

Complexities Related to Aging Out of Foster Care:
Life Skills, Self-Sufficiency and Trust

by

Elizabeth A. van Rensburg, M.Ed.

A Dissertation

In

COUNSELOR EDUCATION

Submitted to the Graduate Faculty
of Texas Tech University in
Partial Fulfillment of
the Requirements for
the Degree of

DOCTOR OF PHILOSOPHY

Approved

Dr. Hansel Burley
Chairperson

Dr. Mellinee K. Lesley
Co-Chair

Dr. Sally McMillan
Member

Peggy Gordon Miller
Dean of the Graduate School

August 2011

Copyright 2011, Elizabeth A. van Rensburg

Acknowledgments

This degree is one of many milestones I have achieved throughout my life. This process has been the most rewarding experience and without the help of my family, friends, and committee, I would not have been able to accomplish this goal. I want to thank my committee, Dr. Hansel Burley, Dr. Mellinee Lesley and Dr. Sally McMillan, for their constant guidance, support, and encouragement. I want to thank Dr. Shaun Keel for her support, knowledge and expertise she shared with me throughout this process. I want to thank the four young men and women who shared their stories in hopes that others may have a deeper understanding of their lives transitioning out of foster care. My wonderful mother has been my anchor in my life. She has imparted her wisdom, values and morals to me and for that, I am eternally grateful. She is a wonderful role model and has guided me to become who I am. I want to thank her for instilling in me the value of education and her lifelong support, encouragement, and love. My special gratitude to my greatest friend and colleague, Dr. Loralyn Lacey, for her friendship, assistance, direction, encouragement, and words of wisdom during this process. I want to thank Kristin Morgan for her enthusiastic support, great friendship and her good humor. I want to thank Kristin Hunsaker for her unyielding encouragement and steadfast friendship. I want to thank all my family and family friends for all their love and support. Finally yet importantly, my loving husband, Leon, of 24 years has been my rock during this process. I want to thank him for his love, taking excellent care of me, making me laugh, and for his constant encouragement and support, not just during this process, but also throughout our marriage. Ek sal jou liefhê vir ewig en altyd!

Table of Contents

Acknowledgments	ii
Abstract	viii
Chapter I. Introduction	1
Statement of the Problem	2
Societal consequences	4
Psychological consequences	4
Behavioral consequences	6
Physical consequences	7
Problems in Foster Care	8
Multiple losses	8
Multiple placements	8
Multiple years	10
Aging out of foster care	11
Purpose of the Study	11
Significance of the Study	12
Research Questions	14
Presuppositions	15
Limitations	16
Theoretical Framework	16
Attachment Theory	16

Theory of Psychosocial Development	21
Theory of Resilience	22
Definition of Terms	24
Summary	26
Chapter II. Review of Related Literature	27
History of Child Maltreatment	27
Variations in the Definition of Maltreatment	28
History of Federal Legislation	31
Child Welfare	38
Temporary and Permanent Child Placement Services	40
Programs Offered to Older Youth	42
Independent Living Programs	43
Preparation for Adult Living (PAL) Programs	44
Extended Care Program	45
Return to Care Program	45
Additional Programs and Resources	45
Transitioning to Independent Living	46
Views of Current and Former Children in Foster Care	49
Summary	52
Chapter III. Research Design and Methods	54

Brief Reiteration of the Problem Statement	54
Introduction to Phenomenological Research	55
Research Design	57
Context of Study	58
Participants	59
Noli	59
Becca	60
Jacob	60
Raymond	60
Data Collection Methods	61
In-Depth Phenomenological Interviews	61
Digital recording interviews	63
Three interview series	63
Interview one: Focused life history	64
Interview two: The details of the experience	64
Interview three: Reflection on the meaning	64
Structure of interviews	65
Length of interviews	65
Spacing of interviews	66
Trustworthiness and In-depth Phenomenological Interviewing	66

Role of Researcher	67
Trustworthiness in Qualitative Research	69
Criteria of Soundness	71
Credibility	71
Transferability	72
Dependability	73
Confirmability	73
Data Analysis	74
Transcribing the Interviews	74
Reducing the text	74
Narrative Profiles	75
Summary	76
Chapter IV. Findings: The Complex Process of Transitioning out of Foster Care	78
Open and Axial Codes	78
Selective Codes and Findings	78
Narrative Profiles	79
Narrative Profile of Noli	79
Narrative Profile of Becca	86
Narrative Profile of Jacob	92
Narrative Profile of Raymond	95

Summary of Findings	102
Chapter V. Discussion and Implications	104
Foster Care Perceptions and Experiences	105
Perceptions of Living in Foster Care	105
Experiences Transitioning Out of Foster Care	107
Acquiring Skills for Independent Living	108
Emotional Attachments	111
Implications of the Study	112
Implications for Research	112
Implications for Counseling	113
Implications for Foster Care	113
Conclusion	114
References	116
Appendix A - Recruitment Advertisement	133
Appendix B - Interview Focus and Guiding Questions for Interviews	134
Appendix C - Informed Consent for Participation in Research Study	135
Appendix D - Release Form to Digitally Record Interviews	136
Appendix E - Participant Interviews and Protocol	137
Appendix F - Open Codes, Axial Codes and Selective Codes	167
Appendix G - Institutional Review Board Letter	168

Abstract

Every year approximately 30,000 young adults age out of the foster care system. For over 25 years, there has been an abundance of research that has focused on the challenges of preparing foster youth for independent living. Former foster youths are not prepared adequately for self-sufficiency upon aging out of foster care. This study uses phenomenological interviews from four former foster youth to elicit their perceptions about aging out of foster care.

The interviews were designed to investigate the following research questions: what are former foster youths' experiences leaving foster care; what are their perceptions of how the system has or has not prepared them for independent living; and what are their perceptions of how the foster care system has or has not shaped their ability to form healthy attachments? Participants were young adults between the ages of 18-29 who had lived in foster care for a minimum of five years and who aged out of the foster care system. Interviews were digitally recorded and then transcribed using Microsoft Word 2007 and RCA digital voice manager.

Analysis of the data revealed four findings that are supported by prior research. The participants in this study felt they did not learn the majority of independent living skills in a formal setting and the process of transitioning out of foster care was abrupt and difficult. They were able to form trusting relationships and they felt that despite all the difficulties they faced in foster care they had a better advantage growing up in foster care than they would have had with their biological families, which placed them on a different path in life. Implications for future research, counseling and the foster care system are discussed.

Chapter I

Introduction

Madison experienced severe abuse and neglect as a child. A few months before Madison's fifth birthday, her father died in an automobile accident and her mother turned to drugs and alcohol to cope with his death. Child Protective Services (CPS) became involved when one of her mother's boyfriends sexually abused Madison when she was eight. She was removed from her mother, placed in foster care, where she lived for 10 years and experienced nine different placements. Madison had difficulty making and maintaining friends at school and trusting adults, especially men. She also struggled with academics, complained about going to school and was disruptive in most of her classes.

Madison attended classes to prepare her for independent living. Unfortunately, like many others, she did not see the value of the information being taught and found it boring. She often daydreamed and was oblivious to what was said during classes.

The summer before her senior year of high school, she was placed into a single, female parent foster home. This was her ninth and final foster placement before she aged out of care. Madison was the only child in the foster home. Fortunately, she connected with the foster mother, felt safe, and developed a trusting relationship with her.

The foster mother took an interest in Madison and taught her how to do chores in the home, and helped her with homework, which contributed to her graduating high school. Madison started working at a drug store stocking shelves and worked her way up to cashier.

Madison chose to stay in foster care, at her current placement, until she moved into the dorms to attend her first semester of college. She contacted her birth mother and discovered that her mother's situation was worse and she was continuing to use drugs and drink. She was very hurt and disappointed by this, but chose to move forward with her life. Madison remained close to her last foster mother and they spent lots of time together, including holidays, and often went places together.

Madison finished two years at a local junior college and then transferred to a neighboring university. She moved into her own apartment with a roommate from work. She continued working as a cashier, completed her bachelor's degree in business, advanced to manager in her job and eventually bought her own home.

Although Madison is a fictional character, her story represents real life events that former foster youth can experience. Unlike Madison, many former foster youth are ill prepared for independent living and struggle being self-sufficient when they age out of foster care. Adequately preparing young adults for independent living has been a major challenge that has overwhelmed the child welfare system for decades.

Statement of the Problem

As of September 30, 2009, the latest date for which information is available, there were approximately 423,733 children in foster care. For the same fiscal year approximately 255,418 children entered foster care and 276,266 children exited foster care. Of the children who exited care, approximately 29,471 young adults aged out of care while 140,061 were reunified with their primary caregivers (U.S. Department of Health and Human Services, 2010). The main reason children enter the foster care

system is due to safety reasons related to some form of child maltreatment (Golonka, 2010).

Child maltreatment is a worldwide problem that is a serious concern (U.S. Department of Health and Human Services, 2008). Children who experience child maltreatment have higher occurrences of post-traumatic stress disorder (PTSD), have an increased chance for comorbid mental illness (De Bellis & Thomas, 2003; Hagele, 2005), and dysfunctional interpersonal relationships in adulthood (Hagele, 2005). They also are twice as likely to become a victim of sexual assaults, experience higher rates of domestic violence, and are approximately four times as likely to inflict self-harm (Noll, Horowitz, Bonanno, Trickett, & Putnam, 2003).

Child maltreatment has been a recognized societal problem since the highly publicized Mary Ellen case in 1874 (Watkins, 1990). Child maltreatment appears in diverse groups, and in fact, does not discriminate across race, ethnicity, religion, socio-economic status, or gender. In 2007, according to the United Nations International Children's Emergency Fund, approximately 300 million children worldwide experienced abuse, violence and exploitation. There are serious long-term damages caused by abuse and neglect of children (UNICEF, 2007).

Contemporary agencies categorize outcomes of abuse and neglect into four areas of consequences. They are societal, psychological, behavioral, and physical. These consequences are distinct, but cannot be completely separated from one another. For example, physical consequences, such as damage to the brain from abuse and neglect, can have psychological implications such as cognitive delays. Psychological problems, such

as depression or anxiety, can increase an individual's chances of using illegal drugs and alcohol. In turn, these high-risk behaviors can sometimes lead to physical health problems such as obesity or sexually transmitted diseases (Child Welfare Information Gateway, 2008b). Engaging with this problem requires solutions for each area.

Societal consequences. Societal costs are both direct and indirect. Examples of direct costs include maintaining the child welfare system so that reports of abuse and neglect can be investigated, as well as monies spent by various systems, including law enforcement and mental and physical health care, and judicial processes. Indirect costs are associated with the long-term economic expenses of criminal activity, substance abuse, domestic violence, mental illness, special education, and loss of productivity (Child Welfare Information Gateway, 2008b). The annual cost of child abuse and neglect for 2007 was obtained from a number of resources and was estimated to be \$103.8 billion, in the United States (Wang & Holton, 2007). Impact and scope are ongoing in every community affected by individuals damaged by these experiences.

Psychological consequences. The psychological damages of child abuse and neglect (learning problems, speech disorders, developmental delays, fear, failure to trust, and separation) can last into adulthood. Damages manifest themselves psychologically as depression, anxiety, dissociation, eating disorders, low self-esteem, and difficulty in forming attachments, lasting friendships or intimate relationships as adults (Child Welfare Information Gateway, 2008b; Ellis, Dulmus, & Wodarski, 2003; Geiser & Malinowski, 1978; Goldman, Salus, Wolcott, & Kennedy, 2003; Teicher, Samson, Polcari, & McGreenery, 2006).

Even children as young as 3 years old, who suffered some form of abuse, exhibited signs of depression and were withdrawn (Dubowitz, Papas, Black, & Starr, 2002). Adolescents, who were emotionally neglected prior to age two, showed increased signs of aggression, social problems, delinquency and suicide attempts when compared to other maltreatment groups and controls (Egeland, 1997). In a 17-year longitudinal study, involving 375 participants consisting of young adults who had been abused, Silverman, Reinherz, and Giaconia (1996) reported that by the age of 21, approximately 80% of the abused young adults met the diagnostic criteria for at least one psychiatric disorder. These young adults exhibited more anxiety, emotional-behavioral problems, suicidal ideation, and suicidal attempts and all of these can be concurrent with increased symptoms of depression.

The Silverman et al. (1996) study was supported by another 17-year longitudinal study conducted by Brown, Cohen, Johnson, and Smailes (1999). They followed 639 maltreated individuals from childhood to adulthood. They concluded that individuals with a history of child maltreatment are three times more likely to become depressed or suicidal when compared with individuals who do not have a history of child maltreatment.

Additional emotional and psychological disorders linked to childhood abuse and neglect consist of panic disorder, attention-deficit/hyperactivity disorder, dissociative disorders, reactive attachment disorder, and posttraumatic stress disorder (De Bellis & Thomas, 2003; Springer, Sheridan, Kuo, & Carnes, 2007; Teicher, 2000). Such psychological consequences are not limited in scope to affective states or internal

turmoil, but have profound consequences on the lives of abuse victims and their associates.

Behavioral consequences. Many adolescents who experienced abuse and neglect experience behavioral consequences into adulthood (Stirling & Amaya-Jackson, 2008) that impact their careers, families and civic life. Young adults with a history of childhood sexual and physical abuse, as well as neglect and separation from their caregivers experience higher rates of suicide attempts and cutting (van der Kolk, Perry, & Herman, 1991). A study conducted by the National Institute of Justice reported that adolescents who were abused and neglected were 25 percent more likely to use drugs, have mental health problems, make lower grades in school, become pregnant and be delinquent (Kelley, Thornberry, & Smith, 1997). Further, they were more likely to engage in sexual risk-taking behaviors that could have increased their chances of acquiring a sexually transmitted disease (Johnson, Rew, & Sternglanz, 2006) and were more likely to abuse alcohol and drugs, and smoke cigarettes at some point in their lives (Dube, Anda, Felitti, Chapman, Williamson, & Giles, 2001; Stirling & Amaya-Jackson, 2008). Childhood sexual abuse is linked to an elevated likelihood of abusing one's own children (DiLillo, Tremblay, & Peterson, 2000). It is estimated that one-third of adolescents, who were abused and neglected, will become abusive parents (Prevent Child Abuse New York, 2003), and have higher tendencies for delinquency, interpersonal problems, anger-hostility, limbic irritability, physical aggression and violence towards others (Stirling & Amaya-Jackson, 2008; Teicher, Samson, Polcari, & McGreenery, 2006; Vissing, Straus, Gelles, & Harrop, 1991). Two-thirds of adults, who were in

programs for treatment of drug abuse, reported that they had been abused as children (Swan, 1998). Even more significant than the scope of these consequences is their severity. Even victims who do not experience such severe behavioral consequences are likely to experience a range of behaviors and problems not reflected in these statistics.

Physical consequences. The effects of physical abuse can range from minor cuts and bruising to broken bones to the most severe – death (Child Welfare Information Gateway, 2008b). There are cases in which abuse and neglect prevents specific regions of the brain from developing correctly (De Bellis & Thomas, 2003; Stirling & Amaya-Jackson, 2008). This in turn can cause long-term impairment in language development, (Stock & Fisher, 2006), cognitive development (Teicher, 2000), and delays in academic abilities (Jackson, 1994). Adults, who suffered abuse or neglect when they were children, have an increased risk of having high blood pressure, arthritis, allergies, asthma, bronchitis, and ulcers (Springer, Sheridan, Kuo, & Carnes, 2007). Other physical symptoms include suicide, impulsivity, hyperactivity, somatic complaints, dissociation, and hyperarousal (Berliner & Elliott, 1996; Kolka, 1996). Depending on the severity, children who have experienced maltreatment can face enduring consequences. The psychological, behavioral, and physical functioning of children can be negatively affected by maltreatment. Although foster care was designed to serve as an intervention for child maltreatment unfortunately, once maltreated children enter the foster care system they often face even greater struggles.

Problems in Foster Care

Multiple losses. Children entering foster care are separated from their parents, their siblings, extended family members, and family friends. These children lose contact with their school friends as they are moved to new neighborhoods or cities, and attend new schools. Because cases of child maltreatment are tantamount to a crisis, sometimes when CPS removes children from their caregivers they do not have an opportunity to pack clothes, favorite toys, or take anything with them that is special. As such, what is meant to be “protection” often feels like isolation or punishment. Children entering foster care often have a difficult time dealing with all the losses they face at the time of removal from their home. Experiencing multiple losses in a short amount of time can have a damaging impact on a child’s ability to trust and form a new positive, healthy attachment to their new caregivers (English, et al., 2005; English, Widom, & Brandford, 2004; Harden, 2000; Howe, Brandon, Hinings, & Schofield, 1999; Unrau, Seita, & Putney, 2008; Westat, Inc., 1986).

Multiple placements. Children also experience numerous losses when they have multiple placements within the foster care system. Children entering the foster care system are often characterized by their experiences of abuse and neglect. They may have witnessed domestic violence, been subjected to impaired or inadequate care giving that resulted from substance abuse, disabilities or mental illness. Most often, the abuse and neglect causes emotional, behavioral, and physical problems for these children. Feelings of depression, loneliness, abandonment, helplessness, hopelessness, isolation, and increased anxiety are widespread for children when they are removed from their families

and the environment with which they were familiar (Ellis, Dulmus, & Wodarski, 2003; Garbarino, 1987; Webster, Barth, & Needell, 2000). These feelings can sometimes be overwhelming for children who have not developed adequate coping skills. Inadequate coping skills often lead to externalizing behaviors (Keil & Price, 2006), which is the primary predictor of changes in placement for these children. Behaviors that are most likely to cause a placement change for children in care are aggression, disobedience, and harming other children in foster care (Newton, Litrownik, & Landsverk, 2000). Children placed in foster homes were more prone to disrupt their placements than children who were placed with their relatives. Out of 30 problem behaviors identified, the non-relative caregivers could only tolerate six or fewer of these externalizing behaviors. Some of the problem behaviors that were identified as non-tolerable included stealing, swearing, lying, fighting, arguing, and back talking (Chamberlain, Price, Reid, Landsverk, Fisher, & Stoolmiller, 2006). Multiple placements in care were linked to increased chances of being arrested, incarcerated, homeless, experiencing domestic violence, and higher rates of pregnancy (Reilly, 2003). Children experience another sense of loss, each time they move to a new placement within the foster care system. Multiple placements make it difficult for children in foster care to trust or form any type of bond or attachment with individuals who provide care for them (Keil & Price, 2006; Unrau, Seita, & Putney, 2008). Multiple placements, in the first year of care, is associated with higher mental health costs especially among children with escalating general health care costs (Rubin, Alessandrini, Feudtner, Mandell, Localio, & Hadley, 2004). Preschool aged children who are in foster care struggle with various risks associated with poor outcomes. Risks

increase with each placement move and these young children present the most difficult, demanding behaviors. They have the most difficulty developing attachments with their new caregivers.

Young preschoolers who participated in Early Intervention Foster Care program (EIFC) experienced an increase in permanent placements than preschoolers who were not in the program. Some of the EIFC program benefits included extra training to foster parents along with support and consultation, counseling for the children, limit setting, and close supervision of the children (Fisher, Burraston, & Pears, 2005). Multiple placements increase the number of losses children may face while they are in foster care that can interfere with their ability to trust and form bonds with new caregivers. Living in foster care for numerous years presents children with adversities only they face.

Multiple years. Children who remain in foster care for many years face their own set of challenges. They are more likely to perform poorly in school (Bass, Shields, & Behrman, 2004; Colton & Heath, 1994; Zuravin, Benedict, & Stallings, 1999) attempt suicide (Dube, Anda, Felitti, Chapman, Williamson, & Giles, 2001), be unable to support themselves and have many behavioral, physical, or mental health problems (Landsverk, Burns, Stambaugh, & Rolls Reutz, 2009; Rubin, Alessandrini, Feudtner, Mandell, Localio, & Hadley, 2004). They are also at a greater risk for criminal behavior (Bass, Shields, & Behrman, 2004) and/or drug and alcohol related issues (Bass, Shields, & Behrman, 2004; Zuravin, Benedict, & Stallings, 1999). Children who experienced longer placements in foster care typically had injuries, illnesses, or developmental delays or experienced sexual abuse (Benedict & White, 1991). The challenges become greater

when the children remain in foster care and transition out of the foster care system when they become adults (Bass, Shields, & Behrman, 2004). The life experiences of these young adults place them at a higher risk, when leaving foster care, for encountering homelessness (Toro, Dworsky, & Fowler, 2007), health issues, income below the poverty level, lack of health insurance, unemployment, inadequate educational outcomes, and involvement with the criminal justice system (Courtney & Dworsky, 2006; McMillen & Tucker, 1999; Pecora, et al., 2006; Reilly, 2003; Torrico, 2004; United States General Accounting Office, 1999).

Aging out of foster care. Young adults, who have spent multiple years in the foster care system, endure two concurrent transitions when aging out. The first transition is a physical move from living within the foster care system to living outside the system. The second move is a chronological moment that requires reaching the age of majority (Courtney & Barth, 1996; Goodkind, Schelbe, & Shook, 2011). While the period of emerging adulthood, between the ages of 18 and 25 (Arnett J. J., 2000) is a period where most parents do not expect their children to become independent adults until around age 23 (Shirk & Strangler, 2004), youth who age out of foster care must quickly develop an adult independence by age 18. Even though transitional services are provided, most foster youth struggle with this transition.

Purpose of the Study

The purpose of this study was to review research that reports challenges adults faced when they transitioned out of the foster care system. To gain a deeper insight into these challenges, this study focused on in-depth phenomenological interviews conducted

with four young adults who lived in the foster care system for five or more years and transitioned out of the system. In-depth phenomenological interviews assisted in determining the participants' perceptions of their challenges and experiences while transitioning to independent living and how they make sense of their present lives in the context of their life experiences.

Significance of the Study

This study is significant because it has the potential to provide meaningful information to policy and lawmakers, program developers as well as the child welfare system. These findings could assist these groups in the further development and implementation of programs that could potentially increase future foster youths' opportunity for success in the transition to independent living and self-sufficiency, which would reduce the negative outcomes that **have** plagued this population in prior years.

In the United States, there were approximately 423,773 children in foster care for the fiscal year (FY) ending September 30, 2009 and approximately 12.78% (54,412) were ages 17 – 20 years. The number of children who had been in care for five years or more was estimated to be a little over 48,000. There were roughly 276,266 children that exited foster care with approximately 29,471 aging out of care (U.S. Department of Health and Human Services, 2010).

For fiscal year ending September 30, 2008 approximately, 463,000 children in the United States were in foster care with close to 60,000 between the ages of 17 and 20. The total number of children who exited foster care was approximately 285,000 with approximately 29,516 exiting care due to emancipation (U.S. Department of Health and

Human Services, 2009b). These numbers reveal the prevalence of children in the foster care system in the U.S.

The latest figure, for the total cost of child abuse and neglect in the United States, is from 2007. At that time, it was conservatively estimated to be \$103.8 billion. This figure does not include costs associated with intervention or treatment of the perpetrators or members of the child's family. These costs do not include outpatient medical treatment for injuries that were not serious enough to warrant hospitalization of the child (Wang & Holton, 2007).

Becker, Jordon, and Larsen (2006) examined the cost of behavioral health services for children in foster care in Florida with children who were not in foster care and only receiving Aid to Families of Dependent Children (AFDC) assistance. The study found the behavioral health costs for children in foster care were more than eight times higher than for children not in care and receiving AFDC assistance. The reasons for this are due to maltreating families needing more family counseling and the serious mental health diagnoses of the children who experienced the maltreatment. For the children in foster care the average cost per month was \$210 per child whereas for children not in care was \$26 per month.

The existing data on child abuse and neglect and its associated costs are astounding. Over decades, millions of children have been maltreated at the hands of their caregivers. These disadvantaged children will face even more hardships as adults. Their lack of education will make it more difficult for them to be employed resulting in a larger number of individuals living in poverty or being homeless. Society will pay for the costs

of childhood neglect and abuse for many generations to come. Thus, the effectiveness of the foster care system is critical. Additional research about improving services for older youth in foster care is necessary from the individuals who have experienced it, so that laws and programs can be developed to reduce this worldwide problem more effectively.

Research Questions

Courtney, Dworsky, Lee and Raap (2009) interviewed 602 young adults, ages 23 and 24, who aged out of the child welfare system and found that they were not as self-sufficient as young adults who were not involved with the system. Areas studied were postsecondary education, employment, housing stability, receipt of public assistance and involvement with the criminal justice system.

Research has examined the transition of youth from foster care to independent living. The findings of these studies do not vary significantly. They consistently discover that not only do youth experience struggles across a range of domains, but they are ill prepared to be self-sufficient young adults living on their own (Arnett J. J., 2001; Barth, 1990; Courtney M. E., Dworsky, Lee, & Raap, 2009; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Festinger, 1983; Goodkind, Schelbe, & Shook, 2011; McMillen, Rideout, Fisher, & Tucker, 1997; Reilly, 2003; Wertheimer, 2002). Most of the literature focuses on the negative outcomes for former foster youth rather than how the successful transitions to independent living sometimes occur (Merdinger, Hines, Osterling, & Wyatt, 2005).

Courtney and Barth (1996) reported that there is “little known about outcomes for children who emancipate from foster care . . . even less is known about the foster care

experiences of youth who emancipate from foster care” (p. 76). Current research does not fully distinguish differences between youth emancipating from foster care or by other methods. Courtney and Barth concluded that if services for youth, who are emancipating from care, are to be improved then a better understanding is needed of what the experiences and perceptions are of youths who have exited the system.

Few researchers have actually interviewed young adults directly about their experiences in foster care. These individuals have a direct involvement with foster care and have the greatest amount of expertise in this area. Their involvement could help improve the services delivered to future children in care (Curran & Pecora, 1999). These gaps in the literature will help guide this study to explore the following research questions.

What are the perceptions of adults, between the ages of 18 and 29, who lived in foster care for a minimum of five years and who have transitioned from the foster care system to independent living, regarding:

1. their experiences leaving foster care?
2. how the foster care system has, or has not prepared them for independent living?
3. how growing up in foster care has or has not shaped their ability to form trusted relationships?

Presuppositions

This study assumes that all the participants were placed in foster care due to abuse or neglect by their caregivers and have transitioned from foster care to independent

living. This study also assumes that all the participants had equal opportunities to the same services offered by the child welfare system. This study was dependent on the description of the participants' experiences of transitioning out of foster care. Therefore, it was assumed that the participants remembered specific and descriptive stories from their lives while transitioning to independent living and have fundamental expertise on the phenomenon of transitioning out of the foster care system.

Limitations

A limitation in phenomenological research is that generalizations cannot be made outside of the population on which the study is centered. The nature of phenomenological research is to permit the reader to gain an enhanced understanding and a deeper insight of individuals (Lincoln & Guba, 1985; van Manen, 1990) who are involved in that particular study. This study offers a deeper insight and better understanding of individuals between the ages of 18 and 24, who in the foster care system for five years or over, and transitioned to independent living.

Theoretical Framework

Attachment theory. John Bowlby (1969; 1973; 1980) believed that the experiences that occur between an infant and parent shape the child's perceptions of him or herself, perceptions others and the perceptions of relationships. These perceptions, which develop in infancy, assist the child throughout their life to interpret the world and serve as the foundation for emotional and social development.

According to Howe, Brandon, Hinings and Schofield (1999) *attachment theory* is a theory of personality development. This theory focuses on the interaction between

growing and developing infants through their life and their social environment, caregivers, families, and other people. These interactions are believed to have influences on children's emotional and social welfare. If children can comprehend and interact in their social world without unnecessary emotional stress, then the children are securely attached. Securely attached children can use their feelings, attention, perceptions, and cognitions to navigate through the unpredictable world. Conversely, children who are not securely attached will deny or distort their feelings, cognitions, and perceptions, and will focus attention in various ways that hinder their development.

Ainsworth, Blehar, Waters, and Wall (as cited in Mennen & O'Keefe, 2005) performed further research in Bowlby's theory. They identified three attachment styles using an experiment by Ainsworth, known as the 'strange situation' as the basis for their classifications. This experiment involved examining the infants' behavior when reunited with their caregivers after a short separation. A securely attached child forms internal working models of their caregivers as accepting, nurturing, and responsive. The child views the caregiver available to help when they are in a stressful situation. These children were comforted easily by their caregiver, generally cooperative in relationships, and explored new situations. Children who displayed both hostile and dependent responses to their caregivers have developed anxious/ambivalent attachments. The internal working model of children with this attachment style views their caregiver as unreliable and insensitive. The child views the caregiver as inconsistently responsive when they are distressed. These children seldom play alone, are constantly aware of their caregiver's location, and are usually clingy. These children cry because they want their

caregiver to hold them; however, after being picked up they fight to climb down. A caregiver that is inconsistent or threatens abandonment in an effort to control the child fosters this type of attachment. Children with anxious/avoidant attachments do not trust their caregiver to meet their needs. Their caregiver minimizes or rejects the feelings of the child due to their own distress. As the child becomes more distressed, the caregiver becomes more withdrawn. Children view their caregiver as unresponsive, rejecting, and controlling. Children learn to suppress or falsify their feelings in order to stay in close proximity to their caregiver.

The fourth pattern of attachment was discovered by Main and Solomon (1986), which they identified as insecure-disorganized/disoriented. They replicated Ainsworth and her colleagues' study and found a pattern of attachment that was not consistent with the three other attachment styles. Children with this pattern of attachment exhibit a mixture of avoidance, angry approach responses, and behavioral disorientation. This occurs when the caregiver has scared the child, which causes the child to view the caregiver as frightening. This causes a dilemma for the child because the caregiver frightens the child, which then causes the child to become distressed. The distressed child needs to be comforted, but the caregiver is the source of the fear and distress. As the child moves closer to the caregiver, the child becomes more anxious. The child's source of security is also the source of distress. Children with insecure-disorganized/disoriented attachments do not have a strategy to cope with the sense of fear and helplessness they feel. Numerous researchers have explored attachment theory in relation to child maltreatment (Main & Solomon, 1986; 1990).

Evidence exists that maltreated children are at a higher risk for developing insecure attachment patterns, which are anxious/avoidant, anxious/ambivalent, or disorganized attachments. A meta-analysis conducted by Morton and Browne (1998) reviewed 13 studies that examined the attributes of attachment in infants that were maltreated. Of the 13 studies reviewed, 11 of them found that maltreated infants exhibited insecure attachment when compared with children who were not maltreated.

Research on abused and neglected children has confirmed a large number of the theoretical propositions of attachment theory. For example, children who have experienced maltreatment by their parents have a negative view of self, others, and the world. This negative view shapes their relationships throughout their lives (Gara, Rosenberg, & Herzog, 1996; Howe, Brandon, Hinings, & Schofield, 1999; Levy & Orlans, 1998; Mennen & O'Keefe, 2005; Orlans & Levy, 2006).

Many different researchers (Gara, Rosenberg, & Herzog, 1996; Mennen & O'Keefe, 2005; Morton & Browne, 1998) have proposed that the attachment relationship may provide insight on the issue of intergenerational child abuse. Maltreated children form an image of their parent as unresponsive, rejecting, and unavailable. This image serves as the model for future relationships which makes it difficult for the adult, who was abused as a child, to form secure relationships with their children. This situation increases the risk for intergenerational transmission of child maltreatment. Children who have experienced maltreatment and have separation and loss issues have decreased levels of trust for others.

Children enter foster care with a diminished sense of trust and independence. Issues of separation include not only mourning the loss of their families, but in addition, the children experience a perceived threat to their survival. “The child’s compromised developmental adaptation is threatened further by the traumatic separation from and loss of the primary caregiver entailed by foster placement” (Kates, Johnson, Rader, & Strieder, 1991, p. 584).

Establishing trust for children who are in foster care is a difficult challenge. Children who enter foster care are inundated with never-ending feelings of unworthiness, hopelessness, failure, and have very low self-esteem. Many children in foster care struggle to relate emotionally to others, which often leads to the development of superficial relationships. They are fearful of attaching to anyone because of all the loss and separations that have happened to them in the past. Children in foster care have been hurt, let down, and abandoned by adults, which makes it difficult for them to believe that any adult would be truly interested in their well-being – emotional or physical. Due to the substandard treatment children could receive in care, additional struggles may be created for them by the long-term, unexpected upbringing outside of their family. Children in foster care who have experienced maltreatment have a need to recreate and act out all the traumas they have experienced in the past. They constantly set up situations where they are the object of adults’ anger, will be rejected by others, sent away, and possibly even further abused (Geiser & Malinowski, 1978). When children set up these situations and their caregivers validate their negative feelings, establishing trust with their caregivers becomes a difficult task for the child.

Theory of psychosocial development. The first goal of Erik Erikson's theory of psychosocial development is achievement of trust (Erikson, 1950) which is attained from birth to 18 months. Acquiring trust is achieved by positive interactions with caregivers and is the first major developmental milestone of infants. Often maltreated children are unable to reach this first goal because they have lived in neglectful or violent homes (Terr, et al., 2006). Seven remaining psychosocial tasks follow in sequence, each related to a specific period over a lifetime. Toddlers will use their trust they achieved as an infant to explore their world and establish autonomy. Once this stage is achieved, the toddler will be ready for preschool in which they will develop a sense of initiative. The best outcome of the fourth stage of psychosocial development is competence. The age range of this stage is typically from six to 12. During this stage, the child is developing a sense of industry. By the time, the child reaches adolescence at age 13 they will enter the fifth stage and develop a sense of identity, which will set the foundation for interpersonal relationships. This foundation will allow the now young adult to form intimate relationships, and successfully complete the sixth stage, which could lead to parenthood. The seventh stage of psychosocial development is generativity. If this stage is completed successfully, the adult will be concerned with future generations and concern for the world in the future. Upon completion of this stage, the adult will move to the eighth and final stage of the development of integrity. This mature adult will look back on their life with perspective and satisfaction of the life they have lived. If these stages are not properly resolved during the appropriate age range, then a crisis will occur and

psychosocial development will cease. Partial resolution of a psychosocial stage of development will limit further development into the next stage (Erikson, 1950).

Ideally, completion of the psychosocial stages of development in succession will provide the individual with the optimal outcomes for that particular stage. This will allow individuals to progress without restraint into the next stage of development. The first stage of developing trust is by far the most important. If trust is not fully developed then the infant faces a crisis and develops mistrust. Without trust, the infant will have restricted development of future stages, which could lead to attachment disorders. For children who have experienced child maltreatment *and* foster care, their trust is constantly tested. When these young adults prepare to leave foster care and live on their own, trust is once again challenged.

Theory of resilience. Unlike attachment theory and the theory of psychosocial development, resilience is described as the ability of at-risk individuals to recover from adversity and cope with major life stressors. Some at-risk individuals succeed despite their devastating circumstances. At-risk individuals, who develop resiliency, understand what happened to them as well as others who have experienced similar adverse circumstances (Dent & Cameron, 2003).

Fraser, Richman, & Galinsky (1999), define resilience as a “successful adaptational response to high risk” and “to be resilient, one must be exposed to risk and then respond successfully” (p. 137). If an individual does not experience risk, then he or she is not resilient. The ability to communicate, plan, problem solve and cope are underlying elements of resilience.

Werner & Smith (1982) portrayed a resilient child as one who usually has four characteristics, which include autonomy, a sense of purpose, problem-solving skills and social competence. In other words, a resilient child knows who they are, functions independently apart from dysfunction, has goals and has the ability to think abstractly to solve their problems. Growing up, their environment was supportive, caring, and provided expectations and opportunities to participate in activities, which built character and taught life skills.

Hass & Graydon's (2009) findings were very similar to Werner & Smith's (1982) definition of a resilient child. They surveyed 44 young adults who were removed from their parents as young children. They answered questions regarding resources, both external and internal, that helped them overcome adversities and achieve academic success. Academic success was defined as completing a post-secondary educational program or a minimum of two years in a four-year institution. The factors that assisted these youth in their academic achievement were social support, goals, taking part in activities, and having a sense of proficiency.

Fonagy, Steele, Steele, Higgitt, & Target (1994) summarize predictors of resilience to include qualities related to the individual, which are internal and external. Qualities within the child consisted of having an easy temperament, a positive self-image, social skills and a higher acquisition of knowledge. Qualities in the child's environment, which are predictors of resilience, consist of the caregivers' responsibility, education, and socio-economic status, the amount of social support, and school factors.

The theoretical framework, which I chose to address the questions asked in this research, include attachment, psychosocial development and resiliency. These three theories are profoundly ingrained in the literature on child maltreatment, children at-risk, and foster care. These theories are interconnected. Attachment theory and psychosocial development are connected by the development of trust or lack thereof. Former foster youth can experience disrupted attachments causing a diminished sense of trust. They also meet the criteria of resilience set forth by Fraser, Richman, & Galinsky (1999) because they have encountered some form of adversity and many have successfully responded it, allowing them to develop trust, and overcome and cope with major life stressors.

Definition of Terms

AFDC. Acronym for Aid to Families with Dependent Children. AFDC is a federal assistance program that was replaced by Temporary Assistance for Needy Families (TANF) in 1996 (Princeton University, 2004).

Aged Out/Ageing Out. A term used when referring to an individual who has left the foster care system due to turning 18 years of age or graduating from high school (Bass, Shields, & Behrman, 2004).

Child Abuse. “Willful behavior by parents or guardians that harms a child in their care” (Garbarino, 1987, p. 3).

Child Neglect. “Omissions in care resulting in significant harm or the risk of significant harm to children” (Dubowitz, 2000a, p. 10).

CPS. Child Protective Services. This is a state agency that is responsible for investigating reports of child abuse and neglect (Princeton University, 2004).

Emotional Abuse. This “occurs when a child is harshly and repeatedly criticized, blamed, or made to feel guilty (Ellis, Dulmus, & Wodarski, 2003, p. 24).

Externalizing Behaviors. “Problematic behaviors typically associated with both conduct disorder (CD) and oppositional defiant disorder (ODD) (Keil & Price, 2006).

Foster Care. “A residence in a supervised setting outside the biological family as mandated by the social services . . . system” (Kools, 1997, p. 263).

PAL Program. Acronym for Preparation for Adult Living program. Program began in 1986 to assist older youth in the care of the Texas Department of Family and Protective Services (TDFPS) while they transitioned from the system to independent living (Texas Department of Family and Protective Services, 1986).

Permanency. A term used by TDFPS to define living situations that are consistent and stable for children. It also includes children having continuity of family relationships and community relations (Shierman, 2003).

Permanency Goals. Consist of four prioritized options for the permanent placement of children who are in the care of the Texas Department of Family and Protective Services. These goals are family preservation, family reunification, and alternative family placement with long-term commitment consisting of adoption or permanent conservatorship, and another planned living arrangement with support of a family consisting of preparation for independent living or adult living with community

assistance if the youth has a developmental disability (Texas Department of Family and Protective Services, 2004b).

Physical Abuse. “An inflicted act that results in a significant physical injury or the risk of such injury” (Dubowitz, 2000b, p. 15).

Psychological Maltreatment. Includes isolating, terrorizing, spurning, exploitation, corrupting, and ignoring (Brassard & Hart, 2000; Hart, Brassard, & Karlson, 1996).

RTC. Acronym for Residential Treatment Center. They are institutions for children who need services or supervision on a 24-hour basis (Freundlich, 2003).

Summary

Child abuse and neglect is a worldwide challenge that has many pervasive consequences. Each year, in the United States, hundreds of thousands of children enter the foster care system. Societal consequences are calculated into billions of dollars. The greatest cost, abuse and neglect causes, is the irreparable harm to a child, which is incalculable. The physical and psychological damage a child endures are irreversible and often lingers into adulthood. This study provides a deeper understanding of adults who experienced living in foster care and transitioning out of the foster care system. Data were obtained via in-depth phenomenological interviews. The major purpose of the interviews was to obtain the participants’ perceptions of their lives while transitioning out of foster care system, their perceptions of how the foster care system did or did not prepare them for independent living, and their perceptions of how foster care had or had not shaped their ability to form trusted relationships.

Chapter II

Review of Related Literature

This section reviews the literature relevant to the history of child maltreatment, variations in the definitions of maltreatment, history of federal legislation, child welfare, temporary and permanent child placement services, programs offered to older youth, independent living, and views of children and former children in foster care.

History of Child Maltreatment

Historically, children were viewed as assets to a family by providing another laborer to help the family and a caretaker for their aging parents. Society expected children to begin work at a very early age to contribute to the economic welfare of the family. Since the early 20th century, children have been valued more emotionally than financially. As the role and value of children in family life has changed so has the definition of acceptable treatment for young people. The National Child Labor Committee began in 1904. Within the next ten years, almost every state had passed laws to end child labor (Gustavsson & Segal, 1994).

In 1874, the first highly publicized case of child abuse, involving a young girl named Mary Ellen, was presented in a New York court. A church worker, by the name of Etta Wheeler, who often visited homebound individuals, had received some complaints from them regarding a young girl who was not allowed to leave her home, was brutally whipped, and was often left alone. On one occasion, Mrs. Wheeler was visiting a dying woman who lived in the same apartment house as Mary Ellen. She pleaded with Mrs. Wheeler to help this young girl. Mrs. Wheeler contacted the police,

various charitable societies, and individuals in the community; however, none of them would help her. Eventually she contacted Mr. Bergh, the president of the New York Society for the Prevention of Cruelty to Animals (NYSPCA), simply because no similar agency existed to protect the rights of children. Mr. Bergh asked Mrs. Wheeler to write a statement about her concerns for Mary Ellen. The next day, after reviewing the statement, Mr. Bergh had an investigator for the NYSPCA pose as a census worker and go to the home of Mary Ellen to obtain additional information. Based on this investigation, Mr. Bergh and his attorney, Mr. Gerry, convinced Judge Lawrence to hear their case. Upon hearing the evidence, Judge Lawrence issued a special warrant to remove Mary Ellen from her abusive home. Mr. Bergh contacted the New York Times and asked that they cover the trial. Because of the public attention and the severity of the abuse, the New York Society for the Prevention of Cruelty to Children (NYSPCC) was formed in 1875 (Crosson-Tower, 2002; Gustavsson & Segal, 1994; Watkins, 1990). The formation of the NYSPCC prompted the swift development of other societies across the United States and other countries. Currently, these societies remain a force to protect children and families, and to help repair and restore healthy family relationships all over the world. Recognizing child maltreatment has proved to be the easy part of the solution while defining child maltreatment has proved to be more difficult.

Variations in the Definitions of Maltreatment

Definitions of child maltreatment vary among researchers, professionals, agency officials, and State and Federal legislative bodies. In spite of the differences between the agencies who define child maltreatment, there are similarities across definitions. The

majority of these definitions focus on the parent's objectionable actions or lack of actions toward a child. Standardizing definitions based on this focus is difficult. Laws regarding child abuse and neglect restrict the parents' rights by making it illegal for them to abuse or neglect their children. Defining child maltreatment will depend on the existing values and attitudes of the community relating to appropriate childcare. As a result, there are just about as many definitions of child maltreatment as there are professionals in the field of child welfare (Warger, Tewey, & Megivern, 1991). Some agreement has developed, however, on what constitutes acceptable and unacceptable punishment despite the vast array of definitions of child maltreatment generally.

With regard to child abuse and neglect, excessive use of physical punishment is commonly seen as the basic criteria for child maltreatment. There are, however, many different views on what specifically entails child maltreatment with regard to other criteria. The problem with defining child maltreatment has occurred because numerous groups and professions use the definitions for various purposes (Hutchinson, 1990; Lawson, 2009). A definition of child maltreatment that enables one agency to develop criteria for termination of parental rights would not, for instance, necessarily be appropriate for an agency dedicated to general statistics on how home life impacts school performance.

Since the inception of the Child Abuse Prevention and Treatment Act (CAPTA) in 1974, there has been an increase in scholarly and legal interest in child maltreatment. CAPTA required states to establish criteria for mandated reporting and gave states the

right to remove children from their homes if they were believed to be in danger. CAPTA defines child abuse and neglect as:

Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents imminent risk of serious harm (Children's Bureau, 2003).

CAPTA provides definitions for cases of sexual abuse and withholding or failing to provide necessary medical treatment, but not other forms of child maltreatment such as neglect, or physical or emotional abuse. Instead, each state is accountable for providing a definition of child maltreatment and not falling below the minimum standards set by federal legislation (Child Welfare Information Gateway, 2008a). Some researchers maintain that the lack of agreement in the definition of child maltreatment makes it difficult for child welfare agencies to investigate reports of abuse and neglect objectively.

It is often assumed that the consequences of emotional maltreatment are not as harsh as physical abuse, sexual abuse or physical neglect because there are no discernible indications. For children who experience this type of child maltreatment, it has destructive consequences for their development and functioning in many areas.

Emotional abuse is characterized by rejection, threats of abandonment, ridiculing, verbal hostility, and taunting. Parents who are detached, avoidant and unresponsive to needs and who are psychologically unavailable are emotionally neglectful. Nonorganic failure to thrive is a consequence of emotional neglect that most people recognize (Egeland, 2009). As of April 2007, all territories and states except Georgia and Washington

incorporate emotional maltreatment in their definitions of abuse and neglect; however, more than half the states (30) do not provide a clear definition of emotional maltreatment. The language that is typically used by the states to define emotional maltreatment describes overt behavioral changes in the child. These observable behavior changes emerge as aggression, anxiety, depression or withdrawal (Child Welfare Information Gateway, 2007). Numerous laws passed by the federal government have made it possible for states to investigate reports of child maltreatment and protect children living within those states.

History of Federal Legislation

In 1912, President Taft created the Children's Bureau to investigate and report on a variety of social issues involving children included birth rates, infant mortality, adoptions, and juvenile courts. The President appointed Julia Lathrop, a social worker and reformer, to be the U.S. Children's Bureau's first chief. The budget for this bureau in 1912 was \$25,640. Their annual budget for 2008 was over \$7 billion. The bureau is the oldest federal agency and currently they are responsible for administering federal child welfare programs (Costin, 1985; U.S. Department of Health and Human Services, 2009a).

In 1935, the federal government passed Title V of the Social Security Act. This allowed the federal government to provide funds to assist states to create services to protect and care for children who had experienced abuse and neglect. In 2009, these funds were distributed under Title IV of the Social Security Act (Committee on Ways and Means, 2007). The Bureau continues to operate with their mission is to provide for

children's well being, safety, and permanency (Costin, 1985; U.S. Department of Health and Human Services, 2009a).

In the early 1960s, there was a growing concern from medical professionals regarding the battered child syndrome (Kempe, Silverman, Steele, Droegemueller, & Silver, 1962). This syndrome referred to a clinical condition in young children in which they experienced injuries caused by their caregivers. Examples of the injuries included broken bones, soft tissue swellings, bruises, failure to thrive and head injuries. This issue gained national attention and laid the foundation for the policies and programs regarding medical reporting that are in existence today (Anderson, 1989; Howe D. , 2005; Kempe, Silverman, Steele, Droegemueller, & Silver, 1962; Waldfogel, 1998b; Warger, Tewey, & Megivern, 1991). These medical programs spurred a rapidly increasing concern for child welfare that inspired the enactment of the first national legislation regarding child protection.

The rapidly growing interest in protecting children had a compelling influence on the federal government to create and pass laws to enforce child protection. In 1974, Congress passed CAPTA (Child Welfare Information Gateway, 2004). The goal of this law was to protect children from abuse and neglect from their parents or caregivers. This was the second major historical movement to protect children. Protective services became the center of attention for the child welfare system. Since 1974, several other major pieces of legislation have been passed because of this movement on the part of government policy makers (Hutchinson, 1990; Schene, 1998; Waldfogel, 1998b). This law was amended and revised by the Child Abuse Prevention and Treatment and

Adoption Reform Act of 1978, and the Child Abuse Prevention, Adoption, and Family Services Act of 1988. A few years later, in 1992 and 1996, respectively, CAPTA was revised by the Child Abuse, Domestic Violence, Adoption and Family Services Act, and the Child Abuse Prevention and Treatment Amendments. The latest revision is the Keeping Children and Families Safe Act of 2003 (Child Welfare Information Gateway, 2009).

In 1980, Congress passed the Adoption Assistance and Child Welfare Act (AACWA). This law created new procedures for Child Protective Services (CPS) to try to limit new placements of children and provide service plans and case reviews for the children who were currently in placements. AACWA's goals were to establish permanency for children in care and to prevent unnecessary placements of children in foster care. The act also provided for the federal funding of foster care to help subsidize adoptions, to be distributed from the Title IV-E of the Social Security Act (Child Welfare Information Gateway, 2009; Waldfogel, 1998b).

The "Baby Doe Law" came into effect in 1984 because of two cases where parents withheld medical treatment from their newborns due to their disabilities. This was an amendment to the Child Abuse Law that altered the definition of child abuse and neglect to include withholding of food, fluids, and medically necessary treatment for disabled children. This act required hospitals to report cases where parents would not allow their disabled newborn to receive life sustaining medical treatment (Waldfogel, 1998b).

In 1993, the Child Welfare Services, Foster Care, and Adoption Assistance Reforms started the Family Preservation and Support Services Program. This program made funding available for preserving at-risk families and support services. CPS agencies would be responsible to disburse funding. As a condition of receiving these federal funds, CPS agencies were required to include community-based organizations in their planning of services to families (Child Welfare Information Gateway, 2009; Schene, 1998; Waldfogel, 1998a).

Interracial adoptions were the focus of the Multiethnic Placement Act of 1994. Agencies could no longer discriminate against prospective foster or adoptive parents based only on their race, color, or national origin. This made it easier for families to adopt children from backgrounds other than their own (Child Welfare Information Gateway, 2009; Schene, 1998; Waldfogel, 1998b).

The passage of the Adoption and Safe Families Act (ASFA) in 1997 increased funding for the Family Preservation and Support program. The name changed to the Safe and Stable Families Program. This law required states to move children out of foster care into permanent homes by speeding up termination of parental rights and promoting adoptions of children in foster care. It also ensured safety for abused and neglected children by requiring criminal background checks for foster or adoptive parents (Child Welfare Information Gateway, 2009; Schene, 1998; Waldfogel, 1998b).

The Foster Care Independence Act of 1999 amended part E of title IV of the Social Security Act. This Act provides States with more funding to assist children when they transition from foster care to independent living. It also allowed states to extend

Medicaid coverage to age 21 for young adults who have exited from foster care (Child Welfare Information Gateway, 2009). To meet this growing need, the act established the John H. Chafee Foster Care Independence Program in 1999. This program allows states funding to assist foster youth when they transition out of foster care (Texas Department of Family and Protective Services, 2004a; 2010c).

In March of 2000, the Child Abuse Prevention and Enforcement Act passed through Congress. The purpose of the Act is to decrease the frequency of child abuse and neglect. This Act allowed law enforcement agencies to use federal grants to enforce laws pertaining to child abuse including sexual abuse and neglect, to endorse programs intended to prevent child abuse and neglect and to institute cooperative programs between media and law enforcement to gather information useful to the apprehension suspects. The act also authorized states to use funds to improve the criminal justice system so they could provide criminal history records to child welfare agencies to help them protect children (Child Welfare Information Gateway, 2009).

President Bush signed into law the Intercountry Adoption Act (ICAA) of 2000. One purpose of this law is to ensure the protection of rights of all parties who are involved with adoptions that are between different countries. This law also mandated Immigration and Naturalization Services and the Department of State to institute a case registry for all Intercountry adoptions (Child Welfare Information Gateway, 2009).

The Promoting Safe and Stable Families (PSSF) Amendments of 2001 passed on January 17, 2002. The purpose of these amendments provides support to mentoring programs for children whose parents are incarcerated. It also amends the Foster Care

Independent Living program to provide training and educational vouchers for young adults transitioning to independent living (Child Welfare Information Gateway, 2009).

In December of 2003, President Bush signed The Adoption Promotion Act. This law amended and reauthorized incentive payments to states to provide expenditures for adoptions of special needs children and children over the age of nine from the child welfare system. States are required to report data to the Adoption and Foster Care Analysis and Reporting System (AFCARS) regarding the number of adoptions of special needs children as well as adoption of older children. It also authorized the Secretary to impose penalties against a state if they failed to report the data to AFCARS (Child Welfare Information Gateway, 2009).

In 2005, two Acts were introduced to Congress. The Fair Access Foster Care Act was enacted in November 2005 and the Deficit Reduction Act was enacted on February 8, 2006. The Fair Access Foster Care Act allows foster care maintenance payments to be paid through agencies on behalf of eligible children. Reauthorization of the Temporary Aid for Needy Families and other child welfare programs served as the family policy focus of the Deficit Reduction Act (Child Welfare Information Gateway, 2009).

In 2006, the 109th Congress enacted four laws. The first, The Safe and Timely Interstate Placement of Foster Children Act held States accountable for children placed across State lines and improved protection for them. The second was the Adam Walsh Child Protection and Safety Act, which protects children from violent crimes, sexual exploitation, child abuse, child pornography, provides Internet safety, and honors the memories of child crime victims. The third was the Child and Family Services

Improvement Act, which reauthorized the PSSF program, amended part B of the title IV of the Social Security Act among other provisions. The fourth law, the Tax Relief and Health Care Act, amended the Internal Revenue Code of 1986 to extend provisions related to child placements that were expiring (Child Welfare Information Gateway, 2009).

President Bush signed an act into law on October 7, 2008. This law was entitled the Fostering Connections to Success and Increasing Adoptions Act of 2008. This law extended federal support for young adults in foster care or transitioning out until age 21, promoted permanent families for children in foster care, and improved their education and health care benefits. Federal protection to American Indian children was also offered along with other provisions (Child Welfare Information Gateway, 2009).

In 2010, the 111th Congress enacted five laws. The Healthy, Hunger-Free Kids Act of 2010 amended the National School Lunch Act in order to provide free school lunches for all children living in foster care. The International Adoption Simplification Act restored sibling age exemptions and immunization for United States citizens adopting children under the Hague Convention on Intercountry Adoption. The Help HAITI Act of 2010 provided orphans, from the earthquake, adjustment status in the United States. The CAPTA Reauthorization Act of 2010 reauthorized the Child Abuse Prevention and Treatment Act along with three other Acts. Child Welfare Practice Provisions in the Patient Protection and Affordable Care Act collects requirements connected to the child welfare practice (Child Welfare Information Gateway, 2010).

With the beginning of CAPTA in 1974 until the signing of the most recent law in 2010, Congress has implemented numerous laws over the last 36 years, which have impacted state child welfare and protection services. As recent has history demonstrated, Congress has been very active in child welfare legislation. As new laws are passed, they are made available to the public through resources such as the Child Welfare Information Gateway.

Child Welfare

The fundamental value of child welfare is reflected in Shierman (2003). She reports that every child has a right to “safe, permanent, nurturing homes” (p. 52). A consultation group working with the Children’s Bureau defined the elements of this value. Safety denotes protection from abuse or neglect regardless of where the child resides. Permanency implies that all children will have stable and consistent living situations, family relationships, and community ties. Well-being refers to the ability of families to provide for their children’s needs. The laws of the child welfare system should assist the agencies in obtaining these outcomes for the children and their families.

Shierman (2003) also reports that child welfare agencies struggle with the issue of providing short-term or long-term services. If the agencies were to follow their value in providing children with safe, nurturing homes, then providing long-term services would support the families better than a short-term, crisis-oriented agency making referrals to community resources. The interventions that guide child welfare are in the “best interest of the child” (p. 53), but how these best interests are interpreted is not consistent within or between child welfare agencies. Due to the burden of large numbers of cases on

workloads and budgets, community agencies are pressured to provide minimal services to families who are at risk. There is widespread concern that these practices are inadequate to support these families and protect the children.

Shierman (2003) further reports that child protection has become the most important role of public child welfare agencies. The state gets involved when families cannot provide a safe environment for their children. Either the state provides services to help make the family safe for the child, or they provide alternative care that is safe. Another concern involves the state intervening when the child is relatively safe, but the family does not provide adequate discipline, medical care, or nurturing. Child welfare agencies struggle to be effective in meeting children's needs, in the shortest amount of time within the least restrictive environment.

Child welfare policies and practices are critically important and vary across the nation. The definition of maltreatment varies by each state, and agency, as discussed earlier in this research, which determines how reports of abuse and neglect will be handled from case to case. In child welfare cases, however the courts play a significant role in creating policy for reporting in every state. They are involved in every decision regarding every child in the state's care. In court, all the parties involved (the state, the child, the parent) are represented by different attorneys who are responsible for representing their client's best interests. Volunteer court appointed special advocates (CASAs) are appointed by the court to make certain that children in care have a voice in the legal decision-making process. CASA workers are required to submit a report to the

judge describing each child's progress in care and to address the court on the child's behalf (Bass, Shields, & Behrman, 2004).

The child's best interest should be the primary focus of all the agencies and individuals involved with children living in foster care. Sometimes there are variations of what is intended to be in the best interest of the child between different individuals and agencies and as a result, the parties can lose their original focus on the general best interests of the child. Bass, Shields and Behrman (2004) concluded that it is important for all the agencies and individuals to work together to assure the best possible outcomes for the children.

The child welfare system would benefit from listening to their primary consumers regarding the type of interventions they employ. The children they take into custody are the ones most impacted by the foster care system. Giving voice to the children will empower them in a situation where they sometimes feel powerless. Listening to the children may help the system make the necessary changes to improve situations for future children who reside in foster care (Bush & Gordon, 1982; Merritt, 2008). As future qualitative research in these subjects continue to be performed, policy makers, professionals, and laypersons will find themselves better equipped to respond to Bush, Gordon and Merritt's call to action.

Temporary and Permanent Child Placement Services

When foster care was established, the original intention was temporary placement for children who could not live with their parents due to some form of maltreatment.

There are many types of placements for children in out-of-home care. They include, but

are not limited to, traditional foster care homes, kinship care, group homes, therapeutic foster homes and group care, residential group care, family care, residential treatment centers, psychiatric institutions, juvenile justice systems, and emergency shelters.

The foster care system consists of individuals, families, and institutions that have contracted with various agencies to provide a home for children who cannot reside with their caregivers. Most foster care families receive compensation for providing a safe, nurturing home for children. Usually the compensation is not adequate to cover all expenses for the children, especially in the foster home setting. Agencies turn to public support through contributions to help provide for children in their care (Ellis, Dulmus, & Wodarski, 2003; Haskins, Wulczyn, & Webb, 2007; Lewit, 1993). It has been argued (Courtney M. E., 1998) that most of the families served by the child welfare system have a low socioeconomic status. Funding programs that benefit these families could potentially lower the high cost of foster care, allowing additional resources to assist families to provide a safe, nurturing environment for their children rather than the system.

Providing consistent caring relationships to children in foster care can present many challenges. Many children in care have medical or mental health problems, some of which are undiagnosed. For some children who have had little supervision and have lived in homes where there are no rules, imposing rules in foster care can create further acting out. In turn, this may cause the foster parents or agency to give a 30-day notice for removal of children from their care, which can lead these children to have additional behavioral and emotional problems (Ellis, Dulmus, & Wodarski, 2003).

Chipungu and Bent-Goodley (2004) reported on the challenges of foster care. One such challenge is a growing number of caseloads that include children with very multifaceted needs that require more attention and more time. Other challenges include high staff turnover, and ethnic and cultural discrepancies between children and placement families. Difficulties recruiting and maintaining foster parents present another challenge, as fostering is one of the toughest parenting challenges a family can undertake.

Children who have experienced living in foster care remember many losses when they were removed from their families and moved multiple times within the foster care system. At the time of the move, many of the children were not told in advance of their removal from their families or about subsequent moves within the system. Consequently, due to the abruptness of the moves, they were not allowed to grieve the separation and loss of their current caregivers, which influenced their ability to cope with the change and to adequately attach to their new caregivers. They also struggled with their interpersonal relationships and trusting others (Butler & Charles, 1999; Jewitt, 1982; Johnson, Yoken, & Voss, 1995; Unrau, Seita, & Putney, 2008). Attachment theory and the theory of psychosocial development will be reviewed in order to understand the attachment and trust difficulties of children who have experienced maltreatment and foster care.

Programs Offered for Older Youth

Preparing foster youth to transition into adulthood should be viewed as an emerging process (Arnett J. J., 2000) that begins years before they will be discharged. The responsibilities that come with adulthood do not magically appear when the child

reaches the age of 18 years. The responsibilities are learned throughout adolescence after many years of hard work and maturation (Cook, 1988; Scannapieco, 2000).

Child welfare agencies have the responsibility of preparing adolescents in substitute care for living on their own. Adolescents transitioning to independent living will not require all the same types of services. Adolescents who have developed healthy relationships with their foster parents, had a positive experience in care, and acquired adequate skills for living independently will have smoother transitions for living on their own than adolescents who were less prepared (Westat, Inc., 1986).

Independent living programs. Independent living programs (ILP's) identify the skills young people require in order to be successful when they age out of care. Westat, Inc. (1986) identified four development phases that most young people experience as they move towards adulthood. The first phase includes the basic living skills acquired by informal learning one receives by watching others. The second phase includes the skills that are taught through formal learning, usually from institutions. The third phase involves practice where the youths now live in some type of independent living situation that is supervised. The final phase (phase four) is self-sufficiency, which involves the young adults living on their own independently.

Independent living programs were designed to assist youths in foster care to become autonomous. ILP's authorize federal funding for states to provide services to youths age 16 and older. In 1985, this federal assistance was temporary and in 1993 became part of the Omnibus Budget Reconciliation Act in which funding was reauthorized for an indefinite period. ILP's utilize federal, state, local, and private funds

to provide services. These services include assistance with employment, completing formal education and instruction in the fundamental skills necessary for independent living. Most of these programs do not reach their stated objectives and leave youth to age out of care unprepared (Texas Department of Family and Protective Services, 2004a; United States General Accounting Office, 1999).

Preparation for Adult Living (PAL) Program. This program was implemented, in 1986 by the Texas Department of Protective and Regulatory Services, to help prepare older youths for their transition out of foster care. This program offers life skills training, in six major areas, to youth in care when they reach their 16th birthday. These areas cover personal and interpersonal skills, job skills, managing money, transportation and housing, health, and life decisions. In some regions, staff provides the training however, the majority of the regions contract with various private agencies or individuals to conduct the training. Policy requires children to complete an assessment to determine their general ability to live independently prior to a referral to the PAL program. The Ansell-Casey Life Skills Assessment has been used in Texas since 2002. The “In-Care” program is offered to youth aged 14 – 18, who are still in care. After the youth ages out of foster care then they are eligible for the “Aftercare” program. This program provides financial assistance with a maximum of \$3,000 with a limit of \$500 per month paid to client. This money can pay for utilities, rent, rental deposits and groceries. Youth who participated in the PAL program and who have aged out of care are also eligible for a \$1,000 transitional living allowance that can be disbursed monthly with a maximum of \$500 per month (Texas Department of Family and Protective Services, 1986).

Extended Care Program. Beginning on September 1, 2006, rule changes went into effect to allow youth to remain in the care of the Department of Family and Protective Services (DFPS) and continue to receive services past the age of 18. Fostering Connections was implemented on October 1, 2010. The young adults have to sign a Voluntary Extended Foster Care Agreement, prior to their 18th birthday, and meet certain requirements. Some of the requirements include that they are enrolled in high school (up to age 22), or general education diploma (GED) classes (up to age 21), or enrolled in full time technical or vocational training classes and scheduled to graduate before they turn 21 years of age. They can also stay in care up to three and a half months after the month of graduation or completion of the GED program if they have been accepted for admission to a vocational program or college. This would allow the youth to have a place to live while waiting for college or the program to begin (Texas Department of Family & Protective Services, 2006).

Return to Care Program. This program allows youths who leave foster care to attend college to return to care, up to age 21 provided there is an available placement, for school holidays or vacations that last a month, but not more than four months. This program also allows youth to return to care to attend high school (up to age 22), attend a vocational or technical program that would lead to employment or GED program (up to age 21) (Texas Department of Family & Protective Services, 2010d).

Additional Programs and Resources. There are a number of additional programs and resources that are available to older youth in foster care. Programs include the Education and Training Voucher (ETV) Program, Tuition and Fee Waiver,

Transitional Medicaid and the Former Foster Care in Higher Education (FFCHE) Program. These programs have certain criteria that must be met in order for the youth to qualify. Resources are also available for older youth in care. Texas Youth Hotline is a statewide toll free number youth under age 21 can call for information, referrals and even telephone counseling. The Texas Youth Connection is a youth designed website full of information and resources for current and former foster youth. Transition Planning and Circles of Support (COS) are services provided to assist older youth in transitioning out of foster care and identify the needs and goals during this transition. Other forms of assistance include Transition Centers, Texas Workforce Development Boards Partnership, employment preference to former foster youth and the National Youth in Transition Data Base (Texas Department of Family and Protective Services, 2007; 2010a)

The older youth and former foster youth in care are offered an array of programs to assist them while transitioning out of foster care to independent living. Every year new programs and services are placed into operation and every year thousands of young adults age out of the system. Despite the quantity of programs and their purpose, there remains a considerable amount of youth who are ill prepared to be self-sufficient upon leaving care. These young adults face a variety of difficulties surrounding their transition.

Transitioning to Independent Living

Respectively 29,516 and 29,471 young adults transitioned from foster care to independent living during the fiscal years that ended September 30, 2008 and 2009 (U.S. Department of Health and Human Services, 2009b; 2010). Children who enter foster

care as teenagers are at a higher risk of remaining in foster care until they age out of care. Older foster children are more likely to live in pre-adoptive homes, group homes, or institutions. The longer children are in care the less likely they are to be adopted (Westat, Inc., 1986).

Barth (1990) conducted an interview study in which 55 former foster youth participated. The average age of the respondents was 21 years. The findings revealed that 75% of them were employed full time, 89% were still in contact with their prior foster parents, 55% did not have a high school diploma, and the majority did not receive independent living skills training. Since leaving care, 44% had a serious illness or accident, and 62% had health or medical coverage at the time of the interview. More than 36% were arrested while they were in care, and 19% reported drinking at least once a week in care. Almost half reported that it was somewhat harder for them to live on their own when compared to non-foster care youth, and 29% reported that at some time they had been homeless. The participants were asked what the social workers needed to know to help future youth transition to independent living. The most popular answers included teaching life skills and helping them to find housing. When asked what they would tell future youth who would age out, many of the participants said that they would warn them of the hard times and to work hard to prepare for emancipation.

Approximately 34% of the former foster adults (n=277) in Festinger's (1983) study were formally discharged from foster care during the year following their 18th birthday, while 19.5% were discharged within nine months after their 21st birthday. The remaining 46.5% were discharged anywhere in between. The former foster adults

eventually, for the most part, learned how to function in the real world. The former foster adults who were discharged from group facilities (n=76) had a more abrupt discharge, in as much as they had to leave the facility within a certain period. The former foster adults who had additional adult support in the community made the transition easier regardless if they were leaving a group facility or foster homes.

McMillen, Rideout, Fisher, and Tucker (1997) conducted four focus groups with 25 former foster youth that had transitioned to independent living two years earlier. The purpose of the researchers' study was to explore the former foster youths' perceptions of the independent living services they received during care. The researchers were interested in finding out from the former foster youths what services were most helpful, what they found helpful in the programs, and who helped them to learn skills to live on their own. The focus groups were audiotaped and transcribed. Nine themes were identified that emerged from the transcripts. Overall, the respondents' views of the independent living programs were positive. The ILP's skills classes were viewed as helpful, as were the trainers who conducted the programs. The programs helped to reduce isolation and stigma the former foster youth felt while in care. The respondents also viewed instruction in financial matters, the stipend, and the foster parents as being helpful. Less positive themes that emerged included the perception that living in foster care was intrusive and that leaving foster care was an abrupt and tough transition in which they viewed their CPS caseworker as the least helpful person.

Views of Children and Former Children in Foster Care

A study by Sophie van Senden Theis in 1924 (as cited in Festinger, 1983 and Triseliotis, 1980) was one of the first studies on children in foster care. She followed approximately 910 former foster children who were placed in foster homes between 1898 and 1922. Interviews were conducted with approximately 500 of the foster children, who were 18 years old, and their foster families with whom they had lived for at least a year. The findings revealed that almost 75% of the former foster children were responsible, honest, moral adults. Children who were placed at five years old or younger were more likely to be successful.

van der Waals (1960) conducted a study in which she interviewed 160 young adults in Holland. The respondents were born between 1903 and 1920, lived in foster care, and transitioned to independent living. Among the factors that related to success of the respondents was the age at which they were placed in foster care. That is, if the individuals were placed in care before six years of age, they were more likely to be viewed as part of the foster family. Ironically, more than half of the respondents who were placed before age six eliminated contact with their foster family, and 74% of the children placed after age six eliminated contact when they left care. The respondents were more accepting of their foster parents if their biological mother kept in contact with them while they were growing up. More than half had very negative feelings toward their former foster parents and had severe complaints against them. The respondents also reported that they never told anyone about their complaints, because they thought no one would believe them and they were scared. In contrast, 25% had very positive feelings

reporting they loved their foster parents and did not want to return to home to their biological parents. Some of them named their children after their foster parents and even cared for their foster parents, as they grew older.

Meier (1965), conducted interviews with 61 former foster children, ages 28 to 32, to see how well they were managing their lives after foster care. Most of them reported they were supporting themselves, raising their children, and living in nice homes. The respondents also reported they were involved in church, PTA groups, and other social organizations. Meier concluded that the respondents had found a place in their communities and were “indistinguishable from their neighbors” (p. 206) the respondents however, did not view themselves as such “because they remember that, as foster children, they were different from their peers” (p. 206).

Festinger (1983) interviewed 277 former foster children regarding their satisfaction with foster care. The author concluded that the findings suggested that overall, the former foster children were happy with their placements. The former foster children who perceived their placements to be necessary and understood the reasons for their placements reported that they were more comfortable with their placements than were the ones who did not understand why they were placed in foster care.

Gil and Bogart (1982) interviewed 100 foster children. Half of the children were living in foster homes and the other half were living in group homes. The children ranged in ages from 8 to 18 and were from diverse ethnic backgrounds. Each child was given a four-part questionnaire that included topics on self-esteem, role inventory, behaviors, and four open-ended questions. The open-ended questions were created to

elicit perceptions of foster care. All the children scored lower than the standardized norm in self-esteem. The children who lived in the group homes scored lower in self-esteem than the children who lived in the foster homes. On the role inventory, all the foster children chose low-status occupations that were sex-stereotyped. On the behavior checklist, the majority (80%) of the children in foster homes felt more secure than the children in the group homes did (47%). Fifty six percent of the children in the foster homes reported receiving frequent punishment as compared to the 42% of the children in the group homes. The majority (76%) of the children in the foster homes and 42% of the children in the group homes reported they had lived in their current placement for three years or more.

The children's perceptions of foster care varied. The first question asked if they liked their current placement. The majority (81%) of the children who were in foster homes reported that they liked their current placement and only 47% of the children who were in the group homes reported they liked their current placement. The second open-ended questions asked the groups what the reasons were they liked their current placement. Both groups of children reported that they had fun, went different places, and obtained help when needed, felt safe, respected, and loved. The third open-ended question asked the foster children how they would improve foster care. Responses ranged from increasing the number of homes, staff, and funding for foster homes to allowing foster children more freedom and choices. The fourth and final open-ended question asked the children why they were in foster care. In both groups, the responses ranged from blaming their parents to blaming themselves (Gil & Bogart, 1982).

Summary

For over 125 years, child maltreatment has been a topic of interest for federal and state governments, agencies, professionals, and researchers alike. Defining child maltreatment has proved to be more difficult than actually recognizing it. The Children's Bureau is the oldest Federal agency that continues to operate to provide for children's safety, well-being, and permanency. The goal of the Child Abuse Prevention and Treatment Act of 1974 was to protect children from abuse and neglect. This law set the minimum standards, for each state, for defining for abuse and neglect. In 2003, the Keeping Children and Families Safe Act revised this law. Over the last 35 years, Congress has passed numerous laws in an effort to continue to provide for the safety of children.

Safety, well-being, and permanency have been the major goals of the child welfare system. Providing these services consistently has been a struggle for child welfare agencies due to limited funding and limited foster care placements. It would be in the best interest of all parties concerned to continue to strive to work together and listen to the consumers of the services in an effort to improve the system for generations to come.

The children, who are the consumers of the agencies services, continue to struggle with trusting others and building healthy attachments. Unfortunately, these struggles lead to even greater challenges for the children as they grow up in the foster care system and transition to independent living. Further research that focuses on children who have experienced child maltreatment, the foster care system, and transitioning to independent

living from the system will provide a greater understanding of this ever-growing population so that additional resources can be developed to better assist them.

Chapter III

Research Design and Methods

This chapter describes the research methodology used to guide this study.

Components included in this chapter consist of a description of the research design, the context for the study, a description of the participants in the study, the researcher's role in data collection and analysis, data management, data analysis, and trustworthiness.

Brief Reiteration of the Problem Statement

The purpose of this study was to examine the lived experiences, perceptions, thoughts, feelings, and behaviors of adults between the ages of 18 and 29 who have aged out of foster care. More specifically, I set out to examine the skills training to become self-sufficient each participant received during the period of time when they were transitioning out of the foster care system. As part of this exploration into the transition process for individuals who age out of foster care, I also set out to develop greater understanding of these individuals' perceptions of their ability to develop and maintain trusted relationships.

This study is significant to the field of counselor education because it sheds light on the difficulties young adults' face, when aging out of the foster care system, to be self-sufficient. It is important for the curriculum in counselor education to include courses pertaining to attachment theory, child maltreatment, and trauma. These courses will give counselors, choosing to work with this population, the education, knowledge, skills and training to assist these clients to develop healthy coping skills they can use while living in foster care and aging out.

Introduction to Phenomenological Research

“Phenomenology is the study of the world as it appears to individuals when they place themselves in a state of consciousness that reflects an effort to be free of everyday biases and beliefs” (Gall, Gall, & Borg, 2003, p. 481). It is everything that an individual feels, thinks, perceives, and does. The method focuses on an individual’s own subjective view of reality that is very different from others. The goal of phenomenology is to understand how individuals create and are created by their opinions, beliefs, and principles they hold to be true.

Phenomenology began as a philosophical movement led by Edmund Husserl, who believed that the self’s experience of *phenomena* was the starting point for knowledge (Husserl, 1964). *Phenomena* are defined as “the various sensations, perceptions and the ideations that appear in consciousness when the self focuses attention on an object” (Gall, Gall, & Borg, 2003, p. 481). Husserl created four processes that were later recreated by psychologists into more standardized procedures. These procedures outline how to conduct and plan a phenomenological investigation. The first procedure encourages the researcher to select a topic that has a personal meaning and has social importance. The second and third procedures emphasize the importance of choosing participants who have experienced the topic that is being researched and then to interview the participants regarding that particular topic. The final procedure details how to analyze data collected from each of the interviews (Husserl, 1964).

Today, phenomenology is a philosophy, an approach, and a research method. The researcher is looking for a profound and comprehensive meaning of the participant’s

experience of a specific phenomenon. The experience includes the participants' feelings, thoughts, and connections with other life experiences. Meaning can only be assigned, to an experience, once the participant has lived through it. The researcher also describes the experiences of the participant as they are to the participant, free from any bias or underlying rationalization (Morse & Field, 1995).

The essence of a phenomenological study depicts the meaning of the lived experiences, for a number of participants, about a phenomenon. Phenomenological researchers explore the perceptions of human experience. They seek out the primary meaning of the experience and emphasize the purpose of consciousness where experiences are both subconscious and conscious based on the participants' memory, image and meaning (Creswell, 1994; Polkinghorne, 1989).

Phenomenology is considered a method of understanding along with analysis. Phenomenological interviewing is a way of classifying the details about people's lived experiences so that those details reveal the quintessence of those experiences (Stewart & Mickunas, 1974). Using a phenomenological method of interviewing is consistent with the intent of this study, which is to capture the experience of growing up in foster care, how the system has prepared them for aging out, and what the participants experience as barriers to living on their own successfully. The study focuses on recounting, analyzing, and deciphering data of the participants' lived experiences, then summarizing those experiences into ideas to assist interested parties in making changes that will improve the way they prepare the youths, in foster care, to age out and successfully live independently.

Research Design

To garner a greater understanding of the transition process for individuals who age out of foster care, I utilized a qualitative research methodology. My data collection methods followed the form of in-depth phenomenological interviews (Seidman, 2006). The purpose of in-depth phenomenological interviewing is to allow the researcher to gain a deeper understanding of the participants' experiences and the *meaning* they make of their experiences. This is accomplished by presenting the participant's information, obtained from interviews, in detail and in sufficient depth. Seidman explained that in-depth phenomenological interviewing is not about testing a hypothesis, and "generalizing the findings of an interview study to a broader population" or obtaining answers to specific questions (p. 51). Rather, in-depth phenomenological interviewing is about allowing participants "to look at how the factors in their lives interacted to bring them to their present situation" (p. 18). Qualitative research studies that employ interviewing as the method of collecting data need to consider the above three areas of concerns. Fontana and Frey (2000) cautioned that researchers must use tremendous care when interviewing participants to avoid any type of harm to them. Seidman (2006) also stated in-depth interviewing is not risk free.

The in-depth phenomenological interview process allowed the participants in my study to give a detailed picture of what was occurring in their current lives in relation to transitioning out of the foster care system. In addition, in-depth phenomenological interviewing allowed the participants to focus on their "understanding of their

experience” and make meaning of their lives in relation to transitioning to independent living.

Context for the Study

Selecting participants for an in-depth interview study is conducted differently from an experimental study because the “basic assumptions underlying” (Seidman, 2006, p. 51) the two studies are different. A purposive “sampling technique designed to gain maximum variation” (p. 55) was utilized in this research. This strategy allowed specific individuals to be intentionally chosen for their perceptions about the research topic. Using a purposive sampling strategy allowed me to learn more about former foster youth and understand them better “without needing to generalize to all such cases” (Patton, 1980, p. 100). Purposive sampling also allows in-depth, detailed information to be obtained from the participants (Hesse-Biber & Leavy, 2006; Patton, 1980). The use of a purposive sampling strategy is further validated as the goal of this research was to understand the experiences, perceptions, and meanings the participants have about transitioning out of foster care, their preparation for self-sufficiency and formation of trusted relationships.

I recruited participants by placing an advertisement (see Appendix A) in a local newspaper. Interested individuals, who met the selection criteria, were asked to call me for additional information. Selection criteria included individuals who were between the ages of 18 and 29, who lived in foster care for five or more years, and who transitioned out of the system to independent living. Participants were all living in the same small southwestern city at the time of their interviews. Last year, in the small southwestern

city, 874 children were in foster care with 233 entering foster care and approximately 25 aging out of care (Texas Department of Family and Protective Services, 2010b).

Seven individuals called requesting more information. The first three individuals met the selection criteria, agreed to be interviewed and participate in this study. The fourth individual was interested however, did not want to be interviewed three times. The fifth individual also met the selection criteria and agreed to participate in this study. There were two additional individuals that contacted me, who also met the selection criteria and wanted to participate. They were willing to be placed on a waiting list in case one of the other individuals chose not to participate or complete the interviews.

Participants

The participants in this study were four young adults, two male and two female, between the ages of 18 and 24, who experienced living in foster care for five years or more. They all had received some type of skills training to prepare them for independent living and they all had transitioned out of the foster care system into independent living. They were all from the same geographical area described above. Individual characteristics of each participant are described below. Pseudonyms are used throughout this study to protect the privacy of the participants and the individuals mentioned in their interviews.

Noli was a Hispanic female who was 21 years old at the time of her interviews. She appeared to be approximately 5'3" tall, had a medium build, medium brown skin and long black hair she wore in a ponytail. During her interviews, she was talkative, wore jeans, T-shirt and flip-flops, did not wear make-up, and portrayed a tough exterior. Her

demeanor was candid and she was very straightforward with what she said. Noli stated that she answered the advertisement and wanted to share her story because she wanted other children who will experience foster care to know that they can make it through the [foster care] system by always looking forward, not back, in life.

Becca was also a Hispanic female who was 22 years old at the time of her interviews. She appeared to be approximately 5'5" tall, had a slender build, light brown skin and medium brown hair that was trendily cut and styled. During her interviews, she was poised, well groomed, confident and portrayed a soft exterior. She was well mannered, appeared open in her communication, and was insightful. Becca chose to participate in this study to let other children in foster care know that they do not have to be ashamed or afraid, there is hope and to follow their dreams.

Jacob was a Caucasian male who was 21 years old at the time of his interviews. He appeared to be approximately 6'1" tall, had a lanky build, short light brown hair, was clean-shaven, and very well mannered. During his interviews, he was relaxed, talkative, and personable. Jacob made the decision to share his story to let children in care know that they can have a family that will take care of them, they can be safe and to learn as much as they can while in foster care so when they leave it will be easier.

Raymond was an African American male who was 24 years old at the time of his interviews. He appeared to be approximately 6'4" tall, had a stocky, muscular build, was clean-shaven, and had a deep voice and short black hair. During his interviews, he was friendly, serious yet funny at times, polite, and well mannered. Raymond wanted to share his story in hopes that other African American boys who experienced foster care would

not hold on to negative feelings to the extent that they isolate themselves and feel unhappy all the time.

To gain a deeper understanding the participant's experiences while transitioning out of the foster care system, in-depth interviews were utilized. These interviews allowed the four participants to reconstruct their stories about receiving services in foster care and transitioning out of the system.

Data Collection

In-depth phenomenological interviews. The methodology of this research is based on the works of Seidman (2006). His book presents a model of in-depth phenomenological interviewing that was used in this study. This method of interviewing combines life history interviews and focused, in-depth interviews. In-depth interviewing seeks to understand the experience of the interviewee, not to control or predict their experience.

In phenomenological research, the researcher must be flexible and have the ability to follow the participant's story. There are no structured interview questions in phenomenological interviewing; rather, the questions will "flow from the immediate context" (p. 199) in as much as the researcher does not know, in advance, where the participants will actually begin with their experience about the researched topic. Examples of the focus areas for each of the three phenomenological interviews are in Appendix B.

The initial contact with the potential participants was a brief introduction explaining who I am, the purpose of the study and the nature of the interviews. A

decision was made by the individual to schedule a time to meet in order for me to further explain the research project as well as what would be expected from them should they choose to participate. During the first face-to-face contact with each potential participant, I assessed the appropriateness of his or her participation in this research and kept a record of their characteristics most related to the subject of this study along with information needed to contact them. During the individual meetings, I discussed the informed consent form (see Appendix C), the release form to digitally record interviews (see Appendix D) and the interview protocol (see Appendix E) with each potential participant and answered their questions. The participants signed the consent and release forms, each received a copy, and the original was placed in a file.

I scheduled interview times and dates during the first meeting along with the participants' preferred place to conduct the interviews. Three of the participants chose to meet at my counseling office due to them living with others and the fourth one chose to meet at her apartment. All of the participants completed all three of their interviews as scheduled and no one dropped out of the study.

Each participant received a \$30.00 gift card, from a place of his or her choice, upon completion of the three interviews. This information was disclosed in the consent form. Two participants chose gift cards from Target, one from Barnes & Nobel and one from Game Stop.

This study complied with the guidelines established in the American Counseling Association (ACA) Code of Ethics (American Counseling Association, 2005).

Generally, ethical concerns involve three areas that include informed consent, the right to

privacy, and protection from harm. In this study, I met with each participant three times. The participants were asked to talk about their experiences with the programs and services offered to prepare them when they aged out of care in their first interview, provide rich details of their experiences during their transition out of care in the second interview, and then reflect on the meaning of those experiences in the third interview. Over the course of the three interviews, the participants related personal accounts of their lives related to the topic and none of the participant's responses led to any emotional distress or uneasiness.

Digitally recorded interviews. Seidman (2006) recommended that the researcher record all three interviews with each participant. The benefits include having the participant's actual words rather than the paraphrased thoughts or summaries of the researcher, having the original data of the participant's narrative and the ability to refer back to the digital recording to check for accuracy if needed. I followed his recommendations and digitally recorded each of the participants' three interviews. The participants' three interview transcripts are in Appendix E.

Three-interview series. The structure of in-depth phenomenological interviewing employs a series of three separate interviews with each participant. During these interviews, the behavior of participants develops into something that is significant and comprehensible when put into the perspective of their lives and others around them. The meaning of an event cannot be explored unless it is put into perspective of their lives and other's lives around them (Patton, 1980; 2002).

Interview one: Focused life history. The first interview in the series invited the participants to tell as much of their story as they could with regard to the topic up to the present time (Seidman, 2006). In this study, the participants were asked to reconstruct as much as they could about their perceptions and experiences of how the foster care system prepared them for independent living. This first interview allowed the participant to clarify events of their past to help them understand how these events have brought them to where they are today.

Interview two: The details of experience. The second interview in the series asked the participants to concentrate on the detailed experiences of where they are today, (Seidman, 2006) namely living independently. The participants were asked to describe, in detail, what they actually do in a given day from the time they wake up until the time they go to bed. They were asked to reconstruct their experiences of transitioning out of foster care and living independently as a way of drawing out richer details. The details of their experiences of living independently are beneficial in determining what their opinions are based on.

Interview three: Reflection on the meaning. The third and final interview centered on the participants' understanding of the meaning of their experiences (Seidman, 2006). In this present study, the participants addressed the meaning by connecting their thoughts and emotions to their experiences and perceptions of receiving life skills training while in care to prepare them for independent living, transitioning out of the foster care system and living independently, along with developing trusted relationship

with others. The participants examined how the stages in their lives interacted to bring them to their current life experiences.

Structure of interviews. Seidman (2006) advised researchers that it is important to adhere to the three-interview structure. Each interview has a purpose and a specific focus. Each interview builds the foundation for the next one. If the interviewer allows the participant to deviate from the structure of each interview, the focus of the interview is compromised. By adhering to the cumulative nature of the sequence of the interviews, the interviewer maintains the “power of the logic” (p. 13) and is able to take advantage of it. The interviewer must be able to allow the participants to tell their stories while at the same time providing adequate focus for the structure of the interview to be effective. During the interview process with all participants, I adhered to the recommended structure of the three-interviews.

Length of the interviews. The purpose of the in-depth phenomenological interviewing is to have the participants reconstruct their experience, place that past experience in context with their current life, and reflect on the meaning that it has for them. Seidman (2006) suggested that each interview not exceed 90-minutes. This period allows each participant to reconstruct their experience during the three interviews and allow their story to develop a beginning, middle and conclusion. The length of interviews in this study ranged from 35 minutes to 53 minutes, which were well within the recommended 90-minute period.

Spacing of interviews. The length of time between each interview is just as important as the length of time of each interview. Seidman (2006) recommends the interviews be spaced from “three days to a week apart” (p. 14). This period allows the participant enough time to reflect on the prior interview, but not to forget what he or she said. In this study, the first interview for all four participants was scheduled on a Saturday. The second interview for all the participants was scheduled on the following Wednesday and the last interview was scheduled four days later on Sunday. A follow-up meeting was scheduled for the following Thursday so the participants could review their last interview transcript for accuracy, receive their gift card and ask questions.

Trustworthiness and In-depth Phenomenological Interviewing

Seidman (2006) explained that the three-interview structure helps to establish components of trustworthiness. This type of interviewing puts the comments of the participants in the context of the study. The spacing of the interviews over a two-to-three week period allows the participants to account for having a difficult day and to review the consistency of what they said.

Interviewing several participants on the same topic gave me an opportunity to compare the comments and experiences of one participant to those of the other participants. This interview structure enhances validity, which allowed me to determine whether the stories made sense. Seidman (2006) also explains if the stories made sense to the interviewer, and there is consistency in the content between the interviews, then it is reasonable to determine that the story is valid for that participant. In this study, the

reconstruction of the participants' perceptions and experiences in their interviews made sense and the perceptions and experiences were consistent between the interviews.

Role of the Researcher

A qualitative design makes it necessary for the researcher to become the research instrument. All data is filtered through the researcher's lens or perceptions. This makes researchers who have experience in conducting some type of interviews particularly valuable to the process. Throughout the duration of the research, it is essential for the researcher to observe the behavior of each of the participants. Researchers must be aware of what is heard and what is seen, so that important details that may be considered indispensable are not overlooked during analysis of the data (Janesick, 2000).

The researcher is the key person acquiring information from the participants. The interaction between the researcher and the participant creates a context where participants can open up and share details about their life experiences. The researcher is the one who maintains the flow of communication, recognizes cues from the participants, and helps them to feel at ease during the interview. This also creates a therapeutic effect for the participants because they feel that someone is listening to them and hearing their story (Poggenpoel & Myburgh, 2003).

As I went through the process of deciding what type of research to conduct for my dissertation, qualitative research methods resonated with my professional experience. I have been a Licensed Professional Counselor (LPC) for over a decade and listening to individuals and their stories is the basis of what I do every day. I began my career working with adolescents who were on probation. Some of them were in detention

centers and were in the custody of Child Protective Services. Through my counseling with these adolescents, I listened to their life stories and how they made sense of where they were and how their lives changed in such a short period. Their life stories were filled with traumas, heartaches, and losses. Their stories regarding the dysfunction in their families saddened me, but also inspired me to work further with this population. Having never experienced child maltreatment, living in foster care, being on probation, or locked up or, I wanted to learn about this population, so I could foster the healing process for these children and adolescents and help them break the cycle. Over the last 10 years, I have counseled children who have been in foster care and I have heard their stories. The older adolescents in foster care had stories filled with fear and excitement, as they grew closer to aging out of the foster care system. Their stories inspired me to want to know how former foster children survived the transition of aging out of foster care and how their stories differed from the children currently in care. This interest became the focus of my dissertation. Throughout the interviews with the participants from my study, I was a researcher with the training and expertise of a counselor, who was interested in hearing their life stories and having a better understanding how they made sense of their lives since they have aged out of foster care.

In qualitative research, the researcher is the primary instrument for the collection of data and the analysis of data. Data are mediated through the researcher instead of some other tool such as questionnaires or inventories. The researcher is more interested in the process, the meaning people make of their lives, and the experiences and understandings gained through the research than the outcome (Creswell, 1994).

Qualitative researchers can ensure the rigor of trustworthiness by employing several criteria.

Trustworthiness in Qualitative Research

The researcher, according to Poggenpoel and Myburgh (2003), can have various characteristics that may pose a threat during the research process. They list seven different traits that could threaten the trustworthiness of the research:

1. The researcher having unresolved issues that are closely related to the research topic. If the researcher has experienced something similar to or the same as what the participants have experienced, then the researcher's own feelings may pose a threat to the research and distort their perceptions in such a way that they block the participant's views.
2. The researcher not being ready to conduct the field research. This entails everything from the researcher not knowing about the culture of the participants, being dressed incongruously with the dress of the participant (over or underdressed), to having problems with the technical devices being used and not being prepared to solve the problems (e.g., not have additional batteries or a power cord for the tape recorder or video camera).
3. The researcher not being able to perform member checking on the results. This may result because the participants choose not to have to read transcripts of what they said, as the topic may be too painful for them to have to think about again.

4. The researcher conducting inappropriate interviews. This can include researcher bias, not staying focused on what participants are saying, asking leading questions, and performing therapy instead of interviewing, or shortening the length of the interview and thus not allowing adequate collection of data.
5. The researcher leaving out demographic descriptions of the participants that would cause problems for other researchers attempting to comprehend the findings of the study or to construct similar studies.
6. The researcher not adequately analyzing each interview in depth. This consists of the researcher not spending enough time on or not being absorbed in the data, having a weak storyline or the data analyzed with inflexible opinions.
7. The researcher leaving out important and necessary information regarding the methodology and results, so that it would severely hinder other researchers from utilizing the research in similar situations.

Poggenpoel and Myburgh (2003) also offered procedures that can be useful to minimize the threats to trustworthiness. These procedures include keeping field notes and recordings, using member checking, triangulation, peer examination, increased experience of the researcher, monitoring audio or video equipment to ensure that it is working properly, piloting interviews, and constant discussions of the findings. Detailed descriptions, called rich description in qualitative methodology studies, of the

participants, of their demographics, and detailing the method used in the research can help to lessen the threats to trustworthiness.

Creswell (1994) suggested additional procedures that seek to minimize threats to trustworthiness. Included are: establishing trust with the participants; triangulation, which involves confirming data from a minimum of three data sources to shed light on a theme; and peer review of the findings. Clarifying biases of the researcher, performing member checks, providing rich, thick descriptions of the participants are also included. Creswell recommended that the researcher employ at least two of these procedures in a qualitative study.

Criteria of Soundness

Quantitative research uses internal and external validity, reliability, and objectivity as the criteria by which the trustworthiness of the research can be evaluated. In qualitative research, the comparable criteria are credibility, transferability, dependability, and confirmability (Denzin & Lincoln, 2000). These four criteria will be discussed in the following paragraphs.

Credibility. In qualitative research, credibility is the equivalent to internal validity in quantitative research. Credibility is confirmed if the researcher has interpreted the data from the viewpoint of the participant and not that of the researcher. Qualitative researchers are constantly validating their findings through each step of the research process to ensure that the data resonate with the participants. The participants are the only ones who can logically judge the credibility of the results as the intention of

qualitative research is to understand the perspective from their viewpoint (Flick, 2006; Lincoln & Guba, 1985; Marshall & Rossman, 2006; Miles & Huberman, 1994).

Credibility will be enhanced in this study through the researcher's use of thick rich descriptions to convey the findings, implementing well-established research methods, by clarifying the biases the researcher will bring to the study, and performing member checking throughout the investigation. Other techniques that will be utilized are field journaling, participant refusal to participate in the research, and qualifications and background of the researcher. Peer examination of the research and frequent debriefing sessions with committee members are other techniques that will be used (Creswell, 1994; Krefting, 1991; Shenton, 2004).

Transferability. This criterion is the equivalent of external validity in quantitative research. Transferability refers to the extent to which the findings of one qualitative research project can relate to another one. The details of the research should be thorough enough so that other researchers could determine whether it is relevant to their study. A researcher's argument should be that his or her findings would be beneficial to other researchers who are looking at related situation and have comparable research questions. The aim of transferability is whether the conclusions of a particular study can transfer to those of a similar study. This would be determined by another researcher who wants to apply the findings of one group to that of a similar group they are studying (Lincoln & Guba, 1985; Marshall & Rossman, 2006; Miles & Huberman, 1994; Toma, 2005).

Dependability. The quantitative counterpart of dependability is reliability.

Dependability entails the researcher accounting for the constant changing framework in which the research occurs. The researcher is accountable for relating all the changes that occur and how these changes lead him or her to conduct the study. The basic concern of dependability is whether the development of the study is constant and stable across time, methods, and researchers (Lincoln & Guba, 1985; Marshall & Rossman, 2006; Miles & Huberman, 1994)

I employed several elements of Miles and Huberman's (1994) work that will contribute to the dependability of this research. These elements will include, but not be limited to the following. First, the study's design will be congruent with clear research questions. Second, committee members will review and approve the research, and third, the role of the researcher will be explained in the study.

Confirmability. This criterion is met if others can follow the research methodology, data collection, and data analysis methods to substantiate the findings. The findings should focus on the participants and the nature of the investigation not the researcher's own biases and assumptions. In quantitative research, confirmability is akin to objectivity, which is sometimes called external reliability. Objectivity, in qualitative research, means that the findings are objective not that another researcher can confirm the findings as in quantitative research (Lincoln & Guba, 1985; Marshall & Rossman, 2006; Miles & Huberman, 1994).

The following strategies, suggested by Lincoln & Guba (1985), were utilized, in this research, for limiting bias in the interpretation of the data and strengthening

confirmability. Member checking is a process where the views of participants in the study are elicited about the data and conclusions. This process allows bias to be ruled out because the participants review their own interview transcripts, and any misinterpretations can be corrected. In addition to member checking, my committee members will perform a critical evaluation of the findings to check for any possible biases. Two sets of notes were taken during the interviews, one with description, and another with personal reactions and provisional categories for coding.

Data Analysis

Transcribing the interviews. I digitally recorded all of the interviews of the participants. After the first interview was completed for each participant, I transcribed the recordings by using a digital voice manager program and a word-processing program. The interview for each participant was transcribed prior to his or her next interview. This allowed the participants to review their transcripts for accuracy. This is a process known as member checking. This process also helped to illuminate any potential biases or preconceptions about services provided to foster youth I may have had going into the study.

Reducing the text. In-depth phenomenological interviewing creates massive amounts of text. It is important to reduce this text into what is most important and of interest to the researcher's inquiry (Miles & Huberman, 1994; Patton, 1980; Wolcott, 1990). In effect, reducing the text is a process of inductive analysis (Patton, 1980). Patton explained, "Inductive analysis means that the patterns, themes, and categories of analysis come from the data; they emerge out of the data rather than being imposed on

them prior to data collection and analysis” (Patton, 1980, p. 306). Reducing the text must be performed inductively without trying to test a hypothesis or generate a theory.

Seidman (2006) recommends that the researcher examine the transcripts with an open mind to find what surfaces as significant from the text.

Reading the text and indicating the interesting phrases with brackets is the first step in reducing the text. This part of the research process is subjective. Each research topic is saturated with its own areas of interest that will emerge from each transcript. The researcher’s experience and knowledge of the research topic will help to identify the categories of interest for that study. The researcher is encouraged to err on the side of inclusion. When the data are reviewed again, material can be excluded at that time (Seidman, 2006). I was able to exercise my judgment in determining what was significant from each participant’s interviews based on my knowledge of the foster care system.

To manage the data in this study or reduce the text, I engaged in a process of coding each of the interviews for themes. More specifically, I engaged in open coding, axial coding, and selective coding (Glaser, 1992). Through this process, I was able to identify salient themes across all of the participants’ experiences and develop theoretical assertions.

Narrative profiles. Seidman (2006) suggests that by creating profiles of the participants’ interviews is one way of sharing the participants’ experiences. Profiles allow the researcher to “present the participant in context, to clarify his or her intentions, and to convey a sense of process and time, all central components of qualitative analysis”

(p. 119). A profile contains a beginning, middle, and an end, and typically has some type of conflict and resolution in the participant's experience. Creating profiles is a chronological procedure. Interviewing allows the researcher to gain a deeper understanding of the participants' experiences as voiced through their interviews. In order for the participants' consciousness to be reflected, it is important to use their own words when creating a profile. Brackets were used to identify the words in the narrative profiles that are not that of the participant. I have inserted these words for clarification or transitions between sentences or paragraphs. Omitted material is indicated in the narrative profiles by the use of ellipses.

Seidman, and other researchers (Creswell, 2003; Kvale, 1996; Wolcott, 1990), have recommended using the first-person voice of the participant when designing the narratives or profiles. Using a third-person voice distances the reader from the experiences of the participants. Third-person allows the researcher to intrude into the reader's experience of the participant. It is important to be very accurate when using the participants' words when creating their profiles, and it is important to identify the words of others when used in the profiles. Through the coding process I engaged in with the interview transcripts, I also developed what Seidman refers to as "thematic connections" (p.125). Seidman explained this approach as a more traditional way of analyzing and presenting the interview data through categorization of sections from the transcripts.

Summary

In this chapter, I presented the research design and data collection methods. The purpose of this research was to understand the experiences and perceptions of former

foster youth when they transitioned to independent living upon aging out of the foster care system. This information was collected through in-depth phenomenological interviews from each of the four participants. Narrative profiles for each of the participants were constructed and are presented in Chapter 4 along with the findings of this research.

Chapter IV

Findings: The Complex Process of Transitioning Out of Foster Care

Open and Axial Codes

Through engaging in data analysis, I discovered numerous open codes, which I developed into the following axial codes: (a) academic skills, employment skills, life skills; (b) feelings about leaving foster care; (c) externalizing behaviors in foster care; (d) attachments, siblings, foster care staff, friends; (e) years living in care, multiple placements, living in foster care vs. living with biological family. [Please see Appendix F for a detailed explanation of the open codes and the way I clustered them into axial codes.]

Selective Codes and Findings

From the axial codes described above, I developed selective codes consisting of four distinct findings: (a) skills for independent living; (b) experiences transitioning out of foster care; (c) emotional attachments; and (d) retrospective insight. From these selective codes, I developed the following assertions which comprise the basis of my findings for this study: (1) the participants in this study felt the majority of skills needed for independent living were not learned entirely through the PAL program, in a systematic or useful manner, but rather somewhat whimsically from their foster/house parents or other trusted adults; (2) the participants in this study noted the process of transitioning out of foster care was an abrupt learning experience filled with fear, failure and difficulties, which hindered their ability to be self-sufficient immediately upon leaving care; (3) the participants in this study felt that, despite their externalizing

behaviors when they first entered care, they were able to form a trusting relationship with at least one adult while they were in foster care, which provided them with individuals to help them during their transition to independent living; (4) the participants in this study felt that despite all the difficulties they encountered in foster care they had a better advantage growing up in foster care than with their biological families, an advantage that has placed them on a different path in life.

Narrative Profiles

I illustrated these four findings through the following narrative profiles crafted from the participants' interviews (Seidman, 2006). These profiles represent the lived experiences of four young adults who transitioned out of the foster care system. They reconstructed and shared their difficulties during their transition from childhood to adulthood. They also shared their feelings about aging out and allowed us into their lives, even if just for a few moments. Every year, there are thousands of children all over the world leaving the security of foster care, the only life some of them can remember, and moving into adulthood. A place that can be uncertain and even frightening at times, but in the case of the participants in this study, also full of hope.

Narrative Profile of Noli. I came to CPS when I was three. I moved to five different foster homes until I reached [my final foster home]. My big little brother was with me and we stayed at that foster home until I was five. My first CPS caseworker told us that we were going to go meet our brothers and sisters and have a visit with them. Little did we know that we were staying at [the residential group home]. I stayed [there] for about 13 ½ years. . . .All six of us were there together. . . .

Turns out, I have had about seven caseworkers at the group home and at CPS I have had about eight caseworkers. So that is a lot. House parents I've had [about five]. The first ones I had were strict and mean. I had them until I was 11. Then I had another set of house parents. We got along pretty good. They did a lot for us.

My sister left when I was 13. She went to rehab. That was hard for me when she left because she was like my mom. . . . That was the only person I knew really and that I could depend on. . . . When my sister went to rehab, it made me, like . . . whatever, I don't care anymore. Then she came back and got move to another home and then our house parents got fired.

Then we got a new set of house parents, which I didn't like, so from there I just had a rough life when I had them. . . . When I was with them I would do bad in school. I wouldn't do homework. I would get in trouble with pink slips at school. I started running away during the summer. I would run away every day with some of the other girls . . . I just did that because I did not like my house parents. I told my previous house parents, that if they ever quit or got fired that I was gonna runaway or be bad and I kept my word. I sure did. . . .

I got put on probation for running away so many times. I had a couple of fights with some of the girls in the house . . . I would skip school. Me and one of the other girls got put in STAR for skipping school . . . for about three months. When we got done with the three months, I was out for about a week. I went back to PROJECT, which was the second part of STAR because my drug test was positive. I stayed there for about a semester. I went back to my middle school and still did bad. I didn't care, didn't do my

work. My house parents got fed up with me and asked their boss if they could move me to another home because I was a negative role model for all the little kids in the house. I really didn't care because I would do whatever I wanted. I just gave up on life once I got kicked out of that home.

I got moved to another home at the group home with another set of house parents. Everything was going good there for a minute and then the female house parent was nothing but a liar. . . . At that time, I was in high school when I started living in this home. I ended up fist fighting her husband because he put his hands on me. They eventually got fired and then we got another set of house parents.

My house parents sat me down and told me that there was really no rules but to respect yourself and everybody respect you. The male house parent made me cry the first day that I was there. He was like, "I know you've had a rough life, I don't know you, this is my second time meeting you, anything you ever need . . .," he said that he would be there. . . . The house parents started reading the Bible to me and started telling me . . . that everything was going to be okay, and that everything happens for a reason. Then after that, I straightened up and I finished my 11th grade out over there. They helped me find my first day care job and I really enjoyed working over there.

I got really, really close to them, so when I was leaving the group home I had a nervous breakdown months prior to my leaving and I didn't want to go. I was telling the female house parent over and over that I didn't want to go because this is the only place I know. This is where I feel safe. I might . . . act like I'm tough but deep inside I'm really

not tough, I'm really sensitive. I made it out of the group home, but life over there it's hard. Growing up in CPS is hard. . . .

Now that I'm out, the only thing that I've learned in CPS is life is hard, but ya have to work through it and everything just works out itself. I was okay being at the group home, but the only thing that made me go crazy was the different counselor changes, the different house parent changes because once you get close to somebody they ended up leaving. I was the type of person who tried not to get close but anybody I know and I can trust, I'm going to get close to, but it's harder for me because once I get close and you leave, it's harder for me to trust someone again because you can never, hardly ever, find someone you can trust.

It was hard for me growing up [in foster care] because I had so many caseworkers, counselors, and house parents. I saw so many kids come and go that I wished that I could go home with my parents or I could go home with a family member that loved me, but I grew up in CPS and I got out when I was 19.

There were only two sets of house parents that I really got close to while I was in care. There was only one CPS caseworker that I got close to and still talk to. . . . Out of the regular office staff in the group home there was a secretary that I got close to and I still am close to her today and we still talk. I was close to one female clinical staff and then I got close to two of my counselors. The whole time I was growing up, there was only five people that I can say that I got really close to and was able to trust them. It is still very hard for me to get close to anyone and I haven't. I am still close with those five people. I am closer to those five people than I am anybody in my family. I owe it to

those five staff members who helped me get through CPS care and aging out of care. Without them, I would not have made it. I would have probably been off in another town doing something bad.

While I was in care, I was referred to the PAL program when I was 16. At the time, I could not make all the meetings because I was in volleyball and track at school and sometime I just didn't want to go. It took me almost two years to finish the program. Then I started working and I could not miss work just to go to a meeting. I can't say that I learned anything from them because I really did not pay attention when I went because I was texting or talking or I would get sent home because I was being rude. Fortunately, when I really needed the information after all the classes were finished, the PAL coordinator really helped me . . . and we would do PAL just by ourselves. . . .

The one thing that I learned from the PAL program was budgeting money. I am able to budget my money and pay my bills by the due date. The PAL program also showed us how to get an apartment . . . There was a day when the PAL coordinator took us to a car dealership and we looked at cars and learned what was needed to buy a car . . . Overall, the group home taught us a lot, but I just didn't pay attention to all of it. I only paid attention to the parts that I thought was interesting. I wish I would have paid attention to all of it and cared about it the first time. It would have been so much easier.

I transitioned from foster care to independent living when I was 19. I graduated high school on January 8. I moved out of the group home on January 13, and that was when I moved into the dorm at a junior college. It was really hard for me to leave the group home. A few months before I left, I had a nervous breakdown. I just kept on

saying to my house parents that I did not want to leave. On New Year's Eve, I talked to my house parents about leaving. I remember crying and crying and telling them that I didn't want to leave. I was too scared and I couldn't do this. I was at the group home for most of my life. That is what I knew, where I felt safe and I called it home. . . . My house parents really helped me through that.

When I moved into the dorms, I really didn't do anything. [Two staff] from the group home basically set up my dorm room. I really did not do anything at all. I just sat there and watched them. . . . For the first semester, I went full time but I did not finish that semester because I dropped out. Well, I got in trouble. Well, I didn't get in trouble, my sister got into a fight with my roommate and that caused me to be on probation at the school. Then I was put on academic probation, so I just finally gave up. I just gave up on life. I quit everything. I quit my job. I quit school. I quit talking to everybody and I was like I can't do it. . . .

When I left college, I went straight to my sister's house and I stayed there until about the beginning of June. Then I got back into foster care. . . . I stayed there for about two and a half months because I wound up getting my own job. . . . I worked and went to school. I did night classes so that helped me a lot because I still wanted to do a job and go to school part-time. I wound up getting a house with one of my friends. I didn't keep the house too long because I wound up quitting my day care job, we couldn't pay the bills, and that is why we moved. . . .

When I quit that job I went to my sister's again and I stayed there for about six months and then I finally told her that I couldn't take anymore of her crap so I left and

went with my other friend. It took me about two months after I left my sister's house to find my own apartment and get another job. I am currently employed at another day care. I have had about seven total jobs and the last three have been in day cares. . . . Dropping out of college was a very stupid thing to do. It was the dumbest thing I've ever done.

A typical day for me when I was going to college was that I would wake up at 7:00 a.m. and go to classes from 9:00 a.m. to 12:00 p.m. Then I would go to lunch from 12:00p.m. to 1:00 p.m. and then I would finish my classes from 1:00p.m. to 3:00 p.m. Then I would go home and do activities with one of my friends. We would go to the basketball games and do other things. Now that I'm not in college I just get up and go to work at the day care. I get the weekends off and I usually spend some time with my brothers and sister and my friends.

Growing up in CPS was my life. It was all I knew. I didn't know much, but I managed to graduate from high school and attend a couple of semesters of college. I would have to say that, for me, leaving foster care, in the beginning was a scary thing for me 'cause I felt like I was leaving my safety net. I felt like I wasn't ready to leave. I still felt like a little girl who needed somebody telling her what to do. I was scared. I cried hard before I had to leave.

Now that I'm out and I talk to my family members they would tell me that they knew we were in CPS and they would try to get us or talk to us, but the caseworkers would not let them. . . . I can't say that life would have been better if I was with family members or my mom and dad, but I can tell you that it would have been different.

I'm glad that I grew up in the group home because if not then I would not have found the people that really care for me and showed me how to live by God's way. I would not be the person that I am today. I think that I would have been a very different person today if I would have lived with my family. Probably not a good person, but a very different person. Sometimes, I wish I would have grown up with family members that way I could see what a different person I would be. But, this is the life that I had to go by.

Narrative Profile of Becca. I was first put into care when I was three years old. I was put into care basically from my parents not being there. There was alcohol and drug abuse. It was me and my two sisters and my four brothers. We were all split up and put into different homes. I was put into a temporary foster home until I was five. My sisters and my brothers went into a [group home] and basically I stayed at the first foster home until I was five ready to start kindergarten. Then when I was reunited with my brothers and sisters at [the group home] I was in the same home as my sister. . . . I was not able to complete the first grade year so I had to go to summer school. . . .

At the group home, as far as caseworkers were concerned, I had about eight. I had some that would get my case and then once we would get to know them then they would pass our case to someone else. That happened quite a lot. . . .

I stayed in the group until I was about 10. . . . Later on during the school year my sister, when she was about 13, got placed in a foster care home with [a foster family]. That was very hard for me to take in because it was just me and my brothers now in the group home. Through that time that gave me a lot more time to get closer to my brothers.

. . . The summer before I was about to go into fourth grade I moved in with the [same foster family]. It was a very big transition for me. My brothers did not take it very well. But, after a while they did understand why I wanted to go and live with my sister in the foster home.

When I got to the foster home, for a long time I was having lots of problems. I would have lots of temper tantrums. I missed my brothers. I would go into depression and I had a hard time trusting anyone. There were times when I would not talk to anyone.

When I started school, there were times when I would leave school because I felt like they were going to hurt me. I was basically afraid of everything, bugs, dogs, dark, people, everything. The foster dad really helped me with a lot of my fears. They helped me a lot with everything. They tried to make our lives as normal as possible. I was with them from fourth grade until I graduated from high school.

Starting my sophomore year, I failed a TAKS test, and I did not get to graduate with my class. It was very hard for me to accept. I got really discouraged and almost gave up on graduating and thought that I would never pass the TAKS test. At one time, I was just going to give up and go take the GED, but I was afraid that I wouldn't pass that either. . . . I eventually passed the test and graduated from high school. As far as counselors, I had three different counselors. . . .

My [last] counselor and foster mom really helped me when it came to getting my driver's license. They believed in me and helped me to believe in myself, and I finally got my driver's license. I was already 19 [years old] when I got my driver's license.

I attended the PAL program. I started it when I was 15 [years old]. We learned how to do checks, how to do independent living. The PAL coordinator and her assistant were very helpful in teaching me about skills to live on my own. Things like budgeting, how to write checks, a little bit about cooking, some skills on parenting, what to look for when buying a car, and some things about credit. My foster family did the most in teaching me about living on my own. We would have chores to do in the home and that helped us learn what we needed to do.

As I look back over my time in foster care, and seeing my family now, I think that foster care was a good thing for us because I would have been in a very different place now. Not a very good place. . . . We got a lot of help from our foster parents and they taught us things over and above what the PAL program offered. Information I learned from the PAL program helped me, but what I learned from my foster parents is things that I use every day. I think that if I wouldn't have had the additional information from my foster parents, I think that it would be a lot harder for me when I aged out of care

I think that the stability in the foster home that I had also helped me in building trust and relationships with adults. I feel lucky as I only had three placements while I was in care, the first foster home, the group home and then the final foster home. I found out what unconditional love was from my foster parents.

I aged out of foster care when I graduated high school when I was 19 [years old]. . . . I stayed there for a few months and then I moved out of the foster home and moved in with one of my friends for a couple of months because I wanted to have more fun and freedom. Then I moved in with the foster parents' daughter for a few weeks till I got out

on my own for about three months. Then I realized that it was very hard and that it is like a battlefield out there in the real world. I am very lucky that after I found out that I could not make it in the real world that the foster parents let me move back into their home. . . .

At first, I thought it was going to be very easy, but living on your own is a very hard thing. I just wanted to do it all on my own without their help in the beginning. I had a lot of pride and when I failed at living on my own it was hard to accept help from my foster parents again. Living on your own is a huge transition especially when you are in foster care. You realize that you don't really have anyone but your prior foster parents and I had my sister. It was not looking very good for me, I started jeopardizing my college, and I needed my family. That six-month transition was very hard. I wanted to make it on my own, but I had to move back in with them.

I am currently working at a discount department store, and I started working there before I aged out of care. My first job was working at a fast food place because my sister worked there, so she got me a job there. I worked there until my sister left and went to another fast food place and then I started working at that fast food place. I worked there until I got my job at the discount department store. I really like this job a lot better and I am making more money. One thing that I really learned from my foster parents is about saving money. . . .

I was put in the aftercare program when I aged out of care. That program would match the money I had when I want to buy a car. I attended a local Jr. College. When I

moved into my own apartment, the program paid the deposit and helped a little with the rent. . . .

As far as being back in the foster home, I am not as stressed now. I was always worried about the bills and transportation. . . . I feel like I understand what it takes now to live on your own, but I am still growing up and learning.

When I was living with my roommate a typical day would be to go to classes then I would go to work. I would spend some time with her, but we had alone time and would study. Transitioning out of the foster home to an apartment with a roommate was very hard, but being by myself was even more difficult. I really did not think it would cost as much as it did and sometimes I did not budget enough money for food. I am not going to be in a hurry to move out again. I am learning more about living on my own and I am accepting help so that I can stay in college and work towards moving out. I wanted to move out to have fun, but the fun turned into worrying about bills and getting a ride to classes and work. So, the next time I move out I will be able to make a better choice. I will save more money. I know what bills to expect and what area to look for a place to live.

As I look back, I think to myself that as a person being in care I was always ashamed of whom I was. I was very weak and I did not have much faith in myself when I was in the group home. . . . When I was in care I always felt very weak, small and less important. I was always self-conscious of the way I was. I know now that I am strong, and I am important. I can look back at my mistakes and realize that I have learned from them, and it has given me the strength to move forward and follow my dreams. It is

important to realize whom you are, finding yourself and knowing that you can do something. Not looking at the negative and that it is okay to make mistakes, you learn from them and then move on. There have been people in my life that have taught me things about myself and have helped me to grow to be who I am today. It is important not to take in all the negative. It is important not to allow your past to be your present and ruin your dreams. I am a lot more strong minded and I don't allow all the negative things bring me down. . . .

Being in foster care was a very difficult place to be in growing up, but all the trials that I went through and all the people that I had around me. . . . because of all of that it makes you who you are. It shapes you up, you build character, and it makes you a stronger person. I always thought that before I moved into the foster home that other people looked at kids in care and thought they would not make it in life, that they would quit school, get hooked on drugs and this and this and this. I always thought that "Oh, we are just in care and its more shame". But now, I realize that I don't have to have shame. I love to see people happy and make it in life. When I look back at pictures of my life when I was small, I see someone who is small and fears everything. Now I don't fear the same things I did when I was small. . . .

So overall, I see being in foster care as a way of me growing up and becoming a strong woman, overcoming my fears, learning to talk and share, a place to grow close to God, and learn about life. I see it overall as a positive experience because if I would have continued living with my biological family, it is really scary to think where I might be. I have learned how to work through challenges and not run away from them. I am teaching

myself to be a stronger person and to have faith in myself. When I was in care, I used to be so afraid of what others thought about me. Now I don't worry about it. I have hopes and dreams. . . .

Narrative Profile of Jacob. I was in foster care for 11 years. My first placement was at an emergency shelter. I stayed there for the maximum of three months, and then I was moved to a children's home to a group home. My behavior was bad when I first arrived, but that got better after awhile . . . and I learned to follow the rules. . . . I can't say that I had a fun time being there other than when we went on vacations in the summer. . . .

They [house parents] really took on the role of my mother and father. . . . I had only two CPS workers and three caseworkers at the group home, and I had four counselors. I think that the house parents really taught us a lot about how a home was run. . . . I think that having the same house parents for 11 years really helped me to adjust and it was like a home. I was in one place and I knew what to expect from them and the group home staff. I could talk to my house parents about anything and they really helped me and taught me a lot and helped me grow up. I was seven when I was put in the group home with my house parents.

I was referred to the PAL program when I was about 15 or 16 [years old]. I would go to the classes weekly. . . . They taught us about how to do a budget and save money. They showed us how to fill out job applications and apartment application and how the city bus works. Some of the kids in the classes didn't really pay attention. I tried to pay attention.

My house parents told me that these classes were offered to help me when I got out of care and that the classes were important. I feel like I learned some things in the classes. I can fill out a job application and I have had four jobs since I was 17 [years old]. They talked about the financial assistance and college. They talked to us about how to find a good doctor and keep up with our medical records and go to the doctor. They talked to us about how to choose a major in college and getting into a career. The PAL program was helpful and you could learn some stuff if you went to the classes and paid attention to what they were saying.

I wish that I would have been able to get my driver's license. I still don't have them, but when I was at the group home I went to driver's ed classes and they paid for it, but I did not pass the driver's test. I'm really hoping that I can take it again someday and pass. I think that the group home did the best they could to prepare us for the real world. It was up to us to learn it and put the information to use for us.

I graduated from high school in May and in August, I started going to a Jr. College. I stayed in the group home over the summer until I started at the Jr. College. I only went to college for one semester. . . . My brother and I moved into the dorms. After that semester, we quit and moved in with our biological mom. . . . After a few months, I really got tired of living with her so I moved back to the larger city where I grew up. . . .

I am working at a restaurant now. I have been there for two years now. I have had three other jobs. I worked at another restaurant and two grocery stores. . . .

The transition out of foster care was very hard for me. I moved to the dorms and then I moved in with my mom and then into the real world. It was a lot harder than I

thought it would be. You gotta learn to do things on your own. There's no one there to do it for you anymore. No one is telling you what you gotta do and when to do it.

When we went to college, we got a big storage trunk from the agency group home. It was full of stuff that we needed. Overall, I think that I transitioned well out of foster care. I like being out of foster care. I have more freedom and can do what I want, when I want. . . .

When I moved into the apartment, I got help from the program to pay the deposit. Right now, all I really do is work about 40 hours a week. I have different work times each day, but Monday is the only day that I work late. Other than that, I just hang out, listen to music, surf the internet, play video games, watch TV, talk to my roommate, and do my chores.

I think that my house parents taught me the most about growing up and being responsible. I know how to do chores around the apartment and do my laundry. I don't always like doing them, but I get them done. Right now, I kinda got a boring life. I wish I would have had a better understanding of how much things cost when you're on your own. When I was at the group home, I did not have to pay for anything. . . . I did not realize how much it would cost to actually live on your own, buy food and pay rent and pay bills. Sometimes I think that it is hard to survive on your own, but I wouldn't trade it to live in foster care again or live with my mom again.

I think that my experience in foster care was pretty good. I was there for 11 years, which was longer than I was with my family. I know that what I learned from my house parents has helped me more than anything.

Moving out of the group home to the dorm was difficult, but it was really hard to move back in with my mom. . . . I think growing up in foster care gave me a better chance to have a better life. When I was with my mom after I got out, I felt like I was getting depressed. She is not a happy person, and I felt like I was becoming just like her. That is when I knew I had to leave and move out of that town. . . .

I have a job, and I am responsible at work and paying my bills. I still don't have my driver's license. I have to get a ride to work. Sometimes I take the bus or walk if the weather is good. I always make it to work when I'm scheduled. I know that keeping that job is part of my freedom. What I mean is that I can live with my roommate, pay bills and not have to depend on others for money or go back and live with my mom. It's bad enough to depend on someone for a ride, but I'm hoping to change that soon. I think that if I would have never been taken from my mom that I would not be where I am today. I think that I probably would have been bumming around, depressed and not have a job, living with my mom and drinking. That really makes me sad to say that, but I really feel like it's the truth especially after going back and living with her for a few months. I think that I'm better off now than where I could have been if I would not have been taken away from my mom. At this point, I don't regret growing up in foster care, but I really wish that things could have been different with my mom and dad so that me and my brother and sister could have stayed at home.

Narrative Profile of Raymond. I entered foster care when I was 13 years old cause my mom used drugs and my dad was in prison for making and selling them. I had two younger brothers. One was eight and the other six. They went to live with my aunt

and uncle, and I went to a group home. At the time, I didn't understand why I couldn't live with my aunt and uncle, but now I know it was because of my anger. I was mad at my dad for leaving us and mad at my mom for not being there for us. I had to do everything for me and my brothers. My dad went to prison right before my baby brother was born and my mom just couldn't keep it together by herself. My aunt would help her and would sometimes keep me and my brothers, but I hated being there cause I always worried about my mom. I just remember her always crying.

When I first got into foster care I would see my mother and brothers at least once a week, but after about a year she stopped coming and then I didn't get to see my brothers as much. I got even angrier. I was getting in trouble at school. Nothing major, but it seemed like I was always in the principal's office for stupid shit. I didn't really learn anything after the eighth grade, and I don't think I would have graduated without my best friend's help. I left care the day after I graduated.

I went to the PAL classes, well some of them. I think I was 16 [years old] or so when I started going. My group home caseworker and CPS caseworker told me that I had to go. They kept talking about all this stupid adult stuff, like money, getting a job, going to college. I skipped most of them because it was just like school. To me it was just another person telling me what to do. I was not mentally prepared to listen to what they had to say. All I could think about was leaving that hellhole, and I didn't care how. . . . I don't really remember anything that they said in those [PAL] classes. I do remember that they wanted us to learn how to fill out job applications and talked to us about a budget. I didn't have any money, so who cared about a stupid budget. I wanted to learn how to

drive, but they [group home/CPS] wouldn't let me. Said that I wasn't responsible enough. . . .

I ran away a couple of times, but then my CPS caseworker told me that if I ran away again that I was going to have to go to an RTC. That was one place that I didn't want to go because there was this kid who got out from one, and he came to the group home where I was. I remember him telling us horror stories about that place. So, I decided to not run away again....

My caseworker at the group home tried to talk me into staying a few more days so that I could have 'a plan'. I told her I had my own plan and that was to leave. When I left the group home, I went to my friend's house. Before I got put into care, he lived down the street from me, and we went to school together for about four years. Him and his parents moved close to the school where I was going, and we met up again. His parents were cool, and they let me stay there for a while. His mom was cool. She owned a business and let me and my friend work there. She helped me get my driver's license. I managed to save some money with her help. She would take money outta my paycheck and put it in a savings account. I saved enough to buy an old used car. My friend's parents, especially his mom, helped me get on my feet when I left the group home.

About four to five months before I left the group home I found out that my mom and dad's rights were terminated when I was 15 [years old]. My dad was still in prison and my mom died by overdosing on drugs. My caseworker at the group home told me my aunt and uncle adopted my brothers and they moved outta state somewhere. That explained why my aunt stopped bringing my brothers to see me. I didn't even care to

find them. I figured if they did not want me or want to keep in contact, then why should I look them up.

My attitude was really, really bad. Looking back, I am surprised that my friend's mom and dad put up with me and my shit. But like I said, they were cool. My friend's mom made me pay her \$200.00 a month for living there. That included my rent and food. I had to pay for my gas and car insurance and my personal stuff, but it was a good deal. I didn't have any health insurance. I guess I was lucky that I didn't get sick that much or break anything. If my friend's parents wouldn't have let me stay there I don't know where I would have gone or what I would have done. I didn't know much, and I was damn lucky that she hired me and gave me place to live. I didn't plan on staying there long. But, I needed money so, I took the job she offered and it really helped me grow up some.

I had rules there, but they were nothing like the group home rules. I hated that place and everyone associated with it. I think that I somehow blamed them for me being there. I stayed to myself and didn't participate in anything with them. Looking back, I can see that they tried to reach me, but I wouldn't have it. I didn't want anything they had to offer. I didn't care about anything or anybody. There were way too many people telling me what to do and what not to do. I didn't make any friends while I was in the group home. When I first went into care, there was this one staff that was cool, but then after about seven months they left. It was hard, as I didn't make friends with any of the other staff. I was a real loner.

Looking back, I guess I can see that if I would have listened and participated in the PAL classes that I might have learned something. I just learned how to be angry while I was in the group home. I had three different counselors, but I talked around my feelings and problems cause I didn't trust anybody. I didn't really learn anything from the group home or the programs cause I didn't care to listen. I guess I give all the credit to my friend's parents for teaching me about my job, saving money, getting my driver's license, giving me a place to live back then and how to pay bills.

My friend's dad drove a truck and knew how to work on them. He taught me and my friend a little about working on cars and trucks. That comes in handy sometimes. Looking back, if I had to do it all over again, I would try to learn some stuff from the program and maybe it would of been easier for me.

I don't know if I could of let my anger go back then. I was too young to understand all of what was going on and of course, nobody told me what was really going on with my mom. I mean I knew she used drugs, but I always thought I would go back home with her and my brothers.

Well, my life is different now than it was when I left the group home at 18 [years old]. It's been about six years now since I left. I spent about two years with my friend and his parents. Not sure how it lasted that long, but they were cool and like a real family to me. I got into a fight with my best friend's dad and he kicked me out. The mom, well she stuck up for me, but I still had to leave. I didn't want to make it tough for her cause they were fighting some. I told her I would find another job cause I didn't want to cause any more problems.

My friend was wanting to get outta his parents' house and get his own place, but he had to get some money together first. I told him when I got a job that I would split the rent with him. He said that would be great so we kept in touch.

He stayed working for his mom and I left and spent a few weeks sleeping in my car. I guess you could say that I was living outta my car. Before I moved out of my friend's house, I met this girl, we kinda hung out some, she let me sleep over some, and take showers. . . . I got a job the fast food place where my girlfriend was working about a month after I quit my other job. . . .

My friend came into the fast food place one day where I was working and told me that he was moving out that next week and asked if I wanted to share rent like we talked about. I told him sure, and I moved in with him at the first of the month. We could only afford a one-bedroom place so I slept on a mattress on the floor in the dining room area. We couldn't afford a table (laughs)! It was better than sleeping in the backseat of my car or at my girlfriend's place. I worked at the fast food restaurant until my girlfriend broke up with me. My friend's mom knew this guy who worked at this store and she helped me get a job there. That job lasted for about 8 months then I was looking for a job again. So, I started working for my friend's mom again. I worked there about two years cause I already knew the job and what I was supposed to do. . . .

When I started working for my friend's mom again, she told me I needed to learn a trade, so I could make better money. I decided to try auto mechanic school. I made some calls, talked to the man in charge, and got it set up so I could start mechanic school. I worked for my friend's mom while I went to mechanic school. I finished up there and I

surprised myself. I did real good in mechanic school. Things just sorta clicked with me. I got it and it stuck. I've been working for this dealership as a mechanic for almost two years now. I got health insurance and regular work hours now. It's long hours, but it's okay. I was able to save money and get a newer car financed and me and my friend live in a two bedroom apartment now with a dining room table (laughs)! . . .

[My friend's parents] encouraged me to go to mechanic school and stick with it. My friend believed in me more than I did at times. I didn't go back to the group home for help. I felt like I burned my bridges with them, and I know they really didn't care. They were just doing their job. My friend and his parents cared. Things are better with my friend's dad and have been for several years. We have something in common with me being a mechanic and all.

So now, my days consist of me going to work from 7:00 a.m. to 4:00 p.m. I get up eat breakfast, work on cars, take my lunch break and when I get off I come home and take a shower and then get something to eat . . . and watch some TV, then I go to bed. It starts all over again the next morning. I have a pretty boring life (laughs)! Overall, I still give credit to my best friend's parents and him for helping me out. They were there for me and like my family. . . .

I think I'm at a good place in my life now (short pause). Looking back over the last 10 years or so, I can see that I have come a long way from an angry boy to a man with responsibilities. . . . I don't wish any kid to go to foster care cause that means that they may not get out, I mean like me. I stayed in for a little over five years, and it took me several years to get my act together and grow up some. . . .

When I got out of foster care, I was lucky to find a family that would put up with my shit (laughs)! I've told them I was lucky to have them in my life. I knew them before I went into care and they knew my mom and the situation. I think they really cared and wanted to be there for me cause they knew I didn't have anybody else. It was hard for me to open up and talk when I was in care cause I had so much anger, but I know I was really scared and missed my brothers and my mom. I felt like I was all by myself. I just put this wall up around me. I've let it down some and I have my best friend and his parents to thank for that.

I think, for me, being put in foster care changed my life . . . first in a bad way and then now I hope it will continue to get better. I lost my family and I can never get my mom back. My middle brother is 19 [years old] now and my baby brother is 17 [years old] and graduates from high school this year. A couple of months ago I found out where my dad is in prison at and he gets out next year. We have written a few times. He told me that he has been keeping in touch with his sister. That is my aunt that has my brothers. He told me that my aunt feels bad that she couldn't take me, but that they tried to contact me when I graduated but that I had left, and the group home didn't know where I was so they did not have any address to give her. I guess I messed up there. I was just so ready to leave that hellhole that I had to get out fast.

Summary of Findings

Through their narratives, these four participants identified several common observations about their foster care experience and their transition into independent living. The most disconcerting observations dealt with the inadequacy of formal

preparation for independent living, which contributed to these young adults' lack of self-sufficiency upon leaving foster care. The observations from this study's participants that were encouraging included their ability to develop and maintain a trusting relationship with an adult, and their ability to turn to these adults for support, especially when they aged out of the foster care system. Another heartening observation was their realization that growing up in foster care placed them at an advantage when compared to growing up with their biological families.

Chapter V

Discussion and Implications

The findings of this study clearly answered the three research questions this study sought to gain insight into regarding the perceptions of former youth in foster care. In particular, this study highlighted the fact that youth who aged out of foster care found the process difficult, which hindered their ability to be self-sufficient immediately after leaving care. From this broad finding, the study also revealed that the youth felt like they did not obtain the majority of the information they needed for self-sufficiency from the PAL program, but rather somewhat whimsically from their foster/house parents or other trusted adults. The findings from this study also revealed that despite the participants' externalizing behaviors (defiant, aggressive, and rejecting) when they were first placed into foster care, each of them were able to form a trusting relationship with at least one adult while they were in care, who assisted them after leaving foster care. The fourth finding, from this study yielded unanticipated information. Participants were able to look back over their lives in foster care and acknowledge that growing up in foster care was not as bad as they thought at the time and that growing up in care has led them down a very different path in life when compared to the current lives of their biological families. In other words, through the process of participating in the in-depth phenomenological interviews participants were afforded the opportunity to reflect on this aspect of their life and develop a new, positive perspective about their child and adolescent experiences in foster care.

All four participants met Fraser, Richman, & Galinsky's (1999) definition of resilient. Each of them were exposed to risk and adapted and overcame the risk allowing them to have a successful response to their situation. According to Dent & Cameron (2003), individuals develop resiliency when they understand the adverse circumstances they experienced. The four participants understand their life history and the adverse situations they faced. They were able to recount their adverse circumstances and know that others had experienced similar situations. Additional research on resiliency defines a resilient individual as one who has autonomy, social competence, the ability to solve problems, a sense of purpose (Werner & Smith, 1982), social support, future goals (Hass & Graydon 2009), an easy temperament, a positive self-image, and social skills (Fonagy, Steele, Steele, Higgitt & Target 1994). During my interviews with each of the participants, I could see that each possessed many, if not all, of these characteristics of resiliency.

In what follows, I discuss the four salient findings arising in this study in light of current research in the field pertaining to the following issues: (1) foster care perceptions and experiences; (2) acquiring skills for independent living; and (3) emotional attachments.

Foster Care Perceptions and Experiences

Perceptions of living in foster care. One of the findings from this study I did not anticipate involved the profound effect of former foster youth looking back at growing up in foster care and comparing it to the current lives of their biological family. The participants in this study reported unanimously that they felt their lives had taken a

different path and that they are in a better place now than if they would have grown up with their biological families.

In Holland, van der Waals (1960) interviewed 160 former foster youth and asked them to reflect on the successes and failures of their experiences in foster care. More than half of the participants expressed negative views of foster care while approximately 25% had mixed feelings and the remaining participants (approximately 25%) reported positive feelings regarding growing up in foster care. With the exception of the van der Waals study, there are very few, if any, qualitative retrospective studies researching this topic with comparable findings. However, the finding in this research is similar to other findings in prior quantitative studies (Courtney M. E., Dworsky, Lee, & Raap, 2009; Festinger, 1983; Reilly, 2003; Wilson & Conroy, 1999).

One notable example is the Midwest Study (Courtney, Dworsky, Lee, & Raap, 2009). In the Midwest Study, out of the approximately 600 former foster youth interviewed, 377 participants agreed they were lucky to have been placed in foster care and 356 were satisfied with their experience in foster care. In a similar study, Reilly (2003) found positive experiences reported by 100 participants who expressed “satisfaction with the quality of their foster care experience” (p. 738). Factors thought to influence their positive experiences were education, social support networks, number of services received before aging out, topics of training, and number of placements. Despite the positive report, the findings from Reilly’s research also indicate, “a sizeable number were ill prepared to live on their own” (p. 741). The findings from this research relate to

Reilly's findings in that former foster youth consistently felt they were not prepared to live adequately on their own regardless of their positive experiences in care.

Experiences transitioning out of foster care. The findings of this study are consistent with results of previous studies concerning former foster youths' experiences transitioning out of foster care. Namely, this study unearthed the fact that there is no arbitrary timeline for individuals to transition out of foster care. In past years, youth were emancipated from the foster care system based on their ineligibility to receive foster care services due to age or high school graduation rather than on the individual's readiness (English, Kouidou-Giles, & Plocke, 1994; Iglehart, 1994; Sheehy, Oldham, Zanhghi, Ansell, Correia, & Copeland, 2002).

Some former foster youth are simply unprepared developmentally as they exit the foster care system, have a lack of support and are viewed as a burden to the communities in which they live (Courtney M. E., Dworsky, Lee, & Raap, 2009). Indeed the majority of foster youth *struggle* to find their place in society (Wertheimer, 2002). Metzger (as cited in Avery, R. J., & Freundlich, M., 2009) noted in her report that youth who transition out of care contend with massive challenges in multiple areas, and if they would have had support and received services they would have had a better chance for self-sufficiency upon aging out.

Similar to Wertheimer's work, McMillen, Rideout, Fisher and Tucker (1997) found in their research that "leaving care was a tough transition" (p. 477) characterized as "difficult and often abrupt" (p.477) for the 25 former foster care youth participants in their study. Participants reported that they were homeless for a period and some had to

go back to their biological families because they had nowhere else to go. Some participants reported they felt like they were “thrown out,” did not have resources or support of any kind.

In an intervention-focused project, Kroner and Mares (2009), examined the outcomes, from 2001-2006, for 455 foster youth who participated in a pilot project known as the Lighthouse Independent Living Program. Youth were admitted to the project just before their 18th birthday and remained in the program for 10 months. In contrast to other studies, they found that 60% completed high school or GED program, 33% were living independently and 31% had stable employment. Due to the success of the program, in helping foster youth successfully age out of care, it has become a part of the Hamilton County Children’s Services system in Ohio.

Acquiring Skills for Independent Living

Participants in this study felt the majority of skills needed for independent living were not learned in a systematic or useful manner entirely through the PAL program, but rather somewhat whimsically from their foster/house parents or other trusted adults. Extant research supports this finding.

Geenen and Powers (2007) interviewed 88 participants connected to the child welfare system (professionals and youth) to gather information regarding the experiences of former foster youth. They found that the Independent Living Program was viewed as “seriously inadequate” (p. 1098) for preparing youth for adulthood. Similar to Geenen and Power’s (2007) study, the former foster youth participants in Barth’s (1990) study related that their “educational preparation could be improved with more independent

living skills preparation” (p. 426). In Barth’s study, the majority of the 55 former foster participants reported that during foster care, they were not taught independent living skills and 45% reported they thought it was somewhat harder for them, when compared to non-foster care youth, to live on their own.

In another study, Mallon (1998) found that 46 participants received training in 14 areas of life skills. Although the youths received life skills training and the results on their life skills tests were improved, the majority of the youths reported that it was harder to live on their own than they expected. The youth in the study received training in life skills that included money management, housing skills, transportation, legal issues, health care and job seeking skills.

Reilly (2003) interviewed 100 former foster care youths who had been out of care for six months or more. Half of the participants reported that while they were in care they had been exposed to training for independent living, however “few reported receiving concrete assistance for independence or actual services on discharge” (p. 737).

Merdinger, Hines, Osterling and Wyatt (2005) interviewed 216 youth who had emancipated from foster care. In their research, they found that 159 participants felt they were *somewhat or not well prepared* for independent living upon leaving foster care. In contrast, only 51 of the participants felt they were prepared.

Researchers in the Midwest study interviewed 600 former foster youth from three states and found that 75% (453) felt like they were *somewhat to not at all* prepared to be self-sufficient when they aged out of foster care. A little over 200 participants expressed that they did not receive any independent living skills training however, knew that the

training existed. Of the ones who received the services, they wished they could have started receiving the services when they were younger. The skills that were mentioned most needed were money management, budgeting, and assistance with housing and employment (Courtney M. E., Dworsky, Lee, & Raap, 2009).

The purpose of a study conducted by McMillen, Rideout, Fisher and Tucker (1997), was to “explore what former foster youth now living in the community think of the independent living services they received in care” (p.471). In contrast to other studies, a focus group of 25 participants all agreed that the skills classes were helpful. The participants unanimously agreed that the most valuable aspect was meeting peers who were going through the same thing. The participants also agreed that their house parents and the independent living specialists were equally helpful. In contrast, the majority reported their CPS caseworkers were not helpful. The youth also reported that their foster parents taught them skills and were a big support for them emotionally and provided valuable information for them during their transition out of care.

Other studies have focused on topics like using mentors (Ahrens, DuBois, Richardson, Fan, & Lozano, 2008), volunteers (Mech E. V., 1988), and foster parents (Ryan, McFadden, Rice, & Warren, 1988) to assist foster youth in developing the skills they need to be self-sufficient upon aging out of foster care. These studies revealed that such individuals could also build trusting relationships with foster youth that could last well into the youth’s adulthood.

Emotional Attachments

The participants in this study talked about how difficult it was for them to get close to anyone when they were first placed in foster care. As time went by, the participants noted that they were able to overcome those difficulties in some cases, and develop and maintain friendships with adults who served as a great source of support for them as they left foster care.

Similar to my research, participants in other studies also discussed relationships with adults they had met while in care and the significant role they played in their lives. They also discussed the importance the adults had when the participant aged out of care (Ahrens, DuBois, Richardson, Fan, & Lozano, 2008; Ahrens, DuBois, Lozano, & Richardson, 2010; Collins, Spencer, & Ward, 2010).

Three studies have revealed the types of support the adult relationships offered youth in foster care. The adults were a considerable source of emotional support, tangible support, and a support in giving advice and guidance (Ahrens, DuBois, Richardson, Fan, & Lozano, 2008; Ahrens, DuBois, Garrison, Spencer, Richardson, & Lozano, 2011; Munson, Smalling, Spencer, Scott, & Tracy, 2010). The participants in this study also discussed similar types of support from the adults they were able to trust.

In Geenen and Powers' (2007) study, their participants reported, "services cannot take the place of meaningful relationships" (p. 1098). According to attachment theory, children bond and form meaningful attachments to their caregivers (Bowlby, 1969), so when children are placed in foster care the foster parents would become the caregiver. Their roles would be to meet the basic needs of the child and provide a safe, nurturing

environment that is stable and reliable, over time, which would help to develop a positive sense of self and others. This would also assist children in care to establish trust and develop a sense of worth and self-esteem (Ackerman & Dozier, 2005).

Implications of the Study

This study's findings have implications for research, counseling, and the foster care system. These implications are outlined in the following sections.

Implications for research. For over 25 years, there has been an abundance of research focusing on the challenges of adequately preparing foster youth for independent living. Within this collection of studies, there has been a modest amount of qualitative research focused on the experiences and perceptions of current and former foster care youth. Such qualitative research could provide a more extensive understanding of the experiences young adults had when aging out of foster care, which in turn could help the foster care system to reduce negative experiences for youth who will age out of the system in the future. Researchers could investigate criteria used by former foster youth to help current foster youth create trusting relationships while they are in care. Both qualitative and quantitative studies could provide valuable information regarding current and former foster youths' attitudes towards foster care. Because policies and services involving transition from foster care can vary from state to state and are constantly being re-vamped, ongoing research is needed involving retrospective studies focusing on transitioning to adulthood from foster care in order to provide valuable information to see if the current changes in the child welfare system are going to help future foster youth with successful transitions.

Implications for counseling. A few implications for counselors can be drawn from the findings of this current study. It is important for counselors to understand attachment theory, trauma, child maltreatment and the relationship it has to forming attachments throughout life. Counselors can teach education classes, for current and future foster parents, on topics related to attachment, parenting skills, limits and boundaries, and child maltreatment. Counselors working with the parents of youth in foster care need to understand and teach the basic principles of Corrective Attachment Parenting (Orlans & Levy, 2006). Counselors need to be able to build on this theoretical knowledge to create practices that facilitate a trusting therapeutic relationship with the youth. In the qualitative research performed for this paper, the quality of trust in a relationship with an adult was key to forming or failing to form the bonds that were most critical for successful transition out of foster care. Counselors need to “follow the person-centered model of actively listening and responding to the clients’ thoughts, feelings, and expectations” (p. 61) (Christofi & Thompson, 2007). Treatment goals should focus on, at a minimum, processing past traumas, building the adolescent’s self-esteem and social skills, and developing healthy coping skills for life stressors. Other treatment goals should include assisting the adolescent in learning how to make distinctions between past and current traumas to help them create distinct narratives for their past and present experiences and better adapt to their current situation.

Implications for foster care. There are several implications for the foster care system that can be drawn from this current study. First, administrators should implement effective systems for children and adolescents in foster care to share their feelings,

thoughts, ideas, and apprehensions about foster care and these systems need to direct this information to individuals within the system, who can enact an effective change (Gil & Bogart, 1982; Rice & McFadden, 1988; Wilson & Conroy, 1999). This would help foster youth to feel that they are heard and have a voice, which would facilitate the development of their self-worth and value. Children and adolescents in foster care have rights (Texas Department of Family and Protective Services, 2009), but if a child or adolescent feels as though he or she is not heard, faith will be lost in those rights. Second, a well developed on-going training program to educate all direct care staff, in foster care, about attachment theory, trauma, and loss. This will give the staff the knowledge, understanding, and skills to assist the children and adolescents they work with more effectively. This education could also facilitate in the development of trusted relationships between the children and adolescents in care and the adults who are responsible for them (Unrau, Seita, & Putney, 2008; van der Waals, 1960). Third, adults who have aged out of the system need an effective program for maintaining contact with the system that served them. This would enable states to understand the magnitude of the struggles these adults face when they leave care and are partially or completely unprepared for independent living. States would be in a better position to evaluate current and future programs, laws, policy and procedures to assist current and future foster youth who age out of care more successfully (Packard, Delgado, Fellmeth, & McCready, 2008).

Conclusion

Overall, the current findings suggest that young adults continue to have difficulties transitioning out of foster care and are not entirely prepared to become self-

sufficient upon aging out. The findings also suggest that despite all of their difficulties, former foster youth were able to develop at least one trusting relationship and recognize that growing up in care gave them a better advantage than growing up with their biological families might have been. Policy makers need to bear in mind the role that feelings of anger and mistrust play in the narrative formation of former foster youth. The narratives in this study indicate that these emotions can make it difficult for youths to realize the value of formal programs that are developed for their benefit.

Every year laws are enacted, policies and procedures are being developed and put into practice, and numerous programs are implemented or revised to assist older children in care and while they transition out of foster care. Unfortunately, in spite of the surfeit of programs and policies, older youth in foster care continue to encounter considerable challenges when they age out of care. The needs of young adults aging out of the foster care system far exceed the amount of resources available to them. Consequently, real change can only begin to occur when the permanency goals of youth in foster care can be something other than preparation for independent living.

References

- Ackerman, J. P., & Dozier, M. (2005). The influence of foster parent investment on children's representations of self and attachment figures. *Applied Developmental Psychology, 26*(5), 507-520.
- Ahrens, K., DuBois, D. L., Garrison, M., Spencer, R., Richardson, L. P., & Lozano, P. (2011). Qualitative exploration of relationships with important non-parental adults in the lives of youth in foster care. *Children and Youth Services Review, 33*, 1012-1023.
- Ahrens, K., DuBois, D. L., Lozano, P., & Richardson, L. P. (2010). Naturally acquired mentoring relationships and young adult outcomes among adolescents with learning disabilities. *Learning Disabilities Research and Practice, 25*(4), 201-216.
- Ahrens, K., DuBois, D. L., Richardson, L., Fan, M., & Lozano, P. (2008). Youth in foster care with adult mentors during adolescence have improved adult outcomes. *Pediatrics, 121*, e246-e252.
- American Counseling Association. (2005). ACA Code of Ethics. Alexandria, VA: Author.
- Anderson, P. G. (1989). The origin, emergence, and professional recognition of child protection. *Social Service Review, 63*, 222-244.
- Arnett, J. J. (2001). Conceptions of the transition to adulthood: Perspectives from adolescence through midlife. *Journal of Adult Development, 8*(2), 133-143.
- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the early twenties. *The American Psychologist, 55*(5), 469-480.
- Avery, R. J., & Freundlich, M. (2009). You're all grown up now: Termination of foster care support at age 18. *Journal of Adolescence, 32*, 247-257.
- Barth, R. P. (1990). On their own: The experiences of youth after foster care. *Child and Adolescent Social Work, 7*(5), 419-440.
- Bass, S., Shields, M. K., & Behrman, R. E. (2004). Children, families, and foster care: Analysis and recommendations. *The Future of Children, 14*(1), 4-29.
- Becker, M., Jordan, N., & Larsen, R. (2006). Behavioral health service use and costs among children in foster care. *Child Welfare League of America, 85*(3), 633-647.

- Benedict, M. I., & White, R. B. (1991). Factors associated with foster care length of stay. *Child Welfare League of America*, 70(1), 45-58.
- Berliner, L., & Elliott, D. M. (1996). Sexual Abuse of Children. In J. Briere, L. Berliner, J. A. Bulkey, C. Jenny, & T. Reid (Eds.), *The APSAC handbook on child maltreatment* (pp. 51-71). Thousand Oaks, CA: Sage.
- Bowlby, J. (1969). *Attachment and loss: Attachment* (Vol. I). New York, NY: Basic Books.
- Bowlby, J. (1973). *Attachment and loss: Separation - anxiety and anger* (Vol. II). New York, NY: Basic Books.
- Bowlby, J. (1980). *Attachment and loss: Loss - sadness and depression* (Vol. III). New York, NY: Basic Books.
- Brassard, M. R., & Hart, S. (2000). What is psychological maltreatment? In H. Dubowitz, & D. DePanfilis (Eds.), *Handbook of child protection practice* (pp. 23-27). Thousand Oaks, CA: Sage.
- Brown, J., Cohen, P., Johnson, J. G., & Smailes, E. M. (1999). Childhood abuse and neglect: Specificity of effects on adolescent and young adult depression and suicidality. *Journal of the American Academy of Child and Adolescent Psychiatry*, 38(12), 1490-1496.
- Bush, M., & Gordon, A. C. (1982). The case for involving children in child welfare decisions. *Social Work*, 27(4), 309-314.
- Butler, S., & Charles, M. (1999). 'The past, the present, but never the future': Thematic representations of fostering disruption. *Child and Family Social Work*, 4, 9-19.
- Chamberlain, P., Price, J. M., Reid, J. B., Landsverk, J., Fisher, P. A., & Stoolmiller, M. (2006). Who disrupts from placement in foster and kinship care? *Child Abuse & Neglect*, 30, 409-424.
- Child Welfare Information Gateway. (2004). *About CAPTA: A legislative history factsheet*. Retrieved from Child Welfare Information Gateway: <http://www.childwelfare.gov/pubs/factsheets/about.cfm>
- Child Welfare Information Gateway. (2007, April). *Definitions of child abuse and neglect*. Retrieved from Child Welfare Information Gateway: http://www.childwelfare.gov/systemwide/laws_policies/statutes/define.cfm

- Child Welfare Information Gateway. (2008a). *Definitions in federal law*. Retrieved from Child Welfare Information Gateway:
<http://www.childwelfare.gov/can/defining/federal.cfm>
- Child Welfare Information Gateway. (2008b). *Long-term consequences of child abuse and neglect*. Retrieved from
http://www.childwelfare.gov/pubs/factsheets/long_term_consequences.pdf
- Child Welfare Information Gateway. (2009, February). *Major federal legislation concerned with child protection, child welfare, and adoptions*. Retrieved from Child Welfare Information Gateway:
<http://www.childwelfare.gov/pubs/otherpubs/majorfedlegis.pdf>
- Child Welfare Information Gateway. (2010). *Index of federal child welfare laws*. Retrieved March 19, 2011, from Child Welfare Information Gateway:
http://www.childwelfare.gov/systemwide/laws_policies/federal/
- Children's Bureau. (2003). *Child abuse prevention and treatment act as amended by the keeping families safe act of 2003*. Retrieved from U.S. Department of Health & Human Services Administration for Children & Families:
http://www.acf.hhs.gov/programs/cb/laws_policies/cblaws/capta03/sec_I_111.htm
- Chipungu, S. S., & Bent-Goodley, T. B. (2004). Meeting the challenges of contemporary foster care. *The Future of Children, 14*(1), 74-93.
- Christofi, V., & Thompson, C. L. (2007). You cannot go home again: A phenomenological investigation of returning to the sojourn country after studying abroad. *Journal of Counseling and Development, 85*, 53-63.
- Collins, M. E., Spencer, R., & Ward, R. (2010). Supporting youth in the transition from foster care: Formal and informal connections. *Child Welfare, 89*, 125-143.
- Colton, M., & Heath, A. (1994). Attainment and behaviour of children in care and at home. *Oxford Review of Education, 20*(3), 317-327.
- Committee on Ways and Means. (2007, January 1). *Title IV - Grants to states for aid and services to needy families with children and for child-welfare services*. Retrieved from U.S. Social Security Administration:
http://www.ssa.gov/OP_Home/ssact/title04/0400.htm
- Cook, R. (1988). Trends and needs in programming for independent living. *Child Welfare, 497-514*.

- Costin, L. B. (1985). The historical context of child welfare. In J. Laird, & A. Hartman (Eds.), *A handbook of child welfare: Context, knowledge and practice* (pp. 34-60). New York, NY: The Free Press.
- Courtney, M. E. (1998). The costs of child protection in the context of welfare reform. *The Future of Children*, 8(1), 88-103.
- Courtney, M. E., & Barth, R. P. (1996). Pathways of older adolescents out of foster care: Implications for independent living services. *Social Work*, 41(1), 75-83.
- Courtney, M. E., & Dworsky, A. (2006). Early outcomes for young adults transitioning from out-of-home care in the USA. *Child and Family Social Work*, 11(3), 201-219.
- Courtney, M. E., Dworsky, A., Lee, J. S., & Raap, M. (2009). *Midwest Evaluation of the adult functioning of former foster youth: Outcomes at age 23 and 24*. Chicago: Chapin Hall at the University of Chicago.
- Courtney, M. E., Piliavin, I., Grogan-Kaylor, A., & Nesmith, A. (2001). Foster youth transitions to adulthood: A longitudinal view of youth leaving care. *Child Welfare League of America*, 80(6), 685-717.
- Creswell, J. W. (1994). *Research design: Qualitative & quantitative approaches*. Thousand Oaks, CA: Sage.
- Creswell, J. W. (2003). *Research design: Qualitative, quantitative, and mixed methods approaches* (2nd ed.). Thousand Oaks, CA: Sage.
- Crosson-Tower, C. (2002). *Understanding child abuse and neglect*. Boston, MA: Allyn and Bacon.
- Curran, M. C., & Pecora, P. J. (1999). Incorporating the perspectives of youth placed in family foster care: Selected research findings and methodological challenges. In P. A. Curtis, J. G. Dale, & J. C. Kendall (Eds.), *The Foster Care Crisis: Translating Research into Policy and Practice* (pp. 99-125). Lincoln, NE: University of Nebraska Press.
- De Bellis, M. D., & Thomas, L. A. (2003). Biologic findings of post-traumatic stress disorder and child maltreatment. *Current Psychiatry Reports*, 5, 106-117.
- Dent, R. J., & Cameron, R. J. (2003). Developing resilience in children who are in public care: The educational psychology perspective. *Educational Psychology in Practice*, 19(1), 4-19.

- Denzin, N. K., & Lincoln, Y. S. (2000). The discipline and practice of qualitative research. In N. K. Denzin, & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd Edition ed., pp. 1-28). Thousand Oaks, CA: Sage.
- DiLillo, D., Tremblay, G. C., & Peterson, L. (2000). Linking childhood sexual abuse and abusive parenting: The mediating role of maternal anger. *Child Abuse and Neglect*, 24(6), 767-779.
- Dube, S. R., Anda, R. F., Felitti, V. J., Chapman, D., Williamson, D. F., & Giles, W. H. (2001). Childhood abuse, household dysfunction and the risk of attempted suicide throughout the life span: Findings from the adverse childhood experiences study. *Journal of the American Medical Association*, 286, 3089-3096.
- Dubowitz, H. (2000a). What is child neglect? In H. Dubowitz, & D. DePanifilis (Eds.), *Handbook for child protection practice* (pp. 10-14). Thousand Oaks, CA: Sage.
- Dubowitz, H. (2000b). What is physical abuse? In H. Dubowitz, & D. DePanifilis (Eds.), *Handbook for child protection practice* (pp. 15-17). Thousand Oaks, C A: Sage.
- Dubowitz, H., Papas, M. A., Black, M. M., & Starr, R. H. (2002). Child neglect: Outcomes in high-risk urban preschoolers. *Pediatrics*, 109, 1100-1107.
- Egeland, B. (1997). Mediators of the effects of child maltreatment on developmental adaptation in adolescence. In D. Cicchetti, & S. Toth (Eds.), *Rochester symposium on developmental psychopathology: Vol. VIII. The effects of trauma on the developmental process* (pp. 403-434). Rochester, NY: University of Rochester Press.
- Egeland, B. (2009). Taking stock: Childhood emotional maltreatment and developmental psychopathology. *Child Abuse & Neglect*, 33, 22-26.
- Ellis, R. A., Dulmus, C. N., & Wodarski, J. S. (2003). *Essentials of child welfare*. Hoboken, NJ: John Wiley & Sons.
- English, D. J., Kouidou-Giles, S., & Plocke, M. (1994). Readiness for independence: A study of youth in foster care. *Children and Youth Services Review*, 16(3-4), 213-229.
- English, D. J., Upadhyaya, M. P., Litrownik, A. J., Marshall, J. M., Runyan, D. K., Graham, J. C., et al. (2005). Maltreatment's wake: The relationship of maltreatment dimensions to child outcomes. *Child Abuse and Neglect*, 29, 597-619.

- English, D. J., Widom, C. S., & Brandford, C. (2004). Another look at the effects of child abuse. *National Institute of Justice*, 251, 23-24.
- Erikson, E. H. (1950). *Childhood and society*. New York, NY: Norton.
- Festinger, T. (1983). *No one ever asked us: A postscript to foster care*. New York, NY: Columbia University Press.
- Fisher, P. A., Burraston, B., & Pears, K. (2005). The early intervention foster care program: Permanent placement outcomes from a randomized trial. *Child Maltreatment*, 10(1), 61-71.
- Flick, U. (2006). *An introduction to qualitative research* (3rd ed.). London, England: Sage.
- Fonagy, P., Steele, M., Steele, H., Higgitt, A., & Target, M. (1994). The Emanuel Miller memorial lecture 1992: The theory and practice of resilience. *Journal of Child Psychology & Psychiatry*, 35(2), 231-257.
- Fontana, A., & Frey, J. H. (2000). The interview: From structured questions to negotiated text. In N. K. Denzin, & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 645-672). Thousand Oaks, CA: Sage.
- Fraser, M. W., Richman, J. M., & Galinsky, M. J. (1999). Risk, protection, and resilience: Toward a conceptual framework for social work practice. *Social Work Research*, 23(3), 131-143.
- Freundlich, M. (2003, November). *Time running out: Teens in foster care*. Retrieved from Child Welfare Information Gateway:
http://www.childwelfare.gov/outofhome/types/group_outcomes.cfm
- Gall, M. D., Gall, J. P., & Borg, W. R. (2003). *Educational research: An introduction* (7th ed.). Boston, MA: Allyn & Bacon.
- Gara, M. A., Rosenberg, S., & Herzog, E. P. (1996). The abused child as parent. *Child Abuse and Neglect*, 20(9), 797-807.
- Garbarino, J. (1987). The abuse and neglect of special children: An introduction to the issues. In J. Garbarino, P. E. Brookhouser, & K. J. Authier (Eds.), *Special children special risks: The maltreatment of children with disabilities*. Hawthorne, NY: Aldinede Gruyter.

- Geenen, S., & Powers, L. E. (2007). "Tomorrow is another problem" the experiences of youth in foster care during their transition into adulthood. *Children and Youth Services Review, 29*, 1085-1101.
- Geiser, R. L., & Malinowski, M. N. (1978). Realities of foster child care. *American Journal of Nursing, 78*(3), 430-433.
- Gil, E., & Bogart, K. (1982). Foster children speak out: A study of children's perceptions of foster care. *Children Today, 11*, 7-9.
- Glaser, B. G. (1992). *Emergence vs forcing: Basics of grounded theory analysis*. Mill Valley, CA: Sociology Press.
- Goldman, J., Salus, M. K., Wolcott, D., & Kennedy, K. Y. (2003). *A coordinated response to child abuse and neglect: The foundation for practice*. Retrieved from Child Welfare Information Gateway:
<http://www.childwelfare.gov/pubs/usermanuals/foundation/foundation.pdf>
- Golonka, S. (2010, December). *The transition to adulthood: How states can support older youth in foster care*. Retrieved from National Governors Association:
<http://www.nga.org/Files/pdf/1012FOSTERCARE.PDF>
- Goodkind, S., Schelbe, L. A., & Shook, J. J. (2011). Why youth leave care: Understandings of adulthood and transition successes and challenges among youth aging out of child welfare. *Children and Youth Services Review, 33*, 1039-1048.
- Gustavsson, N. S., & Segal, E. A. (1994). *Critical issues in child welfare*. Thousand Oaks, CA: Sage.
- Hagele, D. M. (2005). The impact of maltreatment on the developing child. *North Carolina Medical Journal, 66*(5), 356-359.
- Harden, B. J. (2000). How do I help children adjust to out-of-home care placement? In H. Dubowitz, & D. DePanfilis (Eds.), *Handbook of child protection practice* (pp. 420-421). Thousand Oaks, CA: Sage.
- Hart, S. N., Brassard, M. R., & Karlson, H. C. (1996). Psychological maltreatment. In J. Briere, L. Berliner, J. A. Bulkley, C. Jenny, & T. Reid (Eds.), *The APSAC Handbook on Child Maltreatment* (pp. 72-89). Thousand Oaks, CA: Sage.

- Haskins, R., Wulczyn, F., & Webb, M. B. (2007). Using high-quality research to improve child protection practice: An overview. In R. Haskins, F. Wulczyn, & M. B. Webb (Eds.), *Child Protection: Using research to Improve Policy and Practice* (pp. 1-33). Washington, D.C.: Brookings Institution Press.
- Hass, M., & Graydon, K. (2009). Sources of resiliency among successful foster youth. *Children and Youth Services Review*, 31, 457-463.
- Hesse-Biber, S. N., & Leavy, P. (2006). *The practice of qualitative research*. Thousand Oaks, CA: Sage.
- Howe, D. (2005). *Child abuse and neglect: Attachment, development and intervention*. New York, NY: Palgrave Macmillan.
- Howe, D., Brandon, M., Hinings, D., & Schofield, G. (1999). *Attachment theory, child maltreatment and family support: A practice and assessment model*. New York, NY: Palgrave.
- Husserl, E. (1964). *The idea of phenomenology*. The Hague, Netherlands: Martinus Nijhoff.
- Hutchinson, E. D. (1990). Child maltreatment: Can it be defined? *Social Service Review*, 64, 60-78.
- Iglehart, A. P. (1994). Adolescents in foster care: Predicting readiness for independent living. *Children and Youth Services Review*, 16(3-4), 159-169.
- Jackson, S. (1994). Educating children in residential and foster care. *Oxford Review of Education*, 20(3), 267-279.
- Janesick, V. J. (2000). The choreography of qualitative research design: Minuets, improvisations, and crystallization. In N. K. Denzin, & Y. S. Lincoln (Eds.), *Handbook of Qualitative Research* (2nd ed., pp. 379-399). Thousand Oaks, CA: Sage.
- Jewitt, C. J. (1982). *Helping children cope with separation and loss*. Harvard, MA: The Harvard Common Press.
- Johnson, P. R., Yoken, C., & Voss, R. (1995). Family foster care placement: The child's perspective. *Child Welfare League of America*, 74(5), 959-974.
- Johnson, R., Rew, L., & Sternglanz, R. W. (2006). The relationship between childhood sexual abuse and sexual health practices of homeless adolescents. *Adolescence*, 41(162), 221-234.

- Kates, W. G., Johnson, R. L., Rader, M. W., & Strieder, F. H. (1991). Whose child is this? Assessment and treatment of children in foster care. *American Journal of Orthopsychiatric*, 61(4), 584-591.
- Keil, V., & Price, J. M. (2006). Externalizing behavior disorders in child welfare settings: Definition, prevalence, and implications for assessment and treatment. *Children and Youth Services Review*, 28, 761-779.
- Kelley, B. T., Thornberry, T. P., & Smith, C. A. (1997). *In the wake of childhood maltreatment*. Retrieved from <http://www.ncjrs.gov/pdffiles1/165257.pdf>
- Kempe, C. H., Silverman, F. N., Steele, B. F., Droegemueller, W., & Silver, H. K. (1962). The battered child syndrome. *The Journal of the American Medical Association*, 181, 17-24.
- Kolka, D. J. (1996). Child Physical Abuse. In J. Beiere, L. Berliner, J. A. Bulkley, C. Jenny, & T. Reid (Eds.), *The APSAC handbook on child maltreatment* (pp. 21-50). Thousand Oaks, CA: Sage.
- Kools, S. M. (1997). Adolescent identity development in foster care. *Family Relations*, 46(3), 263-271.
- Krefting, L. (1991). Rigor in qualitative research: The assessment of trustworthiness. *The American Journal of Occupational Therapy*, 45(3), 214-222.
- Kroner, M. J., & Mares, A. S. (2009). Lighthouse independent living program: Characteristics of youth served and their outcomes at discharge. *Children and Youth Services Review*, 31, 563-571.
- Kvale, S. (1996). *Interviews: An introduction to qualitative research interviewing*. Thousand Oaks, CA: Sage.
- Landsverk, J. A., Burns, B. J., Stambaugh, L. F., & Rolls Reutz, J. A. (2009). Psychosocial interventions for children and adolescents in foster care: Review of research literature. *Child Welfare*, 88(1), 49-69.
- Lawson, D. M. (2009). Understanding and treating children who experience interpersonal maltreatment: Empirical findings. *Journal of Counseling & Development*, 87, 204-215.
- Levy, T. M., & Orlans, M. (1998). *Attachment, trauma, and healing: Understanding and treating attachment disorder in children and families*. Washington, D.C.: CWLA Press.

- Lewit, E. M. (1993). Children in foster care. *The Future of Children*, 3(3), 192-200.
- Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage.
- Main, M., & Hesse, E. (1990). Parents' unresolved traumatic experiences are related to infant disorganized attachment status: Is frightened and/or frightening parental behavior the linking mechanism? In M. T. Greenberg, D. Cicchetti, & E. M. Cummings (Eds.), *Attachment in the preschool years: Theory, research and intervention* (pp. 161-182). Chicago, IL: University of Chicago.
- Main, M., & Solomon, J. (1990). Procedures for identifying infants as disorganized/disoriented during the Ainsworth strange situation. In M. T. Greenberg, D. Cicchetti, & E. M. Cummings (Eds.), *Attachment in the preschool years: Theory, research and intervention* (pp. 121-160). Chicago, IL: University of Chicago.
- Main, M., & Solomon, J. (1986). Discovery of an insecure-disorganized/disoriented attachment pattern: Procedure, finding and implications for the classification of behavior. In T. B. Brazelton, & M. Yogman (Eds.), *Affective development in infancy* (pp. 95-124). Norwood, NJ: Ablex.
- Mallon, G. P. (1998). After care, then where? Outcomes of an independent living program. *Child Welfare League of America*, 77(1), 61-78.
- Marshall, C., & Rossman, G. B. (2006). *Designing qualitative research* (4th ed.). Thousand Oaks, CA: Sage.
- McMillen, J. C., & Tucker, J. (1999). The status of older adolescents at exit from out-of-home care. *Child Welfare League of America*, 339-360.
- McMillen, J. C., Rideout, G. B., Fisher, R. H., & Tucker, R. (1997). Independent-living services: The views of former foster youth. *Families in Society: The Journal of Contemporary Human Services*, 471-479.
- Mech, E. V. (1988). Volunteers as resources in preparing foster adolescents for self-sufficiency. *Child Welfare*, 67(6), 595-608.
- Meier, E. G. (1965). Current circumstances of former foster children. *Child Welfare*, 196-206.
- Mellor, D., & Storer, S. (1995). Support groups for children in alternate care: A largely untapped therapeutic resource. *Child Welfare League of America*, 74(4), 905-918.

- Mennen, F. E., & O'Keefe, M. (2005). Informed decisions in the child welfare: The use of attachment theory. *Children and Youth Services Review, 27*(6), 577-593.
- Merdinger, J. M., Hines, A. M., Osterling, K. L., & Wyatt, P. (2005). Pathways to college for former foster youth: Understanding factors that contribute to educational success. *Child Welfare League of America, 84*(6), 867-896.
- Merritt, D. H. (2008). Placement preferences among children living in foster or kinship care: A cluster analysis. *Children and Youth Services Review, 30*(11), 1336-1344.
- Miles, M. B., & Huberman, A. M. (1994). *Qualitative data analysis: An expanded sourcebook* (2nd ed.). Thousand Oaks, CA: Sage.
- Morse, J. M., & Field, P. A. (1995). *Qualitative research methods for health professionals* (2nd ed.). Thousand Oaks, CA: Sage.
- Morton, N., & Browne, K. D. (1998). Theory and observation of attachment and its relation to child maltreatment: A review. *Child Abuse and Neglect, 22*, 1093-1104.
- Munson, M. R., & McMillen, J. C. (2009). Natural mentoring and psychosocial outcomes among older youth transitioning from foster care. *Children and Youth Services Review, 31*(1), 104-111.
- Munson, M. R., Smalling, S. E., Spencer, R., Scott, L. D., & Tracy, E. (2010). A steady presence in the midst of change: Non-kin natural mentors in the lives of older youth exiting foster care. *Children and Youth Services Review, 32*, 527-535.
- Newton, R. R., Litrownik, A. J., & Landsverk, J. A. (2000). Children and youth in foster care: Disentangling the relationship between problem behaviors and number of placements. *Child Abuse & Neglect, 24*(10), 1363-1374.
- Noll, J. G., Horowitz, L. A., Bonanno, G. A., Trickett, P. K., & Putnam, F. W. (2003). Revictimization and self-harm in females who experienced childhood sexual abuse: Results from a prospective study. *Journal of Interpersonal Violence, 18*(12), 1452-1471.
- Orlans, M., & Levy, T. M. (2006). *Healing parents: Helping wounded children learn to trust & love*. Washington, D.C.: CWLA Press.
- Packard, T., Delgado, M., Fellmeth, R., & McCready, K. (2008). A cost-benefit analysis of transitional services for emancipating foster youth. *Children and Youth Services Review, 30*, 1267-1278.
- Patton, M. Q. (1980). *Qualitative evaluation methods*. Beverly Hills, CA: Sage.

- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage.
- Pecora, P. J., Kessler, R. C., O'Brien, K., White, C. R., Williams, J., Hiripi, E., et al. (2006). Educational and employment outcomes of adults formerly placed in foster care: Results from the Northwest Foster Care alumni Study. *Children and Youth Services Review*, 28(2), 1459-1481.
- Poggenpoel, M., & Myburgh, C. (2003). Researcher as research instrument in educational research: A possible threat to trustworthiness? *Education*, 124(2), 418-320.
- Polkinghorne, D. E. (1989). Phenomenological research methods. In R. S. Valle, & S. Halling (Eds.), *Existential-phenomenological perspectives in psychology: Exploring the breadth of human experience* (pp. 41-60). New York, NY: Plenum Press.
- Prevent Child Abuse Texas. (2003). *Fact sheet: National statistics*. Retrieved from Prevent Child Abuse Texas: http://www.preventchildabusetexas.org/pdf/FACT_SHEET_STATS_FY_2003.pdf
- Princeton University. (2004). Children, families, and foster care: List of acronyms. *The Future of Children*, 14(1), 190-192.
- Reilly, T. (2003). Transition from care: Status and outcomes of youth who age out of foster care. *Child Welfare League of America*, 82(6), 727-746.
- Rice, D. L., & McFadden, E. J. (1988). A forum for foster children. *Child Welfare League of America*, 67, 231-243.
- Rubin, D. M., Alessandrini, E. A., Feudtner, C., Mandell, D. S., Localio, A. R., & Hadley, T. (2004). Placement stability and mental health costs for children in foster care. *Pediatrics*, 113(5), 1336-1341.
- Ryan, P., McFadden, E. J., Rice, D., & Warren, B. L. (1988). The role of foster parents in helping young people develop emancipation skills. *Child Welfare*, 67(6), 563-572.
- Scannapieco, M. (2000). Preparing youth for independent living: What are the best methods for reaching self-sufficiency? In H. Dubowitz, & D. DePanfilis (Eds.), *Handbook of child protection practice* (pp. 526-530). Thousand Oaks, CA: Sage.
- Schene, P. A. (1998). Past, present, and future roles of child protective services. *The Future of Children: Protecting Children From Abuse and Neglect*, 8(1), 23-38.

- Seidman, I. (2006). *Interviewing as qualitative research: A guide for researchers in education and the social sciences* (3rd ed.). New York, NY: College Press.
- Sheehy, A. M., Oldham, E., Zanhghi, M., Ansell, D., Correia, P., & Copeland, R. (2002). *Promising practices: Supporting transition of youth served by the foster care system*. Retrieved from The Anne E. Casey Foundation:
<http://www.aecf.org/KnowledgeCenter/Publications.aspx?pubguid={FCE9A9C0-8358-48FD-8349-33CD26925028}>
- Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information, 22*, 63-75.
- Shierman, J. (2003). *Critical issues in child welfare*. New York, NY: Columbia University Press.
- Shirk, M., & Strangler, G. (2004). *On their own: What happens to kids when they age out of the foster care system*. Boulder, CO: Westview Press.
- Silverman, A. B., Reinherz, H. Z., & Giaconia, R. M. (1996). The long-term sequelae of child and adolescent abuse: A longitudinal community study. *Child Abuse and Neglect, 20*(8), 709-723.
- Springer, K. W., Sheridan, J., Kuo, D., & Carnes, M. (2007). Long-term physical and mental health consequences of childhood physical abuse: Results from a large population-based sample of men and women. *Child Abuse & Neglect, 31*(5), 517-530.
- Stewart, D., & Mickunas, A. (1974). *Exploring phenomenology: A guide to the field and its literature*. Chicago, IL: American Library Association.
- Stirling, J., & Amaya-Jackson, L. (2008). Understanding the behavioral and emotional consequences of child abuse. *Pediatrics, 122*, 667-673.
- Stock, C. D., & Fisher, P. A. (2006). Language delays among foster children: Implications for policy and practice. *Child Welfare League of America, 85*(3), 445-461.
- Swan, N. (1998). *Exploring the role of child abuse on later drug abuse: Researchers face broad gaps in information*. *NIDA Notes, 13*(2). Retrieved from National Institute on Drug Abuse:
http://www.nida.nih.gov/NIDA_Notes/NNVol13N2/exploring.html

- Teicher, M. H. (2000). *Wounds that time won't heal: The neurobiology of child abuse*. Retrieved from The Dana Foundation:
<http://www.dana.org/news/cerebrum/detail.aspx?id=3378>
- Teicher, M. H., Samson, J. A., Polcari, A., & McGreenery, C. E. (2006). Sticks, stones, and hurtful words: Relative effects of various forms of childhood maltreatment. *American Journal of Psychiatry*, 163(3), 993-1000.
- Terr, L. C., Abright, A. R., Brody, M., Donner, S., Eth, S., Fine, L., et al. (2006). When formulation outweighs diagnosis: 13 "moments" in psychotherapy. (M. S. Jellinek, Ed.) *Journal of American Academy of Child Adolescent Psychiatry*, 45(10), 1252-1263.
- Texas Department of Family and Protective Services. (1986). *Preparation for adult living (PAL) program*. Retrieved from Texas Department of Family and Protective Services:
http://www.dfps.state.tx.us/Child_Protection/Preparation_For_Adult_Living/default.asp
- Texas Department of Family and Protective Services. (2004a). *Chafee foster care independence program, 2003-2004 progress report and application for 2005 funds*. Retrieved from Texas Department of Family and Protective Services:
http://www.dfps.state.tx.us/Child_Protection/Preparation_For_Adult_Living/chafeeProgress2003.asp
- Texas Department of Family and Protective Services. (2004b). *Permanency planning goals*. Retrieved from Texas Department of Family and Protective Services:
http://www.dfps.state.tx.us/handbooks/CPS/Files/CPS_pg_6221.jsp?zoom_highlight=permanency+goals
- Texas Department of Family and Protective Services. (2006, September 1). *Extended care*. Retrieved May 15, 2011, from Texas Department of Family & Protective Services:
http://www.dfps.state.tx.us/child_protection/transitional_living/forms.asp#rights
- Texas Department of Family and Protective Services. (2007). *Transition planning and circles of support*. Retrieved May 16, 2011, from Texas Department of Family and Protective Services:
http://www.dfps.state.tx.us/child_protection/transitional_living/forms.asp#planning

- Texas Department of Family and Protective Services. (2009, August 19). *Rights of children in foster care*. Retrieved May 15, 2011, from Texas Department of Family and Protective Services:
http://www.dfps.state.tx.us/child_protection/transitional_living/forms.asp#planning
- Texas Department of Family and Protective Services. (2010a, October 7). *Transitional living services for youth in Texas DFPS foster care - revised*. Retrieved from Texas Department of Family & Protective Services:
http://www.dfps.state.tx.us/Child_Protection/Transitional_Living/default.asp
- Texas Department of Family and Protective Services. (2010b). *DFPS Data book 2010*. Retrieved from Texas Department of Family and Protective Services:
http://www.dfps.state.tx.us/documents/about/Data_Books_and_Annual_Reports/2010/10CountyCharts.pdf
- Texas Department of Family and Protective Services. (2010c). *State of Texas 2010 title IV-B annual services and progress report*. Retrieved from Texas Department of Family and Protective Services: http://www.dfps.state.tx.us/About/Title_IV-B_State_Plan/2010_Progress_Report/2010_Texas_IV-B_APSR.pdf
- Texas Department of Family and Protective Services. (2010d, October). *Transitional services living form (form 2526)*. Retrieved from Texas Department of Family & Protective Services:
http://www.dfps.state.tx.us/Child_Protection/Transitional_Living/default.asp
- Toma, J. D. (2005). Approaching rigor in applied qualitative research. In C. F. Conrad, & R. C. Serlin (Eds.), *The SAGE handbook for qualitative research in education: Engaging ideas and enriching inquiry* (pp. 405-424). Thousand Oaks, CA: Sage.
- Toro, P. A., Dworsky, A., & Fowler, P. J. (2007). *Homeless youth in the United States: Recent research findings and intervention approaches*. Retrieved from Assistant Secretary for Planning and Evaluation U.S. Department of Health and Human Services:
<http://aspe.hhs.gov/hsp/homelessness/symposium07/toro/index.htm>
- Torrico, R. (2004). *Child welfare league of america independent living coordinator questionnaire results*. Retrieved from Child Welfare League of America:
www.cwla.org/programs/housing/housingreport.pdf
- Triseliotis, J. (Ed.). (1980). Growing up in foster care and after. In *New developments in foster care and adoption* (pp. 131-161). London, England: Routledge & Kegan Paul.

- U.S. Department of Health and Human Services. (2008). *Child maltreatment 2006*. Retrieved from Administration for Children & Families: www.acf.hhs.gov/programs/cb/pubs/cm06/index.htm
- U.S. Department of Health and Human Services. (2009a, March 11). *Children's Bureau*. Retrieved from Administration for Children and Families: http://www.acf.hhs.gov/programs/cb/aboutcb/about_cb.htm
- U.S. Department of Health and Human Services. (2009b, October 9). *The AFCAR report: Preliminary FY 2008 estimates as of October 2009*. Retrieved from Administration for Children & Families: http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report16.pdf
- U.S. Department of Health and Human Services. (2010, July 29). *The AFCARS Report: Preliminary FY2009 estimates as of July 2010*. Retrieved from Administration for Children & Families: http://www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report17.pdf
- UNICEF. (2007, April). *Press centre - Child protection*. Retrieved from UNICEF: http://www.unicef.org/media/media_35903.html
- United States General Accounting Office. (1999). *Foster care: Effectiveness of independent living services unknown*. Washington, D.C.: Health, Education, and Human Services Division.
- Unrau, Y. A., Seita, J. R., & Putney, K. S. (2008). Former foster youth remember multiple placement moves: A journey of loss and hope. *Children and Youth Services Review, 30*(11), 1256-1266.
- van der Kolk, B. A., Perry, J. C., & Herman, J. L. (1991). Childhood origins of self-destructive behavior. *American Journal of Psychiatry, 148*(12), 1665-1671.
- van der Waals, P. (1960). Former foster children reflect on their childhood. *Children, 7*, 29-33.
- van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive pedagogy*. Ontario, Canada: The Athlouse Press.
- Vissing, Y. M., Straus, M. A., Gelles, R. J., & Harrop, J. W. (1991). Verbal aggression by parents and psychosocial problems of children. *Child Abuse & Neglect, 36*(3), 223-238.
- Waldfoegel, J. (1998a). Rethinking the paradigm for child protection. *The Future of Children: Protecting Children From Abuse and Neglect, 8*(1), 104-119.

- Waldfoegel, J. (1998b). *The future of child protection: How to break the cycle of abuse and neglect*. London, England: Harvard University Press.
- Wang, C., & Holton, J. (2007). *Total estimated cost of child abuse and neglect in the United States*. Retrieved from Prevent Child Abuse America: http://www.preventchildabuse.org/about_us/media_releases/pcaa_pew_economic_impact_study_final.pdf
- Warger, C. L., Tewey, S., & Megivern, M. (1991). *Abuse and neglect of exceptional children*. Reston, VA: The Council for Exceptional Children.
- Watkins, S. A. (1990). The Mary Ellen myth: Correcting child welfare history. *Social Work, 35*, 500-505.
- Webster, D., Barth, R. P., & Needell, B. (2000). Placement stability for children in out-of-home care: A longitudinal analysis. *Child Welfare League of America, 79*(5), 614-632.
- Werner, E. E., & Smith, R. S. (1982). *Vulnerable but invincible: A longitudinal study of resilient children and youth*. New York: McGraw Hill.
- Wertheimer, R. (2002). *Youth who "age out" of foster care: Troubled lives, troubling prospects*. Retrieved from Child Trends: http://www.childtrends.org/Files//Child_Trends-2002_12_01_RB_FosterCare.pdf
- Wertheimer, R., & Atienza, A. (2006). *Vulnerable Youth: Recent Trends*. Retrieved from Child Trends: http://www.childtrends.org/Files//Child_Trends-2006_04_01_OP_VulnYouth.pdf
- Westat, Inc. (1986). *Independent living services for youth in substitute care*. Washington, D.C.: U.S. Government Printing Office.
- Wilson, L., & Conroy, J. (1999). Satisfaction of children in out-of-home care. *Child Welfare League of America, 78*(1), 53-69.
- Wolcott, H. F. (1990). On seeking and rejecting: Validity in qualitative research. In E. W Eisner, & A. Peshkin (Eds.), *Qualitative inquiry in education: The continuing debate* (pp. 121-152). New York, NY: Teachers College Press.
- Zuravin, S. J., Benedict, M., & Stallings, R. (1999). The adult functioning of former kinship and nonrelative foster care children. In R. L. Hegar, & M. Scannapieco (Eds.), *Kinship foster care: Policy, practice, and research* (pp. 208-222). NY, NY: Oxford University Press.

Appendix A

Recruitment Advertisement

Volunteers needed for a foster care study. If you spent 5+ years in foster care, are 18 or older, attended a Preparation for Adult Living (PAL) program, transitioned to independent living and are willing to share your thoughts about your experiences, I would like to interview you. You will receive a \$30.00 gift card from a store or restaurant for your time. Please call Beth at (XXX) XXX-XXXX for additional information.

Appendix B

Research Focus and Guiding Questions for Interviews

Interview One Research Focus:

Tell as much as possible about your perceptions and experiences about the services and programs you were offered during foster care to prepare you for independent living within the 90-minute timeframe.

Guiding Questions: Describe the services and programs you were offered while in foster care to assist you to transition to independent living. At what age did you start receiving these services or participate in the programs. How long did you receive the services? Were the programs and services helpful? Describe the type of agencies (group home, residential treatment facility, juvenile facility, etc.) or individuals (counselors, caseworkers, social workers, etc.) responsible for providing these services and programs. You can choose to relate additional information regarding how old you were when you were placed in foster care, the reasons you were removed from your family, if you have siblings and if they were removed, placements you had in care, feelings regarding foster care or any other information you may want to share about your experience in foster care.

Interview Two Research Focus:

As an adult who has transitioned from foster care to independent living, reconstruct details of a typical day in your life from the moment you wake up until you fall asleep. Reconstruct your experience of transitioning from foster care to independent living within the 90-minute timeframe.

Guiding Questions: Talk about your experience when you left foster care. Talk about some of the feelings you had when you left care. What programs, services, and individuals were helpful or useful leading up to and during this transition? Give some examples. Talk about whom you think was most helpful to you during your transition out of foster care. Talk about what kind of trusting or meaningful relationships you were able to develop and maintain. What type of assistance, including financial, did you receive when you transitioned out of care? Talk about your employment experiences since transitioning out and your educational background.

Interview Three Research Focus:

Given what you have said about the training you received to prepare you for independent living, your experiences transitioning out of foster care, trusted relationships, and given what you have said about your life now, what meaning does being in foster care have in your life? What sense does it make to you? Talk about this within the 90-minute timeframe.

Guiding Questions: What is your understanding of your experience? How do the services and programs you received in foster care interact to bring you to your present situation? Where do you see yourself in the future given what you have reconstructed in these interviews?

Appendix C

INFORMED CONSENT FOR PARTICIPATION IN RESEARCH STUDY

You are invited to participate in a research study entitled, "Complexities Related to Aging Out of Foster Care: Life Skills, Self-Sufficiency and Trust." Dr. Hansel Burley (806-742-1997 x 447) and Dr. Mellinee K. Lesley (806-742-1997x 240) in the College of Education at Texas Tech University are in charge of the study. They will answer any questions you have about this study. You can also contact Beth van Rensburg, who is responsible for carrying out the study at (806) xxx-xxxx.

The objective of this study is to gain a better understanding of adults' perceptions of the services they were provided to help them while they were transitioning to independent living. If you choose to participate, you will be asked to share your perceptions of your experiences.

You will be interviewed three separate times (3 to 7 days apart) for not more than 90 minutes per interview. Interviews will be held in a place chosen by you. The longest you would be involved with this study would be about three weeks.

Your involvement in this research project is strictly voluntary. You will receive a \$30.00 gift card from a place of your choice for your participation in this study. You can refuse to participate or withdraw at any time from this study and still receive the gift card. If you should become uncomfortable during the interview, then you can choose how or if you want to continue. By participating, you will provide insight into the experiences of how the foster care system helps young adults transition to independent living.

All interviews will be digitally recorded and transcribed by Beth van Rensburg. Transcripts will be kept in a locked file cabinet in Beth van Rensburg's office. All digital recordings will be destroyed three (3) years after the research is complete. Beth van Rensburg and her dissertation committee members are the only ones who will have access to the data collected for this study. Your name will be kept private.

You will be asked to review your interview transcript and make sure it is correct. You may request that material from your interview be left out.

A possible benefit to others is that the information gained from your interviews may have the potential to provide important information in the development of new programs for foster care which would benefit children who may enter foster care in the future.

For questions about your rights as a participant, you may contact the Texas Tech University Institutional Review Board for the Protection of Human Subjects by writing them in care of the Office of Research Services, Texas Tech University, 203 Holden Hall, Lubbock, Texas 79409 or by calling 806-742-3884.

If you sign this sheet, it means that you read this form and all of your questions were answered.

Signature of Participant

Date

This consent form is not valid after December 31, 2011.

Appendix D

RELEASE FORM TO DIGITALLY RECORD INTERVIEWS

I, _____ hereby give my permission and allow Beth van Rensburg, doctoral candidate in the Counselor Education Program, to digitally record all three of my interviews connected with the research entitled, “Complexities Related to Aging Out of Foster Care: Life Skills, Self-Sufficiency and Trust.” Beth van Rensburg’s dissertation committee will have access to these recordings during the course of this research. Beth van Rensburg will be the only one transcribing the recordings and will have the responsibility of protecting them. You may withdraw this consent at any time during the research process should you choose not to continue. Unless withdrawn, this release form will be valid until all three interviews are finished but will not be valid after December 31, 2011.

Signature of Participant

Date

Appendix E

Participant Interviews and Protocol

Protocol for Interviews

During the first meeting, I gave each of the four participants a copy of the research focus and guiding questions detailed in Appendix B and explained that each of their interviews would follow that format and my role was to listen during their interview. I also explained that they could choose to share more or less information, within the 90-minute period, and to recount the information, they chose to share, in the form of a story with a beginning, middle and end.

Participant: Noli – 20-year-old Hispanic female

Interview One

I came to CPS when I was three. I move to five different foster homes until I reached [name of foster home]. My big little brother was with me and we stayed at that foster home until I was five. My first CPS caseworker told us that we were going to go meet our brothers and sisters and have a visit with them and little did we know that we were staying at [group home]. I stayed at [group home] for about 13 ½ years. The first place I was in the home with my sister. My three oldest brothers were there with me. All six of us were there together. My first caseworker that was at group home, I liked her she was ok, she quit after awhile. Right after her we started having more [group home] caseworkers and more CPS caseworkers. Turns out I have had about seven at group home and at CPS I have had about eight. So that is a lot. House parents I've had, the first ones I had were strict and mean. I had them until I was 11. Then I had another set

of house parents. We got along pretty good. They did a lot for us. My sister left when I was 13. She went to rehab. That was hard for me when she left because she was like my mom. So anytime she would leave I would throw little fits. That was the only person I knew really and that I could depend on. That was because there was # of houses at group home and I really did not talk to my brothers because I would always be inside. Once when my sister went to rehab, it made me, like ya know, whatever, I don't care anymore. Then she came back and got move to another home and then our house parents got fired. Then we got a new set of house parents, which I didn't like, so from there I just had a rough life when I had them. I don't know. When I was with them, I would do bad in school. I wouldn't do homework. I would get in trouble with pink slips at school. I started running away during the summer. I would run away every day with some of the other girls. It was funny to me, but it was bad because ya know we had little kids in the house and I was one of older people in there running away. I just did that because I did not like my house parents. I told my previous house parents, that if they ever quit or got fired that I was gonna runaway or be bad and I kept my word. I sure did. So, I started running away. I got put on probation for running away so many times. I had a couple of fights with some of the girls in the house. That's not good. Probably in 9th grade, I got kicked out of [that home] because I kept doing bad at school. I would get in trouble in school. I would skip school. Me and one of the other girls got put in STAR for skipping school, but school was already over it was 4:30pm and that Assistant Principle at the middle school, she was a horrid little witch. She sent us to STAR for about three months. We had to cut our hair. Both of us did not know we were going to STAR, I can tell you

that much. The group home did not even know we were going to STAR. [Education liaison] did not even know we were going to STAR. Our house parents and the Assistant Principle were the ones that did that. When we got done with the three months, I was out for about a week. I went back to PROJECT, which was the second part of STAR because my drug test was positive. So I had to go back to PROJECT. I stayed there for about a semester. I went back to my middle school, still did bad. I didn't care, didn't do my work. My house parents got fed up with me and asked their boss if they could move me to another home because I was a negative role model for all the little kids in the house. I really didn't care because I would do whatever I wanted. I just gave up on life once I got kicked out of that home. I got moved to another home at the group home with another set of house parents. Everything was going good there for a minute and then the female house parent was nothing but a liar. She would lie to us. She would start problems. She was an instigator. At that time, I was in high school when I started living in this home. I ended up fist fighting her husband because he put his hands on me. They eventually got fired and then we got another set of house parents. These house parents made about number six for me. My house parents sat me down and told me that there was really no rules but to respect yourself and everybody respect you. The male house parent made me cry the first day that I was there. He was like, "I know you've had a rough life, I don't know you, this is my second time meeting you, anything you ever need, ya know, he said that he would be there. He was like if you ever want to talk about your life story with me, I'll be here. The house parents started reading the bible to me and started telling me, ya know, like, telling me that everything was going to be okay, and that everything

happens for a reason. And then after that, I straightened up and I finished my 11th grade out over there. They helped me find my first day care job and I really enjoyed working over there. I got really, really close to them so when I was leaving the group home I had a nervous breakdown months prior to my leaving and I didn't want to go. I was telling the female house parent over and over that I didn't want to go because this is the only place I know. This is where I feel safe. I might be, ya know, act like I'm tough, but deep inside I'm really not tough, I'm really sensitive. I made it out of the group home, but life over there it's hard. Growing up in CPS is hard. You really can't, I don't know. I didn't like it, I don't like it and I hate to see kids still in CPS. I wish I could just take all of them in my small apartment and tell them it going to be okay as long as, ya know, you stick with it and don't look back. Cause that's what I do. I don't look back. The only times I do is when I'm like oh remember this when I had fun. I don't know. Now that I'm out, the only thing that I've learned in CPS is, ya know, life is hard, but ya have to work through it and everything just works out itself. I was okay being at the group home, but the only thing that made me go crazy was the different counselor changes, the different house parent changes because once you get close to somebody they ended up leaving. I was the type of person who tried not to get close, but anybody I know and I can trust, I'm going to get close to but it's harder for me because once I get close and you leave, it's harder for me to trust someone again because you can never, hardly ever, find someone you can trust. I don't know, it was hard for me growing up because I had so many and I saw so many kids come and go that I wished that I could go home with my parents or I could go home with a family member that loved me, but I grew up in CPS and I got out

when I was 19. There were only two sets of house parents that I really got close to while I was in care. There was only one CPS caseworker that I got close to and still talk to. She was my caseworker for my last four years. Out of the regular office staff in the group home there was a secretary that I got close to, I still am close to her today, and we still talk. I was close to one female clinical staff and then I got close to two of my counselors. The whole time I was growing up, there were only five people that I can say that I got really close to and was able to trust them. There was nobody else that I was ever able to get close to. It is still very hard for me to get close to anyone and I haven't. I am still close with those five people. I am closer to those five people than I am anybody in my family. I can't talk to my family about anything important like I can those five people. I think it's because I am not close with my family. I owe it to those five staff members who helped me get through CPS care and aging out of care. Without them, I would not have made it. I would have probably been off in another town doing something bad. While I was in care, I was referred to the PAL program when I was 16. At the time, I could not make all the meetings because I was in volleyball and track at school and sometime I just didn't want to go. It took me almost two years to finish the program. Then I started working and I could not miss work just to go to a meeting. I can't say that I learned anything from them because I really did not pay attention when I went because I was texting or talking or I would get sent home because I was being rude. Fortunately, when I really needed the information after all the classes were finished, the PAL coordinator really helped me as I would meet with her on Wednesday s or Fridays and we would do PAL just by ourselves. I have really had only one person who has

really helped me from the day I transitioned out of foster care until now. That person has really helped me through a lot. The one thing that I learned from the PAL program was budgeting money. I am able to budget my money and pay my bills by the due date. The PAL program also showed us how to get an apartment. One Saturday the PAL coordinator took us to apartment complexes and the apartment manager would show us the model and tell us what we would have to do to rent an apartment. We learned how to fill out the lease application. There was a day when the PAL coordinator took us to a car dealership and we looked at cars and learned what was needed to buy a car. The group home taught us how to change a flat tire and other things in case we got stuck on the side of the road. Overall, the group home taught us a lot but I just didn't pay attention to all of it. I only paid attention to the parts that I thought was interesting. I wish I would have paid attention to all of it and cared about it the first time. It would have been so much easier.

Interview Two

I transitioned from foster care to independent living when I was 19. I graduated high school on January 8. I moved out of the group home on January 13 and that was when I moved into the dorm at a junior college. It was really hard for me to leave the group home. A few months before I left, I had a nervous breakdown. I just kept on saying to my house parents that I did not want to leave. On New Year's Eve, I talked to my house parents about leaving. I remember crying and crying and telling them that I didn't want to leave. I was too scared and I couldn't do this. I was at the group home for most of my life. That is what I knew, where I felt safe and I called it home. I know sometimes I

would be rude about the group home and call it a temporary placement my parents left me at, but deep down it was my home. My house parents really helped me through that. When I moved into the dorms, I really didn't do anything. My counselor and the educational liaison from the group home basically set up my dorm room. I really did not do anything at all. I just sat there and watched them. My counselor gave me some books of how to make it on my own. When I left the group home they gave me a cup full of quarters, so I could do my laundry, I got a bed comforter set and a set of towels. That is all I remember getting from the group home. The majority of stuff that I got, I remember getting from my church. They gave me a set of dishes and gift cards to go shopping for the things I needed. They also gave me pillows, a throw rug, a bathrobe, six months' supply of shampoo and conditioner and some clothes. I can honestly say that my church helped me out more with stuff when I moved into the dorms than the group home did. Half of the people from my church did not really know me and they were willing to help. For the first semester, I went full time but I did not finish that semester because I dropped out. Well, I got in trouble. Well, I didn't get in trouble, my sister got into a fight with my roommate and that caused me to be on probation at the school. Then I was put on academic probation, so I just finally gave up. I just gave up on life. I quit everything. I quit my job. I quit school. I quit talking to everybody and I was like I can't do it. I haven't went back to school. I wound up dropping out of college because one it was too hard and I didn't want to do it. Second, because I was on probation and it just made it harder for me to keep my grades up and not get in trouble. While I was in junior college I had to see three different counselors, one was including the dean. I had to meet with her

every Tuesday. I had to see two other counselors, one because I was probation for academics and she was trying to help me get back on track and keep my grades up. The second one was because I needed someone to talk to. I had to go see her every Wednesday. When I left college, I went straight to my sister's house and I stayed there until about the beginning of June. Then I got back into foster care. I called around and asked if I could get back into after care, which is a home at another group home. I stayed there for about 2½ months because I wound up getting my own job. I did work. I worked and went to school. I did night classes so that helped me a lot because I still wanted to do a job and go to school part-time. I wound up getting a house with one of my friends. I didn't keep the house too long because I wound up quitting my day care job and we couldn't pay the bills and that is why we moved. I couldn't pay by myself and my friend wasn't helping me so I finally told her to it was time for her to get out and get her own place. When I quit that job I went to my sister's again and I stayed there for about six months and then I finally told her that I couldn't take anymore of her crap so I left and went with my other friend. It took me about two months after I left my sister's house to find my own apartment and get another job. I am currently employed at another day care. I have had about seven total jobs and the last three have been in day cares. That is what I am good at. I want to be a child psychologist when I finish college. I am still a freshman in college and I am hoping to get back into college. Dropping out of college was a very stupid thing to do. It was the dumbest thing I've ever done. To get back into college I have to go through this long process and write letters and basically tell them why I dropped out and why they should let me back in college. Then I have to write a

letter of appeal to the financial aid to try get off financial aid suspension. When I dropped out, I just left. I left the dorm early. I did not tell anyone I was leaving the dorms early I just left. I was not supposed to leave early. I just packed up my stuff and left. Since I was in foster care the state will pay for me to go to college as long as it is a public college and not private. I really want to finish college and get a degree, but I don't know. A typical day for me when I was going to college was that I would wake up at 7am and go to classes from 9am to 12pm. Then I would go to lunch from 12pm to 1pm and then I would finish my classes from 1pm to 3pm. Then I would go home and do activities with one of my friends. We would go to the basketball games and do other things. Now that I'm not in college I just get up and go to work at the day care. I get the weekends off and I usually spend some time with my brothers and sister and my friends.

Interview Three

Growing up in CPS was my life. It was all I knew. I didn't know much, but I managed to graduate from high school and attend a couple of semesters of college. Now that I'm out and I talk to my family members they would tell me that they knew we were in CPS and they would try to get us or talk to us, but the caseworkers would not let them. One of my Tia's told me that she used to take care of me and my big little brother. We used to live in another state with her. She said that my mom didn't like the fact that we were in this other state so we moved back to my home town and CPS did not like that so they took us away from her [aunt]. I don't remember moving with my Tia when she told me this, but she was like, yeah, and some of my cousins also told me that they tried to get us. They said that my caseworker would tell them that we were doing ok in the group home

and I think it was because of money to the group home. I can't say that life would have been better if I was with family members or my mom and dad, but I can tell you that it would have been different. I'm glad that I grew up in the group home because if not then I would not have found the people that really care for me and showed me how to live by God's way. I would not be the person that I am today. I think that I would have been a very different person today if I would have lived with my family. Probably not a good person, but a very different person. Sometimes, I wish I would have grown up with family members that way I could see what a different person I would be. But, ya know, this is the life that I had to go by.

Participant: Becca - 21-year-old Hispanic female

Interview One

I was first put into care when I was three years old. I was put into care basically from my parents not being there. There was alcohol and drug abuse. It was me and my two sisters and my four brothers. We were all split up and put into different homes. I was put into a temporary foster home until I was five. My sisters and my brothers went into a [group home] and basically I stayed at the first foster home until I was five ready to start kindergarten. Then when I was reunited with my brothers and sisters at the [group home] I was in the same home as my sister. The homes were categorized by age. When I got to the group home, I got a counselor and I started school about in the mid school year. I was put into school at [name] and I was not able to complete the first grade year so I had to go to summer school. The group home assisted in the education. They had a building and in the basement, they had computers and a learning center set up. Some of the staff

of the group home assisted us with reading, speech and writing. At the group home as far as caseworkers were concerned, I had about eight caseworkers. I had some that would get my case and then once we would get to know them then they would pass our case to someone else. That happened quite a lot. There was one that we were actually told that they were not able to handle our case because it was considered bad in a way. I stayed in the group until I was about 10. We would have daily activities, chores and there were times where we would get to go to the mall and maybe the movies. As far as school and education when we got off the bus, we would have to go to study hour. They would have a tutor for each group home from Tech or some learning place and help out with our homework and projects. As far as my family, I did reunite with them, but it took us a long time to get close again. My sister and brothers had a lot of anger towards me. In the beginning, we did not really get along, but once we got to know one another we started getting closer and closer. Later on during the school year my sister [name], when she was about 13, got placed in a foster care home with the [last name of foster family]. That was very hard for me to take in because it was just me and my brothers now in the group home. Through that time that gave me a lot more time to get closer to my brothers. My brothers are very helpful and loyal. They are basically really good to me, I looked up to them. One in particular [name], he was my role model. The summer before I was about to go into 4th grade I moved in with the [last name of foster family]. It was a very big transition for me. My brothers did not take it very well. But, after a while they did understand why I wanted to go and live with my sister in the foster home. When I got to the foster home, for a long time I was having lots of problems. I would have lots of

temper tantrums, I missed my brother, I would go into depression and I had a hard time trusting anyone. There were times when I would not talk to anyone. When I started school, there were times when I would leave school cause I felt like they were going to hurt me. I was basically afraid of everything, bugs, dogs, dark, people, everything. The foster dad really helped me with a lot of my fears. They helped me a lot with everything. They tried to make out lives as normal as possible. I was with them from 4th grade until I graduated from high school. Starting my sophomore year, I failed a TAKS test and I did not get to graduate with my class. It was very hard for me to accept. I got really discouraged and almost gave up on graduating and thought that I would never pass the TAKS test. At one time, I was just going to give up and go take the GED, but I was afraid that I wouldn't pass that either. The foster family got me tutoring to help me with understanding the content of the TAKS test and I eventually passed the test and graduated from high school. As far as counselors, I had 3 different counselors. My foster mom and my last counselor helped me to have motivation and believe in myself so that I could graduate. They really pushed me in my education, they believed in me, then I believed in myself, and then I graduated. My counselor and foster mom really helped me when it came to getting my driver's license. They believed in me and helped me to believe in myself and I finally got my driver's license. I was already 19 when I got my driver's license. I attended the PAL program. I started it when I was 15. We learned how to do checks, how to do independent living. The PAL coordinator and her assistant were very helpful in teaching me about skills to live on my own. Things like budgeting, how to write checks, a little bit about cooking, some skills on parenting, what to look for when

buying a car, and some things about credit. We would meet once a week on Wednesdays for about 2 hours. I graduated from that program. My foster family did the most in teaching me about living on my own. We would have chores to do in the home and that helped us learn what we needed to do. As I look back over my time in foster care, and seeing my family now, I think that foster care was a good thing for us because I would have been in a very different place now. Not a very good place. I think three of my brothers ran away from the group home when they turned 17, one was placed at another group home and one was placed at a state school. So for me being placed in the foster home, it was a good thing for me and my sister. We got a lot of help from our foster parents and they taught us things over and above what the PAL program offered. Information I learned from the PAL program helped me, but what I learned from my foster parents is things that I use every day. I think that if I wouldn't have had the additional information from my foster parents, I think that it would be a lot harder for me when I aged out of care. I felt like they were and still are my parents. They treated me like one of their children. I feel like they taught me what they taught their own children and I was part of a real family. I think that the stability in the foster home that I had also helped me in building trust and relationships with adults. I feel lucky as I only had three placements while I was in care, the first foster home, the group home and then the final foster home. I found out what unconditional love was from my foster parents.

Interview Two

I aged out of foster care when I graduated high school when I was 19. That was because I could not pass one of the TAKS test. I stayed there for a few months and then I moved

out of the foster home and moved in with one of my friends for a couple of months because I wanted to have more fun and freedom. Then I moved in with the foster parents' daughter for a few weeks till I got out on my own for about three months. Then I realized that it was very hard and that it is like a battlefield out there in the real world. I am very lucky that after I found out that I could not make it in the real world that the foster parents let me move back into their home. I made an unwise decision and I bought a used car and my foster dad tried to warn me and help me, but I would not really take his advice or help in this area. The car broke down a lot. When I moved in with my friend, I did not really look at all the expenses that I would have. At first, I thought it was going to be very easy, but living on your own is a very hard thing. I just wanted to do it all on my own without their help in the beginning. I had a lot of pride and when I failed at living on my own it was hard to accept help from my foster parents again. Living on your own is a huge transition especially when you are in foster care. You realize that you don't really have anyone but your prior foster parents and I had my sister. It was not looking very good for me, I started jeopardizing my college, and I needed my family. That six-month transition was very hard. I wanted to make it on my own, but I had to move back in with them. I am currently working at a discount department store and I started working there before I aged out of care. My first job was working at a fast food place because my sister worked there so she got me a job there. I worked there until my sister left and went to another fast food place and then I started working at that fast food place. I worked there until I got my job at the discount department store. I really like this job a lot better and I am making more money. One thing that I really learned from

my foster parents is about saving money. I had managed to save several thousand dollars from working at the fast food places and that is what I used to buy my car and the things I needed when I moved out of the foster home. I was put in the aftercare program when I aged out of care. That program would match the money I had when I want to buy a car. I attended a local Jr. College. When I moved into my own apartment, the program paid the deposit and helped a little with the rent. In the beginning, at times it was difficult because I depended on my roommate for transportation. The time that I lived with the foster parents' daughter was better than the roommate was, but it was even more difficult when I lived in my own apartment. Now that I am back home, I am still working and still going to college. I also help out around the house and help with the new kids they have in their home. I am hoping to be moved to a different position in management. As far as being back in the foster home, I am not as stressed now. I was always worried about the bills and transportation. They are allowing me to drive one of their cars because my car broke down three months after I bought it and it was going to cost too much money to have it repaired. I feel like I understand what it takes now to live on your own, but I am still growing up and learning. When I was living with my roommate a typical day would be to go to classes then I would go to work. I would spend some time with her, but we had alone time and would study. Transitioning out of the foster home to an apartment with a roommate was very hard, but being by myself was even more difficult. I really did not think it would cost as much as it did and sometimes I did not budget enough money for food. I am not going to be in a hurry to move out again. I am learning more about living on my own and I am accepting help so that I can stay in college and work towards

moving out and moving out the right way and not wanting to leave as soon as I passed my TAKS test. I wanted to move out to have fun but the fun turned into worrying about bills and getting a ride to classes and work. So the next time I move out I will be able to make a better choice and I will save more money and I know what bills to expect and what area to look for a place to live.

Interview Three

As I look back, I think to myself that as a person being in care I was always ashamed of whom I was. I was very weak and I did not have much faith in myself when I was in the group home. I thought it was wrong to make a mistake and not to forgive yourself for it. Today, I have come to realize that I am a very strong willed person. Looking back and going through the trials that I went through to get where I am today and the guidance and the people that came in and out of my life helped me get there. It's important to believe in yourself. I was always blinded by all the negative things that I never realized how strong I was. It took my whole life to realize that I am a strong person. It was there I just never realized it. I have a big heart and I have found love and joy and peace. Being in care until now, it is kinda like every day you have a battle you have to fight or a trial to go through. I have lots of dreams for myself in the future. I have learned to take constructive criticism well now. It is there to help build you up not to tear you down. I have been through a lot of things and I still have my dreams for my future and I know that I can make it and my dreams can come true. I think that every person has instilled in them parts of other people. When we face certain challenges in life, it makes us stronger. When I was in care I always felt very weak, small and less important. I was always self-

conscious of the way I was. I know now that I am strong and I am important. I can look back at my mistakes and realize that I have learned from them and it has given me the strength to move forward and follow my dreams. It is important to realize whom you are, finding yourself, and knowing that you can do something. Not looking at the negative and that it is okay to make mistakes, you learn from them and then move on. There have been people in my life that have taught me things about myself and have helped me to grow to be who I am today. It is important not to take in all the negative. It is important not to allow your past to be your present and ruin your dreams. I am a lot more strong minded and I don't allow all the negative things bring me down. I realize that I just can't go and tell everyone my life story cause sometimes it just messes things up, especially at work. People don't want to hear all the negative things you have been through. Being in foster care was a very difficult place to be in growing up. But, all the trials that I went through and all the people that I had around me, because of all of that, it makes you who you are. It shapes you up, you build character, and it makes you a stronger person. I always thought that before I moved into the foster home that other people looked at kids in care and thought they would not make it in life, that they would quite school, get hooked on drugs and this and this and this. I always thought that "oh we are just in care and its more shame". But now I realize that I don't have to have shame. I love to see people happy and make it in life. When I look back at pictures of my life when I was small, I see someone who is small and fears everything. Now I don't fear the same things I did when I was small. When I was young I did not talk I was mute. I did not let anyone in. Now I talk and I share things. So overall I see being in foster care as a way of me

growing up and becoming a strong woman, overcoming my fears, learning to talk and share, a place to grow close to God, and learn about life. I see it overall as a positive experience because if I would have continued living with my biological family, it is really scary to think where I might be. I have learned how to work through challenges and not run away from them. I am teaching myself to be a stronger person and to have faith in myself. When I was in care, I used to be so afraid of what others thought about me. Now I don't worry about it. I have hopes and dreams. I see myself being in a different place, having a studio where children come to sing, make music, and dance. I see me performing in front of crowds, travelling, but also setting an example to young people. There are always children around me and I see myself working with children. Children can see a person's heart and how good it is. I'm not sure exactly where God wants me right now, but it will involve me being around children. That will be my way of giving back to others, especially children

Participant: Jacob 22-year-old white male

Interview One

I was in foster care for 11 years. My first placement was at an emergency shelter. I stayed there with my brother and sister for a maximum of three months and then we were moved to a children's home to a group home. My behavior was bad when I first arrived, but that got better after awhile. The staff was great. I got along with them and learned to follow the rules. I can't say that I had a fun time being there other than when we went on vacations in the summer. I miss some of the staff and other kids that were there. I felt that my house parents really helped me and I could talk to them about anything. They

really were there for me and still are. They really took on the role of my mother and father. I had the same house parents for the whole time I was in the group home. I had only two CPS workers and three caseworkers at the group home and I had four counselors. I think that the house parents really taught us a lot about how a home was run. We had a level system and when we did well we got extra privileges. I always did my chores and tried to do what was expected of me. I really got close to my house parents and some of the staff there. I think that having the same house parents for 11 years really helped me to adjust and it was like a home. I was in one place and I knew what to expect from them and the group home staff. I could talk to my house parents about anything and they really helped me and taught me a lot and helped me grow up. I was seven when I was put in the group home with my house parents. I was referred to the PAL program when I was about 15 or 16. I would go to the classes weekly. I can't really remember how many months the classes lasted, but each week the class would be about 2 hours long from 6pm to 8pm on a Friday night. The PAL ladies were real nice and very helpful. They taught us about how to do a budget and save money. They showed us how to fill out job applications and apartment application and how the city bus works. Some of the kids in the classes didn't really pay attention. I tried to pay attention. My house parents told me that these classes were offered to help me when I got out of care and that the classes were important. I feel like I learned some things in the classes. I can fill out a job application and I have had four jobs since I was 17. They talked about the financial assistance and college. They talked to us about how to find a good doctor, keep up with our medical records, and go to the doctor. They talked to us about how to

choose a major in college and getting into a career. The PAL program was helpful and you could learn some stuff if you went to the classes and paid attention to what they were saying. I wish that I would have been able to get my driver's license. I still don't have them, but when I was at the group home I went to driver's ed classes and they paid for it, but I did not pass the driver's test. I'm really hoping that I can take it again someday and pass. I think that the group home did the best they could to prepare us for the real world. It was up to us to learn it and put the information to use for us.

Interview Two

I graduated from high school in May and in August, I started going to a Jr. College. I stayed in the group home over the summer until I started at the Jr. College. I only went to college for one semester. I am working at a restaurant now. I have been there for two years now. I have had three other jobs. I worked at another restaurant and two grocery stores. My brother and I moved into the dorms. After that semester, we quit and moved in with our biological mom. That is when I started working at the grocery store in the town where she lived. After a few months, I really got tired of living with her so I moved back to the larger city where I grew up and transferred and worked for the same grocery store. The transition out of foster care was very hard for me. I moved to the dorms and then I moved in with my mom and then into the real world. It was a lot harder than I thought it would be you gotta learn to do things on your own. There's no one there to do it for you anymore. No one is telling you what you gotta do and when to do it. When we went to college, we got a big storage trunk from the agency group home. It was full of stuff that we needed. Overall, I think that I transitioned well out of foster care. I like

being out of foster care. I have more freedom and can do what I want, when I want. There were some kids that did not want to leave and had a real hard time leaving the home. When I moved into the apartment, I got help from the program to pay the deposit. Right now, all I really do is work about 40 hours a week. I have different work times each day, but Monday is the only day that I work late. Other than that, I just hang out, listen to music, surf the internet, play video games, watch TV, talk to my roommate and do my chores. I think that my house parents taught me the most about growing up and being responsible. I know how to do chores around the apartment and do my laundry. I don't always like doing them, but I get them done. Right now, I kinda got a boring life. I wish I would have had a better understanding of how much things cost when you're on your own. When I was at the group home, I did not have to pay for anything. I got an allowance for doing my chores and for good behavior, but I just blew that money on junk. Once a week our house parents would take us to several different stores and let us spend our money if we wanted to. I always bought something and never had any money left. I did not realize how much it would cost to actually live on your own, buy food and pay rent and pay bills. Sometimes I think that it is hard to survive on your own, but I wouldn't trade it to live in foster care again or live with my mom again.

Interview Three

I think that my experience in foster care was pretty good. I was there for 11 years, which was longer than I was with my family. I know that what I learned from my house parents has helped me more than anything. Moving out of the group home to the dorm was difficult, but it was really hard to move back in with my mom. I was only there for a few

months and I couldn't stand it. My dad got arrested and put in jail cause of his issue, and my mom has a problem with alcohol and I don't think that I could have lived there with her in her filth and smoking. It was hard to live with her for those few months, I can't imagine living there with her after my dad went to jail. That is when she started drinking. For the few months I was there with her, I worked a lot and managed to stay away from the house as long as I could. I only slept there. Don't get me wrong, I love my mom, but she is not a good parent or in a good place right now. I can see why we did not get to go back and live with her. I think growing up in foster care gave me a better chance to have a better life. When I was with my mom after I got out, I felt like I was getting depressed. She is not a happy person and I felt like I was becoming just like her. That is when I knew I had to leave and move out of that town. My house parents were more like a real mom and dad to me. They listened and taught me things. They also taught me that it was wrong to lie and steal. They taught me to be responsible and that keeping a job was important. We went to church, I learned about God, and I liked that. I don't really go to church now, but I don't lie and steal. I have a job and I am responsible at work and paying my bills. I still don't have my driver's license. I have to get a ride to work. Sometimes I take the bus or walk if the weather is good. I always make it to work when I'm scheduled. I know that keeping that job is part of my freedom. What I mean is that I can live with my roommate, pay bills and not have to depend on others for money or go back and live with my mom. It's bad enough to depend on someone for a ride, but I'm hoping to change that soon. I think that if I would have never been taken from my mom that I would not be where I am today. I think that I probably would have been bumming

around, depressed and not have a job, living with my mom and drinking. That really makes me sad to say that, but I really feel like it's the truth, especially after going back and living with her for a few months. I think that I'm better off now than where I could have been if I would not have been taken away from my mom. At this point, I don't regret growing up in foster care, but I really wish that things could have been different with my mom and dad so that me and my brother and sister could have stayed at home.

Participant: Raymond – 24-year-old African American male

Interview One

I entered foster care when I was 13 years old cause my mom used drugs and my dad was in prison for making and selling them. I had two younger brothers. One was eight and the other six. They went to live with my aunt and uncle and I went to a group home. I managed to stay there for five years. At the time, I didn't understand why I couldn't live with my aunt and uncle, but now I know it was because of my anger. I was mad at my dad for leaving us and mad at my mom for not being there for us. I had to do everything for me and my brothers. My dad went to prison right before my baby brother was born and my mom just couldn't keep it together by herself. My aunt would help her and would sometimes keep me and my brothers, but I hated being there cause I always worried about my mom. I just remember her always crying. When I first got into foster care I would see my mother and brothers at least once a week, but after about a year she stopped coming and then I didn't get to see my brothers as much. I got even angrier. I was getting in trouble at school. Nothing major, but it seemed like I was always in the principal's office for stupid shit. I didn't really learn anything after the 8th grade and I

don't think I would have graduated without my best friend's help. I left care the day after I graduated. I went to the PAL classes, well some of them. I think I was 16 or so when I started going. My group home caseworker and CPS caseworker told me that I had to go. They kept talking about all this stupid adult stuff, like money, getting a job, going to college. I skipped most of them cause it was just like school. To me it was just another person telling me what to do. I was not mentally prepared to listen to what they had to say. All I could think about was leaving that hellhole and I didn't care how. I hated school so why would I want to go to college. I ran away a couple of times but then my CPS caseworker told me that if I ran away again that I was going to have to go to an RTC. That was one place that I didn't want to go cause there was this kid who got out from one and he came to the group home where I was. I remember him telling us horror stories about that place. So, I decided to not run away again. Like I said, I left the group home the day after I graduated high school. My caseworker at the group home tried to talk me into staying a few more days so that I could have 'a plan'. I told her I had my own plan and that was to leave. I don't really remember anything that they said in those classes. I do remember that they wanted us to learn how to fill out job applications and talked to us about a budget. I didn't have any money so who cared about a stupid budget. I wanted to learn how to drive but they [group home/CPS] wouldn't let me. Said that I wasn't responsible enough. I didn't do sports in school. I hated school and did what I had to do to get out. When I left the group home, I went to my friend's house. Before I got put into care, he lived down the street from me and we went to school together for about 4 years. Him and his parents moved close to the school where I was going and we

met up again. His parents were cool and they let me stay there for a while. His mom was cool. She owned a business and let me and my friend work there. She helped me get my driver's license. I managed to save some money with her help. She would take money outta my paycheck and put it in a savings account. I saved enough to buy an old used car. My friend's parents, especially his mom, helped me get on my feet when I left the group home. About four to five months before I left the group home I found out that my mom and dad's rights were terminated when I was 15. My dad was still in prison and my mom died by overdosing on drugs. My caseworker at the group home told me my aunt and uncle adopted my brothers and they moved outta state somewhere. That explained why my aunt stopped bringing my brothers to see me. I didn't even care to find them. I figured if they did not want me or want to keep in contact then why should I look them up. My attitude was really, really bad. Looking back, I am surprised that my friend's mom and dad put up with me and my shit. But, like I said they were cool. My friend's mom made me pay her \$200 a month for living there. That included my rent and food. I had to pay for my gas and car insurance and my personal stuff, but it was a good deal. I didn't have any health insurance. I guess I was lucky that I didn't get sick that much or break anything. If my friend's parents wouldn't have let me stay there I don't know where I would have gone or what I would have done. I didn't know much and I was damn lucky that she hired me and gave me place to live. I did not plan on staying there long. But, I needed money so I took the job she offered and it really helped me grow up some. I had rules there, but they were nothing like the group home rules. I hated that place and everyone associated with it. I think that I somehow blamed them for me being

there. I stayed to myself and didn't participate in anything with them. Looking back, I can see that they tried to reach me, but I wouldn't have it. I didn't want anything they had to offer. I didn't care about anything or anybody. There were way too many people telling me what to do and what not to do. I didn't make any friends while I was in the group home. When I first went into care, there was this one staff who was cool, but then after about seven months they left. It was hard, as I didn't make friends with any of the other staff. I was a real loner. Looking back, I guess I can see that if I would have listened and participated in the PAL classes that I might have learned something. I just learned how to be angry while I was in the group home. I had three different counselors, but I talked around my feelings and problems cause I didn't trust anybody. I didn't really learn anything from the group home or the programs cause I didn't care to listen. I guess I give all the credit to my friend's parents for teaching me about my job, saving money, getting my driver's license, giving me a place to live back then and how to pay bills. My friend's dad drove a truck and knew how to work on them. He taught me and my friend a little about working on cars and trucks. That comes in handy sometimes. Looking back, if I had to do it all over again, I would try to learn some stuff from the program and maybe it would of been easier for me. I don't know if I could of let my anger go back then. I was too young to understand all of what was going on and of course nobody told me what was really going on with my mom. I mean I knew she used drugs, but I always thought I would go back home with her and my brothers.

Interview Two

Well, my life is different now than it was when I left the group home at 18. It's been about six years now since I left. I spent about two years with my friend and his parents. Not sure how it lasted that long, but they were cool and like a real family to me. I got into a fight with my best friend's dad and he kicked me out. The mom, well she stuck up for me but I still had to leave. I didn't want to make it tough for her cause they were fighting some. I told her I would find another job cause I didn't want to cause any more problems. My friend was wanting to get outta his parents' house and get his own place, but he had to get some money together first. I told him when I got a job that I would split the rent with him. He said that would be great so we kept in touch. He stayed working for his mom and I left and spent a few weeks sleeping in my car. I guess you could say that I was living outta my car. Before I moved out of my friend's house, I met this girl and we kinda hung out some and she let me sleep over some and take showers. Her roommates were real bitches, so I could only stay there a few nights a week when they were all out at the bars and their boyfriends places. I guess this went on for about 4-5 months. Looking back that time went fast. I got a job the fast food place where my girlfriend was working about a month after I quit my other job. I tried to look for another job, but they weren't hiring. I wasn't making enough to get my own place, my girlfriend had roommates, and they were all going to college. Her parents were paying for her rent. My friend came into the fast food place one day where I was working and told me that he was moving out that next week and asked if I wanted to share rent like we talked about. I told him sure and I moved in with him at the first of the month. We could only afford a

one-bedroom place so I slept on a mattress on the floor in the dining room area. We couldn't afford a table (laughs)! It was better than sleeping in the backseat of my car or at my girlfriend's place. I worked at the fast food restaurant until my girlfriend broke up with me. My friend's mom knew this guy who worked at this store and she helped me get a job there. That job lasted for about eight months then I was looking for a job again. So, I started working for my friend's mom again. I worked there for about two years cause I already knew the job and what I was supposed to do. The job was okay and it was money to pay rent and my bills, but I didn't want to work there forever. When I started working for my friend's mom again, she told me I needed to learn a trade so I could make better money. I decided to try auto mechanic school. I made some calls, talked to the man in charge, and got it set up so I could start mechanic school. I worked for my friend's mom while I went to mechanic school. I finished up there and I surprised myself, I did real good in mechanic school. Things just sorta clicked with me. I got it and it stuck. I've been working for this dealership as a mechanic for almost two years now. I got health insurance and regular work hours now. It's long hours, but it's okay. I was able to save money and get a newer car financed and me and my friend live in a two bedroom apartment now with a dining room table (laughs)! I still give credit to my friend and his parents. They encouraged me to go to mechanic school and stick with it. My friend believed in me more than I did at times. I didn't go back to the group home for help. I felt like I burned my bridges with them and I know they really didn't care. They were just doing their job. My friend and his parents cared. Things are better with my friend's dad and have been for several years. We have something in common with me

being a mechanic and all. So now, my days consist of me going to work from 7a.m. to 4p.m. I get up eat breakfast, work on cars, take my lunch break and when I get off I come home and take a shower and then get something to eat. Sometimes I wait for my friend and we eat dinner together and watch some TV, then I go to bed. It starts all over again the next morning. I have a pretty boring life (laughs). Overall, I still give credit to my best friend's parents and him for helping me out. They were there for me and like my family.

Interview Three

Wow, this is the tough part (long pause). I think I'm at a good place in my life now (short pause). Looking back over the last 10 years or so, I can see that I have come a long way from an angry boy to a man with responsibilities. I mean, like, I have a good job that pays well and I have my bills I have to pay. I don't wish any kid to go to foster care cause that means that they may not get out, I mean like me. I stayed in for a little over five years and it took me several years to get my act together and grow up some. I know my mom did the best she could, but the drugs had control of her. I had a family and it was taken away from me. I know there are a lot of kids who were like me. They had to stay in care and lost their family. I was never put up for adoption cause I was too old when I went in [to care]. I never got to go back and live with my mom and my brothers. When I got out of foster care, I was lucky to find a family that would put up with my shit (laughs)! I've told them I was lucky to have them in my life. I knew them before I went into care and they knew my mom and the situation. I think they really cared and wanted to be there for me cause they knew I didn't have anybody else. It was

hard for me to open up and talk when I was in care cause I had so much anger, but I know I was really scared and missed my brothers and my mom. I felt like I was all by myself. I just put this wall up around me. I've let it down some and I have my best friend and his parents to thank for that. I think for me being put in foster care changed my life, first in a bad way and then now I hope it will continue to get better. I lost my family and I can never get my mom back. My middle brother is 19 now and my baby brother is 17 and graduates from high school this year. A couple of months ago I found out where my dad is in prison at and he gets out next year. We have written a few times. He told me that he has been keeping in touch with his sister. That is my aunt that has my brothers. He told me that my aunt feels bad that she couldn't take me, but that they tried to contact me when I graduated, but that I had left and the group home didn't know where I was so they did not have any address to give her. I guess I messed up there. I was just so ready to leave that hellhole that I had to get out fast. So now, I hope I can get my brothers, my dad and my aunt and uncle back in my life again. My dad is sending my aunt my phone number so she can call me. My dad told me that he is very happy that I looked him up and contacted him. He said that no stupid paper would ever change the fact that I'm his son and he has always loved us boys. He said he was sorry for what he did and for not being there for us and for all that I had to go through. He even wrote my best friend's parents and thanked them for what they did for me. I feel like that I lost my family for 10 years, but now I know I really didn't we were just separated for awhile and now I can get them back.

Appendix F

Open Codes, Axial Codes and Selective Codes

<u>Open Codes</u>	<u>Axial Codes</u>	<u>Selective Codes</u>
Age entered care Multiple placements Living in care vs. living with family	Years living in care Multiple placements Living in foster care vs. family	
Multiple losses/people Siblings Returning to care, foster parents, others	Siblings Foster care staff Attachments Friends	Retrospective insight
Angry Fear Depressed Running away Fighting Temper tantrums Bad attitude Trouble at school	Externalizing behaviors in care	Emotional attachments
Employment Education Training (PAL) living Training (other)	Skills: academic employment life	Skills for independent
Excited Scared Nervous breakdown Freedom Fun Cannot wait	Feelings about leaving care	Experiences transitioning out of foster care

Appendix G

Human Subjects Committee Letter



January 6, 2011

Hansel Burley
Ed Psychology & Leadership
Mail Stop: 1071

Regarding: 502701 Surviving Transitions in Foster Care: Adults Who Aged Out, Speak Out

Dr. Hansel Burley:

The Texas Tech University Protection of Human Subjects Committee has approved your proposal referenced above. The approval is effective from January 6, 2011 to December 31, 2011. This expiration date must appear on all of your consent documents.

We will remind you of the pending expiration approximately eight weeks before December 31, 2011 and to update information about the project. If you request an extension, the proposal on file and the information you provide will be routed for continuing review.

Sincerely,

Rosemary Cogan, Ph.D., ABPP
Protection of Human Subjects Committee