

After Foster Care: Transition to Adulthood and Independent Living

**Felicia Elise Ward, Chester Robinson, Lavelle Hendricks
Dimitra J. Smith, Hailey Wanoreck, Jose Parr, and Cephas Archie**

Texas A&M University - Commerce
Texas, United States

Abstract

This was a qualitative, phenomenological study focused on ways the transitional experience could be improved for youth (in and aged out of foster care) upon turning 18. Research has indicated that individuals tend to build the needed skills for independence during their 20s, while teens in foster care are put out on their own with little support as soon as they turn 18, which is referred to as aging out. Recent policies have implemented transitional service support for young adults coming out of foster care for this reason. However, little research has been focused on exploring the experience of these young adults regarding the support needed and the available transitional services. The findings of this study will inform ways the transitional experience could be improved for youth

Keywords: foster care, young adult, transition, support, post-care

Background and Literature Review

The purpose of this qualitative study was to explore the aspects of transitional services that aged-out foster youth identified as most impactful on their experience of transitioning out of care and to what extent this support has been valued and received by the participants. Though foster care services date back to the 18th century, there have been changes to the system over the years. For example, there was movement in the past to return foster children to the home they were removed from. In fact, Pecora (2012), a keynote speaker at the Child Welfare Conference held jointly by the Texas Women's University and the University of North Texas, focused primarily on the need for foster care children to be returned to their homes from which they were removed despite the dating of this implication. The Adoption Assistance and Child Welfare Act of 1980 deemphasized this practice and instead focused on the best interests of the children. However, it was not until recently that the best interests of those children aging out of foster care garnered attention (Pecora, 2012; Sanders, 2003; D. K. Smith, Chamberlain, & Eddy, 2010).

Considerations for Transitional Care

Courtney et al. (2009) discussed that transitioning out of foster care seemed to be a struggle for young adults formerly in the system. Furthermore, "It is widely accepted that the factors associated with care may entail intensive experiences of adversity for the young people involved" (Gilligan, 2007, p. 136). Gilligan (2007) also shared that youth leaving care are prone to setbacks, such as those caused by more profound problems of maladjustment due to struggles leading up to foster care placement and those experienced while in the foster care system. Some reported issues individuals faced post-care included lower levels of

education, accelerated transitions, homelessness, and lack of skilled job attainment (Dumaret et al., 2011; Muller-Ravett & Jacobs, 2012; Stein, 2006; Tyler & Melander, 2010).

Stein (2006, 2008) identified three primary groups in relation to the outcomes of young adults who transitioned out of care. These groups were those “moving on,” the “survivors,” and the “victims” (Stein, 2008, p. 19). Those moving on successfully were able to gain aspects of resilience both while in the care system and after aging out (Stein, 2006). They tended to have more consistency; stayed in care after meeting initial transitional criteria, such as choosing to stay until graduating high school instead of when turning 18; and strategically transitioned from foster care (Stein, 2008). According to Stein (2008), “The survivors had experienced more instability, movement, and disruption . . . in care” (p. 6), while the victims faced the greatest difficulties, resulting in undesirable outcomes.

Dregan and Gulliford (2011) found that adults who had been through care were more likely to be depressed, have low self-efficacy, and higher rates of criminal convictions and life dissatisfaction than those who had no experience with care services. Courtney et al. (2009) discussed that focus has been on discharging and termination of state support for 18-year-olds from foster care in the past, but there was much “available research suggesting that many [youth aging out of foster care] have needs across all of the domains of functioning targeted by independent living programs” (p. 10). Though there is currently only weak evidence, it is suspected that extending care to these young people coming out of foster care could provide benefits for both their own well-being and to taxpayers, by “preventing outcomes that are costly to society” (Courtney et al., 2009, p. 11).

Secondly, as supported by Gilligan (2007), Havalchak et al. (2009), and Stein (2006, 2008), foster children need an opportunity for a consistent, caring relationship with someone who is committed to supporting them, long-term, and helping them through their struggles. Counselors consulted indicated that this relationship may exist in the form of a counselor, a case worker, a case manager, a house parent, or even a sponsor. Regardless, children need the opportunity for this relationship. The healthy relationship must be with someone who will advocate for the children and someone with whom the children deem to be their advocates. These children have had some issues in their familial relationships in the past which is why they were placed in care, and they need the chance to learn and experience what healthy relationships are like. Similarly, the children need a chance at some sort of normalcy, or at least consistency. Every time children moved to a new placement they are starting over and restructuring their life. Children need the opportunity to remain in an environment for an extended length of time to assist with their development of relationships, real life understanding, academic stability, and comprehension of consistency in general. Case workers, counselors, and case managers need to not only attempt to provide consistency and a positive caring relationship to the children, but also to help prepare them for life outside of care. Children must be taught about real-world life in order to grasp what to expect after leaving foster care. This may best be accomplished through the implementation of such experiences and education by case workers and case managers (D. Boyd, personal communication, July 17, 2013; S. Matassa, personal communication, July 15, 2013; J. Snyder, personal communication, July 11, 2013; K. Warren, personal communication, July 18, 2013).

Education

The young adults who successfully moved on after foster care also “achieved some educational success before leaving care” (Stein, 2008, p. 6). According to Gilligan (2007), supporting evidence exists that schooling may aid in trauma recovery, for those experiencing problems at home. Gilligan also shared that past researchers identified “‘educational success’ as one of the ‘stabilizing factors’ in adulthood” (p. 136). Education can play an important role in the lives of those in and coming out of foster care situations. School can provide “channels for development and change” (Gilligan, 2007, p. 139) for struggling youth. Education can also provide a perspective of what a more normal life looks like while giving them some sense of normalcy for themselves (Gilligan, 2007).

Caring Relationships and Housing

Stein (2008) also contended that resilience can be promoted through stability in care and relationships. These relationships can be found among adults with whom foster youth come into contact, such as teachers,

foster care support, peers, residential care support, family, and social workers for youth making their way through the foster care system (Gilligan, 2007). Support from adults of significance to the adolescent, friends, and family members have been identified as the most influential factor for the importance youth place on their own academic achievements (Gilligan 2007; Havalchak et al., 2009). Havalchak et al. (2009) also identified a continued relationship with case managers as being one of the critical factors for the aged-out population's success in adulthood.

Most of the youth from the foster care system transfer out to living on their own between the age of 16 and 18 years old, while those not in the care system tend to depend on their families well into their 20s (Stein, 2006). Due to this aspect, the "journey to adulthood is both accelerated and compressed" (Stein, 2006, p. 273) for those leaving the care system. This also leads to the foster care youths' increase of housing instability and homelessness (Courtney et al., 2009; Muller-Ravett & Jacobs, 2012). Additionally, Dumaret et al. (2011) found that most individuals who were unable to secure independent living after exiting the foster care system struggled with psychiatric disorders. Collins and Ward (2011) found that of those who had been in care, close to 50% received housing assistance before turning 18 and 44% still received assistance after 18. This suggested that there is at least some attempt to provide housing assistance needs for these youth and young adults.

Health Care and Mental Health

Researchers support the contention that medical health care is well covered for those in residential or foster care placement. Collins and Ward (2011) found that 83% of those under the age of 18 received access to health care. Additionally, more than 60% continued receiving this assistance after the age of 18. Similarly, Turner (2014) discussed the trend of Medicaid health providers adequately providing for the population. Contrastingly, the ratios of supply to demand of mental health providers declined. This may have indicated that most foster care youth and young adults had access to needed medical care. However, mental health care was less available, perhaps even scarce.

Dorsey et al. (2012) discussed the possibility of having caseworkers aid with mental health needs. They found, in agreement with other researchers, that providing "training and resources to caseworkers to improve their ability to broker general mental health services . . . for youth" (Dorsey et al., 2012, p. 28) to be at least somewhat successful. Bellamy et al. (2010) suggested, Given the tremendous mental health need of foster children and the volume of services purchased by the child welfare agencies, current policy and practice efforts must focus on ensuring that child welfare involved youth have access to effective mental health interventions (p. 475).

Purpose of the Study

The purpose of this study was to explore the aspects of transitional services that aged-out foster youth identified as most impactful on their experience of transitioning out of care and to what extent this support has been valued and received by the participants. ways the transitional experience could be improved for youth in, and aged out of, foster care. In this qualitative study, the author focused on factors of services for transitioning out of foster care from the perspective of young adults who have been through the process. The following prompts were considered: (a) how participants feel about the availability of transitional services for those aging out of foster care, (b) how prepared they felt to use the services at time of aging out, (c) which services they most value, and (d) which services are being used from the perspective of aged-out adults. The sample was obtained through convenience sampling of young adults who responded to advertisements of the study at TRAC. All participants were required to agree to the terms and conditions (informed consent) both verbally and in writing prior to participating in the research interview.

In this study, the writings of Moustakas (1994) on transcendental phenomenological research were followed. He stated the key steps to forming a study are finding an area of focus, researching existing literature on the topic, composing conditions for participant qualification, presenting details, and directions as a part of an agreement with the participant(s), devising interview questions, completing and recording face-to-face interviews, and coding the interview data.

Methodology

Participants

This qualitative study included 12 participants who resided in the Dallas–Fort Worth area of Texas and were receiving transitional support services through the Dallas City Square TRAC. Participants were organized by the order in which they were interviewed and were later given pseudonyms for this paper. The pseudonyms chosen for the participants were Oscar, Tammy, Trey, Fabio, Franke, Samantha, Shelbie, Elvis, Nathan, Twain, Everett, and Tyra.

All participants were receiving support services through TRAC at the time of their interviews and had begun their transitions from foster care between 1 and 6 years prior to the interview, with most participants aging out in 2017. There were twice as many male participants (8) as there were females (4). One participant was 18 years-old but had transitioned early enough to still meet study criteria. The other 11 participants were between 19 and 26 years old. The participant ages are further broken down in Figure 1. Participants were asked to identify their ethnicity in attempt to report detailed demographic data. Two individuals reported belonging to more than one group while some struggled to answer definitively. One participant reported being Caucasian, Irish, Indian, and Dutch, while the other overlap occurred with a participant identifying as Caucasian, African American, and Hispanic. Ultimately, five participants reported being African American, five Caucasian, and four Hispanic.

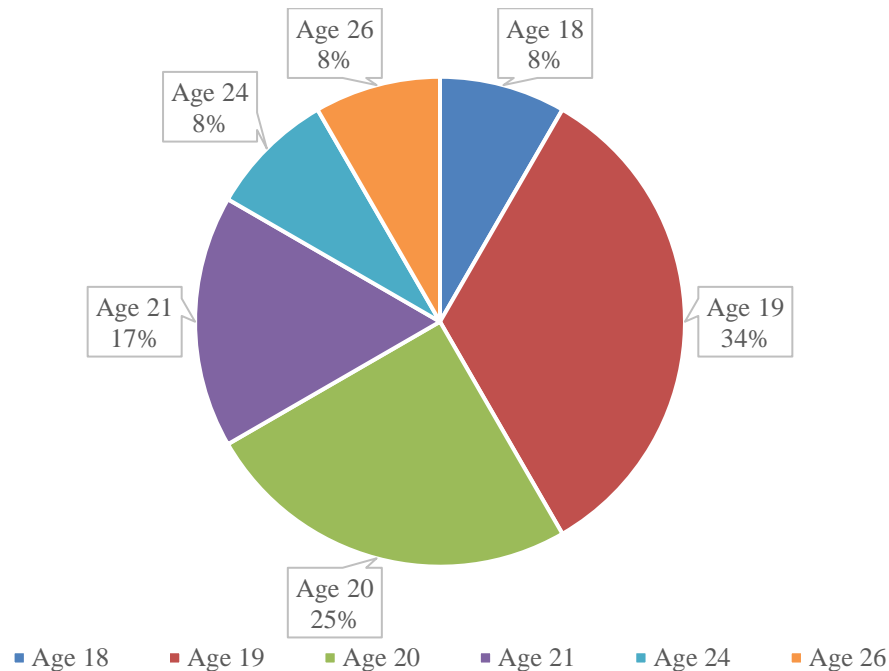


Figure 1. Participant age demographics.

Measures and Procedures

For phenomenological qualitative studies, there are not specific measurement programs to use. Though there are qualitative analysis software available, researchers have suggested the software to be lacking in ability to grasp the purpose to phenomenology (Coffey & Atkinson, 1996; Kelle, 1995; King 1994). It was also previously discussed that Moustakas (1994) emphasized for phenomenological qualitative researchers to not look for any quantifiable information. To allow for the richest information, the author conducted individual interviews with participants in their environment at TRAC. The author used a journal, semi-structured interviews, audio recordings, repeated listening to the audio, and transcribing of the recordings to code data for instrumentation.

After coding each of the 191 pages of transcripts, notes were made and run through Moustakas's (1994) approach to analyzing phenomenological studies. This process entails bracketing, horizontalizing,

clustering themes, developing an individual textural description, developing an individual structural description, validating data, and composing an amalgamated description. Bracketing and epoche were achieved through the author's journal both before and after each interview and after the initial analyses of interview transcripts. Horizontalizing and clustering themes occurred through the analysis process as the author coded transcripts, created bulleted notes listing information for the coded transcripts, combined the individual notes into one note form while redacting the individual notes accordingly, and created and manipulated a digital sticky-note template. The textural descriptions were developed from the condensed individual bulleted notes and were validated by participants when possible. All of this was considered in correlation with the original transcripts (re-visited for examining imaginative variations) to identify the final themes.

Findings

The focus of the study was to explore ways the transitional experience could be improved for youth in, and aged out of, foster care. The author wanted to learn more about the youths' experience aging out of care and how they felt about this experience. Some details targeted within understanding the experience with transitional services included how transitional services employees had been helpful with the transition, the value placed on the services, and what other aspects or services the youth identified that, in their opinions, would have made their transitions more successful. Participants' responses related to the second research question generated the theme of transitional support services. This theme of transitional support services was categorized into subthemes of education, finances and job, housing, and mental health, with relationships between services provided and desired services and service improvements being explored. With mental health examined as a service provided for the transition, the third research question of the role mental health professionals can play in aiding the transition was revealed as a component of this theme.

Theme 1: Education. Participants' views of transitional support for education provided a range of perspectives for this theme. It centered on the participants' views of the support provided for continuing education upon aging out of foster care. Education was reported by participants to be an important area of support. However, they also discussed the feasibility and value of this resource to be dependent on the individual person. Interviewees also focused on the current monetary support available for education in addition to the services provided by TRAC to further pursue education. Monetary aspects of education support included vouchers for tuition, computers, and room and board. TRAC's education support involved preparation for college, promotion of pursuing further education, and providing transportation for exploring colleges. Lastly, secondary benefits of education were discussed such as building for a future and education being an expected part of adolescence and young adulthood in the current society.

Theme 2: Finances and job. The second theme focused on a combination of financial and employment support. Financial support seemed to overlap both with the funding provided to support education and attained through a job. However, this topic arose in discussion of job support as an indirect relation so was grouped in this theme. Regarding financial support independent of education and employment, participants discussed social security and a monetary award for completing PAL classes being available. Job-specific support included both TRAC and Texas Workforce Commission helping youth connect with a job.

Theme 3: Housing. Housing was identified as the third theme and emerged as the most important transitional service identified by participants. The theme focused on the importance of, provision for, and needed adjustments of transitional support services focused on connecting youth with a place to live. This theme addressed the housing support provided through TRAC, issues with the establishments available to the aged-out youth, and struggles related to TRAC's housing support stipulations. It became evident that housing support is available and used by aged-out youth, but the boarding homes offered were described as often unsuitable living situations. Participants discussed issues of homelessness in relation to the requirements both for connecting with housing services and in using the support as well.

Theme 4: Mental health. The fourth theme, mental health, was the most controversial and complex. Mental health was expressed as having both beneficial and undesirable characteristics. There was an expressed need for mental health services to help youth build a better future. However, there were several negative aspects identified regarding the provisions of mental health treatment for foster care populations. Mental

health services were revealed to be provided inadequately, in part, due to Medicaid-listed therapist deficiencies. Participants also intimated that, in their opinions, those providers who are available via foster care insurance, do not provide adequate or appropriate care. Participants reported the mental health services they had received sometimes led to being over medicated and over diagnosed while lacking a connectedness with the provider. Overall, there was a strong emphasis on needing competent, empathic, and ethical—respecting client confidentiality—mental health providers available to foster care populations.

Theme 5: Relationship. The last theme was a supportive relationship with someone who had been a part of the youth's life prior to aging out of foster care. Though it was identified as a needed service, a consistent caring relationship was also explained to be impractical. Within this theme, participants identified persons who may have been able to provide this relationship, in an ideal world. The individual participants mentioned CASA workers, caseworkers, foster and biological family members, and friends as individuals who, potentially, could fill this role.

Discussion

Transitional Support Services

Interviews continued by focusing on the participants' perspective of the transitional services that former research had identified as being needed. More specifically, participants were asked about the support for education, jobs, housing, mental health, and relationships. Job support was generalized to include services focused on career assistance as well as financial support in general. This incorporation of monetary provisions was not planned but was an aspect that arose in participants' comments as they answered questions about their view of support for obtaining a job. Interviewees were asked to share their opinion regarding the importance of each of the services and if they felt they were being provided the services through the transitional program. While covering these aspects, participants also began to focus on what could be done to improve the services.

Implications

The study findings on the experience of aging out of foster care has implications for foster care youth, educational institutions, transitional service providers, mental health providers and organizations, and the state government. Teens in foster care and young adults who have aged out must know how to prepare, what to expect, and how to navigate through the transition to independent living. Educational institution leaders must be aware of the challenges young adults face when transitioning from foster care, what support they need in pursuing continued education, and how to target this population for attending and completing a degree. Transitional service providers can benefit from understanding what services foster youth value most, what they have found helpful from these services, and the changes these young adults feel would be most beneficial for better aiding with their transition. Mental health professionals must learn not just how to understand the struggles of young adults aged out of care, but also to be aware of the stigma this population has attached to mental health services and how to best help foster youth who do seek treatment. Overall, funding, policies, procedures, and services for aged-out youth are determined by the national and state governments. Since there has been a clear push for the need of transitional services, the author suggest it is in the best interest of the state to be aware of how impactful transitional services are and which services are making the greatest difference for aged out youth to inform future policies better.

Limitations and Future Directions

This study was conducted with 12 young adults who had aged out of foster care and were receiving transitional support from TRAC services. The population of this study most certainly limits generalizability. The results of this study can only truly be generalized to other young adults aged out of foster care in the greater Dallas–Fort Worth, Texas area who are currently receiving transitional assistance from TRAC services.

First, future researchers could investigate the perspective of populations from other geographic areas that have transitioned out of foster care to improve generalizability. Researchers should consider assessing the feedback of young adults receiving transitional support from other programs within Texas for comparison to these results. Since the information in this study was also specific to Texas, it is recommended that future

research be conducted to investigate the transitioning out of the foster system experience of young adults in other states.

It is also suggested that researchers explore the factors identified to aid with a successful transition from the perspective of young adults who needed less support for establishing independence. For example, researchers may want to conduct a similar study with college or university upperclassmen or alumni who aged out of foster care to survey their opinions as to what helped them succeed.

Additional researchers could investigate the roles of transitional service providers and government agencies regarding their role with transitioning foster youth. Further, investigating government policies for transitional programs would be helpful in differentiating their role from that of TRAC. Interviewing TRAC personnel could also be helpful for understanding their positions better in aiding foster youth. Researchers should also investigate the perspective of TRAC case managers in terms of what they perceive would best help the youth they serve. This could aid to provide more insight into what TRAC could improve as well as highlight what the TRAC workers have perceived to have the greatest impact with the aging-out young adults.

Conclusions

Research on the experience of aging out of foster care is scarce, but this study provides some insight of what the transition experiences are for aged-out youth. It is hoped that the study results will influence further research in the transition from foster care as well as guide those associated with the foster care system in taking steps to improve the experience. Some potential considerations for improvements include spreading awareness of transitional programs, better preparing youth for the transition, building stronger professional relationships, improving competency of mental health providers, and legislating adjustments to mental health Medicaid provisions. Overall, TRAC services combined with resilience factors of the self, including mental health; spirituality; and a caring relationship were identified to drive foster youth through their transition from care. This shows a great need for further focus on improving both the mental health treatment, relationships provided, and connecting with a transitional program to create more positive transitions for young adults aging out of foster care.

Declarations

Conflicts of Interest We have no known conflicts of interest to disclose

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