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A Restrospective Study Of Foster Care Interventions And Social Policy For youth Transitioning To IndependentLiving

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A RETROSPECTIVE STUDY OF FOSTER CARE INTERVENTION

AND SOCIAL POLICY FOR YOUTH TRANSITIONING

TO INDEPENDENT LIVING

_____

A Project

Presented to the

Faculty of

California State University,

San Bernardino

_____

In Partial Fulfillment

of the Requirements for the Degree

Master of Social Work

_____

by

Sandra Reed

March 2014

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Approved by:

Dr. Rosemary McCaslin, Faculty Supervisor, Social Work

Dr. Rosemary McCaslin, M.S.W. Research Coordinator

ABSTRACT

This is a comprehensive study of youth in the foster care system. It examines perceptual experiences of the youth before, during, and after transitioning to independent living. Additionally, it delineates their exposure to employment, education, mentors, and counseling programs. Furthermore, it renders social work practitioners with insight on the tensions and challenges transitioning youth face before and after conversion, as well as available programs to assist the youth throughout the transitioning phase – specifically, programs that:

- Pursue educational and vocational opportunities;

- Build supportive relationships and connections;

- Assist with finding and maintaining employment;

- Teach money management skills;

- Assist with securing housing;

- Help maintain health and wellness; and,

- Develop additional life skills.

This study highlights the future of transitioning youth and the types of assistance needed to help them age-out of foster care gracefully and live productive

lives. The factors herein are not only critical, but

meticulously evaluated and considered top priority during

the collection of data for purposes of this research.

ACKNOWLEDGMENTS

DEDICATION

I dedicate my thesis work to a lady whose love and support inspired me to help those who are unable to help themselves; whose legacy of hope, strength, and spirit of ingenuity laid the foundation upon which I am able to ride the waves of persistence, snatch victory from the jaws of defeat, strengthen the bones of my character, purify the blood of my patience, and, most importantly, maintain faith and trust in God throughout my journey; this lady, whose discipline was firm, yet gentle enough to provide enough room wherein I could learn from my mistakes, who supported me when I made mistakes while giving me the opportunity to choose my own course through life, who set an example throughout the course, and one who sacrificed so much for me. This lady, my Mother, "Evelyn," I will forever love with all my heart for the time she spent being mother. (RIP)

I also dedicate my thesis to my foster children for their love, patience and support; and to all the counselors, mentors and foster care providers who dedicate their time, resources, guidance and love so that youth in foster care can be empowered to live productive lives.

I dedicate this thesis to my family and friends whose inspiration and belief in me strengthened my resolve to persevere and not give up; and last but not least, I dedicate this thesis and give a very special thanks to my daughter, Kayla, who cheered me on throughout the process.

TABLE OF CONTENTS

LIST OF TABLES

LIST OF FIGURES

CHAPTER ONE

INTRODUCTION

This chapter provides an overview of risk factors
which significantly impact youth who are emancipating /
transitioning out of foster care. It substantiates and
confirmed the many challenging experiences youth face
before and after foster care. Portions of this chapter
include, but are not limited to, indispensable services
needed for successful transitioning. In addition , to
understanding the clinical ramifications such as
attachment, cognitive, and behavioral issues , this
section discusses social services and foster care systems
with best practice interventions that promote resiliency.

Regrettably, services presently available to former
and transitioning youth are not entirely effectual in
accomplishing self-sufficiency. Predictors indicate that
the number of youth aging-out of the foster care system
will continue to rise resulting in an influx of
homelessness within the foster care population.

Problem Statement

According to, the Child Welfare 2004-2007 Report to
Congress, approximately 246,000 children nationally were

in foster care. The age of children entering foster care varied across states making it is extremely difficult to evaluate how many transitioning youth received proper assessments, training, and monetary assistance while in foster care. In addition, over the past decade, there were little to no early intervention programs put in place and implemented during the early stages of foster care. Aforementioned, information regarding successful emancipation was sparse, making it difficult to sort out effective resources (Child Welfare Executive Report, 2004-2007).

"Caring relationships convey loving support" Dovetail Learning (2014) states that youth feel empowered and appreciated when adults actively listen to them. Many foster youth are stigmatized and are left feeling ignored and incapable, in most cases powerless. However, these negative attributes can be developed into positive ones by incorporating developmental assets "Building Blocks" that produces strong characteristics for children who are at-risk, specifically foster children (Learning, 2014). Veronica Lockett (2014), a researcher, states in her study that a significant amount transitioning youth faced serious difficulty while transitioning to life on their

own. Veronica's research indicates that many transitioning youth are homeless and are unable to maintain basic living expenses in addition, to meeting health care needs (Lockett, 2014, p. 7). In foster care multiple placements and less education correlated with a more difficult transitioning outcome. (Biddle, 2010).

Purpose of the Study

The purpose of this research is to re-evaluate services that are advantageous to youth who are transitioning into independent living. The progression of a more successful emancipation for youth who age-out of care can be enhanced by additional services provided by counselors, mentors and foster care systems. For the well-being of foster children, it is extremely important for this study to analyze and expound on the mental health of children currently in foster care, as well as youth who are transitioning from it. Early interventions should be implemented during the initial stages of foster care so that children will be better equipped and prepared to live independently.

Emancipated youth represent an important subgroup of the out-of-home care population, many of which are

suffering with undiagnosed mental disorders. The National Survey of Child and Adolescent Well-Being (1997-2013), states that nearly half the amount of children enter foster care with clinical problems. Forty-seven percent (47%) ages 6 to 11, and 40 percent (40%) ages 12 to 14 suffer mental-health related problems (Child Trends Data Bank, 2012, pp. 2-6). The purpose of this study is also, to understand the risk factors associated with foster children, including social, emotional, and psychological factors, as well as research-based best practice interventions that are essential for the well-being of the child.

Many youth between the ages of eighteen-to twenty-one choose not to participate in programs such as, Independent Living Programs mainly because of their lack of understanding. The policy (2011) of honoring the client's right to self-determination can sometime result in averting indispensable services that oftentimes reduces the chance of successful transitioning (Burkes & Fernandez, 2011, pp. 7-8).

Both, former and current participants between the ages of 18 to 25 were able to provide quantitative, first-hand data of their personal transitioning

experiences. The data obtained provided specific information related to resources and the transition phase. A thorough reassessment of those resources supplied this study with previous interventions that were not effective. Many of the youth did not involve themselves with the Independent Living Program due to one of two reasons: (1) Lack of information of the services available, or (2) they did not understand the significance of the program. The re-evaluation of case records provided this research with effective as well as ineffective services of the past and present. The researcher did not include Youth who did not participate in the Independent Living Program due to undocumented records of the agency.

It was difficult to determine how many youth received proper evaluations, training, and monetary assistance. Furthermore, over the past decade, there were no early intervention programs introduced or implemented into the foster care programs during the primary stages of foster care.

A National Survey (1997-2012) states that nearly half of foster children are encountering high levels of clinical problems. Forty-seven percent (47%) of children

ages 6 to 11, and 40 percent (40%) of children ages 12 to 14 suffer mental-health related problems (Child Trends, 2012, pp. 1-4).

Predictors indicate that 2.5 through 4.0 had been homeless at least one night after exiting foster care. In Wisconsin, 34% of foster youth had been homeless or lived in four or more places 12-18 months after exiting the foster care system (Cook, 2014). It is imperative that the child welfare system (CWS) investigate the types of federal and state social welfare policies that best support research-based practice. Early Interventions should be implemented to better equip transitioning youth.

According to the National Association of Social Work, the out-of-home care population, emancipating youths represent an important subclass. It is important to utilize original detailed data that subsequently, establishes a comprehensive program configured for the well-being of foster children. In addition to analyzing, defining, and describing the characteristics of well-rounded youth. The ineffectiveness of previous services confirms why former and present-day youth experience negative transitions. The National Association

of Social Work states that, "Working across disciplines is critical in promoting children's well-being. Teachers, community and faith leaders, medical professionals, police officers, juvenile probation officers, and child welfare workers are among the professionals who can work together to protect the well-being of children" (NASW Standards for Social Work in Child Welfare, 2014)

Approximately 19 percent of all children in foster care are ages 16 and older. Roughly, one-half of that 19 percent drop out of school, limiting their ability to secure employment and achieve self-sufficiency (Oldmixon, 2014). These statistics strongly implicate the importance of education and the role it plays in living independently. According to Oldmixion, most youth who exit the foster care system do not acquire adequate preparation, assistance, or training for their changeover to independent living. In comparison to other youth, foster youth are more probable to be homeless, imprisoned, jobless, and unskilled. Further, transitioning youth are more likely to experience physical, developmental, behavioral, and mental health challenges (State Policies, 2007).

According to, Oldmixion, the NGA (2007) Center for Best Practices, state that former and current emancipated youth are at a greater risk than their peers to experience substance abuse and mental illness. Teenage pregnancy, early parenthood, homelessness, and police encounters are also risking factors. These analysts found that circumstances leading to a youth's placement in the foster care system greatly contributes to their emotional disabilities (Oldmixon, 2014). The journal found that many youth in foster care experienced psychological and anxiety disorders, interpersonal phobias, and anxiousness two to four times the rate of the general population (Oldmixon, 2014).

The makeup and composition of many foster caregivers and agencies are not properly configured to understand or address mental illness. Alternatively, the primary focus is to provide for the child in terms of food, clothing and shelter. Independence among foster children is acknowledged more than other young adults that have lived with their biological families.

Twenty-six Percent of foster kids in the Los Angeles Unified School District are special education cases, rather than peers (Biddle, 2010). Statistics show that

four years after emancipation fifty-percent of the youth are able to maintain a job and 1/3 have a household level below poverty. The research indicates that former foster youth has reported symptoms of post-traumatic stress disorder. Biddle also noted that roughly thirty percent of foster youth who age-out of foster care have mental health disorders – primarily depression. Teen birth rates were twice that of the general population, and nearly half of all girls who live in foster care are pregnant before or by the age of nineteen, (Biddle, 2010).

When children exit foster care their resources become limited and most have none at all. Youth who have transitioned are no longer receiving full benefits which effects their ability to live independently. Transitioning youth must have the ability to identify resources that could effectively impact their transition. Without the support or assets to live independently youth are left troubled and/or seeking the help of available sources.

In 1990, Search Institute released a model comprised of forty Developmental Assets, which identifies a set of skills, experiences, relationships, and behaviors designed to assist young people with developing into

successful and contributing adults. The Developmental Assets framework and conceptualization are frequently referenced and widely-used data worldwide, creating what Stanford University's William Damon described as a "sea change" in adolescent development (Institute, 2014). The Search Institute has gathered data on more than four million children from all nationalities. This data systematically demonstrates how youth involved with Developmental Assets have greater chances of succeeding in school and successfully living independently. Developmental Assets endorsed by the Johns Hopkins University strive to increase the list of developmental adolescent's assets by incorporating positive experiences attributable to such things as reinforcement, boundaries, values and commitment to learning (Center for Adolescent Health, Johns Hopkins University, 2009). According to Search Institute, these assets include the forty essential building blocks children need to grow into healthy, thriving adults. These building blocks not only contribute to the success of young people, they also "measure the quality and quantity of support that young people receive through the evaluation of the (Institute, 2014) forty developmental assets" (Institute, 2014).

Developmental Assets surveys are specifically
designed to measure/determine three extremely important
factors:

1. The level of social and emotional well-being
    that teenagers display;

2. Differentials with reference to the types of
    assistance needed from their schools, family,
    other adults, and faith community; and,

3. The probability of teens engaging in calamitous
    behaviors lead to low self-esteem, and/or their
    inability to make sound decisions.

Developmental Assets maintains a reputation for its
dexterity in protecting youth or preventing them from
harmful or unhealthy tendencies including the use of
illicit drugs, tobacco and/or alcohol, gang involvement,
antisocial behavior, early sexual activity, gambling,
school problems, and other destructive behaviors. The
Developmental Assets movement was originated by YMCA of
the USA and the Search Institute - a nonprofit advisement
group that has engaged in problem-solving methodologies
for over fifty years, and have studied millions of youth
across the nation (Institute, 2014)

According to Search Institute, John Hopkins University found their findings to be concrete, coherent, and positive. The Developmental Assets movement utilizes attributes that are essential to rising successful, healthy, and independent young people (Institute, 2014)

Limitations

Although, limitations occurred due to deviations between participants, the results differ because of sampling variability as with all studies that are performed on a limited number of participants or respondents. This study reported differences among the participants in its findings. In describing the variables, the researcher carefully considered the size of the sample because it allowed the researcher to control the risk of reporting a false-negative finding (Type II error). Nevertheless, the researcher put every conceivable effort in providing best practice interventions that support the successful transition of emancipating youth.

Definition of Terms

The following terms are defined as they apply to the thesis.

Emancipation - a legal mechanism by which a minor is freed from control by his or her parents or guardians and the parents or guardians are freed from any and all responsibility toward the child. In some cases, emancipation can be granted without due court granting when the minor is bound to make a decision for themselves in the absence of their parents (who may be already dead or who may have abandoned the minor).

Barriers to Employment - Conditions that may make employment difficult for certain individuals. Individuals with such barriers may include: single parents, displaced homemakers, youth, public assistance recipients, older workers, substance abusers, teenage parents, veterans, ethnic minorities, limited English speaking ability, criminal records, lack of education, work experience, credentials, transportation and child care arrangements.

Program Exit – The term program exit means a participant does not receive a service funded by the program or funded by a partner program for ninety (90) consecutive calendar days and is not scheduled for future services.

Life Skills - skills included in adult literacy pertains topics such as, consumer economics, government and law, occupational knowledge, community resources and health which are educational agency's basic literacy skills course of study.

School Dropout – An individual who is no longer attending any school and who has not received a secondary school diploma or a General Equivalency Diploma (GED).

Self-Sufficiency – The ability to earn enough money to support oneself, i.e.:

1. Meeting basic expenses (such as housing, transportation, food, clothing, health care, savings, and taxes) without subsidies; Independence from federal, state and local government assistance, with access affordable health care;

2. A wage of at least $9.90 per hour ($20,590 annually for an individual based on the northwest policy center "living wage" study and adjusted for inflation which will occur annually). The wage per hour is based on a single full-time job of 32-40 hours per week.

3. Supportive Services – Services that are needed to help a person to participate in job training or job search. Supportive services may include transportation, health care, financial assistance, drug and alcohol abuse counseling and referral, individual and family counseling, special services and materials for individuals with disabilities, job coaches, child care and dependent care, temporary shelter, financial counseling, and other reasonable expenses required for participation in the program.

Underemployed individuals - (a) persons who work on a part-time basis , but seek full time work ; or (b) persons who work full time , whose current annualized wage rate is not in excess of "for a family of" the higher of either: (i) the poverty

level, or (ii) 70% of the lower living standard

income level.

Family – Two or more persons related by blood, marriage,

or decree of the court, who are living in a single

residence, and are included in one or more to the

following categories: 1. Husband, wife, and

dependent children. 2. A parent or guardian and

dependent children. 3. A husband and wife.

Hispanic or Latino - person of Mexican, Puerto Rican,

Cuban, Central or South American, or other Spanish

culture or origin, regardless of race.

Initial Assessment - To determine whether the program can

benefit the individual (suitability) and identify

activities and services that would be appropriate,

an assessment of the participant is necessary.

Initial assessment is part of the overall intake

process and includes the initial determination of

each participant's employability, aptitudes,

abilities and interests, through interviews, testing

and counseling.

Life Skills - skills included in adult literacy with such

topics as, consumer economics, government and law,

occupational knowledge, community resources, and

health that are included into an educational
agency's basic literacy skills course of study.

Organization of the Thesis

The thesis was divided into five chapters. Chapter
one provides an introduction to the context of the
problem, purpose of the thesis, significance of the
thesis, limitations, and definitions of terms. Chapter
Two consists of a review of relevant literature. Chapter
Three documents the Methodology used in this thesis.
Chapter Four presents the results from the thesis.
Chapter Five presents the validation from the thesis. The
Appendices for the Thesis follows Chapter Five. Finally,
the references for the Thesis are presented.

CHAPTER TWO

LITERATURE REVIEW

Introduction

Chapter Two of the research project consists of the analysis of authors, Ira J. Chasnoff and Dr. Bruce Perry's, literature reviews in relations to Attachment Disorders associated with transitioning youth. In addition to, the unique features identified with it. It also discuss barriers to independent living and clinical ramifications. This chapter also introduce Perry's four ingredients for change. Chapter two is divided into three subsections which include: Government perspective, Legislative/policy efforts and Code of Ethics. This chapter concludes with theories that guide conceptualization as it relates to foster children and transitioning youth.

According to Chasnoff, as pre-natal-exposed children grow and mature into adulthood, they lack the necessary foresight to think ahead, resulting in an array of problems, including the inability to be self-directed, the competence to maintain and incorporate multiple bits of information, manage goals, stay on task, problem solve

in a punctual manner, or retain basic information that is
placed into the internal cognitive process for later use,
(Ira, 2008). Children who suffer with underlying mental
health disorders are oftentimes unrecognized. Undiagnosed
illnesses tend to manifest in later years.

Children who suffer from undiagnosed mental
conditions are extremely vulnerable to developmental and
educational delays, and thus, suffer severe consequences
during their day-to-day quality of living. Many foster
agencies associate mental disturbances with behavior
problems overlooking, what could be an underlying mental
health disorder. According to the World Health
Organization, (WHO) these types of mental disorders may
increase by 50% in 2020, internationally becoming one of
the causes of morbidity in children and regarded as, the
crisis of the 21st century." Children who suffer with
undiagnosed mental disorders are extremely vulnerable to
developmental and educational delays. This by far,
compromises their future which can result in severe
consequences in their day-to-day quality of living
(Orginization, 2012) (Perry, November 6, 2012).

According to Dr. Perry, author of Attachment: The
First Core Strength, "Attachment is the capacity to form

and maintain healthy emotional relationships and the ability to create these special relationships beginning in early childhood" (2). Babies who often crave and receive the comfort of being held in the arms of mother or father, feel secure. This act of love is essential for: (1) healthy emotional development and stability; (2) forming healthy relationships as they grow up; and, (3) preventing attachment disorders.

Attachment disorders are the culprits behind vulnerability and fears a foster youth is plagued by when confronted with the challenges and responsibilities of life after foster care (Perry, November 6, 2012). Regrettably, foster care does not provide enough information, if any at all, to keep emancipated youth abreast of resources available to them. Moreover, workers and caretakers who form prior bonds with the emancipated break all ties once the youth is no longer under their care. Dr. Perry illustrates how this type of disconnection has the potential to produce severe psychological disorders, ultimately resulting in youth fresh out of foster care to experience a breakdown or relapse and/or resort to prior negative experiences and destructive habits.

There are unique features about attachment that aid in understanding why some emancipated youth struggle with independent living. Attachment develops when youth are provided for in a soothing, comforting, and caring manner. This type of treatment produces bond formation and emotional security. On the contrary, youth can be susceptible to intense distress at the thought of, or the actuality of losing this type of care and the one(s) providing it. Accordingly Perry states that, "When a person has attentive, responsive, and loving caregiving, it promotes the capacity to form and maintain healthy, emotional relationships. Furthermore, he infers, "As more people, friends and peers enter into his life, he will continue to develop the capacity to have healthy and strong relationships". In order for the youth to live independently and productively, it is vital that he is capable of forming healthy relationships during maturation. Sure, expression of attachment potential requires interactions with members who do not have a direct role in the care-giving process of a foster child, however, the acquaintance of that special person will be just enough to provide the emotional support that help

along the progression of a child's attachment capabilities (Perry, November 6, 2012).

When a foster child is in a non-nurturing environment and/or is exposed to negative interactions with others, with little positive experiences if any at all, especially during the initiatory stages of his life, the potential for imminent attachment disorders are far greater making it difficult to interact positively with others. As Dr. Perry indicates, "If a child has few positive relationships in early childhood or has a bad start due to problems with the primary care-giving experience, this child is at risk for a host of problems. In a very real sense, the glue of normal human interaction is gone" (Perry, November 6, 2012).

It is clear then that in a loving, nurturing environment children experience positive interactions with others. Foster Children stand a far better chance of developing and maintaining healthy relationships after exiting the foster system when departing from a loving environment. However, when the opposite is true, the child's ability to interact with others in a positive manner is severely stifled. To further exacerbate the situation, when they become of age, they are expected to

embrace the real world, and thus, left to fend for themselves where their only inclination, in many cases, is to survive by any means necessary. Lacking accountability for their actions, the results can be fatal. This is why it is critical for youth to be provided with resources and programs that could assist them before exiting the system. It is also extremely helpful for the youth to be able to maintain some form of contact with the foster parent who provided care during the development stages. Otherwise, the child is subject to becoming emotionally unbalanced and more susceptible to committing crimes, resorting to drugs, and ultimately hurting themselves and/or the people in their circle. Dr. Perry gives insight to these issues in a general sense however, he fails to provide solutions or suggestions to the problems discussed.

Foster children become unconsciously attached to the foster parent /caregiver, and in most cases severely attached. Attachment disorder is beyond mere conjecture. This research provides real world examples of how foster children to hold on to bonds created during foster care. This emotional instability hindered the capacity to create and maintain healthy relationships.

Many foster children suffer with clinical
ramifications of attachment, cognitive, and behavioral
disorders. To understand these ramifications, this
section discusses social services and foster care systems
with best practice interventions formulated to promote
resiliency. Unfortunately, services presently available
to former and transitioning youth are not entirely
effectual in accomplishing self-sufficiency. Predictors
indicate that the number of youth aging-out of the foster
care system will continue to rise resulting in an influx
of homelessness within the foster care population.

A significant amount of transitioning youth are at
risk and require mental health services. According to
Perry, a large proportion of children in foster care are
at high risk for developing mental disorders due to
factors such as pre-natal exposure to drugs and alcohol,
early childhood exposure to violence, physical abuse,
sexual abuse and neglect (Perry, November 6, 2012). These
risk factors severely impact youth emancipating out of
foster care.

Clinical ramifications that often include
neurologically based self-regulation issues (emotions and
behavior), attachment and cognitive issues (learning

disabilities), and behavioral issues (aggression, borderline features) all call for interventions that are known to be best practice research-based interventions which promote resiliency (Perry, November 6, 2012).

Dr. Perry has conducted extensive research in the areas of basic neuroscience and clinical analysis. During his research on neuroscience he has analyzed the effects of the following developments and disorders:

- Prenatal drug vulnerability on brain development;

- Neurobiology of human psychiatric disorders;

- Neurophysiology of traumatic life events; and,

- Basic mechanisms connected to the development of neurotransmitter receptors in the brain (Perry, 2006).

Perry's clinical research and training is centered on high-risk cases to include examination of long-term cognitive, behavioral, emotional, social, and physiological effects of neglect and trauma in children, adolescents, and adults. His work is instrumental in promoting positive change within the primary institutions that work with high-risk children such as child

protective and foster care services (Perry, November 6, 2012).

Statistical analysis of studies done over the years on factors that lead to constructive change in psychotherapy concluded that there are four enduring components of such change. The four ingredients for change include:

1. Factors in the matrix of clients lives;

2. Their strengths and resources;

3. The quality of relationships; and,

4. Positive expectations and insights gained from professional sources.

These ingredients for change are critical strength-based approaches in the foster care system.

Best practice interventions that promote resiliency, i.e., The Forty Developmental Assets, will help social services in establishing programs with children during the sensory-motor stages, ages (0-3); parent child interactive therapy, ages (0-5); wrap-around services, ages (6-15); The parent project, ages (15-18); Mentoring Treatment Milieu Services (therapeutic foster care or group home); and, TAY Services (living skills for individual and group therapy) (Perry, November 6, 2012).

The balance of evidence from this review supports the need for a greater commonality between the welfare of the children, and researched-based interventions.

Government's Perspective

The Department of Human Services (DHS) plays an essential role in the overall well-being of children, particularly youth exiting the foster care system, through services that are tailored to meet the needs of the child, and performed in a manner respectful to the family providing the foster care. Through coordinated intervention they collaborate with several entities including juvenile justice agencies, foster care agencies, protective services providers, and community partners throughout the State, working on the premise that services should be outcome-based, data-driven, and continuously evaluated. In addition, the Department believes that children should have a voice in discussions that affect them, Human Services, (2008). DHS considers the specific needs of each child before intervening and making decisions that affect the child.

As a result of diversity within the foster care system, all decisions made on behalf of children by DHS

must reflect consideration of community, ethnicity, and cultural values. Moreover, it must be free of bias. Even though foster parents and legal guardians have primary responsibility for keeping their children safe, the Department's top priority is to ensure that children exiting foster care are indeed transitioning into an environment that is safe. If foster parents cannot ensure the safety of the child, Human Services is entrusted with the authority to intervene on behalf of the child (Human Services, 2008). The literature review should be a summary and critical review of the literature directly related to the problem statement, problem focus, and study. Identify gaps in the literature, methodological limitations, and conflicting findings.

Legislative and Policy Efforts

In the U.S., runaway teens and homeless youth programs are authorized by the Runaway and Homeless ACT (Juvenile Justice and Delinquency Prevention Act, Pub.L. 93-415, sept.7, 1974, 88 Stat. 1109(Title 42, Sec. 5601 et seq.) as amended by the Runaway, Homeless and Missing Children Protection Act of 2003 Public Law 108-96). Two programs were funded by Congress to prevent the

victimization of homeless youth and ensure them access to
education, employment, training, health care, drug and
alcohol treatment and other social services as follows:

1. The Basic Center Program - Provides grants to
    support emergency shelter for youth under age
    18; and,

2. The John H. Chafee Foster Care Independence
    Act, HR 3443 and 1802, HR 3443 and 1999
    (formerly referred to as The Independent Living
    Program) – Their primary goal is to help
    adolescents in foster care (ages 16-21)
    transition to successfully living
    self-sufficiently, (USGAO, 1999).

According to the Independent Living Program policy,
transitioning youth who "age out" of the foster care
system (usually at age 18) receive monetary assistance
and services. If youth are not eligible, there are
programs available that include longer-term residential
support (up to 18 months) as well as life skills support.

Code of Ethics

The Code of Ethics for foster parents is based on
the definition of 'family foster care' established by the

1991 National Commission on Family Foster Care, sponsored by the Child Welfare League of America, and the National Foster Parent Association (NCFFC, p. 6 1991). It re-framed the historical term, "Foster Family Care" to "Family Foster Care" to emphasize the importance of family. This is based on the premise established by the First White House Conference on Children in, 1909 (Rycus & Hughes, 1998). In 1997, the United Nations Convention on the Rights of the Child established that children need and have the right to a family life. Family foster Care is an essential child welfare service or option for children. Parents must live apart while maintaining legal and usually affectional ties to the child. When children and parents have to be separated due to physical abuse, neglect, sexual abuse, maltreatment, or special circumstances, Family Foster Care provides a planned, goal-oriented service in which the care of children and youth are taken into consideration to address the unique, individual needs of infants, children, and youth in the home of an agency-approved family (National Commission on Family Foster care, 1991, p. 6).

Theories Guiding Conceptualization

Resiliency Theory, (1993) a resilience-based approach to youth development, is based upon the principle which illustrates that all people have the ability to overcome hardship and succeed in spite of adversity. The focus is to provide support and opportunities which promote success, rather than trying to eliminate factors that promote failure. The phenomenon of successful development under high-risk conditions is known as "resilience", and a great deal of research has been devoted to identifying the protective factors and processes that might account for the successful outcome of transitioning youth, (Wolin & Wolin, 1993).

There are several factors that are likely to have a more positive impact on transitioning youth than non-resilient individuals, according to the Center for Combat & Operational Stress Control, (2010). Those factors include:

A. Social support;

B. Developing and nurturing friendships; and,

C. Seeking resilient role models and learning from them.

Moreover, those with high social support were 40% to 60% more resilient than those with low social support. In another study, the authors determined that higher resilience and post-deployment social support (PTSD) were associated with decreased traumatic stress and depression symptoms. Resilience scores were also negatively associated with PTSD symptoms. Respondents with PTSD scored significantly lower on measures of unit and social support.

Youth who are in the transitioning stage are becoming more independent and begin to look to the future in terms of career, relationships, families, housing, etc.. During this period they begin to explore possibilities and form their own identities based on the outcomes of their explorations. If such identity development is hindered, adolescents may experience confusion and question their place in the world.

Erik Erikson, Psychologist and Psychoanalyst, known for his theory on psychosocial development, believed that personality evolves in a series of stages, particularly:

- School Age (6 to 11 years). This is the "industry vs. inferiority" stage, wherein children need to cope with new social and

academic demands. Success leads to a sense of

competence, while failure results in feelings

of inferiority.

- Adolescence (12 to 18 years) – This is the

    "identity vs. role confusion" stage wherein

    teens need to develop a sense of self and

    personal identity. Success leads to an ability

    to stay true to one's self, while failure leads

    to role confusion and a weak sense of self.

Specifically, Identity vs. role confusion is

adolescent stages that mark the transition from childhood

to adulthood according to Erikson's Theory of

Psychosocial Development Chart).

Summary

Sadly, predictors indicate that the number of youth

aging-out of the system will continue to rise resulting

in a disconcerting increase in homelessness anywhere from

12 to 36 percent. This is a critical issue which calls

for the institution of more programs to generate more

resources in an effort to reduce, or preferably,

eliminate hardships that transitioning youth face. By

understanding the perspectives of society's government

33

will clarify how foster youth and public opinion all
contribute to the way in which resources are distributed.

CHAPTER THREE

METHODOLOGY

Introduction

Chapter Three documents the steps used in

Methodology of the thesis. Specifically, the utilization

of sampling, procedures, instruments, utilizing

confidentiality, (protection of human subjects), and data

analysis which was utilized to analyze the outcome for

youth transitioning out of foster care.

Study Design

In order to participate youth was required to be

between the ages of eighteen to twenty five years of age,

and have completed or in the process of transitioning

from foster care. This quantitative study utilized

surveys, which was used to collect its primary data.

Surveys asked respondents to rate items on a scale (e.g.,

Likert scale of 1-5). Some questions also allowed

respondents to write their feelings or attitudes about a

particular event or to elaborate in more detail on an

item, or to express suggestion. Yet informal, setting was

used to explore a limited number of questions.

Respondents were asked a wide range of questions

regarding aging-out of the system. There were also questions on whether or not they felt quality resources were effectively provided during, and after Foster care? It was also important for this study to examine past and present services that positively or negatively affected the lives of youth who has or is in the process of transitioning. It is important to know that resources and services are the nexus between failure and success for youth who are exiting out of foster care homes and systems.

Understanding specific services and how they contribute to successful transitions required a quantitative method of surveys gathered from former and current transitioning youth. Consistency was added by asking participants a sequence of 25 questions. Respondents were able to receive interpretation when questions were not understood. In addition, these standardized surveys collected a broad range of data in respects to, beliefs attitudes, values, opinions, experiences and behaviors. The surveys also provided participants with anonymity in order to collect recognized events and experiences about the resources they were receiving.

The outcome of these surveys yield results that can be further used in future research, specialized for this specific population. Detailed information obtained through these surveys includes beliefs and values that are representative of the population being studied. Participants described their experiences resulting in quantifiable findings. Respondents reported individual experiences which provided a unique perspective. Individual view's was noted in hopes of improving foster youth's transitioning process.

Although, limitations occurred because of deviations between participants, the results also differ because of sampling variability as with all studies that are performed on a limited number of participants or respondents. This study reported those differences among the participants in its findings. In describing the variables, sample size was well thought out because it allowed the researcher to control for the risk of reporting a false-negative finding (Type II error) or to estimate the precision that this research yields. Nevertheless, researchers put every conceivable effort in providing best practice interventions that support the successful transition of emancipating youth.

Sampling

Participants for this study were both male and female emancipated youths. Thirty-five transitioning foster youth between the ages of 18 to 24 participated in this research. All participants were either an alumni of the foster care system or in the process of transitioning. Respondents were known by their participation in the Youth's Basketball program for transitioning youth. Respondents who volunteered for this study included their past and present experiences with emancipation processes. Random sampling includes both male and female participants, between the ages of 18 and 25 using diverse populations.

Data Collection and Instruments

To effectively determine the types of services and resources that foster youth received during and after foster care, data was collected by way of survey questionnaires. The sequence of questions asked on the questionnaire were a series of open-ended questions that covered their duration in foster care, early interventions, exposure to employment, education, mental-health services and significant others. In effort

to identify and minimize unforeseen issues with the
questionnaires, a pretest questionnaire was conducted
with former transitioning youth who did not meet the age
requirements for this study. Therefore, their responses
were not included in the findings. What was more
important was the physical presence of the researchers
during times that questionnaires were being completed.
The presence of the researcher provided participants with
the ability to take notes and answer any questions
respondents may have or did not understand. Questions on
the questionnaires derived from information from specific
literature reviews in relation to transitioning youth.

Insufficiency in counseling, early interventions,
education, mental health services, significant others,
and resources, were some of the independent variables
that was identified with youth that experience
unsuccessful transitioning. However, variables such as,
Independent Counseling, Services that provide early
interventions to foster children, and mental-health
services were are all mutually beneficial to foster
youth. They were also represented as best practice
interventions.

Respondents were asked a sequence of questions in regards to, employment, mental health services, education, drug use, preparation for emancipation, in addition to, questions regarding their attitudes toward participating in programs such as, the Independent living Program. Their responses supplied this research with a systematic approach for addressing the "gaps" between present-day conditions and desired conditions or "wants".

Procedures

In preparation of this study researchers met with youth between the ages of eighteen to twenty-five. Discussions regarding community resources were limited; however, researchers were directed to the Transitioning Basketball Youth program. Researchers concluded that it would benefit this study to collect data from that Basketball Transitioning youth program located in Riverside California.

There was initial contact with potential participants prior to supplying questionnaires. Youth was randomly selected from the, Bobby Bonds Riverside Park and Recreation Center located in Riverside California. Mr. Bryan Bonner, Manager/Director, of Tree Of Life

International provided the time and places these youth would be available for participation. Demographics were reported in both percentages as well as the number of respondents. Researchers were invited to attend open events to discuss the research with prospective participants. Discussions with youth at basketball events also provided me with additional times the youth's would be available.

Researchers then assembled a questionnaire of approximately thirty-five survey questions with a completion time of no more than fifteen minutes. The surveys were completed at the recreation site inside available rec rooms that provided privacy in regards to confidentiality.

Protection of Human Subjects

Individuals in this study was given direct questions to answer on questionnaires, participation was voluntary. Respondents gave their permission prior to proceeding in answering the questions. Informed consent is located in Appendix B: Information was given to each participant regarding procedures, risks, and benefits of their participation.

In order to protect the privacy of participants anonymous questionnaires were utilized. No identifying information was displayed or used in regards to this research. All proposals in relations to data collection was determined by, informed consent and debriefing statements located in the proposal as appendices.

Data Analysis

Data will be collected from surveys. These surveys will have no identifying information, and no such questions will be asked. Findings resulting from data collection will be gathered, reviewed and analyzed to organizations to make better decisions regarding transitioning youth. Standardized open-ended interviews that will measured by the Likert Scale. The results of this data will be quantifiable, and capable of being used.

Summary

This chapter has explored and analyzed various elements that were incorporated into the study design. The collection of data was consistent to quantitative information rendering positive results from transitioning youth. The protection and confidentiality of participants

was well-thought-out, which ensured researchers in

obtaining useful data. This section has presented it's

overview of the study design and implications for further

research.

Table 1. Majority Responses to Interview Questions

Questions Number/Responses		n	%
Q1.	Male/Female	38	100.0
Q2.	Counseling services	22	57.9
Q3.	Emancipation Services	9	23.7
Q4.	Received Services	22	57.9
Q5.	Significant Others	18	50.0
Q6.	6 placements	4	10.5
Q7.	15 years in foster Care	3	7.9
Q8.	Desired Higher Education	8	21.1
Q9.	Programs/Activity	8	21.1
Q10.	Feeling Of Depression	10	26.3
Q11.	Employment	8	21.1
Q12.	Age/12 entering Care	7	18.4
Q13.	Choose/ Other ethnicity	13	34.2

	Yes	No
Males & Females	57.9	43.1
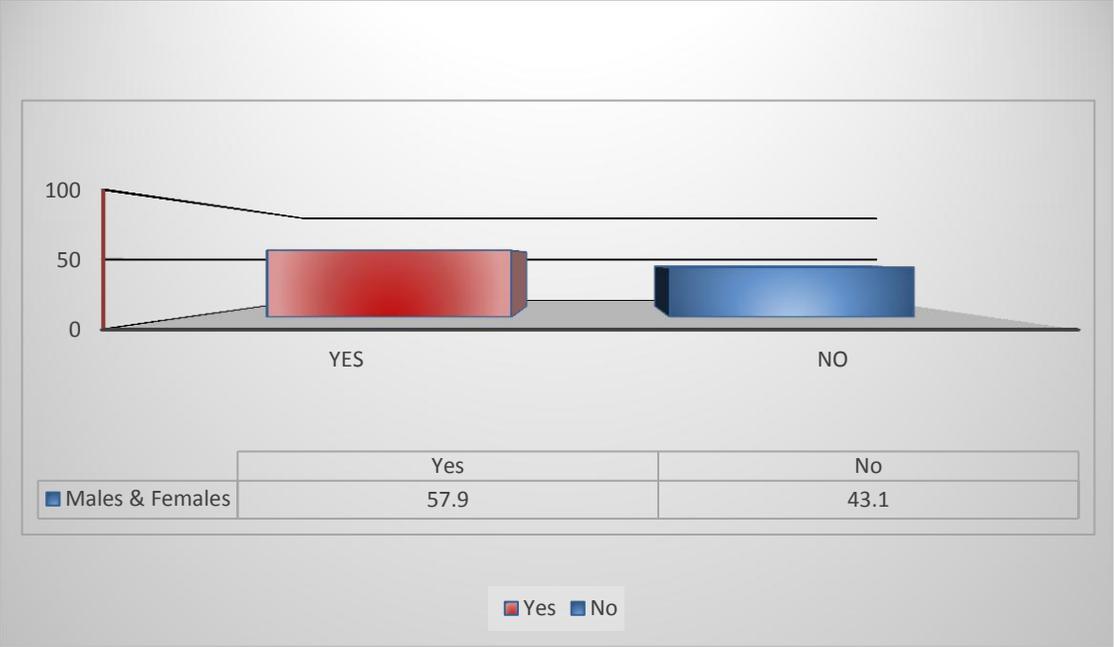
Figure 1. Did you Receive Counseling Services?

CHAPTER FOUR

RESULTS

Introduction

Included in Chapter Four is a presentation of the results of the thesis. This quantitative study supplied data that were analyzed to describe both former and current transitioning youth's perceptions of foster care services and resources. Demographics are included to describe the sample.

Presentation of the Findings

Demographics

This study consisted of thirty-eight youths who participated in the Tree of Life after school program for transitioning youth. Participants included, an equal number of both males and females include youth ranging from eighteen to twenty-five years of age. Thirteen and two-tenths percent were twenty-two years of age, Ten and one-half percent, were eighteen, years of age fifteen and eight tenths percent, were twenty years of age, only five and three-tenths were twenty-five years of age. The respondents were asked on the survey how old they were when they entered foster care. Approximately eighteen and

45

four-tenths (n = 12) of the respondents were twelve years old when they entered foster care, only five years away from their transitioning stage. Twelve of the thirty-eight participants were involved in Independent Living Programs due to their ability to choose. Of the total thirty-eight respondents six were African Americans representing fifteen and eight-tenths, four were Caucasian representing ten and one-half, and three were Hispanic representing seven and nine-tenths. There were thirteen respondents who did not state their ethnicity and identified themselves as other. There were four who stated that they were of a mixed race, therefore declined to choose a specific ethnicity.

Education

Forty-two percent of the participants graduated from high school. There was one question on the survey that asked if they wanted to continue in higher education after graduation? Thirteen percent said yes, Thirty-one percent said no, Fifty-five percent chose not to answer the question. It was noteworthy to acknowledge that three of the respondents mentioned that they did not realize the importance of education until they were forced to live on their own.

Counseling Services

Respondents were then asked two questions in regard to counseling, the first question being: "Did you receive counseling while you were in foster care?" Fifty-seven percent responded with "yes," and forty-two percent responded with "no." Participants were then asked if counseling prepared them in any way for emancipation. Twenty-three percent responded with "yes," and fifty percent responded with "no." Thirty-eight participants in this study were asked if the counseling services they received in foster care prepare them for emancipation. Sixty-seven and nine-tenths said no and thirty-two and one-tenth said yes. Resources such as counseling services, mental health services and wraparound programs are all resources that are available for transitioning youth. Successful transitions rely heavily on resources that are made available to children during the early phases of foster care. Sixteen of the participants received early interventions, while ten did not. There were twelve participants with missing data in regard to this question. However, this question ignited several other questions by the respondents that were not asked on the questionnaires. For example; two participants asked,

"If foster parents provide weekly financial "allowances"
would that be considered resources?" and another
respondent asked if going to church was considered
resources. Key findings suggest that foster children are
not given adequate information regarding services that
are available for them. It also suggest that foster and
transitioning youth lack knowledge and understanding of
what these services can provide. Researchers explained in
detail the types of resources that are provided for
foster children. However five of the sixteen respondents
recollected alcohol and drug counseling due to their
addiction to drugs during their stay in foster care.

Important variables such as; youth's employment,
sex, education, gender, ethnicity, health-care options,
the availability of services, types of services and
resources provided greater transparency to this research.
Extensive evidence on the importance of receiving mental
health evaluations during the early stages of foster care
was important to this study. Seven respondents,
(Twenty-percent of the participants) stated that they did
receive mental health services, seventeen respondents did
not received mental health services, and fourteen did not
respond to the question. This poses a safety concern for

communities nationwide. In addition to the vulnerability emancipated youth experience this population encounter even greater susceptibility towards committing crime related activities. One final important finding from this study was that the term "significant other" was interpreted by many of the respondents as being a social worker, a counselor, or a best friend. All of the respondents reported that they had someone important in their lives, but they were not as significant as what they believe a counselor would have been. Fifty-percent reported that they had an important person in their life, and fifty-percent reported that they didn't have anyone of whom they considered to be of great importance in their life. One respondent emphasized that " people pretend to be important but the moment you open your heart, they leave." Fifteen (15) of the respondents agreed with that statement. Many of the respondents expressed dissatisfaction with the services they did receive while in foster care. Many of the youth verbally responded to this question after their questionnaire was complete. During my observation many of the youth appeared agitated in regards to counseling services. Some verbalized emotions such as, no one really cared whether

or not they receive counseling services. Some of the participants asked if they could be directed to counseling services because they had had a change of heart.

Many of the respondents commented on this question and blamed the foster care system for not providing them with counselors who could direct and guide them into making better decisions. This question received the highest verbal response. Participants identified counselors as being that, significant other in their lives and stated how their advice would now be appreciated. At least three respondents expressed that counseling was needed throughout their stay in foster care oftentimes, stating they felt lost and confused.

Duration in Foster Care

Of the respondents twenty-six and three-tenths said that they had transferred to as many as ten foster care homes during their duration in foster care. Thirteen and two-tenths transferred five times and fifteen and eight-tenth transferred six times. There are various explanations as to why foster care placements do not work for many who enter foster care system. However, children in foster care are more likely, than any other

population, to go undiagnosed with some type of mental disorder. Due to the resources or the lack thereof, it is not a matter of whether or not a child in placement will be transferred, but when. Oftentimes interruptions happen for even the most experienced and tolerant of foster homes. Jae, 2005 studies, show that one of the most common reasons foster parents choose to disrupt on foster placement is that the child's conduct, psychiatric concerns and needs are far beyond the abilities of the foster parent to handle them. Oftentimes, the child is suffering with mental health disparities that has not been diagnosed (U.S.A. Gov, D. Jae, 2005).

<u>Early Interventions</u>

Services such as, the "Wrap-Around" program are intended to provide strength-based interventions for children with psychiatric disorders, and all children who are in need of a combinations of services. Wraparound services are defined in the Welfare and Institutions Code 18251(d) as "community-based interventions services" that emphasize the strengths of the child and family that includes the delivery of coordinated, highly individualized unconditional services that address needs and achieve positive outcomes in their lives.

One of the questions from the questionnaire was as follows: Did you ever receive early childhood interventions such as "Outpatient Services?" Thirteen percent responded with a "yes," and fifty-two and six tenths of the respondents said no. While all findings are relevant, this particular category was the most striking for the significant gap between those who received services and those who did not during the early phases of foster care. This research also asked: Did you receive wraparound services? Twenty-one percent of the respondents said yes, and forty-seven and four-tenths of the respondents said no. Data indicates that the "Wraparound Program is promising" however, documentation regarding these services indicate inconsistencies with interventions that impact their ability to serve children and their complex needs while in placement (N.W.I., 2014). Furthermore, youth formerly in foster care (2003) reported serious health care problems. According to, Thom Reilly thirty-percent of youth nationwide who had left the foster care system encountered serious mental health illnesses since leaving foster care. Reilly, findings reported that thirty-two percent needed health-care but could not obtain it, and fifty-five and three-tenth had

no type of health insurance. Twenty-five percent were on

Medicaid, eleven percent were on other public assistance

programs, and nine percent had private insurance).His

research also found that only fifty-four percent of youth

rated their health as very good or excellent. He also

stated that a sizable number, thirty-eight percent had

children. Of the one-hundred youth interviewed in his

project, more than seventy pregnancies occurred of these,

eighteen were aborted, and fifteen were miscarried

(Reilly, 2003).

Exposure to Employment

When participants were asked if they received paid

employment, twenty-three and seven-tenths said yes and

seventy-six and three-tenths said no. Out of the employed

participants, seventy-seven and seven-tenths of the

participants were females and twenty-two percent were

male. Out of the seventy-seven percent of the employed

women, fifty-seven and one-tenths were Caucasian,

twenty-eight and one-half were Latino, and fourteen and

two-tenths were African American. Out of the twenty-two

percent of the employed males, fifty percent were

Caucasian, fifty percent were Latino, and zero percent

were African American. Demographically, unemployment rates were lower for women.

Summary

For numerous reasons the participants concluded that Independent Living Programs were not beneficial in achieving self-sufficiency. Although, this program is highly recommended and utilized within the Department of social Services, only eight participants participated in the program. Respondents highly regarded counseling services and blamed the foster care system for not providing them with guidance and directions from counseling which was regarded as, significant. Participants suggested that counselors should assist them in making better decisions. This question received the highest unwritten response. Participants identified counselors as being an, "significant other." Thirteen of the participants received counseling services, nine did not. Many of the respondents did not understand what, if any programs offered by the Independent Living Program would be of assistance to them. Transitioning seminars would have been advantageous if presented during the first and final stages of foster care.

CHAPTER FIVE

DISCUSSIONS

Introduction

Included in Chapter five are the conclusions supported by key findings of the research project. It also discusses recommendations for further evidence-based research, and identifies limitations of the study and supply details of specific findings.

Discussion

The survey responses were evaluated by utilizing quantitative measures for nominal variables. Responses were hypothesized into three distinctive classifications; first education, secondly, contentment with counseling services, and thirdly, resources received during and after foster care, and fourthly employment. Responses were examined utilizing a chi-square test of emancipation services.

The goal was to determine if supportive environments and systems of care can help reduce the stress of youth who are transitioning out of foster care. In addition, to clarify whether or not previous resources intended for transitioning youth effectively prepared them for

independent living and to analyze what programs and resources successfully lead toward self-sufficiency.

A child who ages-out of foster care affects not only the youth, but society in general. This research addresses the present need for early therapeutic interventions among current and former foster youth. Risk factors such as; Attachment Disorder, individual and group counseling, mental health services, vocational training, social support, assistance with employment are all significant factors that impact the success of youth who are aging-out of foster care. Unfortunately, foster youth in the United States are being transitioned without receiving effective interventions.

The results of this study showed that the majority of the participant's entered foster care at an average of twelve and two-tenths years of age. Respondents were between the ages of eighteen and twenty-five. Five of the participants were twenty-two, four was eighteen, six was twenty and only two was twenty-five. While, the study anticipated a higher outcome of graduates Out of the thirty-eight participants sixteen graduated from high school and only six expressed interest of continuation. Ten of the participants had no interest in pursuing

higher education, twelve said maybe and eight was undecided. In depth information showed an increased likelihood of pursuing a higher education from respondents who were twenty-two years or older, notably four years after emancipation. Congruent with the study's timeframe on when the majority of youth who transition become homeless.

Ten of the thirty-eight respondents were placed in over eleven foster homes during the duration of their foster care. Six respondents experienced three placements. All sixteen of the respondents expressed anger and confusion as to why they were placed in so many homes. Most of them were not informed and was transferred without explanation.

The psychological impact that occurs when children are removed from their biological family is critical (Perry, 2006). In addition, many youth in various foster and group homes have been diagnosed with mental illness. Symptoms such as; depression, fear, and hopelessness often occurs when attachment is disrupted. It is important to understand the effect of inconsistent parenting. The unresolved trauma of disrupted attachments negatively affect foster children, and places them at

57

greater risk for developing mental health disorders. Furthermore, these unresolved issues off-sets their underlying disorders.

Perry (2006), states that children who suffer undiagnosed mental disorders are extremely vulnerable to developmental and educational delays. When foster children move from one home to another, their chances of receiving early intervention lessens. According to, the World Health Organization, (WHO, 2014) because of undiagnosed mental illnesses, mental disorders will increase by fifty-percent among foster children by the year 2020 due to the lack of treatment of underlying mental disorders. In respect to youth's learning abilities, various placements effect foster youths significantly. In fact, fisher, Elhs and Chamberlin, (1999) study documented that "foster children beginning at the age of six typically experiences developmental or emotional issues and over fifty-percent have problems in both" therefore, numerous placements worsens present underlying mental conditions.

This current study suggest that during the early stages of foster care mandatory mental evaluations should be incorporated into program policy. These evaluations

can improve the quality of life for transitioning foster youths, giving them a greater opportunity of living successfully after transition.

All participants acknowledged counseling services as essential for guidance. However, over fifty-percent of respondents verbalized that counseling services received were not beneficial. After reviewing responses to what participants considered a "significant other", many correlated it to having a counselor or mentor that will guide them before and after foster care. Eighteen participants reported having a "significant other" in their lives, while eighteen did not.

This is important demographically, because out of the thirty-eight participants, thirty identified themselves ethnically as, "unknown" suggesting that thirteen of the respondents were either not told their ethnicity or there was no "significant other" that informed them of their culture. The present study found the importance of having a "significant other" as being the core of this study. All thirty-eight participants expressed the importance of having someone significant in their lives during and after foster care and expressed extreme dissatisfaction with the counseling services they

received. While analyzing the respondent's definition of "significant other" it is important to note that lack of guidance, and underrepresentation created confusion regarding the application of a "significant other". Furthermore, eighteen of the thirty-eight participants did not understand or were not informed of available resources for transitioning youth. Only sixteen of the participants received early interventions such as, wraparound, and mental health services. There were twelve participates with missing data in regards to this questions. Respondents who received resources showed a higher satisfaction with counseling services but displayed a lack of desire in participating in Independent Living Programs. It is important to note that adequate information was not properly given to participants. There were twelve participates that did not understand the meaning of resources.

The collaboration of agencies within the foster care system aided seven of the participants with drug addiction and counseling services. The seven respondents reminisced a successful outcome from the rehabilitation services they received. This is especially important, because it indicates success in receiving counseling and

resources. A study conducted by, Osterling and Hines (2006) documented that counseling / mentoring services had a great impact on fifty-six of their research participants. More importantly, their research showed that forty-one of their fifty-six participants identified the Independent Living Program (ILP), but only twenty-six participated, suggesting eighty-two percent was not properly informed (Osterling & Hines, 2006). A key finding for this current research. Statically, the youth was not properly informed about the program. This data is consistent with the current research among the 38 former foster youth.

   Employment is imperative for emancipating youth. Self-sufficiency and independence is necessary for the success of independent living. Out of thirty-eight participants only nine were employed with less than forty hours a week. Twenty-seven of the participants were not employed, demographically, women exceeded men in the area of employment. There were seven employed females and only two employed males in this study. Five of the employed women were Caucasian, two were Latino and two were African American. There was only one Caucasian male and one Latino.

According to the American Bar Association's Commission on Youth at Risk, former foster youth face unstable employment and often work for low wages upon exiting foster care. All nine of the employed participants in the current study worked less than forty hours.

According to Henig (2009), it is an essential step for transitioning youth to become a self-sufficient adult and secure stable employment. Thirty-four Studies indicate that twenty to fifty percent of foster youth are typically unemployed and those who were employed had an average earning below the poverty level. After one year, only 38% of those who were able to find employment were still working. 36thirty-six More specifically, a Midwest study examining nineteen year old foster youth from Illinois, Iowa, and Wisconsin found that, of the only 40% that were employed, 75% earned less than $5,000 and 90% earned less than $10,000 a year. The possibility that a foster youth may not secure employment or earn a living wage has the potential to negatively affect many other aspects of their transition into independence (Allison Henig, 2009).

Youth aging out of foster care (2009) face

considerable challenges as they are not currently

properly prepared to meet the challenges that await them.

Obtaining beneficial employment—which is receiving a

living wage, health benefits, and an opportunity for

advancement—can have a huge impact on their life after

care, as it allows them to pay rent, and become

self-sufficient. While several states have developed

programs to aid foster youth in their transition to

adulthood, such programs need to be implemented in all

states.

Recommendations for Social Work Practice, Policy and Research

The results of this study can be used to assist

social work practitioners with a distinct understanding

of services that are beneficial to youth who are

transitioning into independent living. This study

concludes that for a more successful emancipation depends

solely on resources. Youth who age out of care, must have

additional services provided by counselors, ILP, mental

health services and wrap-around programs. For the

well-being of foster children it is extremely important

for the Department of Social Services to study, analyze,

and evaluate children entering into foster care during the initial stages of care. Early interventions should be put into place, and delegated during the first levels of placement so that children will be better equipped and prepared to live independently. Since, foster care is provided at numerous levels of care, traditional family foster care should be the first to initiate mental health services. Agency-operated family homes, and residential treatment facilities are better equipped to identify mental health disorders early on when placed at their facilities.

Social work practice should have a better understanding of the risk factors associated with child abuse and neglect for children from birth through age 18. Specifically, including mental-health services during the early stages of foster care. It is imperative for policy to implement early interventions into the foster care programing. This research demonstrates the significance of early interventions and how it aides in preventing the onset of mental disorders.

The issue of attachment disorder is manifested in both latency age children and adolescents, risk factors associated with attachment disorder includes, welfare

dependency and teen pregnancy. Literature in this research provides social work practice with an overview of resiliency theory; specifically, the *Search Institute's 40 Developmental Assets*, which provides best practice interventions for children and adolescents exposed to child abuse and neglect. Participants input regarding the types of services they receive should be highly respected, and considered for implementation for policy change.

A recommendation for policy change is for mandatory participation in the, Independent living Programs designed for transitioning youth. Participation starting at the age of ten (10). These programs are designed to meet the age level for that child, with an emphasis of transitioning. If children in foster care were given the opportunity to participate in Independent living Programs early on starting at the age of ten (10), transitioning youth would be better prepared mentally to live independently.

One recommendation is that all social workers be required to complete a minimum of forty-seven (47) hours of Anger Management and Attitude Adjustment course to increase communications skills, and improve upon or

develop healthy relationships with clients. Researchers noted that many of the participants expressed their dislike for social workers. This concern was derived from the question regarding "Significant Other." Interestingly, there was one specific comment made by three of the respondents who didn't consider their social worker to be a 'significant other' due to unceasing supremacy features the social worker displayed. One of the respondents believed that "All social workers are born mean and irritated."

The need for Social workers and foster-care institutions to collaborate with other government systems, is imperative for ensuring the well-being of a child. Organizations such as the Department of Social Services, probation offices, mental-health institutions, police departments and other similar organizations responsible for the well-being of children, should make concerted effort to collaboratively share resources and services designed to meet the needs of foster children and transitioning youth.

Conclusions

    This study examined former and current transitioning youth about their experiences with exiting-out of foster care. Thirty-eight participants had suggestions that were consistent with the results of this study. Respondents provided quantifiable data about their personal experiences in foster care and the services they received. Suggestions for improving the progression of successful emancipation included, but was not limited to; Early Interventions, implementing mandatory evaluations for foster children during the early stages of foster care, additional counseling services, (with an emphasis to inform) defining terms such as; "resources", to increase clarity, improve existing counseling services, mental-health services that meets individual needs, and having an "significant Other" that can help assist while in foster care, and during the transitioning stage of foster care.

Summary

    For numerous reasons the participants concluded that Independent Living Programs were not beneficial in achieving self-sufficiency. Although, this program is

67

highly recommended and utilized within the Department of social Services, only eight participants participated in the program. Respondents highly regarded counseling services and blamed the foster care system for not providing them with guidance and directions from counseling which was regarded as, significant. Participants suggested that counselors should assist them in making better decisions. This question received the highest unwritten response. Participants identified counselors as being an, "significant other." Thirteen of the participants received counseling services, nine did not. Many of the respondents did not understand what, if any programs offered by the Independent Living Program would be of assistance to them. Transitioning seminars would have been advantageous if presented during the first and final stages of foster care.

APPENDIX A

SURVEY QUESTIONNAIRE

Survey Questionnaire

A Retrospective Study Examining Services Provided for Former Foster Youth
In this section, you will be asked a series of demographic questions. Please write or circle your answers.

All of your answers are strictly confidential!

1. What is your gender?

1)   Male
2)   Female

2. What is your current Age?   _____

3. What is your ethnicity?

1)   African American
2)   Asian/Pacific Islander
3)   Hispanic
4)   Native American
5)   White
6)   Other (please specify)

4. What is your highest level of education?

1)   Elementary
2)   Middle School
3)   High School
4)   Freshman/College
5)   Junior/College
6)   Senior/College
7)   Other (please specify)

Rating (Scales)

On a scale of 1 to 5 where 5 is strongly agreed and 1 is strongly disagreed how would you rate your agreement or disagreement with the following statement?

5. **It is difficult to locate housing assistance for youth who have age-out of foster care?**

    SA   SD
    5   4   3   2   1   (6) DK (Don't Know)

6. **Teens that are no longer eligible for foster care should learn to become independent without the help of services.**

    5   4   3   2   1   (6) DK (Don't Know)

7. **Children beginning at the age of 10 that is placed in Foster care should receive immediate training regarding how to live independently?**

    5   4   3   2   1   (6) DK (Don't Know)

8. **Foster children are treated equally by society, discrimination is not an issue?**

    5   4   3   2   1   (6) DK (Don't Know)

9. **It is the sole responsibility of the Independent Living Program to provide the necessary training for children who are leaving foster care?**

    5   4   3   2   1   (6) DK (Don't Know)

Rankings

10. **Of the following 3 services, which one would you feel is most important? Which one is second-most important? And which one is third-most important?**

    1. Health-Care

    2. Life-Skills Training

    3. Provide "real world" opportunities to practice living independently

_____	_____	_____	_____
MOST IMPORTANT	SECOND IMPORTANT	THIRD-IMPORTANT	DK

11. **We have identified 3 key areas that are critical to youth transitioning out of foster care. These issues present a challenge to those assisting the youth and the youth themselves. Continue to rank in the order you feel is most-important.**

    1. Discharging youth before they are emotionally, educationally, or financially ready.

    2. The ability to obtain and maintain housing

    3. The lack of access to health insurance and mental health services

_____	_____	_____	_____
MOST IMPORTANT	SECOND IMPORTANT	THIRD-IMPORTANT	DK

12. **Successful transition into adulthood to a large degree depends on the youth's ability to make appropriate decisions regarding his or future plans. Youth will become empowered by:**

1. Encouraging youth and adults to become partners in making decisions.

2. Understanding the pro's and con's of receiving mental health services.

3. preparing a young person to take his/her place in the community

MOST IMPORTANT	SECOND IMPORTANT	THIRD- IMPORTANT	DK

1. **Culture includes gender, age, sexual orientation, urban, rural, ethnicity, values, personalities, marital status, and job position. The need to provide services that are more compatible with the cultural needs of the youth and families are crucial. Foster Care Placements should:**

1. Teach youth to appreciate and value differences

2. Provide Services that is culturally appropriate

3. Create an atmosphere that values and appreciates cultural differences

4. DK (Don't Know)

MOST IMPORTANT	SECOND IMPORTANT	THIRD IMPORTANT

1. **Multiple choices**
Which of the following best describes your understanding of Living Independently?

1. Dressing, bathing, and cooking your own meals

2. The ability to take care of yourself without assistance

3. To do whatever you want, whenever you want!

4. DK (Don't Know)

Developed by Sandra Reed

APPENDIX B

INFORMED CONSENT

INFORMED CONSENT

The study in which you are being asked to participate is designed to investigate available resources that are assisting youth who are transitioning from foster care into independent living. This study is being conducted by Sandra Reed, an MSW student at California State University, San Bernardino (CSUSB) under the supervision of Dr. Rosemary MCcaslin, Ph.D, A.C.S.W., Professor of Social Work California State University, San Bernardino. This study has been approved by the school of Social Work Sub-Committee of CSUSB Institutional Review Board.

Purpose: To examine the risk factors associated with child abuse and neglect, resiliency factors that positively impact a child's healthy social and emotional development, and how both risk and resiliency factors influence emancipation from the foster care system.

Description: If you participate in this study you would be asked questions about your attitudes, opinions, and availability of foster care resources.

Confidentiality: The information you will provide will remain confidential anonymous and no record will be made or kept of your name or any identifying information. Data from these questions will only be reviewed by the researcher; the results will be conveyed to others in group form only.

Duration: Answering these questions should take no more than 35 minutes

Benefits: Your opinions will help social workers and administrators to better understand the need for resources for youth who want to successfully emancipate.

Contact: If you have any questions or concerns about this study, you can contact Dr. Rosemary McCaslin at (909) 537-5507

Results: The results will be made available after December 2013 at the Pfau Library at California State University, San Bernardino

By marking below, you agree that you:
Have been fully informed about this Questionnaire and are volunteering to take part

X--

APPENDIX C

DEBRIEFING STATEMENT

DEBRIEFING STATEMENT

Thank you for participating in this study conducted by Sandra Reed, MSW student at California State University, San Bernardino. Your time and patience is appreciated. The questions you have just completed were designed to examine the risk factors associated with child abuse and neglect. Understanding the impact that these factors have on transitioning youth provides social workers and administrators with better understanding of the needs that transitioning youth face. It is hoped that the results of this study will provide much needed information regarding the challenges transitioning youth encounter.

If you have any questions about the study, please feel free to contact my faculty Supervisor, Dr. Rosemary MCcaslin, at (909) 537-5507. If you would like to obtain a copy of the group results of this study, please contact the Pfau Library at California State University San Bernardino in December 2013.

Thank you again for your participation in this research project.

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