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Fragmented Lives: A Qualitative Study of the Experiences of Black Youth Who Have Aged Out of the Foster Care System

by

Dawn L. Stewart

Dissertation

Submitted to the College of Education
Eastern Michigan University
in partial fulfillment of the requirements for the degree of

DOCTOR OF PHILOSOPHY
Educational Studies
Concentration in Urban Education

Doctoral Committee:
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October 31, 2016
Ypsilanti, MI
Dedication

This dissertation is dedicated to the memory of my father, Charles T. Stewart, who taught me the value of education, discipline, and determination. I know if he were still alive, he would be beside himself beaming with pride. For the infinite days and nights that you worked at the steel mill, often doing double shifts just to get my sister and I everything we wanted and needed, as well as to save money to pay for college, this is for you Daddy.

I would also like to remember my cousin, Crystal Straughn, who passed right before I defended my dissertation. She had a deep passion for travel and life, although she didn’t get to explore as much as she would have liked. I can remember as a toddler, you loved to sing Prince’s song “When Doves Cry.” As you soar above the clouds with the angels, the Doves are, indeed, smiling. Rest well cousin…. You will be missed.
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To my committee chair, Dr. Valerie Polakow, I simply cannot thank you enough. You have a stern, yet quiet way of pushing your students to be better and expand their capacity for learning. Your meticulous commitment to student growth is unquestionable. To my committee members, Dr. Wendy Burke, Dr. Sylvia Jones, and Dr. Lynn Nybell, thank you for your time, encouragement, guidance, and interest in my work. Dr. Nybell, I truly appreciate your willingness to step-in as a member of my committee in the absence of the late Dr. Yvonne Callaway. Dr. Polakow, Dr. Jones, and Dr. Burke, I have loved and been inspired by your respective classes, and I value the knowledge that I have gleaned from each of you throughout this program. It has been an honor to be your student.

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Commonwealth family, you simply rock!! Your support and constant words of encouragement gave me the inspiration I needed to continue, especially on days when I felt like quitting. A special thanks to my supervisors, Andrea, Tenia, and Ashley. I could not have completed this dissertation without your support. Thank you to my college friends who are supportive of me no matter what crazy things I try to do. A special thanks to my friend Dana of 30+ years, on many occasions (just like when we were kids) you were there at the right time to give me the pep talk I needed to keep going. To my classmate Jennifer Banks, we started out as colleagues and became sisters through this very unusual process of sorts. If I could, I would add your name to my dissertation, because it was you who made me write and study every evening and weekend when I did not feel like it. I am happy to share the completion of this journey with you.

Lastly, I’m thankful to all of the participants who selflessly and openly shared their stories with me. I hope I represented you and your stories in a way that edifies your being and makes each of you proud. Your voices are no longer silenced. I hear you. We hear you.
Abstract

Each year, growing numbers of black foster youth, ages 18 and older, are emancipated from the child welfare system. Prior to termination, they are provided with a montage of independent living services aimed at teaching self-sufficiency skills. Nevertheless, many of these youth find themselves alone without the necessary aptitude, resources, and support needed to assume the intimidating responsibilities of adulthood. Although the literature regarding emancipated youth and their outcomes is extensive, there has been minimal research conducted on the unique experiences of Black youth as well as the factors that contribute to their success or failure in their transition to independence. Further, the information regarding their outcomes has been garnered from foster parents, case managers, attorneys, and family members, while failing to incorporate the voices of the youth who are best able to articulate the obstacles they encounter.

This qualitative study examines the lives and experiences of eight black former foster youth. Audiotaped semi-structured interviews were conducted for the study. Data analysis took place throughout the data collection process. Their distinctive experiences, from their early childhood experiences that lead to placement in foster care, as well as their emancipation from care and subsequent road to independence are chronicled through their voices. Findings uncovered four themes: 1) child maltreatment, 2) unresolved trauma, 3) need for a sense of belonging, and 4) lack of preparation for adulthood. These themes represent the stumbling blocks of the participants’ past that continue to influence their life paths.

This study enhances our understanding of the experiences of black aged out foster youth and the many challenges they face on their road to adulthood. Their individual stories raise poignant questions about the impact and efficacy of the foster care system on the lives of our most vulnerable youth.
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Chapter 1: Introduction

Each year the child welfare system acts as a surrogate parent to approximately 420,000 children in the United States who are abused and/or neglected by parents or primary caregivers (U.S. Department of Health and Human Services, 2015). This number is, in fact, conservative as many instances of maltreatment go unreported or unnoticed. While it is intended to be a temporary relationship, many children remain in the care of this system until they age out in their later teen years. Similar to their parents, the child welfare system is more often than not an ineffectual parent. Despite being backed by lofty legislation, children continue to be maltreated under its supposedly watchful eye. For children who lack sufficient alternatives and remain in foster care until emancipation, the residual outcomes are disheartening and alarming. Once the child welfare system is no longer responsible for these children, they are left to muddle through the difficulties of adulthood on their own. Although poor outcomes appear to have become the norm for aged out youth, some make successful transitions in spite of negative childhood circumstances.

This study explores the experiences and trajectories of young Black adults who have aged out of the foster care system. Chapter 1 provides a brief overview of the evolution of foster care, as well as the undisputed overrepresentation of Black children served by this system, and the significance and purpose of this study. Additionally, research questions that served as the guide for this study and the theoretical framework are presented.

Overview of the Foster Care System

America’s practice of caring for society’s most vulnerable children has historic roots that are tied to England’s Poor Laws of 1601 (Bremner, Barnard, Hareven, & Mennel, 1970). These laws were established, essentially, to address the growing population of poor and helpless...
citizens in England. According to these regulations, poor individuals were placed into one of three categories: able-bodied, children, and non-able bodied. Those persons who were of good health were put to work, children were given apprenticeships, and funds were allocated to those considered non-able bodied persons (Bremner et al., 1970).

Elements of the English Poor Laws—such as indentured servitude, institutional care, and in-home support—served as a critical guide in the establishment of child welfare in America, primarily in the 17th and 18th centuries (Billingsley & Giovannoni, 1972). During this time, thousands of abandoned, poor children were shipped from England to the United States, where they were housed with various families in exchange for service. The ostensible goal was to teach poor children skills and the value of work, so that they, too, could make an honest living and discontinue the cycle of poverty that began with their parents (Mallon & Hess, 2005). Under these arrangements, children had no rights and were treated as mere chattel to be utilized and evaluated by what they could contribute. Their emotional needs went unattended, as they were viewed as simply objects of service. Thus, older teenagers were more sought after than younger children, as they offered more labor resources (Nelson, 2003). Unsurprisingly, many children lived in very harmful and exploitative circumstances (Mallon & Hess, 2005).

The perpetual abuse of children and shifting public ideologies during the Progressive Era led to changes in the treatment of children. Progressive reformers illuminated the conditions of poor children and convinced the public of the need to improve their conditions by expanding services to protect and provide for them in their homes and communities (Mallon & Hess, 2005). Thus, the 1900s witnessed the beginning of the foster care system. Foster homes were monitored to ensure child safety and funds were allocated to the families who chose to care for foster
children. From that point on, legislation would assume a significant role in carving out and managing the foster care system (Mallon & Hess, 2005).

Contrary to the society’s newfound sensitivity toward the plight of poor children, these sentiments did not extend to the well-being of Black children. Although public views reflected a more benevolent outpouring of support, the conditions of the black child remained unchanged. In fact, around the country poor Black children without families continued to remain in adult prisons while being exposed to hardened criminals and extreme conditions (Ayers, 1997). Although leaders and reformers of the Black community consistently called for governmental attention to the matter, the government answered with the blatant refusal to allocate any funding in the development of establishments for Black children (Perry & Davis-Maye, 2007). As a result, black reformers and community leaders harnessed the financial support of the Black community to bring about significant and sustainable change for children of their communities.

The omission of Black children from the broader foster care system continued into the 20th century until around the end of World War II, as they were categorically denied the services offered to poor White children (Billingsley & Giovannoni, 1972; Mallon & Hess, 2005; Roberts, 2002). Thus, members of the Black community took matters into their own hands by establishing organizations, such as the National Urban League, aimed at addressing issues germane to the Black community. At the same time, they vehemently articulated their concerns and demands regarding the country’s institutions and the exclusionary practices that supported them (Mallon & Hess, 2005). These efforts, coupled with increasing numbers of Blacks in urban city centers, forced the public to recognize and improve services to these children (Billingsley & Giovannoni, 1972).
Today, the foster care system remains as a temporary out-of-home safety net for abused and/or neglected children with the overarching goal of family reunification (Fox & Berrick, 2007; Lewit, 1993). A complex web of services and programs are offered to families in an effort to eradicate issues that result in the removal of children from their homes (Fox & Berrick, 2007). If these situations can be rectified, the child is returned home. However, if the problems persist and parents/guardians are unable or unwilling to remove barriers, the child remains in care while a permanency plan of adoption, placement with relatives, or independent living is established (Stott & Gustavsson, 2010).

Ironically, Black children have gone from systemic exclusion to over inclusion where they are currently disproportionately overrepresented throughout the child welfare system (Billingsley & Giovannoni, 1972; Wulczyn & Lery, 2007; Derezotes, Poertner, & Testa, 2005). When compared to White children placed in foster care, Black children are much less likely to be reunified with their families or achieve the goal of adoption (Knott & Donovan, 2010). Thus, they are at increased risk of remaining in the foster care system until they age out between 18–21 years of age.

Further, if these children also have behavioral or mental health issues, their chances of adoption are greatly diminished. As a result, they spend their foster care careers moving from place to place throughout the system. This exhaustingly familiar path that represents a reality for many young people is likely to continue until they become of age and are discharged from the child welfare system (Stott, 2012). Prior to their discharge, they are placed in independent living programs to prepare them for emancipation from state care and ultimately to reside on their own (Naccarato, Brophy, & Courtney, 2010). Similar to children who have not been placed in foster care, these youths are not mentally, emotionally, or financially prepared to assume full
responsibility for their well-being (Furstenberg, Kennedy, McLoyd, Rumbaut, & Settersten, 2004; Berzin, Singer, & Hokanson, 2014).

For older youth, independent living programs serve as a bridge in the transition to adulthood (Mares, 2010). This is critical as the transition from adolescence to adulthood is filled with many physical, cognitive, and emotional changes. This transformation often results in disappointment, self-doubt, confusion, and loneliness (Goodkind, Schelbe, & Shook, 2011). As the typical youth navigates this process, parents can play an essential role as they provide support and guidance to their naïve, albeit eager, young adult. However, this transition for foster youth is a much more daunting and less fluid process, as their evolution to adulthood is marked by a loss of financial support and adult oversight. Once emancipated from care, youth often lose the support of foster care workers, foster parents, courts, and independent living programs (Goodkind, Schelbe, & Shook, 2011). In addition, many lack sufficient connections with parents or other family members. If these relationships exist, they are often fruitless, lacking in any meaningful financial or emotional assistance. These youths often find themselves alone and unsure of where to turn for help. Thus, the lack of support and adequate preparation for adulthood leave many foster care youths in extremely dire circumstances.

Although there is an abundance of programs in each state, many independent living programs fall short of actually positioning these youths in situations where they can reside on their own. Programs are primarily aimed at teaching perceptible skills—such as cooking, money management, and job seeking—and do little to attend to the mental health challenges that many youth suffer as a result of their placement in foster care (Zlotnick, Tam, & Soman, 2012). However, the mounting needs of this extremely vulnerable population often outpace the financial
assistance allocated to these programs, thereby limiting the capacity to address their needs in a holistic and substantial way.

**Problem Statement**

Placement in foster care continues to be a viable solution for parents and legal caregivers who fail to provide adequate care for and supervision of their children. The primary goal is the reunification of the family. However, in many cases children must remain in the system due to their family’s inability to satisfy court expectations and rectify the circumstances that led to the removal (Lewit, 1993). Unfortunately, the parents’ rights are terminated, and the child is left to be parented by the child welfare system. This is especially problematic for Black children who are overrepresented in the foster care system and also less likely to be returned to their parents when compared to their White counterparts (Derezotes, Poertner, & Testa, 2005). As a result, many Black children remain in the child welfare system until 18–21 years old when they are considered adults and are therefore emancipated from the foster care system (Stott, 2013). Thus, they are more likely to age out of the foster care system. Although, chronologically considered adults, many are not fully prepared for independence. This is not surprising, as young adults in the majority population are living at home longer and receiving the benefits of continued financial support from their parents while they work to obtain stable economic footing for themselves (Furstenberg, Kennedy, McLoyd, Rumbaut, & Settersten, 2004).

Youth aging out of foster care are not as fortunate, as they often have no safety net. In the event that they have ties with their biological families, family members are often not in a position to provide the young person with any monetary assistance (Jones, 2012). In fact, Jones (2012) found that young people who returned to their families after placement actually fared worse than those who had alternative living arrangements. This was primarily because many of
these families were plagued with the same issues that were present prior to the child’s removal. Regardless of the situation, emancipated foster youth find themselves, more often than not, facing a multitude of challenges that are often exacerbated by limited resources, isolation, and a lack of family support (Xie, Sen, & Foster, 2014). As a result, there is a profound need to understand the factors that promote success and failure from the perspective of these young people.

Policies that impact aging out youth. Continually poor outcomes of youth aging out of the foster care system have been captured by various studies that heightened public awareness of the plight of youth who were discharged from the foster care system (Courtney, Piliavin, Grogan-Taylor, & Nesmith, 2001; McMillen, Rideout, Fisher, & Tucker, 1997; Dworsky, 2005). As a result, legislators responded by creating various policies to address these difficulties (Petr, 2008). Thus, multiple federal policies have been influential in the development of services for youth preparing to transition out of the foster care system and those who have aged out (Stott, 2013). The first piece of legislation, the Independent Living Initiative (P.L. 99–272) was introduced in 1986. It allocated $45 million to states for the provision of independent living training to youth 16 and older aging out of foster care. Over the next seven years, funding for independent living services increased incrementally to reach $70 million in 1993 (Stott, 2013; Petr, 2008). In 1999, funding for youth preparing for emancipation was doubled to $140 million under the Foster Care Independence Act (P.L. 106–169). As the most significant of policies regarding transition from foster care, pieces of this legislation gave states the permission to spend up to 30% of their funding on room and board for youths between 18 to 21 years of age who had aged out of the foster care system. This proved to be critical as foster youth often struggled to gain a financial foothold after termination from the foster care system. Further, it
allowed youth who aged out of the system to access Medicaid services up to 21 years of age (Stott, 2013; Petr, 2008). The third policy addition came in 2002 as the Promoting Safe and Stable Families Amendment (P.L. 107–133), which provided $60 million to states to support post-secondary and training programs for emancipated youth. Lastly, the Fostering Connections to Success and Increasing Adoptions Act (P.L. 110–351) extended independent living services to youth 16 or older who were adopted or placed in guardianship settings after the aged of 16. This act also mandated that a transition plan be created for all youth 90 days prior to their 18th birthday. Transition plans identify key resources pertaining to housing, employment, medical, and education thought to help in youth’s successful transition (Stott, 2013).

The above-mentioned legislation created many opportunities and independent living services for youth who age out of the foster care system. Yet, the outcomes fail to reflect their anticipated impact suggesting that more attention and reform is needed. Increasing numbers of youth aging out of the foster care system sans funding to support their greater needs further complicate an already over-taxed and ill-prepared system while severely failing to make good on its commitment to this extremely vulnerable population (Stott, 2013).

**Purpose of Study**

The purpose of this study is to elucidate the lived experiences of Black young adults who have aged out of the foster care system. Irrespective of race, research has clearly articulated the detrimental outcomes encountered by a disturbing number of these youth once their support from the system is discontinued (Naccarato, Brophy, & Courtney, 2010). In fact, there has been a recent proliferation of literature on this population that tends to center disproportionately on outcomes while focusing to a much lesser degree on the experiences of the individuals. The literature broadly represents this group, and often fails to address the significant and unique
challenges faced by Black foster youth exiting the system. Given their foster care experiences and minority status, some have referred to this group as one of the most vulnerable populations (Hill, 2004). The opportunity to reconstruct the daily experiences of African American foster youth and clearly articulate their social reality from their point of view can have significant impact on the governmental policies and social work practices that impact them.

Hence, the primary goal of this study was to document the voices of Black youth who have been emancipated from the foster care system, paying particular attention to resiliency and its impact on individuals as they traverse the road of independence and self-sufficiency. Each year approximately, 25,000 youth between the ages of 18 and 21 are discharged from the foster care system (U.S. Department of Health and Human Services, 2015). After emancipation, large numbers of these youths find themselves in dire circumstances, as they have no financial resources, adult support, or stable shelter (Jones, 2012). Their outcomes are often poor, adding to the already high statistics of unemployed, school dropout, homeless, and incarcerated populations. Blacks who are disproportionately represented in all areas of the child welfare system are among the largest numbers of aged out youth (Knott & Donovan, 2010). However, they are often overlooked and understudied, leaving their experiences largely absent from the literature.

This often marginalized group presents very distinctive issues as a result of their minority status that must be considered and understood. Research indicates that 37% of Black children reside in poverty and endure the many ills that accompany it (DeNavas-Walt & Proctor, 2015). Characteristically reared in single-headed households, these children and their families face enormous challenges of social isolation, economic hardships, and dangerous living conditions. As a result, parenting practices are often punitive or absent—resulting in various forms of
maltreatment (Ceballo & McLoyd, 2002). These misfortunes must be critically examined when formulating measures to improve outcomes for this population as a whole.

The realities of Black youth who have aged out of foster care are largely overlooked and untold. Part of a marginalized group, their experiences are typically reduced to numbers and percentages that tell a one-sided story of failure, inadequacy, and in many cases hopelessness. While quantitative data is important, it does not always provide a complete picture. There are many truths that occur between numbers. This study provides a space to edify the voices that live behind the numbers. Participants are featured sharing their journeys to adulthood, as well as the influences that aided or prevented their success along the way. Therefore, the overarching goal of this research was to add to the extant body of literature in a meaningful way and give readers a window seat view of the complicated lives that many Black youth encounter after they are prematurely thrust into independence and adulthood.

**Justification and Significance**

Researchers have pointed out the consistent lack of life preparation among all emancipated youth. However, this is an even greater concern for Black youth, as they have an increased propensity for poorer outcomes (Jones, 2012). This has been a disturbing reality that has existed since the 1950s (Billingsley & Giovanni, 1972). Statistics often paint bleak pictures of their overall trajectories, while overshadowing the many relevant success stories (Osgood, Foster, & Courtney, 2010). Federal and state policies have historically attempted to address the tangible needs of older foster youth and to provide comprehensive services aimed at teaching tangible independent living skills (e.g., budgeting, job seeking strategies, accessing community resources, balancing a checkbook) prior to their transition from care (Jones, 2012).
While researchers have explored the efficiency of these programs, studies are divided regarding their effectiveness. Some research indicates that these programs provide critical services to older foster youth (Mares, 2010). Yet other research indicates that these programs are not funded sufficiently and often fail to provide services that extend beyond cursory skills training (Mares, 2010). Regardless of the position taken, the fact remains that the voices and experiences of the youth have been largely omitted from the discussion, and this gap in the research leads to a compelling space for research inquiry.

**Overrepresentation of Black children.** When discussing the phenomenon of the overrepresentation of Black children in the child welfare system, it is difficult to arrive at a single explanation for its continued existence. However, its causes are widely debated. Most likely, it is the convergence of multiple complex factors, rather than one single element. Since the inception the child welfare system—both formal and informal—Black children have been categorically and deliberately excluded (Billingsley & Giovannoni, 1972). Considered lower than second class citizens, public belief bought into black inferiority and worthlessness (Ortiz & Briggs, 2003). General disregard and widespread negativity of Blacks fueled policy that ignored the needs of children and families in poverty. Although certainly not the only reasons for black overrepresentation, legislation, racism, and poverty are clearly implicated (Ortiz & Briggs, 2003).

**Legislative influences.** Legislation placing poor children in out-of-home care has largely impacted Black families and resulted in the overrepresentation of Black children in a system that once excluded them (Mallon & Hess, 2005). One of the most noteworthy pieces of child welfare legislation was the Aid to Dependent Children (ADC), a provision of the Social Security Act of 1935 (P.L. 74–271) under President Roosevelt’s New Deal. The name was later changed to Aid
to Families with Dependent Children (AFDC) in 1962. The purported objective of this legislation was to help poor families prevent the removal of their children by providing financial assistance to families where the adult male was absent (Mallon & Hess, 2005). However, in reality, it created strict, intrusive, and critical oversight of families in poverty, which increased the numbers of children being removed from their homes. In addition, through structural mandates, inequitable regulations, and unrealistic expectations, AFDC created dependence on welfare in perpetuity, and then punished recipients for their dependence (Derezotes, Poertner, & Testa, 2005).

The Personal Responsibility Work Opportunity Act (PRWORA; P.L. 104–193) of 1996 replaced AFDC and forced poor single mothers into low-paying jobs by threats of discontinuing or reducing already substandard welfare benefits (Polakow, 2007). Lack of access to affordable quality childcare left many women in difficult situations, as they struggled to identify solutions that would allow them to work and maintain their financial benefits while not compromising the safety of their children (Polakow, 2007).

The influence of PROWRA on the child welfare system is noteworthy. It has shaped the decisions through which poor children from single mother households on public assistance are returned to their families or permanently removed (Wells & Guo, 2004). The requirements of this policy place families, who are already struggling, at a disadvantage when reunified with their children after placement in foster care. Many of these mothers are contending with mental health and substance abuse issues, as well as domestic violence. Consequently, they are often unable to adhere to the requirements for employment, adequate housing, financial sufficiency, and childcare provisions that are required for family reunification (Wells & Guo, 2004). As a result, the ability of these families to successfully regain custody of children is minimal.
Once children are placed in the child welfare system, the proverbial clock begins ticking. Strict surveillance, unapologetic intrusion, imposed timelines, and articulated expectations are inherent elements of the dehumanizing process parents must endure to regain custody of their children. These expectations are governed primarily by the Adoption and Safe Families Act (ASFA; P.L. 105–89) signed into law in 1997 by President Bill Clinton (Curtis & Denby, 2004).

The principal intent of ASFA was to improve safety for children in foster care and to establish timelines for achieving permanent living arrangements to prevent children from languishing endlessly in the system. The law was an attempt, partly, to mitigate the excessive length of time children spent in foster care (Rockhill, Green, & Furrer, 2007). Consequently, the focus subtly shifted from the chief goal of family preservation to placement in adoptive homes. Incentive payments granted to states for successful adoptions propelled this shift forward (Curtis & Denby, 2004). Before long, thousands of parents had lost their rights and family units were indisputably destroyed. Often parents were unable to complete specified goals that would idealistically remove barriers to reunification with their children within given timelines.

Although the law may have been well intended, the effects were and continue to be catastrophic on poor Black families and children. To start with, the compulsory timeframes for parental cooperation are short sighted and unrealistic at best. Parents have 15 to 22 months to satisfy court sanctioned expectations before a petition to terminate their parental rights is filed. Given the reality that a significant number of children who come to the attention of the child welfare system are from families where poverty, housing, employment, and substance abuse issues are significant factors, one must question the purpose of these guidelines. Instead of reunifying families, this law lacked necessary support for families seeking to overcome the issues that brought children into care. Therefore, the guidelines appeared more punitive than
beneficial. Is it reasonable to expect parents to be rid of the burdens and addictions that resulted in their child’s removal within 15 to 22 months? The increasing numbers of disrupted families and Black children who remain in the system until an adoptive home can be located suggest that this is not the answer.

Racial influences. Institutional racism is another factor in the overrepresentation of Black children in the child welfare system. Researchers posit that racism and discrimination have been institutionalized and operationalized through various pieces of child welfare legislation (Derezotes, Poertner, & Testa, 2005). Further, pervasive racialized media portrayals of impoverished Black mothers as lazy, slovenly, irresponsible, baby-making, welfare queens did little to promote public empathy and garner support for many of these women (Ortiz & Briggs, 2003). This representation of black women, particularly those on welfare, continues to permeate the minds of American society today and perpetuate already ingrained stereotypes.

The crack epidemic of the 1990s was responsible for a dramatic increase in children being placed in foster care (Ortiz & Briggs, 2003). From 1986 to 1989, over 80,000 new cases became part of the foster care population (Besharov, 1990). Crack exacerbated already present problems in America’s urban city centers, such as unemployment, crime, and domestic violence, and created a catastrophic explosion that left many neighborhoods and families reeling from its aftermath. Crack was disastrous to many communities. Black and White children suffered equally as victims of maltreatment as a result of parental crack use. However, Black children were disproportionately placed in foster care due to their parents’ substance abuse issues (Ortiz & Briggs, 2003). Arguments regarding the reason for this distinction between Black and White children in the foster care system are at opposite ends of the spectrum. While many assert strongly that racism and media promulgation of the Black “crack mother” along with intense
Poverty influences. The earliest governmental intrusion in the lives of poor families began with the notion that the only way to salvage children who lived in poor families was to remove them from their home and place them with morally stable and hardworking families who could impart values that would prevent a life of idleness (Bremner, Barnard, Hareven, & Mennel, 1970). These same values and beliefs continue to permeate the espoused charge of today’s child welfare system, and they are evident in current policies and practices (Mallon & Hess, 2005).

According to Jiang, Ekono, Skinner (2016), 21% of the children in the United States live in poverty. In Michigan, the statistics are slightly above the national average as 23% of children reside in poverty. Poverty is severely debilitating to a child’s overall well-being and healthy development. Research shows that when comparing racial groups, 27% of African Americans reside in poverty in comparison to 9% of Whites (DeNavas-Walt, Proctor, & Smith, 2012). According to the 2014 U.S. Census, 37% of all female-headed families were poor, compared to 8% of married-couple families. Research has indicated that race and poverty are connected, so it is not surprising that Blacks are disproportionately involved with the child welfare system (Brook & McDonald, 2009). In addition, the relationship between poverty and child maltreatment are inextricably linked, thereby increasing the likelihood of a child’s placement in foster care.

Decades of research has documented the relationship between child maltreatment and poverty. In fact, foster children are disproportionately poor in comparison to other groups of children (McGuinness & Schneider, 2007). Studies indicate that poverty creates extreme
conditions of distress and frustration, which lend themselves to harsher and more volatile parenting (Ceballo & McLoyd, 2002; McLloyd, 1990; Russell, Harris, & Gockel, 2008). Further, neighborhoods with high concentrations of poverty tend to be more heavily policed resulting in more maltreatment investigations (Derezotes, Poertner, & Testa, 2005). Additionally, families residing in poverty are often in need of public assistance in the form of cash assistance or food stamps. The detailed analysis of family backgrounds in order to determine eligibility for public assistance often brings attention to existing family problems that may be characterized by domestic discord, lack of resources, inadequate parenting, and substance dependence (Barth, Wildfire, & Green, 2006).

**Theoretical Framework**

The guiding framework for this study is based on the model of resilience that examines the ways in which individuals positively adapt in the face of significant stressors or traumatic events (Masten, 2014; Garmezy, 1991; Luthar & Cicchetti, 2000). This construct supports the study of Black youth who have experiences of maltreatment and later emancipation from the foster care system. As a whole, research has consistently pointed to the unsatisfactory outcomes associated with this marginalized group (Samuels & Pryce, 2008), as they have a variety of challenges with which they must contend. Many have been reared in impoverished environments marked by the numerous obstacles associated with poverty (e.g., hunger, homelessness, crime, unemployment, domestic violence). Nonetheless, not all outcomes are depressing; some aged out youth are able to move beyond seemingly perpetual hindrances and setbacks. The resilience framework can be used to examine the elements associated with their success as well as those factors that place other individuals at an increased risk of failure.
Resilience. Resilience is a complex phenomenon that has been studied extensively by a multitude of theorists. It has a rich history that has developed over time beginning with scholars such as Alan Sroufe, Lois Murphy, Norman Garmezy, Michael Rutter, and Emmy Werner who sought to explore cause and treatment of mental illness through their research (Masten, 2001). Their research uncovered the surprising existence of positive outcomes in the face of aggregate risks in the populations they studied. These seminal works were instrumental in laying the foundation for the examination of resilience in childhood development, as well as maltreated children (Zolkoski & Bullock, 2012).

Early studies conducted by Rutter (1996) focused on the identification of protective factors in the context of resilience. Rutter (1996) studied individuals who were reared by institutions during their early childhood and adolescent years. Interviews with participants identified certain factors responsible for facilitating positive outcomes and healthy development. Research on protective factors distinguishes those elements that enhance one’s ability to endure adversity while deflecting the possibility of negative outcomes. Ungar (2013) proposed a social-ecological model of resilience that pinpoints the individual and environment as significant factors in creating resilience. Afifi and MacMillan (2011) further defined the protective factors to also include a stable family as an essential component in the establishment of a child’s resilience.

Individual protective factors can be identified as personality traits, such as self-control, healthy self-esteem, social competence, sense of humor, strong sense of purpose, and intelligence. Ungar (2013) asserted that children who possess more desirable character traits have more positive interactions with peers and adults. According to Afifi and MacMillan (2011) family factors are also essential to resilience. These characteristics include: a stable family, supportive caregiver, caring adult, extended family, and spousal support. Environmental factors
are those attributes of one’s milieu that includes positive non-familial relationships, safe neighborhoods, structure and consistency, high expectations, social and recreational activities, and access to resources, as well as positive role models in the community (Hass & Graydon, 2009; Ungar, 2013).

The social-ecological model suggests that these factors do not act independently of each other, but work interdependently to promote and enhance positive adaptations in the face of stressful circumstances (Ungar, 2013; Bronfenbrenner, 1986). This approach does not seek to blame the victim or depict the individual as deficient nor place the burden of healthy development solely on the individual. More importantly, it does not classify resilience as a static trait, gifted to only a chosen few. As such, the manifestation of resilience ebbs and flows according to the interaction between the individual and environment. The environment must create a situation that allows and promotes positive youth development (Drapeau, Saint-Jacques, Lepine, Begin, & Bernard, 2007). This is particularly important as it relates to older foster youth who often experience constantly changing environments and disrupted relationships. Afifi and MacMillan (2011) argue that policy makers and social workers must consider policies and practices that enhance protective factors for maltreated youth.

**Research Questions**

For emancipated youth, the constant transitions while placed in foster care create a whirlwind of ambiguity, where building relationships and establishing attachments are often impossible (Stott & Gustavsson, 2010). Lack of family ties and/or support from significant adults leaves many feeling overwhelmed and confused. Although this is common story among many emancipated youth, there are those who are able to rise above their self-proclaimed and institutional obstacles. Thus, to gain an in-depth understanding of participants’ lived experiences,
particularly as they relate to instances of resilience and challenges, my study explored a broader question: How does resilience influence the life experiences of emancipated youth? In addition, other related questions were explored:

- Upon discharge from the child welfare system, to what extent do participants feel they were prepared to reside on their own?
- How do participants work to gain the necessary skills they feel are essential for successful adulthood?
- What existential meanings do aged out youth construct about their childhood and adolescence, and how does that influence their present lives?

**Organization of Dissertation**

The following chapters take a deeper dive into the experiences of young adults who have aged out of the foster care system. Chapter 2 provides a review of literature pertaining to salient factors that influence the overall success or failure of emancipated youth as well as the resilience theoretical framework that is used to guide the study. Chapter 3 discusses the research methodology, design, recruitment strategies, and data collection processes. Chapter 4 introduces the reader to the eight participants of the study. Chapters 5 and 6 analyze the themes that emerged as findings from the data collected. Chapter 7 concludes the dissertation with a discussion of findings, recommendations, and further research.
Chapter 2: Review of Literature

The purpose of this literature review is to explore the relevant scholarly literature regarding the challenges that almost invariably leave many young Black adults vulnerable to poor outcomes after aging out of the foster care system. Additionally, the factors that increase the probability of successful transitions to adulthood are also be discussed.

Developmental Obstacles

The stages and characteristics of adolescence are as varied and complex as the many theories that attempt to capture its essence. Regardless of the proliferation of research, the adolescent stage of development remains elusive as young adults grapple with a barrage of unregulated emotions. They often encounter a plethora of uncertainty and insecurity throughout their transition to adulthood (Collins, 2001). For youth who are in foster care, the process is often characterized by perplexity, fragmented preparation, lack of adequate adult support, and isolation (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001). This is extremely significant as adolescent foster children typically remain under the care of the child welfare system until they are emancipated between the ages of 18–21 years old.

Currently, there are a multitude of theories that attempt to articulate the developmental process of human growth. Theories of human development from birth to death abound and continue to emerge. Maltreated youth often have interrupted developmental processes as a result of the conditions under which they reside (e.g., parental impairment, chaotic family environment, poverty). Placement in foster care can further stagnate developmental growth (Deutsch, et al., 2015). In the following section several well-known and widely used theories that influence how we view childhood development are discussed.
**Urie Bronfenbrenner.** Bronfenbrenner, a Russian-American psychologist well known for his ecological systems theory asserts that multiple environmental systems are responsible for shaping human development. His model identifies four principal environmental systems in which every individual must engage and participate. Each environmental level is replete with its own norms, rules, and expectations that govern and organize its existence. It is important to understand the child’s integration and relationships with the given levels associated with this model. The four systems of the ecological systems model are microsystem, mesosystem, exosystem, and macrosystem (Bronfenbrenner, 1986; Nakkula & Toshalis, 2008).

The *microsystem* is the first environmental system of the model. It is the individual’s immediate environment within which he/she must interact on a daily basis. In this environment, the individual is an active participant and co-constructor of the environment. This system involves school, family, work, friends, social organizations, and others entities that may compose an individual’s network. For children in foster care, this environment consists of the foster parents, biological parents, siblings, social workers, and relatives, as well as schools. Often, this system is ever-changing as the child may have to constantly adapt to new environments. In this case, stability becomes elusive, as the actors and environment in the system frequently shift without warning while the child is relegated to the position of spectator in his/her world. Consequently, a perpetual state of stress and uncertainty is created, thereby hampering healthy development and successful adjustment (Harden, 2004).

The second system, known as the *mesosystem*, is identified as the interactions and relationships between microsystems. For example, this system considers how the child’s home environment may impact the child’s school environment or his/her relationship to an environment. Similar to the first system, foster children have the potential to experience multiple
changes of placement after removal from their homes. As a result, relationships become blurred and confusing. Every new placement hinders the child’s opportunity to establish significant relationships, which is critical in promoting well-being (Bronfenbrenner, 1986; Harden, 2004; Unrau, Seita, & Putney, 2008).

The third system is the *exosystem* in which the child does not actively participate, but it nevertheless has an impact on the child. Although the exosystem is external to the child’s experience, it may have profound internal influences (Bronfenbrenner, 1986; Nakkula & Toshalis, 2008). Another example to help further illuminate the manner in which this system may impact the individual is easily seen in a circumstance where a parent loses a job. Although the child has no direct involvement in the parent’s workplace, the occurrence of a parent’s unemployment has direct consequences for the rest of the family. For foster children, the courts and child welfare system are part of their exosystem. These systems are responsible for making decisions in their best interest, as well as caring for them in their parent’s absence. Although these entities have significant impact them, they are not usually part of the process or decision-making.

Lastly, the *macrosystem* is the largest of the systems. It is the broader societal system that exists within the cultural and subcultural contexts within which the child or adolescent lives. It includes one’s ethnicity, racial group, social class, and nationality. This system is considered to be remote from the child’s experience, but it still has the ability to impact him/her positively or negatively. This most distant level has significant implications for foster children, as state and federal level Department of Human Services programs promote policies and legislation that have broad impacts on the foster care system and foster children.
All of these systems are inextricably linked, and therefore, problems that arise in one system undoubtedly affects other systems. Bronfenbrenner’s model (1986) highlights that the process of human development is far more than an individual phenomenon, as influences from external sources serve to influence one’s developmental processes (Nakkula & Toshalis, 2008). Social interactions have a huge impact on development and leave indelible prints across one’s identity landscape.

**Lev Vygotsky.** Similar to Bronfenbrenner, Vygotsky’s (1978) social development theory emphasizes the significance of social interactions in the establishment of cognitive development (Nakkula & Toshalis, 2008). Vygotsky (1978) postulated that the development of cognitive development is dependent upon what he termed the *zone of proximal development* (ZPD). The ZPD suggests that the range of skill that can be developed with the help of an adult or peer is greater than what can be developed on one’s own. The ZPD consists of a range of tasks that one is unable to perform without the help of a competent individual (Nakkula & Toshalis, 2008; Vygotsky, 1978). Hence, Vygotsky’s theory articulates the significance of relationships in the process of healthy development in children and youth.

**Erik Erikson.** Adolescence is an interesting and unique stage of individual development. It is often characterized by physical changes, sexual awareness, independent expressions, insecurity, and role confusion, as the adolescent attempts to negotiate multiple identities (Erikson, 1968). Although much research has been conducted, the individual process of identity development continues to be ambiguous. Many factors are involved in individual identity formation as experiences and developmental milestones among youth are dynamic and varied (Kroger, 2007). However, Erik Erikson’s work on identity is one of the most inclusive and well-referenced models. He posits that there are eight stages of development beginning with early
childhood that extend through adulthood to death (Erikson, 1968). Each stage builds upon the
other, and healthy development depends upon successful transition through each stage.

Erikson’s fifth stage, identity versus role confusion, specifically addresses the phase of
adolescence wherein the adolescent explores various identities in search of one that is distinctive
yet socially acceptable among peers and not in conflict with parental and adult expectations
(Erikson 1968; Nakkula & Toshalis, 2008). As the youth explores various identities, it is quite
likely that the worlds between peer influence and adult limitations will collide, resulting in
feelings of confusion and ambiguity. Erikson (1968) identifies this conflict between identities as
role confusion. He further asserts it is only when this conflict is reconciled that the adolescent
will be able to successfully move to the next stage of development.

Attachment Obstacles

Although child welfare programs across the United States espouse the notion of
providing services that are in the child’s best interest (Mallon & Hess, 2005), many fall short of
internalizing and meeting the child’s most fundamental need of establishing significant and
lasting connections (Mulkerns & Owens, 2008). From the moment children are removed from
their family and placed in foster care, their sense of familiarity, stability, and familial
connections begin to disintegrate, as their worlds become disrupted and unfamiliar (Samuels,
2009). Research indicates that disturbance of relationships and separation from significant care
givers have an extremely detrimental impact on the healthy development of foster children that
persists well into their adult years (Havlicek, 2011).

Attachment theory. Attachment theory was developed in the 1950s by John Bowlby and
Mary Ainsworth, who posited that the successful attachment between caregiver and infant is
essential to the future establishment of a child’s overall healthy personality and positive sense of
The process of attachment is believed to be an adaptive response that naturally develops as a mechanism for the infant’s survival. For example, an infant uses various movements and sounds such as crying and reaching to signal that he/she is in distress or has some unmet need. These actions are universal and in most cases understood by the caregiver. Thus, the caregiver responds affirmatively, and this predictable pattern of behavior between caregiver and infant sets the foundation for solid relational attachments (Ainsworth, 1989). Changes in the relationship between caregiver and child continue to metamorphose as the child transitions through various developmental phases. With each phase, the child’s confidence in the relationship grows as the attachment strengthens given the quality and consistency of the caregiver’s responses. As such, the child gains a sense of security in relational bonds (Ainsworth, 1989).

Bowlby’s attachment theory centers on the impact of early childhood experiences and their influence on later stages of life. Bowlby (1951) asserts that healthy infant and early childhood development is rooted in continuous intimate and loving relationships with the child’s mother. These mutually satisfying exchanges between mother and child promote healthy childhood development. Through various studies conducted with infants and young children, Bowlby (1951) concluded that breaks in the mother-child relationship during the first three years of life have significant implications for healthy child development. These consistent and continual breaks are viewed as maternal deprivation (Bowlby, 1951). He posits that although there are degrees of maternal deprivation, any situation where a child’s world is devoid of consistent love and nurturing impedes healthy development. Moreover, in some cases, it is the source of significant mental health issues (Bowlby, 1951).
As a result of Bowlby’s firm positions regarding the responsibility and function of mothers in their child’s development process, it is not surprising that he views the father’s role in the child’s life as secondary and less important (Vicedo, 2011). However, he asserts that in order for a mother to provide an optimal environment for healthy child development, she, too, must exist in a loving and supportive environment (Vicedo, 2011). Ainsworth (1989) underscores the important of the mother-child relationship in the child’s healthy develop while also introducing the possibility that fathers can also assume a significant caregiving role in the lives of their children.

Though early research tends to minimize the impact of father involvement in the lives of children, more recent literature has highlighted its significance (Flouri & Buchanan, 2003). Fathers are often seen as existing on the fringes of their children’s lives and are considered inconsequential to their overall development by some. This is unfortunate, as it has decidedly impacted the frequency and the ways in which many fathers engage with their children. While the mother-child relationship is considered the most essential to a child’s well-being, a father’s active presence should not be reduced in importance, as he, too, plays a monumental role in the child’s development (Crockett, Eggebeen & Hawkings, 1993).

Foster children are often removed from tenuous, volatile, and neglectful environments prior to their placement in foster care. They are generally moved without notice and consideration of the psychological ramification of the abrupt change (Unrau, Seita, & Putney, 2008). This lack of closure serves to compromise the child or youth’s ability to adjust and attach to foster parents and new families. Consequently, these disruptions increase the child’s vulnerability to psychological dysfunctions (Bowlby, 1951).
Various research studies have focused on the potential differences in attachment when considering racial composition. When comparing black and White families Bakermans-Kranenburg, van IJzendoorn, and Kroonenberg (2004) found significant differences in children’s attachment patterns. Black children displayed substantially less secure attachments than children in White families. When also comparing income levels, Black families earned only a fraction of the income of the White families who participated in the study. Their findings underscore the well-documented fact that challenging economic conditions often jeopardize effective parenting on many levels (McLoyd, 1990).

**Insecure attachments.** While Bowlby and Ainsworth have focused on insecure attachment during the infancy stage of development shaped principally by maternal interactions and responses when caring for the infant, attachment theory could be expanded to include fathers or other central caregivers. Fragmented attachments are common among maltreated youth (Cicchetti, Rogosch, & Toth, 2006). Lack of maternal (or parental) warmth and attentiveness places infants at greater risk of social, emotional, and behavioral maladjustment. Early attachment experiences help children make sense of their worlds and lay the foundation for how the child will interpret and engage in later relationships. Thus, insecure attachments framed by poor relationships in childhood set the stage for unsuccessful adult encounters. More specifically, when parenting is consistently harsh, punitive, and critical, avoidance and anxiety in the child is circumstantially reinforced unless more productive relationships are able to interrupt this disturbing path (Muller, Thornback, & Bedi, 2012). Generally, parents of these infants have also suffered maltreatment and disrupted attachments and inadvertently pass down the vicious cycle of trauma to their children through their interactions with them (Berthelot et al., 2015).
Consequently, a securely attached emotional bond with a caregiver is an essential factor in distinguishing individuals who are considered resilient. Older children who are placed in foster care have an extremely difficult time forming relationships with new caregivers. In many instances, they move in and out of foster homes like zombies, failing to establish relationships or integrate into the family environment. Ultimately, the pervasive lack of attachment proves to be harmful to the child’s social, emotional, and mental well-being (Joseph, O’Connor, Briskman, Maughan, & Scott, 2014). For foster children who are able to establish relational ties with foster parents in the absence of their own families, these ties are often consequential and have lasting and undeniable positive effects on their overall trajectories.

**Healthcare Obstacles**

Foster youth enter the child welfare system with a multitude of physical, mental, and emotional health issues. They exit the foster care system with the same or greater healthcare issues (English, Morreale, & Larsen, 2003). Oftentimes, these issues are a direct consequence of the impoverished, abusive, neglectful, and stressful environments from which they were removed (Wertheimer, 2002; Deutsch & Fortin, 2015; Day, Curtis, Paul, Allotey, & Crosby, 2016). Foster care can further exacerbate these issues on many levels, as separation from family and familiar environments culminating with stranger placement can be very stressful for most children. At times these issues are not addressed appropriately. They may be misdiagnosed, overlooked, or simply identified as behavioral problems (Szilagyi, Rosen, Rubin & Zlotnik, 2015). Thus, health-related issues can have significant impact on youth functioning and may continue throughout the duration in foster care and well into their adult lives, making the transition to adulthood even more arduous (English, Morreale, & Larsen, 2003; Ahrens, Garrison, & Courtney, 2014).
To further complicate matters, once aged out, older foster youth typically lack the means and support to appropriately address their physical and mental health issues. The healthcare landscape is often unfriendly and difficult for them to navigate. They must find their way through a maze of jargon, paperwork, and bureaucracy before they receive the services they need. As a result, many of them feel frustrated and hopeless. In the end, once emancipated, these youths often discontinue their search for help and postpone or go without much needed health services (Peccora, White, Jackson, & Wiggins, 2009).

Physical well-being. It is well documented that children in foster care suffer from more physical health-related issues than those who have not been placed in care. This is especially significant for African American and other minority children who are disproportionately poor (Zlotnick, Tam, & Soman, 2012). Adding the traumatic experience of foster care as a risk factor, makes these youths even more vulnerable to poor outcomes (Szilagyi, Rosen, Rubin & Zlotnik, 2015). Hence, these children often exit the foster care system with their health compromised (English, Morreale, & Larsen, 2003; Anda et al., 2006). These chronic issues are further intensified by the potential occurrence of risk factors that aged out foster youth experience, such as poverty, lack of support, homelessness, and substance use.

State and federal policies have been implemented to outline service delivery to children in the foster care system and address the seemingly insoluble challenge of access to healthcare. As the foster care system matured over time, many lessons were learned through trial and error. Thus, changes were made to continuously improve the system and ultimately the care of foster children (Szilagyi, Rosen, Rubin, & Zlotnik, 2015). One such piece of legislation is the Adoption Assistance and Child Welfare Act of 1980 (P.L. 96–272). This act highlighted the important task of improving the health and well-being of children (Szilagyi, et al., 2015). Policymakers
equipped with the understanding that pervasive instability creates longstanding health issues for children, set out to establish time frames for reunification. There was an overall ideological shift from the dominant belief that children should be reunified with their parents (irrespective of the amount of time it took to reconcile the issues that brought the child into care) to the new mandate that specified children should be placed for adoption if reunification had not occurred within 15 months after placement in foster care (Szilagyi et al., 2015). This act also made provisions for each child’s physical and mental health needs to be considered and clearly documented in service plans, with the expressed goal of holding all parties accountable (Sanchez, Gomez, & Davis, 2010). Although the legislation was successful in pinpointing the individuals and systems associated with the child’s case, it did little to increase participation and collaboration among these entities (Deutsch & Fortin, 2015). It was also efficacious in preventing children from languishing in the child welfare system for long periods of time without a plan for permanence (Szilagyi, et al., 2015).

Most recently, the Patient Protection and Affordable Care Act of 2010 (ACA; P.L. 111–148) attempted to address aged out youths’ longstanding issues with accessing healthcare. This act extends Medicaid eligibility to age 26 for those who have aged out of the foster care system (Pharr, 2011; Deutsch & Fortin, 2015). Under these mandates medical coverage should continue as a seamless transition after emancipation; however, system access continues to be confounding and discouraging (Pharr, 2011). Complicated forms, intrusive questions, and esoteric terminology often intimidate those who need the services most. As a result, these well intended polices have done little to alter the health position of these individuals (Sanchez, Gomez, & Davis, 2010).
Various researchers have identified the multilayered obstacles to providing quality and consistent healthcare to foster children (Day, Curtis, Paul, Allotey, & Crosby, 2016). Insufficient health resources coupled with inconsistent care exacerbate already existing health issues for these youths. Most youth in care are insured under Medicaid. This coverage provides healthcare to low income individuals (Deutsch & Fortin, 2015). As such, many physicians refuse to accept Medicaid insurance because of the low reimbursement rates coupled with potential legal scrutiny, paperwork stipulations involved, and their lack of knowledge regarding the child welfare system and the unique needs of foster children. Therefore, the numbers of eligible healthcare providers for this population are significantly decreased (Deutsch & Fortin, 2015). Bisgaier and Rhodes (2011) have further confirmed these assertions. Their study considered differences in access of specialty health services (e.g., dermatology, neurology, otolaryngology, psychiatry) for children with public health insurance versus those covered by private insurance. Their findings uncovered clear and disturbing disparities. Children with Medicaid were often unable to receive services because of the doctor’s unwillingness to accept Medicaid, whereas those with private insurance experienced minimal to no difficulty accessing services. In addition, in the rare case where the health provider accepted Medicaid, the wait time for an actual appointment was greater for children with Medicaid.

**Mental well-being.** Child maltreatment is a strong predictor of mental health challenges in foster youth as well as those who age out of the system (Villegas & Pecora, 2012). Depression, substance abuse, and post-traumatic stress disorder are common conditions that often go untreated in foster children (Bruskas, 2008). Like physical health issues associated with this population, mental health issues are also byproducts of neglect and abuse sustained prior to placement in foster care. Many foster care children reside in disadvantaged environments that
place them at a high probability of experiencing various risks such as violence, substance abuse, poverty, neglect, and abuse (Deutsch & Fortin, 2015; Sullivan & van Zyl, 2008). Once placed in foster care, mental health issues may be further complicated by the inability to access necessary services, ineffective and abusive foster parents (Szilagyi et al., 2015), and multiple placement changes (Deutsch & Fortin, 2015).

The longer that children remain in foster care, the more likely they will age out without ever being reunified with their birth family or adopted. In fact, African American children are less likely to acquire a permanent placement, and are therefore more likely to age out when compared to their white counterparts (Kemp & Bodonyi, 2000). To further complicate matters for these youth, longer lengths of stay increase their susceptibility to mental health issues (Sullivan & van Zyl, 2008). Brown, Courtney, and McMillen (2015) observed that youth aging out of the foster care system are in great need of mental health services. Some studies indicate that emancipated youth display higher rates of mental health issues when compared to the general populations. Yet others claim that psychological anguish lessens as youth move into adulthood (Dion et al., 2016), leaving many to conclude that foster care itself is a significant stressor. Yet, after termination these youths receive significantly less services than while in care. This may be due in part to the difficulty of navigating and understanding the mental health system.

**Kinship Placement and Health Outcomes**

African American children are disproportionately placed in kinship care when compared to other children in the foster care system (Harris & Skyles, 2008). These numbers are consistent with their overall placement in foster care when considering children of other races. African American families have long provided refuge and support to family members in need. As such,
temporary placement of Black children with extended family is not uncommon (Hill, 2004). Recognizing the disproportionate numbers of Black children in the foster care system, legislators and child welfare professionals sought to decrease these numbers by placing youth with kinship care providers in an effort to stabilize placements and improve outcomes for these children.

Research indicates that for many foster youth, placement in kinship care mitigates the proclivity for mental health issues as well as the traumatic experience of foster care (Deutsch & Fortin, 2015; Szilagyi, Rosen, Rubin & Zlotnik, 2015). Removal from a child’s primary caregivers is a particularly disturbing event that could promote or exacerbate existing mental health and behavioral issues. Thus, placement of these children with relatives increases their sense of permanence while situating them in a familiar environment (Rufa & Fowler, 2016). Further, relative placements facilitate the consistency of relationships with parents, siblings, friends, and other family members. In many cases, children are placed in the home with siblings. As a result, these children exhibit far fewer behavioral and mental health issues (Rubin, Downes, O’Reilly, Mekonnen, Luan, & Localio, 2008; Font, 2014). Often times, these relatives may also reside in the same community from which the child was removed; consequently, this is far less disruptive than placement with non-relative caregivers. This also allows the child remain in an environment that is culturally consistent with his or her background (Font, 2014). Overall, researchers that point to the benefits of kinship care placement conclude that children in kinship care fare better mentally than those who are placed outside of the family network (Metzger, 2008; Perry, Daly, & Kotler, 2012).

While research regarding the benefits of kinship care for foster children is plentiful, studies also identify an opposing view that asserts this is not always the best placement for the child (Rufa & Fowler, 2016). In fact, in some cases it is said to be disadvantageous to the child’s
mental health. Various studies have shown that children placed with their relatives actually receive less support, mental health services, and social worker visits than children who are placed with non-kin (Bartholet, 2009). Further, children placed with kin are likely to reside with caregivers who are older and who may be ill-equipped to address their multiplicity of needs (Barth et al., 2008). Without routine visits from social workers and insufficient services, these children’s issues are not adequately addressed. Many of the same protective factors researchers have identified in relative placements are contradicted by other studies that have indicated these as risk factors. To this end, the true benefit of kinship care is inconclusive at best and must continue to be evaluated. These studies raise important questions given the reality that African American children are predominantly placed in kinship care in comparison to other children.

Placement instability. While in foster care it is very likely that youth have experienced several placement changes. During each placement change, critical information regarding the youth’s medical history may be lost, as each new move brings about new doctors and healthcare practitioners. More often than not, information from previous foster parents is not transferred to new providers (Rubin et al., 2004). This could significantly impact the care a child receives, as each doctor must start from the beginning when attempting to assess the youth’s health needs. Moreover, this could lead to inaccurate diagnosis and ineffective treatment strategies and interventions.

Placement disruptions also have profound impacts on the health and well-being of foster youth as there is often a perpetual loss of relationships, stability, and familiarity (Havlicek, 2011). When foster care placements are interrupted it is extremely traumatizing to the youth or child, as they must adapt to a new environment replete with new people and expectations. Each
placement change often leaves an indelible print across the child’s mental landscape, creating attachment and trust issues that potentially set the stage for future placement disruptions.

Multiple placement changes for numerous youth in foster care have been a long standing concern of the child welfare system, juvenile courts, foster parents, case managers, and children’s rights advocates. Research has linked placement instability to emotional, behavioral, and attachment problems (Smith, Stormshak, Chamberlain, & Whaley, 2001). Older youth in general, and teenage girls in particular, are at higher risk for experiencing multiple placement changes. More prevalent and challenging behavioral issues in these populations make placement instability more common and likely than for younger children (Smith et al., 2001). Foster parents are quick to request removal when they find the behaviors too difficult. Therefore, these youths often move from place to place until they age out of the foster care system, usually without establishing supportive and caring relationships. These moves are devastating to older foster youth, as the establishment of stable, long-term relationships is greatly needed as they attempt to move towards adulthood and self-sufficiency.

Placement changes are also not relegated to foster home changes. Youth could experience moves to relative homes, run away shelters, psychiatric hospitals, or juvenile detention facilities throughout their time in care (Havlicek, 2011). For most youth, moving from place to place becomes a normalized process, as foster parents, relatives, courts, and social workers seek to find the most appropriate placements.

Unsurprisingly, minimizing placement disruptions can improve the mental health of youth in foster care. McCoy, McMillen, and Spitznagel (2008) confirmed that youth who remain in care longer, as well as those who have minimal changes in placement throughout their time in care, have much better outcomes than those who are moved from place to place. In fact,
Havlicek (2011) asserted that youth who have experienced a minimum of five to six placement changes while in foster care are far more likely to experience difficulty in their transition to adulthood. Further, they are also more likely to seek mental health services after being discharged from care.

However, when youth are placed in consistent and caring homes, they are able to form meaningful relationships and receive needed services that provide an essential foundation on their road to adulthood. Predictably, youth who exhibited consistent behavioral challenges tended to experience multiple placement moves, making it difficult for youth to develop appropriate bonds with their care givers. Similar to previous studies, Havlicek (2011) again elucidates the importance of significant adults, as she asserts that the lack of appropriate connections place emancipated youth at an even greater risk for mental and physical health issues.

**Housing Obstacles**

For many young adults, locating housing and moving out on their own is a significant event marking the beginning of adulthood and independence; one met with eagerness and anticipation. While this transition may also bring about stress and uncertainty as these youth experiment with adulthood under the watchful eyes of their parents, aged out or older foster youth must plot their own course without direction and support.

Finding and securing suitable housing is also a challenge for youth exiting the foster care system. Firstly, the process of actually looking for a place to live can be confusing and discouraging, as there are many processes, applications, and fees when applying for housing. For youth with very little experience, this can be a difficult and seemingly impossible task. The lack of financial resources due to unemployment or underemployment, an established credit history,
sufficient savings, coupled with the lack of life experience and support make it very difficult for these individuals to find suitable housing (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001).

Thus, once discharged from care, many foster youths return to the homes of their relatives or biological families, as there are numerous youth who maintain contact with their parent(s) and extended family members throughout their time in care (McMillen & Tucker, 1999). Although the foster care system does very little to help children maintain contact with their biological families, particularly in cases where parental rights were terminated, older youth seek to continue these alliances. Collins, Spencer, Ward (2010) found that 90% of the participants in their study maintained contact with their biological families. An earlier study conducted by Courtney, Piliavin, Grogan-Kaylor, and Nesmith (2001) revealed that the majority of participants in their study contacted parents and relatives after leaving care, and many moved in with them. Although living conditions in these instances may not be optimal alternatives, they prevent the youth from becoming homeless. As a result, maintaining relationships with family members is extremely important to youth in foster care. Dworsky and Courtney (2009) noted in their study that youth who had a relationship with a significant adult in their lives were far less likely to experience homelessness than those who did not. In instances where emancipated youth are able to locate housing on their own, it’s often in undesirable, impoverished, and crime-infested neighborhoods.

Even more disheartening, numerous foster youth find themselves homeless or in living situations that are tenuous after being discharged from foster care (Dworsky & Courtney, 2009). Without connections to supportive adults or the option to return home to their families, alarming numbers of aged out youth spend time in shelters, move incessantly between the homes of friends and family members, sleep in cars or on the streets, and even spend occasional nights
with strangers (Dworsky & Courtney, 2009). To illustrate further, an analysis of the Midwest Evaluation of the Adult Functioning of Former Foster Youth, a longitudinal study of youth who aged out of foster care systems in three Midwest states, revealed that 31–46% of youth experienced homelessness at least once from the time they were emancipated (Dworsky, Napolitano, & Courtney, 2013).

**Educational Obstacles**

Projected academic outcomes for foster youth aging out of the system appear dismal. Research indicates that few complete high school, and even less obtain a college education (Emerson & Lovitt, 2003). McMillen and Tucker (1999) in their study of youth who aged out of Missouri’s foster care system, observed that 62% of youth were discharged without being employed, and 61% left without completing high school or obtaining a GED. Although this study only focused on Missouri, the implications are staggering.

Frerer, Sosenko, Pellegrin, Manchik, and Horowitz (2013) conducted a study of third to eighth grade foster youth enrolled in the California school system. When utilizing the participants’ performance on the California Standards Test as an indicator of academic achievement, findings indicated that foster youth performed poorly on all test measures when compared to non-foster youth. Additionally, constant school changes as well as academic difficulty prior to placement in foster care increased the potentiality of negative outcomes. This is an alarming indication that many of these youth experience tremendous difficulty navigating the often rough and unforgiving terrain of life. A comprehensive program aimed at assisting foster youth with establishing connections that can assist them after they exit care, as well as completing their education and obtaining employment can significantly impact the trajectory of foster children (Mallon, 1998).
The academic challenges that youth in foster care experience are immense. Stone (2007) asserts that children in foster care are disproportionately placed in special education programs. The reasons for their placements vary but are usually the result of the presence of behavioral challenges in the classroom ranging from isolation to aggression. In addition, increased rates of absenteeism resulting from constantly changing foster homes and subsequent school environments create further academic challenges (Zorc et al., 2013). Further, Stone (2007) asserts that children who have been maltreated are often deficient in math and reading subjects when compared to children who have not been maltreated. These academic pitfalls follow them throughout their duration in foster care and well into adulthood. Without adequate support and services in place, many find it almost impossible to make notable progress in their educational endeavors.

Consequently, many foster youths fail to complete their education prior to being discharged from foster care. Various studies explicate the academic challenges these youth encounter. Emerson and Lovitt (2003) claim that foster youths’ lack of academic achievement can be attributed to multiple school and foster home placements. Constant movement and placement changes make it very difficult for schools to identify and address learning deficiencies in a timely manner, thus leading to a very lengthy process of implementing much needed services. This is vital, as many of these children and youth are often eligible for special education services. These barriers, in addition to school personnel’s frustration with students’ sparse academic records, a lack of understanding regarding the realities with which foster youth contend, and sometimes even negative attitudes towards them, compound students’ academic problems (Vacca, 2008).
However, there are some programs aimed at addressing the academic minefields that these youth encounter. Jones’s (2010) study highlighted one such residential program specifically designed to address the social and academic needs of foster youth throughout their placement. Students remained in this residential program until they graduated or reach emancipation. Findings indicated that youth tended to fare better after emancipation from state care in that they were more likely to enroll in 4-year college programs more than youth who had not participated in the program. However, when contacted at the end of the 3-year period, many of these students were no longer in college or had transferred to community colleges due to personal and financial difficulties. Although a significant percentage of students from the study dropped out of college, the program has had positive implications, as most graduates of the program at least attempted to attend college. Conversely, students who did not participate in this program were more than likely to simply not complete their education, much less pursue a post-secondary education. While many foster youth express the desire to attend college, this aspiration is difficult to achieve as they are clearly underrepresented among the college student population (Kirk & Day, 2011). Although many programs provide educational support to youth aging out of foster care, outcomes continue to spiral downward as politicians, state agencies, and lawyers point fingers rather than seek solutions to improve outcomes for this population.

**Employment Obstacles**

Obtaining viable employment is another barrier that foster youth encounter after aging out of the foster care system. Employment is essential, as these youths no longer have the financial support that was provided by the state and case workers prior to their emancipation. Although most independent livings programs attempt to teach viable employment skills as part of their programming, they fall short of offering opportunities for hands-on learning (McMillen,
This results in youth often being ill-prepared for entering the workforce, as a romanticized view of work clashes with their often lackadaisical and irresponsible commitment to their work expectations. Many have not matured to the extent that they are ready to fully adhere to the inherent discipline of work. If they are fortunate enough to secure a job, they often struggle as they are not experienced in how to successfully manipulate the work environment (Champagne, 2014).

Most young adults have the financial support of their families and are able to postpone their path to adulthood while pursuing education or traveling the proverbial road to “find themselves.” However, emancipated foster youth often lack sufficient support, and as such, they must work to obtain employment immediately as they have to assume full responsibility for their well-being much sooner than their wealthier counterparts (Furstenberg, 2010; Furstenberg et al., 2004). The difficulty of obtaining and maintaining employment is even more cumbersome for African American and Hispanic emancipated youth, as they have poorer employment outcomes than their Caucasian counterparts (Dworsky, 2005; Hook & Courtney, 2011). Again, independent living programs strive to prepare youth for these challenges, but youth need ongoing training that extends beyond their termination from the child welfare system.

Further, because foster care youth often have not completed their high school diploma, much less obtained a post-secondary degree, they most likely are relegated to low-wage positions without benefits that maintain their poverty level status (Vacca, 2008). Success in school is directly correlated with employment success, as educational attainment typically suggests better employment opportunities. A vast majority of these youth find themselves in need of public assistance to address even their most basic needs as they exit the foster care system (Scannapieco, Connell-Carrick, & Painter, 2007). Reliance upon public assistance raises obvious
and alarming red flags regarding these young adults’ readiness for adulthood upon termination. Further, an indication of self-sufficiency is one’s ability to gain viable employment. Therefore, another important factor at the time of a youth’s discharge is the attainment of employment.

**Substance Abuse Obstacles**

Substance abuse among youth in the U.S. is a serious societal issue that continues to garner increased attention among parents, legislators, law officials, courts, and social workers. Its consequences can be deleterious and far reaching in the lives of youth as it increases the presence of precarious behaviors such as criminal activity (Shook et al., 2011), violence (Boles & Miotto, 2003; Wagner, 1997), risky sexual behaviors (Ritchwood, Ford, De-Coster, Sutton, & Lochman, 2015), and poor academic achievement (Cox Zhang, Johnson, & Bender, 2007). Often substance use continues well into adulthood, hindering developmental growth and obstructing educational and employment possibilities. For older foster youth, this period is critical as they often transition to adulthood without a requisite support system.

According to the National Center for Children in Poverty (2011), in 2009, 10% of youth between the ages of 12 to 17 were substance abusers, with marijuana being the predominant drug of choice. This is concerning as policymakers, law officials, schools, and parents attempt to harness this bourgeoning problem. Children who have been in foster care are at increased risk of substance exploration and subsequent use (Barn & Tan, 2015; Vaughn, Ollie, McMillen, Scott, & Munson, 2007). In fact, it is extremely common among youth maltreated youth. When compared with non-foster youth, maltreated youth are far more likely to use substances than the general population (Gabrielli, Jackson, & Brown, 2016; McCrystal, Percy & Higgins, 2008). Past histories of abuse and neglect may increase vulnerability to illicit substance use, as well as academic issues, poor relationship with foster parents, decreased supervision, and placement
instability (Barn & Tan, 2015). Maltreated individuals may find themselves abusing substances in an effort to self-medicate and cope with traumatic events tied, largely, to their childhood abuse and problematic home environments (Bujarski et al., 2012), as well as placement in foster care.

Many maltreated youth experiment with substances while in foster care. Hudson and Nandy (2012) completed a study of 156 homeless youth, 30% of which had a history of foster care placement. Findings of their study indicated that those with a history of foster care have a significantly higher propensity to abuse substances. Vaughn, Ollie, McMillen, Scott Jr., and Munson (2007) explored predictors and patterns of substance use among 406 older foster youth. Their findings suggested that half of the participants in this study had used substances at some point in their life, which is consistent with the general population of youth. However, one-third of the population had an actual substance abuse problem.

Placement types also impact substance abuse rates among older foster youth. Independent living settings are characterized by less structure and supervision of young people as they are prepared to eventually reside on their own. Decreased oversight and accountability in this setting are frequently met with increased substance use (Keller, Blakeslee, Lemon, & Courtney, 2010). Minimizing overall placement moves during a youth’s time in foster care is a significant protective factor when considering substance abuse (Stott, 2012).

Cursory relationships with caregivers, lacking in sustenance and support also contribute to poor adjustment and the tendency to use substances. However, meaningful relationships with foster parents and biological family members mitigate substance abuse among youth during foster care placement and discharge from the system (Maliszewski & Brown, 2014).
Legal Obstacles

Despite increased services and attention aimed at meeting the needs of youth transitioning from the foster care system to adulthood, life outcomes continue to be appalling for many. Haunting memories associated with maltreatment as well as subsequent placement in the homes of unfamiliar caregivers prove to be highly detrimental to their mental, physical, social, and emotional development (Berzin, 2008). These challenges often make the goal of self-sufficiency complex and frustrating. Devoid of the financial support, physical presence, and oversight provided by the foster care system, these young adults are at an elevated risk for involvement with the legal system. For many youth in foster care engagement in criminal activity begins well before they reach young adulthood. To this end, various studies have depicted the troubling association between maltreatment and juvenile delinquency (Herrenkohl, Huang, Tajima, & Whitney, 2003). The significance of this relationship deserves attention as it has powerful implications for Black children who are overrepresented in the child welfare and juvenile justice systems (Knott & Donovan, 2010; Ryan, Herz, Hernandez, & Marshall, 2007).

Substantial numbers of abused youth reside in impoverished conditions replete with neighborhoods that are often marked by crime, poverty, violence, unemployment, and disorganization. These elements undoubtedly influence youth offending behaviors (Fagan & Wright, 2012; De Coster, Heimer, & Wittrock, 2006). While poverty-stricken milieus certainly have their inherent challenges, research has also uncovered protective factors in these environments that reduce the occurrence of delinquent acts and also buffer youth against presupposed negative outcomes (Sampson, Raudenbush, & Earls, 1997). For example, active or veteran residents can be essential in establishing unspoken codes of behavior and expectations for all residents to follow. Although this level of needed participation may not occur frequently
in poor neighborhoods, it is important to note that many attempt some degree of internal policing and organizing with the intent of creating social norms at generating safe and collaborative living spaces (Sampson et al., 1997).

Youth in the foster care system have a tendency to engage in a variety of risky behaviors more often than other youth (Ellis & Wolfe, 2009). As a result, they are sometimes introduced to a path of criminal experimentation and involvement they find difficult to escape. Without proper support, direction, and established relationships while in foster care, these youths are likely to fall into a consistent pattern of counterproductive decision-making. At times, this results in criminal charges and ultimately inhibits positive outcomes (Mendes & Moslehuddin, 2009). In fact, legal involvement during adolescence has the potential of setting in motion a bevy of negative sequelae, resulting in consequences that intrude upon adulthood. Firstly, the youth will likely be removed from the foster home and placed in a residential treatment facility as a punishment for the criminal offense. This will likely dissolve relationships established in and out of the foster home environment, once again disrupting essential attachments and critical stability (Ryan & Testa, 2005). In addition, school attendance and participation will be interrupted, exacerbating already existing academic problems. Consequently, youth may find themselves caught in a perpetual cycle of legal involvement (Lee et al., 2015).

Juvenile justice involvement is a strong predictor of adult criminality (Shook, Goodkind, Pohlig, Schelbe, Herring, & Kim, 2011). However, Lee, Courtney, Harachi, and Tajima (2015) found that although juvenile legal involvement foretold later criminality at 21 years of age, the relationship between juvenile offenses declined as the individual got older. This is of particular concern for older foster youth who are preparing for emancipation from formal care as achieving independence is an already obscure process. Loss of monetary and physical supports is
frightening, and many youth worry with how they will survive. As levels of desperation increase, they are more likely to turn to illegal activities to take care of themselves (Lee, Courtney, & Hook, 2012).

**Elements of Success**

There has been a vast amount of research conducted on the challenges that foster youth face once they are emancipated from foster care (Berzin, Singer, Hokanson, 2014). Many experience homelessness, poverty, poor physical and mental health, unemployment, lack of education, and incarceration, and out of wedlock births (Courtney & Dworsky, 2006). However, not all youth who age out of the foster care system have despairing life trajectories. In fact, many actually go on to live quite productive lives (McGloin & Widom, 2011). These stories are often overshadowed by the alarming statistical representations of those who experience abysmal outcomes. What is the dividing line between these youth? Where do the six degrees of separation begin and end?

**Resilience.** It is indisputable that occurrences of abuse and/or neglect—as well as placement in foster care and its associated consequences—are traumatic childhood experiences that often have toxic effects well into adulthood (Samuels & Pryce, 2008). Although negative life experiences are unavoidable, some people are more equipped to confront them and persevere. Many of these youth have proven themselves to be resilient despite their seemingly unending challenges, trauma, and significant life changes. Researchers posit that resilience plays a significant factor in healthy and adaptive individual responses to such adverse situations (Herman et al., 2011; Masten, 2001; Masten & Coatsworth, 1998). Though successful navigation of difficult situations signals individual resilience, it certainly does not indicate that these same
individuals are insulated from stress caused by their life’s vicissitudes. It simply connotes one’s ability to rebound instead of recoil in the face of hardship.

Resilience, conceptualized by clinical psychologist, Norman Garmezy (1970), is a complex construct that has changed and expanded (Masten, Nuechterlein, & Wright, 2011). Garmezy (1991) was particularly concerned about the ways in which pervasive poverty and its associated consequences obstructed the positive development of large numbers of children. Garmezy’s focus in this area was transformational as he brought attention to the reality that significant segments of the population may reside in impoverished and dangerous conditions, but all hope is not lost. In fact, countless children reared in such unusually harsh circumstances grow into productive and contributing members of society. Therefore, he sought to bring a different dimension to the literature; one that looked at these children from a place of strength rather than deficits.

Early studies involving individuals with schizophrenia who consistently displayed adaptive behaviors in spite of their illness were also foundational in the establishment of resilience as a useful construct (Garmezy, 1970). Researchers were captivated by the relatively high levels of functioning and social competencies patients exhibited in a variety of settings. Augmenting this rapidly developing knowledge base, researchers began to study the adaptive functioning of the children of the schizophrenic patients given the distinctly high-risk environments in which they were being reared in as a result of their parent’s illness. Their findings once again revealed that many children managed relatively well despite their circumstances (Garmezy & Streitman, 1974).

As interest in positive adaption under unfavorable conditions gained traction, other researchers expanded the initial boundaries associated with resilience. Developmental
psychologist Emmy Werner (1989), a leader in resilience, began to study the effects of adversity in a variety of conditions. Most noted for the Kuai longitudinal study conducted in Kuai, Hawaii, Werner and Smith (2001) monitored the impact of adversity and associated protective and risk factors across an array of domains (e.g., employment, education, employment, child rearing, and marriage). The goal of the study was to document and examine all children born in 1955 and their associated adult outcomes considering the life adversities of poverty, parental psychopathology, and trauma. Findings of this expansive study indicated that 50% of study participants were considered to have successfully adapted to the many adversities they experienced over the course of the childhood and adult life. Further, these outcomes highlighted the significance of much researched protective factors (Werner & Smith, 2001).

Early studies on resilience attributed positive outcomes to individual qualities. Children who were considered resilient were often viewed as extraordinary in some way and thus described as “invincible” or “invulnerable” (Masten, 2001). This suggests that resilience is more of an individual property or characteristic. However, as resilience research evolved, studies recognized the presence of other factors that influence individual adjustment or maladjustment to difficult situations. This was especially important when determining the resilience of maltreated youth.

**Resilience and maltreated youth.** Abuse and/or neglect are immense infractions against children. This is plainly manifested through the multitude of behavioral, emotional, mental, and physical challenges they are commonly left to confront as a result (Cicchetti & Rogosch, 2009). Inflexible operationalized criteria should not be used when determining the reliance of maltreated youth. Rather, resilience should be viewed through a wider lens so that it may account for the ever-evolving nature of human development. The plurality of negative outcomes these
youth experience as a decidedly vulnerable population as well as the fluidity of resilience definitions will prevent many from meeting excessively strict and lofty criteria (McGloin & Widom, 2001). Such criteria includes the presence of protective factors that act as individual buffers to adversity (Rutter, 1996), various measures of functioning that indicate positive adaptation to challenges, and satisfactory performance across multiple identified domains (Masten, 2001). This dynamic can leave many to disregard and/or devalue their visceral sense of internal fortitude that propels them forward in the most difficult of situations.

**Self-efficacy.** Albert Bandura’s (1999) self-efficacy theory is postulated as foundational for the underpinning of human motivation and accomplishment. Its lofty intent of explicating how individuals set and achieve goals is a complex examination of the interactions between human internal and external behavioral systems that drive the motivational processes. This ultimately shapes individual character and life destinies (Bandura, 1997). Bandura (1997) posited that individuals are able to successfully conquer challenges when they believe that their skills combined with actions can generate a positive outcome. When individuals have little confidence in their ability to be successful in a given situation or if they encounter difficulty, they often have minimal desire to work at circumventing the challenge. As such, self-efficacy is posited as being critical to human development. Bandura (1989) asserts that internal views of one’s capability pre-determine future efforts especially in situations or tasks perceived as difficult. Thus, self-efficacy influences decisions, as people have a tendency to gravitate towards tasks or environments they believe will complement their strengths, while avoiding those that will potentially call attention to their deficits (Bandura, 1997).

Views on self-efficacy also portend an individual’s tenacity in the face of challenges. Individuals who feel that they are capable of taking on challenges work diligently at overcoming
the obstacles and mastering the task regardless of the amount of time it takes to do so. On the contrary, those with little self-efficacy often give up quickly out of belief that they are ill equipped to overcome the trial (Bandura, 1982). These feelings of inadequacy can hinder growth, as the individual will likely develop an internal fear of failure based upon views regarding their abilities.

According to Bandura (2012), self-efficacy is developed by four different means: (a) mastery experiences, (b) social modeling, (c) social persuasion, and (d) physiological or affective states. Firstly, self-efficacy is developed through mastery experiences. This vehicle allows one to build self-efficacy through past experiences. The individual participates in a variety of tasks that result in both successes and failures. Individual failures are significant because they foster internal fortitude and build character, and they also unwittingly teach the importance of perseverance. Secondly, social modeling develops self-efficacy. The experience of witnessing the success of others is inspirational and motivational as it gives individuals the courage to attempt similar goals. Thirdly, self-efficacy can be developed by social persuasion. Verbal confirmation and encouragement received from others is crucial in the development of self-efficacy. When people are persuaded they can succeed, they overlook and ignore obstacles in their path and push towards success and fulfillment of the goal. Conversely, negative feedback can potentially minimize self-efficacy by causing the individual to second guess his/her abilities, stalemating efforts. Lastly, physical and affective states can be critical in developing self-efficacy, as the individual is able to use physical and affective responses as internal cues to determine potential success or failures. For example, emotional and physical cues such as stress, fatigue, or illness can compromise confidence in one’s abilities (Bandura, 2012).
Self-efficacy and maltreated youth. Self-efficacy for youth aging out of the foster care system is instrumental on their road to adulthood. After emancipation from the foster care system, most of these youth are completely on their own, lacking essential financial, emotional, and housing support from significant adults (Cunningham & Diversi, 2013). Thus, belief in their ability to successfully face oncoming challenges and control their life narratives (Bandura, 1997) is vital to their survival in a world without a safety net. For many of these youth, the establishment of their self-efficacy has hinged upon their own internal strength, as they have endured multiple negative situations and associations that have effectively minimized their self-confidence and self-worth.

Self-efficacy is a fundamental protective factor that facilitates positive adaptation in the presence of difficulty. This is particularly important during the adolescent phase when trying new things is critical to self-development and awareness. Youth who have healthy self-efficacy are likely to persevere in spite of perceived challenges.

Supportive adults. Older foster youth are considered a vulnerable population because of their likely negative outcomes once they are discharged from the foster care system. However, research has indicated that the presence of a significant adult in the lives of these youth is instrumental in interrupting the cycle of pathology (Munson & McMillen, 2009). For non-foster care youth, parents usually play the role of significant adult, as they provide unfettered support to their children well into their adult years. However, foster care youth, especially those who spend extended amounts of time in care and ultimately age out, tend to lose relational ties with their parents and extended family members (Perry, 2006; Cushing, Samuels, & Kerman, 2014). Oftentimes if they have maintained contact throughout their time in foster care, their families have a diminished role in their lives. Thus, they have a greater need for the formation of
supportive, healthy relationships with non-parental adults. A supportive adult is considered a protective factor and an essential ingredient in a child’s resilience (Greeson & Bowen, 2008). Masten (2001) indicated that children are resilient because at some point in their lives a significant adult has nurtured them. For foster children, this could be compromised as they often have multiple experiences where the bonding process is interrupted, beginning with their removal from home (Drapeau et al., 2007).

Munson, Smalling, Spencer, Scott Jr., and Tracy (2010) conducted a study with 189 youth in the process of aging out foster care system. The outcome of their study brought to light the significance of mentoring relationships in the lives of older foster youth. These participants expressed the importance of having an adult capable of providing tangible and intangible supports as they traversed the road to adulthood. Participants found their transition to adulthood less intimidating when they were able to form authentic relationships with adults capable of giving them information, emotional and tangible support, and financial assistance when needed (Munson et al., 2010).

Researchers propose two broad categories of mentors: programmatic or natural. Programmatic mentors are found within organization such as Big Brothers & Big Sisters and are often assigned to the mentees by the organization. Natural mentors are said to usually exist within the individual’s environment such as teachers, pastors, relatives, friends, coaches, or neighbors. The mentor is usually someone with whom the youth is familiar and has a relationship. Thus, the relationship exists in a more organic context devoid of the time constraints and limits that may be inherent in programmatic mentoring relationships (Greeson & Bowen, 2008). Regardless of the type of mentor, there are many benefits that accrue from the presence of a significant adult in the lives of older foster youth. In their study of seven female
youth of color, Greeson and Bowen (2008) emphasized the importance of natural mentors through the voices of the participants. Across the board, participants articulated the significance of their mentors in providing them with social and psychological support, informational resources, as well as financial and transportation assistance in times of need. These youths credited a large portion of their success to the help received from their mentors.

**Conclusion**

Maltreated children are often subjected to cumulative traumatic incidents before and after placement in foster care. Although foster care is considered to be an effective alternative to children living in high-risk environments, often this system perpetuates and exposes the children to further risk and harm. The impact is far reaching and carries over into their adult lives resulting in poor life outcomes for the vast majority (Scannapieco, Connell-Carrick, & Painter, 2007). However, some aged out youth are able to successfully overcome obstacles and enjoy a good quality of life. When considering the differences between those that succeed in spite of tremendous odds after emancipation versus youth live in a continua cycle of despair, it is necessary to identify and explore those elements that change the developmental trajectories of this population.
Chapter 3: Methodology

In this study a qualitative approach has been utilized to explore and illuminate the lived worlds of young African American adults who have aged out of the foster care system. Whereas much of the foster care literature focuses on quantitative outcomes, this study portrays the stories of fractured lives that lie behind the numbers. Further, qualitative inquiry allows the researcher to gain an understanding of how the participants make meanings of their experiences within a given context (Magolda & Weems, 2002). As such, qualitative research has the capacity to bring about significant social and political change while allowing, encouraging, and empowering the participants to be an active part of the change process (Hatch, 2002).

Qualitative Inquiry

Qualitative research seeks to explore and explain behavior as well as social phenomena through careful examination of multiple forms of data that may include: interview transcripts, field notes, emails, artifacts, documents, and participant observation (Glesne, 2006). The qualitative researcher recognizes that situations and events create multiple realities and relies on the individual’s experiences and interpretation of his or her world. Unlike quantitative research, findings are not used to generalize and predict, but they are utilized to elucidate experiences and interpret meanings (Hara, 1995). Qualitative research allows privileged entry into the interesting and sometimes very personal lives of the participants being studied in an effort to illuminate and share lived experiences from the participants’ own perspectives (Emerson, Fretz & Shaw, 1995). The ultimate goal is to arrive at the emic meaning of the experience that reflects the participant’s point of view and understanding.

Numerous qualitative approaches such as grounded theory, ethnography, life histories, and phenomenology may be used to investigate the participant’s emic reality (Glesne, 2006;
Although these approaches may differ in form, the single most important commonality that binds qualitative methods is the emphasis on meaning and the relationship between the interviewer and respondent (Denzin & Lincoln, 1996). The interviewer’s ability to establish a trusting relationship with the participant is central to the research process, as it facilitates a unique and rich informational exchange between the researcher and participant. Through this process, the participant becomes far more than a “subject,” and the researcher enters into the lived world of the participant as they journey together to construct situational meanings.

Whether the researcher is simply observing certain phenomena or conducting in-depth interviews, a trusting relationship between the researcher and participant must be established (Barritt, Beekman, Bleeker, & Mulderij, 1983). The intent is to see those taken-for-granted and seemingly ordinary realities with new eyes and to depict their significance from an in-depth perspective. Thus, detail is of the utmost importance because it brings attention to the value of what the average person may see as commonplace and challenges us to see it differently in both its simplicity and complexity (Barritt et al., 1983). Further, “thick descriptions” allow us to reconstruct occurrences within particular contexts that then provide a deeper meaning of what is being observed or studied (Geertz, 1973).

**Phenomenology**

At the center of phenomenology is the researcher’s intent to depict the experience from the perspective of the individual (Barritt et al., 1983) and to see the world from the participant’s personal and sociocultural reality. The phenomenological approach scrutinizes that which is often thought to be common and ordinary, and exemplifies different dimensions through the eyes of the participant. This often requires us to challenge and critically reflect upon our own taken-
for-granted assumptions as researchers, as well as modify our own consciousness by excluding presumptions and prior knowledge (Ehrich, 1996). The ability to see and understand things outside of one’s self is paramount in producing good qualitative research. Further, the understanding that there are multiple realities in one’s lived world, and the world is, indeed, constantly changing is essential when conducting a phenomenological study (Alerby, 2003; Munhall, 2007).

    Viewing the world from a phenomenological perspective is complicated and takes practice. One must always be willing to question veracity and reality. This requires the suspension of our individual subjectivities. Munhall (2007) suggests that this can be achieved by actively decentering oneself from previous judgment, belief, values, and understanding.

    Phenomenological data typically include a series of in-depth interviews as well as personal narrative texts. A researcher’s failure to establish a trusting and mutual relationship in the research process will result in thin descriptions, lacking sufficient information, intentionality, and meaning from the participants (Geertz, 1973). Geertz (1973) asserts that a thick description is essential as it allows us to see in a layered fashion from the participant’s point of view. In other words, there is always more to what we see than what is on the surface. A researcher has to continuously and consistently dig until the meaning is uncovered. In the best case scenario, the researcher is able to take the lived world of the participant and methodically peel back the layers of meaning to allow the reader to look as much as possible through the eyes of the participant.

    A brief overview of phenomenology. Brentano (1887/1982) developed the early tenets of phenomenological psychology and his works and ideas were significant catalysts in the later development of phenomenology. In fact, his ideas planted the seeds of interest in many of his fellow students, most notably, Edmund Husserl, who later expanded Brentano’s
phenomenological school of thought (Moran, 2000). Brentano developed the notion of the intentionality of consciousness and how to aptly explicate its existence. Brentano argues that if one is aware of his/her consciousness, then the associated mental activity can be described. Essentially, it is the act of thinking about your thinking.

Brentano made a clear distinction between the seemingly similar terms of inner perception and introspection (Roche, 1973). He speculated that introspection is subjective in nature and lacking in definitive shape and classification. Yet, introspectionists, he asserts, pursue tangible or concrete aspects of thought to explain experiences. Conversely, inner perception can be classified through the examination of individual mental representations. He was particularly interested in the ways in which individuals experience situations and how they categorize those experiences within various conscious states (Roche, 1973). This way of knowing is, of course, limited to the owner of the experience who is also the producer of the knowledge (Moran, 2000; Brentano, 1887/1982).

Phenomenology asserted itself as a major philosophical force under the influence of Edmund Husserl (1931). Though an enthusiastic student of Brentano, he later deviated from the positivist perspective that his teacher held firm (Willis, 2001). Husserl’s most noteworthy contributions are the *epoché* and the natural attitude. Husserl’s work claimed that transcendental phenomenology encourages the removal of all presuppositions applied to experiences and phenomena. This requires stripping away surface meanings and characteristics in order to reach “the things themselves” (Moran, 2000, p. 93). This is known as the *epoché*. The researcher must shed his or her accumulated knowledge—made up of taken-for-granted assumptions preventing the phenomenon being studied—in order to see and understand the phenomenon in new and unanticipated ways (Husserl, 1931). Inferences and their inherent assumptions are discouraged
and traded instead for descriptive language. The ultimate goal of phenomenology is to look at the essence of the experience without fixed notions borrowed from previous experience (Munhall, 2007).

Husserl believed that we come to understand a phenomenon in relation to its context within the world and that the “natural attitude” must be an examination of ordinary everyday life as it is experienced and given meaning through personal and social facts, understanding that an individual is simultaneously part of multiple realities (Roche, 1973, p. 11). He further argued that it is difficult to view phenomena in an entirely pure way without filtering it through our subjective realities (Husserl, 1931). Thus, actual meaning and intent may be misunderstood or overlooked (Husserl, 1931).

**Existential phenomenology.** Martin Heidegger and Merleau-Ponty were instrumental in the transformational shift from transcendental phenomenology largely focused on the “consciousness” to existential phenomenology, which focused on the lived realities of individuals. Heidegger was particularly concerned with the importance of the state of being and existence (Roche, 1973).

Merleau-Ponty in his seminal work *Phenomenology of Perception* argued that one’s perception of the world is related to the way it is experienced through the body. This was a major departure from the previous works of Edmund Husserl who asserted that the world is experienced and understood through the “consciousness” (Husserl, 1931; Merleau-Ponty, 1962). Merleau-Ponty argued against this notion as he viewed the separation of self from the world as inconceivable and misleading. He posits that the body cannot be isolated from what is assumed to be known. The body and knowledge are interrelated and therefore, dependent upon each other to make meaning, thereby removing both objective and subjective realities as independent
abstractions (Merleau-Ponty, 1962; Munhall, 2007). He further asserted that though it is difficult to separate the essence of one’s self from the world, it is in fact possible to acknowledge the presence of what is already known and potentially see it in raw and unpredicted ways (Merleau-Ponty, 1962). In other words, we must deliberately omit what we have learned beforehand or come to know through various experiences of imparted information.

**Life Histories**

Life histories serve as a qualitative research method that is advantageous for the exploration of a variety of phenomenon. Well-written and detailed life histories are multi-layered representations of the research participant amid their varied contextual influences (Glesne, 2006). Participant experiences are chronologically ordered in a way that allows connections to be made between past experiences and present actions. Life histories when used for research rely primarily upon the participant’s ability to sufficiently reconstruct the details of his or her experiences (Haglund, 2004; Lewis, 2008).

Although life history methodology is well established, there are still caveats to its use. Firstly, the data provided is based upon the accuracy of the participant’s memory (Haglund, 2004; Errante, 2000). Secondly, the researcher has the power to decide how the story is organized and relayed and the process is labor intensive and time consuming, and thirdly, there may be concerns regarding the intersection of the researcher’s subjective reality with the participant’s (Lewis, 2008), and the reliability of life histories may be called into question, as the narrator may add or omit information that will influence one to see him or her in a certain light. Nevertheless, life histories can lead the researcher on a wonderful fact-finding journey as the narrator recalls personal memories and experiences, resulting in a unique collaboration between
research and participant (Haglund, 2004). Life histories are typically conducted through interviewing and reviewing of personal texts.

Similar to oral histories, if the researcher has vague questions, he or she may gain vague answers, or answers that fail to address the topic of interest (Errante, 2000). Further, Errante (2000) states that a narrator may get lost in his or her memories and fail to answer the questions altogether. Patience from the researcher is critical, as leading the narrator can result in missing essential information. The narrator may only recall that which he or she believes the researcher is interested in. The researcher must also be careful, as in all of the other research methods, not to inject too much of the self and personal feelings into the representation of the narrator’s story. This is extremely challenging as the narrator may share very personal and sensitive information.

**Research with Vulnerable Youth**

Largely, children’s lived worlds have been explored through the eyes, understandings, and voices of their adult caretakers or parents (Kirk, 2007). Children are often marginalized in an adult-centered society, as there is an obvious imbalance in the power structure between adults and children (Kirk, 2007). Kirk argues that children and youth do, in fact, have significant and compelling social realities. The experiences of youth and children are often dismissed and discounted, as they are considered by society as being blank slates awaiting adults to create, outline, and validate their being. Researchers have since found that children and youth are insightful and can be active participants in the research process (Kirk, 2007).

Black youth who have emancipated from the foster care system are considered a vulnerable population as a result of their overwhelmingly negative projected outcomes (Iglehart & Becerra, 2002). Unemployment, poor health, and homelessness create precarious daily situations for this population (Bruskas, 2008). To improve outcomes and legislation aimed at this
population, research must continue to address their unique needs, beginning with entry in foster care, extending to their transition into adulthood. Increasingly, there is a growing respect for the voices of youth concerning changes to policies and legislation, particularly those that impact their well-being (Foster, Gieck, & Dienst, 2005). To this end, the stories of emancipated youth, especially those who are black, are often neglected, letting the abundance of quantitative data represent their realities.

Not only are emancipated youth a vulnerable population, but once terminated from the child welfare system, they are often hard to reach as a result of homeless and/or transient lifestyles (Abrams, 2010; Bender, Yang, Ferguson, & Thompson, 2015). Thus, researchers interested in studying populations such as these must be prepared to confront various challenges. Constantly changing addresses and phone numbers, scheduling challenges, lack of interest in participating in research, and general distrust in people—especially those who are unfamiliar—make it difficult to successfully engage this population (Abrams, 2010). Thus, the researcher’s role is pivotal in attracting and maintaining the attention of these youth. Many emancipated youth often have a visceral distrust of adults and institutions. Therefore, researcher sensitivity and emotional presence at all times is crucial to the process.

Similar to working with adults in the research process, the reflexivity of the researcher is of the utmost importance when working with vulnerable children and youth. Throughout the research process, the researcher reflects on the interactions between the participants, setting, him/herself, and how they influence each other (Glesne, 2006; Watt, 2007). Further, establishing a relationship built on mutual respect and trust is essential to the qualitative inquiry process (Magolda & Weems, 2002).
Throughout the process of this study, it was critical to pay close attention to participants’ verbal cues such as body language, facial expressions, hand gestures, and quickened or slowed speech. These cues set the pace of the interviews. There were times when I felt it unsuitable to continue a particular line of questioning if it seemed to elicit negative or distressing responses from the participant. When this occurred, sometimes the participants would revisit the topic at a later time, or the specific focus on that issue would simply be discontinued. The participant was always empowered by being allowed the control the interview and participate on his or her own terms.

**Data Collection**

**Recruitment of participants.** In large organizations, hierarchical structures can be dense and cumbersome. As such, they can create barriers that are often impervious to outsiders. Therefore, organizational gate keepers (Seidman, 2013; Abrams, 2010) were identified and contacted with the expressed intent of explaining the study and obtaining their approval to utilize previous clients who agree to participate. These individuals were all in organizational leadership positions of chief executive officer or executive director. After the initial phone contact with each organizational leader, a *Permission to Conduct Research Study* letter (Appendix A) was sent to them, requesting their signature as confirmation of their approval. The letter also outlined the conditions of the study. A recruitment flyer (Appendix B) detailing the study and participant expectation was also sent to the organization leaders to distribute as they saw fit. Also once they returned the permission letters, flyers were sent to various colleagues at their establishments.

The organizations selected for the study are located in southeast Michigan, and they provide independent living programming for youth prior to their emancipation from the child welfare system. Case managers were asked to identify and contact past clients with whom they
had worked to distribute the flyer. At the onset of the conversation, they were told to emphasize that participation in the study was completely voluntary. If there were individuals who expressed an interest, the case managers were asked to informally introduce the individual to me via phone or in person where possible. This was a step in helping to minimize possible anxiety and reservation that potential participant may have. In additions, my immediate work colleagues were given flyers to hand out at various events they attended. Flyers were also posted in public places (e.g., libraries, churches, community colleges, universities) where permitted.

Study population. The objective of the study was to obtain the perspectives of individuals who have experienced emancipation from different points of the continuum. Individuals recently emancipated may have vastly different perspectives than who have been discharged from the child welfare system for a significant amount of time. There were a total of 13 participants who participated in the first series of interviews. However, five were unable to be contacted later as a result of homeless status or unstable living situations. Consequently, the final pool of participants for this study was comprised of seven black women and one Black man between the ages of 18 to 28 who were emancipated from the child welfare system. They all resided in southeast Michigan. Of these remaining participants, four appeared particularly hesitant to participate due to the possibility of revealing sensitive information about their families and backgrounds. Thus, prior to each interview, an informal conversation with each participant was held. The conversation was unrelated to the topic, as it was an attempt to put their concerns at ease. This was important, as it helped to build rapport between the interviewer and participant. Barritt et al. (1983) assert that whether the researcher is simply observing certain phenomena or conducting in-depth interviews, a trusting relationship between the researcher and participant must be established. In an effort to dissuade feelings of discomfort, all questions were
answered honestly and thoroughly. One participant asked, “Who’s going to see this?” They were assured that their names would be kept confidential and that they would be protected by anonymity of data (see Appendix C: Informed Consent). This appeared to address apprehensions about participating in the study. One participant was extremely eager to share her story, indicating that she has never had the opportunity to share her full story with anyone. Participants were also informed that interviews would be tape-recorded. They all voiced appreciation for being told what to expect from the experience.

Table 1

*Participant Demographics*

<table>
<thead>
<tr>
<th>NAME</th>
<th>GENDER</th>
<th>AGE</th>
<th>AGE OF ENTRY INTO FC</th>
<th>AGE OF DISCHARGE</th>
<th>NUMBER OF CHILDREN</th>
<th>EMPLOYED</th>
<th>HIGHEST GRADE COMPLETED</th>
<th>REASON FOR ENTERING CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gavi</td>
<td>M</td>
<td>24</td>
<td>11</td>
<td>18</td>
<td>2</td>
<td>N</td>
<td>11&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Abandonment</td>
</tr>
<tr>
<td>Carla</td>
<td>F</td>
<td>25</td>
<td>19</td>
<td>2</td>
<td>Y</td>
<td>12&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Both parents were substance users</td>
<td></td>
</tr>
<tr>
<td>Bridget</td>
<td>F</td>
<td>27</td>
<td>15</td>
<td>21</td>
<td>1</td>
<td>N</td>
<td>12&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Physical abuse as a result of parental substance abuse</td>
</tr>
<tr>
<td>Lenna</td>
<td>F</td>
<td>28</td>
<td>2</td>
<td>21</td>
<td>1</td>
<td>N</td>
<td>10&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Parental substance abuse</td>
</tr>
<tr>
<td>Rita</td>
<td>F</td>
<td>24</td>
<td>3</td>
<td>18</td>
<td>2</td>
<td>N</td>
<td>12&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Parental substance abuse</td>
</tr>
<tr>
<td>Karleen</td>
<td>F</td>
<td>27</td>
<td>7</td>
<td>21</td>
<td>0</td>
<td>N</td>
<td>12&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Insufficient living conditions</td>
</tr>
<tr>
<td>Gabriele</td>
<td>F</td>
<td>25</td>
<td>9</td>
<td>19</td>
<td>1</td>
<td>Y</td>
<td>12&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Parental substance abuse</td>
</tr>
<tr>
<td>Valerie</td>
<td>F</td>
<td>24</td>
<td>15</td>
<td>19</td>
<td>1</td>
<td>N</td>
<td>12&lt;sup&gt;TH&lt;/sup&gt;</td>
<td>Parental substance abuse</td>
</tr>
</tbody>
</table>

**Study protocols.** Each participant completed an informed consent form prior to the initial interview (Appendix C). During that time participants were encouraged to ask questions regarding the study or raise concerns. They were again informed of their right to discontinue
participation in the study at any time. This seemed to alleviate some fears. Participants mostly expressed concern about relaying embarrassing information pertaining to their experiences. They feared being judged for their decisions. They were assured that the purpose of the interview was not to pass judgment, but to seek understanding of their experiences. This clearly illustrates the reality that many vulnerable populations distrust the research process (Few, Stephens, & Rouse-Arnett, 2003) as well as individuals who they view as being part of “the system.” Thus, it was necessary to remove those barriers and develop a trusting relationship that was respectful of participants.

In an effort to help put participants more at ease, the structure of the interviews took on more of a conversational approach (Few, Stephens, & Rouse-Arnett, 2003). Though limited, I shared personal information about myself when requested. This appeared to place participants more at ease as I became more human and less impersonal in the role as researcher. As such, I was careful to set boundaries, so that the lines between my role as researcher were not blurred with perceived friendship or my training as a counselor (Few, Stephens, & Rouse-Arnett, 2003). For the most part, the boundaries were clear, but at times I struggled with my desire to help. It was a difficult balance because as the relationships began to take on more trusting forms, many of the participants saw me as someone who could help financially and emotionally. Thus, it was necessary to draw a delicate line; one that was clear, but did not harm the already fragile connection. I tried to be helpful without becoming enmeshed. For the most part, this was well received, and participants shared their appreciation in being able to share and receive guidance on personal matters (e.g., relationships, medical issues, sexuality, conflict) without judgment.

Interviews. To obtain participant’s perspectives, in-depth interviews were conducted with each participant. Interviews were semi-structured, in that they did not follow rigid outlines
Open-ended questions were used to encourage participants to share their experience beginning with their memories of childhood. This method was chosen because open-ended questions tend to draw out more information from the participants. In addition, participants were more comfortable engaging in an informal conversation about their experiences. These conversations often slowly unfolded in wonderful and ebullient narrated stories (Clarke, 2006). The course of the interview often took on an unguided life of its own. As the researcher, I presented in a way that was free of bias and asked questions in a manner that was not misleading, hurtful, derogatory, or judgmental. This was especially important as their experiences sometimes invoked sharp senses of pain, shame, guilt, regret, anxiety, and anger.

I used a three-step interview process (Seidman, 2013) aimed at eliciting in-depth information in a structured manner. The first interview allows the participant to take the interviewer on a chronological journey of early experiences culminating with present experiences as they relate to the topic under study (Seidman, 2013). For example, in this study, participants were asked to share memories of their childhood experiences that resulted in their placement in foster care, as well as significant events that stand out, ending with their current status. This creates a context for the participant’s current trajectory. Through this process, participants were thoughtfully reflective, while sometimes displaying a somber and distant disposition, as if they were looking at a movie of their life play out. Invariably, they appeared to get lost between the walls of the memories and still present pain.

In the second interview, participants were asked to provide more detailed accounts of their current experiences. As such, participants of this study were asked to describe their lives currently (e.g., living situation, housing status, relationships, academic standing). This information allows the researcher to adequately situate the participant within the context of what
is being studied (Seidman, 2013). Lastly, in the final interview of the 3-step process, participants were asked to reflect on their past and future experiences and make meaningful connections regarding how their past has led them to their current place. When participants in this study were asked how their past experiences influenced their current realities, many expressed anger, resentment, and sadness. Unfortunately, they regarded their arduous beginnings as being deficient and detrimental. In fact, several participants articulated that if they had a sound foundation with supportive parents, they would be far more successful and emotionally content.

At the end of the first interview, a survey consisting of demographic questions (e.g., age, employment status, number of children, number of siblings, age of entry in foster care) was disseminated to each participant (Appendix D). One participant requested that the survey be read and explained to her. Although the participant was able to read, she was unsure of her ability to clearly comprehend what was being asked.

The interviews were tape recorded, and lasted for approximately 1½–2 hours each. Tape recordings allow the researcher to review the conversation at a later date as well as create a more relaxed environment by minimizing note taking (Whiting, 2008). At the request of three of the participants, interviews were held in their homes. The other five participants expressed the desire to meet outside of their homes for the sake of privacy or unstable living situations. All of the participants were allowed to choose a place of their liking (Clarke, 2006) in an effort to alleviate anxiety or uncertainties surrounding the process.
Positionality and Self-Reflexivity

When conducting a qualitative study, it is always important for the researcher to be aware of one’s positionality or, more simply put, where one stands in relation to the phenomenon that is being studied in particular and to the world in general. There are certain and deeply entangled beliefs that shape who we are. Once these ideals are formed and crystallized in our minds, it is extremely difficult to see outside of our perspective and consider ways different from our own.

Behar (1996) argues that it is sometimes difficult to depart from our subjective realities. She goes on to suggest that this is not something to be viewed negatively but embraced, as the vulnerable voice of the researcher can be instrumental in the telling of the story. However, the caveat is that the researcher must decide how and where to interject such voice without it being regarded as superfluous or intrusive. It must instead be meaningful and illuminating to that which is being conveyed (Behar, 1996). To this end, one must be clear as to what aspects of oneself moderate how the world is perceived.

In my current role as director of a human service organization, as well as a former supervisor of independent living and foster care programs, I had to be aware of and confront my positionality throughout the interviews. My prior experiences and knowledge of the child welfare system, processes, caseworker responsibilities, program operations, and student needs gave me a deep insider perspective. Further, I have very strong opinions and beliefs about the needs of these youth. This was not always helpful, as it led me to form opinions and desire to discuss solutions with the participants. On more than one occasion, I had the overwhelming desire to step in and solve their problems. I sometimes found their experiences gut wrenching, particularly when they elicited the participant’s raw emotions. At times, I felt stuck in between my role as a researcher and my training as a counselor. Finding a balance was not always easy, but definitely
necessary. Understanding that my involvement could potentially blur boundaries and confuse the research relationship, I attempted to keep my voice to a minimum, so as not to lose sight of the original purpose of the project, to give spaces for the voices of these individuals to be heard.

Behar (1996) argues that it is almost impossible to become so deeply involved in anthropological work without creating a space for one’s own voice to be heard. This allows readers not only to relate to the work but also to experience the human emotion of the author writing it, as the injection of self creates a more in-depth and interesting narrative. However, a significant problem arises when there is more of the author’s voice than the participant’s voice. To explicate this further, Behar (1996) references Clifford Geertz’s *Works and Lives* (1988) when he writes about author saturation versus author evacuation. Author saturation implies that there is too much of the author infused in the text, and the world of the participant is secondary. On the contrary, author evacuation suggests that there is a separation of the author from the text, rendering it somewhat bland and disjointed. Therefore, I had to maintain a careful balance between the two, as it was more important to lift the voices of the participants.

Use of self-reflexivity is fundamental to qualitative inquiry. The researcher brings her views, values, biases, and opinions to the research process. This is unavoidable; therefore, self-reflexivity requires constant evaluation of one’s positionality and the ways in which this position influences the research process (Berger, 2015). Through this process, there is a perpetual examination of the relationship between knowledge obtained as a result of the research process and the researcher’s active awareness of self. The overarching goal is to enhance credibility and authenticity of the data.

During the course of the interview process, I maintained a written journal and sometimes a voice-recorded journal that I used to notate my thoughts. I found this helpful; in many ways it
was even cathartic. Early into the project, I noticed that I felt emotionally drained after interviewing the participants. This was such an overwhelming feeling, that I would sometimes dread the follow up interviews. The content was heavy, sad, disappointing, hurtful, and angering, and I rode the roller coaster of emotions with the participants.

In almost all cases after the first interview, a more relaxed relationship developed between the participants and me. Of course, I was pleased as I worked diligently to ensure their confidence in the process. Much time was spent talking about things they enjoyed, things they were good at, things they were proud of, and things they hoped for themselves. In fact, many of them articulated their personal comfort with the interview process, by saying, “You are really easy to talk to,” or “I feel very comfortable with you…you were probably a good worker [foster care worker].” Another participant said, “No one has ever asked me anything about myself.” While I was appreciative of the compliments, I worried if my positionality would incline me to somehow blur boundaries, or if I would somehow be one more disappointment in their ever complicated lives. Journaling helped to put these often unharnessed emotions in a place, so as to not disturb or minimize the understanding of their individual experiences.

While journaling, I also realized that I needed to remove my assumptions about their lives. Often I felt sorrowful regarding many of the experiences they endured that ultimately led to their current life situations. Unwittingly, I applied my definition of success and thrust it upon them in judgment without their permission. I assumed that their current financial status, living arrangements, educational position, and lack of material goods meant that they were unhappy. When I exposed my own taken-for-granted assumptions into clear view, I began to actually listen without intent, answers, solutions, judgments, or premature understandings (Munhall, 2007).
Analysis of Narrative Data

Merriam (1998) asserted that the data analysis should coincide with data collection. As a result, interviews were transcribed within one week of their occurrence in most cases. I transcribed some of the interviews, particularly the ones where enunciation and verbal expression were confusing and unclear. A transcriptionist was also used to transcribe interviews. Prior to beginning, she was given a confidentiality agreement to sign (see Appendix E). This allowed for flexibility and quicker turnaround time of transcribed data.

During the initial coding phase, each audio-taped interview was reviewed and compared with its accompanying transcription to ensure accuracy. Subsequently, I read the transcribed interview while highlighting key points and phrases that were consistent throughout the interview. In addition, after each interview, I completed a contact summary form that identified the main issues/themes of the interview, follow-up questions for next interview, a description of home environment, salient points, as well as a description of participant physical and mental states (Appendix F). In fact, the interview transcripts were read multiple times in an effort to become completely familiar and engrossed in the data. The continuous review helped to identify and further refine emerging themes. Field notes were also reviewed and compared with transcriptions. All information pertaining to each participant was kept in individual folders on the computer. This process was repeated for each participant interview.

After the transcriptions were checked for accuracy and reviewed for preliminary themes, the next step included a more thorough coding process where broader themes emerged. Categories were developed based upon common phrases or experiences used across participant interviews (Munhall, 2007; Miles & Huberman, 1994). Subsequently, verbatim supporting the
themes were identified and color-coated according to their respective theme. Lastly, a secondary literature review was conducted to support the emerging themes.

**Measures to Ensure Safety, Anonymity, and Confidentiality**

Prior to beginning the study, I was granted approval from the Institutional Review Board (IRB) at Eastern Michigan University for the protection of human subjects (Appendix G). Upon IRB approval, five different organizations were contacted, informed of the study, and asked for their assistance in obtaining potential participants. Subsequently, a permission letter was sent to each organization’s chief executive officer requesting assistance with recruiting past students of their programs. Their signature was required to confirm agreement to participate (Appendix A). Out of the five organizations that were contacted, only three agreed to participate. For all participants selected to take part in the study, all measures to protect anonymity and confidentiality were strictly adhered to.

No identifying information was used on documents in an effort to protect participants’ confidentiality. Participant names only appeared on the consent forms they were given to confirm their agreement to participate in the study. These were maintained in a locked file cabinet, only accessible to the researcher. Further, all information kept on my computer concerning the participants was protected by a password. Participants were assigned a pseudonym that was used throughout the data analysis process as well as the dissertation. The pseudonyms were strategically chosen names that symbolize strength in their meaning. This was significant in that all of the participants demonstrated a powerfully quiet sense of determination and tenacity in spite of the many unanticipated obstacles and difficulties they encountered.

Interviews were conducted wherever participants felt most comfortable. At the time of the study, several were living with parents or roommates, and therefore, they felt uncomfortable
being interviewed in their places of residence. Allowing them to choose the location appeared to lessen stress as well as give them a sense of control in the process. As the researcher, I made great efforts to make sure they feel empowered and comfortable throughout the process by frequent check-ins and short discussions concerning their emotional states. This seemed to engender a sense of trust that made the experience more comfortable and authentic.

**Risk to Participants**

Though risks to participants were minimal, measures were taken to minimize any potential harm. Participants were young adults emancipated from the child welfare system who were asked to share their life stories including sensitive information such as childhood histories, reasons they entered foster care, potential victimization, use of illegal substances, and mental health status. Due to the sensitive nature of the information, there was a potential for discomfort due to recollection of traumatic events resulting in embarrassment, regret or sadness. To minimize risks, participants were told that they could discontinue the interview at any point. In addition, I paid close attention to body language such as heavy or quickened breathing, escalated tones, sweating, and stuttering to indicate level of discomfort. If these signs were present, I would ask the participant if they needed to take a break or if they wanted to end that particular discussion. At the end of the interview process, each participant was given a list of counselors throughout the city who offer free or insurance-based services if there was a need to follow up to address issues that emerged as a result of the interview process.

**Summary**

The purpose of this study was to identify and describe the life experiences of African American aged out young adults, as well as factors that contributed to their successes or failures. The phenomenological research approach utilizing life histories was well suited to provide a
space for their voices and experiences. The interviews uncovered rich detail and shared experiences, and the data analysis uncovered themes exemplifying their collective stories.
Chapter 4: Participant Profiles

Chapter 4 presents brief profiles of each of the eight participants in an effort to help the reader understand their experiences and backgrounds within the broader contexts of their life worlds.

Gavi: “I’m just here until I go back with my family”

Gavi is a 24-year-old Black male. He is short and petite in stature. He has a light brown complexion with curly, sandy brown hair. His hair is shaved close on the sides and cut into a neat Mohawk. His facial hair is also trimmed into a pristine goatee. Gavi is a handsome young man, in spite of the many blisters and bumps on his face, as well as several teeth that look as if they are decaying. He bears a striking resemblance to the acclaimed singer, musician, and songwriter, Prince. He is dressed in a gray hooded jogging suit with a red t-shirt underneath and camel colored Timberland boots. He is dressed warmly for the unseasonably hot spring day. Instantly, he is chatty and breaks the ice easily with his very casual, laid-back demeanor. At Gavi’s request, the interview takes place in an office at a nearby social service agency. He later shares that he homeless and residing with a gentleman he met while living at a local shelter. He is unsure of how long the man will allow him to stay and is unsure of where he will go if he is asked to leave.

Gavi entered the foster care system when he was 11 years old and experienced a multitude of residential and foster home placements while in care. His road to foster care is a confusing and convoluted account of fragmented memories, some of which he admits to blocking out. He tries hard to put the pieces of the puzzle together to make sense of his life story, something he has never done until this moment. He is eager to share his story stating, “More people should ask kids about their foster care experience.” Gavi feels that the foster care
experience could have potentially negative impacts on children that extend well into their adult years. He makes this summation though personal experience.

Gavi’s mother and father were completely inactive figures throughout his childhood. When he was eight years old, his mother became intimately involved with his father’s best friend, and they had a child together. When the couple decided to move in together, his mother took her three oldest children, who were by two different men, to her parents’ home, signed over guardianship, and left them. After several months of living with their grandparents, the children were given the option to return home with their mother. Gavi states that he does not know the details of the conversation that took place between his mother and grandparents. However, he expresses that his grandparents were getting up in age and taking care of three children was placing an obvious strain on their health and finances. Gavi’s sister chose to move back with their mother, but his brother, Michael, refused stating, “Let’s stay here with Grandma and Grandpa,” he recalls, “You know Ma don’t love us.” Since Gavi’s brother was more of a parental figure than his own mother, he followed his brother’s lead and remained with his grandparents. During this time, Gavi’s father was in prison. He has been in and out of jail for as long as Gavi could remember. Though he has spoken with his father, Gavi has never seen him in person. In fact, he shares that he talked with his father for the first time when he was 22 years old.

Over the next two years, Gavi and Michael remained with their grandparents who tried their best to rear them and provide for their needs. However, Michael was a teenager and in the absence of his mother and father was becoming more rebellious and enticed by criminality. He became involved with drugs, gangs, and other illegal activities. Gavi, on the other hand, never stopped yearning for his mother’s presence and love. On the few occasions that she visited, she
would make it clear that she was not interested in having him or his brother return home. In fact, Gavi shared, “She seemed annoyed by our presence.” He would express excitement about seeing her, but she would shrug them off. These subtle yet significant actions left Gavi feeling unloved and unwanted.

Gavi’s grandparents lived on a fixed income, which made it difficult for them to continue to care for their grandchildren. At one point, they could not handle the financial responsibility, so they moved in with Gavi’s mother, her boyfriend, and baby sister. By this time, Michael had become completely engulfed in the street life and no longer lived at home. He had also quit school.

Gavi, now 13 years old, went with his grandparents to live in his mother’s home. He was still somewhat hopeful that his return would be the beginning of the relationship he always desired. However, without provocation, his mother decided that he could not stay in the home. Consequently, she convinced his grandparents to take him to court and rescind their guardianship. Halfheartedly, they complied, as they were aging and could not sufficiently care for Gavi.

Once in foster care, Gavi experienced a multitude of residential and foster care placements. He admits that some of the placement changes were a result of his poor behaviors and refusal to follow directions. Gavi states that he may have been more willing to comply with his various foster parents if he believed they had a sincere care for his well-being. He felt that most of them were only caring for him out of obligation because they were being paid. He states that he also experienced physical and emotional abuse while in foster care. One foster parent would regularly choke him and also wake him up by throwing cold water on him. When Gavi
reported this to the foster care workers, they chose to believe the foster parents, rendering him powerless.

Gavi aged out of the system when he was 18 years old. At the time of his discharge, he was unemployed and had no stable housing. Thus, he moved in temporarily with his brother. Since aging out, he has been perpetually homeless, living with friends when possible. Gavi is extremely insightful on many levels, but he does not know where to begin to solve his own issues. He confesses that a major stumbling block to his mobility is his lack of high school diploma. Gavi dropped out when he was in the 12th grade. He simply lost motivation for school as a result of the adults around him failing to show an interest in his education. Since aging out of foster care, he has taken the High School Equivalency examination and failed it. Gavi admits that he is now fearful of trying again, as he has lost his self-confidence.

To obtain extra money, Gavi donates plasma on a weekly basis. He has also been to jail several times for minor incidents such as shoplifting and domestic violence. These infractions are on his criminal record and make acquiring employment problematic. He acknowledges that life is difficult without proper guidance and support. Gavi conjectures that he and his life would be much different if he had a mother and father who loved him. Further, he admits to having a marijuana habit, as he smokes daily and has been doing so since he was a teenager. He feels that the marijuana is instrumental in helping to keep him calm and deal with his anger and abandonment issues. In spite of his challenges, he expresses the desire to somehow rise above his circumstances and be successful.

**Carla: “I learned to protect myself”**

Carla is an attractive 25-year-old, medium-built Black female. She has smooth caramel colored skin with jet black hair and dark brown eyes. Her medium length hair is pulled into a
loose ponytail. With no make-up, she is an ordinary kind of pretty; closely resembling the well-known actress Regina King, a comparison that she says is often made. Her affect is reserved and cautious, but willing. She does not smile or laugh easily.

The interviews take place at Carla’s home in a small, impoverished urban area in southeastern Michigan. Carla resides with her husband, Miguel, and their two children: 2-year-old Nicole and 4-year-old Nicholas. They live in a townhouse complex for low-income residents. The complex appears well maintained, and the lawn is neatly manicured. Carla’s home is neat, but the furnishings are scarce. There are no signs of decorations, pictures, or family photos. The living room area holds only a couch and television. The kitchen is equally as bare, as there is only a small kitchen table situated in the corner along with a refrigerator and stove. The home looks as if she has just moved in instead of living there for the past six years. According to Carla, Miguel has been the anchor in a world of uncertainty, disappointment, distrust, and despair. She met him at a critical time in her life and says, “If it wasn’t for my husband and marrying him, I would probably be lost.”

The fourth oldest of eight children, Carla and her siblings entered foster care as a result of their mother and father’s extreme substance abuse issues. For as long as she can remember, her parents have been addicted to drugs. She discloses that they left them home alone for days without supervision or food. During those rare times when her parents were home, they were usually intoxicated and still not much use to their children. As a result, she and her brothers became quite adept at providing for themselves and the rest of their siblings. At early ages, they would frequent the neighborhood grocery store and “hustle for cash.” Waiting outside, patiently, for customers to exit the store with their groceries, Carla and her brothers would offer to carry
bags to their cars to earn money. On one particular occasion, they captured the attention of a customer who would forever change their life as they knew it.

Carla recalls the “cold winter day” when she and her brothers were at the store “hustling” as they always did, when a lady allowed them to carry groceries to her car and place them in her trunk. In turn, she gave them $50 each. Excited by their earnings, Carla and her brothers ran home to tell their parents and boast about the money they had just made. They would later find out that the generous stranger was a very well-known city council woman. Deeply concerned by their lack of coats and meager dress for the winter season, she followed the children home and returned the next day with the police. As a result of Carla’s parents’ obvious drug-induced state of mind as well as the completely poor condition of the home, the children were taken into custody. Years later, her parents lost their parental rights altogether.

This was the beginning of a terrifying journey that Carla experienced for years to come. In addition to being taken from their home abruptly, Carla and her siblings were split up and placed with several different foster parents. However, she spent the majority of her time in foster care placed with her younger sister. They were routinely abused mentally, verbally, and physically by the foster parent in the first home they resided in. Two years later they moved to their paternal aunt’s home, where Carla silently thought to herself, “Thank God, these are familiar people.” She assumed that she and her sister would find a sense of comfort and refuge with their paternal aunt, only to discover that she treated them far worse than the foster parent. Four years older than her sister, Carla felt a sense of inadequacy and helplessness as she was unable to protect her sister from the abuse they endured. Carla still finds this difficult to accept even though she knows intuitively that she was powerless against her abusers.
After years of changing foster home placements, Carla eventually aged out of the foster care system at 19 years old. Though she received little preparation and training from the many social workers charged with teaching her independent living skills, upon her departure, she was given $1,000 for a deposit on an apartment. She found the realities of independence harsh and unforgiving, as she was inadequately prepared to reside on her own. Her marginal academic journey seemed to further exacerbate matters. She credits her biracial Black- Hispanic husband as being her savior. Together they have confronted life’s many challenges but continue to struggle to make ends meet for their family.

Carla works part time as a home healthcare aide, and her husband is beginning a nursing program. They rely on food stamps and other government assistance to help meet their needs. Oftentimes, they are in complicated financial situations particularly when unexpected circumstances occur; as they have no savings they can pull from. Carla’s career interests vacillate continuously. She is currently taking psychology classes at a nearby community college but states that her real interests lie in nursing and counseling youth. She has had a hard time settling on a career as she is insecure about her academic ability due to her many challenges in school. Her troubles in school make her doubt herself, which places her in a paralyzed state when it comes to career planning. Carla articulates an understandable confusion about her future as she grapples with daily vicissitudes of life.

Bridget and Lenna: “We are really all we got.”

The formation of Bridget and Lenna’s friendship seems more like kismet than an accidental encounter bringing them together. They attended the same high school before knowing anything of each other’s background. Though they were not friends, they crossed paths in the school hall as they changed classes. Shortly after meeting in school, Bridget was placed in
foster care in the same home as Lenna. They report that they had an immediate connection that quickly erased the label given to them by the foster parent as “foster sisters.” They were sisters. Lenna and Bridget have been close friends since that fateful day 13 years ago. They have been through a lot together, and state that they have been a strong sense of support for each other through very trying times. They are more like family to each other than their actual siblings with whom they both have fragile relationships. Bridget is temporarily living in Lenna’s apartment as she looks for a place of her own. The two young women expressed the desire to be interviewed together.

**Bridget: “I was in a dark place and took out a lot of things on my daughter”**

Bridget is a 27-year-old Black female. Her demeanor is friendly and easy going. The interview is held at her friend’s apartment where she and her 6-year-old daughter, Heaven, are temporarily staying. She is wearing a pink floral pajama set, and her hair is pulled into a messy pony tail. She looks as if she has recently awakened. Bridget currently resides out of state in Section 8 housing and is unemployed. She is considering whether or not she should move back to Michigan where she feels that she will have more support.

Bridget was raised in North Carolina by her father, Kenneth. He moved her from Michigan to North Carolina when she was two years old because of her mother’s ongoing substance abuse issues. Her mother, Kay, remained in Michigan where she continues to live today. Bridget’s relationship with her mom is strained and devoid of the affection and emotional support that usually exist in mother-daughter relationships. According to Bridget, Kay is more like a “home girl instead of a mom.” This, in part, is due to Kay’s continual use of substances in addition to Bridget’s resentment towards her.
After moving to North Carolina, Bridget did not see her mother again for six years when she was eight years old. From approximately four or five years of age, Bridget remembers being severely abused by her father. She states that she “lived a life of hell” while residing with him. As she got older, Kenneth would hit, kick, punch, choke, and use a variety of items to beat her. Much of the unwarranted aggression was stimulated by his excessive substance use. He, like Bridget’s mother, was addicted to drugs. Bridget expressed that under these conditions, “I had to grow up fast to take care of myself.” He would leave her home alone for days on end. She is still amazed at how she took care of herself at such a young age. Bridget proudly states that this has made her a strong, self-reliant person.

As authorities became increasingly aware of Bridget’s abusive home environment, her father decided to transfer guardianship to her older sister, and subsequently sent her back to Michigan. She was approximately 14 years old at the time. Though the physical abuse had ended, Bridget found her sister to be overbearing and controlling. This was partially attributed to Bridget’s behaviors that were in complete contradiction to her sister and husband’s lifestyle. They were devout Christians. Left to raise herself while in her father’s care, Bridget had acquired several undesirable habits. She smoked marijuana, skipped school, used profanity, and was extremely promiscuous. Her sister decided that these behaviors were more than she and her husband could handle. Reluctantly, she made the difficult decision to rescind her guardianship rights, and Bridget was made a ward of the state of Michigan. This caused a major rift in their relationship that still exists today.

Bridget was 15 years old when she first entered the foster care system. She was placed in three different homes before aging out of the child welfare system. For Bridget, foster care was not a completely negative experience. In fact, she feels as if it came with many benefits. Bridget
states, “Being placed in foster care allowed me to get my childhood back.” She was able to enjoy
normal teenage activities without being abused by her father or unreasonably restricted by her
sister.

Bridget now has a 6-year-old daughter, Heaven. Heaven was present during the time of
the interview. She is energetic, inquisitive, and garrulous often interrupting the interview to ask
her mom questions. It is clear that she desires to hold her mother’s attention at any cost. The
interruptions slightly agitate Bridget. She soon turns on a children’s television show to help
occupy Heaven’s attention for the duration of the interview. She admits that raising her daughter,
as a single parent has been challenging although Heaven’s paternal grandparents are very active
in her life. At times, Heaven has spent extended periods of time with her grandparents when
Bridget was unable to care for her appropriately. Bridget speculates that this is the possible cause
of some of the attention seeking behaviors. Bridget shares that Heaven’s father is distant and
does not spend a lot of time with her. He became less active after paternity test results indicated
that he was not the biological father. In spite of the test outcome, Bridget maintains that the test
was incorrect although she admits to having unprotected sex with another man during the time
she was dating Heaven’s father.

Bridget has been physically and verbally abusive to Heaven on numerous occasions. She
recognizes that these abusive tendencies are residual effects of her own abusive upbringing.
Further, the stress of parenting is exacerbated by her mental health issues. A couple of years ago
she had a nervous breakdown. Bridget has been diagnosed with bi-polar disorder for which she
takes an assortment of medications. The medications have been instrumental in helping her
manage her mood swings. She is currently working to rebuild the relationship with her daughter
who approaches her mother with trepidation. Heaven has told her on many occasions, “Mommy,
please don’t hurt me,” and “I am very scared of you.” Bridget articulates an understanding of her daughter’s fears and feels tremendously guilty. She wants to be a better parent to her daughter than her parents were to her.

Since aging out of foster care, Bridget has traveled a difficult road with minimal guidance and support, leaning primarily on her friendship with Lenna. Her experiences en route to adulthood have been dotted with harsh encounters and unforgiving life lessons. Upon exit from the system, she was scared, unemployed, and unsure of how she would financially care for herself. Though she received support from her counselors, it was not enough to prepare her for true independence. In addition, she acknowledges that she was young and did not always heed the advice of adults. As such, she was convinced by her friend to travel to California with a company and other young people to sell magazines door to door. The work was hard and tiring, and they were expected to work long hours. The compensation was minimal, and they had to pay for their room and board out of whatever they made from magazine sales. Usually, this did not leave enough to live on. Bridget eventually quit and began stripping, as she was ensnared by the possibility of making fast money.

Bridget soon learned that the stripping underworld was dangerous, seedy, and belittling to women. She no longer had a name or face, as men objectified her for their sexual fantasies. Like most young women, she lost herself among the fast money, as it was enticing and addictive. For the first time, she was able to buy whatever she wanted. Unfortunately, along with the fast money came an even faster lifestyle. She went from stripping down to undergarments, to topless and ultimately naked. There was also persistent pressure from the club owner to work the VIP room where women would have sex with men who wanted to pay the extra money. The stripping life began to wear on Bridget, and she questioned the morality of her decision. She knew that this
was not the life that she wanted for herself, but she was uncertain how to get out. With no
support and strained family relationships, she knew that she only had herself to rely on. In these
moments of lucidity, she felt the most alone and helpless. In order to deal with this reality, she
began to drink and do drugs. Bridget immersed herself in the world of stripping for two years
before deciding that this was not what she wanted for her life. Consequently, she quit with
encouragement from her friend Lenna and moved back to Michigan. Today, she expresses a
great deal of shame for her past choices and hangs her head in embarrassment as she shares the
details of her experiences.

At the time of this interview, Bridget was unemployed and considering returning to
college. When she moved back to Michigan, she enrolled in a nearby university but dropped out
after a short period due to a death in her family. Bridget understands the connection between
education and obtaining viable employment, but she talks as if her goals are mere dreams not
things she can actually accomplish. She also has felony on her record for writing bad checks,
which presents its own set of obstacles and challenges. Although she has many self-articulated
barriers to success, she expresses a steadfast desire to move beyond her past to create a better
future for her daughter.

**Lenna: “I don’t think none of my foster parents were good to me”**

Lenna is a 28-year-old Black female. She has a very petite, thin frame. She is wearing
jeans and a faded gray t-shirt. Her hair is askew, and she apologizes for her appearance. Lenna’s
demeanor is reserved and guarded. Throughout the interviews, her eyes are somber, and her
answers are deeply contemplative. Whenever there is an amusing moment during the course of
the conversation, Lenna deliberately restrains her laughter, letting only an ever so slight smile
form. If her friend, Bridget laughs, she feels more comfortable to join in and follow her lead. It is clear that behind her stoic exterior is an immense amount of pain and sadness.

The interviews take place in a low-income apartment building where Lenna lives. The inside and outside of the building appear to be well maintained. Early in the day, the neighborhood is calm, and no one is outside, giving a deceptively peaceful presence. However, Lenna states that almost every night she and her 7-month-old daughter, Amina, lie on the floor until the multiple rounds of gunshots cease. She voices that the neighborhood is really unsafe, and she lives in a constant state of fear because people are routinely killed and robbed. Lenna states, “I can’t even take my daughter to the park without seeing a crackhead or prostitute.”

Lenna has lived in her apartment for a year and pays $75 per month for rent. She is waiting for her foster care worker to find her another place. Her individual unit is a small two-bedroom apartment. There is a queen-sized bed in her room. The bed had no sheets or blankets. There are clothes, socks, and other litter strewn about the bedroom on the bed and floor. Lenna notes that she has a difficult time maintaining her home adequately. There is no crib or baby bed for her infant daughter, Amina. The home is untidy and holds no decorations and very few pieces of furniture. The walls are painted a stark white. It is not at all inviting. There are three chairs and a high chair in the living room where the interview is conducted. There is also a small kitchen table in front of the living room window, one floor lamp, and a small end table in the corner of the room. All of the items look as if they are things that she has received through donations. There is also a noticeably large hole in the wall that Lenna quickly explains was put there by her daughter’s father, as my gaze explores that direction. The apartment has a dizzying smell of pork and grease.
Lenna is the second oldest child of seven. She entered the system at two years old when her mother took her and her siblings to an agency and told workers that she was unable to care for them because of her substance addiction. Almost immediately, Lenna’s mother lost her parental rights, and she never saw her mother again until she turned 18 years old. Once in the foster care system, Lenna and her siblings were split apart. It was simply too difficult to place a large sibling group together in one home. To Lenna’s dismay, some of her siblings were adopted over the course of the years. No family was ever interested in adopting Lenna. In fact, she was placed in so many different homes that it was difficult for her to articulate a definitive number of times she moved. Unlike, Bridget, she could not identify any redeeming qualities in the foster care system.

In reality, foster care was a complete nightmare for Lenna. She states that she was put down and/or beaten by every foster parent she was with. They would constantly call her names like “slow,” “stupid,” or “dummy.” Lenna admits that this has scarred her profoundly, as she has a hard time expressing herself, and is so insecure that she has great difficulty forming thoughts and talking in front of people whom she does not know. These scars run deep as she is almost paralyzed by her fears and feels insignificant in the presence of others. Throughout the interviews, it is a challenge to make her feel comfortable. At times, she becomes entangled in her thoughts and just stopped talking or gives one word answers. However, when this occurs, her friend, Bridget, is helpful with encouraging words and framing her thoughts, and she continues.

Academically, Lenna struggled throughout her time in school. She was placed in special education classes which had a detrimental impact on her self-esteem. Not only did she have to endure the ridicule of her foster parents, but she withstood the same abuse in school from her peers. Lenna states, “I could be so much further along if someone would have just cared enough
to help me.” However, none of her foster parents took an interest in her schooling. They did not even bother to help her with homework or go to her school to see how she was doing. She tried to learn on her own, but became frustrated. Lenna eventually gave up and dropped out in the 11th grade, and she still has not obtained her high school diploma.

After aging out of foster care, Lenna lived with an aunt before she left the state with Bridget to sell magazines and ultimately dance at a strip club. She was discharged with no financial support or stable housing. She, too, became involved with drugs and alcohol to make stripping more tolerable. She discloses that she began stripping and experimenting with drugs because of Bridget. She says, “A lot of things I got involved in was because of Bridget because she was like a sister to me, so I followed her a lot.” Although Lenna is a year older, she sees Bridget as a big sister in the relationship and willingly follows her lead. However, Lenna was the first to stop stripping and doing drugs. These are both activities of which she is terribly ashamed.

Lenna is currently unemployed and working to obtain her high school diploma. She lives on her monthly Supplemental Security Income (SSI) checks. She does not receive any help from her daughter’s father who is completely inactive in the child’s life. He is one of many men who have taken advantage of Lenna’s naiveté and blind pursuit of someone to love her. She admits to being gullible where men are concerned, as she hopes for the possibility of finding, in each of them, the love that has been absent in her life. This often places her in a precarious position, as she does not make good choices in men and as a result is disrespected and misused. This further deteriorates her already poor sense of self-worth.

**Rita: “Why didn’t God give me another mother?”**

Rita is a petite 24-year-old Black female. Her small physique and shy disposition make her appear much younger than her age. She is extremely soft spoken and rarely makes eye
contact for much of the interview. Rita requests that the interview take place in a neutral location though she resides alone in her own home. Thus, the interview was conducted at a social service agency. Rita has two children: 4-year-old Ivan and 1-year-old Isaac. She states that both of her sons have the same father. However, he only acknowledges parentage of the oldest son, Ivan. He is minimally active in both children’s lives. Rita states that he discontinued visits with the children once she ended their physical relationship.

Rita’s oldest son, Ivan, is currently residing with his paternal grandmother, where he has lived for the past year. She was granted temporary guardianship when he acquired a black eye after falling down a set of stairs while in Rita’s care. Rita states that Ivan’s grandmother does not believe Rita can adequately care for him, and always looks for ways to take him from Rita. Rita’s youngest son, Isaac, has also spent time in foster care, but he recently returned home with her after she satisfied court expectations. Rita wants Ivan returned to her also, but she feels powerless and insignificant in the face of the courts. She fears that the court will decide it is in Ivan’s best interest to remain with his grandmother because she is older and more financially secure. Without Ivan, Rita feels that her family is incomplete. She wears a shroud of guilt, as she feels that she has repeated her mother’s mistakes by allowing her children to be removed from her care.

At the age of three, Rita and five of her seven siblings entered foster care due to their mother’s ongoing substance abuse issues. Rita reports that the two oldest siblings never went into foster care, but she is unable to recall where they were during that period. She and her younger brother were placed together with relatives, and the rest of her siblings were split and placed among various other family members. Rita remained with her relatives until she ran away at the age of 16. She emphatically states that the home she grew up in was a “very bad
environment for children to be raised in.” Rita and the other children in the home were exposed to foul language, violent and abusive treatment, drugs, sex, and an assortment of criminal activities. In addition, she stated that they were routinely cursed at and whipped by members of the household who were all deeply involved in criminality and seemingly ill fit to care for children. At the age of nine, Rita was also sexually abused in the home, a terribly traumatic memory that she has tried hard to forget. Nevertheless, it plays out in almost every aspect of her life, especially in relationships where she typically finds herself a victim of verbal and physical abuse. Not only did Rita have to endure the horrific violation, but she was punished as if she was the cause of the abuse. This has marred her ability to trust and show vulnerability.

After 13 years of what Rita considered a “horrible situation,” she left home when conflict with her relatives reached a boiling point. She states that she became older and simply grew tired of the continual mistreatment. In addition, she acknowledges that living in such a toxic environment had taken a toll on her, and she was becoming increasingly aggressive and angry. These behaviors played out in the home and school environments, which resulted in her engaging in frequent altercations with teachers and peers. Rita states, “I use to always get kicked out of school, ‘cause I would fight a lot and had a bad attitude.” As a result, she missed a lot of school, which compromised her education. The missed school days combined with no adult academic support has resulted in significant learning challenges.

Rita’s first placement after leaving her relatives was with a lady whom she refers to as her “godmother.” She states that, initially, things were going well, as she found solace in her godmother’s home. She now had someone to spend time with her, listen to her, and make her feel safe. These were all things she so desperately wanted from her own mother. However, the situation quickly went from good to bad. According to Rita, they began to “get into it”
frequently. She noticed that her godmother would sometimes treat her differently in the presence of others. This left her feeling devalued and unimportant, a feeling that seemed to haunt her constantly.

Rita was placed in three different foster homes before she aged out of foster care. Upon discharge from the system, she found herself homeless, pregnant, and with nowhere to turn for support. Though she had tried to build a relationship with her biological mother over the years, it was difficult and saddled with resentment. Much to Rita’s dismay, her mother did not seem to have any remorse or concern for the pain and trauma she caused Rita and her siblings. Today, Rita continues to long for a mother-daughter relationship. However, her mother is emotionally unable and unwilling to provide her with what she desires. During the interview, Rita lowers her eyes and shares that she vehemently questions God as to why she was not given a different mother; a mother who would love and protect her. As a result, Rita admits that she continues to look for nurturing and love from other women. At times, this pursuit has led to extreme disappointment, as in the relationship with her godmother.

In addition, Rita discloses that she has often looked to men for support and stability which has led to abusive and demeaning encounters, as well as relationships that held sexual expectations in exchange for favors such as trips to work or the grocery store. She shares that this is a mistake that she continues to make. This is clearly illustrated as she shares that she is in a relationship with a 60-year-old man. Intuitively, she understands that her tendency to look for solace in her relationship is due in part to the longing she has for her father, a man she has never known. In fact, she states, “Every one of my brothers and sisters except for me knows their father.” This, again, makes Rita feel like she belongs to no one. When she has questioned her
mother about biological father, her mother has indicated that she does not know his last name or his whereabouts. Rita continues to dream of the day that she will find and him.

Rita was 18 years old when she was discharged from the foster care system. She admits that she was minimally prepared to reside on her own. She does not recall learning independent living skills or receiving help from any of the workers. She states, “The workers changed so often, I never really even got to know them.” She basically learned independence by happenstance. She says that she has made a lot of mistakes along the way, and she is currently trying to learn from her mistakes in an effort to make a better life for her children and her. She finds this difficult and frustrating as there are a lot of things about life that she simply does not know.

Today, Rita continues to struggle financially. Though she is able to acquire jobs, it is often difficult to keep them for various reasons. There are often transportation issues, babysitting complications, as well as problems carrying out the functions of the job. Rita states that her goal is to eventually become a nurse, but she has no tangible idea of how to achieve her dreams. She has a high school diploma, and she recently enrolled in college courses. She simply stopped attending after finding them too difficult. Now she is being charged for the credits, as she failed to drop the classes. She admits that some of her decisions are counterproductive to her goals. Rita feels that if she had the guidance of her mother, proper support, and a decent upbringing, her life would be monumentally different. Nevertheless, she courageously pushes forward to transcend her past and create a new reality without a blueprint or tangible guidance.

Karleen: “You can’t miss what you ain’t never really had”

Karleen is a 27-year-old Black female. She is of medium height, with a heavyset build. She has a relaxed demeanor and friendly smile that forms easily at the corners of her mouth. At
her request, we agree to meet at an office in a local social service agency within walking distance of where she is currently residing. Karleen is homeless, spending nights between shelters and friends’ homes. Her appearance is disheveled and unkempt, but her mood is upbeat and positive in spite of her circumstances. Difficult situations are a common occurrence in Karleen’s world. She has struggled for much of her existence.

Karleen and her brother, Kyle, were raised by their maternal grandmother and great grandmother in an impoverished city in southeast Michigan. They were two and four years old, respectively, when their mother, Carol, was sentenced to life in prison for armed robbery. Prior to incarceration, Carol was a heavy drug user, making crack, cocaine, and heroine her priority instead of her children. Her boyfriend at the time was also a substance user. Together, they formulated a plan to rob Carol’s boss. However, the seemingly simple plan to obtain quick money went awry for them both, leaving Karleen and her brother without the physical presence of a mother for the rest of their lives.

Karleen entered foster care as a result of the conditions under which she and her family lived. Their home was squalid, unsafe, and uninhabitable. There was a large hole in their roof that left the house open and vulnerable to the elements. Karleen recalls, “I hated the smell of the house after it rained.” In the winter time, Karleen reported, “We had to burn charcoal just to keep our house warm.” She presumes that she and her brother went to school and/or church one too many times with their clothes smelling of charcoal, and someone called child protective services (CPS) on their family. Once the state of Michigan became aware of the condition of the home, the children were immediately removed. Karleen and Kyle were approximately 10 and 12 years old at the time of their removal. Karleen indicates that to this day she does not know who contacted CPS.
At the initial placement in foster care, Karleen and Kyle were placed in the same foster home. Having her brother with her in an unfamiliar environment gave Karleen a sense of peace as her brother was her protector. However, his exceedingly difficult behaviors and bed wetting tendencies pushed the foster parent beyond her limit, so she requested his removal. He was, subsequently, placed in a residential facility, and just like that, they were split apart. Karleen was moved twice before she reached her third and final foster home with Ms. Rose. While in these earlier foster care placements, Karleen states that she was never physically abused. However, she was emotionally abused as the foster parents would frequently call her “chubby” or “fat.” They would also taunt her by saying demeaning things like “You are gonna end up like your mother.” Though these things were hurtful, she garnered strength by learning to laugh to hide her pain. This has become a wall of protection that she chooses to raise or lower throughout our interview.

However, it was in Ms. Rose’s home that Karleen remained the longest and ultimately aged out of the foster care system at 21 years old. In fact, she was so integrated in the foster family that she stayed with Ms. Rose several years after she was terminated from the system. Shortly, thereafter, Ms. Rose died from cancer. This foster parent was different from the others, as she taught Karleen valuable independent and life skills, and more importantly she made Karleen feel like family. Even extended family members and friends embraced her.

Today, Karleen is figuring out life on her own, as she has no viable support system. Her grandmothers and foster parent, Ms. Rose, are all deceased. Her mother remains incarcerated, and all of her relatives, including her brother, reside in California. The only person that lives near her is her biological father with whom she has a very distant, bordering on non-existent relationship. When asked about the relationship with her father, her face contorts in disgust, and she says, “I’m not even sure he is my father.” She questions his paternity, as he has never been
much of a father to her, which is extremely disheartening. However, she expresses the impact of his absence in a cavalier manner.

For Karleen, independence has been difficult, lonely, and unpredictable. Her faith in God and resolute confidence in herself propels her through the most trying of times. Most times, she copes with her reality by smoking marijuana, which she discloses is a daily habit. She says, “Weed helps me focus.” Towards the end of the interviews, she eventually recognizes and articulates the connection between her perpetual substance use and her deep feelings of loneliness and disappointment. She continues to try to stabilize her life, but acknowledges that it is difficult without support and guidance. Many things she is learning through trial and error, drawing from lessons she learned from her grandparents, social workers, and Ms. Rose. Karleen understands the importance of working, but she has a sporadic work history as she has jumped from job to job. She states that she often has no problem getting a menial job because of her high school diploma. Karleen admits to desiring more challenging work opportunities, but understands the need to acquire additional schooling. At this time, Karleen has no plans for enrolling in college. She expresses that school was often hard for her, and she worked hard to graduate with minimal academic support. Karleen is currently unemployed, but works temporary jobs whenever she is called. The lack of employment and stable living situation has made it difficult for her to gain solid footing. Nevertheless, she lifts her head high and approaches each obstacle with an admirable sense of determination.

Gabriele: “I think my mind just blocks out certain things”

Gabriele is a petite, 25-year-old Black woman, with a huge braces-filled smile. At our first interview, she greets me warmly as though we are life-long friends, as she extends her long thin fingers to shake my hand. She is dressed casually neat in faded Levi jeans, ripped at each
knee, and a gray t-shirt with pink lettering. Her straight black hair is neatly coiffed in a shoulder length bob. Her voice and laugh are high pitched making her sound more like an innocent teenage girl, belying her depth of life experiences and the fact that she is the mother of a 4-year-old son, Robbie.

The interview is held in a medium sized office in a social service agency. The office is neatly maintained, holding an office desk in the middle of the room. A round table with two chairs sits off to the side. Gabriele immediately picks a seat at the table. The office is outfitted with a variety of books and a stuffed animal that immediately catches Robbie’s attention. Gabriele apologizes for bringing her chatty son to the interview, stating that she did not have anyone to babysit him. Robbie is light complexioned with wavy sandy brown hair that he wears in long twists. He is neatly dressed in an orange and blue short outfit with brown sandals. He is extremely articulate. During the interview, Gabriele attempts to occupy his attention with cartoons on her phone. For the most part, Robbie sits quietly until the cartoons end, at which time he interrupts and requests that she find another to play. She is patient and engaged with him.

Gabriele parents Robbie without any help from his father. She admits that this relationship was borne out of the naïveté and the innocence of “young puppy love.” In the infancy stages of the relationship, Gabriele remembers that they were the best of friends. At some point, the relationship changed and became volatile, a reality that Gabriele is unwilling to discuss, especially since her son is in earshot of the conversation. She is only willing to share that she currently has a restraining order against her son’s father.

The interview is held in an office at a local service agency at Gabriele’s request, as she is adamant that she does not want to meet at the home she shares with her mother and sister. She is
worried about the sensitive nature of the potential information she would share and thus feels more comfortable outside of the home in a neutral location.

Gabriele comes from a family of five children: three boys and two girls. She is the second oldest. Her brother, Charles, two years her senior, is the oldest and the sibling with whom she has the closest relationship. She states that they “see eye to eye on almost everything.” Gabriele and Charles’ close bond can be attributed to their closeness in age, as well as their shared experiences in foster care.

On the other hand, Gabriele admits to having a difficult if not tenuous relationship with her 21-year-old sister, Alexis, who currently lives in the home with her and her mother. She feels that her sister is dismissive of her position as the older sister, and says, “Like, she talk back to me and all type of stuff.” This pervasive disrespect has placed an even greater burden on an already complicated relationship. Insightfully articulate, she shares that the same thing that created an unbreakable bond between Gabriele and her brother has formed an almost irreparable divide with her sister. Alexis is the only child out of the five siblings who was not placed in the foster care system. Alexis’ father and his family were far more active in her life than Gabriele and Charles’ father who was incarcerated for a significant portion of their childhood.

Gabriele also has two younger brothers who were placed in foster care and later adopted by their foster mother. She has no relationship or contact with these siblings, a reality that Gabriele finds painful to discuss. Her eyes begin to slightly water at the mere mention of her younger brothers. Gabriele was placed in foster care at nine years old as a result of her mother’s substance abuse issues. Prior to that time, she recounts her childhood as “good” and “filled with love.” In fact, neither she nor her brother, Charles, were aware of their mother’s drug addiction
until they were removed from the home and placed with their relatives who would frequently belittle their mother by referring to her with derogatory names.

This was the beginning of numerous placement changes between relatives and licensed foster parents that Gabriele experienced over the next 10 years until aging out of the foster care system at 19. Each placement held its own reservoir of memories leaving an indelible print upon Gabriele’s landscape of life. For the most part, Gabriele recalls feeling loved and well cared for. She had very few negative experiences while in foster care. This was in part due to her tendency to hold her foster care workers accountable for ensuring that she and her brother resided in safe environments. When they were uncomfortable in a home, she demanded to be removed as well as refused to return to the home.

Gabriele’s last foster care placement before she went away to college was with Ms. Daisy. Ms. Daisy was a gentle but stern woman who had a soft spot for teenage girls. She was unmoved by the various problems they presented. She took them in with the intent to shower them with love and teach them how to be ladies. Gabriele remained in the home until she went off to a four-year university where she stayed a year before losing her scholarship as a result of her poor grades.

At the time of the interview, Gabriele had just obtained a full-time job with a nursing home. In fact, she was still in the training phase. Most of these jobs often fail to pay enough for her to adequately care for herself and her son. Gabriele understands that she must complete her bachelor’s degree to potentially elevate her income level. Since leaving the university she was attending before aging out of foster care, Gabriele has taken various college courses sporadically. She states that the demands of raising her son coupled with trying to provide for him financially
make it difficult for her to focus on her studies. However, she states that she will remain committed to the completion of her degree regardless of how long it takes.

When discussing the culminating impact of her time in foster care, she is quick to identify the love she felt from the foster parents, and credits them for her success. She states that they taught her how to be a young lady, as well as other significant independent living skills. The negative aspects of her experience seem to have been suppressed, leaving them irretrievable pieces of information deep in the recesses of her mind.

**Valerie: “You are supposed to treat those kids like you would want to be treated”**

Valerie is a 24-year-old Black female with shoulder length, sandy brown hair. She has a soft, pretty face and wide smile. Her physique is voluptuous and accentuated by her form-fitting black tank top and leggings. Valerie shares that she has been shapely since she was a pre-teen. Of course, this came with challenges, as her figure often brought uncomfortable attention from boys and men. She admits that, today, she is much more comfortable with her body image than she was as a teen. She is bright, articulate, and self-assured. She speaks openly in thoughtful reflection about her foster care and life experiences. At Valerie’s request, the interview took place in a room at a social service agency near her home. The room was cozy and inviting. It looked as if it was used as a playroom or visitation room. It was fully furnished with a brown leather couch, two matching leather chairs, and an ottoman. In addition, there were shelves filled with coloring books, crayons, and toys.

Valerie’s has a four-year-old son, Jon. Though she is not in a relationship with Jon’s father, he is financially supportive and active in his son’s life. Valerie shares that she and Jon’s father discontinued their relationship after she was recurrently physically and verbally abused by him. Oftentimes, the abuse would occur in Jon’s presence, and she was becoming more and more
concerned about the effects it would have on him. Like most things, Valerie minimizes the abuse she sustained while dating her son’s father.

Abuse is not unusual for Valerie, as her mother was an alcoholic for her entire childhood. This resulted in a sometimes chaotic and unpredictable home environment. She states that her mother often became intoxicated and called her names like “slut and ho.” Her shapely build along with normal teenage insecurities made her even more sensitive to her mother’s verbal tirades. Unsurprisingly, this formed a hedge of resentment that Valerie works to move beyond today.

Valerie’s biological father was never present or active in her life. She is the only child between her mother and father. However, he has three other children who are all older than Valerie. She has seen her father sporadically and has never expressed an interest in forming a relationship with him. Since Valerie could remember, her stepfather has been more of a father to her than her biological father. He has been present for much of her childhood and adult life. In fact, he was the stabilizing force when things would become out of control between Valerie and her mother. Valerie continues to have a close relationship with her stepfather although he and her mother discontinued their relationship over nine years ago.

Valerie entered the foster care system at the age of 15. She identifies the entire incident as “one big miscommunication.” Valerie called the police after she noticed that her mother’s new boyfriend had stolen her money, jewelry, and TV. This escalated to a verbal conflict between her and her mother. When the police arrived at the home, Valerie’s mother was drunk, loud, and belligerent. After the police were unsuccessful at calming Valerie’s mother down, they removed Valerie from the home and instructed her mother to pick her up once she was sober. Valerie stated that she never came to pick her up. When asked why she thought her mother never came,
she cries and shrugs her shoulders. Consequently, the police contacted her grandparents to see if they would allow Valerie to remain with them temporarily. Her grandfather answered the phone, and indicated that she could not come to their home. This was puzzling to her, as she was the only grandchild, and she had a close relationship with her grandparents. They later found out that he had Alzheimer’s, which was the basis for his odd response.

As a result, Valerie was placed in a residential facility where she waited for a month until she was placed in her first foster home. While describing her time in residential placement, she is extremely emotional and states that “It was one of the worst times of my life.” Although the facility housed delinquent youth as well as those who were awaiting placement in a foster home, Valerie states that they were all treated as criminals. They were denied a lot of basic rights, which she questioned fervently throughout her stay. Valerie states that she has always “spoken up for herself,” regardless of the circumstances.

Valerie was placed in three foster homes before aging out of the foster care system at 19 years old. She states that the first two homes were “terrible.” Though Valerie was not physically abused in either place, she was denied food, called names, and repeatedly ridiculed about her weight. At the suggestion of her foster care worker, when Valerie wanted to move, she decisively demonstrated insolent and disruptive behaviors. Without fail, the foster parent requested her removal, and she was moved to the next home.

It was the third and final foster home where Valerie felt most comfortable. She formed a close attachment to the foster parent the first day she met her. Valerie stated that this foster parent was tremendously different from the other two. She treated Valerie and the other children in the home more like “her own children than foster kids.” In turn, Valerie was extremely protective of her. If any of the other girls in the home were disrespectful, Valerie was quick to
put them in their place. Valerie remained in this home until she went away to college. Sadly, this foster parent died several years ago. Nevertheless, Valerie smiles fondly about the memories and experiences she shared with the foster parent.

Upon termination from the foster care system, Valerie continued to have the financial support and guidance of her mother, stepfather, foster parent, and grandparents. Her mother has often used money to make up for her lack of parenting. Since being out of the home, her relationship with her mother has improved, and her mother has stopped drinking as a result of health issues. Unlike many of the youth in this study, Valerie was able to rely on her mother for financial support after leaving foster care in spite of their earlier challenges. She also continued to have the support of her stepfather and grandparents. Therefore, she states that she did not fear independence, as she had enough guidance, support, and personal fortitude to be successful. Though she was placed in an independent living program, she did not receive any training or help from her foster care worker. Valerie admits that she has bumped her head along the way, as she did not always listen to the advice that was given to her. As a result, she flunked out of her first year of college.

Currently, Valerie is in the process of relocating to another state. She feels that moving will provide greater employment and academic opportunities for her and her son. She wants to be a teacher and plans to resume her college education once she is stable in her new place. She has a significant amount of credits towards her bachelor’s degree and speculates that once she reenrolls, she only has about a year of school before she graduates. For Valerie, the future is filled with hope and possibility. She is optimistic that the distance will continue to improve her relationship with her mother. Though her mother has stopped drinking, the relationship
continuous to be strained and tenuous, but Valerie states that she loves and appreciates all that her mother has done for her in spite of the drinking.
Chapter 5: Thematic Analysis Part One

In this chapter the participants’ narratives are presented and organized based on thematic clusters beginning with their childhood, entry in the foster care system, and ultimately their transition to adulthood. The key themes discussed include: child maltreatment, unresolved trauma, sense of belonging, and lack of preparation for adulthood.

Child Maltreatment: Looking for Love, Blinded by Pain

Child maltreatment is a critical social phenomenon that impacts a significant amount of children each year. According to the U.S. Department of Health and Human Services (2015) in 2013, there were 396,000 substantiated cases of maltreatment across the United States. This number has continued to increase over the past several years. These children experience unthinkable acts of physical, sexual, emotional abuse and/or neglect at the hands of their parents or primary caregivers (Trickett, Negriff, Ji, & Peckins, 2011). The consequences of abuse are incalculable as many individuals suffer long lasting effects well into their adult years that compromise their overall well-being (Trickett et al., 2011). As a result, research emphasizing the complex array of emotional, physical, and mental health challenges these youth present is plentiful (Brown, Courtney, McMillan, 2015; Kerman, Wildfire & Barth, 2002).

This is clearly expressed in the voices of each of the study participants, as they have all been victims of some form of maltreatment resulting in their placement in foster care. Their stories eloquently articulate the uniqueness of their experiences and the many ways in which they have shaped their lives.

Abandonment by parents. The forced or unanticipated separation from parents or primary caregivers during a critical time in a child’s development proves to be disadvantageous on multiple levels. The individual often has to stumble through life’s obstacles without essential
guidance, love, and support (Granot, 2005). The consequences of this absence are astounding. Tyrka, Wier, Price, Ross, and Carpenter (2008) conducted a study on the impact of childhood parental loss and separation in adults. Their findings indicated that these experiences increase the potential of anxiety and depressive disorders in these individuals. This further undergirds the assertion that abandonment experienced in childhood is often disruptive to the individual’s adult life course.

Of the eight participants, two were deserted by their biological mothers due to extreme battles with substance use when they were merely toddlers. Lenna—who was abandoned at two years old—recalls the particularly traumatizing day: “All I can remember is that my mom and step dad took me and my brothers and sisters to an agency that helps families and just left us there.” Not old enough to fully understand the circumstances encompassing that memorable event, Lenna remembers clearly being “scared and confused.”

Lenna’s mother’s disappearance immediately catapulted her into an unfamiliar world with strange smiling faces; ones that she struggled to make sense. To make matters worse, her seven siblings were placed in different homes. Consequently, Lenna had a troublesome time adjusting to her new reality. She missed her older sister who was more of a mother figure to her and her siblings while their mother was often in a drug induced state. Lenna shares, “I would always follow my older sister around ‘cause she was like a mama to me.” As a result of her mother’s unending struggle with substance use, Lenna would not see her again until she was almost an adult. In addition, she would only visit with her siblings sporadically, and they eventually grew apart. Although this was over 20 years ago, it is apparent from Lenna’s silent tears during the retelling of the experience that the emotions are still very raw and agonizing.
Rita who entered foster care at age 3, has no recollection of the events that culminated in her need to be removed from her home. She simply remembers that she was sent to live with relatives where she remained until she ran away at 16 years old. She later found out from her siblings that her mother, Alice, was a “drug addict.” Out of all eight participants, Rita and Lenna spent the longest time in the foster care system. They were placed in foster care at 3 and 4 years old, respectively, and they exited at 20 years old.

Unsurprisingly, this has strained the relationships between the young women and their mothers, as they are virtually strangers to each other. Rita, especially, finds it difficult to get along with her mother. She is a constant disappointment and fails to live up to Rita’s idealized expectations. Alice, Rita’s mother, treats Rita in a casually indifferent way that makes her appear more like an acquaintance than a parent. Rita is silently resentful, as she feels that her mother should be remorseful about since abandoned her children for a relentless pursuit of drugs. However, Alice does not accept any responsibility for the past. When Rita has tried to share her feelings along with the details of the horror she experienced while in foster care, Alice quickly stated, “God forgave me, and ya'll older, so move on…the past is in the past.” On another occasion, Alice has crudely instructed Rita to “get over it” without offering any further explanation or giving any thought as to the how her daughter could possibly erase over 16 years of pain and disappointment. Abrasive and insensitive comments such as these have further eroded the relationship between Rita and her mother.

Gavi, the only male participant in the group, has a somewhat different story. He was abandoned by his mother, Crystal, when he was about six or seven years old. Upon her departure, he was not immediately placed in foster care, as she left him and his siblings with her parents when she moved in with her then boyfriend. The ties between Crystal and her partner’s
relationship were complicated. Gavi explains, “So, my mother and father split up… I guess she wanted to get rid of us because she got with my dad’s best friend, became pregnant with my youngest sister and moved in with him.” Crystal’s boyfriend made it clear that he had no intention of taking care of another man’s children. Thus, she nonchalantly walked away from her young children and relinquished care of them to her aging parents. During this time Gavi’s father was incarcerated and had no relationship with his children, leaving Gavi and his siblings to figure out life without a father figure.

From that point, Crystal disengaged from her three older children and began a new life without them. Though she visited sporadically, her demeanor was always aloof and emotionally disconnected. More salient, she never expressed the desire to have her children return home. Regardless of her distant behavior, Gavi adored his mother and craved her love and attention. Whenever she appeared at her parents’ home for one of her impromptu visits, Gavi attached his slim body to her frame and would “hold on to her for dear life” until she peeled him off of her. He would try to make her laugh, while nervously talking non-stop, like she was a stranger with whom he was trying to make a lasting impression. Innocently, he believed that if his mother just got to know him, she would see that he was a “good kid” and would miraculously recognize how much she loved him. Dolefully, Gavi states, “I just kept hoping that she would see that I wouldn’t be a problem for her and that leaving me was a mistake.” However, his mother never came to that realization. In fact, when it was time to end the visit, she would walk out of the door in a cavalier manner without so much as an affirming nod at Gavi’s sincere, yet perfunctory question of, “Ma, are you coming back?”

As Gavi got older, he arrived at the harsh realization that his mother simply did not want him and his older siblings. Therefore, he worked at accepting his uncontrollable fate of living
with his grandparents whom he loved dearly, but knew that they could not fill the hole left by his missing parents. For one, they were older and lacked the necessary physical energy to properly care for their grandchildren. Further they lived in an “elderly home,” and it was not conducive for growing young children in need of space and activities. As a result of these restrictions and the children’s many frustrations, Gavi and his siblings began exhibiting defiant behaviors that made it even more challenging for his grandparents. His older brother, especially, began to gravitate towards negative peers and activities. He states, “My grandparents were trying really hard to raise three kids at the age of like 50 plus, trying to deal with our dysfunction because we had a lot of problems and anger growing up that young without our parents.” Gavi continues:

We wanted our mother. We wanted our father. We wanted them to be together. If not, we want one of them . . . you know what I am saying? We wanted that, that lifestyle as being kids, coming home, and mom and dad is there. We never had that. So, it was hard for my grandparents because we was getting older and acting out our emotions and frustrations.

In spite of Gavi and his siblings’ aging and ensuing behavioral challenges, his grandparents remained steadfast in their commitment to care for them. As time continued to pass, his older brother became increasingly involved with gangs and criminality and left the home to live with friends. During this time, Gavi’s sister moved back with their mother. Gavi, approximately 11 years old, remained in the home with his grandparents, but his behavior was becoming unmanageable under the weight of his anger issues and the example set by his older brother.

Eventually, Gavi’s grandparents lost their home due to financial issues. The only option they had was to move in with Crystal. Once in the home, the tension between Gavi and his mother was obvious. Over time, her visits had become more and more infrequent and eventually
halting altogether. Thus, in Crystal’s absence, Gavi developed a profound dislike and disrespect for her. Accordingly, he began referring to her as “Crystal” instead of “Mom,” something that she viewed as outwardly disrespectful and defiant. Whenever she would correct Gavi, he would quickly reply, “When I call you Mom, you don’t respond… you know you don’t care.” Without much consideration, she washed her hands of her son, told her parents he could not remain in her home and took him to court and requested that he be removed from the home, stating his behavior was out of control and she could no longer handle him. At this time, he was about 12 years old, he recalls:

I remember when we had gotten a cab. It was me, my grandma, my granddad, and my mom. And … we went down to Juvenile… I think it was Juvenile court the first time. I remember we was in a cab and then she [my mom] was trying to geek me up to like think that this is for the better. She said, “It will be good for you because you'll have a chance to have a family or something like that.” Some crazy shit. So, I am sitting in the car. I am just like shaking my head like okay. I’m thinking, I can't do shit.

This was the beginning of Gavi’s placement in the foster care system where he would experience multiple failed placements until he aged out at 21 years old. Though he was in foster care, he was court ordered to participate in regular visits with his mother with the intent to return home. However, no matter how hard he tried to please her, she seemed to be emotionally disconnected from her son, and she continuously cast blame upon him in the eyes of the court as the reason he could not return home. When it was time to attend court, she would always report, that “he fights a lot and his behavior is out of control.” Subsequently, when the judge asked why he was giving his mom such a hard time, Gavi emphatically replied, “I don’t have a mom or a dad and shit just ain’t right.” Their issues seemed irresolvable, and again, Gavi was returned to
the foster home to “work on his behavior.” On one particular occasion, Gavi shares that he was eager to go home to visit his mother so that she could see he was different and his attitude had improved. He says,

So we [the worker and Gavi] pull up to the house. As we pull up, I see my mom and my sisters coming out of the house, so I rolled down the window in excitement. I started yelling, “Mom, hey I’m home.” And she had this like most irritated, just like distaste in her mouth type of look. Like she did not want to see me at all. Like I was not supposed to be there, you know.

These repetitive acts of emotional rejection diminished his self-worth while at the same time eviscerating his dreams of ever forming a loving relationship with his mother. To this day, Gavi harbors a deep bitterness towards his mother resulting in more often than not adversarial and confrontational exchanges when they are in each other’s company.

The participants’ narratives reveal a common thread of resentment woven intricately between their sadness and disappointments, periodically awakened by childhood memories of desertion and fear. In all cases, they were abandoned during critical points in their developmental processes. Unanticipated detachment from primary caregivers places the child’s world and sense of stability into an immediate state of uncertainty (Tyrka et al., 2008).

Collins, Paris and Ward (2008) assert that secure attachments with parents are essential in promoting healthy identities in children as thwarting emotional and behavioral issues. Further, tightly meaningful connections with parents formed in childhood serve as a foundation for a supportive relationship with parents in adulthood. Still today, many participants in this study have tenuous relationships with their parents rooted in negative perceptions formed in childhood (Collins, Paris, & Ward, 2008).
In many cases, similar to several of the participants, children remain in foster care for a long period of time, unable to return home. While foster is often thought to be a better living situation for children in the face of maltreatment, the harm resulting from long-term placement in foster care is monumental. Throughout their time in care, these youth are likely to have experienced multiple placement moves and subsequent attachment disruptions that thwart necessary bonding with caregivers (Villodas, Litrownik, Newton, & Davis, 2016) and engender long-term emotional, physical, and mental health issues. Separation from siblings is also a common concern for children who are removed from their homes and the care of their parents. Though the articulated goal of the child welfare system is to maintain sibling relationships when children are placed in care, the reality is that it is often difficult to find placements to accommodate large sibling groups. Thus, separation of siblings is an unfortunately frequent occurrence (McCormick, 2010). Six out of the eight study participants were separated from their siblings as a result of placement in foster care. Further, youth who have been maltreated have a compromised self-worth along with an internalized poor self-concept that often increases the likelihood of involvement in abusive and/or exploitative relationships in their adult years (Gibb, 2002). Six of the eight participants shared their experiences with toxic and exploitative relationships with both men and women. In addition, three of the five participants are in same sex relationships.

**Abuse/neglect by foster parents.** Although foster care is considered an asylum for children who suffer abusive and/or neglectful situations while in the care of their parents or family caregivers (Lockwood, Friedman, & Christian, 2015), for other children it is a continuation of the physical, mental, and/or verbal abuse they endured while with their families (Euser, Alink, Tharner, van Ijzendoorn, & Bakermans-Kranenburg, 2014; Pecora et al., 2005). In
some cases, it is much more severe. One of the participants, Carla, and her younger sister were placed in a foster home that she classifies as “horrible,” stating that “no children should ever be placed in this home.” Retrospectively, Carla mentally returns to that moment when she and her sister were initially placed in the home. Looking forward to an environment different from her home, she was hopeful of a better situation. Carla felt assured when her new caregiver welcomed her and her sister with a nice and inviting demeanor. She states, “When we first met the lady, she would tuck us in at night telling us how sorry she was for what we was going through.”

However, the foster parent’s conciliatory façade quickly turned dark:

She was there for us for the whole first week. But the second week… we would wake up at 8 o’clock in the morning, and she would send us to the backyard… every day. We wouldn't eat or take baths regularly. I can remember taking showers and baths like every Sunday.

As if this was not insufferable enough, the foster parent frequently commanded her adoptive children to attack Carla and her sister as she watched eagerly like a spectator at a boxing match. Unexpectedly, the perverted foster parent would callously state, “Ya’ll fight.” The children who feared and longed for the approval of their adoptive mother complied with her directives. Not knowing what else to do, they unleashed their fury and pervasive feelings of powerlessness onto Carla and her sister. Carla stated, “It got to the point where they pulled my sister’s braids out…” They would beat us up like every single day.” The abuse became so intolerable for Carla and her sister that she would frequently retreat to the backyard of the foster home and “scream help really loud” hoping someone would hear her and rescue her from her miserable existence. They never did.
On many occasions, Carla stated that she tried to appeal for help to her foster care worker. Frequent changes in workers assigned to Carla’s case seemed to be a common practice that made it difficult for her sister and her to establish a trusting relationship. Constantly new faces left Carla feeling hopeless and scared. Nevertheless, she would inform the worker that that they were being “starved and tortured.” However, none of the workers investigated the claims, assuming that the children were being manipulative in an effort to be returned home. The worker simply responded, “We have no other homes to move you to.” After the foster parent realized that no one gave credence to the children’s accusations, she used their defenselessness to continue to intimidate and mistreat them until they were removed from the home a whole distressing year later.

Lenna has a similar story of abuse by foster parents. Placed in foster care at an early age, Lenna bounced from home to home never finding an adoptive family or even a stable living situation. Regardless of the home she was placed in, the story was always the same. They physically abused and demeaned her to no end. As she conjures up the memories of the many foster parents she encountered, Lenna appears disassociated, as if the little girl she is talking about is someone other than her younger self. Speaking just above a whisper, she says:

I kinda went from house to house. Nobody really wanted me. I think it was ‘cause I was slow. I was getting beat by all my foster parents and getting talked about by all my foster parents. Every one of em’ treated me bad and called me names.

As if the private humiliation that Lenna suffered was not horrible enough, her foster parents’ verbal shaming often extended beyond the four walls of the many loveless homes in which she resided. It seems as if they did not care at all about her feelings and derived some type of sick
satisfaction from her obvious vulnerability. Lenna shares a pivotal moment that, sadly, defined how she would later view her academic and cognitive ability:

One day I took some kinda test at school, and the scores came to the foster home. I forgot the name of the test. Anyway, my foster parent called and told her whole family I was slow ‘cause my scores were low. I cried about it for days.

The abuse has had a lasting impact on Lenna’s self-esteem and self-worth that she finds difficult to escape. She constantly puts herself down and questions the feasibility of her own thoughts. She admits that she has internalized the unabashedly articulated belief that she is “slow.” This has been a hindrance for most of her life, as she states, “I don’t know a lot of stuff that I should know.”

Sadly, each foster family that was charged with Lenna’s well-being in the absence of her family made her feel insignificant and invisible. Further, they never demonstrated an invested interest in her growth and development. This was especially prevalent in homes where the foster parents had their own children. There was a definite distinction in treatment between Lenna and their biological children. For instance, the foster parents would help their children with their homework, while watching Lenna struggle to complete her own. This had an immensely negative impact on Lenna’s academic achievement that continues to be substandard today. The residual effects of their poor treatment are evident as Lenna has to fight to find her voice and not shrink into the background throughout the interview.

Though Valerie and Karleen were not physically abused by their foster parents, they share similar stories of verbal and emotional abuse by the foster parents with whom they were placed. Most, but not all, of the cruelty was directed at their weight and physical appearance. Karleen who describes herself as always being a “big broad person” was routinely demeaned and
called “fatty,” “big,” and “fatso.” Initially, the names were hurtful, but she eventually learned to deal the treatment by erecting a metaphorical shield to intercept the continual blows to her self-esteem. In most cases, Karleen would make a joke of it. In fact, the verbal jousting became characteristic of their relationship. She states, “Instead of crying about it, I decided to laugh so she wouldn’t think she was hurting me.” Karleen further states, “She would call me fat, and I would call her skinny, and we would both laugh about it.” For Karleen, this was a way to gain a level of control over her circumstances while decreasing her sense of vulnerability.

Valerie who has always been extremely curvaceous noticed that her size and shape created controversy in the foster homes she placed, especially if there were male foster parents also residing in the home. Though, Valerie reported that none of her foster fathers ever attempted to touch her inappropriately, she expressed concern regarding the indecent looks she would sometimes get as a result of something she was wearing. Valerie stated, “I have this thing about older men looking at me…it just weirds me out.” As a result, she often felt uncomfortable in the home and mostly sequestered herself in her bedroom. She found to be a suitable way to minimize some of the contention in the home surrounding her clothing. Nevertheless, whenever Valerie emerged from her room, her foster mother accused of being “fast” or “loose” because her clothes were often too little to adequately conceal her maturing frame. Instead of utilizing the clothing stipend provided by the state to purchase clothes to accommodate Valerie’s quickly changing body, the foster parents ridiculed her and told her that she was “setting a bad example for the other children by wearing inappropriate things.” Always a child to express her opinion and stick up for herself, Valerie would regularly call the foster parent to task by stating, “Well maybe if you bought me some more clothes, we wouldn’t have this issue.”
The foster parents’ insensitive and uninviting dispositions discouraged Karleen and Valerie from developing meaningful relationships with their caregivers. Instead they chose to remain emotionally and physically on the outside of the family structure to decrease the potential of disappointment. When reflecting on these experiences, Karleen and Valerie admit that they minimized the foster parent’s actions and the effects it had on them. Both young women stated that it was not until they participated in this study that they discovered the significant impact these experiences had on their overall well-being. At the time, they learned to simply “live with it” because “things could have been worse.” Though Karleen and Valerie described the name calling as “hurtful” and “wrong,” they were reluctant to identify it as abuse.

Valerie’s placement in foster care was not marked by physical abuse, but she nonetheless characterizes the entire experience as “disturbing.” Prior to entering foster care, Valerie says she was “spoiled” and “not the typical foster child.” Her mother, college educated and gainfully employed, provided a comfortable lifestyle for Valerie. They lived in a “nice apartment” located in a middle class suburban neighborhood on the outskirts of Detroit. Throughout the interview, Valerie was careful to distinguish herself and mother from what she considers as the “typical” family whose child is placed in foster care. She explains:

What you hear about parents whose kids went to foster care is that the parents don’t care. They neglected their kids, left their kids at home, didn’t feed them, did drugs, exposed them to violence, stuff like that. My mom had a very well-paying job at IBM. I was in every activity you could think of. I was very well taken care of.

Unlike most children that enter foster care, Valerie came from an educated, middle class family environment. Although her mother’s substance use created a bevy of challenges, she was accustomed to a certain lifestyle that she was quick to be let known. This created on-going issues
when placed in foster homes as Valerie was not shy about articulating her expectations. Most time the foster homes were not outfitted with the same amenities she enjoyed at home (e.g., central, cable, internet).

Food was also an issue for Valerie, as many of the foster parents did not provide healthy or balanced meals, trading them in for cheap or junk food that took little to no preparation. Valerie found this infuriating, “You are supposed treat foster kids like they’re your own.” When discussing her overall foster care experience, Valerie quickly calls to mind the second home she was placed in. She states, “She was worst foster parent I have ever met.” Accustomed to eating when and whatever she wanted when residing with her mother, Valerie was appalled at the foster parent’s insistence that she eat “Boston Market” every day. To make matters worse, the foster parent would steal money that Valerie’s grandmother would send to the home:

My 16th birthday was coming up. So my grandmother sent me a couple of pieces of mail and she…my grandma’s pretty old school so she would write me a letter and put another piece of paper in it, put money in it. Wrap it up, put it in like a security envelope and send it. My grandma sent me probably about $700. Not all at once, just over time because I kept saying I wasn’t getting it. She [the foster parent] was taking my money, resealing the envelope with the letter and saying my grandmother wasn’t sending it.

Valerie continuously questioned how children could be forced to leave their homes and placed in environments that were far worse that where they resided.

Gavi, like several of the other participants had reprehensible experiences while placed in foster care. Some of his foster parents physically abused him; however, he indicated that the abuse was more emotional than physical. When asked about those experiences, Gavi was reluctant to elaborate, but says, “When I was in one home, I was choked.” Angrily, he continues,
“The workers knew, and they didn’t do shit!” Still remembering the pain and helplessness he felt in several foster homes, he immediately allows the anger to enter his space as he becomes silent before resuming the conversation.

Gavi believed that most of his foster parents had no real care and concern for his well-being and were only caring for him to receive a check from the state while he was in their home. As such, Gavi never became attached to any of his foster families and made a deliberate decision to always keep his emotions and expectations on the periphery to avoid hurt and disappointment. While his characteristically cool and aloof demeanor indicate that he was unmoved by the lack of bonded relationships, his crackling voice suggest otherwise. Truthfully, Gavi always wanted someone to belong to, but was fearful of being vulnerable to people he considered as strangers, no matter how nice some of them may have been. Gavi further illustrates this point stating, “None of my foster parents really took the time to know me…they only knew what I let them see.”

Extant literature regarding child abuse and its impact on the victim occurring prior to out-of-home care is in abundance (U.S. Department of Health and Human Services, 2015; Dubowitz, Kim, Black, Weisbart, Semiatin & Magder, 2011). Conversely, information pertaining to abuse that children sustain after they are placed in foster care is disconcertingly scarce. While maltreatment at the hands of out-of-home caregivers occurs at alarming rates, it does not seem to draw sufficient attention. This is dumbfounding as federal foster care legislation promulgated through the Adoption and Safe Families Act is deliberate in its emphasis on the importance of providing safe and stable environments for children (Phillips & Mann, 2013). Nevertheless, in many cases children are removed from their homes and placed in questionable environments sometimes far more insidious that the ones from which they were removed (Benedict, Zuravin,
Brandt, & Abbey, 1994). Havlicek and Courtney (2016) illustrated this point in their study of aging out foster youth. Their findings indicate that children experience maltreatment at high rates while in out-of-home care. Surprisingly, 46% of the participants reported that they were subjected to at least one form of abuse. Although this number may seem high, it may not, in fact, accurately represent the entire story, as many allegations of abuse go untold, unnoticed, or uninvestigated thereby muting the true numbers of youth who are abused in care.

Part and parcel to mitigating a child’s danger in foster care is the role of the worker assigned to the case. Their attention to the case is critical in attenuating safety risks to children placed in foster homes (DePanfilis & Scannapieco, 1994). In Carla’s case, the workers were disconnected from the conditions in the home and failed to peer below the surface. The worker’s uneven focus on perfunctory tasks left the children in an extremely vulnerable and unsafe living environment. This is not unusual, as many child welfare workers suffer from burnout as a result of the overwhelming work responsibilities associated with the role (Lizano & Barak, 2012). Therefore, an unfortunate reality in child welfare is the high degree of turnover among its field workers as a result of the extremely demanding and difficult nature of the job (Lizano & Barak, 2012).

Increased accountability, extremely difficult cases, insufficient recognition and inadequate resources merge together create predictive factors for staff turnover (Faller, Grabarek, Ortega, 2010). Ultimately, this compromises the continuity of care provided to families served by this system.

To further illustrate the complexity of abuse in out-of-home care, Morton (2015) asserts that foster children may have a distorted sense of maltreatment given the conditions and circumstances under which many have been placed prior to and after foster care, making it
difficult for them to identify inappropriate treatment. The effects of this often unwittingly penetrate their adult lives in many unwanted ways. This is especially prevalent for young women’s whose askew definition of mistreatment is often the catalyst for engagement in friendships and relationships that are always productive or in their best interest.

As children enter the child welfare system with an array of problems, it should be noted foster parents have a complex task ahead of them. Extreme behavioral challenges in many cases make it difficult to parent some of these children. Unfortunately, foster parents sometimes devise their parenting strategies around the child’s behaviors instead of his/her emotional needs, which compromises the relationship between the child and foster parent. Many foster parents often exchange the formation of relationships for the establishments of rules to govern and control the home environment. In the absence of relationship most of the rules seem arbitrary to the youth and are more often than not broken creating perpetual and conflict. Rautkis, Fusco, Cahalane, Bennett, and Reinhart (2011) asserted that high degree of policing youth characterized by inconsistent expectations make youth feel like outsiders. Yet, many foster parents seem reluctant to change their notions of parenting these children in search of more effective relationships.

Many children in foster care long for a caring and nurturing relationship especially in the absence of their parents, but they fear dismissal and rejection from their temporary caregivers (Storer et., 2014). Prior judgment and low expectations held by foster parents do very little to facilitate a connection with the child placed in their home. Therefore, the foster parent and child share the same space as strangers, void of the trust needed to establish a relationship that would be instrumental to the youth’s healthy development (Storer et al., 2014).

**Abuse/neglect by relatives.** Black children are disproportionately placed in kinship care when compared to other children in the foster care system (Harris & Skyles, 2008). These
numbers are consistent with their overall placement in foster care when considering children of other races. African American families have long provided refuge and support to family members in need. As such, temporary placement of Black children with extended family is not uncommon (Hill, 2004). Recognizing the disparity of Black children in the foster care system, legislators and child welfare professionals sought to decrease these numbers by placing youth with kinship care providers in an effort to stabilize placements and improve outcomes for these children. Given the excessive use of these placements, it seems necessary to assess the quality of care provided.

Very little research is conducted regarding abuse that children sustain while placed in kinship care. The predominate literature regarding the subject surrounds the notion that placement with kin has multiple long-term benefits for children who have been removed from their parents’ care as a result of abuse and/or neglect (Hegar & Rosenthal, 2009).

Consistent with literature that illuminates the frequent placement of Black children with kin, this was a reality for several participants in this study. After entering foster care, four of the eight participants were placed with relatives for varying periods before returning home or aging out of the child welfare system. In some cases, the relatives were more abusive and demeaning than the foster care placements. The participants often expected to be treated better by their relatives. Sadly, this was more of the exception than the rule.

When Carla and her sister were removed from their foster home, they thought they would finally be reunited with their parents and siblings. However, their parents continued to spiral downward in an abysmal state of substance use. Subsequently, Carla and her younger sister were placed with their paternal aunt, which they thought would be a better situation than their previous home. However, Carla shared that this was a continuation of the “torture” they previously
withstood. Carla stated, “When we moved with my auntie, it was worst. She was doing everything that the previous lady was doing. It wasn't no better.” Over time, the abuse worsened, and Carla turned her emotions inward and began to silently inflict harm upon herself. She states, “It was so horrible at my auntie’s that some nights I didn’t want to live no more...so I would just cut myself.”

Rita’s experience while placed with relatives was equally as deleterious. Although they were charged with providing her with a safe and suitable environment in the absence of her mother, the environment was anything but appropriate. It was dangerous, duplicitous, and completely detrimental to Rita’s upbringing. She was abused and mistreated regularly, oftentimes for things she did not fully understand. She never quite felt comfortable with her relatives and yearned to be with her mother. Whenever she voiced these feelings to them, consequences quickly followed. Rita asserts,

Sometimes, I’d be so scared and upset that I’d be like “I want my mama.” Then I'd get a whooping even harder for saying that I want my mama. And then she'd [my aunt] be like “If yo' mama wanted you, she would have you.” It was terrible.

Rita admits that this crude disregard of her feelings and emotional well-being had negative effects early on in her young life. She learned to keep her emotions to herself or even disregard them whether they were good or bad. The effects are clearly evident throughout the interview as she only periodically shows emotion, and even in those brief, unanticipated moments, she contains them. In spite of the self-proclaimed odds against Rita, she tries to create a different reality for her children. However, she has unintentionally reproduced similar circumstances for her children as they both have been placed in out-of-home care as a result of insufficient supervision and parenting practices.
A significant amount of research assert that placement with relatives have far more benefits to children in foster care than those placed with non-kinship providers. However, other researchers have found placement in relatives to be counterproductive and harmful to the healthy development of children (Rufa & Fowler, 2016) for a number of reasons. Relative placements are often situated in impoverished and dangerous neighborhoods with minimal resources (Berrick, 1997) similar to Rita’s environment. Various studies have shown that children placed with their relatives actually receive less support, mental health services, and social worker visits than children who are placed with non-kin (Bartholet, 2009). Further, children placed with kin are likely to reside with caregivers who are older and maybe ill-equipped to address their multiplicity of needs (Barth et al., 2008). Without routine visits from social workers and insufficient services, these children’s issues are not adequately addressed, and the actual safety of the environment is not accessed. Many of the same attributes that researchers have found as protective factors when placing with relatives, other studies have indicated these as risk factors. To this end, the true benefit of kinship care is inconclusive at best and must continue to be evaluated. These studies raise important questions given the reality that Black children are more often placed in kinship care compared to other children.

Unresolved Trauma: You Don’t Have to Hit Me to Leave a Scar

Research has proven that the occurrence of trauma is common for a large population of children. Trauma is defined as a particularly disruptive event that occurs in a single point in time or over an extended period causing an individual extreme distress (Draijer & Langeland, 1999). For Black children residing in urban spaces, the numbers are particularly concerning given that they disproportionately reside in characteristically impoverished and dangerous neighborhoods (Garrido, Culhane, Raviv, & Taussig, 2010; Frissen, Lieverse, Drukker, van Winkel, &
Delespaul, 2015). These spaces are ripe with numerous risks that compromise their safety and well-being. As such, the experience of trauma seems to be part of the normal landscape of Black children’s often stressful living environments. Further, the inherent stress endemic to these environments undermine good parenting practices and increase the potential of poor parental supervision, domestic violence, and excessively harsh parenting potentially resulting in child abuse (McLoyd, 1990).

Various studies point to child maltreatment as one such traumatic event that has significant psychological consequences on the individual (Cichetti, 2004) crossing various life stages. The maltreatment of children can assume a variety of forms such as sexual, emotional, or physical abuse (Thornberry et al., 2014), as well as pervasive and deliberate neglect (O’Dougherty, 2007). While some types of abuse are considered more nefarious than others, all forms have negative implications for the child’s overall mental and physical health (Sikes & Hayes, 2010). Moreover, early trauma is most often associated with insecure attachments with primary caregivers. This is a common misfortune among maltreated youth who are often the victims of emotionally distant and abusive parents (O’Dougherty, 2007). These disrupted attachments have visceral consequences that challenge the child’s sense of safety and stability (Ribaudo, 2016).

The emotional scars that accompany the unforgettable memories are often difficult to heal. In fact, children who are abused are at a higher risk for enduring other types of trauma (Classen, Palesh, & Aggarwal, 2005). Children’s individual responses to traumatic events vary on the continuum. They may become hypersensitive to various stimuli that recreate troubling memories associated with the event. In these instances, the child develops fear and anxiety, or has problems concentrating or remembering things. On the contrary, others completely
disassociate from the memory, acting as if it never occurred (Trickey & Black, 2000). In instances where the trauma has not been adequately addressed, there are often supreme residual effects in its aftermath (Iyengar, Kim, Martinez, Fonagy, & Stratheam, 2014).

All of the participants in this study have been victims of maltreatment resulting in foster care placement. Inarguably, they have experienced at least one traumatic experience as a result of involuntary removal from their homes. Unfortunately, many of the participants have experienced multiple and repetitive traumatic events. This may have occurred prior to their removal from home, as well as after their placement in the foster care system. Most of the participants have failed to seek treatment; thus, the trauma has persisted, creating perpetual distress and making it difficult to have a fulfilling life.

The Impact of Separation

Incarceration. Parental incarceration impacts large numbers of individuals and families across the United States. In the last 30 years these numbers have more than tripled, resulting in approximately 2.3 million individuals counted among the prison population (Pew, 2008). These numbers disproportionately reflect the incarceration of black males, as one out of every fifteen is in prison (Pew, 2008). This has decidedly detrimental impacts on communities of color and their families.

Steadily increasing incarceration rates paint a bleak picture for the normative actuality of many Black children. These youths face many stressors that serve to effectively diminish their welfare. To this end, they are at risk of a number of internalizing (depression, anxiety) and externalizing (e.g., violence, substance abuse, criminality) behaviors (Brown, Fite, Stone, & Bortolato, 2016).
While there is a growing body of literature regarding the effects parental incarceration has on children, it is difficult to isolate and pinpoint its direct consequences (Johnson & Easterling, 2012). Nevertheless, it imputes certain undeniable challenges, particularly for black maltreated children who suffer disproportionately from a variety of societal ills (Sykes & Pettit, 2014). Though black men, as mentioned earlier, are imprisoned at startling rates, the direct impact of their incarceration on their children is considered less significant as they are usually not the primary care provider. In addition, they are often unlikely to reside to share the same household as the child. Still their absence has the potential to serve as a family destabilizing factor as a result of less physical and financial support for the primary figure (Andersen & Wildeman, 2014; Sykes & Pettit, 2014).

Conversely, the incarceration of a child’s mother is thought to be a critical life event that often shapes the young person’s trajectory in a powerful and unfavorable way (Hagan & Foster, 2012). This is concerning as similar to black men, incarceration rates of their female counterparts have steadily increased at a staggering pace. Today, one out of 100 black women is incarcerated compared to one out of 355 white women (Pew, 2008). This is consequential when bearing in mind the primary care giver role that most women hold in the lives of their children (Glaze & Maruschak, 2008). Essentially, when mothers are incarcerated the bonding and attachment process that occur between them and their children is disrupted and sometimes even destroyed (Makariev & Shaver, 2010). Further, material incarceration increases the likelihood of the child being placed in foster care (Andersen & Wildeman, 2014).

Several of the participants have at least one parent who has been incarcerated or who is currently incarcerated. Most of the participants have some recollection of time spent with their parents during their childhood. For many of them, jail seemed a revolving door where they
would repeatedly return to give short, sometimes long segments of their lives. Unlike the other participants, Karleen’s mother was incarcerated when she was two years old and given a life sentence for armed robbery. Sadly, Karleen has never known her mother outside of the institutionalized care that draws strict and ever present lines around the confines of their relationship.

After their mother’s incarceration, Karleen and her older brother were placed in the care of their maternal grandmother and great grandmother. Though their grandmothers attempted to provide enough love for them to fill the gaping hole left by their mother’s absence, they deeply longed for her physical presence. Today, Karleen admits that she continues to struggle with life’s many vicissitudes and believes that confronting challenges would be easier if her mother were present. Many lessons she has had to learn on her own, and sometimes the consequences have been damaging. Resolutely, she attempts to face these challenges, but she cannot help but feel slight resentment towards her mother for her choices, as she believes that her own life has been compromised by her mother’s actions. She says:

If I had a mother, I would have a bigger support system. I’m sure I’m gon’ go through something in life cause I am hardheaded, but I could have had a better support system if she woulda just did the stuff she was supposed to do as a mother. So, if I failed, I could go to my mom. Right now I really don’t have nowhere or nobody to turn to.

Although these thoughts sadden Karleen, she quickly minimizes her feelings regarding her mother and explains them away stating, “I miss her, but I’m so used to being without her.” With candor she continues, “You can’t miss what you ain’t never really had.” Karleen drops her head and lets the words softly waft into the air and linger as if she is trying to convince herself
that shouldering the burden of being a motherless child is part of some rite of passage that we must all endure.

Similarly, Gavi has also lived the majority of his life without the presence of his father who is currently incarcerated. In fact, he has been in jail for much of Gavi’s adulthood and childhood. Though he has not always been imprisoned, Gavi has never met his father in person and only recently heard his voice for the first time three years ago when he was 22 years old. Gavi’s eyes lit up as he recalled first hearing his father’s voice and states, “When he called, I started smiling from ear to ear.” This was an incremental step in Gavi’s healing process. However, this was not enough to quell the rage building inside when he was coming of age as young boy. He recalls:

The older I got the more things I understood, and the angrier I became. So with the me not knowing who my father was…I remember at the age of eight…seven or eight years old, you know, going to school, seeing kids get dropped off by their parents in cars and walking to school and stuff, made me wonder like damn where is my dad at?

Gavi continues to have grave issues expressing his anger appropriately. Oftentimes, this results in altercations with peers and family members. He states, “Sometimes, I will snap off over anything.”

Consistent with literature, parental incarceration can potentially destabilize the family system in a myriad of ways that are counterproductive to the child. In Gavi’s case, his father’s incarceration opened the door to the relationship that resulted in his mother denouncing responsibility of her children. This is not an uncommon occurrence as research indicates that mothers often enter new relationships in the absence of fathers who have been incarcerated. This is typically an exceedingly complicated dynamic in the household that compromises the child’s
mental and physical well-being and ultimately. Like Gavi, in many cases, it has resulted in the child’s placement in foster care (Andersen & Wildeman, 2014).

Further, research has illuminated the constellation of poor adult outcomes for children of incarcerated parents. Many of these individuals are also likely to follow a similar path as their parent, ultimately resulting in imprisonment.

**Rejection.** Parental rejection has significant psychological consequences for children who are unfortunate enough to be its victims. Dissimilar to parents who display warmth, nurturing, acceptance, and support towards their children, these parents are often cold, aggressive, belittling, or psychologically damaging when relating to their children (Rohner, 2004). The lacerations of such treatment are unquestionably deep and wide, often spinning the child’s world into utter uncertainty. Several participants in this study identified feelings of being rejected by their parents as well as other caregivers.

Gavi admits to having many life challenges that prevented him from being successful. His detached relationship with his mother has continued to be an emotional obstacle that requires him to repeatedly question his self-worth. After being abandoned by her at an early age, he blamed himself for her departure and lack of desire to parent him. His memories of her are filled with subconscious messages of “My mother doesn’t love me” and “My mother doesn’t want me.” Though he constantly questions her as to why it was so effortless for her to walk away from him and her parenting responsibilities, he has mentally internalized that he was “unlovable” and “not worthy” of her affections. Unfortunately, her answers to his perfunctory interrogation do little to change what he has already reconciled in his mind. In fact, she has responded to his questions with, “I had to do what was best for me.” This only serves to anger Gavi and further erode the relationship, as this insufficiently addresses his concerns. Thus, his every encounter
with his mother has the potential to be volatile. The simplest of things escalate into arguments, as Gavi’s disdain for her is never far from bubbling at the surface. Gavi recalls a family event that quickly turned sour:

Me, my mom, my brother, and my grandmother was playing cards at my brother’s house, and my mom wanna cheat. So, I said something about it. She think everything just supposed to go her way and fuck everybody else, and I’m tired of that. So, I cut into her. I…I done cut into my mom multiple times. She needs to understand I’m not a kid no more. So, I let her know that she not about to sit up here and dog me and talk to me any old kind of way and think I’m not gon’ say something about it. Like, I don’t need you, you know what I’m saying.

Undoubtedly, Gavi carries feelings of damaged self-esteem stemming from his relationship with his mother into his intimate relationships. He is acutely aware that he places unfair expectations on his love interests in his quest to replace the love from his mother that he was deprived of as a child. Insightfully he shares:

…that’s the reason I have different girlfriends because I’m looking for a certain nourishment and love. And once I see a certain level of unappreciation or disrespect coming from that, it’s like a part of me sees my mom. And it’s like “you gotta get the fuck on” after that. I’m not letting nobody hurt me, so when I recognize it, I’m out.

Gabriele reports that she can recall several negative events in her life that she has yet to resolve emotionally. Although her father was sentenced to six years in prison for manslaughter when she was a child, it was not his incarceration and subsequent absence that was disturbing. It was his actions before he was sent away that caused the most distress for Gabriele.
identifies one of these events as an encounter with her father when she was a young child that has forever changed their relationship. She shares:

I remember I was sitting on his [my dad’s] lap. Him and my mom had just gotten into an argument and he was in the living room. All of the lights in the house was off. It was only the hall light on. And so he was sitting there arguing with my mama. So my mama said something like, “send my baby upstairs.” And he was like, “you can come get this little bitch!” I just started crying, and he didn’t say nothing. He didn’t try to hug me, kiss me...nothing. So, my mom came and got me and took me upstairs. I don’t remember nothing after that. It’s like a blur.

From that moment forward, Gabriele’s ideal view of the proverbial father-daughter connection disintegrated and was replaced by a distant relationship filled with anger and disappointment. She secretly hoped as time went on that he would redeem himself and be the “superman” that fathers often represent in children’s lives. However, he continued to fall short in his role. On several occasions, Gabriele attempted to move beyond the incident and forge a new relationship with her father by confronting him about his actions. She hoped that he would accept responsibility, express regret, and make amends for the hurt he caused. However, he deliberately sidestepped all conversations that were aimed in that direction. In addition, while she and her siblings were in foster care, he visited sporadically, but never articulated the desire to parent his own children even though they were placed with strangers.

Gabriele found this frustrating and drew farther away from her dad as a result. Consequently, Gabriele admits that she would rather “block out those memories” than address the painful void that she feels as a result. However, she is excruciatingly aware that her adult life is tremendously influenced by her past. Nowhere is this more evident than in her relationships
with the opposite sex. Gabriele asserts, “I never got the love from my dad, so I lash out on men.” She further underscores her point by simply declaring, “I have problems with men.”

Whitbeck et al., (1992) assert that children who experience parental rejection are likely to be depressed adults and, more importantly, display similar behaviors with their own children (Hale, Van Der Valk, Engels, & Meeus, 2005). Often, the detachment is abrupt and results in decreased emotional support and even physical presence. Mothers who deliberately withhold their love and affection from their children create insecurity and anxiety (Rohner, 2004), as the child’s world is no longer safe and predictable.

Parental substance use. Substance abuse is a powerfully predictive indicator of child maltreatment. The home lives of these children are often unpredictable and chaotic. In many cases, the child must assume adult-like roles and responsibilities to care for himself and siblings that may be younger. The continued and prolonged use of drugs immobilizes parents rendering them useless in providing adequate care, support, and supervision of their children (Taylor, 2011). In fact, children who have substance addicted parents are at a significantly greater risk of physical and sexual abuse when compared to children who have parents without substance abuse issues (Walsh, MacMillan, & Jamieson, 2003).

Once placed in foster care, these children are returned to their parents at a less frequent rate than children whose parents are without substance use issues. Pervasive poverty, lack of financial resources and support, tenuous housing, and drug-infested neighborhoods make sobriety seem impossible and impending relapse supremely inevitable (Grant et al., 2011). Thus, these parents often have a difficult time having their children returned to their care (Grella, Hser, & Huang, 2006) and live in perennial jeopardy of losing their parental rights (Marcenko, Kemp,
& Larson, 2000). When they are reunified, they have a much greater propensity of re-entering
the foster care system (Brook & McDonald, 2009).

Disturbingly obvious among all participants was the reality that all of their mothers were
substance abusers at one point in their lives. Two of eight participants had both parents as
substance abusers. This is a sobering fact that serves to underscore statistics that indicate 50-80%
of families involved with the child welfare system are impacted by substance use (Brook &
McDonald, 2009). Further, research indicates that More salient was the fact that six out of eight
participants were placed in foster care directly or indirectly because of parental substance abuse
issues. Although some participants have been able to form some semblance of a relationship with
their parents, others have been scarred deeply as a result of their parent’s substance use.

In Carla’s case, both of her parents were extreme substance users which created a horrific
home environment for her and her siblings. Their upbringing was anything but typical. When she
reminisces about events surrounding her childhood, she quickly classifies it as a “hot mess.”
When asked to share good memories, she breathes in deeply, looks away, and states, “This is
sooo sad because I just don’t remember being a kid and having a happy moment.” Carla’s
parents were heavy substance users and spent many days and nights away from home on drug
binges. During these times, Carla and her siblings were left to fend for themselves. They were
often dirty, without food, and left in a filthy house with sparse and inferior furnishings. The
emotional and physical neglect she sustained continues to permeate her daily thoughts. Tearfully,
Carla shares, “When I was a kid [tilts her head to the ceiling....trying to recall]......well they [my
parents] was never there. It’s real sad when I think like...I never remember my mom… um… as a
child hugging me, telling us she loved us.”

In addition, there were many things that she had to figure out for herself at a young age:
There was days when I told my mama when I was a little kid...I can remember, I was like “Mom, ummm, I feel like I'm dirty” or I told her about something personal. She would just be like, “Oh I don't care.” “Go take a shower.” She was never like “ok, maybe you need to go to the hospital.” She never talked to me about anything as far as like sex, how you not supposed to do this, how you supposed to take care of yourself, how you supposed to stay clean. I never had that talk with my mama or dad.

Similarly, Valerie’s experience with an alcoholic mother was peppered with many disappointments and harsh criticism. She describes her mother as a “tough cookie,” referencing her unyielding exterior and often abrasive ways. Her mother’s polar opposite, Valerie is extremely sensitive and says that she “cries over anything.” As a child, in her mother’s presence she often felt emotionally unsafe and vulnerable to her substance induced tirades. Valerie’s challenging relationship with her mother further complicated her teenaged years. Overweight, she was not very popular or well-liked by her peers. She states, “I would get talked about and made fun of a lot.” To add insult to injury, she could not run to the arms of her mother for reassurance or compassion. This was extremely difficult as she began to openly explore and express her sexuality. At a time when a mother’s guidance and emotional support is significant in a teenage daughter’s healthy development, Valerie’s mother’s alcoholism rendered her uncensored and completely insensitive to her needs and feelings. She recalls:

So, before I was sexually active, my mom would call me a ho’, a slut, and that’s not even the case. I literally went to school activities and went home. Then my sexuality…she would talk about a lot, like towards the end of high school, college, just because she didn’t understand it. And she didn’t understand my friends. Just things like that. She just...we just weren’t...we couldn’t talk.
Today, Valerie and her mother have a different relationship. As a result of esophageal bleeding, a by-product of the alcoholism, Valerie’s mother stopped drinking. Her sobriety has allowed them the opportunity to establish a new relationship with each other. Still somewhat strained, Valerie admits that she continues to harbor resentment towards her mother for the past. This is further complicated by their refusal to revisit and rehash the past. Naturally, this does little to help Valerie resolve previous hurts. She is left to contend with these emotions as a young adult. Thus, she chooses to tuck them neatly away in a box in her heart until they appear sometimes without warning or provocation.

Gabriele, like several of the other participants, entered foster care as a result of her mother’s substance abuse. However, it was not until she was placed with relatives who would routinely talk negatively about her mother that she became aware of her mother’s issues and the severity of her problem. Nevertheless, she recalls subtle indications that things were askew. She shares,

My mom…she was a good mom. At the end of the day, she kept a lot of stuff hidden from us. We didn’t know what was going on ‘cause we was just to ourselves. Then all of a sudden company came over. You know, it was just too much traffic. Friends and family would come over, but I'm saying like people we don't know would come in the house. Like, we just didn’t know what was going on because they was in the room or basement. Kids… we gotta be separated. Like, at adult parties, how the kids gotta go to the back, we couldn't see none of that. We never saw none of that. You know, and we still lived good. Despite Gabriele’s mother substance addiction, she went to great lengths to set clear expectations for her children. Gabriele credits her childhood naïveté to her mother’s desire to always shield her siblings and her from the realities of life in order maintain their innocence.
Gabriele stated that her mother felt “children should be children.” Thus, she tried to keep certain adult activities out of view of Gabriele and her siblings. Gabriele recalls, “Whenever there were adult parties in the home, the kids had to always remain separate.” As such, Gabriele was completely confounded when she learned of her mother’s substance use. Yet, this never changed her view of her mother or the immense amount of respect she had for her.

Gabriele’s “superwoman” view of her mother would not allow her to see the truth regarding her mom’s substance use. Although Gabriele has vivid memories of taking on a maternal role in the care of her infant brother when she was very young, she is still reluctant to articulate that she took on this role because of her mother’s substance use issues. When he was a baby, Gabriele would stay home from school and hide in the closet for the entire day, leaving her post only to tend to her brother. She recalls, “[My mother] was never woke. I would sneak. When I was done with him and had him settled and everything, I would go back in that closet.”

When asked why she felt the need to do this, she shared that she was unsure. She just felt instinctively that her brother needed her:

I didn’t know what my mom was knocked out from. I was still a kid, you know. I don’t know if she thought Casper the Ghost was coming in to take care of the baby or what. I don’t what she thought. I don’t know how I did it, but I did it. I made a way to have my brother safe. I made sure I changed them dirty little pampers. I made sure I made them bottles, whether they was right at the time or not, I made them, and he ate it.

Unfortunately, about a year after Gabriele’s baby brother was born, she and all of her siblings were removed from their home and placed in foster care. Though the bond between she and her baby brother was unbreakable, she would never reside with him in the same home, as he
would later be adopted and his birth name changed. His absence is a deep void that Gabriele has never been able to forget nor heal from the pain.

**Exploitation and Violation of Childhood**

Though Rita has been able to somewhat persevere in spite of her circumstances, she continues to feel and vividly express the difficulty of her childhood. These distinctive understandings compromised her youthful innocence and catapulted her, without warning, into a world of illicit and adult activities. At a very young age, Rita was asked to deliver drugs for her relatives, a memory she will never forget. She calls to mind,

> When I was like 12 years old, I would hold some stuff [drugs]. I would like put it in my purse or take it down the street and the put it in somebody’s mailbox or something. I didn’t know what I was doing. I just knew that I was used to seeing them [my relatives] do it. Like, I didn’t know they sold it to people, or I didn’t know at the time you smoked it. I didn’t know what it was.

Rita feels that being exposed to so many abhorrent situations has had a significant impact on her life trajectory, as well as skewed her outlook on many facets. She does not readily trust people and is unusually preoccupied with issues of safety regardless of her environment. She shares that as a child, her internal and external environments were both characterized by dangerous occurrences. She says, “I have seen people dying, dead bodies and witnessed several drive-by shootings.” Her eyes glaze over and her face bears a confused expression seeming to convey that she is still shocked that she has lived through some of her experiences. She constantly struggles to distance herself from her past in an effort to define herself differently. However, no matter how hard she tries, she can’t erase the compounded impact of substance abuse on her childhood:
I was around bad influences all the time...around cussing and smoking, drama, drugs, and alcoholics and people beating on the kids. I think if I just been around those people and it was...it was like somebody out of those people who to just pick out who woulda just stayed on my head, then I would be a lot...I just think even if I was around those people, I would be a lot better.

More poignant was the cavalier approach taken by Rita’s caregivers who were charged with her safety and overall well-being. As such, at nine years old, she was repeatedly molested by a member of the family. Fearful and uncertain of how her caregivers would process the information concerning her violation, she opted to not tell them, suffering in silence and terror:

I was scared to tell the lady I lived with that I was being raped because she was real mean. Even when she found out...one of my...her friend was staying with us. Her friend and her friend’s kids was staying with us. The girl was my best friend. We was like 10. My friend ended up telling the lady that raised me. Then she called me downstairs...like just cussing and stuff like...so I was like...I ain't even know what to say. I just couldn’t believe it. I don't know why she told...why she said something. The lady said I was lying and he didn’t do that to me.

Not only was the abuse never addressed, verbal tirades and accusations aimed at Rita lasted until she was old enough to run away from the home. Although she was able to physically escape the atrocious environment, she has been unsuccessful at emotionally eluding the enduring feelings associated with her experiences. She continues to carry unaddressed shame and guilt almost 20 years later. As a result, she has difficulty in almost any type of relationship. Rita states, “I don’t trust nobody.” She finds it especially hard in her love relationships where she has been physically, verbally, and mentally abused. Though Rita expresses sincerely, “I don’t feel
comfortable with older men,” this is somewhat inconsistent with her reality. She is currently in a relationship with a man 35 years her senior who she says, “does things to help her out.” She shared that in turn, she is occasionally expected to have sex with him, which she acquiesces to even though she finds intimacy with him undesirable.

Valerie knows all too well what it’s like to be sexually violated. She was raped by her friend’s teenaged cousin when she was 14 years old. She knew him, as they attended the same school, and she would go to his house after school to stay with his younger cousin until her parents returned home from work. On one particular day, he was the only one at the home when Valerie arrived. She shares the story,

We were just like sitting on the couch and I had my dance stuff on because I was about to go to dance practice. And he was just like trying to feel me up. I was being fast cause I thought he was cute. And then when I said “stop,” he thought I was joking. And then he told me if I didn’t, he would tell my mom this is what I was doing upstairs. His grandma came home. And I was like…crying and I was like…well not crying but I was just like sitting there like not myself and she said I was up there being fast cause she saw me come out of the room. And so my dad, his intention was to spank me, cause he was like “what are you doing in a room with a boy, blah blah.” So a couple of days passed, my period didn’t come. Like a week or so passed and my period didn’t come and so I told my dad, “Dad my period’s not coming.” And he told me to tell him exactly what happened.

Not only did the incident result in Valerie becoming pregnant and getting an abortion, but like Rita, she was reluctant to tell her mother for fear of her response. She viewed her mother’s demeanor as harsh and insensitive. She further thought that her mother would
ultimately blame her for “putting herself in that situation.” Though Valerie eventually told her mother, she never received counseling to attend to her emotional needs.

Bridget, who endured an extreme amount of physical abuse for many years at the hands of her father is also still reeling from its impact on her adult life. The abuse occurred over a number of years and was often severe. The wounds are deep and wide, appearing as if they will never heal. For every new disappointment or perceived failure, it seems as if layers are being painlessly removed from the wound, exposing its rawness once again. When Bridget was asked how the physical abuse affected her, she emphatically stated:

It’s a daily struggle. The thought of everything I went through messes with my nerves…really, really bad. Things that I feel like shouldn't make me jump throws me off. Sounds are a big thing…Like, sometimes, I can’t sleep. Something like if my phone rings and if I’m asleep, I’ll jump right up. Sometimes it scares me and it’s just my phone. If someone drops something just like really, really, really loud, even if I’m sitting right there and I’m watching it, it makes my heart start palpitating real fast. All I can say is thank God, I don’t have nightmares like I used to… But I still have a lot of memories.

Bridget readily recalled a recent event that triggered one such memory:

I dropped my daughter off Friday, and when I came back in the house Sunday, my friend’s mom was doing her hair and the dogs… her aunt has these dogs, and they are just dumb. And her mom got to kicking the dogs. It was funny, but then it instantly made me sad…kind of made me be like, “Dang, I remember my father used to kick me like that too.”

A residual effect of the abuse is Bridget’s inability to successfully regulate her emotions. Often times, she admits to being on an emotional rollercoaster which leaves her feeling out of
control. When triggered, she can quickly vacillate between extreme sadness, anger, and depression. Her mental instability has been particularly difficult for her daughter as well as parenting effectively. Bridget has disclosed that on numerous occasions before seeking help, she has been excessively forceful and physical when disciplining her daughter.

Similar to Bridget, Lenna’s childhood was filled with a great deal of physical, verbal, and emotional abuse. It is apparent that it has taken a toll on her self-confidence, as she is extremely shy, soft spoken, and rarely makes eye contact. Her words are very slow and methodical, as if she is painstakingly planning every sentence. Lenna avoids interactions with people as much as possible. She is extremely cautious with who she allows into her circle. Even her closest of friends are kept somewhat at arm’s length. Lenna stated, “Being abused made me, how can I say… it just made me like put my guard up with everybody.” She further shares:

Today I still have a problem thinking about what people gonna say to me because people always dogged me out and just treated me bad. And I always wondered why me… why do people do this to me? When I see other people, they getting treated with the utmost respect. And that's what made me, you know, play a part in my mind where I must be slow, mental or something is wrong with me cause everybody always dogged and talked about me in the foster family. And it wasn't just the foster parents, it was like a couple of people that I could just meet, and they like “You crazy or something wrong with you.” Maybe I took it to serious because of that, it had a hold on me from when I was little to now.

Lenna has internalized that she is deficient in every way. So when she does mistakenly lower her metaphorical guard, she gets “extremely nervous and feels that she will be judged.” Thus, she finds herself mostly alone, as she is frightened of allowing new people in her world.
She is constantly inundating herself with personal messages of insufficiency and inadequacy. This has certainly inhibited her full growth and development, as well as made life arduous in many ways.

**Conclusion**

Emergent themes from data collection and analysis in this chapter represent the immeasurable, pain, disappointments, distress, and sadness participants weathered in their young lives. Innocent childhoods pockmarked by pervasive abuse and neglect continue to intrude upon these young people. Their voices eloquently lift stories of their past that are seemingly too heavy to carry. Silent tears and bursts of anger often revealed the presence of pain not yet forgotten or healed. Most of it is connected to their past and present relationships with their parents, who were and continue to be inadequate caregivers. For several participants, sharing their stories provided a cathartic outlet that initiated the beginning of their healing. The telling of these stories is not only beneficial to the storyteller, they provide the reader with a new or different perspective of phenomena that are regularly omitted from the broader conversation. The next chapter continues to unravel the emerging themes as represented by the stories of each participant and the ways in which their past has uniquely shaped their future.
Chapter 6: Thematic Analysis Part Two

This chapter continues with highlighted themes represented by participants’ stories. Key themes identified in this chapter are: sense of belonging, identity formation in foster care, and lack of preparation for adulthood. Themes reveal significant challenges that participants must navigate while also confronting the uncertainties of adulthood.

Sense of Belonging and Foster Care: Pieces of the Puzzle

Various studies indicate that a sense of belonging and quality relationships with primary caretakers are critical to the establishment of a healthy social identity for all humans (Hagerty, Williams, & Oe, 2002). Early attachments are essential in the formation of how a child views himself and the world (Hagerty, Williams, & Oe, 2002). Thus, feelings and experiences of belongingness have relational roots that highlight the importance of parents, family, significant adults, peers, and community in helping to create a youth’s identity and ultimately his/her sense of belonging (Hagerty, et al., 2002). Belongingness is achieved through these positive and consistent relationships that confirm the individual’s value (Hagerty et al., 2002).

For youth who have endured the experience of foster care, a sense of belonging can be confusing and complicated. Fragmented ties with biological family members as a result of placement in foster care followed by often tenuous connections established once in care leave many children feeling torn and psychologically distressed (Perry, 2006). In fact, forced separation from family, friends, pets and all things familiar is particularly hard on children. Though much research has been conducted on the inherent consequences of abrupt separation due to foster care (Collins, Paris, & Ward, 2008), little has been done to address these issues. Frequent and consistent family visitation could potentially have astronomical effects on the child’s adjustment during the temporary disruption. Illustrating this importance, McWey, Acock,
and Porter (2010) argue that children who have frequent contact with their mothers while in foster care exhibit lower levels of depression.

Fortunately, some children are able to maintain sufficient connections to their family while in out-of-home placement, or they are able to form new connections that are beneficial to their development. To this end, several participants in this study proudly highlighted their strong family connections prior to placement in foster care. In fact, their senses of belonging were meaningful, defining, comforting and worn like badges of honor used to carefully differentiate them from what they consider “typical foster kids.” In spite of their parent’s issues, they continued to be the primary caregiving figures in their children’s lives. Whereas, other children in foster care lacked any type of parental support or contact. Such solid foundational relationships appear to have mitigated the negative consequences and cushioned the inherent trauma associated with foster care that are inescapable for most children.

Gabriele grew up extremely close to her mother and was like her shadow, as she wanted to be with her mother at all times. She states, “I was the kid that cried if my mama left the room.” She was truly a “mama’s girl.” Gabriele felt that the adoration was mutual, as her mother willingly obliged her desire to always be in her presence. This further, crystalized their already close mother daughter relationship. Even after, her placement in foster care resulting from her mother’s substance abuse issues, Gabriele continue to view her as being her “hero” and “my everything.”

Gabriele’s larger than life view of her mother engendered difficultly in relationships with caregivers while in foster care. She unapologetically measured each caregiver against the qualities of her beloved mother. This was especially problematic while placed with relatives who used every opportunity to denigrate her mother in an attempt to belittle her in Gabriele’s eyes.
Speaking at a quickened pace she says, “They [my relatives] use to say a lot of little mean things to me and my brother about our mother like, ‘you know she a drug addict right?’” If she responded negatively to their tirades, they would counter “You don’t even know where your mother is.” Though these insults hurt deeply, Gabriele remained steadfast in the love she held for her mother.

Throughout Gabriele’s placement in care, she was placed in multiple different foster homes. For one reason or another, the placement would end, and she would be shipped out to a new home. For those families that tried to weave her into the everyday fabric of the family, she would stealthily resist, keeping a comfortable emotional distance. There were other caregivers who simply did not try. Satisfied with the small checks they received for her care, they allowed Gabriele to retreat into herself until they grew tired of her insolent behaviors. Firstly, Gabriele deeply resented their presence, and secondly, she intuitively felt that accepting them meant the blatant rejection of mother. Therefore, she was outwardly defiant and annoyingly rude. Quietly, she felt that her behavior would have her returned home sooner, but it never happened. She was simply sent to another home.

Gabriele eventually found solace with two families who simply refused to be moved by her cavalier and disrespectful attitude. They saw the hurt and disappointed little girl hiding behind the rough exterior that had been created by multiple changes and uncertainties. It was in these two homes where she learned that people do not always have to be family members to love you. Gabriele shares, “Both families they just truly loved me.” She continues, “They even loved me more than certain family members ‘cause they never turned their backs on me.” This unyielding love made Gabriele feel special and securely bonded with the foster parents as well as
their extended family members. In spite of the many behavioral challenges she presented, they continued to be active in Gabriele’s life which gave her a great sense of belonging.

In Gabriele’s mother’s absence, it was her last foster home that she found the greatest connection and sense of belonging prior to aging out of the foster care system. Ms. Daisy was a middle aged woman who had a knack for taking in teenaged girls with problem behaviors, something most licensed foster parents are reluctant to do. Gabriele, one of four girls placed in the home, thoughtfully, speaks of Ms. Daisy stating, “Ms. Daisy would work with you no matter what, because she loved you that much.” Ms. Daisy never seemed be short on love, and it took far more than a characteristically attitudinal teenager to move her. She went out of her way to make sure each of the girls placed in her home felt special in their own right. Even still, Gabriele felt that she was Ms. Daisy’s favorite out of all of the girls. Gleefully, she states, “She always treated me differently…she always said it was something about me that made her love me a little bit more, a little bit differently.” Ms. Daisy’s ability to form an effective relationship with Gabriele had a far reaching impact on her experience in foster care as well as her overall view of it. Unlike many foster children who were physically, emotionally, and verbally abused while in care, Gabriele has many fond memories and a special love for the lady that she warmly refers to as “my angel.” Ms. Daisy possessed the essential understanding that the young ladies placed in her home needed more than a geographical change in their living environment. Along with their luggage, they brought with them a host of fears, disappointment, confusion, and anger that needed to be carefully unpacked like delicate china. Gabriele admits to being angry with a major attitude problem that eventually created disharmony in all of the homes she was placed. As such, Ms. Daisy, sensing that Gabriele need extra attention, tailored her parenting style to meet
Gabriele’s emotional and behavioral developmental needs. Gabriele stated, “I always had my way, but I never gave her problems, ever…maybe because I knew that was my angel.” The feeling was mutual, as Gabriele adored Ms. Daisy. Shortly after Gabriele aged out of the foster care system, Ms. Daisy died of a terminal illness. Nevertheless, she left an ineffaceable print upon Gabriele’s heart that she will carry forever.

Like Gabriele, Valerie also has a strong sense of belonging in spite of the complicated relationship with her mother as well as the challenges that plagued her childhood. Her mother has a substantial history of alcohol abuse that pre-dates Valerie’s birth. She shares, “My mother has drank for as long as I can remember.” This created a routinely inconsistent and contentious living environment where vitriolic comments hurled in Valerie’s direction were the norm. Minor infractions resulted in unnecessarily harsh responses or punishments. Valerie found the name calling most hurtful and assaultive to her self-worth. As a result, Valerie, like many children of alcoholics developed anxiety issues and found it difficult to moderate her emotions.

While these conditions might diminish most young people’s sense of belonging at a time when their identity is in its formative stages and therefore fragile, Valerie was fortunate to have grandparents and a stepfather who acted as buffers against her mother’s ineffective and sometimes nonexistent parenting. These relationships provided her with a base upon which she established a secure sense of belonging that was especially important when confronting the inconsistencies associated with being the child of an alcoholic.

When Valerie discusses the relationship she enjoyed with her grandmother who is now deceased, she smiles through tear filled eyes and a softened voice stating,

I adored my grandmother. She believed in me no matter what. She spoiled me rotten, so that I’m just learning the concept of no, not right now, or we don’t have it. That’s because
my grandmother never let it happen. And if my grandmother knew my mom couldn’t facilitate something and my grandmother knew that it was important to me, she made it happen. I could tell her I needed to go Mars in my Jeep, and she would say, “How can we help reach your dreams?”

This unfettered belief in her granddaughter engendered self-confidence in Valerie that is apparent as she exudes an obvious sense of self-confidence in herself and abilities. Further, Valerie asserts that the bond she shared with her grandparents help to mediate the poor relationship she had with her mother.

Valerie’s stepdad was another significant force in the protection of her well-being while living with her mother. Frequently, he would intervene when she was the victim of her mother’s substance induced tirades. Always a sensitive child, Valerie would collapse into uncontrollable tears as her mother unleashed a fury of insults onto her. Her stepfather would swiftly come to her defense, instructing her mother to “shut up and leave her alone.” If the verbal attacks continued, he would simply take her from the home until her mother calmed down or went to sleep.

Valerie’s biological father was never much of a father, as he only came around sporadically for short periods of time. Living in another state for the majority of her life, as well as using and selling narcotics, the distance between them has always been evident, and Valerie is quick to inform him of the diminutive role he holds in her life. Valerie states, “I told my father…you’re my father, biologically, but my stepdad is my dad.” This pronouncement created a wedge between she and her biological father that forced a rather surface relationship. Valerie, not at all concerned about their distant relationship states, “Even to this day, he is just not mature enough to be a dad.”
Smiling broadly, Valerie describes her loving stepdad as “amazing.” Though she says he was not perfect, he worked diligently at developing the quintessential “father-daughter relationship.” She stated, “If I needed to talk, we always talked.” His attentiveness ability to make her feel like she was the most important person in the world were instrumental in Valerie’s overall well-being and sense of belonging as she struggled immensely in her relationship with her mother. Where her mother was inadequate, he filled in the gap. Overweight and void of her mother’s emotional support, Valerie’s step father was careful to build her self-esteem while diminishing insecurity. He always told her that she was “pretty” or “perfect the way you are.” This was extremely important as she often felt uncomfortable with her weight and prematurely curvaceous body.

Though Valerie’s mother often was unable to provide for her daughter’s emotional issues due to her drinking, she was sure to provide for her financially, ensuring that she had a materially comfortable lifestyle. They lived in a nice home environment that Valerie says “didn’t look like the typical home a foster child would grow up in.” In fact, outsiders were unaware of the extent of her mother’s alcoholism. Valerie worked diligently to keep her mother’s substance abuse issues a secret from the outside world while exiting in a quiet shroud of shame. She refrained from inviting people into her personal space out of embarrassment and fear that they would realize that her home life was punctuated by disharmony and distress. Valerie shares, “My mom has always had an issue and I’ve always known it, but it was like one of those things no one else saw....So, it was like outside-picture perfect, inside-ewww.” Even today, Valerie is still very protective of her mother and chooses her words carefully when discussing the extent of her alcoholism. It is clear that she respects and loves her mother, and does not want to represent her in a negative light. Valerie shares, “My mom had an issue, but I don’t want to write her off like
that…like just an alcoholic.” However, she admits that without her stepfather it was often
difficult to find a balance as she regularly felt emotionally unsafe in her mother’s presence. Her
stepfather eventually moved from the home after he and her mother’s relationship ended. The
was the beginning of the end, as Valerie shares, “The summer he left, I went into foster care.”
Until that time, he was a protector and nurturer.

In contrast to the previous two participants, Carla’s sense of belonging did not begin with
a solid family foundation. In fact, the supreme instability resulting from her parents’ substance
issues as well as the abuse she suffered while placed in foster care with relatives made her
question whether or not she “belonged to anyone” or if “anyone cared about her at all.”
Throughout her childhood, she grappled with feelings of insecurity and that she was “nobody’s
child” and “not important.” Nowhere were these feelings more evident and haunting than when
she lived with her relatives. It seemed as if they went out of their way to demean her and
diminish her self-worth. Carla states that she would regularly be made to wear her cousins hand-
me-down-clothes. This placed her in an uncomfortable position because her cousin would tease
her about it relentlessly, especially in the presence of others which left Carla feeling vulnerable
and embarrassed. They deliberately made her feel insignificant and unwelcome. She harbors this
deep hurt and sense of disappointment today as she had never anticipated that her family would
be so cruel and disloyal. Carla recalls a particularly disturbing argument between she and her
cousin that was fueled by her aunt:

My cousin that I stayed with while I was in high school…my friends was her friends. If I
got into it with her friends, she would take up for them and not me. Like blood is thicker.
I'm your blood. So at the end of the day, like if we would get into a fight, and she would
fight people on the street, I would jump in because you my family, and I'm not gonna let nobody touch you.

While placed with her relatives, Carla displayed an unquestionable allegiance that she hoped would be reciprocated by her family, especially after the unspeakable abuse she withstood in the previous foster home. She was sorely disappointed, as they effectively treated her worse than a stranger. Carla recalls a significantly disappointing incident that altered her expectations and obliterated all respect for the people she considered her “blood”:

One night I was in the car with my auntie and cousin. My auntie, my cousin’s mama, who is also my daddy sister, was like, “I think Carla likes your boyfriend, get out the car and fight her.” This is what she told her. She actually said those words. I was so ready. Being in foster care, I done took so many whoopings, it was not going to happen that night. She just looked at me and saw it on my face and walked right away. And her mama just kept saying, “hit her!” And we supposed to be family.

It was not until Carla met her boyfriend, now her husband, at approximately 18 years old that she learned the meanings of true belongingness and love. She credits him for much of her ability to rise above her situation and success in graduating high school and attending college, which none of her siblings were able to do. She states:

I honestly think because of my husband…because of marrying him, I’m better. If I wasn't married and with him, I would probably be lost. With everything that I went through, I would probably be smoking and in clubs. He helped me through school. He told me I could make it, and he was just there for me the whole time. Just having him in my corner…because if not I would probably end up like my brothers.
As Carla and her siblings became older, her brothers engaged in criminal activities and experimented with various illegal substances. Today, several of them have criminal records, substance abuse issues, and are unemployed. Unlike Carla, they never quite gained a sense of stability and love. Instead, they found less productive ways to fill the bottomless hole left by the absence of their parents.

Most often maltreated youth tend to have tenuous or non-existent attachments with parents due to instances of abuse and/or neglect while in their care; some of which deteriorate early in childhood or never develop (Radke-Yarrow, Cummings, Kuczynski, & Chapman, 1985). In fact, the lack of emotional attachment and relationship is usually an indirect cause of the child’s placement in care. The above narratives clearly illustrate the importance of securely established attachments for children, particularly those in foster care. These individuals were able to identify at least one person who they felt undoubtedly loved them. In all cases, these individuals were central in helping them ascend beyond difficult situations as well as shaping their overall perception of themselves.

While foster care certainly has its inherent challenges, emotionally supportive connections formed before placement are helpful to a child’s transition and journey through foster care. These connections are essential to a child’s self-confidence, feelings of worth, and emotional adjustments (Cooper, Shaver, & Collins, 1998) in spite of unanticipated and often immediate changes to their environment. Children who have an established foundation when placed in foster care tend to fare better under the circumstances than children who lack sufficient attachments (Hedin, 2014). Socially competent and emotionally secure, these children potentially have fewer challenges establishing new relationships while placed in foster care.
Foster parents also have essential roles in facilitating a youth’s successful adjustment in placement in their home. Given that they are charged with provide care until the child returns home or locates a permanent placement, it is essential that they attempt to create a genuine bond with the child. Caregivers who are able to interrupt and minimize the child’s cycle of the placement disruptions are more likely to form secure attachments that send the child’s ultimate trajectory in a positive direction (Joseph, O’Connor, Briskman, Maughan, & Scott, 2014). As such, the converse is true. Children who are placed in foster homes void of warmth, support, and caring often have more mental and emotional challenges.

Identity Development and Foster Care

According to Erikson (1968), identity formation is an elaborate process that begins in adolescence. During this stage, youth explore and negotiate multiple identities usually under the watchful and guiding eye of their parents (Erikson, 1968). Yet, they begin to somewhat detach from their parents in an effort to define and individuate themselves. For maltreated youth, parental support and guidance is typically unavailable, as these youths are often uprooted from their homes and placed in foster care (Pepin & Banyard, 2006). Some youth experience multiple placement moves before finding a long-term placement. Other youth never find a secure place and instead move through foster homes like a commuter train that stops only momentarily along its route before casually moving on to the next stop.

These homes are typically in unfamiliar environments and are sometimes culturally inconsistent with the child’s personal background. Black children who are disproportionately placed in foster care are placed in homes of different races more often than their white counterparts. As a result, essential cultural knowledge that is contributory to the establishment of identity may be lost (Padilla, Vargas, & Chavez, 2010). Regardless of how many places a child
experiences while in foster care or the quality of those placements, each experience leaves an indelible imprint on the child’s identity schemata.

**Racial identity.** Race adds another level of complexity to the process of adolescent development and identity formation. When discussing the identity development of African American youth, especially those who have been maltreated, the intricacy of this process must be taken into account as it is multifaceted in its construction. The African American child must develop an identity first as an individual, but also as an individual part of a marginalized group situated in a majority dominated world (Tillman, 2009). In a society where issues of race are complex and centers around an often polarizing discourse, being part of an ethnic/racial group who often endure devaluation and disempowerment can make navigating life’s obstacles even more arduous. Nevertheless, a strong sense of connection to one’s ethnic group can lessen the psychological impact of devaluation and marginalization that one may encounter (Eccles, Wong, & Peck, 2006).

For Valerie, much of her identity is centered on her “blackness” which was ingrained in her at an early age. In fact, she describes herself as “very pro-black.” She’s bold and unapologetic in her expression of black pride stating, “We’re seen as inferior and taught that through our education.” As a child, she remembers she hand her classmates were taught that black history began during the period of slavery. This was in direct contradiction to the history she was taught at home that told stories of African kings and queens that existed long before slavery.

Valerie is currently studying to become a teacher and says that she will work to ensure that Black children have a strong foundation of their rich and varied history. Proudly she states, “I will make sure they [students] know they are descendants of kings and queens…something the
history books rarely tell.” What Valerie’s school failed to teach, her parents filled in the gaps. She was raised to have an appreciation of her culture and history. Proudly, she asserts, “My parents, for one, kept me very abreast of my culture.” She uses this to define herself as well as motivation to propel her forward during times of challenges. For Valerie, these messages of racial pride were clear and consistent resulting in a high self-esteem and an increased obligation to racial uplifting.

She states:

The reason why I’m into Social Studies is because my Social Studies teachers that I had… I don’t know if they saw something in me, but they would bring me books…outside of the curriculum, because they can only rightfully teach what’s in the curriculum. So when I was asking questions, they would highlight extra chapters for me, tell me to do a report. And I was proud to do it ‘cause I wanted to know.

Valerie’s knowledge of history as well as individual experience has made her assertive when it comes to recognizing and confronting injustices of any kind, something she has done since she was young. Her mother refers to her as a “right fighter.” This is a title Valerie proudly dons, as she shares that she refuses to “allow people to mistreat me or people that look like me to favor someone else unfairly.” This caused a great deal of trouble for Valerie while she was in foster care, as she routinely pointed out inconsistencies in treatment, especially as it related to race. Valerie contends that there were clear contradictions and expectations when it came to white and Black children placed in care. She identified the racism in the foster care system that existed from the initial contact with the court to placement in foster care:

When I would go to like stuff at the court… like little psych tests or evaluations or stuff like that, they babied the white kids it seemed like. Hand walked them through. Whereas,
it was kinda just me and the psychiatrist or psychologist or whomever and that was that.

It was just like an adult conversation that you’re having with a 15- 16- 17-year-old.

Valerie found this contradictory and confusing. It was hard to understand why White children would be viewed and treated as children, but the expectations were higher for Black children, resulting in less support. Valerie went on to share her experience while in Youth Village, a residential placement for foster children and juvenile delinquents.

At Youth Village, like the white kids got to wear what they want, got to do with their hair what they wanted, got to eat when they want, got to pass notes, etc. A lot of the girls were crocheting. No black girls crocheted. We weren’t allowed. They would explain it by saying, “Oh well, they’ve [the white girls] been here longer.” Like, many of the white kids in there were like criminals, like crazy criminals. They were there because they were serving a sentence not because their parents neglected them or they’re in foster care. They were there because they did this to themselves. And you mean to tell me, this criminal gets to have a needle to knit and sew and crochet and we can’t even have a razor to shave ourselves supervised. That doesn’t make sense.

Unlike Valerie, Lenna and Bridget view their blackness as a culmination of insurmountable hurdles that create an inner sense of inadequacy and shame. Like a cloak worn on a particularly windy day, they hold tight to their beliefs that Whites are somehow superior to Blacks. In fact, they are so resolute in their views that they fervently deny that there might be an alternate truth. To them, it is a foregone conclusion. They also share the same outlook that Whites do not suffer the same hardships as Blacks. Lenna states, “As a kid, I really wanted white foster parents maybe because of how I grew up.” She further shares, “It seemed like things were easier for them, and that’s what I wanted.” Bridget agrees that if she were white or even placed
with white foster parents “life would have been easier.” Lenna, shaking her head in agreement confirms, “I have always seen white folks have it easier than black folks.”

Lenna feels that the government has somewhat turned their backs to the conditions of poor black people as they “throw a lil’ stuff at us like food stamps knowing it’s not enough to help.” However, she also asserts that some of the problems that black people experience have a lot to do with their own decisions. She says, “White people…they raise their kids. They put them in schools. They put them in sports, activities. They teach them….they teach them more right. They raise em’ up better than what I have seen most black people do.” Bridget also shares her opinions in this area:

A lot of white people—they are more family oriented than black people. White people, they stick together with family better than black people do. You see more White people that can lean on each other than you do black people.

Gavi’s relationship with is racial identity is characterized by emotional ambivalence. While he does not harbor the same shame or contempt of being black as many of the participants, he associates his blackness with a deep sense of pain and pervasive lack of belonging. Being too dark skinned to be considered as white, yet too light skinned to be fully accepted by Blacks left Gavi feeling dejected throughout his childhood, as he could not be neatly relegated to either category. Extremely fair skinned with curly hair made him the target of jokes, relentless bullying, and overt physical attacks. At 11 years old, Gavi, like his peers, was too young to understand the deep feelings of inadequacies and jealousy that propelled others to attack or belittle him without provocation. He simply knew that is was hurtful. When asked to describe his experience, with nervous laughter, he begins:
Being light skinned was hard. It was like you was white in the neighborhood. It made us [Gavi and his brother] feel like outcasts… like we weren’t accepted because we were different. Kids were mean. We had to fight every day. And when you thought you had a friend, you find out later that they was talking the same shit about you like the other kids. So we fought constantly. It got so bad that I started hating my skin color and the curls in my hair. So I when I got older, I blew my hair out into an afro. I just wanted to look like everybody else.

Gavi’s identity confusion was further distorted by his mother’s penetrating rejection and his father’s disappointing absence. Consequently, he admits to regularly asking questions such as, “how come my mom doesn’t want me,” “why isn’t my dad around,” and “why do people pick on me for my color when I’m just like them?” Never discovering answers to his questions, the anger that he often suppressed began to bubble up to the surface, manifesting in aggression and defiance.

Carla paints an even more poignant picture of the disdain she holds for her own race that is shrouded behind disappointment, shame, and hurt. She admits that these feelings are a result of consistent mistreatment while placed in the care of her relatives. Carla’s facial expression is indifferent and her tone is angry as she states:

A lot of my feelings about black people come from my family situations. Like when I was young, they betrayed me. They stepped on me. They beat me. I guarantee if I would have went with a white person, I would have been successful and safe, because they have a humble spirit. Not saying all of them are like that but, the majority are like, “I'm so sorry about what you are going through.” “I'm going to help you.” They got their head on their shoulders right. Black people just don't care.
Friends and family members have accused Carla of trying to “escape her blackness” on more than one occasion. This is a statement that she neither denies nor confirms. However, her beliefs and discourse pertaining to African Americans clearly communicate her shame and dismay. Her desire to distance herself is most obvious in her choice for a mate. Carla is currently married to a bi-racial man, to which her family says, “You only married him because he’s mixed.” Although Carla says that there were other factors that contributed to their attraction, she does not bother to dispel their claims stating, “I would never date another black person again....I was so damaged because of black men.” Unwilling to explain her statement, she would only share that all of her experiences with black men have been negative. These cumulative experiences had a profound impact upon Carla’s developing self-identity as a young woman.

A child’s relationship and attachment with his or parents is at the core of his/her sense of identity (Bowlby, 1969/1982). Children who have secure attachments with parents or significant adults tend to fare better across multiple domains such as: academics, mental health, emotional stability, physical well-being, as well as identity development (Joseph, O’Connor, Briskman, Maughan, & Scott, 2014). For maltreated youth, this process is threatened as a result of broken and interrupted attachment.

The narratives above illustrate the impact of parental attachment or established connections with a significant adult on identity development. Positive and consistent parental messages regarding race and identity is critical in facilitating African American youths’ adjustment and healthy development (Neblett, Chavous, Nguyen, & Sellers, 2009). Messages of racial pride, self-worth, and cultural exceptionality are in an effort to counteract negative experiences associated with discriminatory practices (Fisher, Wallace, & Fenton, 2000) that may exist in everyday encounters.
Spiritual identity. Many youth in foster care identify an internal spiritual aspect of their being rooted in a personal relationship with a higher power (Jackson et al., 2010). During difficult times, spirituality serves as a protective and stabilizing factor that lays a foundation for positive youth development (Kim, McCullough, & Cicchetti, 2009). In fact, it is an effective coping mechanism that often helps provides a life guide for youth who have experienced maltreatment come to terms with some of their negative experiences, while managing their emotional pain.

When discussing approaches to confronting adversity, all of the participants in this study identified a spiritual relationship with God as being instrumental in overcoming life’s tribulations, directing their paths and providing them with comfort in their bleakest moments. Further, spirituality in many instances have served as a moral guideposts when choosing between right and wrong is difficult.

Gavi, the only male participant, has had recurring challenges since aging out of foster care that have extended well into adulthood. During these times, he finds that he has no one to rely on or call upon in a crisis. In these instances, God has been his only saving grace. He believes his faith in God and obedience to his word it what guides him and, in many cases, saved his life. Gavi offers an example of how his steadfast belief has in God’s power and omniscience has provided for him: “I have had situations like where I been hungry and didn't tell nobody, and out of nowhere somebody come and ask me ‘are you hungry sir?’” This and several other related incidences continuously confirm God’s presence in Gavi’s life.

This uncompromising love for God was first ignited while Gavi resided with his grandparents. His grandmother was steadfast in her Christian beliefs, and thus made him attend church every Sunday without fail. He shares, “She didn’t talk much about religion or faith, but if
I was knocked out sleep, she would wake me up and make me go to church.” Implicit in her motives were the hope that church could provide Gavi with a clear distinction between right and wrong and belief in a higher power. While regularly attending church, he eventually gained a great deal of knowledge about religion. However, he stated that his “experiences are what led me to God and prayer because you can’t rely on nobody else.”

Similarly, Karleen feels alone and isolated. She echoes the same sentiments of desertion as Gavi when she states, “I ain’t got nobody to call to help me.” This reality is especially pronounced when life becomes complicated. During these times, she feels an exhaustive sense of emptiness and isolation. She utters, “I just cry myself to sleep.” Spending most of her young adulthood without significant guidance and support, she has made countless mistakes. Under these circumstances, God has become Karleen’s ultimate rescuer and protector, as she stumbles through life’s inherent obstructions. On many occasions, she has reached out to others for help in a vulnerable state, only to be hurt and disappointed. Karleen states:

I don't really call on people when I need stuff because when it's my turn, it's like all the excuses in the world. So I try to find a way to get out of the situation that I put myself in. And what I mean by that is God has always blessed me, he listens to me when nobody else does answers my prayers. I'll tell that to anybody, and, they just laugh or whatever. Every time I go to God, I'm like “God, help me get out of this,” and he does. It might not be the way I won’t it fixed, but whatever it is he fixes it.

On the contrary, Karleen assigns culpability to the “devil” for most negative occurrences in her life. To this end, she fails to connect many of her choices to the outcomes and hardships that she encounters. She asserts, “Every time you do good, the devil messes with you.” Though
Some level of spirituality and belief in God is shared among all of participants. Lenna and Bridget both declare that “God and getting involved in positive things” has been instrumental in helping them reload after withstanding traumatic experiences. When feeling depleted and dejected, Lenna finds comfort in, “knowing God is with me.” Lenna seems to have found a quiet solace and strength in her relationship with God. In fact, in many ways, it has helped her make peace with her abusive past. Though she admits that she does not go to church as frequently as she would like, she states, “I pray and talk to God every day no matter what.” Even though she admits to not going to church, she feels that her personal relationship is sufficient as “God understands my heart, and you don’t need church for that.” This distinction between organized religion and one’s subjective spirituality is commonly made (Jackson, et., 2010). Spirituality allows for the creation of one’s individual relationship with God or a higher power without traditional guidelines of belief.

Bridget acknowledges that her friendship with Lenna has helped to strengthen her with God, as she has witnessed Lenna’s dedication to prayer and spirituality. Both young women confirm that, “God” is the most stable and consistent force in their lives and the guidepost they use to govern much of their actions.

**Lack of Belonging: Who Can I Run To?**

Frequent placement disruptions for many foster children make establishing a sense of belonging challenging. Once moved to the new placement, the foster child experiences a state of unrest, as he/she struggles with fitting in the new family, while still being loyal to his/her biological family (Kools, 1997). Although the effects of removal from parents may not be visible
in younger children, the results are no less injurious. The American Academy of Pediatrics (2000) asserts that children who are removed from their parents’ care between 6 months and 3 years of age are likely to experience emotional challenges as a result of their inability to appropriately bond with their significant care givers.

Hatcher and Stubbersfield (2013) assert that individuals who have a perceived lack of belonging have suicidal thoughts and attempts when compared to individuals who have a stable sense of belonging.

The timeframe varies for each child as some are removed from their families at an early age, while others are removed when they are adolescents. Regardless of when the child is moved, significant relationships, such as those with parents, siblings, extended family, friends, neighbors, and pets are severed, resulting in a negative impact on the child’s identity construction and sense of stability (Schwartz, 2010). This is critical as the family is at the center of socialization and identity development among adolescence, young children, and infants (Christerson, Edwards, & Flory, 2010; Kools, 1997). The family is the child’s first reflection of values, behaviors, and expectations.

While some of the participants in this study, identified a strong sense of belonging that they carried with them into foster care or established on their journeys, other participants had minimal to no ties with their primary care givers, extended family members or community. For these youth, establishing a sense of belonging was especially difficult particularly if their foster parents did not attempt to create a meaningful connection. Consequently, belongingness continues to be elusive even today.
This lack of belonging often leaves Gavi feeling like an outcast. Void of these much needed connections and assurances, he angrily questions through silent tears his value in the eyes of others:

It’s so many people that's around me that got that supporting factor they can always turn to. They got relatives or friends, somewhere to go, somebody to ask. And it's like when you face a situation where you ask the same people that's in yo' life that you think should do the same thing for you and you don't get it, you like “Damn, what the fuck is my worth that people don't want to fuck with me...that people don't want to help me?”

Gavi feels that most of his relationships with friends and family members are superficial and only based on what he can do for them. When times are hard for him, these same turn people turn their backs on him making him feel insignificant. This has left him bitter, distrustful, and intolerant in most relationships. Unwittingly, Gavi’s pervasive mistrust thwarts his ability to maintain meaningful and supportive connections as he quickly walks away from relationships out of fear of disappointment and abandonment.

Similarly, Rita has always felt as if she did not belong anywhere. These feelings are deeply rooted in her abhorrent childhood treatment. As a result, she is hypersensitive to potential rejection. She shares that almost everyone she has loved has, at one time or another, “put someone else before me.” Consequently, Rita, like Gavi, approaches most relationships with trepidation and premature expectation of disappointment. She constantly worries that “people are talking about her.” This is a reflection of her internal thoughts of inadequacy and residual effects of the emotional and physical abuse she endured while in foster care. Rita offers two memorable events where she felt the painful sting of rejection:
My godmother and me…we was real close. And like, we'll be talking one minute, then she'll have some friends come over or something. I'll ask her something, then she'll just like...change...like...like she bi-polar or something. She would just get mad at me for no reason. And then another time, I lived with my sister’s foster parent and it was another girl in the home. She was like 13....we was fighting over the remote control, so we ended up having a physical fight. And then one of the other girls had instigated the fight so all of us got to fighting. And that girl been with the lady since she was little, so of course the lady took up for her. So, she put me out even though none of it wasn’t my fault.

Like, Gavi the lack of belonging coupled with rejection has left Rita feeling unloved and not devalued. Placed with relatives who routinely abused her emotionally and physically for the majority of her childhood, she never felt significant, special, or even “normal.” Though they provided her with the fundamentals (e.g. food, shelter, clothing), they did little to nurture or attend to her emotional needs. In fact, they treated her more as an imposition and inconvenience that had to be painfully tolerated. Even though Rita was only 12 years old, these negative attitudes were not lost on her. Eventually, she began to turn her inner torture outward as she developed a characteristically “mean and angry” demeanor, because “I was not getting no attention.”

Much of this anger is directed towards her mother who has been a major disappointment throughout her life. Though she was absent for most of her children’s childhood, she has no interest in amending her transgressions. Rita believes her mother is severely neglectful and cold for not attempting to atone for the limitless mistakes she made as a mother. On several occasions, Rita has asked her to babysit or look after her children for a short period, to, which her mother complains, or outright refuses. Rita states, “I feel like...like...she should just take care of her
grandkids and make up for what she didn’t do for us or the time she didn’t get to spend with us.” Rita’s mother does not share the same belief and feels that her children, especially Rita, should “just get over it.” Unsurprisingly, Rita has been unable to “just get over it,” and therefore continues to internalize the abysmal sense of abandonment that manifest itself in the form of ineffective relationships.

Rita would possibly be able to tolerate her mother’s insufficient parenting and nonexistent love if she at least had a meaningful connection with her father. She would, at least, share some commonality with the man responsible for her birth in hopes that he would somehow give importance and credibility to her otherwise inconsequential existence. She admits that even as an adult she longs to find her father who she says “lives somewhere in Pittsburgh.” Rita has questioned her mother on numerous occasions about her father’s identity, but her mother says that she “doesn’t know his last name.” Rita finds this embarrassing and appalling, as her mother has had children with four different men. Rita shares:

She [my mom] said, she know him but…..Well, everybody know they daddy except for me. She know him, but she don't know his last name because when she was pregnant with me, she thought I was my stepdad's which is my sister daddy. Both me and my sister got the same last name which is his last name, but I ain’t his. That’s fucking horrible.

The fact that Rita is the only one of her siblings who does not know her father is another chink in her already fragile armor that causes her to feel inconsequential. Nevertheless, she attempts to harness all the strength that she has to define and create in her own world a sense of belonging with her young children.

Customarily physically and mentally abused by her foster parents, Lenna has difficulty defining what it means or feels like to have a sense of belonging. To her, it seems as if her foster
parents gained some type of perverse satisfaction out of treating her like an outsider. They would
regular refer to her as “the foster child” in the presence of others which horrified and Lenna to no
end. Not only was she crudely labeled, but she was treated accordingly. Lenna indicated that she
was treated in an obvious manner “different from the foster parent’s children” regardless of
whose home she was placed in. She was verbally taunted, emotionally disregarded, and
physically abused. Further, she was constantly abased for the most minor of infractions. When
assaults were not being hurled in her direction, she was virtually ignored.

The foster parents’ lack of concern regarding Lenna’s well-being and development has
resulted in irreparable damage to her self-esteem as well as stymied her academic progress. As a
result, she always felt insecure, as she wholeheartedly believed herself to be inherently “dumb
and stupid.” Lenna shares, “None of my foster parents helped me with school or even went to the
school to see how I was doing.” Today, she struggles to complete her high school education, still
missing the support and assistance she so desperately needs. In this moment, she looks back over
her life with teary eyes filled with sadness and regret wishing she had better parents or better
foster parents, she mumbles:

If at least one person took the time to sit down with me and be like, "Look, we bout to all
sit here and do homework" instead of saying "I'm going into the computer room with my
biological daughter, and I’m going to help her, but you are on your own.” This would
have made a big difference for me. Those words were hurtful and mean. And I started
thinking, if nobody cares, why should I?

Naturally, Lenna’s self-identity is delicate, as she states in a somber honest tone, “I
honestly don’t know who I am.” As she makes this poignant declaration, her face bears mixed
emotions of embarrassment and confusion. Without significant connections and guidance, Lenna
is aware that she is extremely vulnerable as she often looks for a sense of belonging and importance in the men she dates. This has been fairly unsuccessful to say the least as almost all of these men have taken advantage of Lenna in some way. She shares a particularly disappointing incident with her daughter’s father, who she broke up with shortly after the child’s birth:

I was being stupid thinking he loved me. So, he came to me the summer before last....I have a good heart, and I love fast, and I care fast about people. And I feel like I gave him all of me too quickly, and then once he seen how gullible I was, he stole everything out of my house, and I let him come back after that. I forgave him. I said, “Well, God said forgive.” So, I was just thinking like that. I forgave him and then once he knew I forgave him, he made me a promise. But he came in and attacked my mind by making promises. I went for everything, and he used me again.

Beating up on herself for her choices and holding herself accountable for her boyfriend’s actions, Lenna states, “I just accept anything.” In a further reflective tone, she states, “Nobody never raised me to know how to really deal with people, so it seem like I get with the wrong people over and over again.”

**Lack of Preparation for Adulthood: The Challenge to Overcome**

Research has confirmed that youth aging out of foster care face numerous challenges that often lead to negative results such as incarceration, substance use, multiple pregnancies, unemployment, homelessness, lack of education, and poor physical and mental health (Greeson & Bowen, 2008). Upon termination, many aged out youth are completely unprepared for independence. In addition, they invariably lack sufficient support systems after being emancipated to guide them through this difficult transition (Collins, Paris, & Ward, 2008).
Despite the different reasons the participants entered care or the length of time spent in the child welfare system before being discharged, all eight participants noted feelings of confusion, anxiety, fear, and apprehension when the time came for them to be terminated. In addition, all eight participants indicated that their transition was difficult even though they were placed in independent living programs to prepare them to live on their own. Unfortunately, these programs did little more than provide cursory trainings that failed to include practical application. Karleen illustrates the point, stating,

They [the workers] gave me budgeting and stuff, but at the time when you young, it just go in one ear and come out the other. I didn’t really pay attention until I actually had to live it. I think they was giving me too much to the point that I didn’t really take it seriously like I do now.

Most of Karleen’s independent living training was theoretical in notion and missing practical application. Thus, she lacked essential understanding of the presented concepts. In fact, once terminated from the system, she was confused and struggled tremendously and wished she had paid closer attention:

At the time when you don’t really have that stuff [bills and responsibilities], you don’t understand how it goes. If I woulda had my own apartment, I woulda been like “Oh, ok, that’s how you do it.” If I had something to really visualize it, at the time, I coulda started connecting the dots like I can now.

Armed with only the information she learned while in foster care, after emancipation, Karleen attempted to manage the expectations of caring for a household. Consequently, she learned most things by trial and error which came as a tremendous cost to her self-worth and sense of stability.
Angrily, she asserts, “I hate depending on people and needing things, ‘cause whenever I need somebody, nobody’s around.”

When faced with real world situations, Karleen had little knowledge and personal resources to draw upon to solve the many challenges she encountered. With no one to turn to for guidance and support, Karleen divulges that things “became difficult,” and she made many mistakes resulting in periods of hunger and homelessness. Six years post-emancipation; her life is not much different from when she was first discharged from the foster care system. Stable housing and secure employment continue to be problematic. Thus, Karleen continues to drift from place to place, hopeful that the hard lessons she has learned from previous mistakes will eventually turn the tide.

Lack of preparation for independence is a constant theme articulated by all of the participants. Rita was discharged from the foster care system without any warning. Like the majority of youth who grow up in foster care, she had no inkling of how she would financially provide for herself sans support from the foster care system. Social workers charged with these tasks were inconsistent and indifferent. She stated, “The worker just signed me up for the [independent living] program, and then she told me they was gonna give me a check.” Rita became accustomed to receiving the bi-weekly stipend with only minimal expectations on her part. She stated, “I only had to go every two weeks just to hear what they [independent living facilitators] was gonna be talking about. Like they used to talk about jobs, hiring, something like that.”

Her experiences devoid of hands-on teaching, Rita confesses that she hardly retained any of the information provided during the life skills seminars. In addition, without expressed guidelines and direction from the social worker assigned to her case, she used the money to buy
things she wanted instead of what she needed. As expected, most times she ran out of money before the next check was distributed. Therefore, she was unable to establish and savings and had no practical knowledge regarding how to manage, budget, or save money upon her discharge.

Pregnant with no money, support, employment or stable housing, reality created an immediate panic reaction once she was terminated from care. Rita states, “I instantly started crying, because they didn’t tell me nothing other than I was done.” Rita had burned bridges with many of previous foster parents because of her “attitude,” so she could not return to them for support. Looking desperately for her mother to come to her rescue and make up years of abandonment, her mother allowed her to stay in her home only temporarily. Dismally, Rita shares,

I only stayed with my mama for like a three days because she kept on telling me to call the shelter knowing I didn’t have nowhere else to go. I knew she wasn’t gon’ let me stay with her even though I was pregnant. So I end up calling the shelter. Then I went there, and she let me. What kind of mama is that?

Currently, Rita resides on her own with her son who is a toddler. She continues to struggle to make ends meet, relying on “food stamps and Section 8.”

Carla’s road to adulthood was equally as difficult. However, through independent living services, she received support with obtaining her first apartment, but she was not mentally equipped with the tools to effectively “maintain a home.” Carla was excited by the prospect of having her own place, as she had spent many years feeling like a burden or simply out of place. However, being on her own was extremely intimidating. Equipped mostly with skills she learned haphazardly, Carla knew that her task ahead would be perplexing. She shares:
I was tired of living with people and people telling me what to do. So, I was ready to live on my own. I just didn’t know how to budget so my money didn’t run out. I was scared, but luckily I had my husband and we moved in together. That helped a lot. So, I didn’t have to figure out everything by myself. To this day, I still really don’t know a lot about cooking and budgeting, but I do my best, and even with my husband, we run out of money. These programs need to do more to help these kids, cause how they ‘spose to know what to do when they don’t have nobody. This would have been much worse for me if I had of been alone.

Gabriele was emancipated from the foster care system shortly after she went away to college. However, without critical support and guidance, she eventually flunked out of school. I had a full ride to Midwestern University, but you know, just being up there with no guidance, and finally free, you like, should I go to class or should I go shopping or do this or do that? Of course me being young, with nobody over me telling me to go to class, I would go shopping or out to eat or whatever. Wake up, eat some cereal. Go back to sleep. Some days I was focused. Some days I was not.

Today, this is one of Gabriele’s biggest regrets, as she still has not completed her bachelor’s degree. She takes a “few classes here and there.” However, working full time and caring for her young son prevents her from returning to school full time.

Once terminated from the foster care system at the age of 21 and no one to turn to, Bridget admits to being crippled with fear. Remembering the magnitude of that moment, she states,

Immediately after I was out the system, I began to worry…Where is my next meal coming from? How am I going to provide for myself? How am I going to survive? What
am I going to do? Where am I going to stay? Where am I going to go? Am I going to be homeless for the rest of my life? Am I going to be out here street walking, and get raped or killed? It was just...back then...literally it was a lot?

Unexpectedly, these complexities catapulted Bridget into a world of uncertainty. Her living conditions became tenuous almost immediately as she was put out of the home she was residing in upon her termination. Subsequently, she began living from house to house and “eventually began travelling and got into trouble.”

Bridget took a job with a sketchy company that relocated its young employees to other states to sell magazines door to door. After she realized that this would not pay enough money to sustain her, she began dancing at strip clubs and writing fraudulent checks to make money. Bridget feels that she would have likely made better decisions if she were more prepared for life’s challenges. Although she does not blame the foster care system for her lack of readiness, she wishes they would have done more to prepare her.

Gavi, who shares similar sentiments, also found himself in a state of vulnerability, and upon discharge only able to rely on his older brother who was also contending with his own financial and housing struggles. Since emancipation, Gavi has struggled to complete his high school diploma, maintain viable employment and secure stable housing. He shares,

After I stopped receiving services from the state, you know, from being in the custody of the courts or whatever, I felt alone. And so I branched off to my brother because I knew if I didn’t have nobody else to turn to or whatever, I could try to turn to him, and see if he’ll have my back. Other than that, if I didn't have him and if I didn’t have the right mindset to make it out here, I would be on the streets.
The “mindset” that Gavi refers to above includes engaging in a variety of petty criminal offenses out of necessity. Some of these have resulted in small stints of jail time and a criminal record. He also sold drugs, for a short period, out of desperation after having difficulty locating employment:

So after I got out the system I lost my job, and I couldn’t find no work. So, one day, my brother's friend came in, and he was selling drugs at the time and he was trying to get my brother to do it. So, me being younger than him and wanting that experience, and needing that experience because I need the money right now...I'm not working. I'm like, “I'll do that shit.” It was basically like 10% of whatever I brought in. And 10% ain't that bad when you selling drugs, because some days you could make $3,000 in just 12 hours.

That’s $300. That's some people whole check in a week.

This method of acquiring money did not last long as Gavi grew increasingly paranoid of being placed in jail as well as fearful of the consequences of this type of lifestyle stating, “I got tired of always looking over my shoulders.” Shortly thereafter, he was once again without enough money to support himself and homeless.

During periods of homelessness, Gavi would reside in shelters or with various friends. Currently homeless again, Gavi dreams of one day being self-sufficient. He feels that if he had just a little support, his goals would be much more feasible. Previous legal issues continue to create barriers and present further financial challenges. At times, circumventing these obstacles appear almost impossible. He says:

I need the right people around me, people who are doing things ... that's...that's sharp like iron to sharpen my iron. I'm just trying to get to a point where I can financially support
myself to where I can get a place. That way I can go pick up my kids, take them out places, take them over my house, let them spend the weekend.

As mentioned previously, all of the participants in this study contended with various levels of readiness for adulthood. Regardless of where they fell on the continuum, their realities paint a depressing picture framed boldly by an ineffective system that ultimately failed them. Sadly, the majority of them remain pessimistic about their life outcomes given their current situations. The lack of family, nurturing, and a supportive adult, has resulted in their late process of growth and development.

**Poverty.** Poverty impacts millions of Americans throughout our country. In fact, nearly 15.4 million American children live in families with incomes below the federal poverty level (Jiang, Ekono, & Skinner 2016). This number has increased dramatically as reportedly, there were approximately 13 million impoverished children in 2006 (Addy & Wight, 2012). These children often reside in families and/or communities where they are exposed to a multitude of societal ills such as, substance abuse, domestic violence, community violence, unemployment/underemployment, single parent homes, child abuse, and lack of academic achievement (Ortiz & Briggs, 2003). Children in these environments are often more likely to become involved with the child welfare system than other children. In addition, they are also more likely to experience difficulty in school, behaviorally and academically, ultimately leading to academic failure (Bigelow, 2006).

Seven of the eight participants resided in poverty prior to placement in foster care. For some, these conditions led to their placement in foster care. Karleen, who lived with her grandmother and great grandmother remembers vividly the dilapidated and hazardous home where she and her brother spent a portion of their childhood:
The house was condemned. Literally. The lights and stuff was cut off and we literally had 
like a hole in our roof. There was no heat which was a problem in the winter time. You 
know how you cook in the little metal bucket, well they put charcoal in it to make sure we 
kept warm. We would all get around it like we was at camp. And, the smoke would 
go up because of the hole in the roof. It was a real poverty situation. The house needed to 
be tore down. And the rain had started, like, falling in, and we would get the smell from 
it. That's what really made the house bad. Not so much the outer, but just the inner of it. 
And then it needed to be updated, painted, and all of that. The porch started caving in. It 
was horrible.

Karleen conjectures that members of the church where she and her family regularly attended 
alerted Children’s Protective Services about their concerns after continually smelling charcoal in 
their clothes. Child Protective Services investigated the claims, and witnessed the disrepair and 
paucity of the home. Subsequently, the children were removed and placed in foster care.

Sadly, Carla and her siblings share a similar story. Through much of their childhood, they 
lived without basic necessities as a result of their parents’ incessant substance abuse issues. 
Trading in their parenting responsibilities for the next high, Carla’s parents were rarely home to 
care for their children. Most of the time the children were without adult supervision and left to 
their own devices. As such, fighting was a common occurrence among the siblings, resulting in 
broken and damaged items. This helped to further erode the already ragged home. Carla admits 
that their home was terribly “filthy” and uninhabitable. She shares that visitors were never 
allowed inside because she was mortified about their surroundings. Still embarrassed, Carla 
slowly states, “We had holes in almost every wall. The paint was chipping. We had roaches…so 
many roaches, and broken and dirty furniture. It was bad.”
The majority of the participants continue to live under impoverished circumstances in their adult lives. In fact, Gavi and Karleen were homeless at the time of this study. Karleen resided with a boyfriend who cavalierly asked her to leave one evening after he met another woman he was interested in. Having nowhere or no one to turn to for help, the next day she was in homeless shelter.

Similarly, Gavi has experienced periods of homelessness since exiting the child welfare system. He has spent the past several years living in with friends or in shelters, never being stable enough to get a place of his own. He states, “I’m so sick of living with people cause when they get tired of you, they put you out like trash.” Though this is a harsh and sobering existence, Gavi seems clueless as to how he can end this cycle of dependence on others.

To further complicate financial matters, seven of the eight participants have young children. Of the seven participants, five are parenting without any financial, emotional, or physical support from the other parent. Their lack of preparation for adulthood as well as the added expectations associated with parenting only serves to create more stumbling blocks for these individuals.

Gavi, the only male participant, does not have full responsibility for the care of his children, as they reside with their mother. Therefore, the financial burden of the care does not fall upon his shoulders. However, his inability to effectively provide for his children constantly disaffirms his manhood and leaves him feeling ashamed and insufficient as a father. As a result, he seldom sees his children. Out of embarrassment, Gavi delays physical parenting of his children until he feels financially stable in his ability to provide. He shares:

I want to be in a position to where I can do for my kids the way I want to, because me as a father, I wanna be in my kids' life every day. I don’t wanna be there for the weekend,
just when I got money. I want to be there all the time. But when I have money, I feel more, more, good to be around them because they see that dad can provide for whatever they want. And they can grow up with that, saying anytime I was around my dad, my dad gave me what I wanted or what I needed. That's the kind of father I want to be.

Gavi’s value placement on money and material items over physical and emotional support of his children is driven, to a large degree, by his children’s mother. She consistently questions his masculinity and ability to father as he typically is unable to help her provide for their children. In her mind, this has diminished his worth and usefulness in her life as well as the children’s. Gavin understands this and responds simply by staying away. He states, “It’s like the other person you made the kids with, sometimes they would rather you come around with money, or don’t come at all.”

Carla, the only married participant, shares the responsibilities of parenting her two young children with her husband. However, they still have dire financial issues. At the end of many months, they rarely have enough money to fill the gas tank of their 15-year-old car. This creates a cataclysm of issues that place them in a precarious state. Moreover, they rely heavily on food stamps to feed their family. Carla and her husband are completely unprepared financially for any unanticipated hurdles. During one of our interviews, Carla was visibly preoccupied and stressed, sharing,

I’m sorry I’m having a hard time focusing, but our car broke down, and we don’t have the money to get it fixed. And on top of that my Bridge card got cut off, and I was planning to go to DHS to talk to somebody about it. This is a bad time cause we ain’t got hardly no food in the house. I don’t care about eating, but my kids have to eat. I told my
husband we might have to breakdown and go to our church and ask our pastor for help. That’s all we got. It’s just a lot right now…. 

Emerging adulthood is a relatively recent term that identifies the stage between adolescence and adulthood (Arnett, 2004). This period between the ages of 18 to 26 is marked by self-exploration and personal growth. Most youth are able to leisurely enjoy this seemingly slow stroll to adulthood as they continue to be financially and emotionally supported by their parents. In fact, a significant number of young people are waiting much later than they were 50 to 60 years ago to move on their own and assume adult responsibilities (Furstenberg, Kennedy, McLoyd, Rumbaut, & Settersten, 2004).

The reasons for this elongated trek to adulthood are numerous and legitimate. Shifting economic forces, escalating living costs, and difficulty obtaining jobs that offer sufficient wages has delayed young adults’ ability to move towards self-sufficiency expediently. The road to adulthood for youth aging out of the foster care system if often unpaved and lacking significant markers of support. These youth must generally confront challenges on their own with little or no support (Berzin, Singer, & Hokanson, 2014). Unfortunately, the transition is not gradual or long enough for adequate preparation, especially when compared to youth who have parental support. Aged out youth who are fortunate enough to have a less cumbersome transition typically have support and guidance from family members or a significant adult in their live (Cushing, Samuels, & Kerman, 2014).

Conclusion

Emergent themes in this chapter exemplify the residual consequences of child maltreatment that overwhelm the daily lives and well-being of these young adults. Participants articulated that they have experienced a lack of belonging particularly in many of the foster
homes they were shuttled to and from. In addition, some of the participants have a very confused sense of identity stemming from multiple placements, lack of significant connections, and severed family ties. Lastly, all of the participants identified an ever-present fear after they were terminated from the child welfare system. Without appropriate connections, resources, and skills the majority of participants found that they were ill-prepared for the challenges of adulthood. Consequently, many of them currently struggle with poverty, homelessness and unemployment. Chapter 7 will introduce study findings, recommendations, and conclusion.
Chapter 7: Discussion, Conclusion, and Recommendations

This research explored the experiences of young black adults who have aged out of the foster care system. In an effort to understand the many elements that contributed to their overall trajectories, the study sought to examine the articulated aspects of their lives that influenced their success or failure on their path to self-sufficiency and adulthood. This study was purposefully focused on young black adults as they have been disproportionately placed in the foster care system, remain in care longer, and subsequently age out ill-prepared and at alarming rates. In addition, their racial and ethnic differences are often unaccounted for or disregarded in the literature. Instead, they are broadly represented as if their experiences are identical to their white counterparts. While many aspects of the aging out process are similar regardless of racial and ethnic composition, there are differences that deserve to be individuated, recognized, and understood.

To address this gap, this study provided a space for the voices of eight young black adults to be attentively heard for the purpose of expanding our understanding of their lived experiences in the context of placement in foster care and aging out. Particular attention was given to the ways in which they identified and exhibited resilience on their respective journeys. As the researcher, I was particularly interested in the central research question: How does resilience influence the life experiences of emancipated youth? The findings revealed the existence of significant gaps and inefficiencies in policy and practice throughout the various points of the child welfare system. Given the pervasively negative outcomes experienced by emancipated youth, the findings of this study may be helpful if used to inform new policies and practices for this vulnerable population.
Looking Through the Lens of Maltreatment

During the delicate and impressionable period of childhood, the participants in this study have suffered unimaginable acts of abuse that damaged their development and shaped their young adult lives. Although their placement in foster care was a result of abuse and/or neglect, the findings of this study uncovered that many of the participants were also abused and neglected in the foster and relative homes where they were placed. In fact, in several cases, the treatment they received was far worse than the homes and families from which they were removed. Several of the participants actually described the caregiver as “evil.” This deserves a great deal of attention as the articulated goals of the child welfare system focus on providing a safe and stable placement for foster children (Colton & Williams, 1997). Yet, this is completely inconsistent with reality.

Further, the majority of participants in this study resided with a relative at some point during their placement in foster care. For several, these placements were painfully harmful and counterproductive to their well-being. Routine physical and verbal abuse, intimidation, rejection, isolation, neglect, and degradation characterized their experiences while living with relatives. Black children are disproportionately placed in relative homes, as it is believed that these homes are more beneficial to the child as they are familiar and allow for the continuity of relationships (Hegar & Rosenthal, 2009). Although studies are mixed regarding the benefits of kinship placements, participants in this study are a clear representation of the many unchallenged disadvantages that accompany placement with relatives. There was often minimal to no monitoring from foster care workers, leaving these youths voiceless, powerless, and susceptible to unending mistreatment. There is a great need for research that attends to the child abuse in
foster and relative homes, as well as the quality of the homes that are licensed to provide foster care services (Zuravin, Benedict, & Somerfield, 1993).

Consistent with the literature, child maltreatment results in enduring life consequences. All of the participants in this study were victims of multiple types of maltreatment that varied in duration and intensity. The long-term effects of these experiences continued to intrude upon their daily lives in ways that they often found hard to articulate and understand. Unconsciously, they filtered life through lenses shrouded in abuse. For example, Rita’s low self-value resulting from unaddressed sexual abuse, abandonment, and perpetual physical and verbal abuse placed her in a vulnerable position, especially with men. As her adulthood and childhood have been marked by abuse, Rita expected to be mistreated and anticipated disappointment in her personal relationships. When discussing the poor treatment, she received from men, Rita seemed numb as she responded in a casual way: “That’s just how men are.” It does not occur to her that her views might be deeply distorted.

Many of the participants blamed themselves for their conditions, and therefore, they turned their frustration and feelings of defeat inward as if they were somehow inherently deficient and broken. The abuse and the abusers have powerfully shaped their sense of self. This has resulted in intermittent cycles of helplessness and pervasive self-doubt that has made adulthood difficult on many levels. These findings are critical in that they point to information that may help foster care workers and foster parents interrupt the cycle and empower these youths in meaningful ways that manifest in their adult lives.

Looking Through the Lens of Trauma

All of the participants in this study experienced residual effects of unresolved trauma as a result of child maltreatment and subsequent traumas. Wounds from the past that arose from
disrupted relationships with significant adults as well as lack of attachment to maternal caregivers have continued to fester, bleeding out as evidence of pain that has not been adequately resolved or attentively and supportively confronted. Consequently, this played out without warning in adult relationships, as seven of the eight participants have entered unhealthy adult associations that have been largely abusive, controlling, and demeaning in nature. After failing to make the connections between their past history and present choices, the participants admitted they continue to attract the same type of partners in relationships.

Lenna has repeatedly entered relationships with men who reinforced her lack of self-confidence and feelings of inadequacy. They invariably took advantage of Lenna’s gullibility by convincing her to let them move in her home or loan them money they have no intention of returning. Each time she made fervent promises to herself it would be the last...and it was, until the next time. Carla has a similar story of abuse that has resulted in her total lack of trust in people. Constant abuse has made her emotionally dysregulated, as she has periodically thought of suicide.

Although most participants were able to contemplatively articulate their issues, they lacked confidence in their ability to make changes in their best interests. Further, all of the participants expressed disinterest in seeking therapy to help make sense of their problems. Years of forced counseling and counselors who gave only cursory attention to their mental health needs left participants feeling as if therapy was unhelpful and pointless.

Looking Through the Lens of Belonging

The majority of participants in this study did not identify a strong sense of belonging while they were placed in foster care. Several participants such as Gabriele, Valerie, and Karleen were fortunate enough to find at least one foster family that created a sense of belonging. These
three young women identified foster mothers who treated them like family members instead of foster children. These foster homes provided them with a sense of attachment, stability, and family in the absence of their own. Characteristics of these families were unlike others where they had been placed. Established routines, celebrations, special gifts, recognition of birthdays, acceptance of biological parents, and consistent family activities helped them feel like more than just foster children—an embarrassing and isolating label they found hard to escape.

Other study participants reported never finding a sense of belonging as a result of perpetual abuse and denigration of their bodies and self-esteem. To this end, every home that Lenna was placed in seemed to launch an unfettered assault on her being. She was the receiver of relentless messages and actions that callously conveyed her worthlessness. As a result, Lenna always remained on the fringes of any home where she was placed void of necessary emotional and supportive relationships. Most times, she would simply withdraw as a means of protection and insulation, no longer desiring to belong out of fear, disappointment, and hurt.

These participants also experienced multiple moves and failed to establish meaningful connections along their journey. With each new placement came new people, rules, values, and expectations. Obvious differential treatment between them and the biological children by some of the foster parents also subtly communicated their lack of value and position in the foster home, as evident in the cases of Lenna, Rita, and Carla. As a result, they often retreated into themselves as children and adolescents, suffering quietly inside, until they were moved to the next home. These participants still lack a sense of belonging as adults and articulate a deep pit of loneliness that they have been unable to fill.

Findings also uncovered the role of race in how these participants viewed their sense of belonging. The majority of participants saw their race as something to be ashamed of, as well as
a burden they must unfortunately endure. In fact, many attributed their lack of success to their own blackness, being born into Black families, living in black neighborhoods, given black names, and subsequently placed with Black families when removed from their homes. To them, this perceived racial deficiency was an inescapable albatross that continues to lessen, if not ruin their chances of success. This finding should be further explored as identity is a significant factor in enhancing the success of these youth. In this case, racial identity was perceived as more of a liability than asset. More research focused in this area can help the foster care system critically examine its processes that are responsible for developing the cultural well-being of Black youth as well as those of other ethnicities. These findings suggest that a system that fails to treat the children and families it services with racial and cultural sensitivity is, in fact, doing a disservice to their overall well-being.

**Looking Through the Lens of Independent Living**

Emerging adulthood is a phase that allows a longer time period of identity exploration for young adults before they are expected to assume full responsibility for themselves (Furstenburg, 2010). During this extended phase, young adults find themselves relying on their parents for financial and emotional support much longer than in past years. Youth aging out of foster care are not afforded this opportunity. Instead they are discharged from the child welfare system between 18 and 21 years of age often without necessary support to ensure their success. As a result, they struggle immensely to gain a secure footing. Only two out of the eight participants had families that they could turn to after emancipation from foster care. The other six participants found themselves on their own and ill-prepared for their newfound independence. All of the participants agreed that the independent living programs charged with preparing them were completely deficient. Although these programs teach important skills, they are not coupled
with practical application. The lack of preparation has left all of the participants learning things by happenstance, and some of the lessons have been hard and reinforced negative patterns of self-esteem and problem-solving. These findings are consistent with extant literature that highlights the deficiencies in independent living programs and the subsequent lack of preparedness for adulthood across all youth who age out of the foster care system.

To further complicate matters, seven out of eight participants were parents to young children. Parenthood created another layer of complexity for these individuals as they attempted to navigate the difficulties of adulthood. Gavi, the only male participant, was a father of 9-year-old twin boys. He shamefully and regretfully admitted to being an inconsistent parent, but he felt he had no other alternative, as his current financial situation did not allow him to parent. Thus, he has missed major developmental milestones in his children’s lives and their relationship with him was strained.

Carla, who has been married since she was 19 years old is the only one out of the seven participants who had a husband who assisted in the financial and physical care of the children. Although she admitted that parenting was harder than she anticipated, she shared that she simply could not imagine doing it on her own. The remaining participants were raising fatherless children. Though they admitted the task was overwhelming and frustrating, they seemed to have little expectation of the men with whom they intimately shared themselves and have stoically accepted their absence, ignorant of the enduring impact it will have on their children as they age. For many, the relationships ended before or right after the children were born. All six of these participants had children with men who are emotionally, mentally, physically, and financially unequipped to be fathers. These findings are consistent with literature that identify the increasing numbers of children growing up in households without fathers (Wilson, 1989; Choi & Jackson,
2012). Unsurprisingly, the lack of fathers further erodes the financial stability of the home. Children residing in single-parent headed households make up the majority of the poor children in this country.

**Looking Through the Lens of Resilience**

Participants in this study have experienced multiple traumas throughout their lives beginning at early ages. These experiences continue to influence how they view themselves, the world, and their place within it. Several participants continued to harbor deep-rooted anger towards their parents and indiscriminately blamed them for their difficult childhoods and the challenges they continued to experience. Emerging from the study was the disturbingly cavalier responses that many of the parents articulated when confronted by their children. Without exception, they implored their adult offspring to move beyond the past while refusing to offer so much as an apology for their wretchedly inadequate parenting. In spite of the consistent lack of parental guidance, attachment, and love, these participants continued to display remarkable internal fortitude as they encountered difficulties they frequently overcome on their own.

The stories of each of the participants indisputably reflected the presence of resilience. Yet, scholars have long questioned the existence of resilience in maltreated youth considering the various operationalized definitions. For example, some studies measure resilience by efficiency in at least one of four domains (e.g., peer acceptance, internalizing, externalizing, and academic achievement) without doing poorly in the other three (Luthar, 1993). Other studies utilize definitions that identify the number of protective factors versus risk factors as indicators of resilience (Cichetti & Tucker, 1994). This is interesting as one would assume that individuals who have endured less traumas and challenges would, of course, have more protective factors in place. Thus, these protective factors have served as effective buffers against negative
occurrences. Conversely, maltreated youth would likely have a higher level of risk factors than protective factors, thereby predisposing them to more risks and traumas. To this end, studies have indicated that the presence of resilient functioning is low in this population (Cichetti & Rogosch, 1997; Farber & Egeland, 1987; Herrenkohl et al., 1994). Although researchers have consistently challenged the notion of resilience in a manner that seeks to broaden rather than limit its recognition, the restrictive nature of these definitions make application difficult in this context. Consequently, it is difficult to view these young people as resilient especially when attempting to evaluate them by the conventional definitions of resilience.

Costs of resilience. When considering the evidence of resilience, there is often a laser sharp focus on one’s ability to “return to normal” (Masten, 2001) or “bounce back” (Janas, 2002) after exposure to traumatic incidents. As a result, recovery is prematurely identified by the presence of concrete indicators that mark positive adaptation such as academic achievement, healthy relationships, successful employment, and internal locus of control. These qualities are assessed without bearing in the mind the actual long-term costs of trauma on the individual. This suggests the need to look beyond the individual’s current state or adaptive response in the face of adversity to what is actually compromised and sacrificed over time as a result of traumatic events (e.g., sense of safety, confidence, emotional regulation, relationships, health).

Participants of this study have endured cumulative traumas throughout their lives. Although their ability to recover after these events signify a noteworthy level of resilience, the long-term impacts of those events are often forgotten. Carla, for instance, has experienced multiple traumas that resulted from living with drug-abusing parents and later placement in foster care. These events have left lasting impressions on Carla’s life that are displayed in her mental health. Although she was attending school, working, raising two children, and
maintaining her marriage, she continued to withstand frequent bouts of depression and have periodic thoughts of suicide. These outcomes are unknown as they are intentionally hidden out of sight from people who are not part of her innermost circle. Consequently, Carla suffered in silence as keeping a brave front was important to her. She considered visual displays of distress to be signs of weakness that outwardly communicated to others that she has allowed her circumstances to get the best of her. Instead she attempts to ignore or minimize her pain by often explaining it away.

While attempting to help children build resilience to successfully confront life’s challenges and potentially traumatic events, it is imperative that foster parents, case managers, therapists, and doctors pay close attention to the residual costs of trauma that are not always noticeable to the naked eye. These elements lie dangerously beneath the surface and are manifested in many ways (e.g., depression, anxiety, risky behaviors, sleeplessness) that leave them largely ignored.

**Expanded model of resilience.** As a result of this study and the decided disadvantages that these young adults confront on a routine basis, I propose that the definition of resilience be expanded beyond the narrowly focused boundaries of protective and risk factors. Given the tremendous number of challenges these youths have encountered beginning at very young ages as well as those they continue to face in their respective young adult lives, it is clear that they are resilient. In fact, the participants collectively identified their resilience by choosing to continue living instead of taking their own lives. When reflecting on the many negative experiences they have withstood, all of the participants indicated that suicide would have been a viable solution; one that several of them had seriously pondered. Thus, their survival is a salient and powerful representation of their resilience. Further, an unwavering sense of hope, desire to actively engage
in life, and internal sense of strength are other resilient characteristics acknowledged by participants. Thus, it is important to view an individual’s continual ability to manage one’s life and remain positive and hopeful in spite of perpetual challenges and disappointments as reasonable evidence of resilience.

Consequently, studies conducted that encompass individual identifications of resilience, as well as protective and risk factors in stressful or traumatic events could potentially paint a broader, yet more personalized picture of resilience in different contexts and cultures. In some instances, cultural nuances may reflect resilience in some groups and deficiency in others when viewed through a broad unfiltered lens. For example, parental involvement may protect Black youth in different ways than it does White youth. Qualitative approaches allow these varied and complex cultural norms to be captured that may otherwise unwittingly shape truncated views of individual and collective resilience. Without voices that represent an array of cultures, experiences, and realities, policies become overly broad and ineffective.

**Summary of Findings**

Findings of this study provide critical understandings regarding the experience of foster care and aging out from the viewpoint of young black adults who experienced removal from their homes after being abused and/or neglected. The study further illuminated various elements that enhanced as well as compromised the participants’ ability to be successful during and after their transitions to adulthood. Their stories illustrated noteworthy commonalities that underscored the following themes: (a) child maltreatment, (b) unresolved trauma, (c) lack of a sense of belonging, and (d) insufficient preparation for adulthood. As the stories unfolded, it was clear that the maltreatment was an inextricably linked catalyst to the presence of the remaining themes.
Supportive relationships. Essential to their overall well-being as identified by the participants was the influence of a supportive person in their lives. Participants who were fortunate enough to have meaningful connections with family members or a significant adult tended to fare better in difficult situations. Participants who felt that they had no supportive person expressed far more difficulty and emotional distress when confronted with challenges. All of the participants identified their spiritual relationships as critical to their resilience and continued hopefulness, especially in moments of despair and loneliness. The importance of spirituality in the black community has been widely discussed in the literature. Relationships with a higher power can be instrumental in reconciling challenges during difficult times (Cotton, Zebracki, Rosenthal, Tsevat, & Drotar, 2006; Jackson et al., 2010; Samuels & Pryce, 2008).

Suffering. The experience of trauma for each of the participants was an emergent theme. However, the associated suffering that each of them continued to withstand in every aspect of their lives was a significant part of this study. For many, the suffering has become an eerily silent pain that has become normal and even tolerable. These participants continued to function at varying levels in their individual lives without attending to their pain. Sadly, their suffering is passed on to their own children even though they have the best of intentions to be different and somehow better than their parents.

Education. Although education did not emerge as a major theme in this study, participants’ academic positions strongly impacted their financial status and earning potential. While the majority of the participants graduated from high school, earned a high school equivalency, or completed postsecondary coursework, none had acquired junior college or college degrees. Changes to educational polices are necessary to address the specific circumstances and challenges that create obstacles for youth with such life experiences so that
the students can successfully complete postsecondary degree programs. Because participants lacked jobs that paid reasonable wages, all of the participants relied on some level of governmental assistance for housing or food. Many of them had no plans or safety net if their benefits were discontinued.

**Systemic issues.** As a result of this study, systemic issues that occur at every level of the child welfare system bubbled to the surface, as the system is fraught with obstacles that place the care and safety of children far away from the centrality of what is intended. Firstly, across the United States there are few qualified foster homes to place children. As a result of increasingly strict requirements the pool of foster parents has decreased. Secondly, foster children are entering the system with more mental challenges. There are not enough services to meet the needs of this growing population. Services that do, in fact, exist are often of questionable quality and give little more than cursory attention to the comprehensive needs of the child. Thirdly, the overrepresentation of Black children and continually increasing numbers of poor Black families have created a juggernaut that the system has been unsuccessful at addressing despite legislative efforts. This reality has continued to have major negative life implications for many of these children who later find themselves unemployed, incarcerated, poor, and abusing substances. Child advocates, social workers, and legislators continue to look for answers to an extremely complicated phenomenon with deep historical roots.

**Limitations and Areas for Further Research**

The small sample size of this study enabled an in-depth exploration of the life stories of participants; however, this also served to limit the focus of the study to a small sample living in an urban area of southeast Michigan. Further research could bring into focus different geographic regions of the county, such as rural and suburban areas and their unique characteristics that could
further inform this research. The focus was intentionally directed to African American young adults, which necessitated the elimination of other ethnic or racial groups, immigrants, as well as LGBTQ and disabled children and youth. Future research that explores the life stories of these groups would be important to pursue, as there are presumed similarities of experiences across groups. In addition, there was a lack of voices from male participants due to the lack of interest and participation by males in the study. Aged out black males have distinct experiences; thus, their participation would serve to enrich our understanding of this phenomenon in meaningful ways.

Life history interviews rely heavily on the participants’ memories and recreation of experiences of the past. While memory may operate selectively in terms of the narration of events, any phenomenological exploration of lived experiences presents the challenge of what is remembered and why. From a phenomenological perspective the “why” is critical as it reveals meaning and intentionality.

There is still much exploration that must be done with foster care youth and young adults that remains absent from the literature. Their experiences are important and could shape policies and legislation impacting this population. Prior studies have examined aged out youth as a homogenous population who have the same issues and outcomes. However, the descriptors of race ethnicity, sexual orientation, and disability create a different degrees of difficulty for this population that is worthy of further consideration.

In addition, aged out youths’ relationships with primary caregivers and biological families after emancipation is in many cases complex and fragmented. Future studies should continue to explore the depth and nuances of these relationships. Information obtained can facilitate practices or programming that assist young adults with handling disappointment
regarding these relationships, repairing them or making peace with their discontinuance. This is important as many young adults are still living in hope and expectancy of recapturing the time they missed as children living with their parents.

**Recommendations**

The stories of these participants helps to elevate our understanding of the complexity of this population. There is certainly no immediate panacea to resolve the many stumbling blocks they confront in their early and adult lives. However, their raw and uncensored stories augment our understanding and hopefully provoke us to be their advocates when their voices are silenced or ignored.

**Foster care workers.** This study uncovered the multiple levels of abuse that occur in foster homes and relative placements. These occurrences are often hidden or swept under the proverbial rug. More research uncovering instances of abuse in foster homes can serve as a basis for stricter regulation and supervision of licensed foster homes. Regularly scheduled home visits by the foster care worker should become the rule instead of the exception. This would require the continued examination of foster care caseloads and associated duties. Overwhelmed and underpaid workers struggle to adhere to documentation requirements and spend a great deal of their efforts shuffling paper while inadvertently making the child’s safety secondary.

Given that substance abuse and poverty plague the majority of families who have children in foster care, more effective substance abuse treatment is needed as well as an adequate time period for becoming sober. Federally imposed timelines that enforce 15 to 22 months as reasonable time to remove barriers to having children returned to parents should be reviewed and changed. Ridding oneself of substance addition may be quite difficult in that time period. Further, policies aimed at reducing inequality and poverty are also essential.
Next, various researchers have argued that it is the inherent racism that exists throughout the system and at critical decision points (Derezotes, Poertner, & Testa, 2005) that has resulted in overrepresentation of Black children in the child welfare system. Therefore, foster care workers as well as other system administrators need to attend trainings that help them understand the nuances of various cultures. Individual and group differences should be viewed as assets rather than deficiencies that create barriers to the reunification of parents with their children. In addition, Court Appointed Special Advocates (CASA) should be appointed for all foster children to monitor the progress of their cases and advocate on their behalf.

Youth participants. More effective independent living programs are needed to prepare youth for self-sufficiency before they age out of the child welfare system. While all of the participants in this study shared that their preparation for independence was not sufficient given their experiences and family history, they agreed that independent living programs, despite their tendency to discard the individual needs of the youth, are still significant and better than no programs at all. Programs that are more comprehensive in nature and address youths’ emotional needs while also teaching practical life skills will garner better outcomes.

Aged out foster youth also experience multiple physical and mental health issues that continue to be problematic after emancipation. President Obama’s Affordable Care Act extended coverage to emancipated youth to the age of 26 to address these issues. Nevertheless, utilization of health services is low. Perhaps difficulty understanding and navigating the system is discouraging. Therefore, processes to access services should be simplified and modified in ways that make it more accessible and comprehensible to aged out youth.

Connections with supportive persons are significant to older foster youth making the transition to adulthood less perilous. As such, independent living programs should assist youth
with identifying active supportive persons or establishing essential relationships if the young person is without established connections. For instance, foster care workers could facilitate relationships between a youth and their coach or a member at their church. These individuals can provide guidance when needed.

**Educators and academic institutions.** Schools must be called upon to do more to insulate these students from harm. A welcoming school environment staffed with teachers who are educated about the unique experiences of these students coupled with timely and directed support services can make significant improvement in these students’ overall academic trajectories. Further, independent living programs must be restructured to put youths’ educational goals as the forefront of preparation for adulthood.

Since only a small number of foster youth participate in postsecondary education as a result of financial and academic challenges, academic qualifications should be adjusted to allow more aged out youth to enroll in 4-year college programs. Once enrolled, adequate mentoring and academic support should be provided to these students to increase their potential for success and completion.

**Some Concluding Reflections**

Today, many young adults are choosing to move out of their parents’ homes much later, simply because they are not mentally or financially ready to face the complexities of life on their own. However, our nation’s most vulnerable youth who are or were in the foster care system are being forced into the world without sufficient preparation, financial stability, and adequate adult supports at the age of 18. For many emancipated youth this is the beginning of a series of frustrating and disastrous experiences, as they are simply not prepared for the harsh realities of life. Providing a meaningful platform for the voices of these participants to convey their stories
will hopefully provide additional knowledge or a different perspective that will stimulate change. Increasing public awareness may bring vital attention to this important phenomenon. Once these youths are emancipated from the child welfare system, they are often out of mind and out of reach for any supportive services.

The completion of this dissertation study was one filled with a sense of relief and emptiness, as I found the topic, information, and interviews to be emotionally taxing. It seems as though each participant held more disappointment and pain than the last. Nevertheless, this particular study was interesting and motivating, as it is a topic I am very passionate about. I have worked with foster youth for a number of years and have always been interested in their stories and experiences. Although I attempted to make sufficient space for the voices of the youth to be heard, I believe there is value in making a space for my voice as well (Behar, 1996). I believe that with my experience and knowledge in this field, I, too, can help make a tremendous difference for these children and youth by bringing their lives and their challenges to the attention of courts, foster parents, legislators, politicians, and the like.

I was surprised and deeply appreciative that all of the participants were willing to share their very deep and sorrowful stories of trials and tribulations, while still attempting to persevere and make the most of their lives. This left me feeling as if I had taken far more from the participants than I was able to give in return. This was difficult to come to terms with, as I was aware that so many people had already taken so much from them. I did not want to add to those mounting numbers.

I have constantly pondered on how, we, as a society could allow such atrocities to happen to children and youth. Why are we not, collectively, incensed or appalled enough to fight for change, and refuse to stop until something is done? I keep asking questions, but the equation
seems disturbingly insoluble. For this reason, qualitative research is so important, as it gives, at a minimum, a voice and face to the numbers that are often cavalierly presented. Numbers can be misunderstood, misconstrued, or even ignored; voices and faces command invaluable attention. Change in the institutions that serve these invisible children and youth must be made in order to create an alternative transformative reality.
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APPENDICES
April 21, 2015

Ms. Jane Doe  
Director of Operations  
ABCD Social Services  
5555 W. Happy St.  
Wonderland, MI 44444  

RE: Permission to Conduct Research Study

Dear Ms. Doe:

I am writing to request permission to conduct a research study utilizing students who were once enrolled in your Independent Living program. I am currently a Doctoral Candidate in the Educational Studies program at Eastern Michigan University and am in the process of writing my dissertation. The study is entitled: Voices of African American Youth: An Ethnographic Study of the Experiences of Emancipation from the Foster Care System.

I hope that your organization will assist me with recruiting 10-15 young men and women between the ages of 18-28 to participate in one on one interviews and a focus group. Interested individuals, who volunteer to participate, will be given a consent form to be signed by them and returned to me prior to the first interview. Individuals who complete the process will be given a $40 gift card.

If approval is granted, individual participants will complete the interviews at a convenient location of their choice (e.g. their home, office, library). The results will be used for the dissertation project, and individual results of this study will remain absolutely confidential and
anonymous. Should this study be published, only results will be documented. There will be no identifying information associated with your organization or the individual. No costs will be incurred by either your organization or the individual participants.

Your approval to conduct this study will be greatly appreciated. I will follow up with a telephone call next week and would be happy to answer any questions or concerns that you may have at that time. You may contact me at my email address: stewartd@starr.org.

If you agree, kindly sign below and scan and email the document back to me at the aforementioned email address. Alternatively, kindly submit a signed letter of permission on your organization’s letterhead acknowledging your consent and permission for me to conduct this study with any of your prior students who agree to participate.

Sincerely,

Dawn L. Stewart
Eastern Michigan University

Approved by:

_____________________________________ _________________________ ________
Print your name and title here               Signature               Date
Appendix B: Recruitment Flyer

DID YOU AGE OUT OF FOSTER CARE?
Are you between the ages of 18 and 28?
Are you willing to complete three (3) interviews about your past and your future and participate in one (1) focus group?
Are you willing to be part of a study and dissertation regarding foster care youth?

THERE IS COMPENSATION
$40 Target gift card for participation
$15 gift card for referring someone who completes the study (limit 2 referrals)

TO VOLUNTEER
OR FOR MORE INFORMATION PLEASE CONTACT:
Dawn Stewart at
313-310-0857
or
dstewar8@emich.edu
Appendix C: Informed Consent

Informed Consent Form

The person in charge of this study is Dawn L. Stewart. I am a student at Eastern Michigan University. My faculty adviser is Dr. Valerie Polakow. Throughout this form, I will be referred to as the “investigator.”

Purpose of the study

The purpose of this study is to give voices to African American youth who have been emancipated from the foster care system, paying particular attention to resilience and its impact on individuals and their independence and self-sufficiency. There has been a great deal of research conducted on this population, but much of it fails to include the voices and perspectives of foster youth.

What will happen if I participate in this study?

Participation in this study involves

- There will be 2-3 interviews that may take up to 90 minutes each. Interviews will occur within 2 to 3 weeks apart. Prior to the first interview session, you will be given the Informed Consent form, and it will be reviewed with you. You will be asked to turn in the signed consent at the beginning of the first interview.

- In the first session, you will be asked to complete a brief Demographic Questionnaire that will ask some brief questions about you. You can refuse to answer any or all of questions if you like. All interviews will be tape recorded. Each interview will build upon each other. In interview 2 and 3, you will provide more in-depth information about your current life experiences and how these experiences led you to where you are today. Each interview will be arranged and conducted according to your schedule.

- You will also be asked to participate in a focus group with approximately 5 other individuals who share similar experiences as yours. The focus group will center on your shared experiences and will last no more than an hour.

- Lastly, you will be asked to allow me to shadow (e.g. follow and observe) you for a day according to your level of comfort. I understand that this may seem extremely intrusive and uncomfortable. Therefore, this is entirely voluntary.

Approved by the Eastern Michigan University Human Subjects Review Committee
UHSRC Protocol Number: 745761-1
Study Approval Dates: 5/4/15 – 5/3/16
I would like to audio record you for this study. If you are audio recorded, it will be possible to identify you through your voice. If you agree to be audio recorded, sign the appropriate line at the bottom of this form.

**What are the anticipated risks for participation?**

Please note that some of the questions or recollections during this study may be sensitive and you may feel some discomfort while answering them. If you feel uncomfortable answering any or part of the questions, you can decide to not answer them. You do not have to answer any questions that make you uncomfortable or that you do not want to answer.

**Are there any benefits to participating?**

You will not directly benefit from participating in this research. However, you may benefit from the opportunity to share your experiences with the intent that it may influence policies or practices for other children and youth who are in foster care.

Benefits to society include the opportunity to shed light on experiences and individuals that are often invisible to society.

**What are the alternatives to participation?**

The alternative is not to participate.

**How will my information be kept confidential?**

I will keep your information confidential by using a pseudonym in place of your name. Your information will be stored in a locked file cabinet and on a password protected computer. I will make every effort to keep your information confidential. However, I cannot guarantee confidentiality.

If, during your participation in this study, I have reason to believe that elder abuse or child abuse is occurring, or if I have reason to believe that you are at risk for being suicidal or otherwise harming yourself, I must report this to authorities as required by law. Again, I will make every effort to keep your research information confidential. However, it may be possible that I have to release your research information. If this were to occur, I would not be able to protect your confidentiality.

If you participate in focus groups: The investigator will ask you and the other people in the group to use only first names during the focus group. The investigator will also ask you not to tell anyone outside of the group about anything that was said during the group session.

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Approved by the Eastern Michigan University Human Subjects Review Committee
UHSRC Protocol Number: 745761-1
Study Approval Dates: 5/4/15 – 5/3/16
Other groups may have access to your research information for quality control or safety purposes. These groups include the University Human Subjects Review Committee, the Office of Research Development, the sponsor of the research, or federal and state agencies that oversee the review of research. The University Human Subjects Review Committee is responsible for the safety and protection of people who participate in research studies.

I may share your information with other researchers outside of Eastern Michigan University who may be interested in the experiences of Emancipated youth for the purpose of adding to the knowledge regarding the subject. If I share your information, I will remove any and all identifiable information so that you cannot be identified.

The results of this research may be published or used for teaching. Identifiable information will not be used for these purposes.

**Storing study information for future use**

I would like to store your information from this study for future use related to the experiences of Emancipated Youth. Your information will be labeled with a code and not your name. Your information will be stored in a password-protected or locked file. Your de-identified information may also be shared with researchers outside of Eastern Michigan University. Please initial below whether or not you allow us to store your information:

______Yes ________No

**Are there any costs to participation?**

Participation will not cost you anything.

If you have difficulty with transportation, I will provide transportation to the interview or focus group location.

**Will I be paid for participation?**

For participation in this research study, you will be paid a $40 Target gift card at the conclusion of the third interview. If you do not complete this study, you will not receive the gift card. You will also have the opportunity to earn up to (2) $15 gift cards for recommending another participant for the study. However, the participant has to complete all 3 of the interviews before you receive the gift card.

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Approved by the Eastern Michigan University Human Subjects Review Committee

UHSRC Protocol Number: 74576-1

Study Approval Dates: 5/4/15 – 5/3/16
Study contact information

If you have any questions about the research, you can contact the Principal Investigator, Dawn L. Stewart, at dstewart8@emich.edu or by phone at 313-310-0857. You can also contact my adviser, Dr. Valerie Polakow, at vpolakow@emich.edu or by phone at 734-487-3260.

For questions about your rights as a research subject, contact the Eastern Michigan University Human Subjects Review Committee at human.subjects@emich.edu or by phone at 734-487-3090.

Voluntary participation

Participation in this research study is your choice. You may refuse to participate at any time, even after signing this form, with no penalty or loss of benefits to which you are otherwise entitled. If you leave the study, the information you provided will be kept confidential. You may request, in writing, that your identifiable information be destroyed. However, we cannot destroy any information that has already been published.

Statement of Consent

I have read this form. I have had an opportunity to ask questions and am satisfied with the answers I received. I give my consent to participate in this research study.

Signatures

Name of Subject

Signature of Subject ___________________________ Date ___________________________

I agree to be audio recorded for this study.

Signature of Subject ___________________________ Date ___________________________
I have explained the research to the subject and answered all his/her questions. I will give a copy of the signed consent form to the subject.

Name of Person Obtaining Consent

__________________________________________
Signature of Person Obtaining Consent Date

Approved by the Eastern Michigan University Human Subjects Review Committee
UHSRC Protocol Number: 745761-1
Study Approval Dates: 5/4/15 – 5/3/16
Appendix D: Demographic Questionnaire

Directions: Please answer below questions. The researcher just wants to gather some basic information about your experiences. Feel free to skip any questions that you do not want to answer.

1. Pseudonym:

2. Age:

3. Gender:

4. Age of Entry in Foster Care:

5. Reason for Placement in Foster Care:

6. Age of discharge from Foster Care:

7. Number of Foster Care placements:

8. Current occupation:

9. Current Annual wage:

10. Highest grade completed:
Appendix E: Confidentiality Agreement for Transcription Services

I, transcriptionist, agree to maintain full confidentiality in regards to any and all audiotapes and documentation received from Dawn L. Stewart, an Eastern Michigan University doctoral student, related to her doctoral study on Voices of African American Youth: An Ethnographic Study of the Experiences of Emancipation from the Foster Care System. Furthermore, I agree:

1. To hold in strictest confidence the identification of any individual that may be inadvertently revealed during the transcription of audio-taped interviews, or in any associated documents.

2. To not make copies of any audiotapes or computerized files of the transcribed interview, texts.

3. To store all study related audio tapes and material in a safe, secure location as long as they are in my possession.

4. To return all audio tapes and study related documents to Dawn L. Stewart in a complete and timely manner.

5. To delete all electronica files containing study-related documents from my computer hard drive and any back up devices.

Transcriber’s Name (Print) ___________________________ Date __________

Transcriber’s Signature ___________________________ Date __________

Approved by the Eastern Michigan University Human Subjects Review Committee
UHSRC Protocol Number: 745761-1
Study Approval Dates: 5/4/15 – 5/3/16
Appendix F: Contact Summary Form

Visit __
Phone
Site_________
Contact Date_________
Today’s Date_________

1. What were the main issues or themes that struck you in this contact?

2. Summarize information obtained (or that failed to obtain) on each of the target questions for this contact.

<table>
<thead>
<tr>
<th>Question</th>
<th>Information</th>
</tr>
</thead>
</table>

3. Anything else that struck you as salient, interesting, illuminating or important in this contact?

4. What new (or remaining) target questions do you have in considering the next contact with this participant?
Appendix G: IRB Approval

RESEARCH @ EMU

UHSRC Determination: EXPEDITED INITIAL APPROVAL

DATE: May 4, 2015

TO: Dawn Stewart
    Eastern Michigan University

Re: UHSRC: # 74576-1
    Category: Expedited
    Approval Date: May 4, 2015
    Expiration Date: May 3, 2016

Title: Voices of African American Youth: An Ethnographic Study of the Experiences of Emancipation from the Foster Care System

Your research project, entitled Voices of African American Youth: An Ethnographic Study of the Experiences of Emancipation from the Foster Care System, has been approved in accordance with all applicable federal regulations.

This approval included the following:

1. Enrollment of 20 subjects to participate in the approved protocol.
2. Use of the following study measures: Counseling Referrals; Appendix A: Demographic Questionnaire; Appendix B: Interview/Focus Group Questions Guide
3. Use of the following stamped recruitment materials: Appendix C: Oral Script to Approach Organization Directors; Appendix D: Oral Script for Responding to Flyers; Recruitment Flyer “Did you age out of foster care?”
4. Use of the stamped: Informed Consent Form; Appendix E: Participant Consent for Shadowing; Appendix F: Confidentiality Agreement for Transcription Services

Renewals: This approval is valid for one year and expires on May 3, 2016. If you plan to continue your study beyond April 3, 2016, you must submit a Continuing Review Form by April 3, 2016 to ensure the approval does not lapse.

Modifications: All changes must be approved prior to implementation. If you plan to make any minor changes, you must submit a Minor Modification Form. For any changes that alter study design or any study instruments, you must submit a Human Subjects Approval Request Form. These forms are available through IRBNet on the UHSRC website.

Problems: All major deviations from the reviewed protocol, unanticipated problems, adverse events, subject complaints, or other problems that may increase the risk to human subjects or change the category of review must be reported to the UHSRC via an Event Report form, available through IRBNet on the UHSRC website.

Follow-up: If your Expedited research project is not completed and closed after three years, the UHSRC office requires a new Human Subjects Approval Request Form prior to approving a continuation beyond three years.

Please use the UHSRC number listed above on any forms submitted that relate to this project, or on any correspondence with the UHSRC office.
Good luck in your research. If we can be of further assistance, please contact us at 734-487-3090 or via e-mail at human.subjects@zemich.edu. Thank you for your cooperation.

Sincerely,

Jennifer Kellman Fritz, PhD
Chair
University Human Subjects Review Committee
Appendix H: Oral Script or Potential Participants #1

Hello. My name is Dawn Stewart and I am a Doctoral student at Eastern Michigan University in Ypsilanti Michigan. As part of my requirement, I am conducting a study. My topic is about individuals who have been in the Foster Care and aged out of the system between the ages of 18-21 years old.

I am recruiting individuals between the ages of 18-28 years old who have emancipated from the foster care system. The purpose of this study is to give a voice and space to these individuals to tell their unique stories. Your participation might also be helpful to others who have similar experiences, as well as influence the policies that impact children and youth in foster care.

For those who agree to participate:

Thank you for agreeing to participate. Next, I would like to schedule a meeting at your earliest convenience. Also, if you know anyone else who may be interested, please give them my information, and you will receive a $15 gift card for the referral if they complete the process. Do you have any questions or concerns now? If not, I can be reached at 313-310-0857. Thank you again for agreeing to participate.

For those who decide not to participate:

Thank you for taking time to listen. If you change your mind at any time, I would be happy to interview you and hear your story. Also, if you know anyone else who may be interested, please give them my information, and you will receive a $15 gift card for the referral if they complete the process. Thank you again for your consideration.
Appendix I: Oral Script for Organizations #2

Hello. My name is Dawn Stewart and I am a Doctoral student at Eastern Michigan University in Ypsilanti Michigan. As part of my requirement, I am conducting a study. My topic is about individuals who have been in the Foster Care and aged out of the system between the ages of 18-21 years old.

I am recruiting individuals between the ages of 18-28 years old who have emancipated from the foster care system. The purpose of this study is to give a voice and space to these individuals to tell their unique stories. Participation in this study is entirely voluntary, and participants who complete the process will be given a $40 Target gift card.

I am aware that your organization provides independent living programming for older foster youth. As such, I would like, with your approval, to contact your employees who work in this program. I will give them flyers outlining my study, to give to youth who they have worked with in the past who may be interested in participating.

Thank you for considering my request. Do you have any questions or concerns I can address? If you don’t have any questions now, but think of some later, I can be reached out 313-310-0857.
Appendix J: Counseling Referrals

New Center Community Health
2051 W. Grand Blvd
Detroit, MI 48202
(313) 961-3200

Northeast Guidance Center
12800 E. Warren
Detroit, MI 48215
(313) 824-8000

Southwest Community Solutions
1700 Waterman
Detroit, MI 48209
313-841-8900

NCADD
16647 Wyoming
Detroit, MI 48221
313-342-3606

Redford Counseling
25945 7 Mile Rd
Redford, MI 48240
313-565-6560
Appendix K: Definition of Terms

Aging out- The process by which youth exit the child welfare system without achieving reunification with their original families or another permanent placement. (Shook, et al., 2013).

Child Welfare System- A federally mandated system that has legal jurisdiction over children in out-of-home placements under the direction of the juvenile court (Osgood, Foster, Flanagan, & Ruth, 2005).

Foster Care- An arm of the child welfare system responsible for the day to day care and oversight of children in out-of-home care when the court determines that they should be removed from the home of their parents or caregivers in order to protect them from abuse and/or neglect (Osgood, Foster, Flanagan, & Ruth, 2005).

Emancipation - Legal termination of youth from state custody

Foster care- an alternative and temporary living arrangement for children removed from the care of their parents or legal guardians as a result of abuse and/or neglect.

Independent Living Program- Programs designed to provide a wide range of services aimed at meeting the need of youth who are expected to age out of the child welfare system (Osgood, Foster, Flanagan, & Ruth, 2005).