TRANSITION TO ADULTHOOD FOR YOUNG ADULTS WITH DISABILITIES

THAT EXPEREINCED FOSTER CARE

by

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DISSERTATION ABSTRACT

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Title: Transition to Adulthood for Young Adults with Disabilities that Experienced Foster Care

The transition to adulthood can be especially challenging for youth that experience the foster care system. These challenges are magnified for youth that also experience disability, accounting for at least 40-47% of all children in foster care. Youth with and without disabilities that experience the foster care system encounter barriers during the transition to adulthood that often lead to poor outcomes; including high rates of mobility, mental health concerns, or a lack of a consistent positive relationship with an adult. A national study determined that 2.5 to 4 years after a youth has aged out of the child welfare system only 54% had graduated from high school and only 17% were economically self sufficient. In order to move from a deficit-based to a strength-based approach it is important to gain a greater understanding of what helped young adults with disabilities that experienced foster care overcome barriers to graduation and aided their transition to adulthood.

The findings from this dissertation study suggest and confirm prior research that improved systems and interagency collaboration, more training for professionals and caregivers, and self-determination and self-advocacy training for youth are needed to improve post school outcomes for youth with disabilities who experience foster care. The

services and supports that were perceived as the most helpful in overcoming barriers were (a) access to mental health and disability services, (b) stable and positive relationships, (c) systems that provide a "safety net" during transition, and (d) post secondary support programs for alumni of foster care. On an individual level, resilience, self-determination, and self-advocacy seemed to contribute to participants' successful transition to adulthood. This dissertation study also demonstrates the variability of the social and relational contexts for youth in foster care, therefore a personalized, youth centered approach to case management is required during their transition to adulthood.

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CHAPTER I

INTRODUCTION

It is widely accepted that the transition into adulthood is difficult for persons both with and without disabilities (Halpern, 1994). For youth that experienced foster care, the transition to adulthood can be especially challenging. More than 21,000 young adults emancipate (or "age out") of foster care each year in the United States (U.S. Department of Health and Human Services, 2005). These young adults often have lower high school graduation rates and poorer post school outcomes compared to youth in the general population (Geenean & Powers, 2007). A national study determined that between two and a half to four years after a youth has aged out of the child welfare system only 54% had graduated from high school and only 17% were economically self sufficient (Westat, 1991). In the Midwest foster care study nearly one-third of the young adults, aged 16-24, were neither employed nor in school; compared to 13% in the general population (Pecora, et al., 2006). The Casey National Alumni Study reported that household income levels of young adults that had transitioned out of care were 35% lower than young adults in the general population and that one out of five had experienced at least one night of homelessness (Pecora et al. 2003).

Due to the poor outcomes for youth in foster care the Foster Care Independence Act, P.L. 106-109 (FCIA) was passed in 1999 establishing the Chafee Foster Care Independence Program. The intention of the Act was to improve outcomes by providing states with more funding and greater flexibility in designing programs to assist youth with their transition from foster care to adulthood (www.childwelfare.gov). The Chafee Program has four key goals: (1) identify youth that are expected to stay in foster care

until age 18 and help them during transition; (2) assist youth to acquire skills and resources needed to become employed; (3) assist youth to prepare for and enter post-secondary training or educational institute; (4) provide personal and emotional support; and (5) provide services and supports to youth ages 18-21 that were previously in foster care to help them become self-sufficient in adulthood (Collins, 2004).

The poor outcomes for youth in foster care are often magnified for those who also experience disability; accounting for at least 40-47% of all children in foster care (Powers et al., 2012). Youth with disabilities that have been in foster care are less likely to be employed, graduate from high school, or have social support than youth that experience only foster care (Geenan & Powers, 2007). Although there is a growing body of literature about the transition to adulthood for youth with disabilities, there is a minimal research on the transition experiences of youth in foster care that also have a disability (Geenan & Powers, 2007). Research is needed to gain greater understanding of the experiences and perceptions about the transition to adulthood for young adults with disabilities that were in foster care, so interventions can be tailored to assist youth while still in care to improve their long term outcomes.

This dissertation study is unique in that the focus is on understanding what helped young adults, with disabilities that experienced foster care, overcome barriers to graduation and aid in their successful transition to adulthood. In alignment with the Individuals with Disabilities Education Act (IDEA), a successful transition for this study is defined as being engaged in post secondary education or employed. Post secondary education was chosen as an indicator of a successful transition because research indicates that for many youth with disabilities their success in adulthood (e.g., job security, career

options, income, or job satisfaction) correlates with their attainment of some form of postsecondary education (Fleming & Fairweather, 2011). Post secondary education is also related to increased long term earnings (Newman et al., 2009). Employment was chosen as another indicator of a successful transition because it is considered to be fundamental in adult lives, is linked to economic self–sufficiency, higher levels of self esteem, and personal satisfaction (Newan et. al., 2009; Lindstrom, Doren & Miesch, 2011). This dissertation study will fill a critical gap in the literature because previous studies focus primarily on the barriers encountered as opposed to what contributes to a successful transition; youth perspective is rarely reported; and the intersection of disability of special education and foster care is often neglected. In addition, this study utilizes an ecological model that exposes the complexity of the social and relationalal context that influences youth with disabilities that experience foster care.

CHAPTER II

LITERATURE REVIEW

There is little research about the transtion to adulthood for youth with disabilities that experience foster care (Geenan & Powers, 2007). Accordingly, this literature review extends to the transition to adulthood for youth with disabilities and youth in foster care in general. Youth transitioning to adulthood are influenced by their life histories, family, educational background, community they live in, peer group, and their own internal motivation (Halpern, 1994). Therefore, an ecological model is a valuable theoretical framework for researching young adults with disabilities that were involved with the foster care system and is used as the organizing structure of this paper and to shape the research questions.

This chapter begins with a description of the methodology utilized for the literature review. The first section of the literature review examines the transition to adulthood for youth with disabilities including a discussion of educational outcomes, barriers faced and laws developed to improve outcomes. Then the transition to adulthood for youth in foster care is discussed. Again, educational outcomes, barriers faced and laws to mitigate the barriers are discussed. The next section reviews the literature on the transition to adulthood for youth with disabilities impacted by foster care and looks at particular challenges faced by this unique population. A description for each population from the external influencers to those that are internal will be provided; by providing subsections highlighting the exosystem, mesosystem, microsystem and individual factors impacting the particular population. The chapter concludes with a summary and the research questions.

Literature Review Methodology

The literature search was conducted using the online databases accessible through the University of Oregon. In particular, the following databases were searched: ERIC, PyschINFO, Academic Search Premier, Sociological Abstracts, and JSTOR. I choose to expand beyond those that were listed under the subject category of Education to also include databases from the Sociology category. This was deemed appropriate because disabilities, the transition to adulthood, and foster care all occur within a societal context that would seemingly attract study from the sociological perspective. In addition, Google Scholar was utilized to expand the overall number of articles that were returned based on the keywords searched.

The keywords were varied several times during the search process to first gain a broad base and then to narrow in on the most applicable studies. Also, as research regarding the transition to adulthood for youth in foster care with disabilities is limited, the researcher was interested in understanding if and how the research questions may have been addressed in general with youth with disabilities and/or youth in foster care as the primary focus. The following groupings of descriptors were used during the search: transition to adulthood, transition and disability, transition and foster care, foster care and disability, foster care and disability and transition, foster care and education, foster care and education, and disability, foster care and post school outcomes, and foster care and post school outcomes and disability. Articles that focused on transitions not related to this target population were excluded, for example articles about the transition from early intervention services to elementary school special education services. In addition, because of special education and child welfare laws that impact youth specifically in the

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United States, studies from other countries were not considered. Although, recent articles were preferred, again because of implications regarding laws, older articles were not excluded if they contained seminal works or current relevant articles were unavailable.

Ecological Model

Bronfenbrenner's (1979) ecological model (i.e. microsystem, mesosystem, exosystem, macrosystem) highlights the importance of social context and relationships in developmental processes since even those that are not proximal to the particular setting can impact human development. At the center of the ecological model is the individual (e.g., youth with a disability). The next layer is the microsystem, which includes the proximal institutions and people that are likely to have the most direct impact on the individual. The next layer is the mesosystem, which represents the complex interactions that occur between several components of the microsystem and the exosystem (e.g., social workers and children's administration or teachers and special education laws). The way these interactions occur ultimately impacts the individual and can be influential during the youth's transition to adulthood, as the arrows represent the interactions can go both ways between elements in the microsystem and the exosystem. The outer layer is the exosystem, which includes the larger social structures that impact the individual (e.g., laws and social service agencies). Within each circle, the people, settings, or systems unique to individuals in foster care are represented in bold print (Figure 1). The remaining elements potentially impact all youth with disabilities, therefore they are represented within the center layer. The macrosystem, which represents the culture and society where the individual is situated, has been intentionally left off of this model. Thus enabling the researcher to focus on the ecological layers that may contain alterable

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factors more easily targeted for intervention, by professionals working with youth with

disabilities that have experienced foster care.

Figure 1. Ecological model of the transition to adulthood for youth with a disability
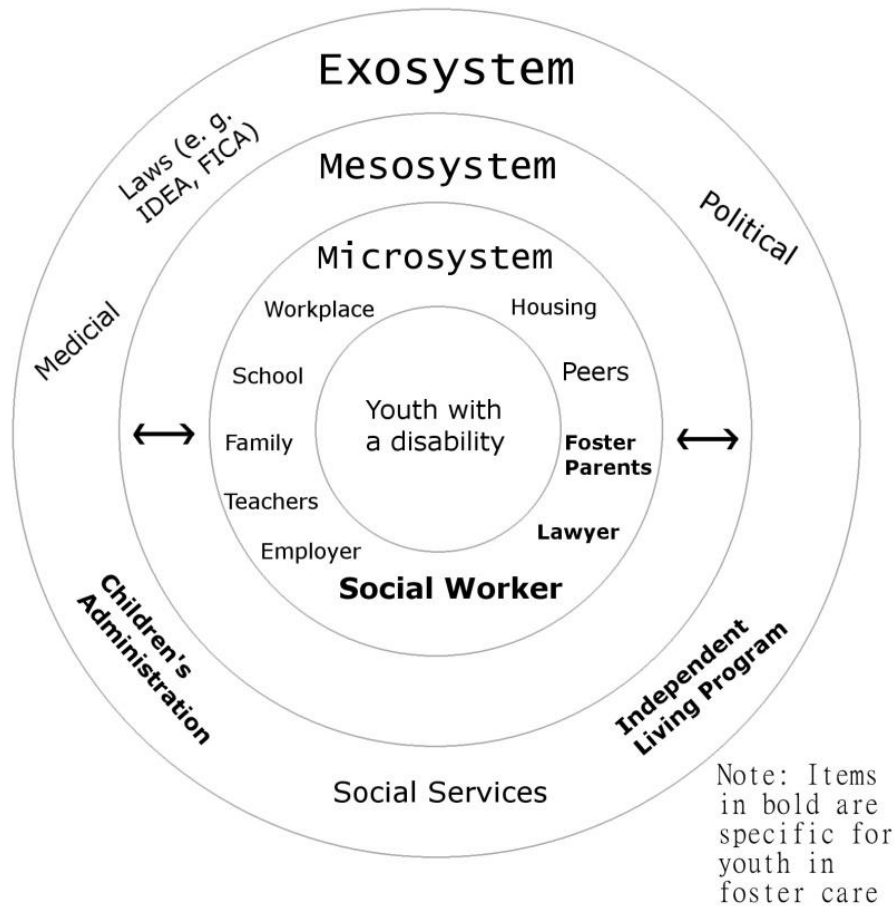
Transition for Youth with Disabilities

While the transition to adulthood is difficult for many young adults, it is

particularly challenging for young adults with disabilities. Only 55% of youth with

disabilities graduate from high school with a standard diploma vs. 75% of their peers

without disabilities (Pyle & Wexler, 2011). Newman et al., 2009, reported data from the

National Longitudinal Transition Study-2 (NLTS-2) indicating that between one and four

years post high school only 57% of young adults with disabilities are employed compared

to 66% of their peers without disabilities. NLTS-2 data also indicate the disparity in post secondary educational attainment. Young adults with disabilities are also less likely to be enrolled in any postsecondary program than their peers without disabilities (45% vs. 53 %) and even more disproportionally represented in 4-year university programs (8% vs. 29%) respectively (Newman et al., 2009).

Exosystem

The exosystem as described in this section explores some social structures that impact youth with disabilities as they transition to adulthood and aligns with the exosystem layer of the ecological model (Figure 1). To mediate the risk of poor transition outcomes for youth with disabilities federal legislation, the Individuals with Disabilities Education Act (IDEA), was enacted in 1975 and most recently reauthorized in 2004. IDEA mandates that a free appropriate education be provided to all children with disabilities. An amendment [34 CFR 300.43(a)] [20 U.S.C. 1401(34)] to IDEA was added in 1992 and reauthorized in 1997, which mandates that by the age of 16 transition services be provided to students who receive special education.

These services must include a coordinated set of activities that:

- Is designed to be within a results-oriented process, that is focused on improving the academic and functional achievement of the child with a disability to facilitate the child's movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment); continuing and adult education, adult services, independent living, or community participation;

- Is based on the individual child's needs, taking into account the child's strengths, preferences, and interests; and

- Includes instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and, if appropriate, acquisition of daily living skills and functional vocational evaluation (www.idea.gov).

Mesosystem

The mesosystem as described in this section discusses the interactions between systems that impact youth with disabilities as they are preparing for their transition to adulthood. Although laws are in place to improve transition outcomes, the individuals responsible for implementation do not always have the capacity or knowledge to implement the requirements. For example, 88% of states were not in compliance with transition requirements as outlined in the law (as of 2000); and the school staff often do not invite students to their IEP meetings (Martin, Marshall, & Sale, 2004). The spirit of the law also suggests the importance of providing opportunities to build self-determination during transition planning. For example, through instruction, related services, community experiences, employment and other goals all intended to improve post school outcomes and quality of life in adulthood. However, research demonstrates that transition planning is often included during the annual IEP meetings and little time is given to adequately address this important issue (Cobb & Alwell, 2009).

Microsystem

The microsystem, as described in this section, discusses the people and institutions that are closest to the youth and often have the greatest impact on them as

they transition to adulthood. Caregivers and service providers often consider the youth incapable of taking responsibility for their lives and may limit the opportunity for them to fully assume adult roles, thus hindering the successful transition to adulthood for youth with disabilities (Halpern, 2004). Instead of limiting opportunities, opportunities need to be provided for building self-determination skills and feelings of autonomy, competence, and relatedness in order to improve transition outcomes (Ryan & Deci, 2008). In a study about the perceptions of parents and teachers about self-determination for students with disabilities, teachers disclosed that they "only slightly agreed" that they understood the concept of self-determination and how to teach it and that students with disabilities had opportunity to learn and practice self-determination skills within their school (Grigal, Neubert, Moon, & Graham, 2003). Wehmeyer et al. (2000) reported similar results about teacher familiarity with the concept of self-determination; only 60% of teachers surveyed reported they were familiar with the concept of self-determination.

Parents support and family involvement are considered crucial in the development of self-determination (Grigal, Neubert, Moon, Graham, 2003; Tranior, 2008). In the study referenced above (Grigal et. al, 2003), 98% of parents of children with disabilities believed that schools should teach self-determination skills; however only 78% of the respondents believed such skills were being taught to their child. Parents do not need to rely solely on the school to help their child become self-determined. They can help their children build self-determination skills by modeling advocacy and coping skills and teaching their child to be adaptable (Browder, Wood, Test, Karvonen, Algozzine, 2001). In addition, parents can be involved in developing their child's IEPs and transition plans,

which correlates with positive transition outcomes (Trainor, 2008; Sinclair, Christenson, & Thurlow, 2005; Wandry & Pleet, 2003).

Individual Factors

As demonstrated throughout this section although the transition to adulthood for youth with disabilities can be challenging there are strategies to the improve outcomes; building self-determination skills is one of those strategies. Self determination is critical for youth during transition, since it impacts their ability to make good decisions, overcome obstacles, and advocate for themselves which ultimately impacts their success in school and outcomes in adult life (Pierson, Carter, Lane & Glaser, 2008). According to Walker, Calkins, and Wehmeyer (2011), self determination leads to improved quality of life including: access to community resources and supports, improved ability to self manage (i.e., autonomy), greater community participation/acceptance (i.e., relatedness), emotional/material/physical well-being, breadth and variety of daily activities (i.e., competence).

Transition for Youth in Foster Care

Approximately 77,019 youth in out of home care are between the ages of 16 and 20 (U.S. Department of Health and Human Services, 2011), thus they are transition aged as defined by IDEA. These youth experience unique challenges during their transition to adulthood, for example a history of abuse or neglect, separation from family, and frequent placement and school changes (Pecora et al., 2006). Youth who transition directly from out of home care into adulthood often have an abrupt transition from being supported to being completely on their own; this leads to significant risks of negative outcomes including; underemployment, low educational attainment, homelessness, early

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parenthood, involvement with the justice system, and mental health issues (Daining &

DePanfilis, 2007). In a study, by Pecora et al. (2006), of 659 young adults previously in

foster care — postsecondary completion rates were low; one-third were living below the

poverty line, one-third have no health insurance, and more than 1 in 5 had experienced

homelessness.

Exosystem

The exosystem as described in this section explores some social structures that are

unique to youth that are transitioning to adulthood that experienced foster care and aligns

with the exosystem layer of the ecological model (Figure 1) In an analysis of the impact

resulting from Foster Care Independence Act (FCIA), which provides funds for many

services including Independent Living Programs ILPs, Collins (2004) determined that the

needs of the youth leaving care exceeded the resources the legislation provided and more

research is needed to understand the effectiveness of each component of the program in

helping youth attain self-sufficiency. Many systems impacting youth in foster care are

designed by Children's Administration and/or other Social Service Agencies to comply

with regulations. However, these systems that are created to "protect" youth in foster care

often hinder the very opportunities that are required to build self-determination and the

youth/young adults may experience learned helplessness (Del Questa, Fullerton, Geenen,

& Powers, 2012; & Geenan, Powers, Hogansen & Pittman, 2007). For example,

important life decisions are often made for youth in foster care, not by them; they receive

little information about their rights or opportunities to exercise them; and there is scant

opportunity to take risks or control of their lives while in a supported environment

(Geenan, Powers, Hogansen & Pittman, 2007).

Mesosystem

      The mesosystem as described in this section discusses the interactions between systems that are designed to improve transition outcomes for youth in foster care. Laws have been created to improve transition outcomes for youth in foster care but the structure is not always in place to implement them successfully. For example, in spite of federal legislation (FCIA) and the 2008 Fostering Connections Act intended to improve outcomes by funding independent living programs (ILP), only 11-27% of young adults that were in foster care received independent living program services while still in care (Courtney et al., 2005). This suggests a breakdown between the intent of the legislation, the ILPs, and the actual impact of the services provided to the youth. The ILPs were intended to instruct youth on skills needed for daily living (i.e., improve competence), help them write a transitional independent living plan, and provide education and employment assistance, counseling, and case management (Courtney et al., 2005). Without these services, youth in foster care may not gain these essential skills since they often lack family or other community support networks that could teach them the skills (Samuels and Pryce 2007).

Microsystem

      The microsystem, as described in this section, discusses the importance of the people and institutions that are most proximal to the youth. Relationships are considered a protective factor against many potential negative outcomes for youth and the lack of stable relationships combined with the lack of skills (i.e., competence) needed for successful transition outcomes can be detrimental to long term outcomes. Samuels and Pryce (2007) highlight how youth in foster care often experience circumstances that

interrupt their sense of interpersonal connection (i.e, relatedness), such as being removed from their parents— causing hurt, vulnerability and disconnection. Their study involved interviewing 44 midwestern young adults in the process of aging out of foster care. The young adults discussed how they didn't have the safety net of parents to fall back when they made mistakes or needed emotional support. This perceived lack of security made some youth move quickly from childhood to adulthood by tapping into their emotional strength. The relationship with their parents was further complicated by the history of abuse and/or neglect, the young adults perceptions of the meaning of being removed from the home, and how they had coped with the physical and psychological absence of their parents. In addition, as adults they were learning to navigate the new relationship with their parents. The young adults frequently found themselves in the role of taking care of their parents or trying to understand the parent's substance abuse and/or mental health issues.

Individual Factors

The perceived lack of security caused by not having parents or a close family to fall back on often meant that the young adults had a strong sense of autonomy. They frequently learned to advocate for themselves and access services. Many young adults interviewed in a study of young adults that were aging out of foster care, identified as being self-reliant survivors that overcame a lack of support and assistance throughout their childhood; they often used the phrase "what doesn't kill you makes you stronger" to describe their experiences and life history (Samuels & Pryce, 2007). The young adults described this ability to survive as a personal strength and an important source of pride and self-esteem (Samuels & Pryce, 2007). It is important to note that although the

perception of the young adults, in the study described above, is that their pushing through their struggles demonstrates strength; research indicates high rates of post-traumatic stress disorder in foster care alumni (Pecora, et al., 2005); so the assumption should not be made that the young adults that identify as survivors do not have healing to do.

For youth in foster care much of the environmental context, systems, and relationships that are critical to optimal human development are interrupted (Geenan et al., (inpress); Courtney, Terao, & Bost, 2004; Del Questa, Fullerton, Geenen, & Powers, 2012; & Samuels & Pryce, 2008). These interruptions contribute to fewer opportunities for youth to build self-determination skills (Del Questa, Fullerton, Geenen, & Powers, 2012). This is detrimental since lower self-determination is linked to diminished quality of life (Walker, Calkins, Wehmeyer, 2011).

Intersection of Disability and Foster Care

While an estimated 40-47% of youth in foster care receive special education (Geenan & Powers, 2007), there is scant research on their transition to adulthood (Del Quest, Fullerton, Geenen & Powers, 2012). Several of the seminal studies seeking to understand transition outcomes for youth in foster care excluded those with disabilities. The Midwest Evaluation study excluded those with development disabilities, severe mental illness, or that were incarcerated or in a psychiatric hospital (Courtney et al., 2005 p.5). The Northwest Alumni Study excluded young adults with major physical and developmental disabilities (Pecora et al., 2005). The research that is available suggests that youth with disabilities in foster care have lower educational achievement and are at greater risk of poor transition outcomes than youth in foster care that do not receive special education (Del Quest, Fullerton, Geenen & Powers, 2012). For youth in foster

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care with a primary disability label of emotional disturbance the graduation rate was only 16% and 18% percent of the youth that left school did so because they were incarcerated (Smithgall, Gladden, Yang & George, 2005).

Exosystem

As demonstrated in Figure 1, youth in foster care with disabilities have multiple complex systems (i.e., child welfare services and special education services) to navigate and there is often a lack of coordination between the various agencies involved (Geenan & Powers, 2006). In a study by Geenan and Powers (2007), focus groups were conducted with youth in foster care, child welfare professionals, education professionals, Independent Living Program staff, foster parents and other key stakeholders. The focus groups resulted in data indicating that barriers to services and instability of placements were exacerbated for youth with disabilities in foster care compared to those in care without disabilities.

Participants also reported they didn't feel youth in foster care that received special education were adequately taught basic or academic skills needed for adulthood (i.e., diminishing competence). Additionally, parents and professionals reported being worried about the youth being able to access adult disability services once they aged out of the foster care system (Geenan & Powers, 2007).

Geenan and Powers (2007) also suggest that the transition to adulthood for youth with disabilities who also experience foster care has been ignored and not addressed well in legislation. In addition, Collins' (2004) analysis of FCIA suggests that the legislation does not address the reality that some youth (e.g., those with disabilities and/or mental health issues) will always require access to supports as adults.

Mesosystem

This section examining the mesosystem examines the complex interactions between the systems that youth with disabilities in foster care and the people that serve them must navigate. Due to the high rate of mobility and subsequent school placement changes youth in foster care with disabilities experience challenges navigating the educational system in particular. Educational records are often lost or misplaced resulting in delayed enrollment; and ineffective school/ agency relationships, communication, and cooperation are also barriers to fulfilling the educational needs of the youth in foster care (Pecora, 2012). The breakdowns during interagency collaboration may result in a loss of knowledge between systems resulting in the youth falling behind their peers academically, inappropriate educational placements, and/or IEPs that are not implemented (Geenen, Powers, 2006). Youth with disabilities in foster care may also be unable to benefit from some of the programs designed to help them. For example, professionals and foster parents suggest Independent Living Programs that are designed to assist youth in foster care with their transition to adulthood are often inaccessible or inappropriate due to the lack of accommodations for youth with disabilities (Geenan and Powers, 2007).

Microsystem

This section describing the microsystem's intersection between foster care and youth with disabilities examines the people and institutions closest to youth with disabilities that also experience foster care. Geenan and Powers (2007) highlighted the importance of consistent long-term relationships with a caring adult (i.e., relatedness). Foster parents may not be knowledgeable about the youth's disability and therefore have

difficulty supporting his/her needs, which may result in frequent placement changes. In addition, the people involved in the youth's life that are responsible for the youth's educational outcomes often have little understanding of the special education system. In a study conducted by the Advocates for Children of New York (2000), it was revealed that 90% of biological parents had no involvement in the special education process; 60% of caseworkers said they were not aware of existing laws when referring to children to special education and 50% of caseworkers did not believe that their clients were receiving appropriate special education services. Law guardians suggested higher involvement with the special education process for their clients (79%) and 59% said they had knowledge of special education laws; however, only 14% could demonstrate a general understanding of the legal rights of children receiving special education.

Individual Factors

Research also demonstrates that not unlike youth without disabilities, youth in foster care with disabilities experience numerous barriers to opportunities that build self-determination skills (Geenan, Powers, Hogansen & Pittman, 2007) although they would benefit from them. A study by Powers et al. (2012) utilized a randomized trial to evaluate the efficacy of a self-determination intervention (TAKE CHARGE). The participants were between 16.5 and 17.5 years old. Those assigned to the intervention group received coaching to build self-determination skills. Youth in the control group were assigned to an independent living program. Youth in the intervention group had moderate to large effect size differences in self-determination skills at post intervention and one-year follow up. They also graduated from high school, gained employment and succeeded in independent living activities at higher rates than the control group. In another study by

Geenan and Powers (2007), participants stated they believed youth have little control of their lives (i.e., lack of autonomy) and that there is frustration about the expectation to become autonomous immediately upon becoming emancipated.

Summary and Research Questions

This literature review exposes the dismal long-term outcomes for youth that experienced the foster care system including lower rates of high school graduation, increased risk of homelessness, and underemployment. In addition, the additional challenges and barriers faced by those that also experience disability were highlighted. Since there is a lack of research for the youth with disabilities that experience foster care (Geenan & Powers, 2007), it is important to add to the body of literature so that professionals working with youth in this population have a greater understanding of what helped youth overcome barriers and possible areas for targeted intervention. This study expands current literature on youth with disabilities that experienced foster care as the purposeful sample were recruited through nomination of young adult alumni of the foster care system deemed successful by their caseworker. To date, no known study has specifically examined this population's transition trajectory.

This study aims to contribute to a greater understanding of the experiences and perceptions about the transition to adulthood for young adults with disabilities that were in foster care, so that interventions can be tailored to assist youth while still in care to improve long term outcomes. This study also intends to fill a critical gap in the literature by providing a platform for young adult's voices to be heard, which will help professionals understand what services and supports facilitate a successful transition to adulthood. This study is guided by four broad research questions:

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(1) What are the lived experiences of young adults with disabilities that have experienced foster care as they transition to adulthood?

(2) What were the perceived barriers during transition to employment or post secondary education settings?,

(3) What services and supports helped the most in overcoming the barriers?, and

(4) How do the young adults interviewed define a successful adulthood?

CHAPTER III

METHODS

This chapter describes the grounded theory methods used to answer the research questions posed during this study. Grounded theory was selected as the methodology for this study because it creates a methodological framework for understanding individuals' perceptions. Semi structured interviews were conducted with young adults with disabilities that experienced foster care. In addition, a focus group of professionals that serve the population under study was conducted. Grounded theory enables the identification of theory through the systematic comparative analysis of data collected during fieldwork (Patton, 2002); data analyses procedures for this dissertation study will be described within this chapter. In addition, data collection, sample recruitment, demographic information, and interview protocols are explained.

An a priori literature review was conducted to understand the existing literature about the transition to adulthood of young adults with disabilities that experienced foster care. The existing literature informed the construction of an ecological model (Figure 1), which provided an organizing framework for understanding the complex systems, services, and elements that influence the transition to adulthood for the population under study. During data analyses, additional literature related to themes that emerged was reviewed to understand if and how they fit into the ecological model (Figure 1). The additional literature is applied within the findings and discussion sections of this paper. This dissertation study was approved by the University of Oregon, Research Compliance Services — protocol #06232013.032. Pseudonyms are used throughout the dissertation to protect the privacy of participants.

Data Collection

Recruitment

This section describes the recruitment of the interview participants and professionals for a focus group. Recruitment documents are presented in Appendix A.

Interview Participants. Interview participants (N=7) were recruited by sharing information about the study with a network of social workers, educational advocates and specialists, and college programs in King County, WA, that were asked to nominate individuals who: (a) had received special education or identified as having a disability, (b) graduated from high school or received a GED, (c) were in foster care for more than 6 months during high school, (d) have been engaged (employed or in post-secondary education) consistently for at least 1 year, and (e) are between the ages of 18-24.

Inclusion criteria for this study included having received special education services and/or identifying as having a disability; and being an alumnus of the foster care system. In addition, participants were expected to have graduated from high school or obtained a GED and be engaged in employment and/or post secondary education. This was important since the focus of this study is on young adults that successfully navigated the transition to adulthood. The age range of 18-24 was chosen because young adults that have been in foster care are eligible for Independent Living programs through age 24. It was necessary to limit the location to King County so in person interviews could be conducted. In order to facilitate equity of participant selection, young adults of any gender, ethnicity, socioeconomic status and sexual orientation were eligible to participate in the study.

Professionals informed young adults, whom they believed met the eligibility criteria, about the study and provided the researcher's contact information. The young adults called or emailed the researcher to express their interest in the study. All potential participants were asked to verify that they met the eligibility criteria and their questions about the study were answered. Once the screening was complete and they reported they did not have further questions, their first interview was scheduled. Participants were given the option of choosing the location of the interview, five chose a building that houses several programs that work with youth in or alumni of foster care and two chose to meet on their college or university campus.

Focus Group Participants. Focus group participants (N=5) were recruited directly by the researcher based on her knowledge programs in King County serving the target population including state agency social workers, postsecondary programs serving alumni of foster care, and Independent Living Programs (ILPs). Questions about the study were answered and potential participants were polled about the most convenient location and time for the focus group. The focus group was held at the same location as five of the participant interviews.

Sample Demographics

Sample demographics for young adults participants and focus group participants are described in this section. Sample demographics for interview participants are described, followed by demographics of focus group participants.

Interview Participant Demographics. At the time of the interview, the average age of interview participants (N=7) was twenty-one; five identified as female and two identified as male. All participants in the study identify as having a disability and five

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received special education services. One participant did not disclose the length of time she was in care, for the remaining six participants the length of time in care ranged from four to nineteen years. At the time of the interview, three were in a post secondary program, two had completed associate's degrees of which one has transferred to four-year university, one is working towards her GED (this was not disclosed during the phone screening), and one participant is not currently engaged in an educational program. Three of the participants were employed. Two participants identified as African American, three identified as Native American and Caucasian, and two identified as Caucasian (see Table 1).

Table 1

Self-Reported Demographic Characteristics of Participants

Participant	Gender	Ethnicity	Age	Years in foster care	Disability	Diploma/GED
Mona	F	African American	21	16	SLD/ED	Diploma
Tammi	F	African American	22	N/D	Epilepsy/ADHD	Diploma
Manny	F	Native/Caucasian	19	4	PTSD	GED
Sandra	F	Native/Caucasian	19	4	SLD	N/A
Matt	M	Caucasian	19	4	SLD, Depression	Diploma
DD	F	Native/Caucasian	22	19	MH	Diploma
Rex	M	Caucasian	23	11	ADHD/ BP	Diploma

Note. Attention Deficit and Hyperactivity Disorder (ADHD), Emotional Disturbance (ED), Mental Health (MH), Specific Learning Disability (SLD), Post Traumatic Stress Disorder (PTSD), Bipolar Disorder (BP).

Focus Group Participant Demographics. Focus group participant's (N=5) average age was thirty-eight; three identified as male and two identified as female. One focus group participant identified as African American and Caucasian, one identified as African American and Hispanic, one identified as Asian and Caucasian, and one

identified as Caucasian. Length of time working with youth in foster care ranged from 2.5 to over 14 years. Four focus group participants work for community based organizations and one works in higher education. Three focus group participants identified as professionals, one as a paraprofessional and one as an expert in the field of foster care (see Table 2).

Table 2

Self-Reported Demographic Characteristics of Focus Group Participants

Participant	Gender	Ethnicity	Age	Years of Service	Organization Type	Level of position
Jack	M	African American/Caucasian	27	2.5	CBO	Paraprofessional
Lisa	F	African American/Hispanic	27	3	CBO	Professional
Suzie	F	Asian/Caucasian	41	14+	CBO	Professional
Dan	M	Caucasian	63	6+	Higher Ed.	Professional
Frank	M	Caucasian	33	8	CBO	Expert

Note. Community Based Organization (CBO)

Measures

Interview Protocol. The interview protocol used with the seven young adult participants (see Appendix B) consisted of five sections. The first section contained questions designed to gain greater understanding of the lived experience of participants as they transitioned to adulthood. The questions focused on their experiences in high school, placement changes, and their disability diagnosis. The second section contained questions that were designed to elicit information about perceived barriers encountered during participant's transition to employment or post secondary education settings. The questions centered around transition planning in high school including IEP goals and conversations with professionals, caregivers and peers about becoming an adult. The

third section contained questions designed to provide greater understanding about services and support that were perceived as the most helpful in overcoming barriers encountered during transition. The questions focused on the people that were the most helpful, events or steps needed that were the most challenging, and reflecting on what they wish they had known before they began college or their job. The next section focused on uncovering how the participants defined being "successful" as adults. The questions focused on their specific definition and future aspirations. The final section offered an opportunity for participants to add anything that they felt was important that was not captured during the interview.

Focus Group Protocol. The focus group protocol used with the five professionals (see Appendix B) also consisted of five sections. The first section contained questions designed to gain greater understanding of professionals perceptions of the transition to adulthood for young adults with disabilities that experienced foster care. The questions focused on services they provide, what they believe is the most challenging for youth, what strengths they have observed, placement changes, and if they discuss youth's disability diagnosis with them. The second section contained questions that were designed to elicit information about what professionals perceived as the barriers encountered by youth with disabilities that experienced foster care as they transition to employment or post secondary education settings. The questions again centered on services they provided, IEP goals, Independent Living Programs (ILPs), and conversations with their clients or students about becoming an adult. The third section contained questions designed to provide greater understanding about services and support that were perceived as the most helpful in overcoming barriers encountered by youth

during transition. The questions focused on which services or supports professionals

perceived as being the most needed and if they felt those services were currently

available; how they believe youth decide to go to college or begin working, and what

they have observed is the easiest or hardest for them in those settings. The final section

offered an opportunity for participants to add anything that they felt was important that

was not captured during the focus group. Focus group participants were then asked to

reflect on when they felt their work with a youth or young adult had been successful.

Procedures

      Interviews. Semi-structured interviewing, in settings chosen by respondents,

provided an opportunity for those being studied to explain to the researcher the important

factors from the insiders' perspectives. The young adults were invited to share the story

of their high school experience and transition to adulthood in their own words, including

the events and people that they felt were the most important. Topics included: number of

placement and school changes, special education experience, involvement with social

services, and role models and/or mentors. Before the first interview began with each

participant, informed consent was obtained and participants were asked if they had any

additional questions about the study. Participants were then asked to fill out a short

demographic form (Appendix B), gathering information about demographics, length of

time in foster care, disability status and current employment and/or educational status. At

the end of the first interview, the follow up interview was scheduled generally two to

three weeks away so that the interview could be transcribed and coded before the follow

up interview was conducted. The researcher conducted a follow up interview with each

participant to gain a depth of understanding of the young adults' lived experience. Each

participant received a small incentive of a $25 gift card upon completion of the second interview. The time between the first and second interviews ranged between two weeks and two months.

Focus Group. A focus group of professionals that work with youth in or alumni of foster care was conducted to understand from the professional's perspective what has been the most helpful to the youth they have served during the transition to college or employment. The focus group helped clarify issues and barriers or challenges faced by the population being studied and understand perspectives from a number of key informant groups in a short amount of time (Morgan, 1988). The group was of sufficient size to elicit a range of perspectives but small enough that each participant had the opportunity to speak openly (Morgan, 1988). The questions from the protocol for professionals (see Appendix B.) were used during the focus group. Before the focus group began, informed consent was obtained and all participants filled out a short demographic survey (Appendix B), gathering information about demographics, length of time that have worked with youth that experienced foster care, and their current role. In addition, questions about the study were answered except questions specifically about what the young adults had said during their interviews. This decision was made to reduce the potential of biasing professionals' answers during the focus group. Three focus group participants then asked for the results from the study to be emailed to them. All reported they were satisfied with this solution before the focus group began. Each focus group participant received a small incentive of $10 upon completion of the interview. The focus group lasted for an hour and a half.

All interviews and the focus group were recorded using a digital audio recorder so that they could be transcribed verbatim. This facilitated accuracy and fidelity during analysis and interpretation. The electronic and written files were stored in a password-protected file only accessible to the researcher and the transcriptionist; the file name included only the participant code number. The transcriptionist was trained by the researcher to exclude participant names from the transcripts, how to maintain the secure audio files, and signed a confidentiality agreement.

Field Notes. Field notes were taken during and immediately following each interview and focus group. The format used follows the generally recommended practice for qualitative methodology of separating description from reflective material (Patton, 1990).

Field notes included:

1) Context— who was being interviewed, where they were being interviewed, and a description of the physical environment where the interview took place.

2) Communication — description of what occurred during the interview.

3) Impressions— notes about any "themes" that seem to be emerging from the interviews or topics for follow up.

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Data Analysis

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Interview transcripts were uploaded to NVIVO 10 for analysis. Each transcript was read in its entirety without agenda to gain a sense of it as a complete picture. Next, each transcript was re-read looking for themes that were shared across interviews; this began to shape the framework for analysis (Charmaz, 2006). Open coding, also known as line-by-line coding, was conducted to identify connections between participant's

perceptions and initial nodes. The initial nodes were created based on the research

questions (see Table 3).

Table 3.

Initial Nodes Used for Open Coding

Initial Nodes
Barriers-All context that described implicit or explicit barriers encountered during the transition to adulthood

Services and Support for Removing Barriers
  ▪ Disability Services
  ▪ Decisions around attending college or starting work
  ▪ What participants wish they had known
  ▪ What has been difficult
  ▪ Who helped

Transition to Employment or Post Secondary Education
  ▪ Conversations about becoming an adult
  ▪ Transition Planning

Defining Successful Adulthood
  ▪ Definition of Successful adulthood
  ▪ Future Aspirations

       Themes began to emerge from common descriptions regarding perceived barriers,

individuals or services that were the most helpful; and descriptions of successful

adulthood. Commonalities between interviews and the focus group were compared and

delineated; memo writing was utilized to keep track of the patterns that were beginning to

form. During initial analysis, the researcher sought to understand the lived experience of

the young adults interviewed without any preconceived notions skewing the analysis; she

remained open to the theoretical possibilities emerging from the data (Charmaz, 2006).

       After completing the initial analysis, focused coding was conducted. This

facilitated decision-making about which of the themes that were emerging in the first

round of coding provided the strongest framework for categorizing the data (Charmaz,

2006). As the relationships between the themes coalesced, a narrative that represented the

connections was generated as well as visualizations of those connections. It became clear

that the nodes could be mapped onto the ecological model (Figure 1) created from the

literature. During focused coding, the content of each initial node was coded to the appropriate layer of the ecological model (Figure 1) and child nodes were added. Each node was further reviewed and subsequently coded as positive (i.e., a helpful service or support) or negative (i.e., a barrier). This enabled a cross case analysis through matrix coding queries (see tables in Appendix C). During this additional analysis, additional elements within the layers were captured through in vivo coding (see Table 4).

Table 4.

Nodes Resulting from Focused Coding

Nodes resulting from focused coding
Exosystem
■ Disability Rights
■ Extended Foster Care*
■ ILP
■ Placement Changes
Mesosystem- All context regardless of "Node" that demonstrated the interaction between exosystem and microsystem
Microsystem
■ Family
■ Friends
■ Professionals
■ High School
■ GED*
■ Housing*
■ Parenting*
■ Post Secondary Program
Individual Factors
■ Behavior*
■ Disability label
■ Identity
■ Mental Health*
■ Resilience*
■ Self Advocacy*
■ Self Determination*

Note: An asterisk represents a node that resulted from in vivo coding

The final phase of analysis included member checking with the participants. Member checking occurred either in person or via email, whichever the participant preferred. Member checking consisted of the researcher asking specific questions about data that was unclear from the interviews and focus groups. In addition, the key findings

were presented to the participants and their feedback was solicited. Data collection was

completed within a year.

CHAPTER IV

RESULTS

In this chapter, the results of the analyses are presented for each research question. The chapter contains two main sections; a) participant profiles and b) cross case analysis. The first section addresses the first research question by providing a narrative that frames the lived experience of the young adults with disabilities that experienced the foster care system as they transitioned to adulthood. Although information about each layer of the ecological model is presented if it was discussed during the interviews, the profiles are not subdivided by the layers in order to preserve the narrative flow of how the participants shared their individual histories. The section concludes with the participant's answers to the question — if your life were a movie what would the title be? The second section addresses the remaining three research questions, using cross case analysis. In addition to the data acquired from the structured interviews the cross case analysis includes focus group data to further inform the findings. While the cross-case findings are subdivided into the layers of the ecological model that have been the foundation of this paper (individual, microsystem, mesosystem, and exosystem); the findings also demonstrate how the layers overlap and are not separate discrete spheres of influence. Throughout the chapter, participants are quoted to highlight key themes or particularly salient points, providing a platform for their voices to be heard and their lived experiences to be honored.

Participant Profiles

Research Question One: What are the lived experiences of young adults with disabilities that have experienced foster care as they transition to adulthood?

In this section, participant profiles are presented in order to better understand the lived experience and unique context for each participant as he/she transitioned to adulthood. Adding to the complexity of their time in foster care, all seven participants experienced many placement changes. Only three of the young adults were in the same placement throughout high school. Two participants were adopted, however one adoption did not occur until adulthood and one failed and the youth was returned to care. All but two of the participants received special education services during high school. Three participants became pregnant while still in high school and none of the participants returned to their birth homes before "aging out" of foster care. Four of the participants experienced homelessness between leaving high school and the time of the interviews. All participants were recommended for the study because the professional that referred them considered them to have successfully transitioned to adulthood. Table 5 contains the current age, and educational, employment, and housing status for all interview participants.

Table 5.

Self-Reported Current Status of Interview Participants

Name	Age	Post Secondary Ed.	Employment	Housing
Mona	21	AA, pursuing bachelors	Employed	Apartment
Tammi	22	AA	Not employed	Apartment
Manny	19	Pursuing bachelors	Employed	Apartment
Sandra	19	N/A	Not employed	Apartment

Matt	19	N/A	Not employed	Bio family
DD	22	Pursuing AA	Employed	Apartment
Rex	23	Pursuing bachelors	Not employed	Dorm

Mona. Mona seemed to speak freely and had a contagious laugh. She was enthusiastic and animated throughout both interviews. Mona identified as female, African American and indicated that she had a specific learning disability and emotional disturbance. Mona was in foster care for sixteen years and had been in multiple placement types including group and foster homes; kinship care, and a psychiatric children's hospital. When asked how many placements she had in total, Mona responded, "I have no idea." Mona used a wheelchair but did not reference it or disclose additional information about why it was needed, until we began talking about school services that she received. She then reported that she was born with cerebral palsy and was later diagnosed with multiple sclerosis. She attributes a failed adoption at age ten to her ongoing medical problems. Mona experienced homelessness for a year during high school. As she explains it, the family member that she had been living with "decided that she wasn't going to help me after I turned 18." Her sister was also homeless and living in King County so she relocated from the southeastern United States to be nearer to her; she believed there would be more social services available. At the time of the interview she was 21. Mona received her associate's degree in family studies and had recently transferred from a community college to a large four year university where she plans to pursue a master's degree in social work. She had also started a new job a week before the first interview.

Tammi. Tammi seemed enthusiastic about the opportunity to share her story; she describes herself as "talkative" and social. Tammi talks quickly and laughs frequently during the interview and interacts gently with the toddler she brought along because she was babysitting. Tammi identified as female, African American and indicated she had epilepsy and ADHD. Tammi did not report her total length in foster care. She began living with her foster mom, who she refers to as "mom" when she was nine. Tammi attended the same high school for all four years and says her "mom" was very involved in her education. Tammi was not diagnosed with epilepsy until her senior year of high school. Her description of the event follows,

> that right there – that ruined my life. I always say that was a mid-life crisis, even though people are like, you are not even mid-age. You are only seventeen, but still, that was when I was getting ready to get my license. I was about to graduate high school. I would have had a car, and then all of a sudden that happened.

In spite of this, she graduated from high school on time and started at a technical college. She says, "I was set on early childhood, I was set. I love kids. I wanted to work with them. I wanted to give back and help, and if there are foster kids -- that is what my mind was set on".

Tammi earned a certificate of completion for Child Development Associate and gained employment. Eight months prior to the interview she lost her job at a daycare; she believes it was because she "had a seizure at work." She opened a "case with the equal employment place, but they denied it." Tammi recently had an interview at another day care center and was told that she was "a great candidate but if you had a seizure at work, what would I tell the parents." Tammi reports that she has not received information about her rights as a person with a disability. Her neurologist recommended that she contact the Division of Vocational Rehabilitation (DVR), but she has not yet had an appointment

with them. She has been living on her own for two years but her "mom" is asking her to return home because she worries about her living independently with epilepsy. Tammi is currently 22 and is babysitting for friends and family while continuing to look for stable employment. She has not given up on her dream to work with children.

Manny. Manny comes across as a very strong and determined young woman. She identified as female, Native American and Caucasian and indicated she has PTSD and that she will be receiving a service animal. Manny reports being in foster care for four years. Although she does not identify as having bipolar disorder she reports that she was on a 504 plan in junior high "by reason of bipolar disorder." She was also on psychotropic medications which she states left her with "permanent brain damage and occasional myoclonic seizures." Manny said after a change in psychiatrists she was told, "You were diagnosed with depression and anxiety and PTSD, but you were never diagnosed with bipolar so I don't know why they were treating you for it." She stopped taking psychotropic medication in 2008 when she got off of probation for legal issues that occurred when she was a minor.

Manny had five placements while in care, including kinship care and a home for teen parents. Manny had an "extremely long runaway history" and ran away for a month after she entered care. She says, "I ran away at the age of thirteen, I kept running away. At one point, my mother restrained me with leather handcuffs and rope up to my elbows. My hands turned grey by the time the cops arrived. She got a rope burn from me struggling and I got an assault charge." Manny was placed into foster care at age fifteen when her son was four days old. They stayed together during their time in care; he is now

three and she remains his primary provider. She earned a GED and chose to enter extended foster care so that she could receive support until she is 21.

Manny works for a non-profit organization that advocates for youth in foster care. Through her work and independent research, she is extremely knowledgeable and articulate about the laws affecting youth in foster care and the new extended foster care law. The support she receives from being in extended foster care has allowed her to obtain a voucher for housing and live independently. She was a freshman at a community college when we first spoke, but at the time of the second interview she said she was "administratively dropped from the class because of my criminal history." She explains that her criminal history resulted from the assault charge brought against her by her mother at age 13. Manny said that she plans to switch to a different community college and new program and says she "will have to wait until winter quarter and cross my fingers and hope that everything falls into place." She is currently 19 and still employed at the non-profit and says that she can "totally see herself there in 30 years."

Sandra. Sandra seemed more reserved than the other participants, however once the interviews began she was very candid in her responses. Sandra identifies as female, Native American and Caucasian, and indicated she has a specific learning disability. She was in foster care for four years and was in group homes and foster home placements. Sandra attended four different high schools and by senior year had only obtained six credits. She became a parent in her senior year of high school and said, "When I was pregnant, my foster mom put it in my head that I didn't have to go get my GED, I didn't have to work, and she would take care of me and the baby." At that point she dropped out of school and began working on her GED. When she turned eighteen she left the

placement because she believed her foster mother was being unethical with regards to trying to get additional payments; she reported this concern to the state licensing agency. At that point, Sandra left the placement and became homeless. That was in December and her son was born in February; at which time she lived in a home that provides transitional housing with supportive services to women, eighteen years and older, who are pregnant and/or parenting and homeless. Sandra was 19 at the time of the interview and her son is nineteen months old and lives primarily with his father. She recently qualified for Section 8 housing and once she finds an apartment, her son will begin living with her. She still has one test to go to complete the GED and upon completion plans to attend a community college, where she hopes to become a paramedic.

Matt. Matt was not very animated as we talked, however he seemed to speak freely and did not hesitate in answering any of the questions. Matt identifies as male, Caucasian and indicates he has a specific learning disability, depression and mental health concerns. He was in foster care for four years, had multiple placement types and was involved with the juvenile justice system. He went to his first group home at the age of eight and says he "went home once, but just for a couple of weeks but I acted up again, so they shipped me out. Other than that, I was in a group home or foster care for my whole life." Matt also spent some time in "juvie" because of behaviors that occurred in foster and group homes. During the interview, he disclosed that he has "anger, bipolar, ADHD, and one other I can't think of" and that he takes medication for all of them.

As a freshman, he was placed in a group home that remained stable until he finished high school. Matt graduated high school with a standard diploma and says then they "shipped me home." He said he never had any conversations about becoming an

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adult while in the group homes and he "just focused on getting home." He went on to say, "That is my goal ever since I was in foster care, to get back home and stay home." He is not currently engaged with school or work and reports this was due to manifestations of his disability; he receives SSI and has begun accessing service through DVR and an Independent Living Program (ILP). He said as a child he wanted to join the military but was told by a member of the National Guard that he is not eligible because of the medications he takes. Matt said that he "can't even be a cop because of anger issues, depression and stuff like that." He also reported, "no one talked to me about college, but I am thinking about not this year but next year, I am probably going to start going to college. I had a rough time in all my school years; that I didn't want to pop right back in school for a year or two." Matt was 19 at the time of the interview and living with his biological family, but seeking housing assistance so that he could have his own apartment.

DD. DD seemed eager to tell her story and said that she has done so for events and as a film project. She identifies as female, Native American and Caucasian, and indicates she has a specific learning disability. She was in and out of foster care while growing up and estimates her total length in care was nineteen years. As with several other participants, during the interviews she disclosed a history of mental health concerns and additional diagnosis including ADHD, depression and anxiety. After her junior year in high school she was in a steady foster care placement with the woman, she calls "mom" throughout the interviews. She entered this home with less than ten credits and was very disengaged from school. A few months into the placement she said her foster mother sat her down and said,

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Alright. So everything we've done so far hasn't worked. You know, we've tried giving you incentives we've tried everything in the book, we've tried. Didn't work.' And they were like, this is it. This is it right here. 'If you want to be part of this family right now you have to participate and be part of this family. And that means going to school and doing your homework and coming back when we tell you to come back and you know have dinner at the table with us and you know all of these things. That's what it means to be part of this family. If you don't want to do those things, then you can't be here, and we'll have you go somewhere else. And that would be sad, but if that's choice you make that's the choice you make. It's in your hands.' And that was it. That was the complete 360.

DD said the main reason for her transformation was that they had used the word "family" and that is what she desperately wanted to be a part of.

Remarkably, DD made up the necessary credits and graduated on time with her class. However, even with the consistent support she received from her "mom," DD's transition to adulthood has been tumultuous. She was accepted to a four year university and moved on to campus in a town away from her "mom." During her first term she struggled and experienced mental health challenges. She eventually dropped out and returned to living with her "mom." She enrolled at a community college and struggled again, eventually dropping out. This disqualified her from receiving her extended foster care benefits and created financial hardship on the whole family. Her "mom" was forced to move and DD was "not invited;" she began living in her car. DD floated between living with friends, "couch surfing" and living in her car and experienced deep depression. She said, "it got so bad that I was ready to cut myself, and I'm not even exaggerating. I called [mom], because that was always my safety plan. If ever in doubt, call [mom], so I did. I called [mom], immediately she picked me up." Her mom's living situation had improved and there was room for her. She credits her mom for saving her life. Her "mom" adopted her at age twenty one. The adoption was a major turning point in her life because she had better access to mental health services along with the

willingness to receive them. At the time of the interview, DD was 22 years old, living on her own again, a sophomore at a community college, and had been working for one year. DD plans to transfer next year to a four year university to pursue a bachelor's degree.

Rex. Rex is extremely articulate and demonstrated a lot of personal insight and self-awareness throughout the interviews. It is evident that he has spent a lot of time thinking about the path his life has taken and the direction he wants to continue in. Rex identifies as male, Caucasian and indicated he has ADHD and bipolar disorder. He was in foster care for eleven years. He says he remembers "at least 15 different homes" before his final placement, which began at age nine. Rex was homeschooled by his foster parents whom he then referred to as "mom and dad." He said the family members were Quaker Christians and that he did not have access to the Internet and rarely "left the campus." Rex shared that he sensed that the family was trying to protect him however; he stated that in his personal opinion this lifestyle "made transitioning -- even though I was prepared for college, my first year was completely overwhelming."

Rex graduated early from high school, moved out and began taking classes at a nearby community college. His relationship with his foster parents "deteriorated really, really, really quickly" and he is no longer in contact with them. He made several other attempts at various community colleges, spent time staying with friends, and eventually ended up on the street. Fortunately, within a day his biological aunt found out he was homeless and offered to take him in. He said at that point he was "really broken" and his aunt knew it. He said they had "many honest conversations about where I was as a person, how stable I was." Through the conversations he realized he was in school because he felt like it was what he was "supposed to be doing". His aunt said,

'No, what you need to do right now, is you need to figure out you. And right now, you are not school.' That is what she basically told me. So I made the decision, oh, I'm going to get a job and I'm going to build my life again. So we went through the process of, this is how you do laundry, this is how you are to be a normal person, basically. Then I got a job and then I started working at the job and doing stuff at home and helping with meals and everything. Then as soon as I could, I got a place and got fired from the job, which was weird, the whole way that went down. Then I got into school. I went straight into school and started just doing academics again, going back to being a college student.

Rex resumed his academic career at a community college and then transferred to a four year university where he is currently a junior.

During the interviews, Rex talked a lot about identities and labeling and I questioned him about his tattoo – "RESILENT" – which runs down his left arm from elbow to wrist. In response he answered,

For me, it is very much an identity thing, because I had a shitty past. I was taken from my mom when I was seven…and never felt stable. The one thing that I knew is I knew myself, every step. I got a lot of help growing up through my one longest thing, but the thing that I learned about myself was my resilience. So I knew that wherever I went, whether an employer saw it, whatever, I always wanted people to see the visible representation of, you can throw whatever at me, and I will get through it. As long as I know I can get through it, I feel better.

At the time of the interview, Rex was 23 and scheduled to study abroad next year. He is planning for a career in international policy making.

If your life, during high school, were a movie what would the title be?

Participants were asked, if his or her life, during high school were a movie, what the title would be? Their responses reflect both the barriers faced and elements of their identity at the time. The participant's answers and elaboration – if available – follow:

Mona- "Homeless to College," she described, "I was trying to go to college but I really thought about dropping out… the school wasn't really wasn't trying to work with me…"

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DD-"The Bitch", she had shared earlier in the interview that people at her school didn't like her because she was "a little too blunt for people" and that she was "definitely dubbed queen bitch."

Tammi- "Drama," she elaborated, "Not Drama, I wouldn't say that, but maybe like, not drama but a lot of things. I don't know if you have these questions, but my senior year, two guys came out of nowhere, 'Hey, I'm your dad.' It is like I'm 18 years old and you are my dad. Who are you? I don't know you. It was too weird. Just crazy stuff happened throughout my life."

Matt- "Guy who Hates High School," he said that it would be a mystery or drama and that the "mystery is getting used to everything, just learning things and the time to do stuff, and drama would be everybody arguing and stuff."

Cross Case Analysis

The previous section provided profiles of each participant in order to understand the context of his or her individual situation. This next section contains cross case comparisons of interviewee responses to each research question in order to gain a deeper understanding, uncover common themes, and inform improvements to systems and services and possible points of intervention. This section also contains the perspectives of professionals that work with the population that were gleaned via the focus group. The focus group data are included after the interview data when the themes that emerged were the same; it is located at the conclusion of each section when unique themes emerged from the focus group. Throughout the cross case analysis, deeper understanding of each young adult participants' lived experience is described.

Research Question Two: What were the perceived barriers during transition to employment or post secondary education settings?

This section discusses the perceived barriers during transition to employment or post secondary education setting. The themes that emerged are presented in Table 6. The analysis is subdivided by the layers of the ecological model (Figure 1), which have been the organizing structure of this dissertation study.

Table 6

Emergent Themes for Research Question Two

Ecological Layer	Source	Theme
Q2. What were the Perceived Barriers during Transition to Employment or Post Secondary Education Settings?		
Exosystem	YA	Inconsistent high school graduation requirements compounded by mobility
	YA	Inconsistent access to ILP services and preparation for transition
	YA	Lack of safety nets after "aging out."
	FG	Inadequate service delivery model for foster care
Mesosystem	YA/FG	Frequent placement changes
	YA/FG	Inappropriate disability or mental health diagnosis
	YA	Barriers to employment
Microsystem	YA	Unstable and/or negative housing experiences
	YA	Lack of consistent, positive relationships
	YA	Early parenting
	FG	Lack of highly skilled social workers, special education teachers, and foster parents
Individual Factors	YA/FG	Mental health needs
	YA/FG	Lack of disability awareness or implications of mental health diagnosis

Note. Young adult = YA; Focus Group = FG.

Exosystem. In the participant interviews three themes emerged: inconsistent high school graduation requirements compounded by mobility; inconsistent access to ILP services and preparation for transition; and lack of safety nets after "aging out." The main theme to emerge from the focus group was the inadequate service delivery model for foster care.

Inconsistent high school graduation requirements. Inconsistent school policies and requirements for graduation, between individual schools, districts, and/or states, created hardship. This was especially problematic because participants experienced school changes corresponding to frequent placement changes. Mona summarized what others also articulated:

> I had a really big problem because I mean once you get in high school your credits follow you and I was moving all over the place and certain schools requires certain things and other schools required things that they didn't.

Sandra also said that she experienced difficulty, due to,

> switching schools and having to be in a new environment, new teacher, how one school how they do their work with their students and how another school does their work with their students. So that was my main thing, switching so much. It was I was just going to give up on high school, because I was switching so much.

Inconsistent access to ILP services and preparation for transition. Participants disclosed they did not believe they were adequately prepared for adult living. They attributed this to a combination of elements, including inadequate preparation received through independent living programs. Many participants discussed how they felt unprepared to manage household responsibilities such as bill paying or making or keeping a budget. Mona said,

> I didn't realize how much you actually had to like, figure out how to pay for until I got there. I mean I don't think... I think I was really just like dropped on like everything. I mean like, I knew people paid bills but I didn't know how to do it. I

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just felt like my whole like... I guess my whole like, independent living/getting ready for college nobody had like taught me. It was something that everybody told me it was something I had to do, but nobody really talked about how to do it.

Rex said that he didn't have access to an Independent Living Program until five months before he began college and that although he had income through scholarship programs, he had no clue how to budget money and blew through all of it. He said, "It would have been really nice if I had had one thing to be like, hey, this is a refund check. Put it off to the side. It helps pay for things."

Lack of safety net. Participants reported that lack of ongoing services after "aging out" of foster care had a negative impact on them and several attributed this to not having the safety net of being able to go home to their families when they experienced hardship. Homelessness is one example of this. DD became homeless after she and her foster mother had a conflict and the foster mother, due to financial difficulties caused partially by DD, needed to move to a smaller home. Rex became homeless after attempting to live with several different friends in their homes, and Sandra became homeless after aging out of her foster care placement. Mona said she didn't feel successful when she first aged out and that she didn't know what to do. She said that obtaining housing was particularly challenging and that she felt people looked down on her for being homeless and for being disabled. She said even though she now feels more "on track" she still feels "a little lost sometimes especially when I'm like, 'I don't know who to call for help', and people are like, 'You don't have family?' and I'm like, 'Not really.'"

Inadequate service delivery model. The key theme that emerged in the focus group data regarding exosystemic barriers was inadequate service delivery model for foster care. Frank, director youth programs, suggested that, "the foster care delivery

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methods we use themselves are inadequate." He further explained that many caregivers are isolated and unsupported and they need ongoing training and respite, in order to reduce placement instability for youth. Suzie, social worker, agreed stating that "we have very few highly trained caregivers" and that the ones that do exist "are often over-tapped and overused." Dan, community college professional, gave a particular example of how the system is also not designed to address cultural needs of immigrants and/ or refugees, which may result in multiple placements because the caregiver and youth's beliefs systems are not in alignment. In addition, issues like citizenship complicate the transition to adulthood and may not have been addressed before the youth ages out of care. Lisa, youth engagement specialist coordinator, agreed and said that cultural competence training is needed so that caregivers know how to relate to a youth of another ethnicity and what to do if the youth "doesn't know how to relate to them."

Mesosystem. Two themes that emerged within the mesosystem layer were consistent across the interview and focus group data: barriers caused by frequent placement changes; and inappropriate disability or mental health diagnosis. The third theme, barriers to employment, was unique to the interview data.

Frequent placement changes. Systems impacted by state and federal laws, such as the children's administration, interact with social workers, birth, and foster parents in complex ways during decision making about the appropriate placement of a youth in the foster care system. As a result, many of the youth in this dissertation study experienced multiple placements and different living situations including kinship care (living with a relative), foster homes, group homes, psychiatric hospitals, and specialized homes for teen parents. Several reported negative experiences that led to them reporting the foster

parents to the authorities. Matt reported one family that "would leave him outside….they did it in the winter, too. They would be gone for three or four hours with nothing to eat." He said that his caseworker did not believe him but eventually the neighbors called and he was removed from that placement. Sandra also reported her foster parent, her final placement, to the children's administration for mishandling of funds. She moved out of her final placement at 6:00 am the morning she turned 18 and then became homeless. When her son was born, she turned to a shelter for pregnant women but felt uncomfortable because "everybody is older here and has so many kids and knows what to do." Due to her feelings of discomfort, she began "couch surfing" which led to a Child Protective Service case for her son.

During the focus group, Jack stated that placement changes were one of the biggest barriers to the successful transition to adulthood for the youth he serves. He said that if during his intake he saw more than three placement changes he realized that he was "going to have to dig in and really do some work." Suzie, social worker, shared her experience of moving a youth from one placement to another. She said that every time the youth was moved "it was like reinventing the wheel" and that for youth with disabilities you may move them from a placement that understands how to meet their needs to one that does not. Suzie acknowledged that a lot of times during those placement changes "things don't get transferred over…that is probably the number one issue that they have." Dan, community college professional, reported that many of his community college students that were identified with learning or other disabilities before college, shared that they moved around a lot and because of the different expectations at the schools they went to they were "frustrated" and "fed up with the whole educational

system". This led many of them to drop out before graduation and then later when they were ready to go to college they had to get their GED before they could begin.

Inappropriate disability or mental health diagnosis. The interaction between special education law and receipt of services was also perceived as a barrier for some participants. Due to school changes, one of DD's schools was unaware that she had an IEP. She reports that she had an IEP in elementary and middle school but by the time she returned to high school (after running away),

> there was all that commotion happening so it just went off the radar. Nothing happened about it. Then when I went into my foster care or foster home with [M] they were like, 'Okay, we need to get you on IEP,' they tried getting me on it and they were like 'Oh wait! There's one right here. You've had one all the time. Let's get this going.'"

For Mona, her IEP in elementary school did not designate that her services were for cerebral palsy

> Somebody put me down as like borderline retarded {laughs} and I'm not, and the school ran with it and I was like where did this come from? In the meantime when I went to do something that the school and they were like and they were like we think you're borderline retarded. And I was like, 'Where did you get that from?' And they were like, 'it's in your file' and I was like, 'oh {laughs} that's great to know,' because I was like like sixth grade. They have special and that, they had different levels so they were putting me in like the lower end of special ed.

Mona reports that being in the self-contained classroom was "traumatic" and that the environment was chaotic with "people screaming." In seventh grade, she was removed from the self-contained classroom; she was then diagnosed with a specific learning disability. During this time she reports that her social worker was "supposed to come see [her] every 90 days" but she only saw her about once a year. It wasn't until the ninth grade that she was diagnosed with dyslexia; Mona believes this delay in diagnosis was mainly due to her frequent moves. She said she would get set up for testing but by the

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time it was supposed to happen she would have moved. She also reports the school would send her for tutoring "but it wasn't working because I was just moving around so much every time I moved they had to find new resources and by the time I got linked up with the resources I was like moving again so yeah."

Manny also believes that she had an inappropriate diagnosis of "bipolar" in the eighth grade and a 504 plan was written. She reports that she had "anger issues" at the time and that the medication she was on "was turning [her] into a complete zombie." Manny summarized, "I could not stay awake. I was the walking dead." Taking the medication was required for her probation and she was given random urine analysis, which she reports was their way of "testing to make sure that I was taking my meds too." She reports that this diagnosis made her very angry and she did not feel that it was accurate. Upon being transferred to another psychiatrist she was told that she had never been officially diagnosed with bipolar and the psychiatrist questioned the medication she was required to take. She was then diagnosed with depression, anxiety, and PTSD. Manny did not indicate that she felt this was an incorrect diagnosis.

Frank, director youth programs, said when his organization is working on "an issue identification process with youth" they frequently discuss "over medication and inappropriate institutionalization." He said youth have shared that they may have "nine diagnosis and [they] don't think any of them are right." He shared the story of a youth that testified before congress because at age seventeen she was,

> locked in a psychiatric facility and was on heavy doses of psychotropic medications that she did not want to take. She was picked up on her 18th birthday by a man who has now adopted her, and against doctor's order had to reduce and then discontinue taking medication…[S]he is 21, 22 now, living independently, has her AA, and is on no medication and feels really strong that the state made a huge mistake to lock her up, to give her multiple diagnoses that she feels weren't

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helpful for her to heal and move forward in her life. Her thing, her line is always, 'Foster kids don't need pills. They need loving adults who are going to show up for them and actually adopt them, because that is what worked for me.

Barriers to employment. Independent Living Programs (ILPs) helped participants set goals, however participants reported they didn't know how to achieve the goals and/or multiple options were not explored. For example, Matt reported that no one ever discussed college or extended foster care with him. He said he wanted to own a "home and all that. Obviously that is not going to happen" so they set small goals like "go home and help my mom pay the house bills." Matt reported that although he wants a job, he has been unable to obtain steady employment in the last two years due to his disabilities. He recently connected with DVR and receives SSI. As another example, Tammi reported that she has not been informed about workplace rights or given guidance about when and/or how to disclose, during a job interview, that she has epilepsy. She worked on goal setting in her current ILP program; her goal sheet states that she will "get a job," but it does not identify steps toward her career goal of working in the early childhood field.

Microsytem. The microsystem is marked by instability for the participants in many areas including where they lived and the people in their lives. The main themes to emerge as barriers within the interview data were unstable and/or negative housing experiences, lack of consistent, positive relationships, and early parenting The main theme that emerged in the focus group was lack of highly skilled social workers, special education teachers, and foster parents; this theme has some overlap with the theme of the lack of consistent, positive relationships exposed within the interview data. It is presented separately because lack of training was stressed within the focus group; whereas, the quality of the relationships was stressed within the interviews.

Unstable and/or negative housing experiences. Unstable housing occurred both while in foster care and after the transition to adulthood. Of the various placement types, participants reflected most negatively about their experience in group homes. Mona shared that she felt that,

> the most hardest were the group homes because you lived with like five other people and you couldn't control their behaviors so if they wanted to stay up all night screaming you were just up and you had to go to school the next morning and even if you didn't sleep at all.

DD also shared that from her perspective the group homes were "the worst thing ev[er]..in life" She went on to explain that she had to,

> get my shoes checked every time I walk in the door. I have to like have like have a urine test because I'm known for smoking a bunch of weed. And I have to like, I have to hide my cigarettes in my bra line and I have like... I feel like I'm this criminal that's in like... this prison. And, and now, and like cupboards are locked with food. And it's just, it was like this whole big thing and I hated it. I absolutely hated it.

Matt also said he "hated" the group home and that "everyone didn't like it." He said they had the same cycle of watching TV, recreation time, exercise time, and "hanging out time," and then a meeting with all residents, in his case every day for four years.

In addition to negative experiences in foster care placements and needing to adjust to a new placement frequently; four of the seven participants experienced severe housing instability and homeless during high school or the transition to adulthood. DD lived in her car and couch surfed, Mona lived on the streets and in homeless shelters, Rex lived with several friends before ending up on the streets, and Sandra lived in a shelter for pregnant women and spent time couch surfing with her infant.

Reflecting back, on the years right after high school, DD discloses that she was really afraid, but if asked, would have never admitted it at the time. DD said that nothing

else matters if youth don't have a home or food on the table and are just trying to survive; she said for her the connection with her "mom" was where the hope started and then everything else was able to fall into place. This need for consistent and positive relationships was the second theme to emerge within the microsystem.

Lack of consistent and positive relationships. Many participants experienced strained or tenuous relationships with adults in his or her life. Mona had one social worker during her entire time in foster care. This resulted in the social worker not living in the same community where she resided and subsequent difficulty staying in contact with her. She recalls phone calls where the social worker would say that she had to go to court regarding the case, but "I don't even know where you are." She eventually became so "irritated" with the social worker that she stopped calling her. The poor communication resulted in Mona not being able to get permission slips signed and therefore missed things like school field trips and camps. Rex had several social workers but said during his final long-term placement he never talked to her, stating that, instead, he "deferred to my family for everything." He said his foster parents spoke to her and he never got to "voice [his] side of it." He said that he feels like if he had talked to his social worker his "journey would have been different."

Interview participants also reported conflicts with teachers. DD said that she was kicked out of history her sophomore year for making the teacher cry. She recounts the event and demonstrates a sense of awareness that she did not handle the situation well. She said her teacher had been complaining about "how horrid it was to be a teacher" and DD asked her, "Then why are you here? I have to be here. You get paid to be here. …. So if you don't want to be here, get the fuck out." Manny said she experienced frustrations

when moved to a new school because she hadn't had "experiences with teachers who refused to teach me the way I learn." She said that a teacher at her new school said, "you will either learn the way I teach or you are not going to learn." After that she dropped out of school and "refused to go back." Manny later discovered a GED program that she believed was a good fit and began bussing two and a half hours each way to begin participate in the program. Sandra said that she felt her teacher didn't help the students; instead she spent time on her computer. Sandra would become so frustrated that she would leave the classroom and end up being sent to the principal's office. Sandra said that because of the many moves and school changes she did not feel a connection to any teacher. She was so far behind in credits that she was encouraged (mostly by her foster parent) to drop out and get her GED.

As demonstrated in the mesosystem, tensions with caregivers were also common. In addition, some participants had little or no contact with birth families and even those that did often had poor relationships. DD said that she was "angry at [her] mom for not being [her] mom." Manny's brothers were removed from her birth home before she was, she believes it was because she was still nursing. When she was removed she remembers it being very difficult to separate her from her mom and says that she became "extremely combative" and was screaming. She has not seen her brothers since but recently located one but said he "doesn't want to talk to me." Until a year before the interview, Rex had not spoken with his bio-mother. He said that he has been able to "forgive her for a lot of things and started being willing to just talk to her." Sandra said that she doesn't have a relationship with many members of her family; interactions with her mother are contentious because her mother has suggested that she give her son over to CPS to be

placed into foster care. She said that she doesn't speak to her "real dad" and her relationship with her stepdad ended because he was abusing her mother. Tammi also reports that she doesn't have a relationship with her "real mom" and during her senior year in high school "two guys came out of nowhere" and said "hey, I'm your dad." She said this experience was just "too weird." She has started trying to maintain more frequent contact with her brother so that she can learn about the family medical history, especially related to her epilepsy. Mona refers to her grandmother and her sister during the interviews but never mentions her biological mother or father.

The frequent moves and school changes experienced by the participants often contributed to social isolation and lack of relatedness with peer groups. Mona shared how difficult it was to have a typical childhood experience because she was unable to go to overnight things (e.g., sleepovers) without the adults in the household having background checks. She also said that by the time she got to know somebody she was moving again, because of this she said that she just stayed to herself and would show up to class "and be the kid that nobody knew." Matt said he used to know people in the town that he moved back to but doesn't anymore; it has been almost two years. He said that he was bullied during elementary school and high school until he "started lifting weights and they just backed off." Rex's case was different because he was in the same placement since he was nine, however he was home schooled so he said he didn't have a lot of social experiences. When he went to college he found the social aspects to be the most challenging and said it "made it hard to understand people and make friends."

Early parenting. Three of the participants had the added responsibility of parenting while still in high school and during the transition to adulthood. Manny was

placed into foster care when she was fifteen and her son was four days old. She did not go to school for a "couple of months," and she experienced the additional stress of getting her son to child care before going to class and finding care for him when she worked. Mona has two daughters but did not disclose more information about them. She said one is currently in preschool and her cousin cares for the youngest when she is in class.

Sandra said they "tried to put [her] in a parenting pregnant class" at school and that this was going to make her lose additional credits, she then "aged out" of foster care before her son was born. Sandra also disclosed her biological mother had called child protective services (CPS) against her because she felt that Sandra should put her son in foster care. Sandra said she wanted to give up multiple times, but said, "I can't give up on my son. I can't do what my mom did to me." She later made the hard decision for her son to live with his biological father because he has stable housing and a job.

Lack of highly skilled social workers, special education teachers, and foster parents. The key theme that emerged in the focus group was lack of highly skilled social workers, special education teachers, and foster parents. Suzie, social worker, discussed how youth only have access to the resources that their social worker or caregiver know about. Jack, resource specialist, expanded on that by saying that social workers often have really high caseloads and that in Washington there are no longer adolescent social workers. Therefore, the social workers are not able to focus on learning about all the particular resources available to adolescents due to time constraints limiting the amount of time they have to do research. Frank, director youth program, discussed the high turnover rate for social workers and special education teachers. He said that when he graduated with his master's in social work in 2008 the time spent on average as "child

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welfare social worker was one and a half years." Frank went on to say, "it is just a crazy thing to think that we can support youth, any young people in these systems, but especially youth with disabilities, adequately with professionals who have less than a year on average of experience in the field."

The need for experienced and highly trained foster parents was also discussed. Jack explained that many times in a meeting addressing "behavioral challenges" of a youth, the teens were actually engaging in "developmentally appropriate" thrill seeking behavior. However, the caregiver would say, "I love you and I care about you, but this placement isn't working out, so you are going to have to move." Frank reiterated this, it is a "systemic issue: and that teens are often just being teens but when they experiment, they lose their placement or they go to jail or they lose resources." He discussed how the level of unconditional love, "I'm here for you no matter what" is not there for many youth in foster care.

Individual Factors. The first theme that emerged throughout the interviews and focus group revolved around unmet mental health needs. The second theme was the lack of interviewees understanding of their disability and/or mental health diagnosis and issues of identity related to it. Related to this theme, the majority of focus group participants shared that they did not feel it was their role to educate their clients/students about disability.

Mental health needs. DD reported that she did not receive the appropriate mental health services until she was twenty-one; after her adoption. When asked if this was due to accessibility or her readiness to receive support she replied, "maybe both, for sure the fact that it was accessible, because even if I was ready for it, I didn't have access to it, so

it didn't matter." She was referring to the point after she had aged out of foster care. It was not until she "hit rock bottom" and was suicidal that she reached back out to her foster mother saying,

> I was just literally going through the paces. All I know is I don't want to die, but I want to do, so whatever you are going to tell me to do, I'm' going to do it, and I don't care, I am going to do it. I just don't want to die but I do want to die. It is that weird, suicide.

Similarly, Rex went undiagnosed for bipolar disorder until he was in his early twenties. He said that even after the diagnosis no one really explained to him what it meant and learning about the diagnosis became a "personal journey". He has realized that his tendency is to look for escape when he feels "trapped" and that many of his moves and changes of college programs were a result of this, he reports that he is working with a counselor before going abroad to make sure that that is not him trying to escape and that it is instead him going to learn. Mona identified as having emotional disturbance on the demographic form but did not elaborate on her mental health issues during the interviews beyond saying that she was placed in a psychiatric children's hospital at one point.

During the interviews, Matt focused on issues related to anger and behaviors, which were the reason behind him being placed in foster care, he reports that at age eight he went home but "almost killed [his] mom". He reports that he was a good kid, "except being suspended and all that." He was frequently suspended and had an emergency expulsion after shattering another student's nose and causing bleeding of his eye. When asked what the other suspensions were for he said he could not remember them all because there were so many but they were often for "calling people names, little things." Matt says that he is still on medication and receives counseling twice per week. He says

that he doesn't find the counseling helpful and that he just goes to get his "meds," because the medication helps him.

In alignment with the interview data, mental health concerns emerged as a key theme within the focus group. In a consortium of three institutions of higher education, Dan, community college professional, said a yearlong assessment of needs identified mental health concerns as one of the top issues. He said that many of his students that have aged out of the system get "fed up" and stop taking their medication. For those that really do have mental health issues "they totally fall off the wagon and disappear," while others do well. He reflected that it is very difficult when you see both sides of the issue occurring with students (i.e., over medication and those that require medication that stop taking it).

Lack of disability awareness or implications of mental health diagnosis. Manny said she felt like her psychiatrist "just kept giving [her] more and more medications… to make [her] too tired to actually be able to be angry or something." She said that although she felt like she could talk to the psychiatrist she also felt her mother did "a lot of convincing" of the psychiatrist because the psychiatrist told her she had bipolar, but later she learned that was not the actual diagnosis. Matt said that no one ever talked to him about his disability and mental health labels and that he hasn't done his own research because he "never had time." He said he did try to talk with his mother about it but she told him to talk to the doctor. Matt said he learned that he could not join the military or be a police officer "because of anger issues, depression and stuff." He said he doesn't feel the need to hide his disabilities anymore, but did in high school. Mona said she used to try to hide that she was in special education classes because she thought if people found

out they would think you were "special or something." She said no one ever really talked to her about her disability labels but she did talk about it with her peers. She said they talked about how they would get frustrated because people thought they were "dumb" but "that's not the case there's one-billion reasons why you can be in special ed…" She shared how she found it particularly frustrating when a teacher that knew she had dyslexia would ask her to stand and read aloud in front of the class." Mona also shared how she had to change her career plans after her health worsened and she began using a wheelchair in her senior year. She said she had wanted to be a nurse but after looking into the physical demands, she decided it was not possible. She said making the change in plans "wasn't super hard, I was kind of sad that I can't be a nurse. I knew I wanted to help people but there's other ways to help people…"

Sandra also talked about not wanting her friends to know she was receiving special education services. She said in middle school she "kept it a secret and refused to go." She was told that if "you are not going to go, you will go to the principal's office, because you need to be in that class." It wasn't until high school that she became aware that she could use the additional support. Tammi said that she was embarrassed to go to the classroom where should would receive special education services because "I knew that people knew that, oh, yeah, that is a smaller class, but it wasn't like a retarded class or anything. But, sometimes I would feel embarrassed, oh, I got to sneak in the classroom."

In response to discussions with youth about the meaning behind their disability label, focus group participants shared that these conversations with regards to what the label actually meant and how it may impact their transition to adulthood were limited.

Jack, resource specialist, suggested that "maybe it is a kind of intimidating conversation to have with a kid. I think a lot of times it is assumed that those conversations are being had at some level, whether it is with a social worker who is legally the guardian or a mental health provider." Suzie, social worker, said, "I was always really careful as a social worker to stay in my lane or stay in the moment of what we were focusing on with the kids." She believed it was important for the youth to decide what they wanted to discuss and "didn't want their diagnosis or disabilities to define them." Lisa, youth engagement specialist coordinator, said she believes the youth she works with are very "aware" of their labels and often over disclose personal information. She attributes this to the systems they have been in where they have had to "say it so many times." Suzie agreed and said she "knows more unnecessary facts" about youth on her caseloads than she "ever needed to know." Only Dan, community college professional, mentioned teaching explicitly about disability and identity. He said that some of his students are "acting out what they were told they were" and "living up to the expectations" of the label they were given and it becomes necessary to teach the students about their possibilities.

Research Question Three: What services and supports helped the most in overcoming the barriers?

This next section presents services that the participants perceived as the most helpful in overcoming the barriers and challenges they or their clients/students experienced as during the transition to adulthood. First, the themes that emerged are presented in Table 7. Then the analysis is presented — by the layers of the ecological model (Figure 1).

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Exosystem. The number and types of programs and/or systems accessed by the interview participants varied; several that were perceived to have considerable benefit are described in this section. Two themes emerged from the interview data including benefits from access to mental health and disability services and systems that provide a "safety net" during transition. Although several of the focus group participants work within agencies that reside within the exosystem layer of the model, a key theme across focus group participants did not emerge within data. However, Jack and Frank discussed the benefits of extended foster care, which emerged as an important service for interview participants, as described below.

Table 7.

Emergent Themes for Research Question Three

Ecological Layer	Source	Theme
Q3. What Services and Supports Helped the Most in Overcoming the Barriers?		
Exosystem	YA/FG	Mental health and disability services
	YA/FG	Systems to provide a "safety net" during transition
Mesosystem	YA/FG	Good communication between systems, programs, and services
Microsystem	YA/FG	Stable and positive relationships
	YA	Post secondary support programs for alumni of foster care
	YA/FG	Resilience
Individual Factors	YA	Self determination
	YA/FG	Advocacy

Note. Young adult = YA; Focus Group = FG.

Mental health and disability services. Access to and desire to receive mental health services was reported as instrumental to overcoming barriers as several

participants transitioned to adulthood. DD said that although she was surprised that the

medication worked and that it completely changed her:

> At first there was that struggle of, oh, my god, this isn't me. Who is this person?
> I remember talking to my therapist at the time about that exactly, and they were
> like, 'Would it help to think about it in a different light?' I said, 'What do you
> mean, and they said, 'Well, if you think about it in the sense that how you were
> before the medications was not you. The medications then changed your
> chemicals, which we all knew it was going to, but it balanced you out in a way
> that now … you can actually function correctly. If you think about it that way,
> then it is not a bad thing that you are changing.' So that's how I started thinking
> about it. That makes sense. If I was born a way that is chemically unbalanced,
> and then I had all this trauma and all this other stuff that then continued to
> unbalance me, then what I need is to counteract that with something else so I can
> succeed, if all that inbalancedness was holding me back. I have one hundred
> percent changed. Yes, I one hundred percent agree with that, but that is because I
> was one hundred percent held back with all of those imbalances, because . . . it
> took a minute or two, but I had to acknowledge is how I am now supposed to be.
> It feels like it. After I realized that, it feels like that. Yeah, it makes sense. It
> makes sense that I was supposed to feel this way.

After Rex's diagnosis, he began to access disability services and changed his approach to

his course schedule at college; he is currently utilizing the support of a counselor as he

prepares for studying abroad. Matt is also seeing a counselor and reports that she is easy

to talk to and that his medication really helps him.

Systems to provide a "safety net" during transition. Additional financial support

during transition was also highlighted as a factor that helped participants overcome

barriers. Not all participants were able to or willing to participate in extended foster care,

however the two that did, reported that it was very helpful. Manny said that she chose to

stay in extended foster care because she felt that it would give her "extra support." She

said new legislation allows her to live in her own apartment while receiving benefits,

with the condition that she stays in college and the social worker must approve of the

housing. DD also participated in extended foster care and received financial benefits

while she was a student. Mona and Matt both received SSI because of their disabilities, and both reported that this was helpful.

Specialized programs that are designed to work with youth in care or other at risk populations were also helpful. Independent Living Programs were also reported to be beneficial in helping participants as they transitioned to adulthood. Manny said that her independent living program "is the only reason" she has her apartment. Tammi also said that she acquired housing with the assistance of her ILP. They both also received many of the house necessities they required including items such as furniture, microwaves, TVs and dishes. In addition to direct assistance with housing, participants found classes on bill paying, help with college and job applications, and referrals to other agencies to be the most beneficial parts of the program.

Programs for homeless youth also provided important services related to education as well as housing. Manny was not homeless at the time but heard good things about the GED program at one of the homeless youth shelters and worked with them on her GED completion. Mona lived at several youth shelters during the time she was homeless, and the people at a shelter connected her with an ILP that helped her navigate the applications to community college and financial aid and assisted her with getting the books and other supplies she needed to start college. Mona continued to live at the shelter as she started college, until she was able to receive a Section 8 housing voucher.

Mesosytem. The main theme to emerge within the interview and focus group data was the importance of good communication between systems, programs, and services. Interview participants reported benefits when programs, systems, or laws in the exosystem worked to create opportunity in the microsystem. Related to the theme that

emerged from the interviews, focus group participants focused particularly on the benefits of coordinated services within and between agencies.

Good communication between systems, programs, and services. For instance when special education law (IDEA) was utilized to provide accommodations and modifications to improve access to education at school. Mona and Sandra described this as being particularly helpful. Mona said that when she was properly diagnosed with dyslexia and gained access to audio books it was extremely helpful -- she continued to utilize and benefit from this accommodation during her time at community college. Sandra said that she refused to go to the special education classrooms in middle school but in high school she realized she could use the additional support. She then went to the counselor and said, "Ok, I want to go to the special ed. class. I'm volunteering." She said that once in the class she found that she was more successful with her work because it was "hands-on" and she was able to help others too, which was important to her because she says she "loves to help people." Tammi and Matt also said the additional support received through special education was very helpful. Education continued to be more accessible to participants that received support from Disability Service programs at their colleges or Universities. Mona now attends a large four year university and finds it difficult to get from one class to another quickly enough, therefore the university disability services has provided her with bus service to get across campus easily. Although she has not needed to utilize the service, the university connected her with a tutor. They also provide her with a cubicle in the library that is "checked out" for her sole use for the entirety of the semester. Rex has connected with disability services for the first time at his current four year university, he believes it has contributed to his success.

He says he is allowed a computer for note taking, receives tutoring and test accommodations. It also allows him to qualify as a full time student with reduced course load and he can communicate with the professors if he needs time off. He said that access to services is very easy and that he simply fills out a form online every quarter and "clicks" which accommodations he needs. The form is then automatically sent to his professors via email and he receives a copy. He reports that he has had no difficulty receiving the support or services he needs. Another support that has been helpful is housing vouchers, made accessible to participants through the guidance received in ILPs and Homeless Youth programs. This resulted in stable housing for 3 of the participants.

Under the larger umbrella of the theme for this section, the focus group participants reported the importance of coordinated services. Jack, resource specialist, discussed the importance of understanding a youth's goal and advocating so that the whole team (e.g., social worker, special educator, ILP case manager) is working to help the youth achieve it. He also discussed the importance of a thoughtful "hand-off" from youth centered programs to young adult programs such as Dan's program. Dan, community college professional, discussed how his program helps link students to needed mental health services or to the college's disability service program. Frank and Lisa work for the same agency whose goal is to build self-advocacy skills in youth so they can "participate directly in [their] system reform efforts around improving the foster care system and [their] continuum of services for homeless youth."

Microsystem. This section will describe the themes that emerged signifying elements within the microsystem that contributed to the removal of barriers during the transition to adulthood. The first theme, the importance of stable and positive

relationships, emerged across the interview and focus group data. The second theme emerged only within the interview data, was the value of post secondary programs for alumni of foster care.

Stable and positive relationships. Many participants reported that a positive relationship with professionals such as social workers or teachers was very helpful. Matt reported that he had a good relationship with his social worker and she was willing to drive him from another state to see his mother. She also drove him across the state when he left care, so that he could go home. Sandra said she had a great relationship with her social worker and that on weekends, "she would come get me to get my nails done and we would go out to eat. She would just basically tell me everything. Some days I would sit in her office and she would explain a lot to me about the system." She said her social worker also came to her IEP meetings and encouraged her to participate in extended foster care, which in retrospect she feels would have been beneficial.

Teachers in particular seemed to make a big impact on the participants. DD said that when she decided she wanted to be successful in high school:

> There were a handful of teachers who got excited when I got excited. They were like, 'Yes! Finally! Okay! This is it! Oh my god! Hurray. Pinch me? Am I dreaming?' You know of people were like, 'Yeah let's do this!' So they were ready to help me and so that really helped me.

Matt said his special education teacher really stood out for him because he felt like she understood him and his feelings. He said,

> She can understand me a lot better because she knows how I feel, like when I get angry, she watched my facial expressions before I blow up or before I act up or whatever. She can see it before I do it, and she can take me aside and calm me down.

Mona said she especially liked her science teacher:

Everybody else was like, 'Oh, she's the foster kid!' and I felt like she was like, and she was like she didn't look at me like this foster kid. I felt like everybody felt bad for me. It's not like I wanted everyone to feel bad for me so... like, she was like the one person that was like, 'Oh you're actually a human being'… I think she's the first teacher that actually like, really got me into considering college, because before that I was like, 'I'm not gonna go... I'm probably just going to get a job and work for the rest of my life,' but... I dunno. She was like, 'College is like the best years of your life.'

Sandra credits a teacher for getting her back on track in high school. She said the teacher set up a time to meet with her afterschool and asked her "what was going on" and why was she so "distracted." He helped her change her schedule so that she would have his career class first period. She felt that he advocated for this to teach her how to "further her education and go further in life with a job." She said it actually did help her and she became more focused. She said his class was "more hands-on" and she was able to be more independent. However, she had several placement and school changes and was not able to stay in the school or with the teacher she found most helpful.

Tammi also said there was one teacher in particular that really helped her out. It was her "IEP teacher" and although she only had him for one period a day he was always available to help. She said that he would "do one-on-one stuff" and he would help support her even if it was homework from other classes. She said she went to him for extra support for three years of high school, until he moved to a different school.

For Tammi, DD and Rex, a stable placement and consistent adult during the high school years prevented many of the challenges that were faced by other participants. Rex was moved to his final placement at age ten. His relationship with his foster parents has been severed since, however he reports that while in the home he considered them his parents. Tammi moved to her final placement at age nine reports that her "mom" was very involved in her education and is still involved in her life. Tammi said that her

"mom" wants her to come home and live with her now, because she is worried about her living alone with epilepsy. DD credits her final placement with turning her life around. She shared that she remembers telling her social worker that she didn't want to live in another group home and that she wanted a "home." After she was placed in her final foster home as a junior in high school she began skipping school again and was already severely credit deficient. However, shared that when her foster mother used the word "family" in reference to her responsibilities and roles within the home she realized she had to get it in "gear." She reports that from that moment she was "focused and dedicated to graduating on time."

DD's deep relationship with her "mom" went through periods of trial and periods of healing, but ultimately DD was adopted and became a permanent part of the family. When DD "hit rock bottom" she called her "mom" because that was her "safety plan". She said if she was "ever in doubt," she was supposed to call. So she did, "I called [her "mom"], immediately she picked me up. I packed up all my stuff out of my friend's living room and she moved me into the house that she is in." During the interview DD reflected that she is aware that her situation is unusual because she knows other young adults that grew up in foster care that do not have the ability to call someone, bio-family or foster family, when they need help as an adult. DD has also received financial support from her biological grandfather after she re-entered college and was ready to move into her own apartment.

Rex also benefit from the support of a biological aunt after she found out via Facebook that he was homeless. She located him and immediately offered him a place to live. He says he "lucked out big time." During the time he spent with his aunt, he was

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able to focus on learning basic life skills and spent some time working, and when he was ready he returned to school.

Focus group participants echoed the theme that a consistent positive relationship was paramount for a successful transition to adulthood. Long-term stable placements were reported as one of the most helpful ways to overcome other barriers youth in foster care experience. For youth that experience only one or two placements "things are just so different," said Jack, resource specialist. He elaborated, "That stability of having a placement that feels like home and looks like home, and it has been like that for the majority of their life is, I think, the biggest indicator of reaching the level of success." Frank, director youth programs, agreed saying that it could be either "legal and/or relational permanence." In his experience, "kids who have families, whatever that looks like, who are transition age do really well, even if those families come late in their adolescence."

Suzie, social worker, echoed the importance of a positive and consistent relationship. She said that for youth that move frequently, just having one constant person in their life was so important, whether that was a social worker or a teacher," even if the placement could not remain consistent the youth had at least one person that they could consistently count on. Lisa, youth engagement specialist coordinator, agreed and discussed how it was important for the youth to have one person "who will listen to them" because for many youth it is the first time anyone listened to what they wanted and so they will confide in them again because they believe the person "is trying to do the best for them." Frank said that youth tell him,

> you don't have to be everything for me, but gosh, it really helps when I know
> what I can expect from you. It is cool if I can't live with you or leave my stuff at

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your place, or if you can't sign a lease agreement for me. But if I can come over on Friday nights and that is our thing and that will be consistent and maybe a long term thing, then that is so valuable to me. But please don't do the thing where you promise me the world and then a month later you are out of my life.

Jack agreed stressing how youth appreciate transparency and clear expectations. He also said that youth that are "able to carve out their own social relationships and find peers that they get along with well and find their own communities" do well during the transition to adulthood. Suzie agreed and said that she feels "peer support groups are monumentally important," because youth are less likely to feel embarrassed or stigmatized because the others in the group have similar life histories.

Post secondary support programs for alumni of foster care. Rex participates in a university program that is for young adults that have experienced foster care. His scholarship includes year round housing on campus to ensure housing stability. In addition, he receives academic guidance and emotional and financial support. During his first year at the University he now attends, he met twice weekly with his advisor from the program. At the community college where she excelled, DD was also connected to program particularly for young adults that aged out of foster care. The program helped her feel more connected and confident as she returned to college life. Mona connected with an advisor at her community college that helped her navigate the system and plan for transferring to a four year university, which she has successfully done.

Individual Factors. This section describes the themes that emerged about individual characteristics that contributed to the participant's successful transition to adulthood. The themes that emerged across the interviews and focus group were: resilience and advocacy. Self determination emerged as a theme within the interview data.

Resilience. Mona, Tammi, Manny, DD and Rex stood out as especially resilient. As demonstrated in their participant profiles they repeatedly overcame difficulties and although they all report times when they struggled or even hit "rock bottom" they have recovered and pushed forward. Rex even says that if he didn't have his "RESILIENT" tattoo he "wouldn't remember [he] could go through a lot." He went on to say,

> I feel like one of the strongest things that ties us all together is our willpower. When you are in foster care, a lot of things can be taken away from you, but if you are strong willed and if you are adaptable, you will get through it. If you use that willpower to benefit yourself, you will get through higher education and you will fight against the statistics that are put against you. Most people who find out that I am in foster care, always start with, I'm sorry, it must have been so tough. It is, but it is not, it is a different kind of tough. If you are in an intact family, yeah, you can't understand it. If you have had an abusive father, if you have had an abusive mother, if you had a family member die, if you have had racism toward your family, if you have had poverty -- all of that is tough. The difference is that all of use who are trying to get through it, who are trying to become the next Bill Gates or whatever, is we weren't the ones that are not going to accept what we were given. We were the ones that were going to fight it, whether hurt, or whether it took years to get to fruition, we weren't going to sit there and allow it, because we weren't in a place where everything was okay.

As demonstrated in the previous quotes, Rex demonstrated a lot of insight and the ability for deep reflection about his life experiences. Mona and DD did as well. When asked if there was something that DD wishes she had been told before she attempted college the first time, she responded,

> Really, honestly… I'm sure they said it to me over and over again. I'm pretty sure -- really, what really changed the whole thing was the meds, that and having a family and that sort of thing, too. But of course, having the family, the meds wouldn't have happened in the first place and vice versa, too. If I stop taking my meds, I disconnect from my family and I don't have that either. Until I am ready to change something, literally, the same person every year, different people in different years could be saying the exact same thing to me, and it wouldn't matter.

In both interviews, DD was frank about contributing to many of her own challenges by refusing the help she was offered. Her willingness to share this insight demonstrates both resilience and personal growth.

Mona demonstrated resilience as well. An example is found within her perseverance and resourcefulness during her senior year in high school. She moved across country and started at new school late in the year. At the time she was homeless and wasn't sleeping well, so often did not attend school. She stayed in shelters and "rode busses up and down" all night. She said it was often the days where she rode the busses all night that she didn't go to school because she wasn't able to shower and the teachers got upset if she fe1l asleep in class, however she did attend if she had a presentation or knew something important was happening in one of her classes. She was hospitalized during her senior year and "ended up in a wheelchair." Against, these odds she successfully graduated and went to community college, where she has since earned an associate's degree. In addition, to resilience this example demonstrates self determination the next theme which will be discussed in detail below.

Frank, director youth programs, discussed how the youth that work with his program are from a wide range of backgrounds, not only youth that are already doing extremely well by societal standards. Many have experienced excessive placement stability, homelessness, and are representative of the youth in care in Washington State. He reported that when a Supreme Court justice asks the youth for their input as alumni of the foster care system, his or her "natural resilience" is magnified.

Self-determination. Another characteristic that emerged as a theme during the interviews was that of self determination. DD and Manny out of necessity learned to be

autonomous, a factor related to self determination, early in childhood. Manny shared that

by the time she was eight she learned to do "a lot of things on [her] own" because her

bio-mom would leave her home alone for a "couple days at a time." When DD was in

elementary school she would buy groceries, pick up her "mom's check from the mail"

and use it to pay rent. DD talks throughout the interviews about how when she decides

she is ready to do something, and then it happens. This she says was true for when she

decided she was going to graduate from high school and when she decided she was ready

to receive counseling and begin taking medication for mental health issues.

Rex describes how he has built self-determination. He identified his earlier

tendency to want to "escape" but says that at his current university things are different.

He shared,

> I've really decided that I'm actually going to build something and I am going to
> stay here and complete. I'm not here just until I get sick of here and then I move.
> I'm staying here. There are things I don't like about this school and there are
> things that bug me about having to be graded on things but all of that aside, I can't
> keep moving. I really can't. I am 23 and need to start building something.

Tammi said that after she was diagnosed with epilepsy her "mom" told her that getting

her own place was going to be hard. Tammi responded, "Hey, I'm ready."

Advocacy. Being an advocate for self or others was also a common theme. Manny

demonstrated strong self advocacy skills throughout the interviews, sharing that she "had

to fight" to keep her son with her during her time in foster care, and that she made the

decision to no longer take psychotropic medications and that she is "doing so much better

than [she] ever did on the medications." Manny also navigated the complexities of the

changes to the extended foster care law so that she could remain in foster care until she is

twenty-one and still live independently. She currently works for a youth driven advocacy

program that promotes policy changes to benefit youth in foster care, so her advocacy is also focused on assisting others. Rex previously worked with the same organization and advocated for improved access to social workers, for youth in foster care. During his time working with this organization he attended sessions at the state legislature and "marched on the capital" to try to change legislative policies around youth in foster care.

Sandra shared a story about a math teacher that was "impatient with kids," she said the teacher called a student 'dyslexic,' in front of the class, for doing a problem wrong. Sandra seemed to have a sense of pride as she said "I kind of advocated for him." She said that she asked the teacher why he would call a student a dyslexic without explaining to him what the word meant. She got into trouble for challenging the teacher but after explaining the situation to her special education teacher, the special education teacher advocated for her in return.

Lisa, youth engagement specialist coordinator, explained that many of the youth that work with her and Frank's program "wander[ed] in because they saw that there was a free meal" and then later end up speaking with the governor about issues impacting youth in care. Frank said that is it really important for many of their youth to be "seen" because they grew up "invisible."

> Then all of a sudden they have the spotlight and they have the opportunity to actually not just make the system better for themselves but for the next generation. It is unbelievable how many youth say, 'Why do you participate…?' Is it because of the stipends? It is because you think we are super cool? No, the consensus answer is, 'I had a really hard life growing up and I just want it to be better for the next kid who is coming after me.'

Research Question Four: How do the young adults interviewed define a successful adulthood?

This final section presents the participants' perception of a successful adulthood. In response to most interview questions about the future, participants focused on what they hoped their lives would look like in three to five years. Again, the section is organized utilizing the layers of the ecological model with the exception of the exosystem layer, since no themes emerged related to it. The themes that emerged are reported in Table 8. The purpose of this question was to understand from the young adult's perspective what successful adulthood looked like. Therefore, this research question was framed differently for the focus group of professionals. They were asked to describe when they felt their work with a youth and/or young adult was successful. Their responses are described separately at the end of this section, however no main theme emerged so a table is not included.

Table 8.

Emergent Themes for Research Question Four

Ecological Layer	Source	Theme
Q4. How do the Young Adults Interviewed Define a Successful Adulthood?		
Microsystem	YA	Financial stability
	YA	Housing stability
	YA	Travel
Individual Factors	YA	Financial stability
	YA	Personal fulfillment

Note. Young adult = YA.

The theme that emerged in the young adults' responses, across multiple ecological layers, was stability. When asked what was important to her Mona replied, "stability, because I have never really had stability." Rex said,

> Success is that every day, everything is tied up that needed to be done that day and I get a good amount of sleep and then I start the next day. I have more good days than bad days, and that I'm more stable than unstable, and that I just keep pressing forward. There doesn't become a point where I just fall apart.

Mesosystem. As the layers of services, professionals, and restrictions are removed and the participants "aged out" of foster care and became adults, the participants did not reference the interaction between the systems (exosystem and microsystem) to the extent they had in their responses to earlier questions. However, obtaining a driver's license was an important avenue of independence expressed by Mona, Tammi and DD. Mona and Tammi both face barriers because of their disabilities. Mona said that the "process to getting your license takes a lot longer" for people with disabilities and she would need a van with a lift that would fit her wheelchair. Tammi said that she couldn't obtain a driver's license until she is "seizure free for six months." DD did not disclose the reason for losing her license originally, but said that she wants "to get her license back." All suggested this was an important measure of their ability to be independent.

Microsystem. The overarching theme within the microsystem was stability; specifically financial stability and housing stability. The third theme was a desire for travel.

Financial stability. Almost all participants discussed their future career and desired pay when asked to describe what successful adult life looks like for them. Mona wants to work with children under the age of twelve as either a counselor or psychiatrist and hopes to make enough money that she doesn't need to "struggle." Rex wants to work

in international policy in Paris or London and earn enough "to pay the bills." Sandra wants to have "a good career going" and earn about two thousand dollars a month. Tammi aspires to be employed someplace that provides benefits and "a good amount of pay" and where she doesn't "have to keep jumping from job to job, or one job that [she] can stick with and stay there." Matt says that he would like a "good paying job" and that he would be content with one that does or does not require college. DD said that ultimately she would like to have a job that "pays a lot of money and I don't have to do much work."

Housing stability. The type of housing desired varied by participants but most expressed the desire for housing stability and to live independently (i.e., not with relatives). Most participants envision living with their significant others and/or children. Rex was the exception in wanting to live alone. Mona said that she would like to own a house or townhouse but is aware that it is often harder to find ADA accessible housing, therefore she is willing to settle for an apartment. Rex discussed how aesthetics were important to him and that he would like to find an affordable apartment abroad in an older brick building, because he likes to live somewhere that has its own story. Sandra would like to relocate but said she feels she should stay close to her son's father so they can maintain their relationship. She said that her family has told her that it "is not bad to be on Section 8" but she would like to instead move into her own house with a yard for her son because she wants him to be able to spend a lot of time outside. Tammi would like to continue living independently in her own apartment. She wants to be near family and is comfortable receiving housing assistance if it is necessary and said, "I know not everybody is perfect, you can't always do for yourself and somebody needs help here and

there." DD would like to have a house with a yard next to a park or the beach. She said a condominium near the beach would also be "cool." Matt said he would like to live in his own apartment with a girlfriend for the "least amount of money." He would like the apartment complex to have a weight room and a pool. He also said that he would like the apartment to be clean and "organized" and that he would like the grounds surrounding it to be clean as well.

Travel. DD, Sandra, and Rex reported travel as an important component of successful adulthood. Sandra said she wants to travel with her son because she never had the opportunity to go on "family vacations." DD said several times in the interview that she wants to see the world. Rex is on track for spending a semester in South Korea and believes that it "will be exciting to be in another country." Overall participants did not appear motivated by material items. The most common items that came up that were not absolute necessities were the Internet and a car. Several participants also planned to have pets.

Individual Factors. The main themes that emerged around the individual's perception of successful adulthood were financial stability and personal fulfillment.

Financial stability. Participants also shared the lifestyles they would like to achieve and described their perceptions about financial stability. Mona said that she didn't really know how much she might get paid as either a psychiatrist or a counselor. However, she said she knows a "psychiatrist should get paid a lot." Rex also said that earning a lot is not important to him and that he believes if he was living abroad he would like to make the "equivalent to $30,000." Tammi said that she would like to earn "at least a couple thousand a month." Matt also said he felt he would need to earn "probably a

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couple thousand" a month in order to pay bills and rent and buy food. Sandra said "to just be comfortable, probably two thousand" and that is if she wants "a really good career." DD said that she needs about two thousand five hundred dollars a month to pay for her future expenses.

Personal fulfillment. A particular theme about what participants need for personal fulfillment did not emerge. Instead, what they felt they needed varied. Mona expressed that it is important for her to have a career where she feels like she is working to make people's lives better; she is also open to having more children. DD identifies as polyamorous and a "city girl", so an environment that is conducive to her life style is important to her. Sandra expressed a desire to be a good role model for her son by finishing school and generally doing well in life. Matt wants to have what he needs and even if it isn't everything that he necessarily wants. Tammi wants her health to improve, to have deep connections with her family, and to able to be independent. Her ability to work with children is really important to her, she said "…little kids seem to have this little thing on me, they make me laugh. If I am in a bad mood or something, and I see a little kid, I'll just smile." Rex identified as a "foodie" and seeks work life balance. He said,

> I think I want to be content with my life, because having the past that I have, it is really hard to be content with anything, because you have gone so long without anything. I also want to let go of my past, but not forget it. I have a tendency of if I let go of something, I forget it. I'm trying to work on honoring where I came from, honoring how I got through it, and not having it stop my future decision, but just empower me to know that I can make my future decisions.

The interviews were concluded similarly, to how they began. Participants were asked what a movie about their adult life would be titled. Below are their responses and elaboration, if available.

- Mona- "Lost to Found". She was asked to talk a little bit more about that and she

  responded,

  > Well 'cause, I mean, I feel like, I dunno. I feel like in a way, everything I
  > went through in foster care felt like I was lost, and I was like, then when I
  > was trying to find out who I was as a person and I didn't know who my
  > parents were. It was like, I felt like I was lost. But I feel like in this time
  > and I'm in a career and I am at a place where... I've established who my
  > family is and who's actually there for me... I feel like I am found.

- DD - "This Girl is On Fire," she said the inspiration for the title is a song by

  Alicia Keys.

- Matt - "Who Wants to Be a Millionaire."

- Rex- "Restless," he explains,

  > It is me finding myself. For others, it is trying to relate to me, and then it
  > is just not -- it has its low moments, but for the most part it is in some
  > form of upheaval because I'm young. Nothing is staying standard.
  > Nothing is staying the same, so, yes, Restless.

Focus Group Research Question Four: When do you feel your work with a youth

and/or young adult was successful?

The focus group participants reflected on how they knew that their work with a

youth or young adult was successful and they felt the outcome was good. The only

themes identified within the individual layer of the ecological model. A few salient points

are described within the microsystem layer as well.

Microsystem. There was no resounding theme within this layer of the ecological

model. However, several participants shared particular insights that fall within the layer.

Frank, director youth programs, shared that what is "really cool" is when "young people

start to understand just how to relate to the people in their life in a healthy way and they

have agency." Lisa, youth engagement specialist coordinator, works with youth and

young adults so they learn to use "professional" or "leadership language" and feels that it is a success when they can make it through a day doing so.

Individual Factors. Again, there was no universal theme across focus group participants. Although stability, happiness, personal growth, life satisfaction and self-efficacy were concepts that led professionals to feel his or her work with a youth or young adult led to a successful outcome. Jack, resource specialist, said that he feels really good about the progress made when a youth is seeking out information and asking a lot of questions and when they feel supported enough to try to do things on their own and have enough self-advocacy and esteem that they feel optimistic about the chances they are taking. Suzie, social worker, says that she feels successful when she sees as young adult that she knew when he/she was in care and they are happy, productive and feeling satisfied with their life. For Dan, community college professional, he says he wants his students to be about "to stand in front of a mirror and appreciate [themselves] and feel good about what [they] are doing and how [they] fit into the world…" Lisa said that she feels successful when the youth she works with are about to "take one step forward." Frank said that for him it is when youth have a sense of self efficacy. He said this is especially important because youth may learn within the system that whether they try or not doesn't matter. He gave the example of whether the youth does everything "right" or not the "outcome is going to be the same—'I am still going to get moved. I'm still not going to go back to my family.'" Jack agreed and said that it is great to see youth checking themselves on whether they are making good or bad decisions. He said he actually likes it when he sees youth less because often it is because they have started doing things on their own.

This chapter presented the findings related to each research question separated into the ecological layer they represented; this strategy was utilized to provide understanding of the distal and proximal social context and relationships that influence the transition to adulthood for young adults with disabilities that experienced the foster care system. The main themes for each research question were presented within the appropriate layer of the ecological model (Figure 1). The next chapter will discuss the findings, study limitations, and provide implications for those working with youth and/or young adults with disabilities that experienced the foster care system.

CHAPTER V

DISCUSSION

The purpose of this grounded theory study was to gain understanding of the process of the transition to adulthood for youth with disabilities that experienced foster care. Purposeful sampling was used to recruit participants that made a successful transition (i.e., had completed one year of post-secondary education or a consecutive year of employment); this approach was taken because the bulk of extant literature addresses the barriers and poor adult outcomes of this population. The intent of this study, then, is to take a strengths-based approach to add to the knowledge base of what was different for youth that overcame the barriers they faced. In this chapter, the findings presented in Chapter V are discussed to provide deeper understanding of the commonalities and juxtapositions between the emergent themes — across research questions and layers of the ecological model (Figure 1). Interactions and relational aspects of barriers faced and services that were helpful, for young adults with disabilities that experienced the foster care system, are illustrated using the ecological model as described in Chapter II. Analysis across research questions and layers of the ecological model exposed commonalities within the emergent themes that enabled them to be collapsed into broad categories that provide a rich view of the process of the transition to adulthood for young adults with disabilities that experienced the foster care system (Figure 2).

This approach enabled the development of theory that illuminates the context and social relationships that intersect during the process of transition for young adults with disabilities that experience foster care. The use of an ecological model enabled analysis of the complex interactions between systems, services, and people that influence the lives

of young adults with disabilities that experience foster care. In addition, issues related to

multiple identities (i.e., disability and/or mental health, and foster care status) are

discussed throughout this chapter.

Figure 2. Categories affecting transition for youth with disabilities that experienced foster

care.

Disability and Mental health diagnosis	Mobility	Relationships	Stability	Personal Characteristics
Barriers **Mesosystem** a. Inappropriate disability or mental health diagnosis b. Barriers to employment **Individual** a. Mental health needs b. Lack of disability awareness or implications of mental health diagnosis **Supports** **Mesosystem** Good communication between systems, programs, and services **Exosystem** Mental health and disability services	**Barriers** **Exosystem** a. Inconsistant high graduation requirements compounded by mobility **Mesosystem** a. Frequent placement changes	**Barriers:** **Microsystem** a. Lack of consistent, positive relationships b. Lack of high skilled social workers, special education teachers, and foster parents c. Early parenting **Supports** **Microsystem** Stable and positive relationships	**Barriers** **Exosystem** a. Inconsistent access to ILP services and preparation for transition b. Inadequete service delivery model for foster care c. Lack of "safety net" after aging out **Microsystem** a. Unstable and/ or negative housing experiences **Supports** **Exosystem** Systems to provide a "safety net" during transition **Microsystem** Post secondary support programs for alumni of foster care	**Supports** **Individual** a. Resilience b. Self determination c. Advocacy

Five categories were identified and are discussed in detail: (a) disability and

mental health diagnosis; (b) mobility; (c) relationships; (d) stability; and (e) personal

characteristics. Each category is presented as a separate section with the themes from the

findings, including barriers and related services and supports discussed. Again, each

section will be organized by the layer of the ecological model demonstrating each themes

sphere of influence and affect on the youth. The categories often include themes from

several layers of the ecological model, demonstrating once again the interaction between

the layers and how even systems and relationships distal from the individual may have an impact.

Disability and Mental Health Diagnosis

The findings in this dissertation suggest that it is essential to understand the factors that are unique to youth with disabilities and mental health concerns that experience foster care. Themes regarding perceived barriers were inappropriate disability or mental health diagnosis, barriers to employment, mental health needs, and lack of disability awareness or implications of mental health diagnosis. The theme related to services and supports that were helpful was mental health and disability services.

Exosystem

Within the theme mental health and disability services, data suggested when appropriate services and supports were received they were perceived as helpful. However, a study by Geenan and Powers (2007), reported that youth with disabilities in foster care faced more barriers to accessing appropriate services than their peers without disabilities. To resolve this issue, focus group participants in this dissertation study, advocated for improved training for professionals and caregivers so they are knowledgeable about the systems and services that are available and can assist youth in accessing them.

Mental health and disability services. When federal education laws (e.g., IDEA) were followed and diagnosis and services provided were appropriate, participants reported services received were beneficial. In particular, participants reported the additional layer of support provided by their special education teachers was extremely valuable. In addition, access to disability services was perceived as directly contributing

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to participant's ability to persist at their post secondary school. Participants also reported access to mental health services as beneficial. Issues related to accessing special education, disability services, and mental health services are especially relevant because approximately 40-47% of youth in care receive special education (Geenan & Powers, 2007) and findings from the Casey Field Office Mental Health Study indicated 35.8% of the participants reported symptoms of a mental health disorder within the past year (White, Havalchak, Jackson, O'Brien, & Pecora, 2007). These findings demonstrate the need for these systems to be available and for youth with disabilities in foster care to be able to access them easily.

Mesosystem

Many of the barriers identified in this study, within the mesosystem layer, occurred because of poor communication and/or lack of coordinated services between systems. Geenan and Powers (2006) also reported a lack of coordination between various agencies providing services to youth with disabilities that are in foster care. When services were coordinated well, participants reported successfully overcoming barriers encountered. Not surprisingly then, good communication between systems, programs, and services was the main theme related to what helped overcome barriers. The two main themes regarding the barriers themselves were inappropriate disability or mental health diagnosis and barriers to employment.

Inappropriate disability or mental health diagnosis. Participants discussed inappropriate diagnosis for special education and lost knowledge about eligibility for special education and/or lost IEPs, this demonstrated a breakdown between what is available (exosystem) and what services the youth or young received (microsystem). This

breakdown has the potential to contribute to a host of problems for students. In addition to inadequate services, students that are inappropriately diagnosed run the risk of a bias effect due to teachers' lower expectations of students with disabilities (Aron & Loprest, 2014; Cook, 2001).

Inappropriate mental health diagnosis may also be a consequence of poor communication between systems and partners (e.g., medical, Children's Administration and/or caregiver, and youth). Professionals, from the focus group in this study, reported their experiences indicate overmedication of youth in foster care is an issue of concern. Corroborating this concern, a study by Raghavan et al. (2005), examining data from the National Survey of Child and Adolescent Well-Being, concluded that children involved in the child welfare system are being prescribed psychotropic medications at a rate of two to three times the rate of their peers outside of the system.

Barriers to employment. The theme, barriers to employment, resides in the mesosystem because it highlights the interaction between the employer and workplace (microsystem) and civil rights laws (exosystem). Two important school outcomes for youth with disabilities are: understanding his or her disability, so they can express how it may affect them in adult life, and understanding their associated rights (Pyle & Wexler, 2011). In this study, Tammi and Matt disclosed experiencing barriers to employment due the nature of their medical or mental health needs but were not informed of their rights nor taught, by any of the systems or institutions they were connected to, when and how to disclose their disabilities to employers. In addition, they did not receive training on how to advocate for the accommodations they would need to be successful in the workplace.

Only Matt was connected to DVR; again, this demonstrates the variability in referrals from service providers.

The lack of collaboration between school districts and rehabilitation counselors is also demonstrated within the extant literature. In a study by Argan, Cain and Cavin (2002), 48% of rehabilitation counselors reported never being contacted by school districts regarding the transition process and 63% said they were never contacted by school districts about vocational or community adjustment for students that were not doing well after graduation. Post secondary outcome data suggests that students connected to a rehabilitation counselor while in high school were more likely to use their services as an adult, thereby gaining important access to career counseling, vocational assessments, work placement, and referrals for medical and therapeutic services, and assistive technology (Argan, Cain, & Cavin, 2002). Seemingly, students such as Tammi would benefit from such a referral. Tammi demonstrated throughout the interview her motivation to gain employment, live independently, and use the knowledge she gained through her certification program — however, she was not provided with the tools or resources she needed to gain access to or persist in employment.

The knowledge of disability rights and how to access to workplace accommodations is also important because the individual is responsible for self-disclosure in order to request accommodations; a report using data from National Longitudinal Transition Study-2 indicated that 84% of youths with disabilities that had been out of high school for up to two years had not disclosed their disability to their employers (Madaus, Gerber, & Price, 2008). Doren, Lindstrom, Zane and Johnson (2007) recommend instruction on disability and use of accommodations in their longitudinal

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study focused on career development and post school outcomes for young adults with disabilities. Madaus, Gerber, and Price (2008) also recommend that knowledge of ADA is included in transition plans, as is exploration of methods and timing of disclosure. Understanding their disability and associated rights will help youth successfully navigate the path to employment.

   Good communication between systems, programs, and services. Coordinated services produce positive results. The findings from this dissertation study, demonstrate the added complexity of proper coordinated services due to the high mobility rate of youth in foster care. In addition, the focus group of professionals remarked high turnover rates of social workers in the child welfare system result in a pool of relatively new professionals that may or may not know about all the services and supports available to the youth they serve. This may result in youth not gaining access to necessary programs because they don't receive the appropriate referrals. Although the actual connection to appropriate referrals falls within the microsystem layer, the systemic issues related to high turnover are arguably the cause of the breakdown within the mesosystem. In Köhler's (1996) work, "Taxonomy for Transition Programming" she outlines the elements needed to promote collaborative service delivery and build a collaborative framework, highlighting the importance of this theme. For youth with disabilities in foster care this collaborative transition planning effort should also include the child welfare system (Geenan and Powers, 2006), so that transition is properly coordinated between all systems, programs, and services that impact the youth.

Individual Factors

The themes to emerge in the individual layer were unmet mental health needs and a lack of understanding of disability and/or mental health diagnosis. Related to that, the majority of focus group participants did not provide targeted education about youths' diagnoses, because they often did not identify it as their role to do so.

Mental health needs. Mental health needs emerged as a theme both within the interviews with young adults and the focus group. Notably, five out of seven young adults interviewed identified as having mental health needs. Combine this with mental health needs being identified, within the focus group, as a top concern for alumni of foster care and it becomes clear that addressing mental health needs is of critical importance. This is in alignment with outcomes studies that Daining & DePanfilis (2007) reported, which demonstrated adults who transitioned from out-of-home care were at greater risk of mental health problems than those that had not been in out-of-home care. In addition, young adults that experienced homelessness who were alumni of foster care were more likely to have mental health needs compared to young adults experiencing homelessness that were not alumni of foster care (Daining & DePanfilis, 2007). Again, this aligns with the findings from this dissertation study as three out of five of the young adults that disclosed mental health needs also experienced homelessness. The next theme, lack of disability awareness or implications of mental health diagnosis, parallels this one but focuses on the need for education around disability and mental health diagnosis instead of the nature of the issue.

Lack of disability awareness or implications of mental health diagnosis. This theme emerged from participants sharing that they did not understand their disability

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diagnosis, and were not knowledgeable about their transition plans on their IEPs.

However, they were often aware of the stigmatization associated with disability.

Similarly, to a study by Ferri and Connor (2010), several of the girls in this dissertation

study reported trying to hide that they received special education services. Ferri and

Connor (2010), propose that girls with disabilities may not be aware of how they can

form an "acceptable identity" and therefore hide their need for special education services

to maintain social status. This is an important consideration as identity development is a

critical function of development as young women prepare for the transition to adulthood

(Lindstrom, Harwick, Poppen, & Doren, 2012).

Involving youth in setting their transition goals is required by IDEA and helps

youth understand their disability diagnosis and the accommodations and modifications

that may contribute to their success later in life. However, in 2000, the National Council

on Disability reported that 88% of states failed to comply with this transition

requirement. Fourteen years later, young adults in this dissertation study reported little to

no involvement in their IEP meetings specifically regarding transition planning. This

finding aligns with other research indicating students were often not invited to attend

their IEP meetings (Martin, Marshall, & Sale, 2004) and even if they were involved little

time within the meeting was allotted for addressing issues regarding transition (Cobb &

Alwell, 2009). Parental involvement in developing transition services, goals and

objectives strongly correlates with a successful transition to adulthood (Trainor, 2008);

but this extra layer of support is often not available to youth in care since they often lack

a consistent parental figure. Therefore, it is important for youth to have a clear

understanding of disability limitation or accommodations needed so they can articulate

their needs and make a plan to succeed either academically or in the workplace (Lindstrom, Harwick, Poppen & Doren, 2012).

Mobility

Four of the seven young adults in this dissertation study experienced high rates of mobility during high school. The extant literature on youth in foster care also documents a high rate of mobility and indicates it is a barrier frequently experienced by youth in foster care (Pecora, 2012; Geenan & Powers, 2008; Collins, 2004). Youth with disabilities in foster care experience even higher rates of mobility due to more frequent placement changes than their peers without disabilities (Hill, 2012; Akin, 2011; Becker, Jordan, Larsen, 2007). The themes that emerged related to mobility were inconsistent high school graduation requirements and frequent placement and school changes discussed below.

Exosystem

The frequent placement changes, controlled by Children's Administration, of the young adults interviewed for this dissertation study often resulted in school changes. The regulations and policies often vary amongst school systems creating barriers to high school graduation.

Inconsistent high school graduation requirements. In the first theme, the lack of universal high school graduation requirements was discussed as creating barriers for youth who experienced high mobility. Complications arising from frequent placement changes and subsequent school changes contributed to participants not having the appropriate courses and/or credits. The absence of laws and/or systems to mediate the impact of mobility hinders the transition to adulthood for the population under

consideration in this study. According to a white paper published by Casey Family Programs (Joftus, 2007), one of the biggest barriers to school success for youth in foster care is mobility. The white paper made several recommendations to address the mobility issue, including expansion of the McKinney-Vento Homeless Assistance Act (42 USC 11431 et seq.) to cover all youth in out of home care, and expansion of the associated funding to accommodate this. This exosystem-level support would enable all youth in care to remain in their school of origin whenever possible and provide transportation to the school; whereas only youth awaiting foster care placement and/or are within 30- days of their shelter care order currently qualify.

Mesosystem

Frequent home or facility placement changes emerged as a theme within both the focus group and the interview data. Decisions about placement changes occur as a result of complex interactions between people and systems within the exosystem and those that are located within the microsystem; although the impact of these decisions if felt by the youth directly, as demonstrated throughout the findings within this study.

Frequent placement changes. Frequent placement changes prevailed as one of the prevalent barriers for the young adults that participated in this study. Placement changes occurred for many reasons, and placement decisions rarely took into account what the youth believed was the best placement for them. In general, youth with disabilities experience more placement changes than their peers without disabilities; reasons reported include higher costs and additional stresses on caregivers due to lack of knowledge skills to address specific needs of the disability combined with a lack of appropriate supports (Hill, 2012; Akin, 2011; Becker, Jordan, Larsen, 2007). Frank,

director of youth programs, emphasized how detrimental it was for youth to be told that they would have to removed from the home because of mistakes they made. This loss of family and place occurs because of decisions made during the interaction between adults in the microsystem and rules and regulations within the exosystem. The youth have little to no control during these interactions and are often left with negligible support to process the loss of family or place.

Experiencing placement instability increases the risk of emotional, educational, mental health, and behavioral issues (Hill, 2012; Pecora, 2010). Permanency has been demonstrated to improve successful adult outcomes; however, older youth experience more placement instability, higher rates of failed adoptions, and less successful reunifications with family (Hill, 2012). Placement type also differs for youth with disabilities. The National Council on Disability (2008) reports that youth with disabilities are more likely than their peers without disabilities to be placed in group-homes. In this current study, participants relayed their experiences in group-homes as being overwhelmingly the most negative of their placements. In 1997, the Adoption and Safe Families Act was passed, which requires social workers to plan concurrently for the youth's reunification with their family as well as their adoption. Even though this Act was passed seventeen years ago, only one of the young adults in this study experienced a successful adoption and that was not until she was an adult. None of the participants experienced reunification with their biological families before aging out of care.

<center>**Relationships**</center>

The lack of consistent, positive relationships for youth in foster care is reported within the extant literature (Samuels & Pryce, 2007; Geenan & Powers, 2007) — and emerged as a theme during interviews with young adults and the focus group of professionals. Again, the counter theme, stable and positive relationships, emerged as what was helpful in overcoming barriers during transition. The stable relationship does not need to be a parental figure, as described in the findings, positive relationships with teachers, social workers, or just one person whom youth can confide in and they believe wants the best for them may have a positive impact. All themes related to relationships were located within the microsystem layer of the ecological model; to be expected since it contains the people that are likely to have the most direct impact on the individual. Since three of the seven participants were also parenting — early parenting will also be addressed in this section.

Microsystem

While some interview participants did not discuss systems or interactions that resided in the outer layers of the ecological model, they all discussed people or institutions that were located within the microsystem. Lack of consistent and positive relationships emerged as a barrier to transition, while stable and positive relationship emerged as a theme related to helpful supports. Within the interview findings early parenting added an additional layer of complexity to the transition for Mona, Manny, and Sandra.

Lack of consistent and positive relationships. Poor quality of relationships was exposed, as participants discussed how the strain on relationships with biological and

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foster parents created hardships and "drama." Most participants reported having little to

no contact with their biological families or strained relationships with those they are in

contact. This is undesirable because a study by McWey, Acock and Porter (2010)

concluded that children having no contact with their biological mothers demonstrated the

highest levels of externalizing behaviors, whereas frequent contact with their biological

mother was "marginally associated" with lower levels of depression. Lack of contact with

the biological family also adds to the feeling of having no safety net in adulthood, as

Mona related when she discussed not having anyone to "call for help."

     Participants also reported poor quality of relationships with the foster families,

with whom they were ideally placed for their own protection. Matt referred to one set of

foster parents as "bullies" and Tammi's foster mother encouraged her to drop out of

school. Even Rex, who was in a long-term, stable placement throughout much of his stay

in foster care, has since severed ties with his "family." He shared that the "family" was

"becoming very overbearing" and that he was reprimanded any time he tried to leave

their farm and began to feel "stifled there." He said that a lot of things "happened there

that they just kind of didn't get on board with" although he adds that his "experience with

this family and with this foster care things was very uniquely me." It is unclear if and

how this internalization may impact him in the future.

     Although, research suggests supportive relationships are a protective factor

against poor outcomes for youth in foster care (Samuels & Pryce, 2008), placement

instability makes it exceedingly difficult for youth in care to have a consistent,

trustworthy, supportive adult in their lives. For youth with disabilities the increased

likelihood of placement changes (National Council on Disability, 2008) may compound

this effect. Professionals in the focus group suggest improved training and compensation to maintain high quality foster homes that are adequately prepared to accommodate youth who need higher levels of quality care (i.e., youth with disabilities), caregivers that have the tools necessary may be less likely to ask for the youth to be removed from the home thus providing the opportunity for a long term relationship to be maintained.

Stable and positive relationships. Whereas, the lack of consistent and positive relationships was identified as a barrier during transition — the theme, stable and positive relationships was identified as helpful in overcoming them. Murray (2003), suggests that positive teacher–student relationships have a lasting effect on youth with disabilities. The findings from this dissertation also demonstrate the impact that even one positive strong relationship with a teacher can make regarding a youth's feelings about education and his or her future possibilities. Mona's face lit up as she talked about the one teacher that didn't treat her "like a foster kid" and instead treated her like an actual "human being" and suggested she should go to college because it is the "best years of your life." Most participants talked about the benefits of teachers that spent the time working one on one with them. DD shared how great if felt when she saw the teachers get "excited" about helping her graduate with her class. In contrast, negative relationships with teachers can have the opposite effect. Manny and Sandra were the only participants to share frustration about the level of assistance they received from teachers; both dropped out of high school.

Early parenting. Research indicates that females in foster care are at greater risk of early parenting (Geenan & Powers, 2012; Courtney, Terao & Bost, 2004). Although Mona, Manny, and Sandra did not focus intensively on their experience of early

parenting during their interviews, they provided a glimpse of some challenges that occurred including the need for childcare. One participant reported additional strain on her relationship with her biological mother. Although early parenting is generally associated with poor long-term outcomes, it also presents opportunities for growth (Larson, 2004). Sandra shared that her son motivates her and she doesn't want "to give up"; she also aspires to traveling so that she can give her son family vacations, which she never had. Larson (2004) reported that many of the young low income mothers in her study did not report the experience of motherhood and becoming an adult (dual developmental tasks) as stressful. The participants within this dissertation study also seemed to focus more on other elements of their transition as being particularly stressful and parenting as not.

Stability

In this study, many of the participants experienced placement instability, homelessness, and unsuccessful attempts at post-secondary education before arriving at their current circumstances. As a result, many of the young adults crave stability. Professionals also shared that stability was an essential measure of the success of their work with youth.

Exosystem

Four themes impacting stability resided within the exosystem layer. The first three were perceived as barriers: inadequate service delivery model for foster care, inconsistent access to ILP services and preparation for transition, and the lack of safety nets after "aging out" of the foster care system. The reverse of the latter was perceived as helpful, systems to provide a "safety net" during transition.

Inadequate service delivery model for foster care. The findings from the focus group identified inadequate service delivery model for foster care as a barrier. This leads to greater instability for youth in care because they are more likely to experience frequent moves. The impact on relationships has been discussed previously; this section will focus on system changes that need to occur to improve stability. Specifically, the professionals believe caregivers working within the system are not prepared to support youth with diverse needs including cultural background, and disability and mental health diagnoses. Powers (2007) also reported similar placement disruptions due to foster parents not receiving adequate training to support the needs of youth with disabilities. She also noted that foster parents might have limited knowledge of special education services and the associated rights and responsibilities. Collins (2004) also recommended a more culturally competent service delivery model to improve transition outcomes for youth leaving care. Unfortunately, children of diverse backgrounds are overrepresented in the child welfare system both nationally and in King County, WA, the location of this dissertation study; and their outcomes are generally worse (Clark, Buchanan, Letgers, 2008). Therefore, systems designed to serve youth in foster care should be prepared to address the needs of youth from diverse backgrounds.

Inconsistent access to ILP services and preparation for transition. Interview participants reported variable access to Independent Living Programs (ILPs) and sometimes-inadequate preparation from them. Several participants reported their ILPs did not adequately prepare them for adult life, nor did they receive this information from other sources. Several of the young adults shared concerns about managing finances, budgeting, and knowing how to pay bills. Almost without exception and regardless of

participation in ILPs, the participants did not have a realistic budget in mind for their desired lifestyle. However, other participants reported that their ILPs were very beneficial as they transitioned to adulthood; especially with regards to acquiring housing and assisting them in filling out various application forms for programs, services or potential employment. This discrepancy in participants' perceptions of his or her ILPs is also mirrored in the literature, which reports that the types of services and quality of Independently Living Programs vary widely (Geenan & Powers, 2007). In addition, the particular needs of the participants and the "fit" of their program may have contributed to whether or not the youth gained the skills they needed.

Lack of "safety net." During youth's time in foster care they have a manufactured "safety net" in the system designed to protect them. The loss of that safety net occurs with the reduction of services available after "aging out;" this theme is also reflected in existing literature. Homelessness is one result that may occur because of this missing "safety net," Casey Family Programs (2008) reports that 22% of alumni of foster care between the ages of 18 and 24 experience homelessness for at least one day after leaving care, compared to between 2.6% and 6.8% for the same age group that are not an alumni of care. Even in this small study of young adults doing comparatively well, four of seven participants experienced homelessness at some point after leaving the foster care system. Therefore, continuing to provide a safety net, including financial support, during young adulthood is crucial to improving post-school outcomes for this population.

Systems to provide a "safety net" during transition. A lack of safety net was identified as a barrier; having systems in place to provide a safety net was perceived as helpful. Findings from this study suggest that extended foster care show promise in

providing this safety net. In 2011, Washington State passed extended foster care (HB 1128), which allowed youth to sign a voluntary placement agreement (VPA) to remain in care until age twenty-one if they were completing high school or a vocation program. This allowed Washington to opt-in to the Fostering Connections Act and receive federal matching dollars to assist with funding the additional supports for youth. HB 1128 was amended in each subsequent year to broaden the eligibility criteria. Currently in Washington State, youth may remain in care until age twenty-one, provided they are in high school or an equivalency program; post-secondary education or vocational program; or participating in a program designed to promote employment or remove barriers to employment. The level of support available to youth aging out of care is dependent on where they reside, as not all states guarantee the same level of support — however where available extended foster care may provide youth with stable housing, medical and dental benefits, referrals to community resources and continued case management (Okpych, 2012). Of the social services available, youth shelters were also reported by participants as valuable both for housing and helping them access education or GED programs.

Microsystem

The findings from this study suggest that the proximal institutions and people closest to youth with disabilities that experience foster care often have the most impact on his or her transition to adulthood. Residing within the microsystem layer, were the themes of unstable and/or negative housing experiences and post secondary support programs for alumni of foster care. The first theme was perceived as a barrier and the second was perceived in helpful in overcoming barriers to the successful transition to adulthood.

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Unstable and/or negative housing experiences. Placement changes, resulting in unstable housing for youth in foster care has been discussed within other layers of the ecological model demonstrating how many systems, institutions and people influence where youth in care reside. At the microsystem level the focus in on the actual living environment. Older youth are more likely to be placed in group homes than in family foster homes (Collins, 2004); as are youth with disabilities (National Council on Disability, 2008). This is concerning since participants, interviewed in this dissertation study, reported their most negative experiences were in group homes.

In addition, the findings from this dissertation study and the extant literature demonstrate that homelessness is prevalent for youth that experience the foster care system. Besides the lack of housing, there are many other implications of time spent on the streets, in shelters, or couch surfing. In the short term youth homelessness is linked to lower academic achievement, health problems, higher risk of experiencing violence and trauma, and subsequent psychological concerns (Edidin, Ganim, Hunter, & Karnik, 2012). Edidin, et al., report that research in unclear about whether impaired cognitive functioning observed in homeless youth preceded homelessness or if it persists after individuals gain stable housing; they suggest more research is needed in this area.

Post Secondary support programs for alumni of foster care. Two participants participated in post secondary programs that were specially designed for alumni of foster care. Both reported these were paramount to their current academic success; both had also been unsuccessful in other environments that did not have such programs. Mona did not participate in a program for alumni of foster care, however she reported that her

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advisor within the disability services program at the community college was critical to helping her navigate the path to a four year university.

Other research also supports the need for specific post secondary programs for alumni of foster care. Based on a review of federal policy that supports the transition to postsecondary education for youth transition from foster care, Okpych (2012), recommended a national framework for campus-based support programs that would receive federal funding for coordinated services including housing, financial assistance, academic tutoring and guidance, childcare, interpersonal and life skills training, referrals to mental health services, and assistance obtaining post graduation employment. He acknowledges this would require a substantial increase in funding but justifies it based on the possible increase in long term self-sufficiency and decreased future need for public assistance.

Personal Characteristics

This final section discusses personal characteristics that were identified in the findings that seem to influence the successful transition to adulthood for the young adults interviewed. As demonstrated in their profiles, all experienced challenges and all had to discover the right path for themselves; some of the characteristics identified as themes in this study may have helped them along the way. When asked about successful adult outcomes for the youth they serve, no themes emerged from professionals in the focus group. However, they all discussed characteristics that fell within the individual layer of the ecological model. Some of the main characteristics they identified were happiness, personal growth, and life satisfaction. In addition, a few said they hope their clients gain self-efficacy.

Individual Factors

Throughout the interviews, participants' level of self-awareness and the ability to reflect on their circumstances were impressive and their insight was often profound. The majority of participants seemed hopeful about their future trajectory and prepared to take the next steps in their education or careers. Most of the young adults interviewed focused on personal fulfillment over material needs or desires. The majority of young adults did not take a stance that successful adulthood required materialistic gains such as a large house or expensive cars. Most interview participants described a modest lifestyle and a career outside the corporate world where they could be of service to others. The three themes that emerged were resilience, self determination, and advocacy.

Resilience. The term resilience appears frequently in literature about the transition to adulthood for youth in foster care; in interviews with 44 youth that experienced foster care, many youth used the expression "what doesn't kill you makes you stronger"; the researchers reported that instead of identifying as victims the youth "constructed their life stories as testimonies of survival against all odds" (Samuels and Pryce, 2008). Several participants, in this dissertation study, spoke of hitting rock bottom but were resilient enough to recover and also seemed proud of their ability to survive and overcome the obstacles they faced. Rex's large tattoo of the word "RESILIENT," is a constant reminder to him that he can go through a lot and still be okay. A study exploring the relationships between support systems, life stress, and resilience for young adults that experienced the foster care system found females, older youth and youth with lower life stress reported higher resilience scores (Daining and DePanfilis, 2007). Based on these

findings the authors recommend holistic programming designed to foster resilience for youth in out-of-home care.

Self-determination. Participants who discussed behaviors that imply self-determination are experiencing transition outcomes that conform to the definition of successful adulthood used in this study. This is not surprising since research indicates a positive relationship between self determination and improved transition outcomes (Powers, Geenan, Powers et al., 2012; Walker, Calkins, & Wehmeyer, 2011; Trainor, Lindstrom, Simon-Burroughs, Martin, & McCray Sorrells, 2008). Participants that demonstrated strong self determination skills and are currently doing quite well and report indicators related to improved quality of life such as community engagement, access to community supports, and the ability to self manage. On the other hand, participants that were experiencing the most uncertainty and challenges at the time of the interviews; also seemed to demonstrate lower self determination skills than the other participants for example more difficulty overcoming obstacles or advocating for themselves.

Advocacy. Participants in the both the interviews and the focus groups discussed advocacy both for self and for others. Focus group participants discussed how the youth they work with often say they want to make things better for other youth who experience foster care. Several of the interview participants also shared examples of advocating for others and intended careers involving giving back or helping others. Jack, from the focus group, said that he feels successful in his work when youth gain self advocacy skills. Self advocacy skills are linked to increased self determination and successful transition to adulthood for youth with disabilities (Martin, Marshall & Sale, 2004, Köhler, 1996)

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Similarly, focus participants in Geenan and Powers' 2007 study, also identified self advocacy as promoting successful transition in particular for youth with disabilities in foster care.

Limitations of the Study

This section describes limitations to the study. First, the relatively small sample size is a limitation; a larger number of participants (N = 10-12) was included in the original research design, however extensive recruitment efforts involving personal contacts at community based organizations, advocacy groups, among social workers, and within institutions of higher education did not produce the anticipated number of participants. In many instances, professionals who worked with alumni of care were easily able to identify potential participants that met all the requirements except that of disability status. Unfortunately, this aligns with the poor adult outcomes for youth with disabilities that have experienced foster care in general. In addition, professionals were unable to identify additional males to balance the participant pool by gender, therefore it is unknown if themes related to gender would emerge in a more gender balanced sample.

Another limit to the study is that all participants reside in King County, WA. Results may not be generalizable to a different population since systems impacting youth (e.g., school systems, and Children's Administration) may have different processes and procedures due to laws within the particular state where the youth reside. Additionally, the study did not collect longitudinal data, which would have provided more in depth knowledge of the participants' experiences and perceptions of perceived barriers and the supports they experiences as most helpful.

Finally, the majority of the data presented comes from self-report and is therefore reflective of the perceptions of the participants. In many instances, the data from the focus group was in alignment with the interview data and both are mirrored in the extant literature. Additional data from social workers, caregivers, vocational counselors, and school personnel would be useful in corroborating or countering some of the findings within this study.

Implications for Practice

Greater awareness is needed of the social contexts and relationships within each layer of the ecological model that impact young adults with disabilities who experienced the foster care system.

Disability and Mental Health Diagnosis

Progress towards improved disability and mental health services can be achieved through better interagency collaboration and communication between systems; as well as through ongoing training for professionals to keep abreast of services and supports available and changes to laws impacting youth in foster care with and without disabilities. Student-centered planning has been demonstrated to improve transition outcomes for youth with disabilities (Geenan & Powers, 2007; Agran, Cain, & Cavin, 2002; Benz, Lindstrom, & Yovanoff, 2000). Utilizing student centered planning with youth with disabilities in foster care would assist to bring transition planning efforts by multiple systems into alignment. For example, it may be helpful to assist youth in creating their own transition plan with personally meaningful goals that the adults in the youth's life — such as special educators, social workers, mental health counselors, and ILP staff — use to drive their work as part of the support team. Student-centered planning used as a

holistic case management approach would reduce the tendency of agencies to work at cross purposes (when goals are not aligned) or to recommend inappropriate services or supports because crucial information from one system or institution has not been transferred to another.

Mobility

To help youth overcome challenges caused by frequent school changes resulting from high mobility, which are exacerbated by inconsistent graduation requirements between schools, youth in foster care in Washington State could develop an option of graduating with a state diploma. The Washington State diploma would provide consistent requirements, whereas school districts may have additional credit and non-credit requirements beyond what is required by the state. Standardized graduation requirements would allow youth to remain "on-track" for graduation regardless of how many school changes they encountered while in care. State diplomas are currently available to Running Start students and students over 21 that have earned an associates degree. For students working towards graduation in the current system, it is important that their caregivers and service providers are trained regarding the availability of assessment waivers for 11th and 12th graders that transfer from another state and for students with "significant cognitive disabilities" (www.k12.wa.us). For youth that are reaching age eighteen, it is imperative that these students are informed of the benefits of opting in to extended foster care and that fears about remaining "in the system" are addressed. For youth residing in other states, service providers, school districts, or caregivers should be knowledgeable of alternative graduation strategies to support school completion.

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Relationships

This study has demonstrated the perceived benefit of stable and positive relationships. Positive teacher student relationships have been linked to decreases in suicidal ideation, emotional distress, violence, substance abuse and sexual activity (Suldo, et al., 2009; Hughes, Cavell, & Wilson, 2001; Paulson &Everall, 2003; Resnick et al., 1997). Therefore, helping youth remain in schools where they report positive relationships with teachers, or help them maintain the relationships, may contribute to positive social-emotional outcomes. In addition, ensuring youth have contact with biological parents, when ever possible, may lessen the potential of youth presenting externalizing behaviors and lower levels of depression for youth in out-of-home care (McWey, Acock, & Porter, 2010).

Stability

The findings of this study have identified the need for systems improvements, such as increased knowledge about disabilities and IDEA for caregivers, more appropriate compensation for caregivers, ongoing coaching and training, and building collaborative networks, to increase the recruitment, support, and retention of foster parents who understand the needs of youth with disabilities. This will enable foster parents to be adequately prepared to appropriately respond to unwanted behaviors that might otherwise result in placement changes. Foster parents should also receive cultural competency training so they are better able to serve youth that are not from their own culture. (Collins, 2004). Education should be provided for foster parents about the benefits of legal adoptions, so that more youth obtain permanency.

Personal Characteristics

The findings from this study demonstrate that several personal characteristics seem to benefit the youth during the transition to adulthood for youth with disabilities that experience foster care including resilience, self determination and self advocacy. Professionals and caregivers can improve direct services to support youth to build their own capacity, including self determination skills and opportunities to experience developmentally appropriate supported risks and failures. Improved youth self determination would facilitate collaboration between systems because youth would "own" their transition plan encouraging the alignment of all team members (e.g., caregivers, social workers, teachers) and systems (e.g., school districts, children's administration, ILPs). Thus, all team members would support and work towards the same youth centered goal. As described in the literature review of this dissertation, in a study by Geenan et al., (2012), youth with disabilities in foster care that received individualized coaching of self determination skills and group mentoring; participants graduated from high school, gained employment and succeeded in independent living activities at higher rates than the control group. In addition, self determination skills may build capacity for resilience (Murray, 2003), which seemed to improve outcomes for participants within this dissertation study.

Implications for Future Research

This dissertation study fills an important gap in the existing literature about the transition to adulthood for youth with disabilities that experienced foster care. The findings from this study confirm barriers reported in the existing literature about the transition to adulthood for youth in foster care with disabilities. However, due to the

relatively small sample size, the few male participants, the short time frame in which the interviews occurred, and the confinement to a specific geographic location, more research is needed to fully understand factors that may correlate with the successful transition to adulthood for young adults with disabilities that experience foster care. While the use of the ecological model enabled construction of theory around the process of transition and exposed the mid-level theory of multiple identities, it restricted the analysis from further exploration of issues around multiple stigmas and identity. Therefore, research about the double jeopardy of disability and foster experienced by participants and its impact on identity formation would contribute to the knowledge of the process of transition for young adults with disabilities that experience foster care.

The difficulty finding participants for this study suggests the need for more research about this particular topic in an expanded geographic area. Due to the gender imbalance within this dissertation — a study with a balance of gender would be useful in understanding the role of gender in influencing transition outcomes for youth with disabilities that experience foster care. Additional research devoted to the transition to adulthood for males with disabilities that experienced foster care would also contribute to the larger body of supports needed for youth with disabilities that experienced foster care.

In addition, a longitudinal study beginning at age sixteen, when transition planning is mandated for youth receiving special education, until age twenty-four would provide valuable information about barriers faced and supports and services that help youth with disabilities transition to adult roles. Data collection beginning at age sixteen from multiple sources such as teachers, social workers, foster and birth parents would allow the findings to be triangulated to increase validity. Finally, throughout findings of

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this dissertation study the need for improved interagency collaboration was identified due to the added complexity of additional systems involvement during their transition to adulthood for youth with disabilities in foster care. Notably, the National Secondary Transition Technical Assistance Center (NSTACC) has also identified the need for additional research on interagency collaboration (www.nsttac.org).

Summary and Conclusion

This study examined the lived experience of young adults with disabilities who experienced the foster care system to gain greater understanding of the process of their successful transition to adulthood. The findings of this study contribute to the growing body of literature about the particular experience for youth in the foster care system that have a disability diagnosis or mental health concerns. The findings suggest and confirm prior research that improved systems and interagency collaboration, more training for professionals and caregivers, and self-determination and self advocacy training for youth are needed to improve post school outcomes for youth with disabilities who experience foster care. The services and supports that were perceived as the most helpful in overcoming barriers were (a) access to mental health and disability services, (b) stable and positive relationships, (c) systems that provide a "safety net" during transition, and (d) post secondary support programs for alumni of foster care. On an individual level, resilience, self determination, and self-advocacy seemed to contribute to participants' successful transition to adulthood. This dissertation study demonstrates the complex multilevel systems that impact transition experiences and outcomes for youth with disabilities that experience foster care. This dissertation study also demonstrates the variability of the social and relational contexts for youth in foster care, therefore a

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personalized, youth centered approach to case management is required during their

transition to adulthood.

Recruitment Flyer

Participants Wanted for a Research Study

Transition to Adulthood For Young Adults with Disabilities that Experienced Foster Care

This study aims to contribute to a greater understanding of the experiences of the transition to adulthood for young adults with disabilities that were in foster care, so that teachers, social workers, and caregivers can better support youth.

Who is Eligible?

Young adults between the ages of 18-24

- Who were in foster care more for more than 6 months during High School
- Who have a disability
- Who are currently enrolled in college and/or employed and have been for at least 1 year

What will you be asked to do?

- Be interviewed on 2 occasions at the location of your choosing
- Share you personal experience of being in High School
- Talk about what it is like now that you are in college/ or working
- Interviews typically last 1 to 1.5 hours

Compensation

You will receive a $25 gift card for your participation in this study. You will be helping researchers understand what youth, with disabilities that have been in foster care, need to make the transition to college or getting a job easier.

If you have questions or are interested in participating, please contact: Robin Harwick by phone or text at 541.221.9393; or by email at harwick@uoregon.edu

Informed Consent- Young Adult

University of Oregon Special Education and Clinical Services
Informed Consent for Participation as a Subject in
"The lived experience of the transition to adulthood for young adults with
disabilities that experienced foster care" study.
Investigator: Robin M. Harwick
Adult Consent Form

Introduction & Purpose

- You are being asked to be in a research study about the challenges young adults with disabilities that were in foster care experience when going to college or getting jobs and what helped to get through those challenges.
- You were selected as a possible participant because you are between the ages of 18 and 24 were in foster care and have an identified disability, and have been employed or enrolled for the past year . All participants will also live in King County (or a county close by).
- We ask that you read this form and ask any questions that you may have before agreeing to be in the study.

Description of the Study Procedures:

- If you agree to be in this study, we would ask you to do the following things: be interviewed two times about your experiences in school, the foster care system, and other supports you may have experienced. Each interview will last approximately 1 hour and with your permission, will be audio-taped.You will also be asked to complete a short questionnaire about your background and demographic information.

Risks/Discomforts of Being in the Study:

- The study has the following risks. First, some of the questions may make you feel uncomfortable. You can choose to stop the interview or not answer any questions you do not feel comfortable with. There is also a small risk that your name will not be kept private. I have set in place a set of procedures for this not to happen. For example, you will not be asked to use your name on the audio-tape. I will also not place your name on any of my notes.. No other risks are expected.

Benefits of Being in the Study:

- The benefits of participation are you can help us do a better job helping youth with disabilities that were in foster care, prepare for college or getting a job.

Payments/compensation:

- You will receive the following reimbursement: $25 gift card to be paid after the completion of the second interview. If you withdrawal following the first interview the gift card amount will be reduced to $10.

Costs:

- There is no cost to you to participate in this research study.

Confidentiality:

- The records of this study will be kept private. In any sort of report we may publish, we will not include any information that will make it possible to identify a participant. Research records will be kept in a locked file.

- All electronic information will be coded and secured using a password protected file. Only Robin Harwick will have access to the files; the audio files will be deleted within 3 years of the study's completion.
- Access to the records will be limited to the researchers; however, please note that the Institutional Review Board and internal University of Oregon auditors may review the research records.

Voluntary Participation/Withdrawal:
- Your participation is voluntary. If you choose not to participate, it will not affect your current or future relations with the University or any social service agencies you are working with.
- You are free to withdraw at any time, for whatever reason.
- There is no penalty or loss of benefits for not taking part or for stopping your participation. If you withdrawal following the first interview the gift card amount will be reduced to $10.

Contacts and Questions:
- The researcher conducting this study is Robin M. Harwick. For questions or more information concerning this research, you may contact her at harwick@uoregon.edu.
- If you believe you may have suffered a research related injury, contact Robin Harwick at 541.221.9393 who will give you further instructions.
- If you have any questions about your rights as a research subject, you may contact: Research Compliance Services, University of Oregon at (541) 346-2510 or ResearchCompliance@uoregon.edu

Copy of Consent Form:
- You will be given a copy of this form to keep for your records and future reference.

Statement of Consent:
- I have read (or have had read to me) the contents of this consent form and have been encouraged to ask questions. I have received answers to my questions. I give my consent to participate in this study. I have received (or will receive) a copy of this form.

☐ I agree to be audio-taped.

Signatures/Dates

_____
Study Participant (Print Name)

_____
Participant or Legal Representative Signature   **Date**

University of Oregon Special Education and Clinical Services
Informed Consent for Participation as a Subject in
"The lived experience of the transition to adulthood for young adults with
disabilities that experienced foster care" study.
Investigator: Robin M. Harwick
Interview Adult Consent Form

Introduction & Purpose
• You are being asked to be in a research study about the challenges young adults with disabilities that were in foster care experience when going to college or getting jobs and what helped to get through those challenges.
• You were selected as a possible participant because you are between the ages of 18 and 24 were in foster care and have an identified disability, and have been employed or enrolled for the past year.
• We ask that you read this form and ask any questions that you may have before agreeing to be in the study.

Description of the Study Procedures:
• If you agree to be in this study, we would ask you to do the following things: be interviewed two times about your experiences in school, the foster care system, and other supports you may have experienced. At the beginning of the interview I will ask you some questions from a short questionnaire about your background and demographic information. The interviews will be conducted over the phone. Each interview will last approximately 1 hour and with your permission, will be audio-taped.

Risks/Discomforts of Being in the Study:
• The study has the following risks. First, some of the questions may make you feel uncomfortable. You can choose to stop the interview or not answer any questions you do not feel comfortable with. There is also a small risk that your name will not be kept private. I have set in place a set of procedures for this not to happen. For example, you will not be asked to use your name on the audio-tape. I will also not place your name on any of my notes. No other risks are expected.

Benefits of Being in the Study:
• The benefits of participation are you can help us do a better job helping youth with disabilities that were in foster care, prepare for college or getting a job.

Payments/compensation:
• You will receive the following reimbursement: $25 gift card to be paid after the completion of the second interview. If you withdrawal following the first interview the gift card amount will be reduced to $10.

Costs:
• There is no cost to you to participate in this research study.

Confidentiality:
- The records of this study will be kept private. In any sort of report we may publish, we will not include any information that will make it possible to identify a participant. Research records will be kept in a locked file.
- All electronic information will be coded and secured using a password protected file. Only Robin Harwick will have access to the files; the audio files will be deleted within 3 years of the study's completion.
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Voluntary Participation/Withdrawal:
- Your participation is voluntary. If you choose not to participate, it will not affect your current or future relations with the University or any social service agencies you are working with.
- You are free to withdraw at any time, for whatever reason.
- There is no penalty or loss of benefits for not taking part or for stopping your participation. If you withdrawal following the first interview the gift card amount will be reduced to $10.

Contacts and Questions:
- The researcher conducting this study is Robin M. Harwick. For questions or more information concerning this research, you may contact her at harwick@uoregon.edu.
- If you believe you may have suffered a research related injury, contact Robin Harwick at 541.221.9393 who will give you further instructions.
- If you have any questions about your rights as a research subject, you may contact: Research Compliance Services, University of Oregon at (541) 346-2510 or ResearchCompliance@uoregon.edu

Copy of Consent Form:
- You will be given a copy of this form to keep for your records and future reference.

Statement of Consent:
- I have read (or have had read to me) the contents of this consent form and have been encouraged to ask questions. I have received answers to my questions. I give my consent to participate in this study. I have received (or will receive) a copy of this form.

Signatures/Dates

_____
Study Participant (Print Name)

_____
Participant or Legal Representative Signature   **Date**

PROTOCOLS

Interview Protocol
Background Questionnaire

1. What is your gender?
   Female ___   Male ___   Transgendered ____

2. How old are you? _____

3. What is your ethnicity (select all that apply)?
   Hispanic ___
   American Indian/Alaskan Native ___
   Asian ___
   African-American ___
   Caucasion ___
   Native Hawaiian or Other Pacific Islander ___

4. How long did you spend in foster care? _____

5. What type of placement did you have? (check all that apply)
   Kinship care _____
   Group Home _____
   Foster Home _____

6. What year did you graduate or leave High School? _____
   6 a. Which of the following did you receive?
   Standard Diploma _____
   Modified Diploma _____
   GED _____

7. What is the name of your college? (if applicable) _____
       a. What year are you?
   Freshman ___ Sophomore ___   Junior ___   Senior ___   Other ___

8. Where do you work? (if applicable) _____
       a. How long have you been employed at this job ? _____

9. What disability were you diagnosed with? Check all that apply

Specific learning disability ___   Intellectual disability ___
Autism ___   Orthopedic impairment ___
Deaf-blindness ___   Other health impairment ___
Deafness ___   Speech or language impairment ___
Emotional disturbance ___   Traumatic brain injury ___
Hearing impairment ___   Visual impairment ___

10. Did you receive special education services in high school?
Yes ___No ___Not sure ___

11. Did you have an IEP in high school? Yes ___No ___Not sure ___
        If yes, who made the goals for your IEP (check all that apply)

Self ___   Case worker ___
Parents ___   Other _____
Foster parents ___   Not sure ____
Teacher or school counselor ___

12. Did you attend your IEP meetings? Yes ___No ___ Not sure ___

13. Did you meet with a transition specialist in high school? Yes ___No ___Not sure ___

14. Do you attend an Independent Living Program? Yes ___ No ___ Not sure ___

15. Are you registered with disability services at your college?
        Yes ___No __ Not sure___

16. Do you utilize services through your disability office? Yes ___No ___
        16 a. If yes, which services do you utilize?
        Testing accommodations ___ Tutors ___ Orientations ___Other _____

17. Have you decided on a career?
        Yes, definitely _____ Considering a couple options _____ Undecided _____

        17a. If yes or considering options please list: _____

Interview Questions

In alignment with a responsive interviewing approach outlined by Rubin and Rubin (2005) the young adults individuality will be recognized and respected. The interviewee and the researcher will be conversational partners; the interviewees answers will steer the direction of the follow up questions allowing the young adults' to suggest topics and meaning that is seen as important to them. The interview questions for each respondent may change or be worded differently based on the direction of the conversation, the level of comfort, and/or the interviewees' personal experience (Rubin & Rubin, 2005). Therefore the list of questions below is not meant to be a comprehensive list of all possible questions; it will serve as a guide or aid when broad questions asking the young adult to share his/her lived experience does not result in an in-depth conversation and prompts are needed to generate richer content. The possible prompts are categorized by the research question they may help answer.

Possible Prompts

A. Understanding the lived experiences of young adults with disabilities that have experienced foster care as they transition to adulthood.

1) Tell me about a typical day for you when you were in High School.

2) Think about when you were in High School, how would you describe yourself then.

    a. If your life then was a movie what would the title have been?

3) What was hard for you in High School?

    a. How did you deal with that?

4) What was easy for you in High School?

5) Where did you live during High School?

    a. How many homes did you live in?

    b. Tell me about your different placements?

    c. Did the move(s) also require changing school?

        i. Can you describe what that was like?

        ii. Were there people that helped during the move(s)?

6) Did anyone discuss your disability label with you?

    a. If so, who?

    b. What did they say?

    c. Tell me how it made you feel?

    d. Did you talk about it with anyone else?

B. Understanding the perceived barriers during transition to employment or post secondary education settings

1) Can you tell me about your "transition planning" in High School?

    a) What were your transition goals on IEP?

    b) Did you attend any Independent living programs?

        i. If yes, where?

        ii. Can you tell me what you learned from the program?

    c) Tell me about any conversations you had about becoming an adult with your caseworker and/or caregivers?

        i. What did you learn from those conversations?

        ii. What do you wish you had learned?

d) Tell me about any discussions you had with friends about becoming adults (goals, plans, dreams)?

C. Understanding the services and supports that helped the most in overcoming the barriers.

1) Who were the people you talked to when you needed advice or help in HS or figuring out how to {get into college or get a job}?

2) How did you decide that you wanted to {go to college or start working} after High School?

3) Who helped you fill out the application(s)?

4) What has been hard for you now that you are {in college or working}?

   a) How did you work through that?

5) What is easy for you now that you are {in college or working}?

6) What are you glad you knew before starting {college or working}?

7) What do you wish someone had told you or that you knew before staring {college or working}?

D. Understanding how the young adults interviewed defined a successful adulthood.

1) Tell me what being a "successful adult" means to you?

2) Think about your future; tell me a little about what your life looks like.

   a) What is important to you?

   b) What is it that you absolutely couldn't live without?

   c) Who is your family?

   d) What kind of job or how much money do you want/need?

   e) What kind of home do you have/ who lives with you?

   f) If your life as an adult was a movie what would the title be?

E. Wrap Up

 1) Anything else you think I need to know in order to understand:

   a) what it was like for you in High School,

   b) what it was like {getting into college or starting a job}

     2) or what it is like for you now

Focus Group Protocol

Background Questionnaire

4. What is your gender?

Female ___   Male ___   Transgendered ____

5. How old are you? _____

6. What is your ethnicity (select all that apply)?
Hispanic ___
American Indian/Alaskan Native ___
Asian ___
African-American ___
Caucasian ___
Native Hawaiian or Other Pacific Islander ___

4. How long have you worked with (or parented) youth in foster care, or young adults that have aged out of care? _____

5. What is your highest level of education?
     High School Diploma _____
     Bachelor's Degree _____
     Master's Degree_____
     Doctorate _____

6. Where do you currently work? _____
     a. What is your position? _____
     b. How long have you been employed at this particular job?
          _____

7. Have you ever attended an IEP meeting? Yes ___No ___ Not sure ___

8. Have you ever attended a transition planning meeting? Yes ___No ___ Not sure ___

8. Have you ever attended a 17.5 meeting? Yes ___No ___ Not sure ___

Focus Group Prompts

A. Understanding experiences of young adults with disabilities that have experienced foster care as they transition to adulthood.

7) Tell me about the services you provide or your child received during High School.

8) What do you think is most challenging for youth, with disabilities that experience foster care, while they are in High School?

   a. What could be changed at the system level to reduce these challenges?

   b. How can service providers, educators, and/ or foster parents help?

9) What strengths have you seen in these youth during High School?

   a. How can services providers, educators and/or foster parents use these strengths to help youth succeed?

10) What kinds of impact, if any, have multiple home & school placements had on the youth you serve?

   a. Have you seen differences depending on the types of placements?

   b. Who are the people the youth have told you help the most during these transitions? Or what have you observed directly that seemed to help?

11) Do you ever discuss a youth's disability label with them?

   a. When do you have the conversation?

   b. What do you say?

   c. How do you feel when having the conversation?

   d. Do you think the conversation benefits the student?

      i. Why or why not?

B. Understanding the perceived barriers during transition to employment or post secondary education settings

8) Can you tell me about how you supported your youth or student during their transition to college or to a job?

    a) Did you ever talk about:

        i. Their transition goals on their IEP?

            1. Who led the meetings?

            2. Who created the goals?

        ii. Any Independent living programs the attended?

            1. If so, which programs?

            2. What did they say they learned from the program?

9) Tell me about any conversations you had with them about becoming an adult?

C. Understanding the services and supports that helped the most in overcoming the barriers.

1) What types of services or supports do you think youth need during HS to figure out how to {get into college or get a job}?

    • Do you think those supports are currently available?

    • If so, who provides them?

10) In your experience working with youth and young adults, how do they decide that they want to {go to college or start working} after High School?

    a) Who helped them fill out the application(s)?

11) What do you think is the hardest part for them once they are in{in college or working}?

        a) What services or supports seem to help the most?

12) What do you think is the easiest part for them now that they are {in college or working}?

13) What do you wish youth/ young adults knew before starting {college or working}?

E. Wrap Up

3) Anything else you think I need to know in order to understand:

        a) What youth with disabilities in foster care need to succeed in High School,

        b) How service providers, educators, and foster parents can better support youth during the transition to young adulthood,

        c) What young adults with disabilities in foster care need to succeed in college or at a job?

CROSS CASE ANALYSIS

Table C1.

Research Question Two: What were the perceived barriers during transition to employment or postsecondary education settings?

Participant	Individual	Microsystem	Mesosystem	Exosystem
Mona	-Medical needs -Mental Health	-Poor relationship with social worker; Social isolation -Many schools with different expectations -Homelessness -Parenting -Education around disability label not provided	-Frequent placement changes -Placement instability -Inappropriate SPED diagnosis	-Access to medical care -Inadequate social services -Inconsistent school policies
Tammi	-Medical needs -"Hyper"	-No relationship with bio-mom -Disability rights issues; No accommodations at work -Education around disability label not provided	-Not informed of disability rights or taught to advocate -Disability rights case denied -Not connected to DVR	- Not adequately prepared through ILP
Manny	-Mental Health	- Runaway history -Poor relationships with teachers (Dropped out) -Parenting	- Inappropriate mental health diagnosis	-Juvenile record not sealed
Sandra	-Noncompliant -"Disobedient" -Easily influenced by others	- Runaway history -Poor family relationship; Negative foster parent experience -Lack of safety net after transition -Many schools; Negative Peer group -Homelessness -Parenting	-Parenting classes resulted in loss of class time and credits -Encouraged to drop out and get GED	-Not adequately prepared through ILP -Inconsistent school policies
Matt	-Mental Health -Anger -Behavioral challenges	-Negative foster parent experience -School suspensions/ expulsions - Education around disability label not provided	-Placement changes -Not informed of disability rights or taught to advocate	-Not adequately prepared through ILP
DD	-Anger (Freshman year) -Identified as "Queen Bitch" -Mental Health	-Poor relationships with teachers, bio-parent -Runaway history -Oppressive group home -Homelessness -Lack of safety net after transition -Education around disability label not provided	-School did not know there was an IEP	-Inadequate Social Services for homelessness -Lost access to extended foster care
Rex	-Mental Health	-Lack of safety net after transition -Loss of relationship with foster parents (after transition) -Education around disability label not provided -Little contact with bio-mom	-Frequent placement changes (early childhood)	-Inadequate Social Services for homelessness -Not adequately prepared through ILP
Professionals	-Low expectations/ Disability identity -Mental Health	-Lack of highly skilled foster parents, SW, SPED teachers	-Frequent placement changes -Inappropriate SPED diagnosis -Over medicated	-Inadequate delivery of foster care

Table C2.
Research Question Three: What services and supports helped the most in overcoming the barriers?

Participant	Individual	Microsystem	Mesosystem	Exosystem
Mona	-Self determination -Self awareness -Resilient	-Positive relationship with teacher -Positive relationship with peers in SPED -Adult housing	-Special Education (audio books) -Disability Services (University based) -Housing Assistance (Homeless Youth Program)	-ILP -SSI -Homeless Youth Program
Tammi	-Self determination -Social/outgoing -Passion (goal focused) -Resilient	-Stable placement -Consistent adult (Foster mom) -Positive relationship with teacher -Adult housing	-Housing (ILP)	-ILP -Youth Employment Program
Manny	-Self determination -Self Advocacy -Resilient	-Steady adult employment -Adult housing	-Housing (ILP)	ILP -Extended Foster Care -Homeless Youth Program
Sandra	-Self Awareness -Advocate for others	-Positive relationship with teacher and SW -Positive relationship with peers in SPED -Positive relationship with bio-brother (young adulthood)		-ILP
Matt	-Determined (to return home)	-Positive relationships with teacher and SW -School taught about financing	-Special Education (teacher check ins and added support)	-Mental Health care -SSI
DD	-Self determination -Self Awareness -Self Advocacy -Resilient	-Stable placement -College Program -Consistent adult (Foster mom) -Support from extended Family		- Mental Health care -Extended Foster Care
Rex	-Self determination -Self awareness -Resilient	-Stable placement -College Program -12 mo housing (Financial & Emotional Support) -Support from extended family	-Disability Services (University based)	- Mental Health care
Professionals	-Self Determination	-Stable placement -Strong peer group -Positive relationship with family (bio or adopted)	-Coordinated services	

Table C3.

Research Question Four: How do the young adults interviewed define a successful adulthood?

Participant	Individual	Microsystem	Mesosystem
Mona	-Personal fulfillment over monetary compensation -Financial stability	- Employment (Counselor or Psychiatrist working with children) -Stability -Car -Housing (Own house or townhouse) -Family- more children	-Driver's License & Accessibly van(Disability)
Tammi	-Independent -Financial stability -Better health	-Car -Housing with or without assistance (Apartment) -Employment- working with children (well paid with benefits) -Strong relationships with "family"	-Driver's License (Disability)
Sandra	-Good role model for son -Active -Good relationship with son	"Good" life; Fresh Start -Travel with son -Finished school - Employed- Good career -Housing, Moved out of section 8 housing into house	
Matt	-Have what you need, not necessarily all you want -Financial stability -"Who wants to be a Millionaire"	-Housing; Living independently (Apartment); Internet -Significant other -Employed -Dog	
DD	-Identifies as poly and not conventional, "city girl" -Financial stability -"Professional" -"That Girl is on Fire"	-Completed Bachelor's & Fluent in sign language -Travel -Own house, Condo, or property; Internet -Significant other(s) -Cat, saltwater fish	-Get license back
Rex	-Responsible, efficient -Self care -Stability; Contentment -"Foodie" -Work/life balance -"Restless"	-Clothes -Housing Affordable apartment (aesthetics) -Preferably living alone -Employment-International career	
Professionals	-Stability -Happiness -Personal growth -Life Satisfaction -Self Efficacy		

Note. Professions responses reflect the answer the question about when they felt their work with a youth/young adult was successful.

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