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EXAMINING PERCEIVED OUTCOMES OF FOSTER YOUTH

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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

LaKenya Cerraine Jones

Sneshia Makeda Stribling

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Approved by:

Dr. Janet Chang, Faculty Supervisor, Social Work

Dr. Janet Chang, M.S.W. Research Coordinator

ABSTRACT

This study explored the perceptions of former foster youth as a means to analyze the factors that contribute to the positive and negative outcomes of foster youth once aging out of the foster care system. Ten former foster youth were identified for the purposes of understanding how prepared foster youth feel towards aging out and transitioning into adulthood. The study utilized qualitative interviewing for data collection in efforts to gather the information about the experiences of each foster youth. Participants were recruited through San Bernardino County Children and Family Services Extended Foster Care (EFC) unit, as well as the local college- California State University, San Bernardino. Interviews were held for twenty to forty five minutes. Ten participants of various diverse backgrounds provided information about their perceptions and experiences within the foster care system and what factors contributed to how prepared they felt towards exiting the foster care system.

All participants were either former or current foster youth between the ages of eighteen years old and thirty-three years old. The sample was comprised of six females, and four males. On average, participants spent 8.87 years in foster care. The total number of placements ranged from one to ten placements. The average number of placements was 4.13. With more foster youth aging out of the system rather than ever reunifying with biological families or gaining permanent placements, researchers explored what factors could enhance the

future of foster youth who are increasingly aging out of the foster care system. These four factors were examined for the purpose of exploring the experiences of foster youth's in regards to: access to effective mental health treatment, educational attainment, independent living programs, and social support from a variety of entities. Researchers presumed that access to these four factors might contribute to the outcome rates of foster youth who have recently and previously aged out of the foster care system.

This study's findings revealed social support as the most influential factor that contributed to how prepared former foster youth felt towards aging out of the foster care system. Although all of the participants identified support amongst their friends throughout their experiences, participants identified social support from caregivers and social workers as the most needed during their experiences within the child welfare system. Most of the participants identified mental health treatment as the least helpful factor during their experience within the foster care system. Many of the participants expressed feeling uncomfortable receiving therapy from professionals they considered strangers, and preferred for support in the form of social workers, caregivers, friends, and individuals who could identify with their experiences.

ACKNOWLEDGEMENTS

DEDICATION

To my Lord and Savior, Jesus Christ: You deserve thee utmost praise for helping me navigate through one of the most steepest valleys I have ever encountered. If I had a thousand tongues to chant the many thank yous you deserve it would never be enough.

To my Big Mama and Papa, Ossie Lee and Ray: Thank you for seeing a light in me I didn't see in myself at the age of three. Your love and support never went unrecognized. I hope I've made you proud, and I hope to see you one day again in paradise Mama. Can't forget about my 'Phatty Girl', Marionna. Rest in Peace babygirl. This one's for you too.

To my parents, Regina and Victor: Thank you for providing me with the foundation and knowledge to trust the Lord and lean on Him even when things are not to my understanding. Mama, I thank you for being my first advocate and going to war (literally) to make sure my health never held me back from getting the education I worked so hard to obtain. Thank you for being the epitome of the strongest woman I know. I am who I am because of you, and it is an honor to be a reflection of you. Lots of love to you, my siblings, nieces, and nephews!

Last but definitely not least, I would like to thank thee absolute love of my life, Dorn, for being my rock, my uplifter, and my hero throughout all of this. I don't know what my life would be without you in it the past six years. Thank you for always believing in me. Love you!

LaKenya Cerraine Jones

To my Lord and Savior Jesus Christ who has been with me through all my struggles, downfalls, and most of all my highlights in my life. I would not be on this earth without your mercy and your grace. No amount of words can express my gratitude for what you have done for me all my life.

To my grandmother Eula J and grandfather Marvin who has supported me through all my milestones in my life. I am eternally grateful for all your love, laughs, lessons, and more importantly for creating a foundation that education is very vital and that we can become extraordinary people in life. I also would like to thank you for all your sacrifice and selflessness you have shown me throughout my life. To my uncles and aunts thank you for all your unconditional love and everything you have done for me, I am grateful beyond words.

To my parents Barbara and George I love you both so dearly. I thank you both for introducing me to God and encouraging me to never give up on my goals. To my lovely mother Barbara thank you for always supporting me and wiping every tear, giving me a sense of who I am as a educated woman, cheering for me even when I did not see the light at the end of the tunnel. Thank you for teaching me the meaning of hard work and being an advocate for every medical procedure I had to endure. To my father thank you for all the laughs, and the adversity you had to endure in order to get your education, you have shown me that in spite of your circumstances you can succeed. To all my siblings, I love you all and thank you for being my very best friends, you all make me a better person.

Lastly, I would like to thank all my friends, you all have stuck with me through this journey of my education and I am beyond grateful. I love you all from the bottom of my heart, you all are angels from God and I thank you for being my extended family and uplifting when I wanted to fall. Thanks and much love I finally made it!!!! Yasss.

Sneshia Mekeda Stribling

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CHAPTER ONE

INTRODUCTION

Problem Formulation

The poor outcome rates of foster youth nationwide has become an
increasingly recognized concern for government officials and child welfare
agencies regarding foster youth aging out and exiting the child welfare system.
With over 60,000 children currently placed in the foster care system in California,
(Public Policy Institute of California, 2010), it is imperative that social workers
recognize and address these needs in order to promote better outcomes for
children and their families. It is commonly expected for adolescents everywhere
to rely on the assistance of their parents when transitioning into adulthood even
after the age of 18 years old. Unfortunately, foster youth do not always have the
opportunity to return home to biological parents, stay with foster parents who are
no longer receiving financial assistance, nor handle the harsh realities of
adulthood alone (Atkinson, 2008). Since more children are starting to age out of
the system rather than gain permanency or adoption (Atkinson, 2008) it is now
the responsibility of child welfare agencies and the pupils who care for foster
youth daily to prepare them for adulthood and independence.

Foster youth exiting out of the system experience poorer outcomes in their
quality of life in comparison to the general population (Jim Casey Youth
Opportunities Initiative, 2015). Thus, leaving them at a higher risk of

experiencing homelessness, drug abuse, generational government assistance, sexual exploitation, child welfare involvement, incarcerations, poverty, lack of health insurance, early pregnancies, unstable employment, and a lack of education than adolescents of the general population (Graham, Schellinger, & Vaughn, 2015). A wide range of 'research depicts the most common factors that contribute to foster youth's rate of poor outcomes as being centered around whether the youth were able to achieve and access effective independent living skills programs, ongoing social support, educational attainment, and treatment for mental health issues stemming from trauma histories (Graham et al., 2015). Juvenile delinquency has also been found to play a major role in the quality of life of most foster youth as well (Graham et al., 2015).

<center>Policy Context</center>

High risk factors and negative outcomes of former foster youth has been an ongoing issue that policies have sought to change. In 1999, the federal government passed the Foster Care Independence Act of 1999 as a means to overcome the risk foster youth experience once aging out (Guin, 2000). The goal of the Act was to, 'provide states with flexible funding that will enable programs to be designed and conducted' (Guin, 2000). The Act seeks to identify foster youth who may be at risk of staying in foster care until 18 years of age and provide them with the training and skills necessary for obtaining employment, preparation for college or vocational schools, provide mentors who coach and offer them

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emotional and mental support, assist with any additional services and financial

support former foster youth between the ages of 18 and 21 may need, and

provide monetary support as well to those seeking higher education (Guin,

2000). The Act allowed states to create their own criteria regarding which foster

youth would receive services (Guin, 2000). In 2002, the Act was expanded to

provide additional funding for foster youth in college allowing them to receive an

additional $5,000 per year per student as a means to support secondary

education (Guin, 2000).

Another landmark bill regarding the aging out population was the

enactment of the Fostering Connections to Success and Increasing Adoptions

Act of 2008 passed by President Bush in October of 2008 (Children's Advocacy

Institute, 2013). This Act sought to extend the age of foster care to 21 years of

age while providing the same advantages foster youth receive under the Foster

Care Independence Act of 1999 (Children's Advocacy Institute, 2013). This Act

paved the way for recently added implementation of the California Fostering

Connections to Success Act (AB 12) in the state of California starting January 1,

2012 (Children's Advocacy Institute, 2013). AB 12 seeks to extend services and

support to foster youth beyond the age of 18 years old (Children's Advocacy

Institute, 2013).

More recently in California, the implementation of a new law entitled

'Katie. A' has been warranting change as a means to improve the mental health

services and support for foster youth (California Department of Health Care

Services, 2015). Implementation and settlement agreement are still in the making, but a lawsuit won against the Los Angeles Department of Children and Family Services by five former foster youth will require for child welfare agencies to improve mental health services, provide services as a means to prevent removal, supply stable placement when possible, expand on current utilized services, and enhance permanency planning (Los Angeles Department of Children and Family Services, 2009). All of these policies hope to not only aid foster youth transitioning into adulthood but also to ensure an increase in positive outcomes of those individuals cared for by child welfare agencies and foster families. Youth experiencing long stays in foster care, social work students, and any agency that works alongside foster youth should be concerned about the epidemic foster youth are experiencing every day once aging out.

Practice Context

The individuals that should be concerned with this issue is child welfare staff, child welfare administrators, and mental health professionals who work simultaneously with the foster youth population daily. It is important to understand the epidemic many foster youth are experiencing or will eventually experience in efforts to find the most effective means to decrease the level of foster youth suffering from the poor outcomes that commonly awaits the majority of them. Clients along with individuals who work alongside foster youth need to be knowledgeable about the risk factors foster youth face when not prepared for

adulthood and lack the means to take care of themselves with little to none social or financial support. Although the goal of foster care is to provide temporary placement for children while permanency or adoption is being put into place, the harsh reality is that most children over the age of twelve years old are at a high disadvantage of not being adopted while the rights of their parents are normally terminated (Atkinson, 2008). Youth most commonly never gain permanency and thus have to deal with frequent placement changes, lack of support and independent living skills, lack of empathy for behaviors stemming from mental health issues and trauma histories, academic challenges, trouble maintaining and creating positive social interactions, and several other risk factors that have been analyzed through research over the years.

Purpose of the Study

The purpose of this study is to examine the outcomes and perceptions of former foster youth regarding how prepared they felt towards emancipating into adulthood once exiting out of the foster care system. As mentioned beforehand, the foster youth exiting the system are not prepared for adulthood. Foster youth that exit the system may not have the tools needed to earn gainful employment and housing. When the foster youth do not have these tools they are at risk for developing a drug addiction to cope with the feelings of abandonment. Abandonment issues tends to lead the youth having difficulties establishing

healthy relationships, because they have the fear of putting their trust in someone who may leave them at any point in time.

Foster youth, who have had the assistance of social workers, to assist in filling out applications for medical care or employment are unable to complete anything themselves. Foster youth who lack gainful employment will generally find themselves homeless. Upon homelessness foster youth their primitive mindset sets in and they now find themselves willing to do anything to survive. In order to make ends meet they might be involved in criminal activity like prostitution or armed robbery to get their needs met. If they are prostituting to make money, they now run the risk for catching a sexually transmitted disease or HIV.

However, the United States government is not blind to what is going on with the foster youth aging out of the system. To combat the poor outcomes and perceptions foster youth are experiencing, the government has passed many acts and laws to try to close the gaps between foster youth and the non- foster youth. Some of these acts and laws consist of identifying those most at risk and giving them the attention needed to be more prepared to exit foster care. The most recent law, AB 12, helps foster youth remain in foster care until they are 21 years of age to gain those tools needed to thrive in the society. This law gives foster youth more confidence in their ability to succeed in society.

Specifically, this study evaluates how prepared foster youth feel when they exit the system. With the extra three years, in the system, the foster youth should

exhibit more confidence in their independent living skills, their educational skills, their mental health capacity, and their social support relationships. It is assumed that extending the foster care system to the age of 21 would prepare the foster youth for a better chance of surviving in society as a productive adult. For some foster youth, this is the confidence they need to succeed in life. On the other hand, others view these extra years as the loving care they need to work through their attachment issues which helps the mental capacity in the long run.

     To conduct this study a qualitative approach will be implemented. Former foster youth will be interviewed regarding their experiences while in foster care. Due to a limited time frame, foster youth will undergo an in depth interview about their experience in the foster care system. The foster youth will be recruited on a random selection basis from a pool of names of recently program graduated foster youth.

<center>Significance of the Project for Social Work Practice</center>

     Finding out how clients feel about their experiences in foster care, which factors most commonly affect their quality of life once aging out, and what they would have wanted more of as a means to having better outcomes is key to helping the social work practice become competent in the areas lacking in efforts to contest the number of youth who leave care unprepared for the real world. In order to become competent social workers in the field, it is important that social workers learn from the perspectives of their clients in efforts to enhance their

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knowledge and gain sensitivity towards each client's personal experiences and

learn what can be done in the future to help policies put in place carry out the

goal of improving the quality of life of foster youth everywhere. The findings of

this study may contribute to social work policy and research by providing social

workers with the knowledge necessary to help create effective programs and

policies that will help to improve the quality of life of those foster youth aging out.

In addition to previous research, this study may also contribute to research and

the social work profession by displaying a need for change and improvements

based on the study's findings in regards to the continuation and creation of

programs needed to help aid foster youth transitioning into adulthood. The study

will help to provide knowledge about what issues need to be specifically and

thoroughly examined to help enhance the quality of life for children in foster care.

In regards to the generalist model, this study will help to improve the

implementation step of the model. Implementation consists of social workers and

clients putting into action the plan already created in the planning process as a

means to reach the client's goals (Zastrow & Kirst-Ashman, 2013). If the child

has already been removed from the home, it is clear that a thorough assessment

has already been completed and substantiated a removal. Aside to the plans for

the parents or guardians of the children, new goals may arise while the children

are in the care of the child welfare system during the implementation process

(Zastrow & Kirst-Ashman, 2013). Such as, ensuring the children are receiving the

knowledge and life skills acquired for development. Even for children whose

plans do not consist of returning home but finding adoptive parents, foster parents, or relatives placements, child welfare agencies have an obligation to ensure that every child's ability to achieve independence and build life skills are being developed and met. The social workers should implement these factors in order to impact the foster youth quality of life in a positive way. The proposed study is relevant to child welfare practice due to its focus of seeking to enhance the knowledge of social workers as a means to advocate for clients and provide effective resources and programs that will help foster better outcomes for foster youth who do not always gain reunification or permanency. This research will help to encourage and foster a need for stakeholders and child welfare agencies to continue to fund and enhance policies and programs for foster youth transitioning into adulthood from the foster care system. Although foster youth experience very similar problems, very little research has been done on the individual perception of foster youth and how past experiences and present programs help aid or stunt the process of transitioning into adulthood. This research will seek to gain the perceptions of former foster youth's by exploring their individual experiences and what factors contributed to in their quality of life and transition into adulthood.

CHAPTER TWO

LITERATURE REVIEW

Introduction

Past research on foster youth has sought to find explanations that contributed to the poor outcomes of former foster youth who aged out of the system. The majority of the research done identifies five major factors that contribute greatly to the poor outcomes of foster youth as: independent living skills programs, social support, educational attainment, and treatment for mental health issues and trauma histories. In order to further understand the epidemic that has evolved among foster youth, a look at research done will help researchers to understand what has been researched thus far, and what this study can add to previous findings.

Theories Guided Conceptualization

Micro studies included Maslow hierarchy of needs which includes an individual having their basic needs and reach their self-actualization (McLeod, 2014). Maslow hierarchy of needs consists of five stages which consists of psychological needs, safety needs, love and belonging needs, esteem needs, and self-actualization. The five stages of needs are essential in life. Psychological needs consist of the basic needs which are air, food, water, shelter, and sleep, safety needs consists of protection. Love and belongingness

needs consist of affection, friendship, and warmth, Esteem needs, consists of success, self-esteem, and self-sufficiency. Self-actualization needs consist of personal growth meaning their self-fulfillment is successful (McLeod, 2014).

Some foster youth do not have their basic needs met such as not having food, shelter, or love. Macro studies includes systems theory that deals with how people interact within their environment. Foster youth will attend ILS programs, but lack in their study habits. Foster youth will need all of Maslow's hierarchy of needs throughout their lives. Starting at the very first need of Maslow law is psychological needs. As a social worker, a child needs to know that they have all of their basic needs taken care of. They need to know that when they transition into society as adults that they will be capable of surviving. They need the tools of how to obtain a job, how to manage their money, how to apply and obtain housing and ultimately how to be independent. It is the duty of a social worker to help these children re-enter society as a well equipped adult that can contribute to society as any other adult can. If a social worker performs this task he/ or she will be bringing the child into self-actualization in which the child now feels confident in living without the assistance of a social worker or a case manager.

Another micro study that will guide our conceptualization regarding foster youth is a new concept developed by Jeffrey Arnett coined the 'emerging adulthood'. Emerging adulthood has been characterized as a time period of life in which young people are in between leaving adolescence and transitioning into adulthood (Arnett, 2008). Emerging adulthood has been known to focus on

young people in between the ages of eighteen and twenty five years old (Arnett, 2008). It is a time of life in which young people are subject to several changes and exploring all possibilities of life. Research to support this theory has found that it is a commonly agreed belief that emerging adults do not see themselves as adolescents anymore, however, they do not entirely see themselves as adults either (Arnett, 2008).

According to the emerging adulthood theory, emerging adults commonly identify what is called the 'individualistic qualities of character' as the most important criteria for attaining adulthood (Arnett, 2008). The three qualities of character are identified as one's ability to accept responsibility for themselves, the ability to make independent decisions, and the ability to become financially independent (Arnett, 2008). Emerging adulthood has also been identified as the time in which emerging adults explore and experiment in areas regarding love, work, and worldviews (Arnett, 2008). And although exploration is one of the key components of emerging adulthood, exploration can often times result in disappointment, rejection, failure to achieve desired goals, and rejection of childhood beliefs on worldviews with no new worldviews to replace the old ones (Arnett, 2008).

The emerging adulthood theory can be applied to conceptualizing the issues foster youth deal with when aging out of the system and transitioning into adulthood. Before recent policies, foster youth commonly received no support or services from the child welfare system after the age of eighteen years old. Many

foster youth living in foster homes or group home placements had nowhere to go after placements were no longer receiving funds to house them. According to the emerging adulthood theory, like unto other young adults their age, foster youth are experiencing thoughts of not being adolescents any more yet still in the process of transitioning into adulthood. Unfortunately, foster youth do not always have the luxury of depending on social support from family or the child welfare agency once turning eighteen years old. Foster youth, in comparison to their peers, are in a stage of life where they are exploring and experimenting to find their way in life. In regards to individualistic qualities, foster youth are often not equipped to accept responsibility for themselves, have the capacity to make decisions for themselves, nor the ability to support themselves financially with little education, little to no contact with biological families, no financial support, nor stable housing- thus leading to poor outcomes. Even foster youth who pursue higher levels of education are in need of additional support. The emerging adulthood theory discusses how at least one third of emerging adults continue to rely on parents even after high school (Arnett, 2008). With dropout rates high and graduation from universities at a low, foster youth are at an even higher risk for not achieving successful transitions into adulthood and continuing the cycle of poor outcome rates amongst them.

Mental Health

    More than half of the children in foster care have been diagnosed with either an emotional or behavioral disorder. Research has found that 80 percent

of children in care have an emotional or behavioral disorder (Burns, Phillips, Wagner, Barth, Kolko, Campbell, & Landsverk, 2004). Among the trauma of being removed, foster youth have also experienced some source of maltreatment that involved removal in the first place. A gap in mental health treatment for children who have experienced abuse has been shown throughout previous research (Bender, Yang, Ferguson, & Thompson, 2015). Burns et al. (2004) states the National Survey of Child and Adolescent Well-Being found that 63.7 percent of the children had experienced neglect. Such maltreatment has supported a need for an extension of mental health services to children who have experience such abuse. A study examining mental health treatment sought to analyze the importance of identifying mental health disorders in earlier years of care rather than later years when the behaviors and risk have enhanced and ongoing for quite some time (Burns et al., 2004) A stratified study done by the NSCAW randomly selected two groups of children, their workers, and caregivers to be surveyed (Burns et al., 2004). The study was done on children 5,504 individuals with children ranging between the ages of 2 to 14 years old. Data was collected through the use of a commonly known measure known as the Child Behavior Checklist (CBCL), which seeks to identify children who may benefit from clinical intervention. The study found that 47 percent of the foster youth tested scored in the clinical range for the need for treatment (Burns et al., 2004). Nearly 66 percent were adolescents, and 32.3 percent were among preschool age children. Of those children who had scored in the clinical range, only 11.7

percent of them had received treatment prior to the conduction of interviews (Burns et al., 2004). The children who did not score under the clinical range, only 4.1% had received mental health services. Out of the full sample, only 15.8% of the children had received mental health services prior to the study. 84 percent of the full sample had not received any mental health services (Burns et al., 2004).

Mental health issues has been linked to several poor outcomes of foster youth aging out of the system. Very little research has been done on the linkage between mental health issues and its effects on outcomes due to foster youth being hard to find. However, a study on youth receiving homeless services from a host of agencies in Colorado, Texas, and California examined the needs and experiences of those youth who had a history of foster care involvement in comparison to youth who did not have a history of foster care (Bender et al., 2015). The study conducted quantitative retrospective interviews with 601 homeless youth between the ages of 18-24 years old (Bender et al., 2015). Bender et al. (2015) identified several needs of homeless youth, one of those needs including mental health treatment. According to the results, foster youth met the criteria for mental health diagnoses at high rates (Bender et al., 2015). Foster youth met the criteria for a substance abuse disorder (69 percent), depression (36 percent), and post traumatic stress disorder (26 percent) (Bender et al., 2015). In regards to demographics, older former foster youth reported experiencing longer durations of homelessness (Bender et al., 2015). In regards

to childhood trauma, former foster youth reported greater physical neglect experiencing longer durations of homelessness (Bender et al., 2015).

Educational Attainment

In addition to experiencing the trauma of being removed from one's home into another home, foster youth also have to undergo frequent school transitions, which can have detrimental effects on the ability to attain education. Research has found that over 40 percent of foster youth between the ages of 15 years and 17 years old repeat a grade (Graham, Schellinger, & Vaughn, 2015). Foster youth also receive are 2.5 to 3.5 times more likely to receive special education services than the general population (Graham et al., 2015). The federal Child and Family Services Reviews, National Survey of Child and Adolescent Well-being study, and various other studies depict the outcome date of youth aging out as the following. 65 percent of former foster youth experienced seven or more changes in schools while in care (Graham et al., 2015). Only 74 percent of foster youth in comparison to 84 percent of the general population actually complete high school. 70 percent of aging out foster youth plan on attending college, while only 3 to 11 percent of foster youth actually complete a bachelor's degree program (Graham et al., 2015).

A study done on 32 foster youth being supported by four educational liaisons (COE) in a county in California conducted a mixed method study with a quantitative data evaluating the effectiveness of educational liaisons in improving the educational outcomes of foster youth from the year of 2008 to 2011

(Weinburg, Oshiro, & Shea, 2014). This study found that foster youth consistently served by educational liaisons experienced zero moves across the 3-year period (Weinburg et al., 2014).   Only 12 (37 percent) of the 32 students received special education services, and 88 percent of the foster youth attended traditional schools rather than more restrictive schools (Weinburg et al., 2014). The study showed an increase in the GPA's of the foster youth from 2.15 in the years of 2008-2009 to an average of 2.27 in 2010-2011 (Weinburg et al., 2014). The 12 students who were receiving special education services increased their GPA's from 2.37 to 2.70. A significant correlation was found between the foster youth's GPA's and their attendance rates (Weinburg et al., 2014). There was a strong correlation between foster youth's attendance rates and the number of placements they experienced (Weinburg et al., 2014). Gaps in this research depicted very little change in GPA's. However, researchers believe that if data was analyzed over a longer period time (elementary to middle school) a more significant trend would be displayed (Weinburg et al., 2014). Limitations to this study also realizes that there is no absolute evidence that the intervention of educational liaisons were the primary sources of change (Weinburg et al., 2014). And lastly, the research would be more conclusive if the foster youth had a comparison group who did not receive educational liaison services, or even records of the foster youth's GPA's prior to receiving educational liaison services

Independent Living Programs

Singer, Berizin, & Hokanson (2013) examined former foster youth's overall quality of social support system. The study collected data from twenty qualitative interviews with foster youth, ages 18–21. The study analyzed and used data that involved qualitative research that consisted of distinctive methods in order to establish specific themes of youth experiences (Singer et al., 2013). The study also indicated that foster youth had social support, which consisted of both formal and informal supports during their transition to adulthood (Singer et al., 2013). The support system was not as accurate as it should have been especially regarding the support system, provided by informal network members. Because their social support is far from perfect, the lack of social supports contributes to the poor outcomes in emerging adulthood (Singer et al., 2013). In addition the study indicated foster youth wanted to feel like they are supported during the transitioning to adulthood. Foster youth essentially wanted the reassurance that someone will be there during the most crucial milestones in their lives such as graduation, marriage, buying a new home, and having children. There were 20 participants in the 14 males and 5 females from between the ages 18-21 years old in the research study. Researchers drew the study from two community-based programs that serviced foster youth in the foster care system. One program serviced foster youth in the community through a drop-in resource center, individual support coach, and youth programming. The second program serviced foster youth in a residential college setting, and works on support with college transition and general resources (Singer et al., 2013). Almost half of the

participants were identified as 47 percent Black, 11 percent identified as White, 16 percent Hispanic, 21 percent multi-racial, and 5 percent identified as another race (Singer et al., 2013). The study was not diverse; there were more males than women and there were more African Americans than any other race. The youth were required to complete a one hour audiotaped interview. Results did exhibit that the youth had informal and formal support system. However, the youth support system lacked in both formal and informal relationships that provided a variety of support. In addition, youth also lacked in the appraisal and instrumental provided by informal networks (Singer et al., 2013). The article relates to the research question because it addresses foster youth and their relationships that they experienced during foster care. The supportive relationships helped with the quality of life of the foster youth. In future research I would have even number of male and female and a more diverse population.

Berzin, Rhodes, & Curtis compared housing outcomes for foster youth and non- foster youth. The study takes data from the National Longitudinal Survey of Youth 1997. The National Longitudinal Survey of Youth 1997 compared housing outcomes and also foster youth to non foster youth that shared the same risk. The study also analyzed youth that did not share the same risk. Results suggests that foster youth had a more difficult time transitioning into an independent living life style opposed to the other groups that were evaluated (Berzin, Rhodes, &Curtis, 2011). Research indicates that foster youth compared to non foster youth will display higher rates of homelessness, no stability in regards to

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housing, troubling neighborhood quality, and dependence on public housing

(Berzin et al., 2011). Results further prove that foster youth are more at risk to

having poorer outcomes when transitioning to adulthood compared to those who

are non foster youth. The Foster youth history was derived from two sections of

the survey, one that reported their living arrangements, and another section in

which they could report placement with a foster parent (Berzin et al., 2011).

Foster youth living situations was compared to individuals who had the same

circumstance to individuals who had completely different living situations. Results

stated that foster youth had a more difficult time transitioning to independent

living life style in comparison to both groups. The study exhibited some great

examples of the data analysis, the sample size was a bit large and there were

more males than females. The article relates to the research topic because most

foster youth are at risk for homelessness, lack of support, less housing stability.

The foster care system needs to improve on certain areas in order for the

transitioning foster youth to have a better quality of life.

Jones (2014) examined a qualitative study that included the perceptions of

a sample of discharged foster youth six months after leaving care. The research

exhibited that although foster youth were out of care for six months they felt

prepared for life and foster care. Research also discovered that the foster youth

had concerns with the independent living program, that needed to be addressed.

The satisfaction as well as the dissatisfaction was reported in the study as well

(Jones, 2014). The sample size was 106 students that exited foster care 6

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months and never left the state prior to the research study. Females made up the majority of the sample 57 percent. There were 47 percent African Americans, 20 percent Hispanics, and 3 percent of Native Americans and Pacific Islanders (Jones, 2014). The youth was required to complete   one standardized measure: the Ansel-Casey Life Skills Assessment-Short Version (ACLSA). The research was qualitative, with some quantitative analysis. Results showed that 6 out of 10 youth felt prepared with the independent living program (Jones, 2014). Foster youth felt like that they were prepared with doing laundry, managing monetary needs, but some lacked in the academic department. Some foster youth exhibited a lack of literacy skills. Foster youth also disclosed that they had poor study habits as well. The study exhibited that ILS services is beneficial for the youth, but it can also be a injustice to foster youth. The foster youth benefited from the social areas of ILS, but they lacked the academic capabilities in school. The limitation of the study was a small sample size, and the short period of time out of the foster care system. The article will be relevant to the research topic by addressing the good and the bad qualities of ILS programs.

Social Support

Havlicek (2011) examined former foster youth who went through an alarming number of placement changes. Havlicek (2011) indicates that there were several risk factors that contributed to the instability of the placement changes for foster youth. The number of placements changes on an average of 2.4 placements to 9.5 placements per year. (Havlicek, 2011). Youth usually

enter foster care when they are adolescents and once they exit the system they should be capable of doing certain tasks independently. On the other hand, foster youth will lack in their developmental milestones, which is a result of placement instability. Several risk factors have contributed to placement instability such as the imbalanced ages, abuse and the different types of placements (Havlicek, 2011).   Havlicek (2011) also studied that not only are foster youth lacking independence, but they also lack life events that will be beneficial for their transitioning into adulthood. Foster youth that are residence in congregate care settings are more likely to lack independence. Congregate care settings are supervised settings, and foster youth are hindered from social experiences (Havlicek , 2011).   Because foster youth feel unwanted and incomplete they may encounter a number of risk factors while in care: running away, psychiatric hospitalizations, and being detained in juvenile detention centers (Havlicek, 2011).   The risk factors is a product of foster youth lacking in placement settings, mental health treatment, and a lack of family and or social support (Havlicek , 2011). This study suggest that the common experiences of former foster youths may include high rates of placement instability, congregate care settings are not beneficial, and the lack of independence to the social environment (Havlicek , 2011).

There are a number of factors that contribute to teenagers getting pregnant in foster care. Aparicio, Pecukonis, & O'Neale (2015) examined six women from the ages of 19 to 22 years old. The sample size consisted of five

participants that were African American; one was Latina of Puerto Rico and the other was of Salvadoran descent. Three participants reported at least one abortion, and one had a miscarriage. Participants were aged 14 to 17 years at the time of their first pregnancy (Aparicio et al., 2015). The analysis that was used was an Interpretative phenomenological analysis, this analysis observed teen mothers and their experiences in foster care. There were three themes that were discussed. The three themes consisted of: darkness and despair, glimpses of light in the darkness, and new beginnings. The mothers spoke about their childhood and the darkness they experienced with their biological parents and at foster care. The mothers began to see a different meaning to their lives once they were pregnant. After the mom's had given birth to their child, it helped them to create a close bond with their significant other and their families. The birth of their first child helped them have a better outlook on life and being capable of meeting their child's basic needs and giving them a meaningful life (Aparicio et al., 2015). The study indicates that there should be services provided and implemented for the youth and their parents that are involved in the child welfare system. Research also indicates that if foster youth specifically troubled youth undergo intervention that will prohibit future substance abuse, a mental breakdown, and teenage pregnancy (Aparicio et al.,2015).

Another research study examined a mentoring relationship, hardships, and the outcomes during the emerging adulthood period (Greeson, Usher, & Grinstein-Weiss, 2010). The study includes a normative sample of young adults

that identifies as former foster youth (Greeson et al., 2010). Natural mentoring

relationships allowed foster youth to have a bond with a respectful and nurturing

adult before exiting foster care. The study consisted of 14,823 respondents and

8,151 reported having a natural mentor at the age of 14 years old (Greeson et

al., 2010). Among the non-former foster youth, they acquired an education,

employment, financial stability, housing, and transportation (Greeson et al.,

2010). The former foster youth statistics were slightly different from the non

foster youth, they receive public assistance, out-of-school suspension, and some

never received psychological counseling for their trauma. Despite the negative

aspects of their lives, former foster youth also acquire housing, financial stability,

and transportation (Greeson et al., 2010).   A natural mentor did contribute to the

assets the former foster youth acquired. Even though the former foster youth

outcomes were lower than the non-former foster youth, research suggests that a

natural mentor may help former foster youth to thrive in society. Social support is

vital in the child welfare system. Ultimately foster youth wants to feel valued as a

person and will need assistance in emancipating out of the foster care system

Summary

After doing an extensive review of the literature on the various factors that

contribute greatly to the poor outcomes of foster youth, it is important for

researchers now to expand upon this research and find methods to decrease the

challenges foster youth face when transitioning out of the foster care system into

adulthood. The literature is limited in encompassing the voices and perspectives of foster youth on their unique experiences in foster care and preparedness for transitioning to adulthood. Thus we intend to conduct a study on the individual outcomes and perceptions through the voices of former foster youth through of face to face interview as a means to fully understanding their preparation towards emancipating into adulthood once exiting out of the foster care system. Taking a look into the various factors that contribute to poor outcome rates of former foster youth will give researchers a chance to further explore any additional information for future interventions that could possibly improve and strengthen foster youth's ability to attain successful adulthoods, as well as brainstorm ways to help enhance the lives of youth still in care under the ages of eighteen years old.

CHAPTER THREE

METHODS

Introduction

The content of this chapter presents the methods used to study the perceptions and experiences of former foster youth while in the care of the child welfare system. This section will include the study's design, sampling method, data collection and interview instrument, the protection of human subjects, as well as the qualitative data analysis.

Study Design

The purpose of this study is to examine the outcomes and perceptions of former foster youth regarding how prepared they felt towards emancipating into adulthood once exiting out of the child welfare system. Former foster youth's outcomes and perceptions were explored through the use of face to face interviews in a safe, nonjudgmental environment. The use of a qualitative method allowed for participants to have an opportunity to freely engage rather than have predetermined responses that could possibly limit the amount of information researchers will be able to gain. This study design can aid current research by obtaining feedback, identifying key factors, as well as the needs clients feel they need from the child welfare system. Utilizing a quantitative design would limit researcher's ability to access individual perceptions, needs, and outcomes of

each individual participant whose experiences are each unique and diverse. The research question for this study is: What factors influence the preparation of former foster youth towards transitioning into adulthood upon aging out of the child welfare system?

A limitation of this study is the heavy reliance on the memory of former foster youth as a means to gain insight into their perceptions and experiences that often lasted for several years. Participants employed information about their placement history, their social support network, education attainment, treatment of mental health services, and independent living services based off of what they can remember. Another limitation to this study is that research results will be based also on self-reports. Researchers acknowledge that reliance on self-report can possibly create liberty for participants to report untruthfully based on their opinions and feelings rather than factual information. The last limitation of the study is the dependence on the perceptions of 10 former foster youth to hold as a representation of all former foster youth's experiences and outcomes in the county of San Bernardino. Using a small sample size to generalize the experience and outcomes of the larger population may be difficult.

Sampling

Researchers created a proposal letter written to the director of the Department of Children and Family Services County of San Bernardino as a

means to find participants for the study. After approval was given, a list of former foster youth was provided by the Extended Foster Care units within the Department of Children and Family Services County of San Bernardino as a means to recruit participants. From the list, researchers contacted a total of 120 potential participants via telephone, as a means to advertise and recruit participants. Researchers also created a flyer and posted it around the campus of California State University, San Bernardino. The sampling criteria required that participants be former foster youth between 18 years old and 35 years old. It also required that participants be of all genders, ethnicities, cultures, and backgrounds. The participant had to have experienced involvement with Children and Family Services and experienced foster care or out of home placement as a result.

Data Collection and Instruments

Researchers created an instrument that was used to measure the perceptions and experiences of foster youth in the child welfare system. The instrument consisted of nineteen interview questions that were used for the purpose of conducting face to face interviews with participants. The questions consisted of asking questions regarding demographics, as well as open-ended questions that helped participants elaborate on their personal experiences. Questions were articulated by analyzing the factors that commonly contribute to the poor outcome rates of foster youth. Researchers created questions that

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encouraged foster youth to recall whether they had stable support and contact with family members or mentor. They were asked about their experience with foster parents. The questions were asked to help researchers analyze whether the social support and connections were stable or unstable and explore linkages between connections and poor outcome rates of foster youth aging out. Another question asked to participants was whether they were offered and attended independent living services. They were also asked about the effectiveness of services offered as a means to analyze whether this type of service contributed to the outcomes of foster youth. Participants were asked about their mental health treatment and medication history. These types of questions were used to again analyze whether services given, effective, and contribute to outcome rates. Educational achievement experiences also were talked about to view the relationship educational achievement had with outcome rates of foster youth. Lastly, the researchers asked questions that allowed participants to express which factors they felt contributed to their outcomes, and what additional services they felt they needed as a means to make transitioning into adulthood smoother. Researchers are aware that some questions may be sensitive subjects for participants, thus a pretest was given to colleagues to ensure the structure and language of the questions were sensitive to the participant's personal experiences.

Procedures

The researchers obtained approval from the Department of Children and Family Services of San Bernardino County. The department gave researchers a list of names of individuals that are in extended foster care in San Bernardino County. Researchers called participants for recruitment and received some participants through the county. The rest of the participants were gathered and recruited through the use of flyers that hung around California State University, San Bernardino. Once we had 10 individuals willing to participate in our study we then met with the participants at various agreed upon locations and interviewed them. We audiotaped each interview we conducted as well. The interviews lasted from anywhere between thirteen to forty-five minutes, with participants answering the prepared interview questions.

Participants were provided with a consent form and a confidentiality statement prior to start of the interview. When the participants agreed to the terms of the consent form, an x was marked on the consent to participate box. Upon completion, of the interview all participants were provided with a debriefing statement informing them of the study in which they participated. Data collection occurred between January and March of 2015.

Protection of Human Subjects

Researchers took appropriate measures to ensure the protection of the participants in this study. All participants interviewed were on a voluntary basis.

Prior to interviewing, all participants were presented with an informed consent

form and an audio consent form. If the participants agreed to the terms and

conditions, they placed an X in the appropriate box to sign their consent to

participate and be audio taped. Participants were informed of the purpose of the

study and notified of confidentiality. Participants were informed that their

participation was voluntary and that they could withdraw from the study at any

time and without any penalty. Furthermore, participants were also informed about

the confidential nature of their answers. The participants are not to be identified

by name. All of the data was be stored on auto-tape and a password-protected

computer only the researchers had sole access. All research was destroyed after

research was completed.

Data Analysis

Our study employs a qualitative data analysis technique. This study

utilizes descriptive statistics, including frequency distribution, measures of central

tendency, mean, measures of variability, and standard deviation in order to

describe the characteristics of the sampling data. Interviews were audiotaped

and transcribed verbatim. Researchers identified the similarities and differences

of the interviews from the participants and formulated themes and patterns. We

also developed a coding method in order to organize our data. After the data was

collected it was entered into the SPSS computer program. Thereafter, the data

can only be identified only by a study supplied identification number. All of the completed interview information was destroyed after the study was completed.

Summary

This study used a qualitative design, as well as availability (convenience) sampling. A method of face to face interview was be conducted while using an interview guide. The researchers conducted the procedures and protection of the human subjects that were interviewed. Lastly, the data analysis for the qualitative research was discussed pertaining to the stud

CHAPTER FOUR

RESULTS

Introduction

This chapter presents the findings of the study from the data through the use of participant interviews. The data gathered was designed to explore each participant's experience in regards to the factors that contributed to feelings of preparation upon transitioning out of foster care and into adulthood. In addition to demographic data collected, each participant's experience was furthered explored in qualitative interviews in which participants were asked questions surrounding four main categories of social support, independent living programs, mental health treatment, and educational attainment. Participants' direct quotes were also used to support each theme in order to provide a better understanding about their views of which factors helped prepare them for their transition the most.

Presentation of Findings

The sample was drawn from former and current foster youth who were 18 years old and older. There were a total of ten participants. Each participant were asked of demographic questions in the beginning of the interview process. The participants comprised of 6 females and 4 males with an age range of 19 to 33 years old. The average age of participants was 24.6 years. In regards to ethnicity, there were   6 African Americans, 2 Native Americans 1 Caucasian,

and 1 Hispanic. In terms of marital status 7 participants were single, 2 participants were cohabitating, and 1 participant was divorced. The employment status of the participants were 3 unemployed, 3 part-time employed, 4 full time employed. The level of education of the participants were 2 some high school, 1 junior college, 4 post secondary college, and 3 college graduates. The total years spent in foster care ranged from three years to eighteen years. On average, participants spent 8.87 years in foster care. A total of two 2 participants chose not to answer. The total number of placements ranged from one to ten placements. The average number of placements was 4.13.

<u>Social Support</u>

Questions 1 through 4 were categorized to measure the amount of social support each participant had while in care. When asked about their interaction with their biological while in foster care placement, the responses were mixed. Three participants had consistent interaction with their family. Four participants had minimum interaction with their family, and three participants had no interaction with their family. Interaction with family was measured by how frequent participants were allowed to interact with their family members. The three participants who had consistent interaction with their family reported to have contact with their family upon their discretion of when they wanted to. The four participants who had minimum interaction with their family had inconsistent interaction with their families, thus they were not able to see them at their own discretion. The three participants, who had no interaction with their familes, did

not have any type of interaction or contact with their biological family members while in care.

When asked about their experience with social support from formal and informal mentorships, the majority of the participants reported receiving social support from school officials, teachers, and coaches. Three participants reported to have no formal or informal mentorships. One participant reported mentorship through social workers. One participant reported to have a CASA (Court Appointed Special Advocate) worker whom they received mentorship through. Only one participant reported to have mentorship through foster parents. One of the participants reported,

"Umm I was in sports so, basically like my coaches were mentors, at the same time I kind of got my work ethic through sports. If you're going to do it, don't half ass it, do it all the way not half way. Those were my male role models. I played football, basketball, baseball, so kind of like male role models. (personal interview, March 2016)"

When asked about their experiences with social support from friends while in care, All of the participants reported to have supportive relationships through friends. One participant reported,

"Yea you know even though we hated each other's guts half of the time. Um you know the other half was just filled with good memories. And you know we may not talk now but if it wasn't for them I don't how I would've gotten through (laughs) school with all the stuff that I went through you

know. Um yea its pretty crazy when I think about it now because you know

we went from them knowing I was in an abusive relationship and trying to

make sure people didn't find out. You know helping me put on makeup to

make sure I could hide it away from teachers. You know to us getting in

fights in the parking lot and like you know and telling others that we are

going to key each others car, and stuff like that. And so we've been

through it. Came together at graduation you know, and saying we love

each other. You know and even though yea like I said we don't

talk now because we're all in just different paths, and so we are all tied up

(laughs) you know. And we move on, but it's okay. So yea they would

have to be the people that or the relationships that helped the most

throughout that. (personal interview, February 2016)"

When participants were asked about the support they received from

caregivers and/or group home staff, the majority of the participants reported a

mixture of good and bad experiences with caregivers and/or group home staff.

Seven of the participants reported having good and bad experiences with

caregivers. One of the participants reported,

"Um I've been in three different foster homes. The first two were pretty

miserable. Um   well the first one, me and my brother were placed with

like a family but it was like a total of seven kids not including us. Yea so it

was just like- it was too much. And like, the parents really- I feel like they

were in it for the money. Yea. Um yea it was with an older lady (third

placement). She was really caring. I still keep in contact with her. My old

foster mom helped a lot, and she still helps a lot (personal interview,

January 2016)."

<u>Independent Living Programs</u>

Three participants reported having good experiences with caregivers

and/or group home staff. When participants were asked questions about the

types of independent living classes that were offered the major responses of the

participants reported to have attended independent living classes. Six

participants did attend and four participants did not attend or the classes were

not offered. One of the participants stated

"I mean the IOP the program was at that time was pretty cool some of the

things they were teaching was kind of informative so like um. So we were kind of

able to weave it out but you know kind of um understand you know once I

experience certain things well dang now in class it was like kind of boring you

know it did not really occur until we experienced it so that was cool relationship

wise um you know like the sport part you know that helps build relationships you

know like the team stuff um and then like just in the community you know what I

mean like boys and girls club they had like certain programs you know that we

would participate in you know like do the sport thing it was a good um place to be

to kind of keeps us out of trouble that was a place we spent a lot of time at you

know just other community centers besides the boys and girls club but um yeah"

 (personal interview, February 2016)."

<u>Education</u>

   Participants were asked about their experiences while in care regarding grades, extracurricular activities, tutoring, IEP, number of schools attended, and interaction with peers. Five of the participants went to some college, two of the participants went to some high school, and three of the participants graduated from college. All ten of the participants participated in extracurricular activities. Two of the participants participated in tutoring. All ten of the participants did not participate in having an IEP conducted. Seven of the participants did not attend several schools while in care. Three participants attended two different high schools. All ten of the participants had interaction with their peers. One of the participants reported within the interview,

> "I had good grades all throughout school like a 3.4, I was involved with
> sports, sports is what kept me out of trouble, because if I didn't I would be
> doing other stuff. Yeah I did, it was in a way it helped it helped me get
> over some of the stuff to when I get in 8th grade my attitude changed, I
> started to talk to people and stuff it was like yeah it was not my fault my
> parents were not there it was their fault, I was like alright I got over that.
> And that's when my attitude changed around and I became the happy
> person you see today." (personal interview, February 2016)."

<u>Treatment for Mental Health</u>

   When participants were asked if they received mental health services and treatment, nine participants reported to have received some form of mental

health services and treatment. One participant did not receive any mental health treatment or services. When participants were asked if they were prescribed any medication for the purpose of mental treatment. Eight participants reported having been on no psychotropic medications. Two participants reported being on psychotropic medications for the purposes of mental health treatment. Four of the participants who received therapy reported therapy was 'somewhat' helpful, while four participants reported therapy was not helpful. One participant stated,

"Umm Yeah I do remember them telling me that certain psychological PTSD or whatever you want to call it. They wanted to give me medication but in that time I really just relied on God, and I did not want to get addicted because my mom was an addict. I did have one therapy. It was helpful after it is just really hard for me to open up, that's the difficulty I have opening up things that have happened and things that I need help with those things (personal interview, February 2016)."

Most Helpful Relationships vs. Services

When asked what relationship or service helped participants the most while in care the major themes of the participants reported that 6 relationships with caregivers and/or group home staff were the most helpful relationships while in care. Six of the participants reported that caregivers and/or group home staff was the most helpful while in care. Two participants reported that their friends were the most helpful relationship while in care. One participant reported that their foster parents were the most helpful relationship while in care. And one

participant reported that their coaches and church affiliation were the most helpful relationship while in care. There was a weak influence of services and strong influence of relationships that contributed to the each individual's experience.

<u>Needed From Caregivers</u>

When participants were asked about what they needed from caregivers to help them transition out of the foster care system into adulthood, participants' responses were very mixed. Nine of the participants needed more social, emotional, and financial support from their caregivers. One of the participants had support from their caregiver. One participant reported,

"Woo patience. Uh I would say patience because I would say I was a different kid. I was- I just wanted. I didn't like watching tv. I just didn't- I wanted to be outside. I wanted to be around people. I wanted to be around boys. I wanted to be around girls. I wanted to party. You know I wanted to be like a normal teenager that I saw on tv. You know even allowing people over was a misconception that wasn't even approved. That's not real. You know, and I went out and did that. And I became rebellious. I didn't care, and you know I wanted people to hear me. I wanted my story to be heard. I wanted to speak out. I wanted all these different things, and I didn't get that at first. That was like really frustrating for me. And so um you know I wanted love, because my dad didn't love me. And my mom didn't love me. At least I didn't believe that they did. And so I sought out relationships that

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were probably not good for me you know. Naïve. Very, very naïve. You know and that led to a lot of terrible, terrible situations that have definitely shaped me into being who I am today. Um and that's why I advocate against dating violence, domestic violence, sexual assault, and things of that nature. That's why I work in the women's resource center. And that's why I hope to be able to inspire a lot more girls you know when it comes to these things. (personal interview, February 2016)."

Needed From Social Workers

When participants were asked about what they needed from social workers to help them transition out of foster care into adulthood, participants responses were mixed. Nine of the participants needed more consistency, honesty, and support from social workers. One participant reported,

"As far as resources or just, umm just in general in general. Umm I guess showing that you care like saying you care and showing it and showing comes in different ways umm listening answer a call not returning them but just giving one asking how the grades are and whatever it is just support support is the biggest thing for me and being honest sometime like foster mom vs kid and it shouldn't be like that yeah you should hear my story and my foster mom story just not pick a side you know peaceful (personal interview, February 2016)."

Perceptions of Preparedness

When participants were asked about how prepared they felt during their transition of aging out of the foster care system, the responses were split. On the other hand, five participants reported that they felt prepared for their transition out of the foster care system. Five participants also reported that they did not feel prepared for their transition out of the foster care system. One participant reported,

"I mean I think they (foster parents) gave me what I needed. I mean I had everything. They taught me. I mean I got educated. I got my degree- I mean my certifications whatever I needed when I moved out. They helped a lot. I don't know. I didn't have a bad experience. .I didn't just get kicked out of the system. I moved out on my own. You know when I did turn eighteen, and they stopped getting money for me I did have to pay rent but like I said responsibility. So I mean it kind of taught me something. You know I wouldn't change anything. It was a good transition (personal interview, March 2016)."

Another participant who did not feel prepared for their transition out of the foster care system reported,

"Uhh no but I didn't care because I was going to be on my own. And I was just going to have to pull it. And I was just going to have to you know oh well. Something was going to hit me, but you know I was going to figure out a way. I wasn't going to rely on anyone at all, ever (personal interview, February 2016)."

When participants were asked about their present life circumstances, the majority of the participants felt they were stable in life and doing well. All of the participants were either currently in school or employed. All participants had stable housing, and doing well. One of the participants reported,

"Currently I am working at Cal State San Bernardino as the NPHC coordinator with the Office of Student Engagement and I am in charge of the cultural piece of the historical black Greek letter organization bringing them back on campus and then I have additional task picking up standards of excellence in office regards to other clubs. Currently I live in the I.E. me and my girlfriend we do live together uh that was a different milestone and it is a good milestone. Uh I forgot that I finished got my bachelors degree in computer engineering it is totally different in what I'm doing now, hey that is how life is and um I am going to be pursuing currently waiting on to hear back from grad school, I applied to several schools to go get my masters in higher education and students which correlates what I am doing now and try to tie those disciplines in together" (personal interview, March 2016).

Summary

This chapter presented the findings derived from the data obtained from in-depth qualitative interviews with ten participants. The study explored former

foster youth's perspectives regarding how prepared they felt towards transitioning

into adulthood once exiting out of the foster care system. The qualitative

interviews also gave insight on different factors that contributed to the former

foster youth's successful transitioning into adulthood. The identified factors

included the treatment of mental health services, educational attainment,

independent living programs, and social support. Therefore all of the categories

served as a catalyst for former foster youth to succeed as an adult.

CHAPTER FIVE

DISCUSSION

Introduction

This chapter identified the common themes discovered by this study and discussed how they apply to the outcome of former foster youth aging out of the child welfare system. This chapter discussed an overview of the theory used to conceptualize this study as well. This chapter also presented the limitations of the study and recommendations for social work practice, policy, and future research in regards the outcome of former foster youth aging out of the child welfare system.

Significant Themes

The significant themes were identified from this study in regards to the former foster youth on how prepared they felt towards emancipating into adulthood once exiting out of the foster care system. One major theme related to the former foster youth emerged for the date was on the relationships factors that the participants had with their caregiver, group home staff, mentors, and friends helped them the most while in care. The study demonstrated a strong influence of relationship factors that contributed to each of the participant's individual experiences. The study found that the relationship factors were the most influential factors that contributed to the successful transition into adulthood. Several of the participants reported that the different relationships with mentors,

friends, caregivers, and group home staff that were the most influential in their personal development as an adult. Several of the participants reported that their caregivers teaching them the tools they needed for higher education. One participant in particular reported that their caregiver showing them how to be financially responsible. Several of the participants reported that their friends were outlets from all the trauma and negativity they experienced while in care. Several of the participants reported that their mentors helped them realize that being in placement was not their fault and that they were capable of overcoming any obstacle.

Another theme or factor that contributed to the successful transition to adulthood while in care was the independent living programs that were offered to the participants while in care. In previous research, Jones (2014) stated that foster youth felt more prepared with life skills once they attended independent living classes. Several of the participants reported that the independent living classes had been helpful with teaching them interview tips and writing checks. Several of the participants reported that the independent living classes assisted them with communication skills, and how to manage their anger and frustration. One participant in particular reported that the independent living classes assisted them with their Narcotics Anonymous (NA), Alcoholics Anonymous(AA), and parenting classes. One particular participant spoke about the independent living classes assisting them in building effective relationships with others. Through positive relationship factors and having helpful programs, ultimately

helped the participants thrive in academics and gain a sense of self-worth.

Several of the participants reported to have attended or graduated from some

college or post secondary college. Although some participants reported that they

experienced some bad relationships with caregivers, their other relationship

factors helped them through care. A small portion of participants did not attend

the independent living classes, but the relationship factors helped them with their

ability to transition to adulthood.

<u>Maslow's Hierarchy of Needs</u>

One of the guiding theories used to conceptualize this study was Maslow's

hierarchy of needs which consists of five stages. The study evaluated how

prepared former foster youth felt during their transition to adulthood while exiting

the foster care system. A portion of the findings of this study reveals that some

former foster youth felt prepared in transitioning to adulthood. The former foster

youth felt more confident in some areas such as independent living skills, their

educational skills, their mental health capacity, and their social support

relationships. However, some former foster youth did not feel prepared in

transitioning to adulthood and they lacked in some areas as well.

The former foster youth did have some of their basic needs fulfilled such

as their psychological needs, and safety needs. All of the former foster youth

had shelter, food, and they also felt secure at their placements. However, some

foster youth lacked in other areas of Maslow's hierarchy of needs such as love

and belonging needs, esteem needs, and all of the former foster youth are still

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discovering their self-actualization needs. Maslow's Hierarchy of needs is

significant to this study, in understanding former foster youth's transition

successfully into adulthood. Former foster youth must complete the lower level of

needs to progress to the higher level of needs of self-actualization (McLeod,

2014).   However, some participants in this study reported that they lacked in

some areas of social support, independent living skills, mental health treatment,

and educational attainment. When they were lacking in such skills, they would

encounter a difficult transition to adulthood. On the other hand, some

participants that met Maslow's lower level of needs felt more prepared and

confident with social support, independent living skills, mental health treatment,

and educational attainment and they felt more prepared to transition into

adulthood.

<u>Emerging Adulthood</u>

Another theory that guided the conceptualization of this study was Jeffrey

Arnett's coined concept of the 'emerging adulthood'. This theory was used as a

means to understand the outcome of former foster youth transitioning into

adulthood. This theory identified a population of youth between the ages of

eighteen and twenty five years old who are still exploring and attempting to

navigate their ways through life while yet facing disappointments and failures.

The three common characteristics that were identified, as one's successful

transition into adulthood was one's ability to accept responsibility for themselves,

the ability to make independent decisions, and the ability to become financially

independent. And although this study did not seek to predict whether participants were able to achieve these three qualities successfully, this theory can be utilized to understand the common goals each participate is attempting to achieve while yet facing issues accessing efficient social support, treatment for mental health, educational attainment, independent living classes during the phase in which they are preparing to transition into adulthood.

This theory anticipated that this age of young people often times, even youth who are pursuing higher levels of education, are in need of additional support from parents. Many of the participants in this study expressed a lack of support from entities who should be the most concerned with how prepared foster youth are during their transition into adulthood. In regards to both caregivers and social workers, participants expressed a desire for support in regards to social, emotional, and financial support.

Limitations

There were several limitations to this study. One of the limitations of qualitative interviewing was to encounter extremely diverse experiences of each individual participant. This made it hard for researchers to see clear congruent commonalities, which left space for researcher bias to interpret participant responses. The interviewing process also relied heavily on the memory of former foster youth regarding their experiences. Participants were expected to remember the duration of each of their individuals experiences. Relying heavily

on the the participants memory also left room for participant bias in regards to the amount of support, mental health treatment, educational attainment, and access to mental health treatment they believed they received versus what actually happened in reality.

Another limitation of the study was the recruitment of participants from California State University, San Bernardino who were currently receiving services through San Bernardino County Child and Family Services Extended Foster Care (EFC) unit. This study depicted a representation of only former foster youth who are most likely experiencing better outcomes than the former foster youth who were not accessible and receiving benefits through the Extended Foster Care (EFC) unit or enrolled in college. The study also only geographically represents former foster youth living within San Bernardino County area.

<p style="text-align:center">Recommendations for Social Work
Practice, Policy, and Research</p>

<u>Services</u>

Through the information gathered from participants of this study, the investigators believe that it would be beneficial for foster youth to have experienced more support and resources from social workers and caregivers. Many of the participants discussed feelings of a disservice by social workers and caregivers who they felt were just 'in it for the money'. Feelings of support and the inclusion of a network of people who genuinely cared for the needs of this population appeared to be adamantly needed. Participants discussed having

support in the form of friends and mentors. However, support from caregivers and social workers seemed to be the most impending need for support. For example, many of the participants who discussed being placed in caregivers' home reported feelings of being treated different in comparison to the caregiver's biological children. They also discussed feeling as though social workers did not provide them with the resources they needed, thus affecting their transition into adulthood regarding college, housing, and a variety of other basic needs.

In addition to mental health treatment by professionals, many of the participants talked about ineffective treatment by professionals in the mental health aspect. Many of the participants did not like the idea of therapy or disclosing their thoughts and feelings to a 'stranger.' Mental health treatment appeared to be noted as the least effective treatment for foster youth. In addition to providing mental health treatment through professionals, it may be beneficial for child welfare agencies to incorporate the use of other former foster youth who have previously experienced the same situations within the treatment of helping current foster youth transition into adulthood. Although mental health professionals are more competent in regards to clinical skills to help aid foster youth through mental health treatment, having a program that allows foster youth to be mentored and helped by former foster youth who have received or have been trained in clinical education could probably help to bridge the gap between mental health professionals and foster youth relationships. Even if more former foster youth were hired in as mentors with the county, this could also help to build

a network of support to help foster youth navigate and get through the child welfare system.

<u>Policy</u>

In regards to policy change, striding to start preparing foster youth for the future should start at a much younger age than fifteen years old. The researchers believe that one of the ways to intervene and improve outcomes is prevention. In San Bernardino County, foster youth are not eligible for independent living program services until the age of fifteen. Many school-based programs like Advancement of Individual Via Determination (AVID), work on preparing children once they reach middle school age. Because foster youth are at higher risk of experiencing several negative outcomes in comparison to the general population, it would beneficial for policies to address the age limitation for receiving access to programs that could potentially help foster youth gain independent living skills sooner, as well as preparing them to start thinking about the future much sooner than high school age. Most of the participants in the study who were provided with independent living skills programs found them to be beneficial. Thus, changing the age limit for access to these services could be helpful for foster youth who may one day age out of the system.

<u>Research</u>

There are several recommendations in research that will be beneficial in examining former foster youth transitioning into adulthood. One factor that needed further research regarding the former foster youth study is to examine

different avenues regarding former foster youth that are not receiving services from extended foster care or enrolled in college. Future researchers should recruit participants that are not doing so well after their transition to adulthood. Therefore, researchers would have more insight and an accurate perception of the factors that contributed to the outcomes of them not receiving services.

Another factor that is recommended for further research is comparing the outcomes of former foster youth that had Court Appointed Special Advocates (CASA) workers and peer partners to former foster youth that did not have those mentors. Researchers would have more insight on how the mentoring services benefited the former foster youth that had Court Appointed Special Advocates (CASA) workers to those that were not offered that mentorship. This study exhibited that participants did benefit from some form of social support, but participants did not have peer partners that experienced the same occurrences in foster care. Former foster youth will benefit from a Court Appointed Special Advocates (CASA) worker as well as a peer partner will help and support them in their transition into adulthood. Lastly, further research should explore the perceptions of the social workers that assist former foster youth transitioning into adulthood. The participants in this study reported that social workers should have given them more support, resources, consistency, and honesty. Social workers should be interviewed, so that researchers can have a clearer understanding on what is lacking from the former foster youth.

Conclusion

The study examined the outcomes and perceptions of former foster youth regarding how prepared they felt towards emancipating into adulthood once exiting out of the foster care system. The researchers recruited ten participants to conduct personal interviews regarding their experiences in foster care and how prepared they felt transitioning into adulthood. The questionnaire the researcher's presented to the participants consisted of twenty- two questions. Even though the participants were asked a series of questions, all of the questions consisted of four main categories of social support, independent living programs, mental health treatment, and educational attainment. All ten of the participants had different experiences while in foster care. However, five participants   reported the social relationships, education attainment, and independent living classes, contributed to how prepared they felt transitioning to adulthood. These participants also reported that caregivers, mentors, support from peers helped them with their foster care experience. On the other hand, the other five participants reported that they did not feel prepared for their transition out of the foster care system. Even though all the participants had mixed responses regarding them being prepared with transitioning into adulthood, they are all currently stable in life and doing well. All of the participants reported that they are currently in school, employed, have stable housing, and are reaching their self-actualization.

This study's findings provided imperative information about the preparation former foster youth felt during their transition to adulthood and the four key factors that contributed to their transition. This study also gave some insight about what was lacking in their foster care experience. For instance, participants in certain areas of their lives needed more support from social workers, and the service programs that was not offered to the participants. Overall, this study exhibits that it takes social support, independent living programs, mental health treatment, and educational attainment in order for former foster youth to emancipate from foster care and have a successful transition into adulthood.

APPENDIX A

INTERVIEW GUIDE

INTERVIEW GUIDE

1. What is your gender?

    a) Male
    b) Female

2. What is your ethnicity?

    a) Caucasian
    b) African American
    c) Latino
    d) Asian/Pacific Islander
    e) Native American/Indian
    f) Other

3. What is your age? _____

4. What is your relationship status?
    a) Single
    b) Cohabitation
    c) Married
    d) Divorced/Widowed

5. What is your employment status?

    a) Part- Time
    b) Full-Time
    c) Unemployed
    d) Other

6. What is your highest level of education?

    a) Some high school
    b) High school graduate
    c) Some college
    d) College graduate
    e) Graduate student or higher

7. How many years were you in foster care?

8. Can you tell me about your placement history? (How many placements did you have? And what was your experience in each placement?)

9. Can you tell me about the interaction or contact you had with your biological family while in placement? (Did you see your family often? How often did you see your family or talk to them on the phone?)

10. What types of social support or (formal/informal) mentorships did you have while in care? (Did you have a mentor or someone that you went to for support and help? Did you have a CASA? Wraparound worker?)

11. Can you tell me about your experiences with friends growing up? (Were you able to build relationships with others? Did you have friends? Did you have friends you could depend on or go to for support?)

12. What was your relationship like with your caregivers (How many caregivers did you have? If you had group home staff, how was your experience with them?)

13. While in placement what types of independent living classes did you attend or get invited to? Were they helpful?

14. Did you receive any mental health services or treatment?

15. Were you on any prescribed medications for mental health purposes?

16. How did you feel about your experience within therapy (if any)?

17. What was your experience like in school while in care (grades, extracurricular activities, tutoring, IEP, number of schools attended, interaction with peers)?

18. What relationships or services helped you the most while in care?

19. What do you feel like you would have needed from caregivers to help you transition into adulthood?

20. What do you feel like you would have needed from social workers to help you transition into adulthood?

21. How prepared did you feel during your transition into aging out?

22. Can you tell me about what life is like now for you now that you are an adult receiving extended care services (occupation, education, living arrangements, and stability)?

Developed by Lakenya Jones and Sneshia Stribling

APPENDIX B

AUDIO CONSENT

AUDIO CONSENT FORM

FOR NON-MEDICAL HUMAN SUBJECTS

As part of this research project, we will be making an audiotape recording of you during your participation in the experiment. Please indicate what uses of this audiotape you are willing to consent to by initialing below. You are free to initial any number of spaces from zero to all of the spaces, and your response will in no way affect your credit for participating. We will only use the audiotape in ways that you agree to. In any use of this audiotape, your name would *not* be identified. If you do not initial any of the spaces below, the audiotape will be destroyed.

Please indicate the type of informed consent

Audiotape
The audiotape can be studied by the research team for use in the research

(*AS APPLICABLE*) project.

Please initial: _____

- The audiotape can be shown/played to subjects in other experiments.

    Please initial: _____

- The audiotape can be used for scientific publications.

    Please initial: _____

- The audiotape can be shown/played at meetings of scientists.

    Please initial: _____

- The audiotape can be shown/played in classrooms to students.

    Please initial: _____

- The audiotape can be shown/played in public presentations to nonscientific groups.

    Please initial: _____

- The audiotape can be used on television and radio.

  Please initial: _____

  I have read the above description and give my consent for the use of the audiotape as indicated above.

  The extra copy of this consent form is for your records.

  SIGNATURE _____ DATE _____

APPENDIX C

INFORMED CONSENT

CALIFORNIA STATE UNIVERSITY
SAN BERNARDINO

College of Social and Behavioral Science
School of Social Work

INFORMED CONSENT

The study in which you are asked to participate is designed to examine the perceived outcomes of foster youth who have transitioned to extended foster care. The study is being conducted by MSW students Lakenya Jones and Sneshia Stribling under the supervision of Dr. Janet Chang Ph.D., M.S.W., School of Social Work, California State University, San Bernardino. The study has been approved by the Institutional Review Board Social Work Sub-committee, California State University, San Bernardino.

PURPOSE: The purpose of the study is to examine the perceived outcomes of foster youth who have transitioned to extended foster care.

DESCRIPTION: Participants will be asked a few questions on their experiences in the foster care system, specifically did they have social support, educational achievement, treatment for mental health, and independent living preparations.

PARTICIPATION: Your participation in the study is totally voluntary. You can refuse to participate in the study or discontinue your participation at any time without any consequences.

CONFIDENTIALITY OR ANONYMITY: Your responses will remain anonymous and data will be reported in group form only.

DURATION: It will take 40-60 minutes to complete the interview.

RISKS: There are no foreseeable risks to the participants.

BENEFITS: There will not be any direct benefits to the participants.

CONTACT: If you have any questions about this study, please feel free to contact Dr. Janet Chang at 909-537-5184.

RESULTS: Please contact Dr. Janet Chang (email: jchang@csusb.edu) or the Pfau Library at California State University, San Bernardino after December 2016.

This is to certify that I read the above and I am 18 years or older.

_____   _____
Place an X mark here   Date

909.537.5501
5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

The California State University • Bakersfield • Channel Islands • Chico • Dominguez Hills • East Bay • Fresno • Fullerton • Humboldt • Long Beach • Los Angeles • Maritime Academy • Monterey Bay • Northridge • Pomona • Sacramento • San Bernardino • San Diego • San Francisco • San Jose • San Luis Obispo • San Marcos • Sonoma • Stanislaus

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ASSIGNED RESPONSIBILITIES PAGE

This research study was conducted as a two person project. Each person was assigned certain sections of the paper. The responsibilities were assigned as the following:

1. Data Collection:

    Done by: LaKenya Jones & Sneshia Stribling

2. Data Entry and Analysis

    Done by: LaKenya Jones & Sneshia Stribling

3. Writing Report and Presentation of Findings:

a. Introduction and Literature

    Done by: LaKenya Jones & Sneshia Stribling

b. Methods

    Done by: LaKenya Jones & Sneshia Stribling

c. Results

    Done by: LaKenya Jones & Sneshia Stribling

d. Discussion

    Done by: LaKenya Jones & Sneshia Stribling