement questions as seen in Table 10.


This study began with weekly time spent observing the environment, the children, and the caregivers in Orphanage Q. The observation guide, made visible in Appendix D, is an original template created by this researcher to scaffold her own ability to be more attentive to what was seen, heard, and experienced. This guide also encouraged the researcher to be transparent about any bias she brought with her existing background in theory. The previous knowledge with which the researcher came does play a part in this investigation since the researcher was the key instrument of study. Therefore, the questions, suspicions, and potential interpretations were included but reserved and recorded in a separate column in this study’s field journal.

The weekly observation logs guided the researcher in recording the things noted in the environment around her and the interactions that occurred between the people observed were documented. The left column allowed space to record descriptive information with objective notes on concrete data. The right column was designed to include the researcher’s questions, wonderings, and plans for possible further investigation. Sometimes these memos moved from descriptive to conceptual. This too was data the researcher collected for future analysis.

Due to the vulnerability of the population being researched, and the need to build trust and rapport, it was of great priority that the researcher take ample time to slowly connect and make decisions according to the cues provided by both the children and staff. This responsiveness also allowed for an informal consent process. As children and caregivers conveyed with their actions and non-verbal communication, such as proximity and non-verbal prompts for connectivity, their openness to being observed, or lack thereof, was noted and the researcher committed to being responsive to those cues. Prior
to the researcher’s first observation date, a general consent letter was sent to the director of Orphanage Q and was orally read to the staff members in both English and Tagalog, Appendix E. This is further discussed in the exploration of research ethics below. These informal cues of those consenting to observation and the researcher’s responsivity was also recorded in the observation logs as data.

Structured Interviews and Digital Recorder

This research study also relied on the use of semi-structured interviews. Interviews allow the researcher to understand the lives children and adults more fully. “The purpose of in-depth interviewing is not to get answers to questions, not to test hypothesis, and not to ‘evaluate’ as the term is normally used…At the root of in-depth interviewing is an interest in understanding the lived experience of other people and the meaning they make of that experience.”175 This dynamic process of telling a person’s lived experience has, throughout history, been used to understand the lives of those around the globe and throughout the ages. Qualitative research also uses the powerful tool of people’s stories to, “stir people’s minds, hearts, and souls and by so doing give them new insights into themselves, their problems and their human condition. The challenge is to develop a human science that can more fully serve this aim. The question, then, is not ‘Is story telling science?’ but ‘Can science learn to tell good stories?’”176


In Orphanage Q, there are many children and staff with their own stories and lived experiences. The researcher went into the observations as a gatherer, collecting information about what it meant for these characters to interact relationally on this stage of sorts. The initial questions taken into the semi-structured interviews were sensitized by the theoretical framework of this study. However, they were also meant to be responsive to the data collected along the way. And so, the researcher led each discussion with the following emergent prompts, “When a new child is admitted into Orphanage Q, what connections does he or she experience?” and “When a child goes through a typical day at Orphanage Q, what connections does he or she experience?” These simple questions were used as the concrete skeleton on which follow up questions could be added regarding child-to-caregiver, caregiver-to-child, staff person-to-child, and child-to-child relationships. This allowed for a semi-structured natured to the conversation.

There was also an ongoing effort to allow each participant to guide the direction of the interview. As caregivers shared about their unique connections with children and the specific child cases they were immersed in, the researcher’s questions were further developed and changed, making for more dynamic dialogue rooted and grounded in the data. For instance, when one caregiver spoke to the researcher about her desire to not confront a newly admitted child one-on-one before trust had been built, but to connect with them using other behaviors, the researcher asked these follow up questions that reflected back what she had already heard:

**Researcher:** So, rather than confrontation, you are letting them know indirectly because you know they are listening. That’s good. So, you mentioned the ways that you connect:
- You mentioned being able to play Filipino games that they know.
And being able to let them learn by watching and learning in their own time.
You talked about giving them lots of time.
You gave an example of hugging and making a child feel safe.
You mentioned kids who need reminders to be safe, those who are doing hurtful things to other children.

When you think about how a child like this, maybe a new child, starts to get connected, what words would you use to describe that connection? When you see that a child is scratching and pinching, and maybe starting fights, but now they’ve been here a little bit longer and they’re starting to feel more connected to you or to another caregiver. Describe that. What does that look like?177

The researcher worked to capture each and every one of the words that were shared. A professional recorder was utilized for interviews so that, with the help of a translator, verbatim interviews were transcribed. The recorder was also available for strategic use by the researcher to organize her own thoughts, both during ongoing observations, interviews, and analysis. The researcher planned to do the latter, speaking into the recorder out-loud while stuck in traffic but instead kept a written log of thoughts instead. “Riessman notes some techniques which can be used to increase the ‘plausibility’ of a research study: ‘I insist, whenever possible, that students tape record conversations so they can represent what was said with greater accuracy. I also teach students to keep a diary or log of decisions and inferences made during the course of a research project.”178 Either way the notes are kept, this intentional effort to be self-aware and reflective about what is seen and heard is essential to qualitative research.

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177 This question was asked of Orphanage Q’s head caregiver, whose code name is W18, as she was interviewed by Aisling Zweigle on February 27, 2017.

Additional time spent in observation prior to interviews set the stage for this study’s more thorough understanding of its context and the phenomenon being studied. Once the first few weeks had passed this study moved into semi-structured interviews with a smaller, theoretical sampling of participants. The over-arching research questions included for interviews in both English and Tagalog, are listed in Appendix F. However, these do not include the many questions tailored to each participant in response to the data already recorded, as mentioned above. The researcher planned to spend approximately half of her field research in observation alone so that the data had ample time to trigger the next phase of interviews.

If the decisions regarding who was interviewed was made a priori, or based on pre-existing theory, then the sampling would have related more to the researcher’s bias rather than the grounded data that she acquired in the field. However, once the sampling was decided upon, there was plenty of data collected, rooted in the verbatim stories told. “The researcher wants to find out what is ‘in and on someone else’s mind’. This use of people’s narrative is dynamic. As Patton explains:

We interview people to find out from them those things we cannot directly observe. … We cannot observe feelings, thoughts, and intentions. We cannot observe behaviors that took place at some previous point in time. We cannot observe situations that preclude the presence of the observer. We cannot observe how people have organized the world and the meanings they attach to what goes on in the world. We have to ask people questions about those things. The purpose of interviewing, then, is to allow us to enter into the other person’s perspective.  

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Art and Materials

Art as a medium is open-ended and allows for artists to express their perceptions, narratives, hurts and hopes, in unique ways. Art as data was utilized with samplings of Orphanage Q’s children and youth. In reflecting on the research questions already mentioned previously, the chance to explore the children’s relationships, as well as the existing perceptions of those relationships, through the medium of drawing and a selection of a couple semi-structured questions proved dynamic both in process and in product. The resulting visual artifacts provided this researcher an additional opportunity to compare and contrast coding categories and findings.

The inclusion of art materials and art activities was less about an end-product and more about a process of discovery and sharing. The researcher admits her own bias in wanting to end up with pictures that used colors and lines to describe the participants’ experience with the phenomenon being studied, that of attachment and relationship. However, using a grounded theory approach requires the researcher to be honest about this bias. For this reason, this portion of the data, instruments, strategies, and analysis, was left open-ended upon writing the research methodology. Grounded theory mandated this researcher to remain flexible and grounded in the data. Thus, the decisions about when and how the art was utilized, as well as by whom, was decided upon after the initial analysis of data which the weeks spent in the observation phase provided.\(^\text{180}\)

\(^{180}\) This is further discussed in Chapter 4 Presentation, Analysis, and Interpretations of Findings.
Art Experiences as Child Interviews

Time constraints in this study were keenly felt at this stage of the research process. There were many more sessions that could have followed, in individual or small group art sessions if theoretical saturation was to be reached. However, without the time to do intensive art follow-up or verbatim interview transcriptions with the children, the most pressing question for the researcher was, at this time, “Who is most important to the children at Orphanage Q?” Was it their primary caregiver who stayed by their side? Was it their director who had reportedly found them, rescued them, and now provided for their needs? Or was there a whole network of relationships all around them, made up of people with different roles, on which they relied? Were there those children with divergent cases who expressed little connection with anyone? The researcher decided that art sessions involving multiple children at once with the expressed goal of answering this key question would serve as a brief interview of sorts. The head caregiver was available to step in as translator. Providing the art sessions in the evening prior to the children’s bedtime would allow for both the younger children in the previous sampling to be included as well as some of the youth not well represented in the data.

As depicted in Table 6 and Table 8 a total of thirty-seven children were included in the semi-structured art experiences. A few of the art sessions took place earlier with four of the preschool and younger elementary boys and girls thirty children and youth were included in two consecutive evening art experiences. There are was gathered by the researcher and organized into two art binders as data. As well there were additional children who engaged in impromptu drawing sessions with the researcher during previous weeks of observation.
The later semi-structured art sessions included children aged six-years-old to fourteen-years-old. The only prompt given to children during the art experiences was: “Who is important to you?” This question was left broad in scope with the intent to allow representation of family members outside of Orphanage Q to also emerge. The researcher’s desire was to better understand the children’s attachments, relationships, and the presence of (or longings for) connection in the children’s everyday life. Time was spent briefly talking with children about who they drew and why. Some of the children were comfortable to do so in English. A few of the children were supported by a translator to share a few choice words.

**Trustworthiness of Data – Qualitative Validity and Support Team**

Patton\(^{181}\) encouraged researchers to make an account for the tools and strategies put into research methodology to validate the findings and interpretations of their study. Some of these strategies include prolonged engagement, persistent observation, peer debriefing, and member checking. These techniques along with the use of the triangulation of methods and an audit trail—or for GTM the use of “memo-ing”\(^{182}\)—track the researcher’s learning, interpretations, as well as establish accountability to others throughout the research process for the trustworthiness of data. The following descriptions explain the ways in which these techniques were utilized.

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Prolonged Engagement/Persistent Observation

Prolonged engagement involves the “investment of sufficient time to achieve certain purposes, learning the culture, testing for misinformation introduced by distortions either of self or other respondents, and building trust.”\textsuperscript{183} This is vital to the trustworthiness of a study as it requires the researcher to have time to test misconceptions and assess if distortion in the data collected exists. The prolonged engagement spent in research at Orphanage Q required time spent in hours, weeks and months of observations and interviews at Orphanage Q. This allowed for an increase in reliability and validity present in the data collected.

Persistent observation involves identifying “those characteristics and elements in the situation that are most relevant to the problem or issue being pursued and focusing on them in detail”\textsuperscript{184} Ongoing time spent in observation at Orphanage Q were spent focusing on children, caregivers, and staff relationships. This exploration resulted in a binder full of observation logs and a journal full of interpretations and reflections. When interviews and art experiences transpired, the collection of notes provided a foundation for inquiry.

Peer Debriefing

Peer debriefing “is a process of exposing oneself to a disinterested peer in a manner paralleling an analytical session and for the purpose of exploring aspects of the inquiry that might otherwise remain only implicit within the inquirer's mind.”\textsuperscript{185}


\textsuperscript{184} Lincoln & Guba, \textit{Naturalistic Inquiry}, 304.

\textsuperscript{185} Lincoln & Guba, \textit{Naturalistic Inquiry}, 308.
researcher chose a Filipina social worker, who worked with populations like this one doing advocacy for at-risk children and youth, to serve as a peer debriefer. Because of her familiarity with this cultural context, she will provide ongoing scaffolding in this researcher’s reflexivity and transparency. Ongoing thick descriptions of communication with the peer debriefer, as well as creating an audit trail of notes from all the above data sources will layer the researcher’s findings and make for a less-biased engagement in the research. This provided a level of triangulation to occur as there were more than one form of recorded data speaking into one behavior at the same time. For example, when caregivers discussed what they do as means of connection during an interview were sometimes noted during observations putting those same behaviors into practice.

**Member Checks**

Additional means of increasing the reliability and validity of this study were found in the researcher’s commitment to using member checks. Member checking, from Lincoln and Guba's perspective, is “the most crucial technique for establishing credibility.” Member checking is the method of providing data and data interpretations to the participants. This process allows the researcher to seek feedback from those previously interviewed. Member checks allowed for the caregivers, and the children, as

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186 Brenita Nicholas, “A Qualitative Investigation of the Creation and Use of Social Capital among Street Children in Bucharest,” PhD dissertation, Ohio State University, 2011. The concept of member checks was explained to the researcher by her advisor, Dr. Brenita Nicholas. Nicholas writes about her own use of member checking when doing her doctoral research which explored the building of social capital among Romanian street children and youth. She states: “Performing a member check allows the researcher to obtain participants’ reactions to the data they provided and played an important role in establishing credibility as it allowed the researcher to seek feedback regarding interpretations and conclusions with the stakeholders from whom the data were collected.”

vulnerable populations, to verify the findings and make any necessary changes. So, for example, if the first interview took place for one hour, a second follow up appointment with each individual took place in which art materials were also sometimes used. The researcher was committed to using member checks as way of saying to those interviewed, “Am I right that I heard you say this?” And with art this sometimes included, “If you wanted me to understand this better, what picture would you draw to help me understand?”

Each person, besides the cook—who was unable to meet with the researcher, was followed up with for one of two additional dates to confirm that the verbatim transcriptions of each interview accurately communicated thoughts and perceptions as intended. They were given a pen and invited to make notes or changes as they desired. Each interview took forty-five minutes to one hour and each member check took thirty to forty minutes. A translator was also present as questions were encouraged.

All of the caregivers stated that the researcher had included every word they said, even noting when the interviewee laughed or used body language to communicate. Caregiver W1 said, “Yes, it is all there. That is what I said.” She discussed with the translator one word that had been left untranslated because of its complex Tagalog meaning. It was noted that the caregiver and translator both agreed the phrase being translated, in essence, was the same as saying to a child that was rejecting her care and attention, “I won’t give up on you. I will stay with you by your side, no matter what.” The child development coordinator, the home schooling coordinator, and the male social worker all made a couple of notes expanding on a phrase or thought. Otherwise, all eleven member checks approved the interviews, increasing the validity of the data.
A translator is someone able to speak to the participants in their own heart language and ensure that communication has achieved increased levels of success. Of concern in member checking is the participants’ sense that a particular answer is expected from the researcher. Power dynamics potentially play a role. The translator, mentioned in the ethical considerations below, helped to facilitate communication between all the parties involved, increasing the trustworthiness of the data. The researcher informed the translator on how to do this best. Prior to the start of the semi-structured interview phase, the researcher met with her translator, another graduate student in the Master of Arts in Religious Education degree program at Asia-Pacific Nazarene Theological Seminary. The researcher outlined the expectations for translation and signed the Agreement to Maintain Confidentiality—Translators, found in Appendix G.

The translator and the researcher met with one of the social workers at Orphanage Q. Some changes were made to the research questions as the translator and the social worker discussed with the researcher the English and Tagalog translations most accurate and most likely understandable by the caregivers. Initially, it was the peer debriefer that made the translation. This meeting now provided a second and third opinion to better facilitate communication. Each interviewee was part of the consent process before answering any questions. If an interviewee only had a short time to meet then the consent process took precedence and the interview was scheduled for another time. Each person had the details of the study’s purpose, the process, and the commitment to confidentiality
explained to them. Each person had multiple opportunities to ask questions if needed. This consent process is further described in the Oral Script Consent Process, Appendix H, and the translator acted as witness and signed the Informed Consent Witness Forms, Appendix I. This is further explained in research ethics below.

In establishing the confidentiality process and ensuring informed consent took place among children and staff at Orphanage Q, the researcher exhibited intentional commitment to research ethics, as she considered the risk of ethical vulnerabilities for the populations making up this study’s sampling. This required multiple steps to consider. The researcher’s advisor assisted this process as means to further accountability.

Research Ethics

It was a stated goal of this study to respect the integrity of each child, youth or adult participating in this study. The cases presented in Orphanage Q were not only vulnerable to future harm, they also carried with them the stories of past harm already perpetrated in the participants’ lives. The researcher’s presence was intended to serve as means for honoring their stories. If at any time, there was risk that the care and respect of these participants might be compromised by the researcher’s presence then priority was given to remedying that dynamic and ensuring collaboration and cooperation with participants’ health and healing.

There are multiple steps suited to work with orphans and vulnerable children responsibly and responsively or OVC informants. Some of these steps are addressed by Merriam as she cites Patton. “Patton, … has a lengthy discussion and provides an

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‘Ethical Issues Checklist’ identifying the following items to be considered when engaging in qualitative research:

- Explaining purpose of the inquiry and methods to be used
- Promises and reciprocity
- Risk assessment
- Confidentiality
- Informed consent
- Data access and ownership
- Interviewer mental health
- Advice (who will be your counselor on ethical matters)“\(^{189}\)

In addition to these ethical considerations, discussed below, the researcher was intentional about the ways even her appearance might inadvertently impact the way she was received by those under observation. This included a decision to arrive consistently at the research site without makeup, without jewelry, and in casual clothes, namely a t-shirt, jeans, and flip-flop sandals (*slippers*). A very similar outfit was worn each time to build consistency and draw less attention to herself. Though it is noted that the researcher’s ethnicity, country of origin and heart language continued to set her apart and these things could not be changed.

**Explaining Purpose of Inquiry and Methods to Be Used**

This research site was made up of an under-resourced community where outsiders periodically enter, in-order to provide adoptive homes, donated-supplies, and skills. This not only created a *possible* dynamic of misunderstanding regarding the researcher’s purpose in coming, misunderstandings were altogether *probable*. For this reason, the

researcher met with the director of Orphanage Q and discussed the need for clarity about why the research inquiry was taking place and what would or would not be a part of its purpose and process.

As a foreign visitor who came to watch children and staff, if clarity of the researcher’s purpose and process is not communicated, a variety of perceptions incongruent with the intentions of the study may have resulted. For example, the researcher could have been perceived as an extension of the director, as if taking notes at work related to an assessment of the employee job performance and made them liable to a decision that threatened their job security. The researcher, alternatively, could have been perceived as a representative of foreign donors, visiting to make resources available to those with whom she interacted. The director of Orphanage Q disclosed to this researcher, in a prior meeting, the importance of clarity so that the researcher was not considered to be an extension of a staff person and be given liberty to act or make decisions that had not been approved by the orphanage management. This researcher wished to establish a plan that protected the staff and children from such a circumstance. This plan is fully articulated in the informed consent process discussed below.

Reciprocity – Control of Expectations

As noted above, there might have been a variety of expectations for what an outsider could bring into a community that is under-resourced. The researcher might be mistaken for a broker of sorts providing for financial, relational, emotional, or familial deficits. For this reason, each conversation and interaction was examined through this lens so that precautions were taken. Also, noted above, intentional communication about
the study’s purpose, process and confidentiality was vital. This provided an important control of expectations and settled the question of potential reciprocity. The participants were told of their multiple layers of choice.

Risk Assessments—Children and Caregivers

Regarding participants’ perceptions of choice, the researcher might have erroneously been seen as an extension of the director or staff members in authority. The director of Orphanage Q had previously conveyed to the researcher a past experience with an outsider, who looked like people the staff deemed as an authority, due to country of origin, language, or race, was allowed to take over things programmatically that the director would never have allowed. This served as cautionary warning to the researcher to lean into a role that was neither authoritative nor directive.

The consent process, as previously mentioned and further discussed below, was done to communicate what observation, interview and documentation was and to remind the children and staff that this included coming as a guest first and foremost. The consent process also clearly conveyed that confidentiality of participants would be respected unless maintaining confidentiality in some way put the participants, or anyone else, in harm’s way. In this case, the shared information would have been deemed no longer confidential in a mandated need to protect those in harm’s way. If the participants were unwilling to agree to these terms, they had a right to decline the interview at any time and to end the interview. Knowing this information up front allowed participants to make an informed decision as to whether they wanted to be interviewed. The researcher also respected participants’ right to not be observed. The consent process is further discussed below.
Confidentiality

In discussing a plan to create clarity on the researcher’s intentions and boundaries, the researcher discussed in length with her advisor a general consent process that would respect confidentiality. This was also in response to the researcher’s proposal defense panel which agreed this addition was necessary prior to the start of field research. The rough draft of this consent process was sent to the orphanage director and to the researcher’s Filipino peer debriefer for feedback.

The Peer Debriefer feedback also assisted the researcher in communicating to the staff that the one existing circumstance that would cause her to breach confidentiality is in the case of child abuse. The Philippines’ mandated reporting Anti Child Abuse Law specifically states the need for teachers, social workers, medical providers, and organization directors, who observe children experiencing abuse, or who have substantial reason for suspicion of very recent abuse to report it as mandated below. The peer debriefer’s feedback, as compiled from an online law firm resource, was as follows:

“…regarding mandatory reporter. Per the RA 7610 of the Anti Child Abuse Law Implementing Procedures. The mandatory reporters are:
SECTION 4. Mandatory Reporting. — The head of any public or private hospital, medical clinic and similar institution, as well as the attending physician and nurse, shall report, either orally or in writing, to the Department the examination and/or treatment of a child who appears to have suffered abuse within forty-eight (48) hours from knowledge of the same. (Chan Robles Publishing Company)
SECTION 5. Duty of Government Workers to Report. — It shall be the duty of all teachers and administrators in public schools, probation officers, government lawyers, law enforcement officers, barangay officials, corrections officers and other government officials and employees whose work involves dealing with children to report all incidents of possible child abuse to the Department. Should there be disclosure during your research, you have to document it and refer it to the organization's CEO or it could be a delegated authority to their
Social Worker. Check the organization’s Child protection policy especially their RESPONSE, MANAGEMENT and REPORTING of DISCLOSURE SECTION. You can’t file a complaint- but the organization's social worker SHOULD, see Section 16 (e) SECTION 16. Who May File a Complaint — A complaint against a person who abused a child may be filed by the — a. offended party; b. parent or legal guardian; c. ascendant or collateral relative of the child within the third degree of consanguinity; (Chan Robles Publishing Company) d. duly authorized officer or social worker of the Department; e. officer, social worker or representative of a licensed child caring institution; f. Barangay Chairman; or g. at least three (3) concerned responsible citizens of the community where the abuse took place who have personal knowledge of the offense committed.”

Informed Consent

Prior to beginning field site observations this researcher worked with her advisor to develop the consent process for both the initial general observation phase of the study and the semi-structured interview phase to follow. This further supported the researcher’s ability to set the stage for a decrease in power differentials and the protection of child and staff confidentiality. For those working at Orphanage Q, consent to participate in the field observation phase of the research began prior to the researcher entering the field. The research prepared a formal script to be read to the full staff by the Director of Orphanage Q. As discussed above, the script, Appendix F, was written in active collaboration with the researcher’s advisor, the peer debriefer and the Director of Orphanage Q and was fashioned according to best practices in an informed consent process, as well as Filipino law and context. The identity of the researcher, purpose and process of the study, confidentiality and matters of choice were all disclosed to participants. Participants were also given an opportunity to seek clarification and ask questions. Once entering the field,

190 The peer debriefer stated that the above guidelines were excerpts from a Philippine law firm’s “Implementing Rules and Guidelines” document, available at their virtual law library, accessed on November 4th, 2016. http://www.chanrobles.com/republicactno7610.html#.W CXAs4VOJrQ
the researcher considered informed consent as an on-going process. The researcher respected non-verbal or subtle cues from staff that they may be uncomfortable and relocated to different room.

This on-going attention to cues applied to the children as well. It was not assumed that because the director and staff were comfortable with the researcher’s presence that it was automatically OK with the children that they be observed by the researcher. The children’s non-verbal or subtle cues were also observed and respected. When children were involved in their routines the caregivers were also consulted as adults who were familiar with children’s nonverbal cues and preferences. In this way, the caregivers were available to act as informal consultants on the consent process for the children in their care. Their input or advice about entering a room or waiting to observe at a later time was requested and respected.

The consent form for semi-structured interviews was adapted from a signature process into an oral script-based dialogue. Seeking consent for participation in the interview and art session phases of the research also allowed the researcher to follow a formal and on-going process. The consent form the script was translated from English into Tagalog by the peer debriefer, then the researcher’s translator and lastly revised in part by the translator’s additional dialogue with a social worker at Orphanage Q. The English script needed to be adapted (as were the research questions) to better suit the intended meaning. The participant’s heart language translation took priority. The oral script allowed for questions to be asked and answered until understanding was reached on all the matters the consent form discussed, especially that of the purpose, process, and confidentiality.
The script contained three sections: the purpose of the research, the process of the research and confidentiality. The purpose section of the script explained the overall objective of the research. The process section provided information about the estimated length of the interview, what would happen to the information, a request for a follow-up meeting to review the information gathered (member check), and a request to tape-record the conversation. The researcher emphasized that participants may choose not to be recorded or to stop the interview at any time. Finally, the third section of the script covered confidentiality, including the limits to confidentiality, which was consistent to the observation phase of the research. Throughout all three sections, potential participants were provided opportunities to ask questions. All questions were answered openly and honestly and before proceeding.

Data Access and Ownership

In order to keep the participant information private, a participant coding system was put into place upon the first day of observation. This system was understood by the researcher alone. All interviews will be deleted upon transcription and final defense. Transcribed verbatim have also been saved in a private file that only the researcher had access to. The site name was changed and coded to protect the anonymity of research site. Unless the organization deems it appropriate to disclose upon review of the study’s completion this will remain true in the resulting thesis report. If future written works include the child and/or caregiver stories they will intentionally have the names changed so that identifying information is not present. The children’s details, whenever possible, will be grouped together so that possible identification is further eradicated.
Researcher Mental Health

A pre-emptive self-care plan, Table 11, provided a game-plan for support systems available to the researcher. As the participants’ needs were respected and protected, so too were the researcher’s well-being pertinent to the success of this study. To this end, the following care-plan was proposed as flexible measures used in the way of health. Just as the researcher’s concern for child welfare embraced the value of health holistically, and was mindful of each quadrant of a child’s development, this self-care plan for researcher mental health was mindful of the researcher’s well-being as expressed in the social, emotional, spiritual, cognitive, and physical life areas.

**Table 11  Researcher Self-Care Plan**

<table>
<thead>
<tr>
<th>Measures for Health</th>
<th>Materials/Details</th>
<th>Support Person(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal Reflection &amp; Debriefing</td>
<td>Daily and/or weekly journaling and prayer</td>
<td>Researcher, Advisor, Peer Debriefier</td>
</tr>
<tr>
<td>Secondary Trauma – Prevention &amp; Care</td>
<td>Skype and/or email if needed; Confidentiality maintained</td>
<td>Advisor, Orphanage Q Director</td>
</tr>
<tr>
<td>Sleep &amp; Regular Exercise</td>
<td>Continued commitment to daily/weekly health routines</td>
<td>Researcher only</td>
</tr>
<tr>
<td>Spiritual Care</td>
<td>In-person confidential meeting as needed</td>
<td>APNTS chaplain and researcher spouse</td>
</tr>
<tr>
<td>Ongoing Reading &amp; Learning</td>
<td>Continual engagement in academic resources to support understanding of complex context and problem</td>
<td>Researcher only</td>
</tr>
<tr>
<td>Other</td>
<td>Openness to additional resources, if problems arise</td>
<td></td>
</tr>
</tbody>
</table>

Advice on Legal and Ethical Matters

Prior to the beginning of this study, the researcher was required to determine who would provide advice on any legal or ethical matters occurring in the field. It was decided
that if for any reason an actual breach in confidentiality was necessary due to the observation of extreme harm to a child’s wellbeing the researcher would comply with legal requirements and report the incident to the social worker and/or director of the residential care setting. An incident report would also be written to the advocacy committee represented at APNTS. This committee would be made up of APNTS Academic Dean, Dr. Floyd Cunningham; the researcher’s advisor, Dr. Brenita Nicholas; the Holistic Child Development department head, Dr. Nativity Petallar; and this study’s peer debriefer, Filipino social worker, Mary Rose Santillan-Oximas. These resource people also served the researcher when additional advice was needed throughout the length of the study.

Roles of Support Team

Identifying a few people who served as support to the researcher has already been mentioned. These team members played an important role in not only collecting data but also in increasing the researcher’s capacity to reduce ethical risk in this study. This includes the selection of a translator and a peer debriefer. It also includes the researcher’s advisor, the Holistic Child Development department head, the APNTS research advisory committee, and the director of Orphanage Q.

A translator served as an ethical support person early in the process of interviews and art experiences. As mentioned previously, the translator signed her own Agreement to Maintain Confidentiality, Appendix G, which acknowledged her own commitment to confidentiality and the task she was hired to do. The translator’s involvement allowed for vital cultural mediation, as well as a linguistic translation for the Oral Script Consent Script, Appendix H. The translator also signed the Informed Consent Witness Form,
Appendix I upon each reading of the oral script consent as proof of successful communication with each potential interviewee.

This responsibility required the translator to undergo some training regarding the value of the participants’ actual words. So, that their ability to communicate things from one cultural context to another, or translation competence,\textsuperscript{191} did not cause them to simply state what they thought the researcher wanted to hear from the child or staff. The translator was instructed to give, as close as actually possible, the meaning of the speaker’s honest perceptions and expressed words. For those words that seem to lack adequate translation, the translator was encouraged to make note of them so that the researcher was provided with extra description and context as part of the interview analysis. The memos and audit trail convey these factors as well.

Additionally, the selection of a Filipino peer debriefer,\textsuperscript{192} as noted previously, provided an additional support person, able to act as cultural mediator and translator. This person, due to experience in social work and child advocacy in the Filipino context, asked questions that challenged the researcher’s perceptions, providing insight into OVC issues and the interplay of cultural understandings regarding children, family, caregiving, and child welfare issues. This provided an additional form of triangulation and validity to this study.

\textsuperscript{191} James P. Spradley, \textit{The Ethnographic Interview} (New York: Harcourt, Brace, Janovich, 1979), 19-21, 82.

\textsuperscript{192} Brenita Nicholas, “A Qualitative Investigation of the Creation and Use of Social Capital among Street Children in Bucharest,” PhD dissertation, Ohio State University, 2011. Nicholas writes about the use of a peer debriefer in her own research among children and youth living on the streets of Romania: “At the beginning of the study, I met with each peer debriefer separately once a month. One of the main purposes of peer debriefing during the initial phase of research was to challenge my suppositions that led to interpretations. Peer debriefers probed my biases, sought meaning and pursued clarity of interpretation.”
As part of this thesis research and writing, submission of research design, resulting data and reflections were regularly submitted to the researcher’s advisor, Dr. Brenita Nicholas. Nicholas has carried out professional research, therapy, and outreach among vulnerable and marginalized children and youth in the USA and abroad.\footnote{193 Nicholas, “A Qualitative Investigation.”} She provided ongoing feedback, prompts, and resource suggestions using email and video calls. Nicholas also traveled from the US to visit the researcher in the Filipino context half way through this study, in January 2017, as means of acquiring a more thorough understanding of this study’s endeavors.

Systematic feedback and instruction was part of the researcher’s thesis writing course in the Holistic Child Development (HCD) department, taught by the HCD department head, Dr. Nativity Pe\textsuperscript{tal}lar, at Asia-Pacific Nazarene Theological Seminary (APNTS). If ethical concerns arose, they were to be channeled through the APNTS research advisory committee and Dr. Floyd Cunningham, academic dean of APNTS. In addition to the forms of accountability for ethical research standards, feedback from the Orphanage Q director, was communicated and her fierce commitment to the protection of “her children” at Orphanage Q, was welcomed, received, and documented. This study was rooted in the researcher’s own commitment to child welfare and advocacy. If the study in any way puts those end goals in question changes were promptly made.

Entering and Exiting the Field

As an outsider entering a community of orphans and vulnerable children, it was imperative that the researcher took the time necessary to build trust and rapport with
potential participants. In the first few weekly general sampling observations, throughout the month of November and December, the researcher took extra care in considering the flow of Orphanage Q’s routines and community life. Prior to establishing a more focused sampling of interviewees the researcher considered the act of entering into this community as means of meaningful study with observation guide and field journal in hand.

Once rapport was established, the use of research instruments, such as a digital recorder for interviews, was utilized. The semi-structured interviews followed. In addition to follow-up member checks or follow-up interviews, more in-depth inquiry with a few of the interview participants included art materials as additional means of inquiry and analysis. Once substantial sets of data were accumulated and an end time in the field was approaching, the researcher was mindful of phasing out her presence.

Due to the participants’ history of broken attachment and relationship, this process of exiting the field was done sensitively. This included clear communication regarding the length of the study from the onset. This was done both formally through an oral script consent process and informally through friendly conversations. This also required reminders of the eminent end once February visits had ended and March visits took place during alternative hours and follow up meetings took place. A wrap-up lunch or gathering is planned for May as way of appreciation for the community’s hospitality and cooperation. Most importantly, the researcher was mindful of the fact that just as relationship was at the core of the phenomenon being studied, relationships also took center stage in all the interactions this researcher engaged.
Summary of Research Methods

This researcher took considerable time to explore the grounded theory method and its unique model for robust qualitative research. This included examining the selection of the research site, the non-random purposeful sampling selection, data gathering and analysis strategies. The researcher was committed to both researcher reflexivity and transparency throughout this study. The research ethics which have been mentioned express an overt commitment to respecting participants, being mindful of power and vulnerability. These considerations were revisited in this study’s emerging design. Since the researcher is new to the grounded theory method she received considerable support from the research advisor, and from ongoing research on GTM studies and strategies. The opportunity to attempt some of the strategies while using some of the research instruments was the benefit of a pilot project carried out in another residential care setting.

Pilot Project at Orphanage T

This researcher carried out a pilot project including three observations and two unstructured interviews. The researcher planned to attempt a single art experience as part of the pilot project but due to time constraints did not accomplish this. Time spent at an additional Filipino orphanage in a differing city than the city in which Orphanage Q resides proved beneficial. This orphanage, referred to as Orphanage T, houses a smaller number of children in its community. The age span of its children is smaller in scope. The researcher noted the children’s demographics in her field log as part of the research methods. This included a code name, estimated age, and gender. The confidential recording system allowed the researcher to put into place the protection of the identity
and confidentiality of children and caregivers. The researcher chose this location because it was a place that she had visited a couple of times previously in the past year.

The pilot project provided an experience through which the observation guide and field journal design could be utilized and evaluated. It allowed for notes to be taken regarding the use of observation and interviews. The research instruments were experienced while engaging the lives and stories of children orphaned due to various causes, some of which were communicated to the researcher. Due to the vulnerability of the subjects and the limited commitment to Orphanage T, this researcher did everything in her power to respect the boundaries of the children observed and the social worker and director interviewed. If, at any time, the children and or staff were to express concern regarding the researcher’s presence, then goals would have been adjusted. The description of those said experiences create an informative layer of data to be applied in the approximately fifteen weeks of research to follow in Orphanage Q.
CHAPTER FOUR

PRESENTATION, ANALYSIS, AND INTERPRETATION OF FINDINGS

Overview

Yes, [relationships at Orphanage Q include] caregivers to children, caregivers to caregivers, office staff to caregivers, and support staff to caregivers. Also, children to the office staff, children to the support staff. Also of course, the boss, so her relationship with the caregivers, and her relationship with the children. And probably, the volunteers. Like right now we have volunteers with the children who go out into the informal settlement, so that’s another relationship. Children to children. And staff to every staff in every department. ....And homeschool teachers and there are adults, who are boys in the admin office, who connect with boys. ....And there are office staff who don’t really have direct interaction with children, or they aren’t required to [for their jobs] but they just like to react positively to children. So, that’s one of the connections. Like the older boys and girls. They have ate’s [big sisters] and kuya’s [big brothers]. It’s not really a requirement, I’m not sure if it’s a part of their job, but it’s their passion.194

Home School Coordinator W21

The researcher’s central research question was: what is the nature of relationships between children and caregivers in a residential care setting? This question was broad by design and pointed to the researcher’s explicit desire to scaffold current theory for the Filipino cultural context, understanding the phenomenon of attachment as presented (or not presented) in the dynamic and complex environment and relationships within Orphanage Q. Keeping an open stance that allowed a culturally grounded theory to emerge, the researcher attended to multiple dynamics, including:

194 W21, home schooling coordinator, interview with Aisling Zweigle on February 20, 2017.
• How the caregivers connect to and relate to the children at Orphanage Q, noting the unique characteristics and factors;

• How the children connect to and relate to the caregivers at Orphanage Q, noting the unique characteristics and factors at play;

• What other relationships exist at Orphanage Q; noting the unique characteristics and factors at play; and

• What might emerge from these connections and relationships, the potential for attachment or something else.

These broad questions led the researcher on a journey of discovery resulting in a model of attachment that emerged from Orphanage Q – the *Orbital Network of Attachment* – with its own unique attributes and characteristics. Before articulating the model, the researcher will outline the analytic process employed to move from these overarching questions to the emergence of the *Orbital Network of Attachment (ONA)*. Excerpts from observation notes, transcribed interviews, and cases files (coded for confidentiality) are shared as meaningful evidence of who the children and the orphanage staff are and how they, within the context of Orphanage Q, engage one another in reciprocal engagement. This engagement does not happen independent from other reciprocal interchanges but instead dynamically impacts other interactions creating a system of relationship made up of layers of connectivity.
Analytic Process

Lincoln and Guba\textsuperscript{195} stress the importance of a qualitative researcher leaving an audit trail that enables a second party to “audit” the research decisions and analytical processes of the researcher and confirm its findings. Sandelowski states that a research study’s findings are: “auditable when another researcher can clearly follow the decision trail used by the investigator in the study. In addition, another researcher could arrive at the same or comparable but not contradictory conclusions given the researchers data, perspective and situation.”\textsuperscript{196} This audit trail should clearly account for the researcher’s analytic choices,\textsuperscript{197} including data reduction and analysis, as well as reconstruction and synthesis of data, which is critical especially when evaluating a grounded theory. This section serves to capture the analytic audit trail that led to the emergence of the *Orbital Network of Attachment*.

Early Data Collection

Throughout the early weeks of observation, the researcher highlighted the observation logs, making note of various activities and behaviors. This provided a lengthy audit trail of emerging descriptive experiences. Explanations for why the researcher chose to investigate certain groups of children or areas in Orphanage Q’s environment as a next step were documented. Some of these early themes included: environmental characteristics, daily routines, staff roles, child-to-child interactions, child-to-caregiver interactions, caregiver-to-child behaviors and strategies, and child-to-


researcher behaviors. These themes, or codes, expanded as more data was added to logs and reflection notes.

As the researcher explored child-to-child interactions, for example, notes were made about the use of aggression among peers. This spurred further question about the role that trauma overtly and covertly played in the dynamics of play as the researcher sometimes observed. As well, the role that culture and communities of origin played in the children’s understanding of the use (or misuse) of power, force, and volume was questioned. As the children competed for space and materials, the researcher noted that scarcity of toys was not a problem at the center and yet it was most likely the case in the families of origin of the children, or for those children abandoned and raised on the street or abandoned in parent-less homes.

These observations and reflections seemed to relate to the way the children guarded, protected, and fought for the things they held onto. Some of these inquiries later aided the researcher in creating relationships among categories. The categories were potentially inter-related but they were first simply recorded as separate notes. So, the children’s (very occasional) aggressive behaviors and negotiation for the use of materials was one descriptive item for documentation. As well, the caregivers’ behaviors that followed (or did not follow) in response, their modeling and scaffolding of manners, for example, or social tools used for dealing with conflict or behavior management, as well as their use of proximity were all included in other descriptive categories.

As seen below, one of the early observations at Orphanage Q highlights the descriptions being logged in the field journal. This shows an open stance used for observations and interpretations. The researcher was simply recording what was seen,
what was heard, and adding relevant notes about the researcher’s resulting questions, as well as the researcher’s interpretations that followed.

**Observation:**
Children have outdoor courtyard play-time. I watch children share, argue, negotiate, and grab. One child, who seems to have global delays, hits another child [with rotting teeth] swiftly and with extreme accuracy five or six times! When the other child is hit, she does not cry. It captures my attention because it was startling to watch, it was hard, repeated, and shocking (to me). The girls’ lack of tears captures my attention. She stands close to the other girl [both six or seven years old]. She watches her. They eye each other and stay somewhat close to one another. Then the one who was hit decides to walk away without words.

**Interpretation:**
The girl was hit square on the head and she did not cry. The hitter had her arm cocked way back for momentum and it looked like she had lots of practice on her technique! How often has she hit others like this? How often has she been hit by others like this? It seems very typical to children who have had violence as a regular part of their growing up.
When this happens a different day to another child the one who was hit went to the corner with quiet tears. But this girl instead moved on with play somewhere else. I’m thinking about the reasons that the children in both cases did not report the incident or get help. How would it have been different if a caregiver had seen it happen? January 9th, 2017—main common area

This raw data was added to the researcher’s logs. The relationships between the excerpts of data were yet determined. Each note held the same potential for dynamic discovery. Sometimes this included noting a child’s behavior and a caregiver’s immediate response. Sometimes it included the researcher’s areas of curiosity. These things were noted over time as descriptions evolved into a documentation of more complex social phenomena under examination. The following excerpt from the observation log also exhibits the early need for rapport and trust, both with the children and the caregivers. The researcher curiosity about what she was seeing is described as she wondered what was seen and what was not seen. As others negotiated her presence, social dynamics could potentially be impacted. (The children’s names are coded):
Observation:
The caregivers are talking, cleaning, and smiling. I spend long periods of time alongside PG6 who is playing. She seeks me out and stays by my side. She is ripping the foam construction toy pieces with her teeth to create smaller shapes. PG6 puts them in her mouth but looks at me each time she does it. PG6 leaves the room after playing in different parts of open play area. Caregiver W5 is not interacting directly with her or the group but she immediately notices PG6 has gone. PG6 seems to have global delays. She is unable to manipulate her scissors with the paper. W5 uses proximity and participates or helps alongside the children when she sees them struggle with their craft or task. We all sit on the floor. There is an innocence to G2. She acts much younger than she is. She does not speak or use any words. She reportedly was here for just 6 months. She laughs. She seems to be curious to know if I will tell her stop but doesn’t speak. She makes tiny gestures and light grunts to communicate.

Interpretation:
Are caregivers being less involved in play and guidance because I am here? Would PG6 be with them if I wasn’t here? [The caregivers] seem to be trying to give me space and stay out of my way. But they are attentive when needed by the children. Perhaps they are trying to watch from afar? How do I clarify this without telling them what I want to see? December 5, 2016—main common area

This observation above relates to a follow-up interview that the researcher had with the director at Orphanage T, where this study’s pilot project occurred. After three visits in November 2016, the researcher met with the director for follow-up. The Director T spoke about the ways that her caregivers tended to make way or make room for a foreign visitor. In the past, they would often move away from the children so that the volunteers arriving from other countries could have a chance to connect with them. Director T was noted as saying, “No! I explained to them you are like the Mom whose skirt the children will hide behind when strangers come into the room.” Orphanage T is in
its first year of an updated child protection policy requiring the staff to intentionally remind volunteers to refrain from frontal hugs or holding the children on their laps.  

Open Coding

As fully articulated in Chapter 3, the researcher engaged in a systematic analysis of the data; this serves as summary. The pivotal first step in the data analysis process is line-by-line coding. Coding is the central task of grounded analysis, and the most foundational for the present study. Specifically, a grounded study begins with “open coding,” which Strauss and Corbin define as “the analytic process by which concepts are identified and developed in terms of their properties and dimensions.” This is accomplished by asking mental questions about the data, making comparisons, and developing labels and groupings for similar phenomena. The open coding phase involved conducting a line-by-line analysis of the data where sections of the data were broken down into “meaning units” or concepts. Each meaning unit was given a conceptual code ranging from one or two words to full sentences. As the researcher reviewed the data, a new code was established for meaning units that did not fit within a previously identified code.

Open coding is the analytic process through which concepts are identified and their properties and dimensions are discovered in data. This part of analysis pertains

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198 Follow-up interview with Director T took place at Orphanage T on January 12, 2017.


201 Corbin and Strauss, “Grounded Theory.”
specifically to the naming and categorizing of phenomena through close examination of the data. As data is evaluated questions are birthed out of the phenomena reflected in the data. The researcher compares various incidents and works towards the identification of similarities and differences necessarily present in conditions pre-ceding the occurrence of the phenomena. Events, happenings, objects, and actions, as well as interactions, are grouped under more abstract concepts termed "categories" when those similarities are established.

As part of the open coding process of this study, the researcher noted words that were emerging as raw data related to various topics and themes. However, first these words were simply recorded and valued as information with equal potential for further investigation. The researcher was mandated to refrain from bias or use of theory as prescription for what she would investigate or determine as meaning. These words listed in Table 12, below, were noted in observation and semi-structured interview notes.

<table>
<thead>
<tr>
<th></th>
<th>hugs</th>
<th>use of space</th>
<th>mutual connections</th>
<th>“Kids ask me [staff] not to leave”</th>
<th>“not just a job”</th>
</tr>
</thead>
<tbody>
<tr>
<td>primary caregiver as protector in children’s art</td>
<td>palliative care</td>
<td>Adoption suite</td>
<td></td>
<td>toys/sharing negotiating</td>
<td>“I love you”</td>
</tr>
<tr>
<td>“We all refer to Director Q as Mom”</td>
<td>past attachments</td>
<td>grief as child dies</td>
<td>attachment policies</td>
<td></td>
<td>global delays</td>
</tr>
<tr>
<td>sibling sets</td>
<td>hand-holding</td>
<td>big house—family?</td>
<td>peers like siblings?</td>
<td>caregiver shyness</td>
<td></td>
</tr>
<tr>
<td>crowding, children not concerned</td>
<td>Tagalog vs. English use</td>
<td>children jump into caregivers arms</td>
<td>spontaneous play with children</td>
<td>spontaneous nurture with children</td>
<td></td>
</tr>
<tr>
<td>cook relationship, feeds autistic girl</td>
<td>cook feeds autistic youth</td>
<td>Peer-to-peer aggression</td>
<td>staff turnover</td>
<td>rejecting nurture</td>
<td></td>
</tr>
<tr>
<td>safeguarding infants from me</td>
<td>older/younger kid relationships</td>
<td>volunteers visit</td>
<td>head caregiver role, modeling kids/staff</td>
<td>Director Q first with new child, last with child leaving</td>
<td></td>
</tr>
</tbody>
</table>

202 Corbin and Strauss, “Grounded Theory.”

203 Glaser, “Constructivist.”

204 Corbin and Strauss, “Grounded Theory.”
<table>
<thead>
<tr>
<th>transitions</th>
<th>child-written letters to Director Q</th>
<th>sign language use among hearing</th>
<th>stranger reactions</th>
<th>special needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>one-on-one care</td>
<td>teacher visits</td>
<td>children as assistants helping?</td>
<td>“In this house, we are a family…”</td>
<td>modeling</td>
</tr>
<tr>
<td>home schooling</td>
<td>“I won’t leave you”</td>
<td>spontaneous art</td>
<td>proximity</td>
<td>boys connect to babies outside</td>
</tr>
<tr>
<td>sign language class</td>
<td>family member visits center</td>
<td>staff to staff peers</td>
<td>tone of voice</td>
<td>child protection policies</td>
</tr>
<tr>
<td>risk taking</td>
<td>older orphan help</td>
<td>deaf staff dynamics, bigger network</td>
<td>Guard as protector in art?</td>
<td>comfort peer to peer</td>
</tr>
<tr>
<td>outside park</td>
<td>abuse scars</td>
<td>Director to staff relationships</td>
<td>nonverbal children</td>
<td>some of cleaning staff speak in sign</td>
</tr>
</tbody>
</table>

## Axial Coding

Strauss and Corbin identify the next stage of coding as axial coding where the researcher mines for inter-connected patterns between the themes identified in the open coding phase. “In axial coding, categories are related to their sub-categories, and the relationships tested against data.”

This moves the analysis from separate words, phrases or incidents recorded independent of one another into categories that are concept based. Strauss and Corbin explain, “Every concept brought into the study or discovered in the research process is at first considered provisional. Each concept earns its way into the theory by repeatedly being present in interviews, documents, and observations in one form or another---or by being significantly absent…” The researcher located connections present in the data and categories of inter-related concepts and allowed for emerging patterns to confirm how they would best be grouped, thus grounding them in the knowledge base emerging this study. These become the “indicators of phenomena.”

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The researcher noted her learning in the observation logs and field journal. The interviews, upon transcription, were thoroughly analyzed on a line by line and word by word basis. Each of the categories in some way originated in the researcher’s early data collection during her exploration of relationships and the potential for the growth of love. There was considerable overlap for some of these themes’ categories and so even the categories were held loosely as future data could bring divergent information, requiring the development of new categories with re-organization of themes. They were tested against the data collected in subsequent observations and interviews.

This process called on the close examination of what is sometimes referred to as the “six C’s.” Coding includes a “full-scale examination of process [and] necessitates also, in grounded theoretical terms, the investigation of causes, contexts, contingencies, consequences, co-variances, and conditions…the distinctive feature of the axial coding phase.”208 There were twelve axial categories, Table 13, which emerged from the weeks of observation and interviews and data collection. These categories considered the incidents, events, actions, and interactions recorded relating to Orphanage Q environment, children, caregivers, and staff. Some of the categories had moderate levels of incidence. As well, some of the themes had multiple layers of incidence especially dynamic in nature, as they were noted during multiple times and during various types of investigation.

Table 13—Twelve Axial Coding Categories

<table>
<thead>
<tr>
<th>Environmental Factors</th>
<th>Family Attachment Network</th>
<th>The Matriarch Phenomenon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety and Security, Guardian Behavior</td>
<td>Filipino Community Network</td>
<td>Filling and Depleting Domains, FAD Principle, Culture/Context Specific</td>
</tr>
<tr>
<td>Stranger Boundaries</td>
<td>Trauma and Trauma-Intervention</td>
<td>Divergent Reaction/ Rejection of Relationship</td>
</tr>
<tr>
<td>Dance of Attachment (Reciprocal Connection)</td>
<td>Attachment-Sensitive Policies, Procedures, Training</td>
<td>Attachment Apprenticeship</td>
</tr>
</tbody>
</table>

As evidence of this axial coding process, two of the twelve categories will be briefly explored. Both included multiple layers of observation notes, interview excerpts, later art experience images. The *family attachment networks* were early included in the following field logs:

<table>
<thead>
<tr>
<th>12/12—There is a little boy from the toddler room sitting in W3’s lap. She is the caregiver for older girls.</th>
<th>The boy seems very comfortable and secure with W3. How often does he connect with her? What cross-over is there between children and other people’s primary caregivers?</th>
<th>Are there special attachments that interconnect a network of meaningful relationships? Are others outside the toddler room seen like extended family members? Or is it the lack of attachment that makes children go to multiple people?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/16—Older girl from other room allowed to walk with, hold, and monitor a younger toddler. Is this a brother? Or do Orphanage Q allow for flexible interaction as if many of the children were all siblings?</td>
<td>I’m now watching for this phenomenon? The relationships between multiple children acting with increased connection like siblings would in a household.</td>
<td>Does this relate to the role of attachment as a network of relationships, much like a family? Does this relate to apprentice like relationships as older children learn to be “Ate’s?” [big sisters] and “Kuya’s?” [big brothers] Is this cultural?</td>
</tr>
<tr>
<td>1/30—PG8 comes to me when I am in the infant area. She motions to one of the little boys and says, “My sister!”</td>
<td>Is this imaginative play? Or does this relate to orphans identifying other children at Orphanage Q as a family with many siblings to call their own?</td>
<td>How does a residential care community create an environment where both meaningful connections take place in a caregiver-child dyad AND simultaneously in multiple relationships within a large network of care? Is the growth of love limited in how many meaningful relationships take place?</td>
</tr>
</tbody>
</table>

**March 23, 2016 Email to Advisor:**

*I am also thinking about the constant comparative factor that has sent me back to theory. I’m looking at gaps in my understanding of meaningful dyads of attachment that simultaneously occur alongside the phenomenon of attachment systems. I will include my search for more resources to describe the phenomenon of initial circles/connections occurring between child and caregiver and at the same time others—neither separated from other circles of connection around them—happening simultaneously.*
These excerpts note the ways in which an audit trail of log notes and memos of inquiry and subsequent learning create layers of categorical meaning. As more layers of evidence of this phenomenon emerged they were added to the category, prompting further questions and investigation. And as noted above, this constant comparative strategy, integral to GTM required the researcher to go back to her theoretical framework and recognize a need for more theoretical investigation in outside resources as well.

This investigation process can also be seen in this brief set of field notes and interview excerpts related to trauma and trauma intervention. Many of the children had visible scars from previous incidents unknown to the researcher upon arrival. Some of their individual stories were shared in more depth occasionally in interviews and through the reading of portions of their confidential case files. The names of children in the researcher’s notes on case files were coded to keep the child’s identity protected. With time, there existed layers of meaning, thus, earning the theme of a trauma and trauma-intervention axial code category:

| 11/28—Child with large scars, gashes in body, visible scar tissue. W1 caregiver is leading sign language class with the deaf sign language teacher behind her supporting her learning and teaching. | This boy also seems to have some additional special needs. (Caregiver seems to be receiving modeling as she models for others too.) | Caregiver intentionally seeking boy’s attention and re-directing him. She seems to use re-direction that he responds to that is straightforward and relational? The caregiver and boy seem to have a mutual familiarity with each other’s behaviors and expectations? |

Field Notes, November 28, 2016

In her interview, Director Q vividly described the impact of trauma and unique trauma-intervention. Her descriptions exhibit her commitment to the healing process:

I remember he was in absolute chaos. Every part of him. I remember standing there and going, “God, do I have the skill to do this one? I don’t think I have the skill to do this one.” Because he was just WILD. Unregulated. Just spinning,
spinning, spinning. So, I thought through cognitively, all that I needed to do to attach. He had had some inappropriate behaviors with the caregivers who had tried to drop him off. And I thought, “I have to be the mom. I have to hug him heart to heart. I can’t be afraid of his sexual innuendos. I have to be the mom. So, I did all of that. And when that child left with his adoptive family [years later] he was better prepared, spiritually, emotionally, on every level.

Director Q, January 30, 2017

The primary caregivers at Orphanage Q also articulated, in multiple caregiver interviews, about the role they play in trauma-intervention on behalf of the children:

Love—They needed love from their real mom. It’s about Love. They did not get it from their real moms and so they are hungry for it. I can feel it whenever they hug me. And in response I hug them as well…I hug them more.

Caregiver W4, Feb 13, 2017

Selective Coding

“A grounded theory study seeks not just to understand, but also to build a substantive theory about the phenomenon of interest.” The theory emerging from GTM research is meant to bring to light a core category under which all the other axial categories exist or relate. This core category describes a phenomenon perhaps not yet articulated in theory but thoroughly grounded in the data. The essential idea is to develop a single storyline around which everything else is draped. “The core variable is the one variable among all the variables generated during coding that, in addition to other qualities, is theoretically saturated and centrally relevant.” In this study at Orphanage Q the core category emerged as: The Orbital Network of Attachment (ONA). In all twelve categories, the researcher notes the ways in which the layers of relationship, between

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caregivers and children, staff and staff, as well as the environment itself are all simultaneously providing avenues for connection and nurture. The twelve categories fall under three broad umbrellas, which include the environment and the orphanage policies and routines as the contextual atmosphere in which the ONA phenomenon was and is observed. Also included are the dynamics of ONA orbits, as multiple bonds are forged through the layers of reciprocal, relational patterns that take place between multiple participants. Lastly the wavelengths of ONA are included as the essential influence exuding from the circles of connection; the director role as a matriarch model; and the fellow caregivers, staff, and children who serve as apprentices, passing on attachment-rich behaviors as they learn them. The connection of the 12 categories with these umbrella categories are depicted (in Table 14) and thoroughly explored below.

Table 14—Core Category: The Orbital Network of Attachment (ONA)

| Meals, Routines  
| Environment  
| Context + Culture + Values + Ideals |
| Dynamics of the Orbital Network – The Orbits | Reciprocal Pulling Forces/Mirroring  
| Online/Bonds Forged/Matching  
| Time + Consistency + Security + Joy |
| Influence of the Orbital Network – The Wavelengths | Circle of Circles/Interconnected  
| Matriarch/Models of Committed Love  
| Apprenticeship - Passing It On  
| Catching + Healing + Growth of Love |

The development of the Orbital Network of Attachment (ONA) core category, fully articulated below, was generated from observations, semi-structured interviews, and art experiences. It propelled the researcher back into additional literature and resources. This constant-comparative process pushed the researcher from data to theory and back to
data again to test the emerging category again. The core category birthed in this study is
noted in an audit trail readily mined for valuable connections. The researcher’s field
journal, memo binder, and notebook all provide evidence of weeks and months of
exploration. Some of these memos and notes were typed and sent to the researcher’s
advisor for ongoing feedback.

Excerpts from the field journal with the researcher’s questions were also sent to
the peer debriefer, Mary Rose Santillan-Oximas, once every few weeks. Her input
provided a cultural mediator’s perspective. She could speak into the context of the
researcher’s learning as an insider in the culture and simultaneously as someone
objectively not affiliated with Orphanage Q. The peer debriefer, as a Filipina, social
worker broadened the researcher’s understanding of what she was seeing. She prompted
questions that otherwise may not have been asked. For example, early in the research
process, the peer debriefer noted the ways in which attachment theory is highly focused
on the mother and child. She mentioned the Filipino value placed on the care provided by
an uncle (Tito), aunt (Tita), Grandma (Lola), Grandpa (Lolo) or big sister (“Ate”) and big
brother (“Kuya”). This comment was noted and tucked away. Months later it arose as a
central core category within the orbital networks of attachment.

The influence of the Filipino cultural perspective on networks of support is
represented throughout the twelve axial code categories depicted (in Table 14) in the
discussion below. The peer debriefer encouraged the reader to investigate Filipino
Clinical Psychologist Carandang writings on the dynamics of Filipino families and the
role this plays in therapeutic intervention and healing from crisis, further discussed
below. This dynamic of Filipino familial relatedness compared to Western individuality is expressed this way:

I am now reminded of Father Jaime Bulatao’s metaphor of the hard-boiled eggs versus the fried eggs in a pan. The hard-boiled eggs refer to the Western mentality of individuality, which sometimes brings about alienation and loneliness. On the other hand, the fried eggs placed side by side in a frying pan depict the kind of togetherness among Filipinos. Although the yolks are separated, the eggs are still touching each other and are not totally closed or insulated from each other, unlike the hard-boiled ones (Bulatao, 1981).211

As noted previously, a theoretical sampling was chosen to aid the researcher in hearing from multiple perspectives on the social phenomenon of relationships within orphanage Q. This was grounded in the data which was repeatedly directing the researcher to understand the connections that appeared to be meaningful to the children and the caregivers. These relationships seemed to be rooted in a larger network of connectivity, a seemingly simultaneous social phenomenon that is under-referenced in attachment theory research. The members of this larger network spoke about their own narrative of connection as it linked them to one another and the children in a way that was dynamic, sometimes stressing the value of intensive connection between one or two members and sometimes stressing the relatedness of the whole, as family nurture on a grand scale.

The children’s artwork provided another layer of data as means of exploring the children’s perspective on the multiple relationships they deemed as most important to them. The interviews with caregivers taught the researcher how they intended to meaningfully forge connections with children and within their broader networks of care. The social workers, support staff, and executive staff further broadened the researcher’s

understanding of how the larger community at Orphanage Q may in fact be understood using the metaphor of family especially in light of the Filipino cultural context that values a higher degree of relatedness and connectivity with a larger set of family members and even nearly family-members. All portions of data have taught the researcher a plethora of ways the growth of love may be encouraged by caregivers, social workers, executive staff, and support staff, in ways that are individually, collectively, and contextually suited for the unique cultural context of Orphanage Q. As Carandang says:

…there is definitely a need to look deeper into the family system. There is a need to understand the Filipino family more intimately, to dig into the ‘guts’ of the culture, and to get into the inner dynamics of the family members as they live together through these stresses. The clinical approach enables us to penetrate deeply into the inner world of the family and to capture its members’ experiences at the deepest level. This being an indigenous approach, it allows us, in a sense, to get a glimpse of the culture’s soul.212

The Orbital Network of Attachment

The collective data vividly depicts The Orbital Network of Attachment, which points to the answer of the original research question: what is the nature of relationships between children and caregivers in a residential care setting? However, the ONA model moves far beyond this initial narrow focus on dyad to the complex relational phenomenon occurring all around. It provides a rich understanding of the other dynamics that guided the initial inquiry related to how children and caregivers connect, the important role of other relationships in the environment and the potential for the growth of love, as well as an expanded understanding of the role of context and the emergence of the unique dynamics and influences.

212 Maria Lourdes Arellano-Carandang, preface to Filipino Children under Stress, Family Dynamics and Therapy (Quezon City: Ateneo De Manila Press, 1987).
Orbital Networks of Attachment (ONA)

2) Matriarch

3) Apprenticeship

WAVELENGTHS

Tagasalo

ATMOSPHERE

1) Circle of Circles (COC)

**Red Small Circle** = Child,

**Blue Small Circle** = Caregiver,

**Black Circles** = Orbits & Wavelengths/Connection & Influence

Figure 5. Orbital Networks of Attachment (ONA)—Core Category

The ONA has three key attributes that work together to form this dynamic social phenomenon. As depicted in Figure 5, the first key attribute is the Circle of Circles. A primary caregiver or significant adult figure in the life of a child, especially for a child who lacks attachment, creates a circle of nurture and care, or an orbit, around the child. The caregivers are represented by blue spheres and the children in their care are represented within these orbits in Figure 5 by even smaller red spheres, established within
multiple orbits of reciprocal relationship. There exists within Figure 5 some spheres not yet connected to a caregiver, yet, still circled by layers of relationship within the broader context. When meaningful connection does occur, it is made up of safety and nurture. The circle is nestled within the formation of other orbiting circles which make up a whole system of nurture, represented by black circles, or orbits and wavelengths. Thus, forming not just one vital circle of attachment but an inter-related circle rooted in a complex, inter-related community of circles. The researcher notes that unlike the solo circle of security discussed in classic attachment literature, this attachment model is expressed instead in a circle of circles—the COC principle—and is specifically suited for the Filipino context where larger familial systems of support are the ideal.

The second key attribute of ONA is the Matriarch Phenomenon. The vital role of the matriarch at Orphanage Q is seen in the ways one mother figure can influence directly the whole system of nurture and simultaneously influence each dyad relationship of nurture within that system. This was made evident in the plethora of ways that Director Q’s influence was illustrated at all levels of data. This includes the medical clinic caregiver who said, “The children all call her mom. But everyone calls her Mom. That is very Filipino.” It was also made visible in the ways multiple children continually wrote letters to Director Q with words of thanks, love, and requests for time with her. Many drew pictures of her during observations and art exercises. ONA articulates the way the matriarch in a system of care can uniquely impact multiple levels, or orbits, of nurture throughout the network of attachment. The Filipino tagasalo role, one who acts as the catcher, provider, or securer, will be described further on in this discussion below.
Finally, there is the *Apprenticeship Model* which is at play within the circle of circles, matriarch phenomenon, and within various relationships within the ONA. It is displayed in the modeling of attachment for those observing relational connection. The very act of forming a circle around a child prompts the posture of apprenticeship—for in community—members are not only agents of relationship that give and receive within one dyad. While some are receiving nurture, others are modeling, still others are practicing what’s modeled. Extending outward their influences abound. Participants act as agents of the growth of love within a collective of simultaneous orbits. Apprenticeship is observed adult-to-adult, adult-to-child, and child-to-child.

As previously noted and depicted in Table 13, each of the 12 categories that emerged during the axial coding process coalesce under three umbrella categories that work together to form a system for the growth of love. Table 15 encapsulates and further explicates the ONA. This study’s various excerpts of words, notes, and drawings will help to bring this discussion to life. ONA will be explored using the following multi-dimensions: *atmosphere, orbits*, and *wavelengths*.

### Table 15 Exploration of the Orbital Network of Attachment

#### A System for the Growth of Love

| | Meals, Routines  
| | Environment  
| | Context + Culture + Values + Ideals  
| Dynamics of the Orbital Network – *The Orbits* | Circle of Circles/Interconnected  
| | Reciprocal Pulling Forces/Mirroring  
| | Online/Bonds Forged/Matching  
| | Time + Consistency + Security + Joy  
| | Apprenticeship Model- Passing It On  
| | *Tagasalo*  
| | Catching + Healing + Growth of Love  

The Atmosphere

Although not an overt aspect of the initial research questions, weaved throughout the interviews, there are examples of ways that the environment, or the atmosphere, sets the stage for the relationships within the ONA. The layers of activity, volume, and even programs and procedures were all noted as an integral part of what was observed. Seeing these things through the eyes of those who call this atmosphere home brings an emic, or insider perspective. Some of the children’s drawings depicted the orphanage building as part of who is important to them. Figure 6 includes a 6-year-old girl’s drawing of the whole orphanage building and highlights where her siblings live within.

Figure 6. Orphanage Q and siblings drawn by 6-year-old girl.
It would be easy to come into Orphanage Q with an etic, or outsider, perspective that places a foreign evaluation on whether these environmental factors are ill-fitting for the children and staff. However, the researcher worked to allow the children, caregivers, and staff people, as well as the environmental factors themselves, speak their own narrative regarding their practices. This relates to the researcher’s own mindfulness about her previously mentioned FAD principle. She asked what filling and depleting domains existed within orphanage Q that related to the participants understanding of what was necessary or connection and relationship and what was sad but possible to be depleted of without threat of losing that connection. What do materials, practices, and environmental artifacts teach observers about connection in this place? What social phenomenon are impacted by these practices, according to the participants being observed and interviewed? Twelve tables were created as part of the axial coding phase. Portions were later integrated under the three umbrellas of meaning within the ONA core category.

Excerpts from those most prevalent to the role of the environment and atmosphere within this grounded theory are included below, in Table 16.

**Table 16 Environmental Factors**

<table>
<thead>
<tr>
<th>Date—Where/What</th>
<th>Observation description</th>
<th>Reflection</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/28—Common play area, bedrooms, meeting rooms: creative messages on love, connection, acceptance, and empowerment—painted or applied as adhesives to wall</td>
<td>“In this house, we are family, we are real, we make mistakes, we say I’m sorry, we give second chances, we have fun, we give hugs, we laugh together, we forgive, we do love really well, we are patient…”</td>
<td>Does this model something for caregivers? Is it meaningful in English? Do children read this or are they directed to read it? Values are being expressed to orphanage visitors too.</td>
</tr>
<tr>
<td>11/28—Caregivers wear “scrubs” uniform like health care worker outfit.</td>
<td>This allows visitors and new children to recognize who the primary and secondary caregivers in the center are.</td>
<td>Does this promote unity? Safety? Security? Does this relate to the size of the center? Filipino culture and its tendency to promote uniforms more than in the West? Or professionalism?</td>
</tr>
<tr>
<td>3/15—The conference room has been remodeled. There are now new words painted or placed on the wall with creative adhesives. It says, “There is Hope in Love” and</td>
<td>These messages are visible to the staff, the volunteers and the children and youth. How do these words inspire, challenge or direct the care the children are receiving?</td>
<td>During my art activity, a 15-year-old boy decided to write some of the words he sees on the white board in his drawing of “Mom __” [Director Q Nickname]. He draws</td>
</tr>
</tbody>
</table>
“Vision: To be a center for rescue of children in crisis.”
“Mission: To provide family-centered care and hope for children who have experienced trauma.”
Goal: “To bring holistic intervention to every child in our care.”

<table>
<thead>
<tr>
<th>her picture and then rights:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Attachment, boundaries and felt…” He does not write “felt-safety.” Does he know what any of these words mean? Do these visual statements on the wall connect with the young people?</td>
</tr>
</tbody>
</table>

3/16—Observing the nightly devotions. Worship time with sound system beside head caregiver. All children sing 4 songs loud and with sign language. Some kids close their eyes and look engaged in prayer. Some smile at me. Many look sleepy in pajamas for their night time routine.

| All 50 children who attend are snuggled next to one another on the floor. Caregivers sit near them. A preschool girl strokes the back of a newer elementary girl who is still aggressive while she adjusts. |
| It reminds me of a campfire night. |

| As the researcher, there have been just 3 times that I have been moved to tears in an observation. Once in the infant room, once in the medical clinic, and once tonight at devotions. All the children singing of God’s love, laughing, sitting so close to one another. This routine seems to play a big role in nurture. |

The excerpts from the weekly field logs noted in Table 16 provide a small glimpse of Orphanage Q’s atmosphere or context as seen in its environment, routines, and even the policies and procedures that impact ONA. This includes the intentional use of the mission, vision, and goal of the organization made visible on the meeting room walls. It’s visible during the researcher’s art experiences, as the remnant of an attachment-sensitive meeting still had the words “boundaries,” “attachment,” and “felt-safety” on the white board from earlier in the day. The nightly routine of devotions and nurture that the children visibly engaged in prior to bed is also included as part of this ONA atmosphere.

In addition, the policies highlighted in Table 17, are a dynamic part of this first ONA umbrella of atmosphere. This includes requiring children to be matched with a primary caregiver on the very first day that the child is introduced to that staff member by Director Q. Included is the child protection policy that mandates the volunteers’ agreement to not put children on their laps. All these things may build into the atmosphere a safe guard for relationships and the potential for the growth of love.
Table 17 Orphanage Q—Policies and Procedures

<table>
<thead>
<tr>
<th>Attachment-Sensitive Policies and Procedures at Orphanage Q</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child protection policy, boundaries for volunteers/visitors</td>
</tr>
<tr>
<td>Primary caregiver assignments</td>
</tr>
<tr>
<td>Phasing in new staff</td>
</tr>
</tbody>
</table>

The Orbits

In the initial research questions the focus was on the child-caregiver relationship, however, the orbits reveal that relational connections are far beyond dyadic. The second key umbrella of ONA conveys meaningful relationships at Orphanage Q as the orbits. The orbits represent relationships that take place alongside one another. They serve different roles but provide safe places and people to whom children and adults, alike, may bond. This interchange was observed as reciprocal. There was a mirroring and matching to this reciprocity, or a dance of attachment. This process seems to relate to the Director Q’s early mention of needing a child to be “online.” The online child is engaged in reciprocal attachment responding to the pulling forces of an orbit, just as gravity anchors a child onto his two feet on the ground. As trust and rapport is built, children are safely able to anticipate that their needs will take priority within those orbits.

The researcher spent weeks and months recording the layers of bonding and connecting she observed. As well, in eleven out of the twelve interviews each participant discussed the ways in which they had “forged a bond” or made a “special connection” with children in their classroom. They also spoke of the long-lasting connections related
to children who they continue to think about with love after adopted and discharged into someone else’s care. Some of the social workers had pictures of children from years past at their desk, both at Orphanage T and Orphanage Q. Some caregivers recounted these memories with tears and fondness. This key orbits umbrella looks at some of the behaviors that pre-cede these types of connections. But even more strikingly, the researcher noted in her journal a change in her perspective as she reflected on the nature of these connections, in their depth and breadth, at Orphanage Q:

It is like a ripple effect—like a stone that is thrown into the water. It creates an essential circle but simultaneously a phenomenon occurs and the ripple of circles that are formed around the initial circle cannot be separated. They occur together and the value of each is interconnected to the other. Have we focused so beautifully on the intimate and essential phenomenon of attachment within key dyads in attachment theory and neglected the simultaneous and vital circles of attachment being formed around the other in dynamic ways—even modeling the way for more circles of attachment to follow? And do more collective, community based cultures that depend more overtly on networks of connection have something to teach us about the vital interlocking circles of attachment that are possible and essential to the growth of love and relationship?

Researcher, March 16, 2017

It was during an interview with the head caregiver that just a few words pushed the researcher’s understanding of the children’s circle of care even father. She said, “We make a circle around the child.” She was speaking specifically about her practice of circling up the toddlers and speaking their name one by one, using a call and response activity to promote connection, laughter, and an understanding of routine patterns. She had captured on video this reciprocal interchange and she showed it to the researcher with a lot of joy. This concrete example reflected a much deeper phenomenon occurring as relational circles ripple out around the children at Orphanage Q. The following excerpt, though long, provides rich information regarding the many others in relationship with the
children at Orphanage Q and the ways these relate to the circles of relationship within the Filipino family system. Apparent is the fact that many circles of relationship exist:

**Researcher:** So, we’ve talked about the ways that caregivers connect with children, we’ve talked about the ways children connect with caregivers. What other relationships do you see happening here at [Orphanage Q]? Where are other people building relationships, and connections?

**W18:** I see social workers that are acting like “Ate’s and Kuya’s” or the older sisters and brothers who can help them. The primary caregivers act as mom, in each room, they act as the mom for each group. And the secondary caregivers are acting like aunts or uncles. And all of the kids are like brothers and sisters and the social workers are acting like Ate’s and Kuya’s, older brothers and sisters, if they need help with something they can ask them for help. So, just like a family, there are moms and dads, sisters and brothers, aunties and uncles, there are grandmothers who let’s say are always correcting them. Saying, “Shhh, oh, no!” Let’s say, they are the teachers! [Laughter] And Ate [Director Q] is the Mother. Because I am also looking at her as Mom. Mom is really the one who teaches everything. Yah, it’s like that. It’s like a family. With aunties and uncles but there are also friends of uncles. For example, there are the kitchen staff. They are also connected with the kids in a respected way. So, they say, “Ate, can I have more food please?” And they say, “You still have food there, you may have some.” So, it’s just like a normal house with an extended family! [Laughter] There are extended family members like aunties and uncles but also ninongs and ninangs—yah, god-parents. [Laughter]

**Researcher:** That’s excellent. What’s really meaningful about that for me is that part of my research is looking at how attachment theory is very strong. Everything that [Director Q] teaches about attachment is very strong. But sometimes I wonder about how it can be Western in its perspective. Sometimes we in North America look at family much, much, much smaller. And part of my research is looking at what about the Filipino family is much, much, much bigger?!

**W18:** [Laughter] Yah!

**Researcher:** Sometimes you have big families. Are there things we learn and practice attachment differently if we are thinking about a bigger family instead of only small? What you shared with me was really excellent. I believe some of the data I’m learning from my interviews is teaching me that we need other cultures to teach us about attachment from their cultures too, if it is different from ours. We need to all have that conversation.

**W18:** Yah. Here in the Philippines there are lots of different kinds of families that are extended. Yah, like in one house they live with their grandmother and the grandfather. And right next door is their auntie and uncle’s house, in the same compound. For example, in my place, there is our house and beside that another
This verbatim account of the head caregiver’s words on the many circles of connection taking place around the children at Orphanage Q speak volumes about the ways in which this phenomenon may relate to the inter-relatedness of Filipino culture and Filipino families. In Orphanage Q caregivers are not the only ones’ spending layers of time with the children in their care. Though the caregiver-child relationship is central to this study, to attachment theory, and to the attachment-sensitive policies and procedures of Orphanage Q, an emerging theme reflected the ways in which the mission statement in Orphanage Q may be read differently than first realized.

Orphanage Q states its mission is to, “To provide family-centered care and hope for children who have experienced trauma.” The Filipino context reflected a much richer definition than a Western understanding of a family-centered model. The researcher began to examine the ways in which the family-centered care had a contextually Filipino understanding of what family looks like. The researcher asked all twelve interviewees to teach her about all the relationships existing within Orphanage Q. Each interviewee added examples and stories that highlighted the breadth of relationships. Figure 7 illustrates the circle of circles with a dyad of child and significant adult (or child and another child) The child is represented at its center by a small red sphere and the caregiver or significant adult by the slightly bigger blue sphere. However, because of the dynamic nature of the ONA model, it should be understood that the sphere can simultaneously be representing one older child nurturing a younger child or one older staff nurturing a younger staff person. The other orbits of relationship are simultaneously emanating around this central phenomenon represented by the black surrounding circles.
This mention of staff people acting as “ate’s [big sisters]” and “kuya’s [big brothers]” like Filipino family members began to appear throughout multiple interviews. The researcher added to the list of concepts under the umbrella of core categories, the family network, and a Filipino cultural understanding of support networks. Both categories overlap one another as they challenge the researcher to note the ways in which an increased understanding of community relatedness may be a blind spot for Western researchers and attachment-sensitive specialists. The observation logs related to the Family as Network of Relationship and Responsibility is captured in Table 18. The observations and questions that arose reflect the researcher’s interest in the ways Filipino cultural practices and ideals may have uniquely impacted the social dynamics she observed.
Table 18 Filipino Culture—Family as Network of Relationship and Responsibility

<table>
<thead>
<tr>
<th>Date—Where/What</th>
<th>Observation description</th>
<th>Reflection</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/28—Boys &amp; W1 Common Room Play Area, Art Activity</td>
<td>Boys sweeping art supplies without being asked</td>
<td>Filipino culture and mutual responsibility? Or was this learned @ Orphanage Q?</td>
</tr>
<tr>
<td>1/9—PG5 walks away from playground without checking out or any process. I ask W5 to make sure PG5 is safe.</td>
<td>W5 states that it is PG5’s older brother and grandma that have come for her visit.</td>
<td>Speaks to the fact that many orphans do have relatives that could be options for kinship care. Is poverty, abuse, health needs the reason for unwillingness to adopt them? How many cases like this exist at Orphanage Q?</td>
</tr>
<tr>
<td>1/16—Before lunch I observe toddler room again. I am covered by children’s hands, legs, toys, and loud voices. Caregivers offer shouts of directions and children seem to bounce off one another. Two children have extreme neurological damage and are brought in from the medical clinic to interact with toddlers their age. Culture at play?</td>
<td>Are the children being given time to explore that is understood as “free” to be kids? Or is this chaos and unregulated play within a very small room with 3 caregivers, and 20plus children perceived as age-appropriate? What cultural understandings of child behavior exist?</td>
<td>Culturally I am curious about the value placed on volume. There seems to be an acceptance of the chaos and shouting. Is this unavoidable in a tiny room with so many children who’ve been abused, neglected and abandoned?</td>
</tr>
<tr>
<td>One of the hearing-impaired support staff workers reaches for one of the Infants with a smile as she passes by.</td>
<td>How many people have connections with children even in roles at Orphanage Q not in direct care?</td>
<td>Are these relationships possibly like extended family members between Filipino or Asian family systems?</td>
</tr>
</tbody>
</table>

This inquiry into Filipino culture and family networks prompted the researcher into constant-comparative reading of new literature resources. Keller proved to be a timely resource. Her studies focus on the formative impact that a more collective understanding of community and relatedness has in non-Western child rearing and attachment. Keller stresses the majority of the world is not Western, middle-class. These diverse cultural points of view alternatively result in diverse forms of child socialization:

Infants who experience an early distal socialization environment of child-centeredness with exclusive dyadic interactions that are mainly channeled through face-to-face contact, contingent responsiveness toward positive infant signals, and elaborated conversations co-construct individualized psychological bonds. Conversely, infants who experience bodily proximity with several caregivers and contingent responsiveness to negative signals co-construct communal, hierarchically organized relational patterns. On the one hand, individual mentally based attachment relationships may result, and on the other hand, a generalized
conception of trust in the (physical) availability of support may be the consequence.\textsuperscript{213}

Keller’s concept of “a generalized conception of trust in the availability of support” is of profound importance when examining the ONA atmosphere and orbits that provide safe places for children who’ve experienced harm and trauma. Throughout the semi-structured interview phase of this study, the researcher heard repeatedly the ways in which Orphanage Q was “like one big house with lots of children living together.”\textsuperscript{214}

One caregiver worked in different caregiving roles over a ten-year period went on to expound on her familial connections, not only with the children in her care but also her fellow employees, saying, “I am like a mother and a sister to the children and to the younger caregivers, because I have been here a long time now, so I am a primary caregiver.” Another caregiver noted the ways that children could “mingle with another caregiver” and even go to their “Tita [aunt] in the kitchen who sometimes allows the children to cook with her,”\textsuperscript{215} as she referred to the daytime cook. This same cook was observed feeding a young adult, special needs orphan after final lunches were served.

Observations and participant narratives seem to point to systemic attachments present within the whole network of relationships in Orphanage Q, which challenges classic attachment theory and points to the need for contextually narrated attachments in broader community-based relationships. The researcher’s peer debriefer directed her to read Carandang’s writing on the Filipino family system:

One has to look into the total living unit or the Filipino ‘family’ in order to know what the family system actually consists of. It may include the grandparents, an

\textsuperscript{213} Heidi Keller, “Attachment and Culture,” 186.

\textsuperscript{214} W11, Medical clinic caregiver, interview with Aisling Zweigle on February 6, 2017.

\textsuperscript{215} W4, preschool girls’ primary caregiver, interview with Aisling Zweigle on February 13, 2017.
unmarried aunt who is supporting the whole family financially, an uncle, the yaya [child’s nanny or helper] who knows the child more intimately, a cousin whose parents live in the province, or an unmarried daughter with several children. In our extended family system, the child can get lost and may have a difficult time finding a way to be recognized as a unique person. To satisfy his needs, he has to attune himself to the different adults in the family, as well as to his siblings. Aside from this, he may have to contend with the presence of his aunts, uncles, the ate or the kuya (older brother). In such an interwoven system, the dynamics and interrelationships become more intricate.

The methods and techniques used in Filipino family therapy, however, differ from the West, since the composition of our families and our ways of relating with one another differ from those of the West. Although techniques—such as the use of the ate or kuya, the lola, or the inclusion of the yaya, and the like—are similar to some Western methods, the more subtle ways of making family members confront issues are uniquely Filipino.216 [Italics and bold print is Carandang’s]

Reflection on the role that cultural understandings and practices plays in the phenomenon of relationships present in Orphanage Q was identified as a vital category of learning and potential theory for this study. The data presented in this investigation influenced the researcher’s next steps in both observation and interviews. This can be vividly seen in this longer excerpt from one of the final semi-structured interviews that took place and serves as evidence of the researcher’s learning as dynamic exploration took place:

**Researcher:** That is really good. It makes me want to ask one more question. So, you’ve just said that you have one house, then another family member’s and another next to that. All in the same compound and all interconnected. Kinda like a network.

**W18:** Yes.

**Researcher:** So, tell me more about the ways you see that kind of community connection happening here in [Orphanage Q]? You said, the social workers sometimes are the ones to help with homework or help with a problem that is happening at school. You said that the kitchen staff when they help with getting

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more food are kind of like aunts or titas. Can you think of any more examples that might be happening here?

W18: I think it’s like a body that is functioning. Let’s say, it’s like the organs. [Laughter] For example, the caregivers are the heart that the kids cannot be healed if there is no heart. And the kids are the veins. As the heart is pumping it pours out the blood and that is the reason the kids are functioning, the veins are functioning. But we need more. There is the brain. That is “Ate [Director Q]!” [Laughter] We need more ideas on how to do everything more properly! And the therapists are the livers, the teachers are the lungs. The social workers are the large intestine. [Laughter] It’s like the whole organism, the organs must be functioning, we are a collaborative team. The whole team needs to work and have connections with each of the branches. For us to have to work better and to function, we need to be a team. We are not just a family, we are a team. There are office workers who are working on the papers for the adoptions and we have Teacher [Name], the therapist, doing some examinations to them and the play therapy that really helps them, and the other teachers who get some of the kids, in a school form. We need to work and have good communication together and it’s all for the kids.

The very first participant chosen as a potential interviewee was the palliative care and medical clinic caregiver who spoke with the researcher about her connections with so many children who were adopted or who were now preparing for adoption after two or three years at Orphanage Q. She was observed caring for children who were dying with immense attentiveness and gentleness in a way that was moving for the researcher. The researcher wrote in her journal that day, “If this is not attachment then I wonder what is? If these children could speak what would these children call it? Someone loves them by coming by their side with what they need each time they moan. I feel like I am standing on holy ground.” This caregiver’s drawing, Figure 8, weeks later displayed the interconnectedness of the orphanage as a “house” and displays the various age-grouped bedrooms as the fingers on one hand. It is noted that Director Q is strategically placed as at the wrist or the base of the hand:
Also, important to ONA orbits is the exploration of behaviors which caregivers and other staff members use to connect with children, that is the dyadic, or one-on-one caregiver relationship that is still of paramount importance within ONA as a system of care and nurture. Pictured in Figure 9, B14’s drawing of his primary caregiver shows her in close proximity to him caring for his wound. Throughout the observations, the caregiver-to-child relationship was continually noted. Key behaviors used to comfort, to redirect, and to connect with children were documented.
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11 years old, Elementary Boy B14, with primary caregiver

“The girl, Ate W1, is helping me because I hurt myself when we are playing tug game. She is helping me with my owie.”

Figure 9. Drawing by B14, 11 years old—This boy drew a picture of himself with his primary caregiver. He arrived at the orphanage 3 years ago. He and his two other siblings, were abandoned by their mother. Their father and their two-year old sibling died in a house fire. The care he is provided at Orphanage Q is set within a circle of circles.

These observations were enhanced by triangulation as multiple caregivers spoke about attachment-sensitive behaviors in their interviews and the researcher observed those behaviors in daily interaction with the children. The caregivers’ narrative of attachment and connection also mentioned the attachment training that Orphanage Q had given them to promote attachment-sensitive interactions. Many of these behaviors related to the attachment research noted in this study’s theoretical framework, facilitating connection and the growth of love. Table 19 outlines examples of these connection strategies. An exhaustive list regarding staff-to-child connection strategies are presented as Appendix J. The themes include holistic ways Orphanage Q’s children were cared for. Moreover, these relate to the themes in the researcher’s initial research questions, that is:
how do caregivers initiate connections to children, what other relationships exist in Orphanage Q, and if attachment and the growth of love occur, what does it look like?

Table 19 touches on these research question themes, Appendix J expands upon them.

<table>
<thead>
<tr>
<th>Table 19 Caregiver and Orphanage Staff Initiated Connection</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1—Physical Touch and Nearness</strong></td>
</tr>
<tr>
<td>❖ Proximity or staying near the child throughout the day, (W1, W2, W4, W5, W9, W11)</td>
</tr>
<tr>
<td>❖ Providing art activities in your room so one-on-one time is possible for one child nearby, (W1, W3)</td>
</tr>
<tr>
<td><strong>2—Community and Social Networking</strong></td>
</tr>
<tr>
<td>❖ Large group prayer, devotions, family-style meetings, (W18)</td>
</tr>
<tr>
<td>❖ Encourage children to not go off by themselves, stay with the group (W1)</td>
</tr>
<tr>
<td><strong>3—Facial affect, Visual and Verbal Cues</strong></td>
</tr>
<tr>
<td>❖ Looking a child in the eyes, (W1, W3, W4, W5, W9, W11, W18, W22)</td>
</tr>
<tr>
<td>❖ Matching a nonverbal child’s sounds or gestures with playful sounds, (W9, W11, W22)</td>
</tr>
<tr>
<td><strong>5—Consistency of Care and Structure</strong></td>
</tr>
<tr>
<td>❖ Being willing to spend lots and lots and lots of time with a child, (W1, W3, M2, W21)</td>
</tr>
<tr>
<td>❖ Providing for a child’s hygiene and self-care needs (W1, W3, W4, W9, W11)</td>
</tr>
<tr>
<td><strong>6—Boundaries and Correction</strong></td>
</tr>
<tr>
<td>❖ Reminding a child to be kind but not shaming them in front of others, (W18, W22)</td>
</tr>
<tr>
<td>❖ Helping children negotiate conflict, (W1, W18)</td>
</tr>
<tr>
<td><strong>7—Playfulness and Creativity</strong></td>
</tr>
<tr>
<td>❖ Laughing with a child during imaginative play, (W4, W18)</td>
</tr>
<tr>
<td>❖ Outside play catching a child who jumps, off climbing bars or steps, into your arms, (W3)</td>
</tr>
<tr>
<td><strong>8—Trauma-informed Care for Individual Child Needs</strong></td>
</tr>
<tr>
<td>❖ Knowing a child’s fears or triggers from trauma, (W1, M2, W3, W11, W18, W22)</td>
</tr>
<tr>
<td>❖ Making it a priority to answer every time a traumatized child calls for you, (W3, W22)</td>
</tr>
<tr>
<td><strong>9—Security and Safeguarding</strong></td>
</tr>
<tr>
<td>❖ Staying close to a child until they fall asleep at night, (W3, W4, W5)</td>
</tr>
<tr>
<td>❖ Being in the courtroom when a child is faced with someone who hurt or raped them, (W22)</td>
</tr>
<tr>
<td><strong>10—Skill Building</strong></td>
</tr>
<tr>
<td>❖ Preparing a child for adoption with a keepsake photo book of where they’ve been and where they are going next, who they’ve loved and who they will be loving next, (*PP, W22)</td>
</tr>
<tr>
<td>❖ Making sure a child is ready to sit closer to an adoptive parent who has arrived, (*PP, W22)</td>
</tr>
<tr>
<td><strong>11—Commitment</strong></td>
</tr>
<tr>
<td>❖ Not giving up on a child even when they reject you, fight you, or ignore you, (W1, W22)</td>
</tr>
<tr>
<td>❖ “I will not magasawa” (I will not give up on you) (W1, W11, W22)</td>
</tr>
</tbody>
</table>

*PP – Pilot Project observations and interviews

**All other name codes refer to Orphanage Q caregivers, social workers, director, and support staff.
Especially poignant was an early drawing done by an eight-year-old boy who drew himself and his favorite friends in multiple rooms. Throughout the drawing of the orphanage building and in each room, he sketched his primary caregiver alongside them. When asked who it was that kept him safe at Orphanage Q he said his primary caregiver’s name with a smile. It was this caregiver, W1, that was especially noted as being intentional about her attachment practices with the boys, using proximity, touch, and verbal re-assurance. His drawing is included below in Figure 10.

Figure 10. Primary caregiver drawn in every room beside this boy and his friends.

The Wavelengths

The final umbrella of ONA includes the influence or *wavelengths* that key people in the network exude in relationship with others. These wavelengths exhibit: the
matriarch phenomenon, the apprenticeship model, and the role of tagasalo. These people are noted for their commitment to love and to model a fiercely committed love for those around them. This relates to the researcher’s sets of initial research questions. These wavelengths, represent specific caregivers connecting intentionally with specific children, creating a bond. As well as children initiating connections with caregivers (and other children) and the dynamics of other relationships that occur within Orphanage Q. These wavelengths go on to impact not only the immediate relationship but also, through modeling and the scaffolding of others, those relationships have far reaching impact on parts of the system that not anticipated.

The significance of the Matriarch as Model of Committed Love cannot be overstated. This theme was clearly evident in the lives of children and staff alike throughout observations, interviews, and art documentation. For example, in drawing with a group of elementary children the researcher asked, “Can you draw me a picture of your house? Followed by, “Where is love in Orphanage Q?” The artists (G3, G11, G15, B13, and B15) began to draw. Each of them were in their past either abused, neglected, and/or abandoned. G15 took a few of the art materials into the other room and began working on letters for Director Q. G3 and G11 both drew pictures of the orphanage building with small stick people. The people were labeled with the child’s name, their close peers’ names, their primary caregiver’s name, the head caregiver’s name, and Director Q’s name, who was labeled “Mom.” The researcher noted G11’s drawing.

Figure 11 shows the artist standing alongside “Mom” upstairs in Director Q’s apartment. She spent the remainder of the drawing time writing and re-writing in English a request to stay upstairs. Each note read, “Dear Mommy, Can I go up to you house?”
Figure 11. “Dear Mommy, Can I come up to your house?”

The researcher made notes about the matriarch phenomenon in observation logs, as early as the first day of her weekly visits. Table 20 highlights just a couple of the logs:

<table>
<thead>
<tr>
<th>Date—Where/What</th>
<th>Observation description</th>
<th>Reflection</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/28—Director Q comes to the main floor for a short visit from upstairs office and home. She uses proximity and direct communication. Mutual respect?</td>
<td>Many children crowd around her. They show her things they’ve done. She greets and congratulates in English, and reprimands in Tagalog about expectations for particular child’s behavior. Children hug her, wrap around her, jump on her</td>
<td>Phenomenon I was not expecting: Reminds me of children seeing parent at the end of a long day at daycare or school. They come alive! Is this depth of relationship? Or is this longing? Is Director Q important to a few? Or all children?</td>
</tr>
<tr>
<td>12/12—Three girls and three boys ask to draw with me. G15 draws pictures with me in my notes. She draws a “house” and says it is here at Orphanage Q. She asks me to write the words over and over again: “I love you very much, Mom [Director Q nickname]” This is the same girl—G15, that W3—primary caregiver, playfully puts on her lap and whispers into her ear.</td>
<td>This is the same girl who greeted the Director Q earlier in my observation notes with intense attentiveness, reminding me of children who run to their parent at the end of a day at daycare. This girl G15 is very assertive, she puts herself on my knee also. I re-direct her to comply with protection policy for strangers.</td>
<td>Is this girl attached to the director? Or is she hungry for attachment? Has she been here long? Or is she new? Is she meaningfully connected to her primary caregiver also?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>She is rough with another child, I re-direct her until the primary caregiver for that toddler arrives to bring him to her side. Security from primary caregiver? Intentional?</td>
</tr>
</tbody>
</table>
The researcher wondered if an exploration of the relationships the children had (or desired to have) with Director Q was a meaningful next step. Diversifying the sampling of children seemed essential. The older children were home all day, the following week, due to a municipal holiday off school and a few of the girls upstairs were asked to draw with the researcher. Using the help of the translator to assist in communication, two girls, 12-year-old G1 and 14-year-old UG2 agreed to draw. Both girls were simply told, “Tell me about your relationships at [Orphanage Q]. You can use words, or symbols, or pictures to teach me about who is important to you.”

It was at this time that G1 began to draw a portrait with physical characteristics strikingly similar to director of Orphanage Q, as seen in Figure 16. G1 also wrote, “I feel safe with [Director Q] because she gives us food to eat. She also gives us bed to sleep, toys and clothes, and sends us to school.” This description was all the more compelling a letter once the researcher familiarized herself with this girl’s case file. It was then the researcher realized how badly abused and neglected G1 had been in her family of origin. It was her responsibility to feed her siblings who were literally starving to death. They were beaten if asked for a drink of water and forced to beg their neighbors to stay alive—these factors make G1’s letter to Director Q even more powerful.
UG2 immediately began to write these words, “I feel safe with Ate [Director Q] and the other social workers.” UG2 incorporated Tagalog and English descriptions of how Director Q was the one who “looked for us” and “cared for us.” It included her belief in the fact that even when she was bad Director Q would never send her away because “she loves me and brought me here and she showed us she can be our mom for now and will find a family for us.” She also included the names of her siblings and talked about their importance to her. She explained that social workers helped her when she had difficulties or needed help learning how to do her homework.

Previously during one of the researcher’s interviews with Director Q,\(^\text{217}\) when asked about her unique relationship with some or all the children at Orphanage Q, she stated:

\(^{217}\) Director Q interview with Aisling Zweigle on January 30, 2017 in the Orphanage Q medical clinic.
I think too, there is an understanding that the one who is going to protect them is me, the one who is not going to leave them, the mother bear, that’s me. The mother lion. It’s the mother-bear syndrome. So, there are those who think I should have nothing to do with them. They say, as the director, I should be the one who just sits in my office all day. But at the end of the day, when someone needs to be in the court with a child who has to sit and look at the father who raped them, at the end of the day when they are in the hospital, I am there...

At the new site [a second orphanage she assists with], I have only 20 children. I have 5 staff that I have re-trained, me and [the head caregiver] have trained them and they are excellent. I have one home supervisor. And they call me Mother. I didn’t tell them to call me that. I told them, “Call me Ate [Big sister Nickname], you don’t have to call me Mrs. [Sir Name]. But there is this sense that I am the Mother, when I arrive the children run to me, “Mother [Nickname]!” I didn’t teach them that, so there has to be something culturally. It’s not because I pay them. It’s not that kind of suck-up relationship, be nice to the boss. It’s not like that. It’s real relationship.

I have equated it to the villages, when they have one old grandmother. Not that I am an old grandma [laughter]. But they do have the matriarch who hopefully imparts, who sits by the children when they have needs... And it may be cultural. It may be that in this culture they need that. They need that strong matriarch. I mean it is one of the reasons that I live here... It changes the dynamic... I think one of the biggest treats they can have is that on Friday nights and Saturday mornings, they can sleep upstairs. I mean they are ok downstairs. It isn’t a perfect set up. It is institutional, it’s a residential care set up. But it is family-style. ... it’s having one of Mom’s apples [upstairs] and then they go down again. My home is not off-limits. They’re allowed to go upstairs...if I wasn’t on site it would change the dynamics... This was the point of my research. If institutional care is done therapeutically, it isn’t the worst place for a child. In fact, it is very therapeutic in this culture. As you said earlier, it needs the networks. Filipinos were built for community. That is how God made them.

In this study, there have been times when a powerful piece of data has come to the researcher’s attention just as she was attempting to articulate something nearly visible in the emerging theory. As the researcher worked to find words to express the matriarch role in the life of a child who has not been cared for, Director Q posted the following poem, on the Orphanage Q Facebook page. It powerfully puts into words the role of a matriarch figure who protects with a fiercely committed love against all odds. It was posted with a photograph of a small white casket that she reportedly sat alongside:
There are no flowers.
There are no mourners.
Just an empty chapel.
And the tiniest of caskets, made of scrap wood, haphazardly painted white.
And me.
And as it seems to be appropriate, I ponder life and death.
And I come to the conclusion, there is nothing really to be pondered.
There are facts. Just facts.
She was unwanted. Unloved. Uncared for.
And she came to us far too sick, and far too damaged.
I know we prayed for her, sang to her, held her, stroked her and loved her.
We cried tears when the angels came to take her.
And we held her until she turned cold.
And nothing was as it should be.
So I sit. And stare somewhat blankly. Thinking.
About children. And mothers. And life. And death. And sorrow.
There should be tears of grief, of pain, and of anger at the injustice.
I sit alone in the quiet chapel and wait.
And I am relieved for the tears that finally come
And stain my hot cheeks.
Tears. For her.
It is as it should be.

NOTE: [Orphanage Q] often takes children who are considered palliative care, with nothing more to be done than give them love. The reality of a country as the Philippines, is that many very sick children are indeed abandoned and left alone to die. We are honoured to stand in this gap." April 1st, 2017 Facebook Post Director Q

The researcher referred to her audit trail of memos and field logs and found that there were similar questions about matriarch of sorts present at the pilot project Orphanage T as well. It was there that the researcher in November 2016 noted that a younger toddler, referred to as G3, was seemingly unengaged with the caregivers, the other children, or even her brother who played alongside her. As children ran around her, “running, squealing, crashing, and climbing” G3 seemed “sensitive, weepy, and depressed.” She lay “on the floor, touching her hair with no toys or interaction.” The researcher wondered if G3 had a connection that was meaningful to her. As the
researcher was writing this question in her field journal observation log, the head social worker entered the room. Next these words were documented, “Suddenly it seems like G3 has come alive!? She moves and engages in vocal play.” And in the interpretation and analysis column is written, “Is this a meaningful connection with the social worker who oversees all the children’s care? Is this a factor I should pay attention to? As soon as the social worker left again, G3 lay back on the floor looking uninterested. Children raced around her again.”

The researcher’s exploration of the matriarch phenomenon prompted her to investigate how many children would choose to draw Director Q if asked, “Who is someone that is most important to you?” The researcher came on two consecutive nights in March 2017 and met with fifteen children on the first night and eighteen children on the following night for a total of thirty-three children included in the art experiences. When a few of the earlier impromptu art sessions with the preschool girls and younger elementary boys are considered then a total of thirty-seven children have artwork included in the researcher’s binders as data. The children were aged six-years-old to fourteen-years-old. Pictures of Director Q, Figure 13, quickly emerged, often with the name, “Mom” to represent her. Each time this was seen the researcher would ask, “Is that Mom here?” to which the children would respond, “Mom, [Director Q Nickname].” There were also drawings of primary caregivers, of the head caregiver with additional staff people, of sibling sets, and Orphanage Q peers. Some of the pictures collaged these groups of important people together. Some drawings expressed how much God loved them or were sketches of a smiling Jesus and some collaged these themes together.
The different themes and trends noted in the children’s drawings portray which important people arose more often than others in Artists and Artwork, Table 21, on the following page. Some of the drawings hold one single person or theme. Some of the children seemingly represent multiple circles of circles, or people of importance and influence in their lives at Orphanage Q.

**Table 21—Artists and Artwork—Who is important to you?**

<table>
<thead>
<tr>
<th>Art Themes</th>
<th>Boy</th>
<th>Girl</th>
<th>One Theme Only</th>
<th>Two Themes</th>
<th>Multiple Themes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Caregiver</td>
<td>4</td>
<td>6</td>
<td>2</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Other Caregivers</td>
<td>1</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Other Staff</td>
<td></td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director Q</td>
<td>4</td>
<td>11</td>
<td>8</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Orphanage Q Peers</td>
<td>4</td>
<td>4</td>
<td></td>
<td></td>
<td>2</td>
</tr>
</tbody>
</table>
Though the Director Q is the more dominant theme, as seen again in Figure 14, and she was drawn on her own more often than any other theme appears on their own, the ONA as understood as atmosphere, orbits, and wavelengths all have representation in the children’s art.

Figure 14. Director Q—“My Mother is Pretty” drawn by a 11-year-old girl

The third ONA wavelengths umbrella as expressed in the influences present within the atmosphere and orbits, is the role of Apprenticeship. The director of Orphanage Q eluded to the role of apprenticeship as she spoke about the ways different family members share the responsibility of child rearing in the Philippines. She also
narrated the way this dynamic is seemingly reflected in her own work with younger and older children in her and Orphanage Q’s care. The apprenticeship model is noted in both Table 22 observation logs, below, and as well as the director’s interview excerpt and the head caregiver’s interview excerpt immediately following:

**Researcher:** Are there things we miss because we have set-things we are looking for but we have fewer studies that speak specifically to other cultural contexts where attachment takes place differently?

**W22:** Yes! Well, look at American families where you have a Mom and Dad and they come home from work and are with the children for a little bit.

**W22:** But in this culture, it’s ok for the older sister [Ate] or even the older brother [Kuya] to attach and sometimes even act as the primary caregiver, or other family members its ok for them to provide for that child’s needs. You end up with a whole network that provides for the child’s needs. Like I have a 13-year-old upstairs that is my 2nd [caregiver] for my little 2-year-old. My little 2-year-old has some issues. And when I’m not here [the 13-year-old] is just as good with the 2-year-old as I am. Have I taken away that 13-year-old’s childhood? No, I haven’t taken away her childhood! [Laughter] I am making her into a stronger, more solid caregiver. She knows how to give, she has those …skills.

The head caregiver speaks of the scaffolding and modeling that takes place among new children with their caregivers as well as the other Orphanage Q children who act as vital teachers. As expressed in her closing comment, she too maintains her role as a learner that is also being healed:

**W18:** And the way they use toys. At first the tendency is they are stealing toys, they are getting toys from other kids, because maybe they didn’t have toys in the past. And now, it’s healing because as time passes, they learn how to share. They learn to say polite words like, “Can I borrow please?” and “Thank you!” That is also because they are getting connected to the caregiver. They are learning from the caregiver.

**W18:** They learn what the things are that are right for them. That is now part of their knowledge. They learn to use polite words every time they are talking to some kids and some people. It’s healing in the way that in the past they didn’t know those things, but now they are learning... Especially, I am also one of those people who got healed. [Laughter] The staff are also learning.
## Table 22 Attachment Apprenticeship—modeling/responsibility

<table>
<thead>
<tr>
<th>Date—Where/What</th>
<th>Observation description</th>
<th>Reflection</th>
</tr>
</thead>
<tbody>
<tr>
<td>12/12—A young toddler boy wakes from his nap with tears. He walks to play room where 7 older girls are playing. One teen girl (orphan? Sibling? Helper?) picks him up and sits with him, he stops crying. Toddler plays with another older girl from W3’s room who is visually impaired. She plays with him and then when his caregiver W7 finds him she allows the older girl to walk him to his toddler room.</td>
<td>These relationships of care and connection seem to go beyond the caregiver to child relationships. The older orphans have relationships with the other children too. Are they in an apprenticeship role, modeling connection and supporting children as part of a bigger family? A bigger community?</td>
<td>Are these existing relationships meaningful? Are there particular older children who are especially close to particular younger children? How many are actually providing care?</td>
</tr>
<tr>
<td>1/26—Director Q past interview refers to an orphan that is a teenager and is actively helping with the care of children.</td>
<td>(This is the child referred to on 12/5 being more direct and rough with a couple of younger children at the upstairs party. See below)</td>
<td>Teen suffered abuse and neglect. Then received years of direct care from Director Q. Phenomenon of attachment apprenticeship? Does this care from teen, learning HOW to care for children, happen more often in Filipino culture due to roles and responsibilities within the Filipino family?</td>
</tr>
</tbody>
</table>

As documented above, there seemed to be older orphans who acted as security figures for younger children and put into practice the connection and caring they observed and received. Thus, they are acting as apprentice in a sense, under their own attachment figure(s). Most striking was the ways in which the director of Orphanage Q stated she was empowering one of the young teens who helps to care for the little children. This girl had experienced abuse and neglect but connection and caregiving was being modeled for her by someone who was standing in the gap. This dynamic further enhances the security of ONA as love and nurture are both provided and modeled. More than that, it seems rooted in a community of helpers that potentially suits the context of Filipino culture and family systems. It utilizes the matriarch who creates apprentices throughout the whole organization, as well within each child she welcomes to Q.

Apprenticeship is seen in children and staff members as they are all agents of change,
modeling attachment. The Director and the researcher discussed this phenomenon during the axial coding phase prior to the emergence of the core category:

Yes, and in American families, boys are not often taught to nurture, they aren’t often taught to use touch and I think that goes back to Western roots where they are taught they should be outside playing instead of doing the job of nurture in the home. The 7-year-old that I talked about earlier, is super sensitive to crying, and I think that comes from having heard his baby sister being harmed and crying as I mentioned. What I did to help him to deal with that because I could tell that was a trigger for him, I taught him how to hold a baby and comfort a baby when it was crying. He learned how to empathize. And he says, “Mom, can I hold the baby?” And I say, “Yep, here you go.” And now when a baby is crying he is the first one to go to them and say, “Stop crying, you don’t need to cry, what do you need.” He’s like a little mom. But we don’t always teach that in the West.

Director Q, Jan 30, 2017

There were some children who chose to draw their siblings when asked, “Who is someone important to you?” The one they chose sometimes consisted of whole sibling sets, as seen in Figure 15, an elementary aged boy who sketched his siblings. Following the drawing, an excerpt from a confidential case file highlights the value of understanding Filipino family culture and the responsibility that is given to siblings as protectors and leaders for the other children bigger family systems:
Statement in case studies on Filipino Family Culture:
Filipino culture places high value on family and belonging to groups, or acting in the best interest of a group and this characteristic is displayed prominently in sibling groups. Filipino sibling groups are unique in their relationships with one another. While siblings are individuals, their identity is found in belonging to their sibling group. The oldest child, the “ate” [big sister] or “kuya” [big brother] is the leader of the group. This child is seen as the protector, and he or she is the one the rest of the siblings look to for guidance. The oldest child is the one who sets the tone for the rest of the siblings. Leadership then falls sequentially, as the next oldest child is viewed as a leader as well. The youngest child or “bunso” is viewed as the baby is viewed as the baby of the family and in need of care and protection by all of the siblings. Siblings are individuals with their own personalities and issues; however, they prefer to be together rather than alone, and they depend on each other to overcome their problems...
It is important to remember that as a sibling group, adopted Filipino siblings will not integrate into a family as individuals but as a unit. They are already established as siblings and as their unit, and cannot be ‘inserted’ into a family based upon their ages. A successful integration into a family is one in which the siblings’ inherent identity as a group is respected and not forced to change or separate. Rather than expect the children to fall in line with children already in
the adoptive family, the children will act as a sibling group coexisting with the already established sibling group.\textsuperscript{218}

The term tagasalo is a Tagalog concept that refers to someone who “catches” or in other words rescues, or provides. Filipino clinical psychologist and family therapist suggests this concept as a way of defining someone within a Filipino family system that rises up as the one who will manage and help, even stand in the gap when there are problems, stresses, and crisis. Tagasalo is helpful in articulating some of the social phenomenon occurring in multiple circle of circles within ONA. This includes the matriarch, the caregivers, the fellow staff people, and the apprentices, as they step in the gap of the child’s crisis (neglect, abuse, abandonment, and loss) and catch or secure them.

Using the constant-comparative strategy, the researcher went from data to literature and theory and back to data again to test this concept of tagasalo. The researcher asked the home school coordinator and the head caregiver about who the tagasalo was at Orphanage Q. The head caregiver drew a picture, Figure 16.

\textsuperscript{218} Orphanage Q confidential case file excerpt, page 16, reportedly noted in each of the child’s file for contextual information regarding the priority of sibling relationships in the Filipino family system.
The head caregiver noted that the tagasalo is someone who wants to know about everything in a household, someone who wants to deal with and solve problems for the wellbeing of the family as a whole. Her picture clearly articulates the ways in which the tagasalo can be leaned upon as she uses her strength on behalf of the others in her household. Carandang notes that tagasalo is:

“A common tradition in Filipino childrearing is entrusting to older children the responsibility of attending to younger siblings. The eldest girl, or ate, and the eldest boy, or kuya, are both expected to have the authority and responsibility in
the household next to the parents. More commonly, however, it is the ate, more than the kuya, who shoulders the responsibilities related to the household.”

Carandang also notes the way that a person’s identification with the whole family and the whole family’s needs, coupled with a willingness to live in a family home even into adulthood with extended family members, can by Western psychological definitions be perceived as a person who has poor differentiation. Carandang suggests that this example carries “very important cultural considerations.” This is because “in the Philippines, living with one’s family of origin even after marriage is a rather common practice among women (as well as men).” This speaks to the ways in which tagasalo may not be fully understood as healthy ONA and attention to the network’s needs and a social relatedness approach to problems and solutions worked out by someone who stands in the gap for another. When the researcher asked the head caregiver again, “Who is the tagasalo here at Orphanage Q?” She quickly responded without hesitation, “Mom [Director Q]!” The home school coordinator took the researcher aside later and said, “But we are all tagasalo for one another. When another social worker needs me to catch something for them, I do that. And they do that for me too.” This profoundly speaks as evidence of ONA. The dynamic tagasalo exhibited in Director Q is set within a network of others who are tagasalo for one another as help is needed. This becomes a part of the atmosphere, as well as displayed in multiple orbits. It is vividly expressed in the wavelengths exuding from the matriarch(s), the apprentice(s) and the tagasalo within

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219 Arellano-Carandang, “Filipino Children,” 47. Carandang also discusses the “times when the need to salo becomes unconscious, indiscriminate, and compulsive—leading to negative consequences for the rescuer and the rescued.” She refers to this as the “Tagasalo Syndrome.”

Orphanage Q. Carandang even notes a family whose mother became ill after acting as the tagasalo and whose son became in effect the “Jr. Tagasalo” or as ONA suggests, the apprentice, stepping into the gap to secure or to catch those in need of care.

This social phenomenon may also be understood as part of the spiritual narrative present in Orphanage Q, as well, which understands God as the ultimate One who rescues, catches, and secures. This relates to this study’s exploration of the “grand narrative of attachment” represented within the Old and New Testaments. A Father God who is the ultimate Provider, enters the world as an incarnate Son—Christ the Savior King, who stands in the gap and makes salvation available to one and to all. As well, the Holy Spirit intercedes on behalf of Christians, catches, or rescues those who are weak as part of this Triune God, offering love, security, and life. This God redemptively and incarnationally serves Christians as One to be imitated in an apprenticeship most often referred to as discipleship. The image of Jesus Christ and of a Father God, was thus, drawn by some of the children in response to “who is most important to you?” Figure 17 shows a 6 ½ year old boy’s, B13, drawing of Orphanage Q’s building, his siblings, and friends, all kept safe by God.

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B13 drew a picture of the Orphanage Q as his house with sets of children sleeping and playing, including his siblings who also live with him there. When asked, “Who keeps you safe in your house?” he replied, “God!” Other children and youth drew pictures of Jesus and added words about his love for them, as seen in Figure 18.

“God is important to me because he gave me eyes to see and lips, he gave me life. Mom is important to me she help me when I’m outside.”

Figure 17. “God keeps me safe?” at Orphanage Q

Figure 18. Matriarch Phenomenon and the Grand Narrative of Attachment
The findings of this study were dynamic and worthy of extensive inquiry, investigation, and reflection. The emergence of the ONA theory conveys a complex set of relationships as they were observed and described in participants’ narratives. This also includes an atmosphere that sets the stage for the growth of love. The researcher is grateful for the diverse set of Orphanage Q’s staff people and children who acted as teachers about their unique context. They entrusted this researcher with findings on the social phenomenon of attachment as experienced in the Filipino cultural context of Orphanage Q. It was observed as an attachment model rooted in the development of dyadic child-to-caregiver connections, all the while its interconnected series of circles, or circle of circles—COC’s—were dynamic and complex. Their influence served as wavelengths in the ONA and moved beyond the dyads. The ONA also exhibited the director as a matriarch connected with her apprentices, learning about attachment and passing it on.
CHAPTER FIVE
SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Overview

*I knew that, well, I knew that a bond, poetically speaking, a bond was forged. What I had to do was step back. What you have to do as a primary caregiver in therapy, or therapeutic situation, is you have to step back. You don’t matter. It doesn’t matter how tired you are, how angry you are, how disgusted you are, it does not matter, because it’s not about you. And in no way am I perfect about this. But it is a completely selfless act. You have to decide to be the one that says, ‘I will be the one that turns you online. I’m going to be the one who brings you back.’ ... Those kids, they have come back from death. They’ve come back from death and they’re beautiful! They know they’re going to get adopted.*

Director Q, January 30, 2017.

This study examined Orphanage Q as a non-Western setting, serving children-at-risk where attachment is a stated goal. The researcher’s central research question was:

*what is the nature of relationships between children and caregivers in a residential care setting?* The research began there but its focus expanded outward to the multiple dynamics present in the many additional relationships at Orphanage Q. The research questions were broad by design and conveyed the researcher’s explicit desire to scaffold current attachment theory for the Filipino cultural context, allowing a grounded Filipino theory to emerge. An open stance facilitated the emergence of culturally grounded theory, as the researcher attended to multiple dynamics, including:

- How the caregivers connect to and relate to the children at Orphanage Q, noting the unique characteristics and factors; Research question set #1,
• How the children connect to and relate to the caregivers at Orphanage Q, noting the unique characteristics and factors at play; Research question set #2,

• What other relationships exist at Orphanage Q; noting the unique characteristics and factors at play; Research question sets #3 and 4 and,

• What might emerge from these connections and relationships, the potential for attachment or something else, Research question sets #5 and 6.

This study is significant as it connects with the ongoing debate regarding orphan care and concern. As stated throughout, the needs existing in the lives of orphans and vulnerable children being served in residential care are complex. Attachment research often fails to give attention to the unique cultural contexts in which OVC live (and die). An international conversation is taking place on a global stage which includes caregivers, educators, policy makers, child advocates, psychologists, government officials, and ministry providers, all those engaged in child-welfare for children without parental support. All agree, the absence of healthy attachment in the lives of OVC results in far-reaching adverse effects on physical, cognitive, social, emotional, and spiritual areas of development. Yet, there exists a gap in the conversation as diverse cultural groups are under-represented.

This study proposes that cultures which value networks of care have much to teach us on the depth and breadth of potential relationship. Those writing and researching on attachment are often rooted in the Western hierarchal value of autonomy and the dyadic familial connection rather than the simultaneously occurring social networks of connection and nurture which other world areas value. Few studies have examined
possible variations present in attachment as observed in other cultures as well as the need for an open stance when viewing the cultural-rootedness of attachment narratives.

This study is built on the foundation of decades worth of attachment theory research which values reciprocal relationships and central to the growth of love. Classic attachment research and the circle of security as developed by John Bowlby, Mary Ainsworth, and later, Mary Main, was included. Also included was the cutting-edge, modern attachment findings on the role that security and connection plays in brain and body regulation by Alan Schore and interpersonal security and attachment repair by Daniel Siegel. The writings on trauma-intervention by Karyn Purvis and the Trust Based Relational Intervention model of connecting, correcting, and empowering behaviors were of profound help in articulating the potential child-to-caregiver and caregiver-to-child interactions. Especially noted was the therapeutic role these interactions may provide children who have experienced the detrimental loss of attachment figures. The developmental essentials deemed necessary for the growth of love by Keith White outlined over-arching child-growth themes, including the need for security, boundaries, significance, community, and creativity.

Yet, theoretical gaps on issues of culture-specific attachment relationships, namely the difference in non-Western ideals pertaining to socialization goals and the development of the individual in relation to international community must be considered. As explained by Keller, cultural values highly influence a culture’s perception of attachment relationships. This study speaks into this gap of research. This study highlighted many attachment-sensitive practices that guide caregivers today and it questioned what attachment-informed care might look like in a Filipino context. This
researcher used grounded theory method and immersed herself in one such community in Metro-Manila Philippines, at Orphanage Q, which serves OVC awaiting adoptive “forever” families. As stated previously, “The focus of GTM is uncovering basic social processes… and is ideal for exploring integral social relationships and the behavior of groups where there has been little exploration of the contextual factors that affect individual’s lives.” This study steeped itself in exploring the contextual factors surrounding the caregivers and children using GTM.

Keller and other cultural attachment specialists describe the database of cross-cultural attachment research as “absurdly small.” Unique, thick-description, grounded theory research of diverse cross-cultural contexts where residential care settings are attempting to meet child attachment needs is necessary for a more robust global understanding of attachment. Carrying out this research in Orphanage Q where caregivers are instructed to keep attachment principles in mind has proven dynamic in nature. Orphanage Q writes about a fierce commitment to attachment-informed and trauma-informed practices. Their annual report documents their vision statement that reads: To be a center for rescue and healing of children in crisis; a mission statement that reads: To provide family-centered care and hope for children who have experienced trauma; and their stated goal: To bring holistic intervention for every child in our care.

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224 [Director Q], “2015 Accomplishment Report: There is Hope in Love,” Quezon, PH: [Orphanage Q], 2015, accessed June 17, 2016. [Website anonymous]
Theoretical Implications

From early attachment theorists such as Bowlby and Ainsworth to more contemporary theorists such as Schore and Siegel, the necessity of at least one caregiver, often modeled as a mother-figure, who is responsive to the child’s needs and prompts for connection is stressed. Generally, the child is understood to move through connection and exploration phases naturally as they grow and develop. Regardless of whether the children themselves initiate exploration, or it is initiated by someone else, upon separation from the trusted adult or security-figure the child most often re-initiates attachment and connection. The child is perceived as an active, rather than passive agent of relationship. The loss of security at their caregiver’s departure prompts proximity-seeking behaviors and protests. These highly visible stages of the circle of security, move the child from secure base, to exploration, to attachment-seeking, to attachment-repair or safe haven. This basic understanding of relationship is essential to classic attachment theory and modern attachment theory. However, this study highlights the ways in which the dyadic attachment relationship may exist within additional circles of connection and exploration, equally dynamic and vital to the children’s perceptions of security and safety. Moreover, this study’s findings articulate key roles that other caregivers and recipients of care may potentially have in relation to that child, especially within cultural contexts with increased appreciation for extended systems of relatedness.

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There is ample evidence of the ways the attachment process promotes essential child-growth and development.\textsuperscript{226} There is also ample concern for children impacted by trauma, separated from families,\textsuperscript{227} who now live in residential or institutional settings.\textsuperscript{228} These children have lost secure attachment figures (or never had secure attachment figures to begin with) and many child advocates believe that necessary nurture is not available to them due to the lack of meaningful connection within orphanages. However, the researcher notes that often orphanages are discussed as if there is one culture, environment, or atmosphere that epitomizes what every orphanage is.\textsuperscript{229} There are assumptions made about what relationships do and do not exist. Upon hearing the word orphanage there are assumptions made regarding the conditions children live in regardless of whether one was privy to prolonged and persistent engagement in that specific orphanage. The actual conditions influenced by cultural factors, both inside and outside of that orphanage under investigation, may or may not be seriously considered.

Just as cultural diversity is expansive and multi-dimensional, this researcher notes the unique impact culture has on Orphanage Q. This is true both as a residential setting within the Philippines and as an organization with its own unique attachment-informed practices and routines. The environment as well as the children and caregivers themselves were all perceived with an open stance as those with unique factors, responses, cultural practices, and goals, impacting the phenomena of relationship being studied. This use of


\textsuperscript{227}John Williamson, and Aaron Greenberg, “Families, Not Orphanages,” 1.

\textsuperscript{228}Craig Greenfield, \textit{The Urban Halo}, 63.

\textsuperscript{229}John Williamson, and Aaron Greenberg, “Families, Not Orphanages,” 1.
grounded theory method allowed the researcher to explore the nature of relationships between caregivers and children in residential care at Orphanage Q in all its dynamics. Different than classic attachment theory, this grounded theory study responds to the dynamic relationships presented in its collected data and seeks to articulate the circle of security instead made up of multiple moving parts. Rather than understanding these differing dynamics as subordinate in value or of secondary importance to the primary caregiver-child relationship, the researcher notes the primary way they make up a vital part of the whole.

Much of the attachment theory is researched in Western contexts. Those quality studies that early on emerged in cross-cultural attachment contexts asked research questions inevitably influenced by their own cultural values and understandings. This is of special interest to the researcher as time spent in globally diverse communities has suggested that those fiercely committed to attachment from their own cultural perspectives may deem differing behaviors as either detrimental to the growth of love and nurture or supportive of the same. The findings of this study provide essential scaffolding, as this study comes alongside long-standing attachment principles, and allows for emergent insights in culture-specific relationship phenomena. The question from this study’s opening story asked: *For little Mary in the orphanage is there an anchor, a security, or someone worth looking for amidst the sea of motion, waves of noise, and groups of people? In the same way, are the ministries and outreaches existing in our world’s residential care projects mindful of attachment relationships? Are they intentionally establishing them, fiercely committed to protecting them, and setting the*

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stage for them in children’s future nurture? This study suggests that such a place exists. Yet, its model of care is more dynamic than originally anticipated.

As the researcher observed and noted the managed chaos of so many children and adults within the confines of small spaces at Orphanage Q, it initially looked familiar as it reminded the researcher of the hive of activity she had seen in Filipino informal settlements, or slums, where many of these children had originally lived. It also reflected the noise present on Metro-Manila streets in neighborhoods or barangay communities, something the many of the children most likely experienced to some extent prior to entering Orphanage Q. The inter-relatedness of a crowded community within Orphanage Q was something the researcher’s Western perspective was trained to view as a deficit. However, throughout the weeks and months of observation, the semi-structured interviews, and the art experiences it was noted that within the child’s, caregiver’s, and staff-person’s perspective, these orbits of activity and relationship were instead valued and deemed as richly complex. This social phenomenon, specific to a cultural context in the Philippines and within Orphanage Q, showed a family-centered approach that was more complex than a Western understanding of small nuclear families and intimate dyads of mother and child (or primary caregiver) alone. This led the researcher to ask, when they say family-centered approach what kind of families are they modeling? Are there alternative cultural definitions of family that are relevant?

Orphanage Q’s reported attachment trainings for staff and the practice of connecting each and every child in their care to a primary caregiver actually matches a mother-to-child dyadic model. However, it was observed that this dyadic practice was also set within a whole set of relationships. A substantive theory grounded in this study’s
data has emerged. These circles of care could not be separated. The environment itself served as a part of the attachment network. Orbits of connection moved alongside one another simultaneously. The layers of influence traveled like wavelengths from director to child, and from staff to child. There existed circles within circles of connectivity, both created and maintained. Thus, the grounded theory of the orbital network of attachment was birthed.

The emergence of the ONA theory conveys a complex set of relationships as they were observed and described in participants’ narratives. ONA and its multi-dimensions is understood under three over-arching umbrellas of meaning: atmosphere, orbits, and wavelengths. The atmosphere sets the stage for the growth of love through the attachment-informed policies and procedures, routines, and environment of a residential care setting. The researcher entered this atmosphere as a learner and the diverse set of Orphanage Q’s staff people and children acted as teachers about a unique Filipino cultural-context.

ONA was also observed as an attachment model rooted in the development of orbits, or dyadic child-to-adult, adult-to-adult, and child-to-child connections. These orbits were further understood as interconnected in a series of circles, or circle of circles—COC’s—dynamic and complex. These dynamics include the pulling forces of mirroring behaviors and the anchoring forces of matching behaviors. All of which serve as a gravity of sorts, bringing a child adrift online again.

The influence of these orbits and relationships serve as wavelengths in the ONA and move beyond the dyads. This ONA influence is most boldly exhibited through the director as a matriarch. In this study, the importance of the matriarch phenomenon
cannot be overstated and it includes the powerful modeling of a fiercely committed love. The matriarch is simultaneously engaged in one-on-one dynamic relationship with children needing connection as well as systemic connections with other staff and child helpers. This creates a modeling effect that is not just rhetorical or conceptual. It is practical and lived out. It is best understood using the concept of apprenticeship. The apprentices are not passive receivers of care but instead active agents of the growth of love. They receive love and nurture as they learn about attachment. They simultaneously pass it on. This results in a ripple effect of orbits far-reaching in impact. This act of passing on attachment behaviors and connection mandates the presence of someone willing to stand in the gap of needed nurture and care. This was contextually described as the Filipino concept of tagasalo. Thus, we understand with ONA that the third umbrella of wavelengths is practical, lived out, and cultural in nature. All three umbrellas of the orbital network of attachment have much to teach us.

It is the researcher’s intention to share the insights of this study by:

1) Articulating key findings in research article publication and dissemination in professional journal(s) for child advocates carrying out OVC research/care,

2) Creating a concise, information-rich presentation to be presented as a training for the Philippines Children’s Ministry Network (PCMN), the largest evangelical network of children’s ministry leaders, child advocates, Christian social workers, and NGO leaders doing outreach in the Philippines, in conjunction with the Philippines Council of Evangelical Churches (PCEC) and PCMN serves as the Filipino arm of VIVA, a global charity that seeks to empower a network of child advocacy throughout Africa, Asia, and Latin
America. This study’s peer debriefer noted a teaching session on this study’s findings would serve as a vital contribution offered by the Nazarene church which is already a valuable member of the PCMN network in the Philippines, 3) Authoring a chapter on the caregiver-to-child relationship in the Philippines, for a book on caregiving, co-authored by APNTS alumni who have graduated from the Holistic Child Development department and serve or have served on the Asia-Pacific Region (and around the world) on behalf of children-at-risk, 4) Encouraging both the director of Orphanage Q and the peer debriefer to both disseminate and share this study’s findings as they engage fellow social workers and colleagues in their unique local and global spheres of influence.

Practical Implications

This grounded theory method research prompts specific recommendations vital to the formation of the growth of love and relationship for at-risk children in the Philippines. While it is true that many children live as orphans on the streets of cities such as Metro-Manila, orphanages are still the most utilized form of formal care for orphans in the Philippines. The time spent observing, interviewing, and drawing with this study’s sampling sets suggests a model of care within one orphanage making an incredible difference in the lives of children. An orphanage that is intentional about attachment on micro and macro levels can mediate social-emotional damage and promote profound resiliency. The documented cases of orphanage abuse and attachment disorders in some contexts need not be broadly applied to the reality of all orphanages, in all contexts, and at all times. Instead, an orphanage making intentional child-to-caregiver
connections that are supported, monitored, and fiercely guarded can provide a pseudo parent-to-child safety and security circle. When considering the circle of circles and the ONA social phenomenon as described in this study, orphanages can also be empowered to create atmosphere, orbits, and wavelengths that are made practically apparent in an attachment-informed establishment of policies, primary caregivers, and tagasalo helping behaviors, the latter made visible in dynamic matriarchs and apprentices who are catching, providing, and securing with a fiercely committed love.

Atmosphere—Recommendations

Orphanages provide care for OVC and more can be done to improve the lives of children in that care. Orphanages (and child development projects) can establish many policies and routines critical to the health and well-being of children they are entrusted with. This creates an atmosphere that takes the growth and development of children seriously. The atmosphere is the first umbrella of ONA. It includes everything that exists around the children and staff, both physical things as well as things that create the context of care, such as caregiving decisions. From the moment a child arrives, to the moment a child is transferred to an adoptive home, many critical decisions are made throughout a child’s stay that either help or hinder that child’s ability to engage in healthy relationship. This includes the intentional pairing of a child to a security figure from the moment the child arrives and ruthlessly eliminating any care practices that inhibit that relationship from thriving. Orphanage Q reportedly keeps the primary caregiver on their shift for extended hours when a new child arrives so that attachment has increased potential of taking root. This is the same person that remains near the child during personal care
routines, during daily play and enjoyment, as well as intervening during moments of insecurity or fear. This is a matter of policy first, yet, meaningful practice follows. Thus, the attachment-sensitive policies and procedures that directors and social workers implement impact the social-emotional well-being of their children. This also includes child-protection policies requiring those who arrive as strangers and volunteers to respect boundaries on matters such as physical contact so that children are less likely to seek out physical proximity and intimacy with whom they do not know.

The routines too are part of the overall structure and atmosphere of the orphanage community. Allowing children to anticipate regular routines while also remaining flexible enough to respond to unique child needs, temperaments, and group dynamics, creates a balanced sense of exploration and security weaved into the fabric of daily activities. This includes family style meals and a balance between large-group, small-group, and one-on-one connection time. This also includes regular trainings that teach staff about attachment, about trauma-care and intervention, and about the commitment to the organization’s vision, mission, and goal that supports the healing process for the children they serve. An orbital network of attachment’s atmosphere is maintained throughout the child’s stay as social workers, counselors, and caregivers are encouraged to work as a team. The mutual offering of time, commitment, and the growth of love sends a message to children and employees alike, attachment matters.

Once adoptive families are secured, this creation of an ONA atmosphere includes the policies that govern that transition. Both Orphanage Q and Orphanage T create keepsake books so that the child being adopted may view photos of the parents before their arrival. The child is given time over approximately three days to gradually connect
with the adoptive parents as they decide to. Photos of this transition time are added to the keepsake and considered as sacred as a new birth. This sets the stage for attachment. Reportedly some government run orphanages allow the parent to retrieve the child on the same day of their arrival and get little time to adjust.\(^{231}\) This alternatively sets the stage for protest and attachment seeking (grieving) behaviors as the child is given no time to adjust. However, the orphanages under study have an apartment or room in which the parents can lodge and the child is given choices about how quickly they stay with the parent in that space during the transition days. These policies empower the child to make a meaningful connection and honor the connections they’ve been a part of at the orphanage for a considerable portion of their lives.

**Orbits—Recommendations**

The second umbrella of ONA include *orbits* or dynamic circles of care that anchor the child in reciprocal connection. Many of these children come to the orphanage in a state of dysregulation and some are not meaningfully connected to their families of origin. The Director of Orphanage Q spoke in depth about her organization’s commitment to build secure relationships, between children and staff within the orphanage, as well as those who act as temporary caregivers or foster parents in the community while they attempt to bring these children “online.” The researcher learned specifically about the children in their care who have suffered incredible amounts of abuse, neglect, and profound loss. Director Q believes there is life-changing potential for

\(^{231}\) The directors of both Orphanage T and Orphanage Q, as well as the head social worker of Orphanage T relayed stories of such incidences occurring in orphanages other than their own. Alternatively, they spoke about a strong commitment to doing this differently as means to support attachment and the growth of love in the life of the child they had journeyed with for years.
caregivers to act as parent-figures and provide family-based care that promotes healing amid that hurt. The caregivers in the orphanage are said to act as a residential “Mama” to specific children they are paired with. The caregivers themselves spoke about this responsibility as a privilege. They seemed to understand that when a child has not had secure attachment their need for security and trust does not disappear upon arrival. They were trained to respond to the child’s perpetual state of anxiety and protest because of unmet needs. The orphanage staff are fiercely committed to meeting those needs.

Trauma and distress due to neglect, abuse, or sudden separation from an attachment figure mandates specialized care that intentionally brings healing and potential for the growth of love. The evidence of this care and relationship was communicated in interviews, observed in active engagement, and represented in the drawings of children and staff. The researcher noted that there were in fact circles of circles—COC principle—as caregivers provided meaningful connection and additional circles or orbits of interconnected care were simultaneously taking place by others.

The orphanage is made up of people who move in and out of the child’s space with diverse roles and responsibilities. Some of these orbits include people who spend hours listening and caring for the children and youth. Other staff people give their time to assist with the environment or context of care, which is the atmosphere discussed above. Every staff person, however, has the need to be trained on what it means to serve the children as part of the whole network of attachment; to be a part of ONA is to be a part of a family of sorts. The interview participants from this study’s sampling of twelve staff people with diverse roles at Orphanage Q spoke multiple times of this family concept. Some even mentioned the specific correlation to the concept of Filipino extended family
systems. The cook was compared to a “Tita,” or Aunt. The social workers and administrative support staff were compared to “Kuya’s,” [Big Brothers], or “Ate’s,” [Big Sisters]. Some did daily check-ins to discuss a specific child’s day, assist with homework, and stop their work to share a meal with the child or meet in the hallway for connection.

Essential for those working within orphanages or residential settings as caregivers, social workers, executive directors, and those working as foster parents, counselors, case-workers, teachers, or pastors is a commitment to build and maintain consistent relationship with the children. Caregiver and Orphanage Staff Initiated Connection, Appendix J outlines eleven key types of connection as represented in the months of data collection. There are also fifty-two suggested examples of those eleven types of connection. The eleven include: 1) Physical touch and nearness; 2) Community and social networking; 3) Facial affect, visual and verbal cues; 4) Significance and respect; 5) Consistency of care and structure; 6) Boundaries and correction; 7) Playfulness and creativity; 8) Trauma-informed care for individual child needs; 9) Security and safeguarding; 10) Skill-building; and 11) Commitment. The fifty-two examples of connection come from verbatim quotes or behaviors documented in the field journal. They include things as far reaching as, “Not giving up on a child even when they reject you, ignore you, or fight you” and “Staying close to a child when a stranger is in the room,” and “Being in the court room when a child is faced with a person who raped or hurt them.” Each of these behaviors powerfully says to the child in big and small ways, “I am for you. You are not alone.” Creating orbits of care is essential to the orbital network of attachment.
Wavelengths—Recommendations

The wavelengths are the third umbrella of ONA speaks to the far-reaching influence of people within the orbital network of attachment. This includes the role of matriarch, apprentice, and tagasalo. In classic attachment theory, the phenomenon of connection of nurture between those doing the dance of attachment, inside a dyadic circle, are like people playing the leading roles on center stage of a performance. The spotlight shines on their behaviors and words and everything else on the stage goes black. The other players on the stage, though engaged in activity may go unnoticed. ONA in one sense broadens the circumference of the light shining on the stage of attachment. With the help of cultural mediators this study refocuses its attention on both those in dyadic relationships, or circles of security, as well as the ways in which those very relationships influence and impact others in circles of circles nearby.

The matriarch phenomenon in practical ways provides a wavelength impacting not only the ones the matriarch connects with and nurtures but all others orbiting around her. The matriarch is understood as someone representing a committed love to the whole of the Orphanage Q. Rather than perceiving this as an administrative role or executive office role only, the value of the matriarch is seen in the ways in which children of different ages seek the matriarch’s time and attention, show her a band aid, or report a social grievance when she passes in the hall. This researcher recommends that orphanages seriously consider what it says to a traumatized child (and to the other children and staff) when the director is the first one to introduce them upon arrival to their caregiver or Mama figure, seeks to always be in the courtroom when a child faces their abuser, and is the last one sitting near the coffin when a child in palliative care passes away. Through scores of notes and memos, this researcher noted that Director Q’s
role was not simply a facilitator of attachment, setting nurture into orbit or motion. The Director Q actively participated in as she said, “Mama-lion” or “Mama-bear” fiercely committed love for each child she was entrusted with. A matriarch figure may well have powerful, far-reaching influence on those she is in relationship with as well as those she models this relationship for. Moreover, this role is culturally valued in the Filipino context and this finding may be especially transferable to culturally similar contexts.

As the matriarch (and others) model attachment their influence is best understood in the concept of *apprentice*. Attachment apprenticeship suggests that all the time spent nurturing the children in the staff person’s circle of care is being modeled for other caregivers and staff people, as well as other children and youth. The matriarch acts herself as a powerful catalyst and influence, modeling this connection. The head caregiver again for the other caregivers. This researcher noted the ways in which the children modeled connection and nurture, shared with fellow peers, in front of new arrivals who were adjusting to life off the streets or out of an abusive home. This dynamism of apprenticeship can practically be fostered and developed by making trainings available, informally, and formally, to the children in orphanages. Their role in passing on what they have received further duplicates the circle of circles as well. This empowers the children as not only passive receivers but scaffolds their development as attachment figures and is well suited for the Filipino extended family network that more readily looks to the older Kuya or Ate for this familial contribution then often in done in the West.

The last dynamic highlighted in this third umbrella of wavelengths is tagasalo. Tagasalo refers to role of a person who rises up in the Filipino family and acts as the
catcher. It is further understood as a person who acts as the rescuer, provider, and securer especially needed in a family in crisis. The researcher was profoundly impacted by the ways in which Carandang’s culturally-rooted writing on this concept speaks into the ONA model observed at Orphanage Q. Even more profound is the way tagasalo was described by the head caregiver as evident in Director Q, in her behaviors and commitment, and at the same time described by the home school coordinator as mutually evident in the behaviors and commitment of multiple staff members in Orphanage Q’s community. ONA suggests that this interrelated system of catchers, or multiple tagasalo and apprentice tagasalo, result in a culture of attachment that is of vital importance.

This social phenomenon may also be understood as part of the spiritual narrative present in Orphanage Q. This Christian narrative understands God as the Ultimate One who rescues, catches, and secures. Indeed, this intentional practice of sharing with the children the very love the staff themselves have received, from Christ and the community of faith in Orphanage Q, is central to the calling and compassion of staff members compelled to love the children well. These caregivers are standing in the gap; their catching and providing serves as anchor to the growth of love in the children’s lives, even as Christ’s love anchor’s their own fiercely committed love. This compelling force serves as a gravity of sorts and the atmosphere, orbits, and wavelengths of ONA result.

The head caregiver said it best when she stated, “To connect with the child, we make a circle around the child.” The fact that thousands of children worldwide are awaiting the essential love and nurture of at least one caregiver who is irrationally committed to their well-being does not require that only one such person need exist. Alternatively, this study, schooled by the Filipino cultural context at work within
Orphanage Q, suggests that when such a person is giving of themselves in relationship as important as this (in a family-centered approach), with mirroring and matching connections, there likely exists all around that relationship an orbital network of attachment, mutually supporting that social phenomenon in the first place. In cultures where family models include many extended family members, and even nearly-kin members, these networks of relationship are more pronounced. This study recommends that each orphanage or residential care setting evaluates the ways that cultural ideals and factors impact that community’s caregiving approach. The researcher asks, as noted in an earlier journal entry:

*It is like a ripple effect—like a stone that is thrown into the water. It creates an essential circle but simultaneously a phenomenon occurs and the ripple of circles that are formed around the initial circle cannot be separated. They occur together and the value of each is interconnected to the other. Have we focused so beautifully on the intimate and essential phenomenon of attachment within key dyads in attachment theory and neglected the simultaneous and vital circles of attachment being formed around the other in dynamic ways—even modeling the way for more circles of attachment to follow? And do more collective, community based cultures that depend more overtly on networks of connection have something to teach us about the vital interlocking circles of attachment that are possible and essential to the growth of love and relationship?*

Researcher, Aisling Zweigle, March 16, 2017

Additional Recommendations

When considering alternative forms of care for OVC many attachment needs still exist. Whether the child is in a four level with building with multiple groups of children and adults, or in a small, single family household with a handful of people, the question remains, is this a place where the child is experiencing attachment and trauma-informed nurture and care? Though there is some effort in the Philippines to move some OVC children to a foster-care system many orphanages are still the more prevalent and well
established forms of care. Even more, the researcher’s learning at Orphanage Q instructed her to see that while those other systems of care are being negotiated, foster care can also (and is also) being used *within* a healthy orphanage itself.

   This is a workable model and can be reproduced as a support to the unique set of child cases that the orphanage encounters. The children who enter into orphanages with abuse and neglect so extreme that trauma intervention needs more extensive remediation can be carried out by orphanage foster parents who are also available for a later re-integration phase into the orphanage group-care setting that is done in phases to accommodate feelings of loss and separation. Indeed, this study has suggested there can even be overlap of these two roles where staff themselves take on the role of foster parent, thus, making the transition into group care at the orphanage all the more natural as the primary caregiver is still available throughout those phases of adjustment.

   These recommendations are applicable in Filipino orphanages desiring to adopt more attachment-informed practices that meet the needs of the at-risk children they serve. These recommendations may be transferable for contexts with like-cultures when compared Orphanage Q where this study took place.

   This study’s findings are also informative for compassionate ministry outreach carried out by the five Nazarene Child Development Centers doing outreach throughout the Philippines. Especially as the children being reached may necessitate intentional, trauma-informed, attachment-rich caregiving. Developing one-on-one mentors or apprentices that act as tagasalo for the children being sponsored will enhance the growth of love in each child that is cared for. A pastora may have vast influence on the church or organization as she acts as matriarch-figure (or pastor as patriarch-figure). A leader who
is willing to stand in the gap and communicate to a vulnerable child, “I am with you,” “You are not alone,” and “I will not give up on you,” sends a life-changing message to the one receiving such care. Indeed, a whole organization or faith community that compels one another to stand in the gap as tagasalo can change the entire trajectory of that child’s life.

These recommendations are an important addition to the global conversation on child-welfare. The understanding of more dynamic models of care, reflected in the ONA model, benefit people around the world by including more diverse viewpoints on child-to-adult (and child-to-child) connection and nurture. This study broadens the scope of understanding regarding what attachment looks like in non-Western communities.

This study utilized the researcher’s own earlier grounded theory evidence of the FAD principle as means to evaluate how filling and depleting domains (FAD) may be organized in diverse ways to match different cultural perspectives on what attachment behaviors, attachment insecurity, and attachment repair looks like within their own unique domains of cultural and familial values and expectations. More specifically, this researcher asked, can valuable relational connections and the growth of love occur simultaneously within a network of relationships that is deemed as crowded, chaotic, and community-centered by Western eyes? After all, “neglectful acts or patterns occur in every culture, at all income levels, and within all racial, ethnic, and religious groups.”

This study recommends that when entering into non-Western residential care settings it is of vital importance to take the posture of learner, inviting the caregivers and...
staff to act as teachers to the visitors about what attachment practices serve as means and ends, or as ideals and goals within their own specific context. Perhaps there are vital strengths that have been dismissed as unimportant to the Western visitors, or even deemed detrimental to the care of at-risk children due to our own culture’s ideals and goals related to use of space, individual autonomy, and decreased appreciation for cultural relatedness and connectivity.

Regarding working with children who have experienced trauma, this study highlights the ways a lack of attachment to caregivers and community may precede future negative behavior as result of compounded feelings of hurt and mistrust, as well as potential layers of harm and feelings of abandonment. Those working as foster parent, counselor, case-worker, teacher, or pastor may encounter children in their centers and churches who show signs of trauma and distress due to neglect, abuse, or sudden separation from an attachment figure. This study encourages helpers to build strong, adult-to-child relationships as a key ingredient to resilience. Furthermore, it explores the ways that fiercely committed love and nurture may be rooted in reciprocal networks of support as exemplified in the orbital network of attachment. This does not de-value the vital importance of individuals who are compelled by compassion to anchor a child in an orbit of care. Instead its importance is more pronounced as it serves alongside other partners in interconnected circle of circles. This study recommends that there be intentional training related to child protection, trauma intervention, and enhancing networks of support.
Need for Further Inquiry

This research suggests that further research in diverse contexts, using longitudinal studies that follow children during admission, intervention, discharge, and post-adoption would be of importance as means of understanding a child’s relational trajectory in other orphanages and cultures.\textsuperscript{234} Longitudinal studies that focus specifically on the child’s trajectory once adopted into new families and communities could analyze how the ONA phenomenon plays in the future development of the child. It is not known if the child that leaves Orphanage Q relates to a new ONA in the setting where they transition. Understanding how this translates into the support and future relationships that exist on a macro or community level would be a beneficial next step in discovering if an ONA continues to impact the child’s development. The help of systems theory and those looking at influences of the broader community may be considered for a more thorough look at how attachment circle of circles is at play within broader social-circles. As earlier stated, “Human beings…cannot develop in isolation, but within a system of relationships that include family and society.”\textsuperscript{235}

In addition, more GTM exploration of other orphanages in the Philippines would increase the understanding of ONA and its role in providing nurture for our world’s orphans and vulnerable children. Increasing the data-base related to OVC needs and care.

\textsuperscript{234} [Director of Orphanage Q], Social Work and Caregiver Practices that Promote Attachment of Children Who Have Experienced Trauma, (Master’s thesis, Asian Seminary of Christian Ministers, 2013), 1-156. Director Q carried out her own mixed methods study showing increased levels of attachment for her sampling, when pre-care and post-adoption attachment reports were compared.

Further exploration of meaningful attachments present in matriarchal and apprenticeship relationships would enrich this conversation and would benefit the many thousands of children in need of persons acting as a tagasalo, willing to stand in the gap as children face the dire effects of abandonment, abuse, and neglect. No doubt, as Christians we turn our attention to the ultimate attachment narrative as we consider the work of Christ as one who enters in, rescues, secures and catches, bringing about security and safety. It is with gratefulness for this work of reconciliations that we are given the honor of sharing with others from the compassion we have already received.

The researcher reiterates, powerful changes can occur for the good, often based on the committed work of one supportive parent, caregiver, or adult in the life of a child. In addition, seemingly invisible networks of support may simultaneously occur, increasing the effectiveness of this relational intervention. An openness to the potential of these relationships in specific cultural contexts will enrich attachment research, the lives of OVC children, and the growth of love:

> We are talking about a personal relationship that has nothing to do with labels and systems of care. It is based on genuine understanding, respect and affection. It is therefore not possible to substitute another person in the relationship. It has nothing to do with case files or groups and carers; it is about a person who knows a child by name and is known to the child by name. Both parties believe the other person to be of incalculable importance. The significant other delights in the child. It is not about calculated intervention and rational analysis so much as the joy of being together. It is about genuine and spontaneous reactions, not so much to particular events, words or products as to the soul and inner being of the child. There is not short cut to the soul of any person, so time is of the essence, and covenant-type commitment is the guarantor that the time will be available and respected.\(^\text{236}\)

APPENDIX A

Document Analysis – Orphanage Q’s 2015 Accomplishment Report

The Orphanage Q Accomplishment Report (AR) for 2015 is a twenty-page downloadable, colorful collection of photographs, with embedded, organized sections. These sections include some coding themes and sub categories explored. The report is available online but will remain anonymous, at this time, as means of protecting the organization’s privacy. If upon completion of this thesis Orphanage Q consents to being openly identified in this study’s published thesis, used for Asia Pacific Nazarene Theological Seminary’s degree requirements or future scholarly articles, then the orphanage name, location and director may be sited.

The Accomplishment Report includes:

1) Letter from the Executive Director,
2) Description of Orphanage Q’s project- vision, mission and overarching goal,
3) Residential Care – Program and Service
4) Rehabilitation and Medical Services,
5) Case Management- national requirements,
6) Adoptions,
7) Foster Care,
8) Education and College Scholarship
9) Blog update on children graduating
10) Mission Teams and Volunteers,
11) Creative Arts Ministry – Update from Artistic director,
12) Counseling,
13) Recreation,

14) Program for the Deaf,

15) In Memory of – Photos and names of those community members who have passed away

It was in the initial reading of this document that the researcher noted the program’s intentional language relating to the need for healthy attachment. The document mentions the word attachment (or attached, attach) a total of four times, yet the attachment theory related concepts of “secure base,” “proximity seeking,” “separation and distress” and “safe haven” is present throughout the document multiple times more when considering the amount of times the word “family” or “family centered” words are used and coupled with themes of love, care, and safety. The family model is rooted in the director’s own research relating to orphan care with attachment-informed best practices. When this is taken into account and the words of “attachment,” “attach, “love” and “family” is included there are sixteen examples throughout the document.

When assessing the purpose of the document, I noted that it highlights the donors, short-term volunteers, and therapeutic specialists who came to help throughout 2015. In my coding, I noted that “financial support,” “bills,” and “funding,” as well as other finance related words were used approximately ten times. There is mention of hardly being able to pay the bills on time and then the noting of surprise provisions that were made available by God’s grace and volunteers’ donations. This focus on donor relationships and knowledge is key to the purpose of the document.

One of the most central themes to the whole document, from beginning to end, is the word, “child” or “children.” This included forty-two times coded on my hardcopy
print out. There were also mentions of the Holistic Child Development approach (HCD), which values child not as a false dichotomy of parts but instead as made up of physical, social, emotional, spiritual, and cognitive development. The amount of times God was mentioned in the text is eighteen times. The other words I circled for my next additional readings are as follows: hope, faith, grow, heal, home, adoption, foster care, trauma and many vices or ACES that plagued children’s childhoods. The latter includes comments on the: physical, psychological, spiritual, cognitive, and emotional (HCD) growth and needs of the child.

My coding also made subgroups of words I connected with child development essentials from Dr. Keith White’s, The Growth of Love, who writes of the vital need for: security, boundaries, significance, creativity, community. I included notes in the margins where I saw evidence of Dr. Bowlby’s and Dr. Ainsworth’s attachment themes, as well as notes that seemed comparable to Dr. Purvis’ “connecting” and “correcting” behaviors from her book, The Connected Child. Each item was coded for in the write-up. Lastly, I included in my comments the research regarding “ACES” or “Adverse Childhood Experiences” and Search Institute’s, Building Blocks presentation on growth. The ACE’s definitions, or adverse experiences, are comparable to many of the things listed in the children’s personal stories. This includes: children who were beaten, children who had been touched inappropriately by their father, those experiencing homelessness, poverty, and abandonment. These notes were clearly highlighted.

I had the opportunity to meet with the director of Orphanage Q, in June 2016 and in September 2016 as part of Holistic Child Development degree program required site visits, I also have information about how the organization’s Accomplishment Report
relates to the director’s stated values and program design. For instance, it is my understanding that each child in Q’s program is supposed to be connected with a “mama” figure with whom the child may potentially build a healthy attachment. This person reportedly struggles to maintain this level of care for a larger set of children. Orphanage Q’s director stated that it is her intention that the child’s caregiver be instructed to eat with, diaper, bath, and so on, “her” determined child or children. The director of Orphanage Q suggested that others visiting the center do not step into this role just as a person visiting a family home for dinner would not suddenly act as the children’s security figure just because they are present in the home. What will this researcher’s future field research at Orphanage Q convey regarding attachment?

This practice informed my reading of this accomplishment report. The Director highlights the program’s attachment principles, “When a child learns to attach to their ‘mama’, behavior modification and other interventions are employed and implemented to help the child become socially functional. Slowly wounds begin to heal and within the safety of clear boundaries they can explore and learn what is acceptable and what is not. They are loved without measure and taught that God has a plan for their life no matter what they have been through. It is amazing to see them grow and overcome so many hurts and fears and move forward to a place of physical, emotional, and mental health.”

Furthermore, Orphanage Q’s Accomplishment Report speaks of ways this relationship-based attachment may make a life-long difference in the holistic development of these children. The director of Orphanage Q states an additional purpose

237 [Director Q], “2015 Accomplishment Report: There is Hope in Love,” Quezon, PH: [Orphanage Q], 2015, accessed June 17, 2016. [Website anonymous]
here. She seems to build a case for the reasons that foster care parenting is meaningful and she seems to want to use the document to increase those willing to make a difference like this in the lives of young children in the residential care facility—preparing the way for adoptive parents in the future, by providing a safe temporary home for children to further heal and develop despite the grief and family disruptions. She says, “You have the potential to perhaps change the course of a child’s life… by loving him and teaching him to trust. By showing to someone the most beautiful human interaction there is. That this attachment will carry him through all human relationships… for as long as he lives.”

This document analysis of this report includes a set of colors, symbols and noted words on the hardcopy document. The analysis notes themes as a potential start to open coding categories. These coded pages were scanned as means for future comparative analysis. Will my future observations, interviews and art documentation allow for similar coding? Will the data collected in this thesis project create additional categories that compliment and/or contradict those gathered in this initial documentation analysis? These previous findings used for a qualitative research investigation in a course at Asia Pacific Nazarene Theological Seminary, are not shared as prescriptive information directing this researcher on further data to be collected. It does express ample context for the reason this researcher chose Orphanage Q for research on attachment. The start to an audit trail of notes serve as further background information, allowing the researcher to freely explore Orphanage Q for attachment in a grounded theory approach.

238 [Director Q], “2015 Accomplishment Report: There is Hope in Love,” Quezon, PH: [Orphanage Q], 2015, accessed June 17, 2016. [Website anonymous]
APPENDIX B

General Census Sampling and Theoretical Art Sampling Chart

*G=Girl, B=Boy, T=Toddler, P=Preschool, U=Upstairs, (i.e. PG=Preschool Girl)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Code Name</th>
<th>Primary/Secondary Caregiver(s)</th>
<th>Present Age</th>
<th>Artist</th>
<th>Drawing #</th>
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</thead>
<tbody>
<tr>
<td>Infant Boy—1</td>
<td>W9/W10, 0 months</td>
<td>8 months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>IB—2</td>
<td>W9/W10, 0 months</td>
<td>1 year</td>
<td></td>
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</tr>
<tr>
<td>IB—3</td>
<td>W9/W10, 0 months</td>
<td>1 year</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>IB—4</td>
<td>W9/W10, 8 months</td>
<td>1 year</td>
<td></td>
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</tr>
<tr>
<td>BI—5</td>
<td>W9/W10, 2 months</td>
<td>11 months</td>
<td></td>
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</tr>
<tr>
<td>IB—6</td>
<td>W9/W10, 1 month</td>
<td>6 months</td>
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<tr>
<td>IB—7</td>
<td>W9/W10, 2 months</td>
<td>11 months</td>
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</tr>
<tr>
<td>IB—8</td>
<td>W9/W10, 0 month</td>
<td>1 year</td>
<td></td>
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<td>IG—9</td>
<td>W9/W10, 1 month</td>
<td>3 years</td>
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</tr>
<tr>
<td>IB—10</td>
<td>W9/W10, 0 months</td>
<td>2 years</td>
<td></td>
<td></td>
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<tr>
<td>IG—11</td>
<td>W9/W10, 2 ½ years</td>
<td>3 years</td>
<td></td>
<td></td>
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<tr>
<td>Toddler Boy—1</td>
<td>W6/W7/W8, 3 ½ years</td>
<td>4 ½ years</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>TB—2</td>
<td>W6/W7/W8, 8 months</td>
<td>4 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TB—3</td>
<td>W6/W7/W8, 2 ½ years</td>
<td>3 ½ years</td>
<td></td>
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<tr>
<td>TB—4</td>
<td>W6/W7/W8, 3 ½ years</td>
<td>4 years</td>
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<tr>
<td>TB—5</td>
<td>W6/W7/W8, 1 year</td>
<td>3 ½ years</td>
<td></td>
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<tr>
<td>TG—6</td>
<td>W6/W7/W8, 1 year</td>
<td>3 ½ years</td>
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<tr>
<td>TB—7</td>
<td>W6/W7/W8, 0 months</td>
<td>4 years</td>
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<td>TG—8</td>
<td>W6/W7/W8, 0 months</td>
<td>4 years</td>
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<tr>
<td>TB—9</td>
<td>W6/W7/W8, 2 ½ years</td>
<td>3 years</td>
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<td>W6/W7/W8, 2 ½ years</td>
<td>3 ½ years</td>
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<tr>
<td>TB—11</td>
<td>W6/W7/W8, 2 ½ years</td>
<td>4 years</td>
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<tr>
<td>TB—12</td>
<td>W6/W7/W8, 1 ½ years</td>
<td>4 years</td>
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<tr>
<td>TG—13</td>
<td>W6/W7/W8, 2 ½ years</td>
<td>4 ½ years</td>
<td></td>
<td></td>
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<tr>
<td>TG—14</td>
<td>W6/W7/W8, 2 years</td>
<td>3 years</td>
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<tr>
<td>Preschool Girl-1</td>
<td>W4/W5, 3 years</td>
<td>5 years</td>
<td>X1 2</td>
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<tr>
<td>PG—2</td>
<td>W4/W5, 5 ½ years</td>
<td>7 years</td>
<td>X2</td>
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<td>PG—3</td>
<td>W4/W5, 3 ½ years</td>
<td>6 years</td>
<td>X3</td>
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<tr>
<td>PG—4</td>
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<td>4 ½ years</td>
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<td>6 years</td>
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<tr>
<td>PG—6</td>
<td>W4/W5, 7 years</td>
<td>8 ½ years</td>
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<tr>
<td>PG—7</td>
<td>W4/W5, 4 ½ years</td>
<td>5 years</td>
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<td>PG—8</td>
<td>W4/W5, unknown</td>
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<td>X5</td>
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<td>5 years</td>
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<td>W4/W5, 3 years</td>
<td>6 years</td>
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<td>W4/W5, 4 months</td>
<td>4 years</td>
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<tr>
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<td>W4/W5, 4 years</td>
<td>6 ½ years</td>
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<tr>
<td>PG—13</td>
<td>W4/W5, 4 years</td>
<td>4 ½ years</td>
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<td>W4/W5, unknown</td>
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<td>X6 1</td>
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<td>G—1</td>
<td>W3, 6 ½ years</td>
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<td>X7 13, 15, 17</td>
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<td>W3, 10 years</td>
<td>11 years</td>
<td>X8 39</td>
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<td>8 years</td>
<td>X9 10</td>
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<td>G—4</td>
<td>W3, 6 ½ years</td>
<td>8 ½ years</td>
<td>X10</td>
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<tr>
<td>G—5</td>
<td>W3, 11 years</td>
<td>12 years</td>
<td>X11 30</td>
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<td>W3, 12 ½ years</td>
<td>14 years</td>
<td>X12 27, 28</td>
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<td>10 ½ years</td>
<td>X13</td>
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<tr>
<td>G—8</td>
<td>W3, 6 years</td>
<td>10 years</td>
<td>X14</td>
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<tr>
<td>G—9</td>
<td>W3, 4 ½ years</td>
<td>7 ½ years</td>
<td>X15</td>
<td>3,</td>
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<tr>
<td>G—10</td>
<td>W3, 7 years</td>
<td>9 years</td>
<td>X16</td>
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<td>Unknown</td>
<td>X17</td>
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<td>W3, 5 ½ years</td>
<td>9 ½ years</td>
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<tr>
<td>G—13</td>
<td>W3, 5 years</td>
<td>9 years</td>
<td>X18</td>
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<tr>
<td>G—14</td>
<td>W3, 8 years</td>
<td>10 years</td>
<td></td>
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<tr>
<td>G—15</td>
<td>W3, 6 years</td>
<td>6 ½ years</td>
<td>X19</td>
<td>6</td>
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<tr>
<td>G—16</td>
<td>W3, 7 ½ years</td>
<td>9 years</td>
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<tr>
<td>G—17</td>
<td>W3, 9 ½ years</td>
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<td>X20</td>
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<tr>
<td>G—18</td>
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<tr>
<td>G—19</td>
<td>W3, unknown</td>
<td>Unknown</td>
<td>X21</td>
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<td>X22</td>
<td>33,</td>
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<td>W3 (adopted)</td>
<td>Unknown</td>
<td>X23</td>
<td>4, 5</td>
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**Boy—1**

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<tbody>
<tr>
<td>B—1</td>
<td>W1/W2, 7 years</td>
<td>10 years</td>
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<tr>
<td>B—2</td>
<td>W1/W2, 7 ½ years</td>
<td>8 ½ years</td>
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<tr>
<td>B—3</td>
<td>W1/W2, 5 ½ years</td>
<td>6 ½ years</td>
<td>X23</td>
<td></td>
</tr>
<tr>
<td>B—4</td>
<td>W1/W2, 5 ½ years</td>
<td>8 ½ years</td>
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<tr>
<td>B—5</td>
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<td>X24</td>
<td>22, 32, 40</td>
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<td>B—6</td>
<td>W1/W2, unknown</td>
<td>7 years</td>
<td>X25</td>
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<td>B—7</td>
<td>W1/W2, unknown</td>
<td>6 ½ years</td>
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<tr>
<td>B—8</td>
<td>W1/W2, 9 years</td>
<td>11 ½ years</td>
<td>X26</td>
<td>38</td>
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<td>B—9</td>
<td>W1/W2, 4 years</td>
<td>8 years</td>
<td>X27</td>
<td>7,</td>
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<tbody>
<tr>
<td>B—10</td>
<td>W1/W2, 7 years</td>
<td>8 ½ years</td>
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<tr>
<td>B—11</td>
<td>W1/W2, 5 ½ years</td>
<td>8 ½ years</td>
<td>X28</td>
<td>19, 41</td>
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<tr>
<td>B—13</td>
<td>W1/W2, 3 years</td>
<td>6 ½ years</td>
<td>X29</td>
<td>12,</td>
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<td>B—14</td>
<td>W1/W2, 9 ½ years</td>
<td>12 ½ years</td>
<td>X30</td>
<td>23,</td>
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<td>W1/W2, 6 ½ years</td>
<td>7 years</td>
<td>X31</td>
<td>11</td>
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<td>B—16</td>
<td>W/W2, 4 years</td>
<td>7 ½ years</td>
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<td>B—17</td>
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<td>11 ½ years</td>
<td>X32</td>
<td>21, 31</td>
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<td>B—18</td>
<td>W1/W2, 6 years</td>
<td>7 years</td>
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<td>B—19</td>
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<td>B—20</td>
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<tr>
<td>B—21</td>
<td>W22, 13 ½ years</td>
<td>15 years</td>
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**Upper Floor Girl—1**

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<tbody>
<tr>
<td>W4/W5, 13 years</td>
<td>14 ½ years</td>
<td>X34</td>
<td>42</td>
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**UG—2**

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<tbody>
<tr>
<td>W4/W5, 9 ½ years</td>
<td>14 ½ years</td>
<td>X35</td>
<td>14</td>
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**UG—3**

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</thead>
<tbody>
<tr>
<td>W22, 8 years</td>
<td>13 ½ years</td>
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<tbody>
<tr>
<td>W22, 13 years</td>
<td>15 years</td>
<td>X36</td>
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**UG—5**

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<tbody>
<tr>
<td>W22, 14 years</td>
<td>26 years Special Needs</td>
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**UG—6**

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<tbody>
<tr>
<td>W22, 10 years</td>
<td>14 years</td>
<td>X37</td>
<td>24, 25, 26, 29</td>
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**UG—7**

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</thead>
<tbody>
<tr>
<td>W22, 0 months</td>
<td>2 years</td>
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**Upper Floor Boy—1**

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</thead>
<tbody>
<tr>
<td>W22, 2 years</td>
<td>6 years</td>
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**UB—2**

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<tr>
<td>W22, 3 years</td>
<td>7 years</td>
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**UB—3**

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<tbody>
<tr>
<td>W22, 1 ½ years</td>
<td>5 ½ years</td>
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**Medical Boy—1**

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<tbody>
<tr>
<td>W11, 6 months</td>
<td>2 ½ years</td>
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**MG—2**

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<tbody>
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<td>W11, 6 months</td>
<td>2 years</td>
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**MG—3**

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<tbody>
<tr>
<td>W11, 2 years</td>
<td>3 years</td>
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**MG—4**

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<tbody>
<tr>
<td>W11, 3 years</td>
<td>3 ½ years</td>
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**MG—5**

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<tbody>
<tr>
<td>W11, 6 months</td>
<td>1 year</td>
<td></td>
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APPENDIX C

Theoretical Sampling of 40 Children—Detailed List

<table>
<thead>
<tr>
<th>Name</th>
<th>Age at arrival</th>
<th>Length of stay</th>
<th>Case category</th>
<th>Special needs</th>
</tr>
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<tbody>
<tr>
<td>PG—1</td>
<td>3 years old</td>
<td>2 years</td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>PG—2</td>
<td>4 years old</td>
<td>2 years</td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>PG--3</td>
<td>3 years old</td>
<td>3 years</td>
<td>Abandoned</td>
<td></td>
</tr>
<tr>
<td>PG—4</td>
<td>1 year 10 months</td>
<td>3 years</td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>PG—5</td>
<td>2 years old</td>
<td>5 years</td>
<td>Surrendered</td>
<td>Deaf/ Global Delay</td>
</tr>
<tr>
<td>PG--6</td>
<td>7 years old</td>
<td>1 year 10 months</td>
<td>Surrendered</td>
<td>Epilepsy/ Global Delay</td>
</tr>
<tr>
<td>PG—8</td>
<td>4 years old</td>
<td>1 year</td>
<td>Long-term</td>
<td></td>
</tr>
<tr>
<td>PG—9</td>
<td>1 years old</td>
<td>3 years</td>
<td>Court-Terminated</td>
<td></td>
</tr>
<tr>
<td>PG—10</td>
<td></td>
<td></td>
<td>Foundling</td>
<td></td>
</tr>
<tr>
<td>PG—12</td>
<td>4 years old</td>
<td>2 years</td>
<td>Abandoned</td>
<td>Sibling experienced trauma</td>
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<tr>
<td>PG--13</td>
<td></td>
<td></td>
<td>Long-term</td>
<td></td>
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<tr>
<td>PG—14</td>
<td></td>
<td></td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>TG—13</td>
<td>2 years old</td>
<td>2 years</td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>G—1</td>
<td>6 years old</td>
<td>5 years</td>
<td>Surrendered</td>
<td>Abused</td>
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<tr>
<td>G—2</td>
<td></td>
<td></td>
<td></td>
<td>Abused</td>
</tr>
<tr>
<td>G—3</td>
<td></td>
<td></td>
<td></td>
<td>Abused</td>
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<td>G—8</td>
<td>5 years old</td>
<td>4 years</td>
<td>Foundling</td>
<td>Blind</td>
</tr>
<tr>
<td>G—9</td>
<td>4 years old</td>
<td>3 years</td>
<td>Surrendered</td>
<td>Lost sibling and parent in fire</td>
</tr>
<tr>
<td>G—10</td>
<td>6 years old</td>
<td>3 years</td>
<td>Surrendered</td>
<td>Lost sibling and parent in fire</td>
</tr>
<tr>
<td>G—11</td>
<td></td>
<td></td>
<td></td>
<td>Abused</td>
</tr>
<tr>
<td>G—12</td>
<td>5 years old</td>
<td>4 years</td>
<td>Surrendered</td>
<td>Blind/ Global Delay</td>
</tr>
<tr>
<td>G—13</td>
<td>5 years old</td>
<td>4 years</td>
<td>Surrendered</td>
<td></td>
</tr>
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<td>G—14</td>
<td>8 years old</td>
<td>2 years</td>
<td>Abandoned</td>
<td></td>
</tr>
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<td>G—16</td>
<td>7 years old</td>
<td>2 years</td>
<td>Surrendered</td>
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</tr>
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<td>G—17</td>
<td>9 years old</td>
<td>2 years</td>
<td>Surrendered</td>
<td></td>
</tr>
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<td>G—18</td>
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<td>2 years</td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>B—3</td>
<td>4 years old</td>
<td>1 year</td>
<td>Abandoned</td>
<td>Sibling experienced abuse</td>
</tr>
<tr>
<td>B—5</td>
<td>7 years old</td>
<td>1 year</td>
<td>Abandoned</td>
<td>Sibling experienced abuse</td>
</tr>
<tr>
<td>B—6</td>
<td>6 years old</td>
<td>1 year</td>
<td>Long-term</td>
<td>Sibling experienced abuse</td>
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<tr>
<td>B—8</td>
<td>8 years old</td>
<td>2 years</td>
<td>Foundling</td>
<td>Visual and hearing impaired</td>
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<tr>
<td>B—9</td>
<td>4 years old</td>
<td>4 years</td>
<td>Abandoned</td>
<td></td>
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<tr>
<td>B—12</td>
<td>4 years old</td>
<td>2 years</td>
<td>Surrendered</td>
<td></td>
</tr>
<tr>
<td>B—11</td>
<td>5 years old</td>
<td>3 years</td>
<td>Long-term</td>
<td>Sibling with special needs</td>
</tr>
<tr>
<td></td>
<td>Age</td>
<td>Time</td>
<td>Status</td>
<td>Reason for detention</td>
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</tr>
<tr>
<td>B—12</td>
<td>1 years old</td>
<td>3 years</td>
<td>Court-terminated</td>
<td></td>
</tr>
<tr>
<td>B—13</td>
<td>2 years old</td>
<td>3 years</td>
<td>Court-terminated</td>
<td></td>
</tr>
<tr>
<td>B—14</td>
<td>9 years old</td>
<td>3 years</td>
<td>Surrendered</td>
<td>Lost parent and sibling in fire</td>
</tr>
<tr>
<td>B—15</td>
<td>6 years old</td>
<td>9 mon</td>
<td>Foundling</td>
<td>Language delays</td>
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<td>B—16</td>
<td>3 years old</td>
<td>3 years</td>
<td>Court-terminated</td>
<td></td>
</tr>
<tr>
<td>B—17</td>
<td>7 years old</td>
<td>3 years</td>
<td>Surrendered</td>
<td>Lost parents and siblings in typhoon</td>
</tr>
<tr>
<td>B—19</td>
<td>6 years old</td>
<td>5 years</td>
<td>Surrendered</td>
<td>Sibling with special needs</td>
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</tbody>
</table>
APPENDIX D

OBSERVATION GUIDE – Field Journal –

Purpose for this Observation: General Observation, Increased interaction with girls, experiment with partial participation observation, also observe sign language class

Note Taking:
What do I see? What do I hear?
Describe Environment? Materials?
People interactions? Individual & Group behavior?
Words spoken?
Sequence of events? Context of information?

Setting: Play Area(s) Inside: Outdoor
Playground and 4th floor, open-air court

Interpretation/Analysis:
What do I wonder? What am I curious about?
What might be the reason for what I observed?
Why does this matter? What I want to know?
Do I see patterns? Open Coding? Next Steps?

Name of Observation: Visit # 1 Page 3
Orphanage Q – General Observation

Date: November 28th, 9:30-2:00, continued

G21 held on to me quickly with smiles. She wanted to stand close to me and told me enthusiastically, “I’m going to have a family!” She held on to me and said, “You look like Ate (Name?) who came for (peer’s name)!”

We walk to the 4th floor for sign language class. Young W1 Caregiver tells me she has just worked her for over a year now. She redirects by speaking in English and Tagalog during the sign language class. She walks children by the hand when they need redirection. The deaf boy has huge gashes on both sides of his neck and jaws. All around him are learning his language.

Outside w/ girls ages 6-12. Very few playgrounds in Manila. Surprised they have a tiny alley park -block away to play regularly…They spot a worm. I sing a silly song (participation observation) about a worm. Children start killing worm with rock, I say without thinking, “Maybe he’s just looking for a home.” G21 who spoke to me about getting a family wants to draw with me. Other girls join and take turns with my pens and paper. They use word “love” and “family house”, “I love You”. G21 draws house, 7 sad faces/stick figures, and “No Food Family”. She scribbles out the house and says, “it got burned.”

I am guessing this interaction was because she was excited that I might be an adoptive mom? I was told in the September meeting with the director that once children are a bit older than they know that peers have found their “forever family” and their “forever homes” as the director and social workers search for a match. Some children reportedly start to speak about what family might come to adopt them. Many (not all) adoptive families come from places around the world that would make them possibly look like me.

Two weeks later: G21 is no longer at Orphanage Q. I had misunderstood her. She was being adopted in a matter of days.

Could these be used as possible art prompts, almost like member checks?
What kind of connection do I see between these girls and one another? Is there peer attachment?
APPENDIX E

General Observation Consent Process

Oral Script - English Version

I want to make everyone aware of a visitor who will be spending time at our organization. Aisling “Ashling” Zweigle has been a student, teacher and pastor in the United States and Canada. She now lives in Manila. “Ash” is working with her professors at Asia Pacific Nazarene Theological Seminary to write a thesis paper for her seminary graduation.

Purpose

- “Ash” is studying child development and knows that there are many children living in orphanages. She would like to learn about what life is like here between children and caregivers. She is particularly interested in observing relationships here in our organization.

Process

- “Ash” will spend approximately 5-6 hours with us, one day each week, to observe what it is like for children and staff. She is going to be here as a student and a learner from November-February.

- It is her intent to respect the wellbeing of the children and the staff. If at any time her presence is not respectful in this way “Ash” is open to changing her location and method of observation. She plans to use her time and observation to write a paper. This paper will be used to tell her professors about what she learned from us while she was here.

- You will probably see Ash holding a notebook and writing down some of her observations. She is not grading or assessing us on what she sees. In fact, I’m sure Ash will look to you as the experts in your work with our kids. She may want you to share with her about the important work you do every day.

- Ash chose our organization because of our commitment to helping kids heal from their hard stories. She knows that our work with children is vital work and impacts lives.

- Do you have any questions or concerns about what Ash is learning and writing about?

Confidentiality

- “Ash” has a strong ethic of confidentiality and is committed to keeping what she observes confidential. This is true for the children and the staff she observes. I want to tell you some of the things she is doing to protect the confidentiality of you as a person and the confidentiality of our organization. She will not use your name or describe characteristics that identify you in her notes or anything she writes for her
class. She will not use the name of our orphanage either. She will use code words or symbols instead of names.

• The only people who see what is written down on her paper will be Aisling’s professor(s). These people are trained to keep in confidence what they read and have signed a paper agreeing to tell no one the information shared.

• The volunteers, staff and even I will not read Aisling’s observation notes. Only the final paper will be made available to the director. At that time, the staff names will not be shared.

• When Aisling compiles her observations and notes to write a larger paper, all of the details that identify or describe specific children and staff will be combined so that identity remains anonymous. Only then will I be given the paper to read as a whole.

• Even with Ash’s commitment to confidentiality there is one reason she will breach that confidence. Just like all of you, if she observes a child receiving maltreatment, she will be required by this organization’s protection policy to report this. If she observes a child’s wellbeing being severely jeopardized she will report this to me or to a social worker on staff. Everything else she observes she will keep in confidence.

Does anyone have any questions or concerns about how Ash will be documenting her observations, how the information will be kept confidential or the one circumstance in which she would need to break confidentiality?

Aisling wanted me to express to each of you her gratitude for the opportunity to come to our organization and learn from each one of you. She plans to begin observations on the first Monday following this meeting and announcement. If there are any concerns or questions you are welcome to bring those to me. Also, Ash would be glad to speak with you as well.
APPENDIX F

Research Questions: English and Tagalog Script

The researcher’s central research question is: what is the nature of relationships between children and caregivers in a residential care setting? Ang sentro ng pag aaral na ito ay upang malaman ang relasyon ng bata at ng kanyang taga pangalaga (pwedeng ate, nanay) sa loob ng bahay - ampunan. After weeks of general observation, the emergent data suggests exploration of relationships between children and other staff members as well. Matapos ang ilang lingong pag aaral, ang mga datos na nakuha ay nagmumungkahi ng pagsasaliksik sa relasyon ng mga bata sa iba pang staff ng organisasyon.

The following are relevant sub-questions: Ang mga sumusunod ay ang mga katanungan:

7) How do the caregivers connect to and relate to the children at Orphanage Q? Paano nakikipag-ugnayan o kumunekta ang mga nangagalaga sa mga bata sa Ampunan Q.
   a. What characteristics describe these connections or lack thereof? Anong mga katangian ang makakapaglarawan ng koneksyong ito o kawalan ng relasyon ng mga bata at mga tagapangalaga.
   b. How do the children respond? Paano tumutugon ang mga bata?
   c. Are there children who respond uniquely? Mayroon bang mga batang tumutugon ng kakaiba?
   d. What factors might account for these unique responses? Anong mga dahilan ang makakapagpaliwanag sa kanilang pagtugon ng kakaiba?

8) How do the children initiate connections to the caregivers at Orphanage Q? Paano sinisumulang ipakita ng mga bata ang kanilang pakikipag-ugnayan sa kanilang tagapangangalaga sa ampunan Q?
a. What characteristics describe these connections or lack thereof?  
   Anong mga katangian ang makakapaglarawan ng koneksyon ito o kawalan ng relasyon ng mga bata at mga tagapangalaga.

b. How do the caregivers respond? Paano tumutugon ang mga tagapag-alaga?

c. Are there caregivers who respond uniquely? Mayroon bang mga tagapangalang na tumutugon ng kakaiba?

d. What factors might account for these unique responses? Anong mga dahilan ang makakapagpaliwanag sa kanilang pagtugon ng kakaiba?

9) What other relationships exist at Orphanage Q. Ano pa ang ibang mga relasyon na makikita sa ampunan Q?

   a. Do other staff members make connections with the children?  
      Nakikipag-ugnayan ba ang ibang mga staff sa mga bata?

   b. How do the children respond? Paano tumutugon ang mga bata?

   c. Are their children who respond uniquely? Mayroon bang mga bata na tumutugon ng kakaiba?

   d. What factors might account for these unique responses? Anong mga dahilan ang makakapagpaliwanag sa kanilang pagtugon ng kakaiba?

10) How do the children initiate connections with other staff members at Orphanage Q? Paano sinisumulang ipakita ng mga bata ang kanilang pakikipga ugnayan sa ibang mga staff sa ampunan Q?

   a. How do the staff members respond? Paano tumutugon ang mga staff?

   b. Are their (there) staff members who respond uniquely? Mayroon bang mga tagapangalang na tumutugon ng kakaiba?

   c. What factors might account for these unique responses? Anong mga dahilan ang makakapagpaliwanag sa kanilang pagtugon ng kakaiba?
11) Have you experienced attachment and the growth of love at Orphanage Q?
   Naranasan mo na ba ang lumalalim na pakikipag-ugnayan at koneksyon sa ampunan Q?
   a. Have you experienced attachment with a child? Naranasan mo ba ang malapit na pakikipag-ugnayan sa isang bata?
   b. What does this look like? Maaari mo ba itong ilarawan?
   c. What factors might account for this growth of love? Anong mga dahilan ang makakapagpaliwanag dito sa lumalalim na koneksyon?
   d. Has a child expressed attachment with you? May bata bang nakapagpakita na sa iyo ng malalim na koneksyon o pakikipag-ugnayan?
   e. What does this look like? Maaari mo ba itong ilarawan?
   f. What factors might account for this growth of love? Anong mga dahilan ang makakapagpaliwanag dito sa lumalalim na koneksyon o pakikipag-ugnayan?

12) Are there children lacking attachment and the growth of love at Orphanage Q?
   Mayroon bang mga bata na kulang sa pakikipag-ugnayan o koneksyon sa ampunan Q?
   a. What does this look like? Maaari mo ba itong ilarawan?
   b. What factors might account for these children’s lack of attachment?
      Anong mga dahilan ang makakapagpaliwanag sa kawalan ng koneksyon ng mga bata?
APPENDIX G

Agreement to Maintain Confidentiality

Translator

I ______________________________ agree to maintain the confidentiality of all information about any of the subjects if I am hired to translate for the observations/interviews of children/staff engaged in by Aisling Zweigle, of Asia Pacific Nazarene Theological Seminary (Rizal, Philippines). I understand that I may not discuss the contents of any of the observations/interviews with anyone except Aisling Zweigle and that I may not make reference to the names, identity, or circumstances of any of the individuals who I come in contact with through this project. This is to protect the rights of vulnerable children, youth and staff. Finally, I understand that if I violate this agreement of confidentiality it may affect payment for my services as a translator.

I understand the above conditions on this project, and I agree to these conditions without reservation.

Signed: ___________________________  Date: _______________
(Translator)

Signed: ___________________________  Date: _______________
(Researcher)

Signed: ___________________________  Date: _______________
(Witness)
APPENDIX H

Oral Script Consent Process

English Version and Tagalog Version

I would like to thank you for your time and for talking with me. **Maraming salamat sa iyong oras na makipag usap sa akin.** I have been a student, teacher and pastor in the United States and Canada **Ako ay isang estudyante, guro at pastor mula sa America at Canada.** Now I live in Manila, **ngayon ako ay naninirahan na sa Pilipinas.** I am working with my professors at Asia Pacific Nazarene Theological Seminary to write a thesis paper for my seminary graduation. **Kasama ko ang aking mga guro mula Asia Pacific Nazarene Theological Seminary sa pagsusulat ng provektong ito.**

**Purpose Layunin**

- I am studying child development and I know that there are many children living in orphanages. **Ang aking pinag aaralan ay ukol sa Child Development at alam ko na maraming bata ang naninirahan sa mga bahay ampunan.** I am interested in hearing about you and your relationships at Orphanage Q. **Nais kong makiala ka at malaman ang iyong pakikpag ugnayan sa loob ng Orphanage Q.** I would like to learn about (who takes care of you/who you take care of) and what your life is like here. **Nais kong matuto at malaman kun (sino ang nangagalaga sa iyo / o sino ang iyong inaalagaan) at kung ano ang inyong buhay sa loob ng bahay na ito.**

Do you have any questions about the reason why I would like to speak with you? **Mayroon ka bang tanong kung bakit ako nandito at bakit ko nais na makipag usap sa iyo?**

*(Questions answered until participant indicates that they are satisfied with the answer.)*

- You do not have to talk with me if you do not want to. **Hindi mo kailangan magsalita or makipag usap sa akin kung ayaw mo.** We can say goodbye if you want. **Pwede kang mag paalam sa akin.** *(If the child indicates this is his/her desire, the interview will be terminated).* If you think you might want to talk with me, **kung gusto mo naman ako kausapin,** I would like to tell you a little more
about what that would be like and what I might ask you. **Gusto kong ikwento pa sa iyo kung ano pa ang mga itatanong ko sa iyo sa pag aaral na ito.**

**Process Pamamaraan**

- If you agree to participate in this interview, it will take about one or two hours. **Kung gusto mo sumali sa usapang ito, ito ay tatakbo ng isa hanggang dalawang oras.**

- I will record our conversation on this digital recorder. **Rerecord ko an gating usapan sa recorder na ito (If necessary, demonstrate how the digital recording works).**

- I will start by asking you to tell me about a typical day for you. **Magsisimula ako sa pagtatanong sa iyong normal na araw.** Though I am interested in hearing from you, you control what it is you choose to tell me and what you choose not to tell me. **Ako ay interesado sa kwesto ng iyong buhay, ikaw ay may control sa mga bagay na ibabahagai mo sa akin or sa mga bagay na hindi mo ibabahagi sa akin.** Most of the time I will listen. **Ako ay makikinig lamang.** Sometimes I will ask questions. **Minsan ako ay mag tatanong.** Sometimes I might ask you to draw me pictures that explain what you are saying with your words. **Minsan sasabihin ko sa iyo na I drowing mo ang picture na nagpapaliwanag ng iyong kwento.**

Do you have any questions about what we will be talking about, if you agree to speak with me? **May tanong ka ba kung ano ang pag uusapan natin, ikaw ba ay pumapayag na makipag usap sa akin.**

*(Questions answered until participant indicates that they are satisfied with the answer.)* If you want, you can stop the interview at any time. **Pwede din natin itigil ang interbyu sa anumang oras.** I would like you to know that I do not want to do anything to hurt you, or to profit from you, or to make you feel uncomfortable. **Nais ko na malaman mo na hindi ako gagawa ng ikakasama mo at hindi ka magiging kumportable.** You have the right to refuse to answer any questions just by saying that you do not want to answer it. **Mayroon kang karapatan na hindi sagutin ang mga tanong kung avaw mo.** If you want to answer a question, but you want your answer to be off the recording, just tell me, and I will turn the recording off until you tell me I can start again. **Kung gusto mong sumagot ngunit nais mong wala sa recording, okay lang vun, basta sabihin mo lang sa akin.**
Do you have any questions about your right to not answer any of the questions or your right to stop the conversation? **Mayroon ka bang tanong sa iyong karapatan na hindi sumagot o ihinto ang pag uusap kung ayaw mo?**

*(Questions answered until participant indicates that they are satisfied with the answer.)*

- Sometimes, the *(children/caregivers)* that I interview need to stop and go somewhere else. **Minsan ang mga (bata/tagapangala) ay nararapat na huminto sa interview.** If this happens, please tell me and we can plan another meeting, if you want. **Magsabi ka lamang kung kailangan nating huminto sa interview, tayo ay mag pa plano sa sunod nating meeting.**

- After the interview, I will think more about the things you shared with me. Then I would like to share my thoughts with you to see if I fully understood what you told me. If that would be ok with you, after the interview I will ask you when and how I could find you for a second interview. The second interview should take approximately 45 minutes. **Matapos ang interview, kailangan ko ding ibahagi ang aking natutunan at nakuhang datos kung ito ay tamang nga. Ang pangalawang interview ay tatakbo ng 45 minutes.**

Do you have any questions about the second interview? **May tanong kaba ukol sa pangalawang interview.**

*(Questions answered until participant indicates that they are satisfied with the answer.)*

- Later, the words that we say to each other will be written so they will be on paper. Here you will not be identified by name or any other thing or characteristic that will allow other people to guess who you are. **Ang mga bagay na iyong binabahagi sa akin ay aking isusulat, ngunit hindi ko naman ilalagay ang iyong buong pangalan at pagkaka kilalan.**

Do you have any questions about this? **Mayroon ka bang tanong?**

*(Questions answered until participant indicates that they are satisfied with the answer.)*
Confidentiality Kasunduan sa Paglilibhim

• It is important for me to tell you some of the conditions that help me to keep what you tell me in confidence/secret. Mahalaga na sabihin ko sa iyo ang mga kasunduan natin ukol sa paglilibhim.

• Besides me, the only people that will hear your interviews or will see it written down on paper will be the person that will hear the recordings and write what you say on paper, the person that will help me translate it from Tagalog to English, and my professor(s). These people were trained to keep in confidence what they heard or read and have signed a paper agreeing to tell no one the information you have shared with me. Maliban sa akin mayroon ding ibang tao na makakarinig ng interview at makakabasa ng aking mga sinulat. Sila ay mga trained sa paglilibhim at sila ay nagako na hindi nila sasabihin kanino man ang kanilang nabasa at narinig.

• There may be a possibility to combine the words of several (children/caregivers) to write a large story. If I do this, I will combine what you told me with what other (children/caregivers) told me. Here you will not be identified by name or any other thing or characteristic that will allow other people to guess who you are. May mga pagkakataon na kailangan kong pag isahin ang sagot ng mga (bata/tagapangalaga) upang makapasulat ng isang kwento. Sa ginatong pagkakataon, hindi mababangit ang iyong pangalan o anumang pagaka kilanlan.

• If you don’t want your name in the recording, you can choose another name, or a nickname. This way, there will be no connection between narrative and name even in the recording. Kung ayaw mong ilagay ang iyong pangalan sa recording, maari kang magpaliit ng pangalan. Sa ginatong paraan hindi ma ikokonek ang kwento ng buhay sa iyong pangalan.

• Interview materials will be kept with my personal things near me when I travel and will be locked in a case. When I go back to the seminary, the recordings will be kept in a locked, secure place, away from anyone other than my professor(s) and me. When I am finished I will erase and destroy the recording. Ang mga gamit ko sa pag interview ay aking itatabi sa aking personal na bagay, kung ako ay nasa byah, ito ay ilalagay sa isang lugar na nakatabi. Pag natapos na ako sa aking pag aaral, aking buburahin lahat ng recording.
Do you have any questions about these conditions? **Mayroon ka bang mga tanong.**

*(Questions answered until participant indicates that they are satisfied with the answer.)*

- It is important for me to tell you that there are two things that I am not allowed to keep secret. First, if you tell me you have a plan to end your life, and second, if you tell me you have a plan to end someone else’s life. When I use the word plan, I mean that you know what you what to do, how you want to do it and when. Under those two circumstances I cannot keep a secret. If you share that information with me I will immediately contact a foundation that is an expert with children who will help me keep you and others safe. **Mayroong dalawang bagay na dapat kong sabihin sa ibang tao kung sakaling ito ay iyong ikwento sa akion – una, kung nais mong magpakamatay at pangalawa kung nais mong pumatay. Kung ang bagay na ito ay iyong maibahagi sa akin, akin agad sasabihin sa staff sa orphanage na may expertise sa pagtulong sa iyo upang masigurado ang iyong buhay at buhay ng iba.**

- It is important for you to know these things before we talk so you can choose whether or not to share that type of information with me. **Dapat alam mo ito bago tayo mag usap upang mapili moa ng mga bagay na ikukwento mo sa akin.**

Do you have any questions about the two things I am not allowed to keep a secret or what will happen if you share that information with me? **Mayroon ka bang tanong sa dalawang bagay na hindi ako pwede maglihim?**

*(Questions answered until participant indicates that they are satisfied with the answer.)*

Do you have any other questions before we begin? **May tanong ka bago ako mag simula?**

*(Questions answered until participant indicates that they are satisfied with the answer.)*

- Would you still be willing to talk with me about your life and your relationships at Orphanage Q? **Nais mo pa ba akong kausapin uko sa ivong buhay at relasyon sa Orphanage Q?**

*If the child/caregiver responds in the negative, the interview will be terminated. If the child/caregiver responds in the positive, the co-investigator will ask the initial question.*
APPENDIX I

Informed Consent Witness Form

Interviews

I, _____________________________________, give witness to the facilitation of the oral script with _________________ as approved by the Holistic Child Development Department of Asia Pacific Nazarene Theological Seminary. The following areas were discussed with the aforementioned child, youth or caregiver, per the oral script, on the dates noted:

☐ Purpose ____________________________
   date

☐ Process ____________________________
   date

☐ Confidentiality _____________________
   date

Following the completion of the oral script, the aforementioned child, youth, or caregiver consented to participate in an extended conversation with researcher Aisling Zweigle.

____________________________________
   Translator’s Signature

___________________
   Date
APPENDIX J

Caregiver and Orphanage Staff Initiated Connection Chart

| 1—Physical Touch and Nearness | ❖ Proximity or staying near the child throughout the day, (W1, W2, W4, W5, W9, W11)  
❖ Placing a hand on a child’s shoulder or side, (W1, W4)  
❖ Providing art activities in your room so one-on-one time is possible for one child, (W1, W3)  
❖ Holding a child’s hand (not just a wrist) to direct them, (W4, W20) |
| 2—Community and Social Networking | ❖ Inviting a child to participate in group-play, (W1, W3, W18)  
❖ Caring enough to listen to a child’s hurts stories, (W3, W18)  
❖ Meet with groups of peers to negotiate complaints, (W1, 18)  
❖ Large group prayer, devotions, family-style meetings, (W18)  
❖ Encourage children to not go off by themselves, stay with the group (W1) |
| 3—Facial affect, Visual and Verbal Cues | ❖ Looking a child in the eyes, (W1, W3, W4, W5, W9, W11, W18, W22)  
❖ Matching a nonverbal child’s sounds or gestures with playful sounds, (W9, W11, W22)  
❖ Being the first person to greet a child with a smile when they wake up, (W4, W9)  
❖ Mirroring/matching eye contact, facial expression, (W9, W11, W22) |
| 4—Significance and Respect | ❖ Saying a child’s name when you speak to them, (W1, W18)  
❖ Getting on a child’s level while speaking, (W1, W7, W9)  
❖ Celebrating a child’s progress (Remembering how far they’ve come), (*PP, W18)  
❖ Eating meals with a child, (W3, W4, W21)  
❖ Asking a child about what kind of adoptive family they prefer, (*PP, W20)  
❖ Modeling respect for children and adults; teaching children to practice respect (W22, W18, W1) |
| 5—Consistency of Care and Structure | ❖ Being willing to spend lots and lots and lots of time with a child, (W1, W3, M2, W21)  
❖ Providing for a child’s hygiene and self-care needs (W1, W3, W4, W9, W11)  
❖ Providing clothes, food, medicine, (W1, W3, W4, W9, W11, W14, W18, W21, W22) |
| 6—Boundaries and Correction | ❖ Reminding a child to be kind but not shaming them in front of others, (W18, W22)  
❖ Letting children do things in their own time when they are ready, (W18)  
❖ Helping children negotiate conflict, (W1, W18) |
| 7—Playfulness and Creativity | ❖ Laughing with a child during imaginative play, (W4, W18)  
❖ Singing and dancing with children, (W4, W18)  
❖ Playing the games children already know and like to play, (W18)  
❖ Outside play catching a child who jumps, off climbing bars or steps, into your arms, (W3) |
| 8—Trauma-informed Care for Individual Child Needs | ❖ Holding a child who is scared, (W1, W3, W4, W5, W9, W11, W14)  
❖ Knowing a child’s fears or triggers from trauma, (W1, M2, W3, W11, W18, W22)  
❖ Making it a priority to answer every time a traumatized child calls for you, (W3, W22)  
❖ Trying new ways to connect to a child since each child has unique needs, (W18, W21, W22)  
❖ Returning by a child’s bedside when they wake up from a nightmare, (W4, W5) |
| 9—Security and Safeguarding | |
- Listening when a child feels discouraged or mistreated, (W1, 18, W21)
- Going with a child to a medical appointment, (W21)
- Staying close to a child until they fall asleep at night, (W3, W4, W5)
- Being in the courtroom when a child is faced with someone who hurt or raped them, (W22)
- Taking a child on a trip outside the center, (*PP, W4, W5, W22)
- Bringing a child to your home, (W4, W5)
- Staying close to a child when a stranger is in the room, (*PP, W9, W11, W18)

### 10—Skill Building
- Giving a child advice when they have a problem, (W21)
- Assisting a child with new materials, activity (W1, W3, W4, W5)
- Helping a child with their homework, (W21)
- Preparing a child for adoption with a keepsake photo book of where they’ve been and where they are going next, who they’ve loved and who they will be loving next, (*PP, W22)
- Making sure a child is ready to sit closer to an adoptive parent who has arrived, (*PP, W22)

### 11—Commitment
- Remembering the child even after they are gone to a new home, (*PP, M2, W5, W11, W18)
- Grieving when a child leaves even though you are happy they have a new family to care for them, (*PP, W5, W11, W18, W22)
- Keeping photos or keepsake items honoring connection shared with a child (*PP, M2)
- Not giving up on a child even when they reject you, fight you, or ignore you, (W1, W22)
- “I will not magsawa” (I will not give up on you) (W1, W22)
- “I think of the children when I am away - I know they need me to return.” (W1, W3, W4, W5, W14)

*PP – Pilot Project observations and interviews

**All other name codes refer to Orphanage Q caregivers, social workers, director, and support staff.
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Websites, Blogs, Social Networks, and Discussion Group


CURRICULUM VITA

AISLING ZWEIGLE

PERSONAL
Date of Birth: August 1, 1976

Place of Birth: Dublin, Ireland

Citizenship: USA & Canada

OBJECTIVE
Child Development Specialist; Child Advocate; Child/Family Pastor; Early Childhood Educator

EMPLOYMENT

Nampa First Church of the Nazarene, Nampa, ID, USA

➢ Children’s (Elementary) Pastor

Global Ministry- Church of the Nazarene, Metro-Manila, Philippines

Child Advocate & Holistic Child Development Graduate Student

✓ Original Qualitative Research- Attachment & Trauma Intervention for Children-At-Risk in Orphanage Q
✓ Facilitate Child Advocacy Trainings in Cross-Cultural Groups and Urban Poor Churches and Communities
✓ Child Advocacy Writing, Speaking & Fundraising Projects [https://goandgrowchildren.wordpress.com](https://goandgrowchildren.wordpress.com) advocacy/donor blog

Vancouver Child Study Centre, Vancouver, BC, Canada

➢ Early Childhood Educator

✓ Design classroom exploration & activities
✓ Document children’s development and growth
✓ Teach on live digital video feed for parents in adjacent room
✓ Periodic parent conferencing re: child’s temperament & development
✓ Ongoing child development & ECE continuing education
**Vancouver First Church of the Nazarene, Vancouver, BC, Canada**

**Sept. 2009 - July 2014**

- **Children, Youth, and Families Pastor/Coordinator**
  - Lead team of volunteers in Christian education & annual calendar planning
  - Lead multi-cultural community events
  - In-Home parent-child visitation and communication
  - Direct annual Christmas musical
  - Lead annual family sponsorship/mission fundraising
  - Facilitate family crisis care and intervention

**Tecumseh Annex Elementary School**

**Sept. 2006 - July 2011**

- **Parent Advisory Committee (PAC) Chairperson & Volunteer**
  - Assist in planning & managing school-wide events
  - Build community with diverse student body and families
  - Fundraise & grass roots community outreach & planning

**Kensington Community Centre**

**Jan. 2006 - July 2010**

- **Community Volunteer & Children/Families Teacher/Educator**
  - Design & lead Singing/Sharing Child & Family Weekly Classes
  - Build community with diverse community children and families
  - Assist Community Preschool in curriculum planning & teaching
  - Volunteer Parent/Child Representative in After-School Sports Club

**Beacon Hill Church of the Nazarene, Seattle, WA, USA**

**Feb. 2000 – September 2005**

- **Children’s Ministry Coordinator**
  - Design classroom exploration & activities
  - Oversee Christian Education Curriculum & Planning
  - In-Home Parent & Child Visitation
  - Manage Weekly Volunteers & Special Events
The Children’s Place, Kansas City, MO, USA

January 1998 - February 2000

- Day Treatment Teacher – Infant/Toddler/Preschool
- Caregiving & Classroom Routines for Abused, Neglected, Foster Care Kids
- Work with Team of Therapists, Speech, OT, and Family Counselors/MSW
- Manage weekly classroom volunteers
- Update Child Individual Development Plans (IDP) for Classroom
- Staff Appreciation and Special Event Committee Chairperson

EDUCATION

Asia-Pacific Nazarene Theological Seminary, Manila, Philippines

May 2017

Master of Arts Religious Education - Holistic Child Development

Thesis: An Exploration of Relationships and Potential for the Growth of Love—A Grounded Theory Study in Orphanage Q

Nazarene Theological Seminary, Kansas City, MO, USA

May 2016

Graduate Diploma in Cross Cultural Ministries,

Portfolio: 365m Philippines, C-ing Eye Guide: Context, Compassion, Creativity

Burnaby Continuing Education, Burnaby, BC, Canada

June 2010

British Columbia Licensed Early Childhood Educator,

Certificate in Early Childhood Education,

MidAmerica Nazarene University, Olathe, KS, USA

April 1998

Bachelor of Arts in Psychology, Nearly Minor Fine Arts,

Internship/Employment: The Children’s Place Day Treatment Program, KCMO, for Abused/Neglected Children in Foster Care System

SKILLS

- Training – Reggio Emilia –emergent Early Childhood Ed. trained; Art documentation - child observation, assessment, curriculum design;
• **Research** - Graduate qualitative ethnographic research among urban-poor, Cross-cultural ethnographic interviews and relationship.

• **Facilitating** – KidUnique Training and Public Speaking – Dan Webster/Book; Reaching Children At-Risk – Original Training; Child Protection Training.

• **Computer Skills** - Microsoft Word; Prezi; Social Media;

• **Advocacy & Fundraising** – Mail Chimp and Wordpress Blog - Advocacy Stories and Donor Communication [https://goandgrowchildren.wordpress.com](https://goandgrowchildren.wordpress.com)

**PUBLICATIONS**

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Pending • **Angels in Disguise**, Viva Hong Kong –child advocacy online story,

January 2017 • **When I Awake, I Am Still with You**, Barnabas Letter -Crisis Care International,

May 2017 • **Rich in Relationships**, NCM Magazine -Nazarene Compassionate Ministries,

Pending • **C2C – Child 2 Champion Curriculum**, 10-week series, To Be Published

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