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# A Phenomenological Study of Youth Experiences in Residential Foster Care and their Recommendations for Change

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A PHENOMENOLOGICAL STUDY OF YOUTH EXPERIENCES IN RESIDENTIAL  
FOSTER CARE AND THEIR RECOMMENDATIONS FOR CHANGE

By

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Presented to the Faculty of the  
Doctor of Educational Leadership Department  
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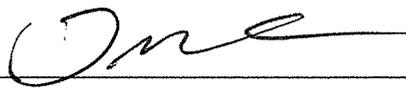


GEORGE FOX  
UNIVERSITY

COLLEGE OF EDUCATION

“A PHENOMENOLOGICAL STUDY OF YOUTH EXPERIENCES IN RESIDENTIAL FOSTER CARE AND THEIR RECOMMENDATIONS FOR CHANGE,” a Doctoral research project prepared by SISTER MARY ELIZABETH ANN MCCULLOUGH in partial fulfillment of the requirements for the Doctor of Education degree in Educational Leadership.

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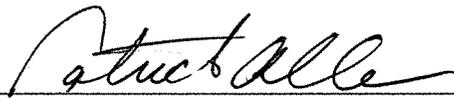
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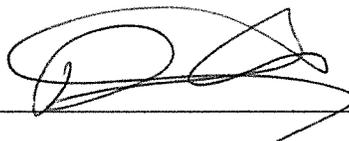
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## **ABSTRACT**

This dissertation explored the perspectives of young adults who experienced residential foster care and sought their recommendations for improving the care youth receive in residential settings. It consists of personal interviews with three young adults who spent time during their adolescence in residential foster care. Many of the recommendations are in line with existing research. Specific recommendations include: family-like environment, limited number of youth, individual and group support, and family activities.

## ACKNOWLEDGMENTS

This dissertation is completed with the support of a number of people but most of all with the help of Our Heavenly Father and it is done for His honor and glory and for the love of His children, especially those most in need of the knowledge of His love. This dissertation, in fulfillment of the requirements for the degree of Doctor of Education is dedicated to Mr. and Mrs. Thomas and Eileen McCullough who showed me what it means to have the unconditional love of parents, to Mother Jane Mary Firestone R.S.M. (d. 2017) whose support and confidence was a great help in undertaking this endeavor, and to Beth, Seven, and Jody and all the children and young people striving to grow up without stable loving parents to nurture them.

Special thanks goes to Mother Mary McGreevy, R.S.M. who suggested this topic be the springboard for my dissertation, to Sister Mary Vianney Walsh, R.S.M. whose assistance and support enabled me to complete it, and to the staff at Joshua's Home. Finally I wish to thank the chair of my Dissertation Committee, Dr. Terry Huffman, Ph.D. for his encouragement and guidance and for the assistance of Dr. Patrick Allen, Ph.D. and Dr. Dane Joseph, Ph.D. of the faculty of the Doctor of Educational Leadership Department at George Fox University who formed my Dissertation Committee.

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## CHAPTER 1

### INTRODUCTION

“I would give anything to have my years back.” Those are the words of Cleanna, a nineteen year old young woman who recently left residential foster care facilities where she had spent a decade of her life (Jackson & Marx, 2014, “Ten Years in Residential Care,” para. 10). Due to the neglect and abuse she received, Cleanna became a ward of the Illinois Department of Children and Family Services at the age of six months. Placed in residential care at the age of eight, she was moved from one facility to another and during that time she was raped twice. Cleanna is not alone. There are over 427,000 youth in foster care, and a substantial number of them live in residential care facilities (AFCARS, 2016). These young people are removed from an environment the state has deemed unsafe to live in a “better environment,” yet of those who enter the “better environment” of residential care, 40% end up in jail, in a psychiatric hospital, in a more restrictive facility or just disappear. Cleanna describes her experience with the words, “I feel like they took my life away” (Jackson & Marx, 2014, “Ten Years in Residential Care,” para. 4).

Much research has been done in the area of foster care (Ahmad & Qahar, 2005; Allen & Vacca, 2011; Clough, Ward, & Bullock, 2006; Hyde & Kammerer, 2010; Knorth, Harder, Zanberg, & Kendrick, 2008; Kroupina et al., 2014; McCall, 2012; McGoran, 2012; Thompson et al., 1996; Törrönen, 2006). Yet, when examining the literature, one finds that there is little research on the thoughts of the central figures in these studies, the children and young people themselves (Hyde & Kammerer, 2009; Stott & Gustavsson, 2010; Strolin-Goltzman, Kollar, & Trinkle, 2010; Unrau, 2007, Ward, 2004). There is even less research on what the young people

in foster care would like to do to change their circumstances. The purpose of this qualitative study is to describe the perspectives of young people in foster care, particularly in residential settings, and to gather their thoughts on what they wish could be different about their situation. The particular research question this study attempts to answer is: What do youth in residential foster care wish could be different in the manner of care they receive?

There is widespread agreement that the treatment provided for foster children, one of the most vulnerable populations in the United States, is failing the children placed in its care (Allen & Vacca, 2011, Legal Center for Foster Care and Education, 2008, McCall, 2012). Reasonably, children should not be left in homes where they are being abused or neglected simply because there isn't any place where they will receive appropriate care.

### **Statement of Problem**

The purpose of this study was to gain a greater understanding of the perspective of young adults who have spent some of their childhood or adolescent years in residential foster care and to describe their experiences. Specifically, I used personal interviews to conduct a qualitative study in the phenomenological tradition, exploring the experiences and perspectives of young adults looking back on the care they received in residential facilities. My objective was to gather data which can be used to improve the care of young people presently living in residential foster care facilities.

### **Research Questions**

Research questions help to frame and guide a qualitative research study. However, unlike quantitative research which typically includes specific, concrete research questions, explorative research often must use more global and general research questions in order to allow

a researcher flexibility to pursue issues and themes as they emerge (Agee, 2009). The research questions I employed to frame this research included:

*Research Question #1*

What are the circumstances that led the young person to residential foster care?

*Research Question #2*

How do the participants generally describe their experience with residential foster care (e.g., how their experience was beneficial to them, what in their experience was particularly difficult, etc.)?

*Research Question #3*

How would he or she change those circumstances if he/she could or what would have made it better?

**Key Terms**

All research investigations have a variety of concepts and terms central to the study. The following are a list of terms fundamental to this research and its associated scholarly literature.

*Attachment Theory* – a theoretical perspective developed by John Bowlby and Mary Ainsworth that explains the emergence of a deep and enduring emotional bond between an infant and a primary caregiver and attempts to explain “how the parent-child relationship emerges and influences subsequent development” (McLeod, 2009).

*Congregate Care* – a placement setting consisting of group home or institution with 24-hour care (U.S. Department of Health and Human Services, Children’s Bureau, 2015).

*Emancipation* – when a young person, due to age, is released from foster care before being adopted or reunited with his or her family.

*Foster Care* – a situation in which, for a period of time, a child lives and is cared for by people who are not the child’s parents.

*Legal Permanency* – “a family based permanent living status, such as reunification, guardianship, or adoption” (Chambers, Zielewski, Malm, 2008, p.1).

*Planned Permanency* – “a social work practice philosophy that promotes a permanent living situation for every child entering the foster care system; with an adult; with whom the child has a continuous, reciprocal relationship; and within a minimum amount of time” (Chambers, Zielewski, Malm, 2008, p.1).

*Physical Permanency* – the sense of having a home or place to be (Child Welfare Information Gateway, 2013).

*Project Re-Education (Project Re-Ed) Model* – a residential academic program which provides short-term care for youth with mental health problems, particularly emotional disturbances (Fields, Farmer, Apperson, Mustillo, and Simmers, 2006).

*Relational Permanency* – a situation of having a relationship or connection with a caring adult (Child Welfare Information Gateway, 2013).

*Residential Care* – a place where multiple children are cared for by staff in a live-in setting, e.g., an orphanage or group home.

*Teacher Family Model* – a method of caring for young people in a residential setting in which six to eight young people live in a family setting with a married couple who have been trained to take on the parental role (Thompson et al., 1996).

*True Orphans* – children for whom both parents are deceased.

*Social Orphans* – children with at least one living parent but that parent is unable or unwilling to care for his or her child.

## **Limitations and Delimitations**

There are a number of limitations in this study. Among the shortcomings inherent in the research design is the inability to make generalizations. I used a small, nonprobability sample appropriate for in-depth interviews incorporating open-ended questions. All members of the sample were from the same region of the country. While there may be some themes that are applicable to foster care youth, regardless of their geographical area, the single location for this study should be taken into consideration when examining the results. In addition, the sample was not randomly selected. I interviewed those young people who had spent time in residential foster care whom I was able to identify and access, and who were willing to offer an interview. These conditions may affect the validity with which we can generalize the results for the larger population of foster care youth.

The original intention of studying residential foster care youth was to gain insight into how to best care for youth in this situation. In order to make the study feasible, a number of delimitations had to be set. For ethical reasons my population was also delimited to young people over the age of eighteen who had not yet reached their twenty-fourth birthday. Because the sample were all over the age of eighteen, those I interviewed were eligible to give written consent for themselves without also requiring permission from the state or the person or institution with legal authority over a minor. For accessibility purposes, my sample was delimited to young people who had been served by Joshua's Home. The sample was further delimited by those young people who were not in residential care as a direct result of a physical or mental diagnosis. The purpose of this delimitation is to minimize the influence of medical diagnoses on the results.

## **Bracketing**

While I have always had a particular love for children in need of a loving and stable environment, this affection became particularly important to me when I began teaching elementary school. I soon became able to pick out students in a classroom that may be lacking a stable, loving environment as this deficit had an effect on their school performance, both behaviorally and academically. Educators can make a significant difference in the lives of children, but it is the home environment that is most important to a child's physical, mental, emotional, and spiritual well-being.

I believe the family is the ideal environment in which children can be raised but I question whether "any family" is the best environment in which to raise children. Many foster children grow up without anyone really knowing them because they have been moved from one family to another so many times. Others are pulled from an abusive or neglectful home environment only to be put into a foster care home where they continue to experience abuse and/or neglect. I find inspiring stories of men and women who have opened their homes to a group of children in need of loving and stable parents. As a Religious Sister of Mercy, the foundress of our community, Mother Catherine McAuley, began her work by opening a Home of Mercy for distressed women and children. Thus, I began this scholarly journey with two direct and deeply personal questions, "If we were to establish a Home of Mercy today for youth in need of a loving, stable environment, what should it look like? What would be the best way to care for these children?"

## CHAPTER 2

### REVIEW OF THE LITERATURE

#### **Introduction**

The literature available on the subject of foster care is extensive. Given the high volume of literature on foster care, I have attempted, as much as possible, to focus on the literature that deals with foster children in residential settings. However, I have also included a review of literature that, while not specifically about residential foster care, involves issues relevant for understanding the experiences of children in residential foster homes.

Literature reporting the effects of foster care are especially important and I attempt to review these works with a focus on interconnections. Where references in the literature were particularly pertinent to the topic, the primary sources were sought. Moreover, to ensure a certain level of quality, the literature search concentrated on peer reviewed articles. Articles which exposed the practices in foster care that positively or negatively affect the young people they are intended to serve were included to better understand what factors might be important. The literature search also included articles that revealed the perspectives of the youth since that is central to this study. Among the multitude of articles on this subject, a small percentage provided the perspectives of the young people themselves, those most directly affected by the care. There is a noticeable gap in the literature concerning what these young people would like to see happen regarding the circumstances of their foster care.

The primary method of gathering data in the studies reported in the literature is surveys. While this is a convenient method for acquiring data from a large sample, surveys frequently miss subtle nuances of an individual's life experiences. There are many mitigating factors in the

lives of foster children (i.e., age or prior experiences of family before entering foster care). As a result, when it comes to interpreting the results, it is very difficult to isolate one variable or factor as the cause of a particular result (Knorth, et al., 2008; Palareti & Berti, 2009).

### **Demographics of Foster Care in the United States**

There were an estimated 427,910 children in foster care in the United States on September 30, 2015, the last date the United States Department of Health and Human Services performed a count for this population (AFCARS, 2016). This is the highest number of children in foster care over the previous five years. The majority of these children are cared for in foster homes. A significant number of foster care children live, at one time or another, in residential care (AFCARS, 2016; McCall, 2012). Over 202,000 foster children were between the ages of eight and eighteen with 20,789 emancipated between October 1, 2014 and September 30, 2015. Emancipation occurs when, due to age, a young person is released from foster care before being adopted or reunited with his or her family. The goal for most foster children is to be reunited with their families (AFCARS, 2016).

According to the American Economic Association Child Protection and Child Outcomes, there are two million children for whom investigations are conducted due to possible child abuse (Doyle, 2016). One-half of these investigations produce evidence of abuse. Of those one million children found to be abused, 10% of them are placed in protective custody and enter the foster care system where the average stay is two years. Sixty percent of the children in protective custody are eventually returned to their homes; 15% of them are adopted by other families, and 15% of them “age-out” of foster care and are on their own at the age of 18 (Doyle, 2016).

The experience of foster care has lasting effects for many young people. In New York City alone there are 17,000 children in the foster care system (Allen & Vacca, 2011). Nine

hundred of those children are emancipated each year because they reach the age of 18 without having been adopted. By the time they reach their mid-twenties, 50% of these young people are employed, but 60% of the men and 75% of the women have been convicted of a crime. Many of the young women have children and are on public assistance; only 6% have earned a community college degree (Allen & Vacca, 2011). In an earlier study, Courtney, Piliavin, and Grogan-Kaylor (2001) found that 25% of young people who had aged out of foster care in 1995-1996 in Wisconsin had a record of seven or more delinquent acts, 14% had been homeless; 25% of males, and 10% of females reported serious victimization and 13% had been sexually assaulted.

### **Emotional and Social Challenges for Children in Foster Care**

Children in foster care face a number of social and emotional challenges. Some of these challenges concern attachments. Attachment theory, a product of the work of John Bowlby and Mary Ainsworth, focuses on the mother–infant bond (Bretherton, 1992). According to this theory, the bond formed between the mother, or mother figure, and the infant is very important. The relationship should be “warm, intimate and continuous” in order for the child to thrive (Bretherton, 1992, p. 761). This type of relationship provides a secure base for the child to venture off and explore new situations. The ability to form attachments is important in order to develop the ability to enter into healthy relationships later in life (McGoren et al., 2012). Yet, it is a challenge faced by many children in foster care. The quality of care provided impacts how secure the attachment of the child to caregiver will be. Avery (2010) and Neimitz (2011) both reported on studies revealing the importance of at least one caring person with whom a young person can attach in order for that young person to flourish.

An interesting study was conducted by a nutritionist in two small orphanages in Germany during World War II. Johnson and Gunnar (2011) reported the results of this study which

demonstrated the effects of nutritional deficiencies in children as well as the suppression of the growth hormone when a child experiences social deprivation. With care, children are able to “catch up” on growth. Two caretakers and two orphanages were studied. In one orphanage, the caretaker was young, cheerful and liked children. The second caregiver was older, harsh, and was a severe disciplinarian. The children in the latter one’s care did not grow physically, even when they were given more food. However, a small group of children favored by the second caregiver did exhibit growth. When the rest of the children were removed from the harsh environment, they were able to catch-up on growth at a much higher rate (Johnson & Gunner, 2011). This echoes back to attachment theory which emphasizes that a “warm, intimate and continuous” relationship with a caregiver was needed in order for children to thrive (Bretherton, 1992, p. 761).

Scholfield (2002) interviewed young adults who had spent three or more years of their lives in foster care. His results support the importance of a secure base, the need for children to feel loved and to feel that they belong. In discussing the need for close relationships, Scholfield writes, “the drive towards proximity in relationships is so fundamental to our being that it can be activated well beyond infancy” (2002, p. 263). Scholfield also found that having a secure base raised children’s self-esteem as they came to regard themselves as lovable. An important aspect of foster care as asserted in this study is the ability for young people, during stressful times, to be able to access and check back with the person to whom they have an attachment. Scholfield’s study confirms the need for at least one caring person in a young person’s life as reported by Avery (2010), Neimitz (2011), and Cashmore and Paxman (2006).

Generally there are so many factors involved in the lives of foster children that it is difficult to isolate individual factors to determine causality for either positive or negative

consequences. Factors that are significant enough to result in a child's entrance into the foster care system are certainly significant enough, in and of themselves, to cause some of the effects witnessed later in their lives. However, one factor that does seem to have a significant impact is the number of placements a child experiences. Strijker (2008) found that the number of placements a foster care youth experiences has a negative effect on long-term placements even for children who did not have difficulties before entering care. This study took into account factors such as age and behavioral problems at time of entry. As the number of placements increase, the likelihood of returning to the family of origin decreases for the youth. As a result of frequent moves, the young person is unable to establish a consistent, loving relationship with a caregiver (Strijker, 2008).

One of the greatest challenges for children in foster care is the lack of a mother figure or caregiver to whom they can establish the critically important "warm, intimate, and continuous" relationship (Bretherton, 1992, p. 761). According to Stott (2009), Alaskan youth in foster care average seven years in foster care and have a mean of 13 placements. That averages out to a move almost every six months. In the state of Washington, of those young people who aged-out of the foster care system, over 33% had ten or more placements while 67% had four or more placements. Youth in foster care in Arizona remained in foster care for an average of 3.73 years with an average of over eight placements.

With this number of placements, youth miss out on having any continuous relationship, having someone who truly knows them and who can provide a needed secure base. A stable, long-term caregiver is essential for the healthy development of children without parents to care for them (Stott & Gustavsson, 2010). Instability in relationships has a direct negative impact on children, including low academic achievement, low self-esteem, drug use, incarceration and even

behavior problems unrelated to problems when the young person first entered foster care (Stott & Gustavsson, 2010). Simply, young people lose a great deal when they lack a stable environment. Among those things lost include: security, connection with others, connection with places, and absence of particular ways of being together and customs for celebrating holidays. Young people also lose friends, contacts, groups to which they belong, teammates, the chance to have someone really know them and their history, a sense of what “normal” is, or what their peers in a traditional family ordinarily experience. Sometimes they even lose their belongings. Perhaps one of the greatest losses is that sense of control over their lives as exemplified in the case of Cleanna from Illinois who was introduced at the beginning of this dissertation (Hyde & Kammerer, 2009; Jackson & Marx, 2014 Stott & Gustavsson, 2010).

Because of the legal ramifications and incentives offered, social service agencies are more likely to place a young person in a pre-adoptive home rather than allow them to stay in a long-term care facility. Few youth are consulted about their placements (Stott & Gustavsson, 2010), even though research provides evidence that youth have a much greater chance of having a stable placement if they are consulted in the process (Barth et al., 2007). According to Stott (2009), if young people are permitted to develop connections with others naturally, pursuing these relationships would have a better chance of leading to permanence than moving youth around to new placements which *might* have a potential for long lasting relationships.

The Adoption Promotion Act of 2003 provided enticements for placements that led to the adoption of children nine years of age and over. In 2005, the United States Department of Health and Human Services called for foster children to be placed in the least restrictive environment such as a foster home rather than residential care (Stott & Gustavsson, 2010). While these may be well-intentioned regulations, the stable relationships the young person may

have developed with caregivers and peers in residential settings were not considered in the decision to move children to a foster home (Stott & Gustavsson, 2010). This practice could be considered a violation of the child's rights according to the United Nations resolution, which states:

States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child. (Convention on the Rights of the Child, 1989, article 12, number 1).

There has been much debate over the most appropriate setting for children in foster care. In addition to the potential benefit of stable relationships, it appears that residential care facilities may also already have the resources needed, such as staff trained to work with this population, in order to adequately care for the special needs of these young people. According to Thompson, et al. (1996), the three main factors influencing delinquent behavior in young people are: poor academic work, ineffectual parenting, and congregating with an aberrant peer group. The same study found that residential care facilities have more resources to effectively deal with these issues. Young people in residential care either go out to the community school or receive their education within the residence itself. The stability that residential care provides benefits both academic studies as well as peer relationships. (Allen & Vacca, 2011; Hayden, 2010; Palerti & Berti, 2009). As a number of studies have demonstrated, general criticism of all residential care does not accurately report actual care available (McKenzie, 2003) and this type of care would be more effective if offered as an option to youth rather than left to when all else fails (Clough et al., 2006; Frensch, 2002; Hayden, 2010; Knorth et al., (2008).

Hyde and Kammerer (2009) studied adolescent views about moving from one place to another and living in a congregate care setting. Congregate care refers to care provided in an institution, shelter, residential care facility, or a group home. Participants spoke about moves due to foster parents not knowing what to do and the difficulty of sudden changes. They also complained about staff and the establishment of rules, made without their input, which did not make sense to them. The young people interviewed noted discrepancies between what they were told would happen and what actually took place. This led them to believe that those who are caregivers are not honest with them, and thus cannot be trusted. The youth also made poor choices as adolescents. One of the risks of not listening to young people is that they have an increased likelihood of making poor choices and not caring about the consequences because they perceive that no one cares about them, hence their choices matter very little.

Hyde and Kammerer (2009) also reported that youth who have experienced one or more congregate placements are at a 2.5 times greater risk of developing delinquent behaviors than those who have not spent any time in group care. The authors do not offer any possible reasons for the increased risk. Perhaps it could be due to the lack of attention to the consequences of their choices or the quality of care youth received or the influence of aberrant behavior as suggested by Thompson, et al. (1996).

### **Educational Achievement for Children in Foster Care**

The instability faced by children in foster care has a significant impact on their educational achievement. The number of placements in which a young person has lived is negatively correlated to their achievement in school (Stott & Gustavsson, 2010). Thus, some scholars advocate for stability in the educational process (Hayden, 2010; Mainwaring, 2014).

According to Barth, et al., (2007) children cared for outside of their own home have higher rates of Emotional Behavior Disorders.

It is estimated that each time a child changes schools, which usually accompanies moving from one foster home to another, he or she loses four to six months of progress (Legal Center for Foster Care and Education, 2008). As a consequence, if a child is in foster care for two years and moves three times, he or she has lost approximately 12-18 months of academic progress in that short time period.

More specifically, a study in 1999 found a positive correlation between the number of moves a child had while in foster care and the number of absences from school, the number of discipline referrals, the level of academic performance, and the likelihood of that child being placed in a special education class (Allen & Vacca, 2011). Researchers universally agree that the greater the number of different placements a child has, the more academic, social, and emotional problems he or she is likely to experience (Allen & Vacca, 2011; Stott & Gustavsson, 2010).

The difficulty accompanying the change in schools is compounded by the lack of a permanent or long-term caregiver. According to Allen and Vacca (2011), because many foster care children do not have a stable caregiver, they often do not have anyone who can truly advocate for them in school, anyone who really knows them and their past history. There is no stable adult who has been with them consistently enough to discover their true capabilities. These authors argue that as a result, these children are often placed in classes that are inappropriate for them. It is important for children to find a stable placement. Just one caring adult in a child's life can make an impact. This is especially true if the adult is one who was already involved in the life of the young person (Avery, 2010). There is a better chance of a

stable match with a caregiver when the views of the child are taken into consideration (Barth et al., 2007; Hyde & Kammerer 2007; Ward, A. 2004).

Blome (1997) examined the educational achievement of youth raised in foster care. He matched 167 youths in foster care with youths who were raised by at least one parent. The youths matched with one another had similar race, gender, and standardized test scores. In 1980, initial surveys were sent to the participants. They were all sophomores in high school at the time. Surveys were also administered to the individuals every two years for a total of eight years. While the sample size was small and the study lacked important information about past experiences which may influence the responses, the results of the study are worth examining because of the significant differences found. For instance, while 25% of the general population were retained in at least one grade, 67% of those in foster care were retained in one or more grades. Moreover, 22.1% of the general population went on to college after high school, but only 2.3% of those in foster care enrolled in college classes. Blome's study is especially significant in demonstrating the discrepancy in academic achievement between foster care children and those raised with one or both parents. Indeed other researchers have reported that, over time, foster care can have a detrimental effect on educational achievement for many children (Pecora, et al., 2006; Scherr, 2007).

### **The Impact of Foster Care on Physical and Intellectual Development**

Many foster children experience hardships well before they age out of the system. Children in residential foster care average more than one standard deviation below their peers who are growing up in traditional families in areas such as physical growth, and cognitive, behavioral, and socio-emotional growth (McCall, 2012). It is not uncommon for these children to be more than two standard deviations below average in these areas of physical, cognitive,

behavioral, and socio-emotional growth, with 40% - 50% falling below the tenth percentile when compared to their peers growing up in a traditional family setting (McCall, 2012).

Studies reveal that the average IQ for young children in residential care is about 20 points lower than those in a family setting (Kroupina et al., 2015). This can possibly be attributed to the level of care the children receive, stress, the lack of a stable relationship, and nutrition. Indeed, Kroupina et al. (2015) found a high percentage of children in the institutions in Kazakhstan with low birth weights and anemia. These are both signs of inadequate nourishment.

The lack of proper nutrition has a negative impact on brain development and intelligence, which are important components for academic success. Ivanovic, D., Olivares, Castro, and Ivanovic, R. (2003) conducted research on the relationship of head circumference, IQ, learning, nutrition, and brain development. These researchers found that children who were malnourished at an early age had a lower weight, shorter height and smaller head circumference than their peers who received proper nutrition.

Head circumference is identified as an indicator of brain development (Ivanovic et al., 2003; Kroupina et al., 2015; Van IJzendoorn, 2007). If a malnourished child is placed in an environment where he can receive proper nutrition, he can “catch up” to his peers in height and weight. Since the majority of the brain’s development occurs in the first two years of life, the effects of malnutrition on brain development cannot be as easily remediated as the low weight and height (Ivanovic et al., 2003; Johnson & Gunnar, 2011). This deprivation of adequate nutrition in this early stage of life can cause impaired intellectual ability which is one factor that can account for lower IQ and test scores for children in foster care (Ivanovic et al., 2003).

Kroupina et al. (2015) and Ringle, Ingram, and Thompson (2010) support the notion that the quality of the care that foster children receive is more significant to the educational

achievement of the youth than the setting in which they are cared. Ringle et al. (2010) states, “Indeed, appropriately placing a child in a quality out-of-home setting is the key” (p. 978).

Numerous studies demonstrate the importance of quality of care over the specific type of setting in which a child is being raised as well (Ahmad & Mohamad, 1996; Ahmad & Qahar, 2005; Kroupina et al., 2014; McGoren et al., 2012).

### **Models of Residential Care**

The majority of studies on residential care do not address the academic achievement of the young residents. Residential care studies have focused more on delinquent behavior (Thompson, et al., 1996). However, there are models of residential care that do emphasize academics. Though some of them focus more on economically disadvantaged youth, they can provide models for residential care of foster children. Many of these educational programs, such as the Teacher Family Model and Project Re-education (Project Re-Ed), seemed to result in short term academic improvement. However, regression also occurred so that, over time, there was little difference between the young people involved in these programs and those in a control group (Thompson et al., 1996).

The Project Re-Ed Model attempts to “re-educate” children who have emotional disturbances. Fields et al. (2006) examined the effectiveness of this model and attempted to identify which factors had a significant impact on the program’s effectiveness. Though described as an academic program, Project Re-Ed focused on short term care of youth with mental health problems (Thompson et al., 1996; Fields et al., 2006). Participants in the program were compared to those in non-Re-Ed programs in areas such as wellness, strength and joy, working with the child’s natural setting, building competency in multiple areas, establishing and maintaining relationships, “valuing and empowering direct care providers”, and “maintaining a

questioning culture” (Fields et al., 2006, p. 314). The authors also found that younger children (ages 7-10) were four times more likely to be in the normal range on the Behavior and Emotional Rating Scale (BERS), than older children (ages 11-13). Those who stayed in the Project Re-Ed program for a longer period of time had more positive effects six months after discharge. There was little difference between the scores of the older and younger group immediately after discharge. The study focused on behavioral outcomes and the researchers were unable to determine the generalizability of the results. The authors suggest that this could be attributed to the way in which the program was carried out in this particular setting. Additionally, there was no group with which to compare the sample in order to determine if the results were due to contributing factors of the Project Re-Ed program or if there would be the same gains in a typical residential facility.

Another model for residential care considered to have an academic focus is the Teacher Family Model. This model involves a married couple who undergoes training and lives in a family setting with six to eight young people. The couple takes on the parental role. A well-known residential care facility, Boys Town in Nebraska, is the largest program using the Teacher Family Model (Thompson, et al., 1996).

Thompson et al., (1996) compared a group of youth from the Teacher Family Model with a group possessing similar demographic characteristics. This second group of youth lived in a typical residential group home. According to the authors, the Teacher Family Model resulted in higher grade point averages for the young people served, an increase in the number of years in school, and a higher graduation rate. The advantages lasted for about four years, with a more lasting improvement for those who remained in the program for a longer period of time.

However, according to Thompson et al. (1996) an earlier study on the Teacher Family Model produced contrary findings from the results of their research. The authors point out that the students in their study remained in the Teacher Family program for an average of twenty months whereas the students in a previous study averaged only seven to eight months in the program. The length of time a young person is involved in the program thus seems to have an effect on the results. Those who stayed in the program for a short time had quicker regression than those who stayed longer. The Thompson et al. study was not able to determine which of the aspects of the Teacher Family Model contributed to the differing results. But it should be noted that the Teacher Family Model included a substantial amount of help with homework and high attendance numbers (Thompson et al., 1996).

Thompson's work was supported by a more recent study by Ringle et al. (2010). The purpose of this study was to examine whether a longer stay in the Teacher Family facility influenced students' likelihood of graduating from high school or earning a G.E.D. (General Equivalency Diploma). The study found that the later a young person entered the program and the longer he or she stayed, the more likely he or she was to graduate high school. Mitigating factors which the youth may suffer with, such as prior incidences of aggressive behavior, delinquency, or substance abuse were discussed but not identified as having an effect on the results. Also, the study was limited due to the fact that all participants in the sample were taken from the same residential program, one with a focus on education (Ringle et al., 2010).

There are other education focused residential programs that have experienced high rates of success as measured by educational achievement and whether secondary education leads to continuing education or job training. Not all of these programs were developed specifically for foster children, but they are worth examining because of the similar needs of the children served.

Many of the young people involved in these programs come from families with a low socioeconomic status or young people who suffer with emotional disturbances. The components that are common to these successful models include providing support and offering an environment where young people sense that they belong and are cared for. These are the same needs found among children in the foster care system (Avery, 2010; Rygaard, 2010; Schofield, 2002). Additionally, support is made available during the transition years as the youth set out on their own. For foster children, this is a crucial time as revealed in the study conducted in New York City by Allen and Vacca (2011).

One study of academic achievement conducted by Pecora et al., (2006) focused on youth placed in Casey Foster Care. This research, with youth who were placed in the Casey Foster Care because of maltreatment, set out to answer the questions concerning academic achievement but also attempted to identify those variables which contributed, positively or negatively, to the educational achievement of the foster care youth. The research was conducted with a large sample size and with trained interviewers who were unaware of the purpose of the study in order to eliminate potential bias during the interviews. This study did reveal factors which were related to educational achievement. Specifically, educational achievement was positively affected by the resources available for extra-curricular activities, by marking significant milestones for the young people, and by providing training for foster parents. This last factor was effective because it minimized the number of placement changes the foster children experienced. (Pecora et al., 2006).

The Milton Hershey School, established in 1909, is an example of another academic focused program. A full-year program, it takes in students from kindergarten through 12<sup>th</sup> grade. Most of the students come from families of low socio-economic status. The youth generally

have behavioral difficulties. Ninety percent of the graduates of Milton Hershey School go on to a two or four-year college program or enter into vocational training. Older students are able to take classes for college credit and scholarships are available. Support is provided to students for five years after leaving the school (Allen & Vacca, 2011).

The SEED Foundation also sponsors a successful academic-residential program (Allen & Vacca, 2011). The idea of SEED is to provide a type of “boarding school” for underprivileged children and young people living in poor, urban neighborhoods. A high quality, challenging academic program is offered to the students in a residential setting. This allows students from poor neighborhoods, where they are daily confronted with drugs and violence, to take advantage of teachers available to help after school and in the evenings in a safe environment. An important component of this effort is that students do not have to worry about their physical safety. Ninety-seven percent of SEED graduates are accepted into college and 90% enter college within months of graduation. It should be noted that the Presidential Education program hopes to see the SEED program adapted to fill the need for improving the educational achievement of foster children (Allen & Vacca, 2011).

The Hariharananda Balashram offers a model of education in India in which character education is emphasized as well as an academic training equivalent to that found in elite schools (Bathina, 2013). Its founder, Paramahansa Prajnanananda, established this home and school for the poor and oppressed children in his state of Orissa, India. The need to care for these children grew after a devastating cyclone hit the area in 1999. Like the SEED schools, Balashram appears successful in utilizing education to elevate the situation for many underprivileged children. Similar to the Teacher Family Model settings, Balashram has the resources to care for

not only the academic needs of the children, but for the physical, social, emotional and spiritual needs as well.

Another successful model, Kinderhaus, is a residential, academic environment serving 244 students in Germany. This model primarily serves students attempting to cope with emotional disturbances. Here the importance of long-term relationships is recognized as the staff remains a constant presence over many years (Avery, 2010; Kroupina et al., 2015; Losinsky, Katsiyannis, White & Wiseman, 2015; Stott & Gustavsson, 2010; Strolin-Goltzman et al., 2010). Seventy-five percent of the residents of Kinderhaus leave with the equivalent of a high school diploma and 95% leave after receiving vocational training. This is from a residence where 50% of the youth have severe learning problems (Allen & Vacca, 2011).

The literature addresses different ways to structure a residential care program. An examination of these different models is beneficial to understand the context from which the young people in this study may find themselves. Lindsay and Foley (1999) reported on a study of Aberlour Child Care Trust's Sycamore Project which took place in Fife, Scotland in 1983. This study involved a particular population of severely disturbed young people who lived in houses within typical communities. While the use of such a particular sample population limits the generalizability of the study, the results make it worth considering. There were 16 young people residing in three houses. The unique aspect of this study was the strength of the support offered in the regular school. Often a pattern is followed which involves an initial trauma (i.e., having to leave home or losing one's parents) which leads to behavioral problems. The behavioral problems result in being excluded from school. Staff from the Aberlour residences work closely with those in the primary or secondary school and utilize a humanist approach whereby the value of each as a human being is demonstrated in the staff encounters with the

youth. In more than 15 years, this project has assisted 97 of 107 young people to resume attendance in a mainstream school (Lindsay & Foley, 1999).

Youth in foster care do indeed face a number of challenges. Many professionals in the fields of education, psychology, social work, and pediatrics described these challenges in scholarly journals (Allen & Vacca, 2011; Barth, et. al. 2007; Kroupina, et. al. 2015; McCall, 2012; O’Sullivan & McMahon, 2006). There is a plethora of research about foster care, school achievement and post care outcomes (Knorth, 2008; Kroupina et al., 2015; Lindsay & Foley, 1999; McCall, 2012). However, there is little research on the perspectives of the children themselves in these studies. This is especially true for those brought up in residential settings. Although several studies have revealed the importance of providing young people with a voice in decisions about their future, little has been done to seek, not just the perspective of the youth, but their thoughts about change. (Hayden, 2010; Hyde & Kammerer, 2009; Stott & Gustavsson, 2010; Unrau, 2007).

### **Types of Residential Care**

There are many differing opinions about caring for foster children in a residential setting. One finds studies highlighting the benefits of residential care, such as *Malmö’s Declaration* (1990) which states that residential care is positive and even preferred at times contrasted with *Stockholm’s Declaration on Children and Residential Care* (2003) which declares that residential care was “intrinsically negative” and should only be a “last resort” (Knorth et al., 2008).

Among children and young people living in residential care, there is a high percentage of youth with behavioral issues (Barth et al. 2007). These young people typically have lived through experiences that place them at a high risk for problematic behavior. Residential care is

often used as a “last resort” and the young often do not have a choice in the decision. This lack of control results in many young people entering residential care against their will (Hayden, 2010).

Knorth et al. (2008) argue that in order for young people to have a chance in residential care, it needs to be an “option” rather than a place reserved for the time when all other options have failed. This contention is consistent with findings with studies that reveal the importance of allowing children to have a voice in decisions involving their placement (Hayden, 2010; Hyde & Kammerer, 2009).

Moreover, research seems to reveal a consensus that permanency planning is crucial for children in foster care (Allen & Vacca, 2011; Stott & Gustavsson, 2010). Three types of permanency are generally recognized: 1) relational permanency refers to a long-term relationship that is loving and accepting; 2) physical permanency involves stability in groups to which one belongs (i.e., neighborhoods, school, church); and 3) legal permanency is the legal relationship between the youth and the caregiver (Stott & Gustavsson, 2010). Government welfare workers often put more emphasis on legal permanence, sometimes at the expense of relational and physical permanence. Youth want to be able to have stable, long-term relationships. If youth are left in a stable environment and allowed to establish relationships naturally, they are more likely to gain the relational permanence they so desire. It is in these relationships that orphaned youth have the best chance to find a permanent placement (Stott & Gustavsson, 2010).

Brown, Bullock, Hobson, & Little (1998) also stress the importance of establishing a plan for residential care. A plan is needed not only for the institution, which matches the needs of the residents with the services provided, but for each individual resident. Individual plans would include timeframes for progress and benchmarks toward appropriate goals.

One factor ignored in most of the discussions about residential care is peer support. According to Ward (2004), a variety of problems can arise when young people, especially those with behavior problems, come together and model one another's behavior. Ward also identified as important "Planned Environments," that is group living that has an emphasis on peer support. As young people come together with similar circumstances, they find support in one another, similar to the way siblings can provide support to their brothers and sisters. A number of studies conclude that a residential facility where activities are kept as family-like as possible could be a very beneficial setting in which to serve this population (Ahmed & Mohamed, 1996; Ahmad & Qahar, 2005; McCall, 2012; Ward, 2004). Perhaps such "planned environments" could prevent or minimize the impact of deviant behavior which was listed as one of the three influences affecting delinquent behavior in the Thompson et al. study (1996).

Individual considerations are important when determining the placement of foster children in a residential setting. For young children, the longer they spend in residential care the greater the risk for long-term problems (Kroupina et al., 2015; McCall, 2012). Therefore, experts recommend that young children not be placed in residential care facilities and if they are, that they be removed as quickly as possible (Kroupina et al., 2015; McCall, 2012; McGoron et al., 2011). Conversely, Ringle et al., (2010) report that two significant factors affect the outcomes of those in residential care. Namely, the age when the young person was admitted and the amount of time they spent in residential care are essential elements. According to Cashmore et al. (2010), for each month a young person stays in residential care, the chances of earning a high school diploma increased 6%. For every one-year increase in age, the likelihood of receiving a diploma rose 10% when other factors remain constant. One explanation for these patterns is the level of difficulty and nature of the challenges with which the individual child has

to cope. Generally, when younger children are admitted into residential care, the problems the child has to manage are more severe, thus making it more challenging to earn a high school diploma (Ringle et al., 2010).

Residential care does have its weaknesses. In addition to empirical evidence that children in institutions may score as much as 20 points lower than the general population on IQ tests, Kroupina et al. (2015) and Ivanovic et al. (2003) found that children in residential care have an increased risk of having a deficiency in iron, zinc, vitamin D and other nutrients. They also found that proper healthcare is missing for many of these young people as well as sufficient stimulation and the presence of a consistent long term caregiver. This illustrates the difficulty in isolating variables and determining causality.

However, there are a number of differences between the Kroupina et al. (2015) study and the one on length of time in residential care and educational achievement conducted by Ringle et al. (2010). These differences could explain the conflicting results and thus make it difficult to use them for comparison purposes. The Kroupina et al. study involved very young children, ages twenty-nine months to five years. The infants and toddlers came from six different institutions in Kazakhstan. The purpose of this study was to examine the developmental status of these young children. While the study resulted in a negative association between length of stay in the institution and the level of cognitive development, no potentially influencing (mitigating or aggravating) factors that might have been present before taking residence in the institution were taken into consideration. Also, the quality of the care in the institution was not indicated or considered (Kroupina et al., 2015). If the level of cognitive development before a child entered an institution cannot be identified, it is difficult to determine how much cognitive growth occurred while in the care of the institute. Also, given that multiple studies (Ahmad & Qahar,

2005; McGoran et al., 2012; Kroupina et al., 2015; Ringle et al., 2010) revealed that quality of care was more significant than where the care took place, the lack of consideration of the quality of care underscores an important limitation to this study.

### **Characteristics of Sound Residential Facilities**

According to a report from Sala Roca, Garcia, Biarnés, and Rodriguez (2009), the best residential care is offered at places where the individual children are the focus, rather than a focus centered on the institution itself. A stable staff is also critically important (Allen & Vacca, 2011; Barth et al., 2007; Clough et al., 2006; Stott & Gustavsson, 2010). For those children for whom it is possible, it is essential to maintain links with the biological family in order to help with a successful transition when the time comes for the reunification of child and family (Sala Roca et al., 2009).

Sinclair and Gibbs (1998) studied residential care in Britain from the viewpoint of social workers, parents, and residents. They identified three important characteristics of good homes. These include, “homeliness, security (in a psychological sense),” and “structure (in the sense of having predictable routines),” and “a committed and caring staff” (p. 59). Additionally, residential homes for children are more successful if they were small, if the leader in the home is clear about how the home should be run and if the staff agree with the leader’s philosophy for running a home (Clough et al., 2006).

A project entitled “Designing the Fair Start” intended to create science-based internet programs aimed at improving the care of very young children in public foster care (Rygaard, 2010). After years of extensive experience and scholarship, Rygaard (2010) identified best practices for those providing residential care for foster youth. Some essential components include: having a long-term caregiver, offering the opportunity for a peer group to which the

young person can attach themselves, utilizing furniture that resembles pieces found in a home rather than in an institutional setting, providing opportunities for informal exchanges between the staff and the young people and having staff wear casual attire as opposed to uniforms. All of these seemingly small components assist in creating a more home-like environment. When opportunities for extra-curricular activities and celebrating major events are offered, they also help make life for the residents as “normal” as possible, that is, living conditions similar to those of a typical person their age who is growing up in a traditional family (McGoren et al., 2012). The findings support those of other studies which advocate making residential care more like family living (Ahmad & Mohamad, 1996; Ahmad & Qahar, 2005; Neimetz, 2011; Stott & Gustavsson, 2010; Törrönen, 2006).

### **Experiences and Perspectives of Youth**

Often, decisions concerning youth in residential care are made in view of making things easier for staff and avoiding law-suits, rather than placing the child’s needs first (Milligan & Stevens, 2006). Because the needs of youth are not always the first consideration, providing opportunities for their input into those decisions may increase the chances that their needs and wishes will receive greater consideration. According to Rutter (2000), if the youth have little voice in making decisions about things that pertain directly to them, they have more problems when they leave foster care. These problems are due to the sense of a lack of control over their lives. The input of youth in residential foster care gives the young people some sense of control over their lives. It also allows those who have a unique understanding of the issues affecting them to speak into how to resolve them (Losinsky et al., 2015; Mainwaring, 2004).

Hyde and Kammerer’s work (2009) is one of the few that incorporated the perspective of the youths in residential care. During the interview process, Hyde and Kammerer asked the

youth about their understanding of why they were moved from one place to another while in foster care. Their study, however, lacks input from the youth concerning what they would like to see happen regarding their care and the care of other young people in need because their parents cannot care for them or are not willing to do so.

When taking the perspective of those most affected by the way children are brought up in the foster care system, the children themselves or those who grew up in foster care, the results can sometimes be very different than what is expected (McKenzie, 2003). Furthermore, there is a push to move children to placements that could lead to an eventual adoption as seen in the enactment of the Adoption Promotion Act in 2003. As a result of this federal statute, monetary incentives were offered to states for placing children with special needs into adoptive families. Special needs in this context includes any child in foster care over the age of nine. No consideration was given to a young person who preferred to stay where he or she was because he or she had established relationships with caregivers, peers, classmates or teammates.

An expansive survey of orphanage alumni was conducted by Richard McKenzie (2003), who himself grew up in an orphanage. McKenzie found that three-quarters of former orphanage residents did not want to be adopted at any time during their childhood and adolescent period. One quarter of these former orphans did not want to return home to their biological parents. At the same time, only 8% wanted to return to their home. If given a choice between foster care and the orphanage, 88.1% would choose to remain in the orphanage. The rate was slightly higher for those claiming to know a lot about foster homes compared to those who knew very little. McKenzie compared the results to an earlier study he conducted in 1995. Alumni in the 1995 study demonstrated higher incomes, a higher percentage of respondents indicating a high degree of happiness and they were more likely to reveal positive feelings about their experience in an

orphanage. McKenzie attributes the discrepancy between the two studies to the types of orphanages in each one. Nine orphanages, eight private and one public, were included in the study in 1995 and five orphanages, three private and two public, were involved in the 2003 study. Responses from private orphanage alumni were generally more positive than those who grew up in a public orphanage (McKenzie, 2003). Consequently, the results were more favorable for the orphanages when the higher percentage of those in the study were private orphanages. McKenzie does not attribute the unexpected results to any one factor. However, he does indicate the need for further research. McKenzie states that, “Past criticisms of orphanages have been too sweeping, all-inclusive, or without adequate recognition of the variation in the quality of care provided” (2003, p. 738).

Residential care, which is considered by many to be a poor environment in which to raise children, would have greater success if young people were given the option to choose it, according to Clough et al. (2006). McKenzie’s (2003) study reveals that residential care could be a place young people might choose to live if they were allowed input in the decision making process. As Mainwaring (2014), who used non-verbal measures to examine young children’s perceptions of out of home care, reports:

Initiatives designed for children and young people are more likely to be effective if children and young people are involved in their development and implementation... children and young people are one of the most important players in decision making as they have an acute understanding of the issues that affect them. (p.104)

Ward, Skuse, and Munri (2005) conducted a qualitative study of children’s views of the system of caring for foster youth in England. They identify the major finding by highlighting the importance of listening to young people and to their families in the development of policy. The

importance of listening and allowing youth to have a voice in their care was re-echoed in a study conducted by Strolin-Goltzman et al., (2010). This study involved 25 youth in the welfare system. The research aimed at examining the effect of the high turnover rate of caseworkers. The youth were divided into two groups and a survey distributed to inquire about the number of caseworkers in relation to the number of placements the young person had experienced. One particular aspect of the study involved asking the youth for suggestions for retaining caseworkers. The youth recommended increasing the pay of caseworkers and giving them a lower number of cases. When asked about transitions from one caseworker to another, the youth recommended having a period of time when the new caseworker would follow the one he or she is replacing. The young people also recommended giving the youth time to get used to a new caseworker. Strolin-Goltzman et al. (2010) reported findings supporting those reported by Mainwaring (2014): “Youth in the child welfare system hold unique knowledge about and have unique experiences with the child welfare workforce – resources that have thus far gone untapped” (p. 51).

## **Conclusion**

As the recommendations outlined in this literature review demonstrate, youth can offer insightful suggestions for improving the situations in which they find themselves. From their perspective, it is important that they are able to do things that children their age ordinarily do. They want to have someone to accompany them to the movie, to have the opportunity to share meals together with people who care about them and to know that someone cares (Ward, 2004). While past research confirms change is in order for foster care (Allen & Vacca, 2011; Legal Center for Foster Care and Education, 2008; McCall, 2012), we continue to leave an important resource untapped, the lived experiences of former foster care youth. The need for further

research, especially that which focuses on the perspective of those served by foster care services, is obvious.

## CHAPTER 3

### METHODS

#### **Introduction**

The purpose of this study was to use a phenomenological framework to explore the experiences of three young adults who have spent some of their childhood or adolescent years in residential foster care. I used personal interviews in order to provide the opportunity for the young people to share their thoughts and feelings about the structure, the care, the day-to-day experiences of their time in residential facilities and how they suggest creating a better environment. My objective was to gather data which can be used to improve the care of young people presently living in residential foster care facilities.

#### **Setting**

The young people I interviewed are residents of one of the residential foster care homes operated by Joshua's Home. Joshua's Home officially opened in a major U.S. city many years ago. Focused on serving the immediate and long term needs of homeless youth, it has since grown to many cities in the United States and abroad, caring for more than two million young people who, for a variety of reasons, find themselves living on the streets. The specific residential care home I visited is located in a large urban area and assists more than 100 youth a day. Some need emergency food, clothing and shelter. Others have been living on the streets and go to Joshua's Home for assistance in transitioning to a stable place to live and acquiring education or job training. Medical care is also offered as well as assistance reuniting with families if that is possible. About 30% of the young people served at Joshua's Home were formerly in foster care.

## **Participants, Sampling Strategy, and Research Design**

With the assistance of a helpful staff member, I recruited three young adults between the ages of 18 and 24 who spent time in residential care settings. The age was set within these parameters to ensure access to permission to interview them. Since the proposed participants were no longer minors, they were able to give their own written consent.

Because I was looking for particular characteristics, I used a purposive sampling. With the help of staff at Joshua's Home, I invited participants with the above characteristics to meet with me to share their experiences and their thoughts for improving the care they received. My goal was to reach an understanding of participants' experiences and perspectives that would be unattainable through surveys or other data collection methods. Interviews allowed for the opportunity to ask for clarifications and to gather data by asking questions that a predesigned survey might not anticipate. They also offered the youth an opportunity to speak into the particular factors and share their perspective of what can be done.

The interviews lasted about one hour. Interview questions provided opportunity to gain sufficient background knowledge concerning the lived experience of the young person and included open-ended questions to permit the young people to have the freedom to share whatever experiences were significant for them as well as solicit their suggestions for improvement without any preconceived ideas or leading questions (see Appendix A). All interviews were recorded and then transcribed for the purpose of analysis and coding.

## **Phenomenology**

The explicit purpose of the study was to gain an understanding of the lived experience and perspective of young adults who have spent time in residential foster care. To this end, a phenomenological approach was the appropriate method. "Phenomenology started as a

philosophical movement that focused on the nature of experience from the point of view of the person experiencing the phenomenon (known as *lived experience*)” (Connelly, p. 127, 2010). Edmund Husserl, a German philosopher and mathematician, is considered the father of phenomenology. Husserl believed that researchers should be interested in “subjective information” if they were “seeking to understand human motivation because human actions are influenced by what they perceive to be real” (Flood, 2010, pp.8-9) Heidegger, another phenomenologist and contemporary of Husserl, did not believe it was possible to set these preconceived ideas aside, but with reflection, we can acknowledge them and thus bring clarity and understanding to our collection and interpretation of the data (Byrne, 2001).

As far as lived experience is concerned, how someone perceives a situation is how that situation is real for them. Because my desire was to understand and document the lived experiences and perceptions of young people who have spent time in residential foster care settings, a qualitative study using the phenomenological approach was best suited for this study.

### **Data Collection and Analytical Procedures**

As mentioned earlier, data were collected through personal interviews and field notes. The field notes enabled any significant unspoken data to be collected. The interview transcriptions were coded for themes in light of the research questions, specifically with regard to suggestions for improving care for youth in residential foster care since they were key to the purpose of this study.

I used traditional qualitative data analytical methods for this research. As a general strategy this involved a three step coding process (initial, focused, and thematic) in an effort to identify the most prominent themes embedded in the interviews (Maxwell, 2005). In the initial coding state I identified all the individual experiences and perceptions articulated by the

participants. During the initial coding stage I did not attempt to refine the responses into specific categories. Simply, all responses were identified by means of an in vivo technique where by the participants' own words are used as labels or identifiers (Bloor & Wood, 2006).

During focused coding, I began the systematic identification of the in vivo responses into themes. This stage required collapsing similar responses into smaller categories and giving those categories a specific label. Essentially, focused coding involved the identification of themes that I then further analyzed (Bernard & Ryan, 2010).

Thematic coding is the third stage of analysis. In this stage I looked for any patterns between the themes identified by the focused coding (Bernard & Ryan, 2010). For instance, I might have examined the data to see if males and females identified different suggestions for improvement in residential foster care. Ultimately the goal of the analytical process was to provide a systematic way to answer the research questions posed in this study.

### **Research Ethics**

The welfare of the participants, who have dealt with adversity in their young lives, was extremely important during the course of this study and afterward. There were three issues of particular importance in this process; informed consent, anonymity and confidentiality, and the protection and disposal of collected data.

Through the assistance of staff at Joshua's Home, potential participants, those who have lived in residential care and who are between 18 and 21 years of age, were invited to take part. To these young people I gave a letter explaining the study, its purpose, and requesting their written consent to participate (see Appendix B). I was available to answer any questions the participants might have had. In justice, in exchange for their willingness to give of their time for the interview, each participant received a Visa gift card.

Neither the location nor the name of the institute was named in the report. Pseudonyms were used for each of the participants, either chosen by them or assigned, and no personally identifying information was reported. To ensure that all information gathered is kept confidential it was and will be kept, securely locked, in my possession for three years and then will be personally destroyed by me. This includes recordings, transcripts, notes and letters of consent and other data which puts the participants at risk of being identified.

Finally, approval was sought and obtained by the Internal Review Board of George Fox University. No interviews began before such approval was granted.

### **Potential Contributions of the Research**

This phenomenological study certainly adds to the existing research, particularly that scholarly research which presents the perspective of the youth. In a unique way it offers the perspectives of those who best know what it is like to live in residential foster care how to go about improving it.

As reported earlier, approximately 428,000 youth in the United States are living in a foster care environment (AFCARS, 2016). Of those moved from an environment deemed unsafe to a “better environment” of residential care, 40% end up in jail, in a psychiatric hospital, or are simply unable to be accounted for (Jackson & Marx, 2014). These numbers certainly support the conclusion that the treatment provided for foster children is failing the children placed in its care (Allen & Vacca, 2011, Legal Center for Foster Care and Education, 2008, McCall, 2012). We cannot continue to offer care to these vulnerable children when it has such detrimental results. For the improvement of conditions to be meaningful, I believe it must be seen as an improvement from the perspective of the young people themselves. I believe the greatest contribution this study can have to be on the practical level. If the suggestions of these young

adults who have experienced, firsthand, life in a residential foster care setting, can be considered by those responsible for the care of foster youth, it would make the effort completely worthwhile.

## **CHAPTER 4**

### **FINDINGS**

#### **Introduction**

This chapter reports the findings of the research investigation. I begin by offering a profile of each of the participants. Included in the profiles is a presentation of the answers each participant provided on issues associated with the research questions. Following the profiles and descriptions of the interviews, I address the research questions that framed the study by presenting a systematic breakdown of the data derived from the interviews.

#### **Profile of Participants**

Three individuals granted personal interviews for this research. They are young adults who fit the research criteria of the investigation. Specifically the sample included two women and one man. Their ages ranged from twenty to twenty-three years old. Two were African American and one was white.

#### **Beth**

Beth is an ambitious young woman who views her time in foster care, despite its difficulties, as a blessing, as an integral part of making her into the person she is today. I met with her the day after she celebrated her twentieth birthday. We visited in the chapel at Joshua's Home, a simple room with two rows of chairs along the back and down one side. A tapestry of the Good Shepherd took up most of the front wall and two tables, a couple of chairs, and a piano were pushed up against the wall in the front of the room. It was a quiet oasis in the midst of a busy setting with the sounds of people moving and talking outside and the periodic sirens of emergency vehicles travelling past on the street out front. A storage closet is located in the back

of the chapel so that during the course of the interviews we were interrupted twice by a gentleman entering to get clothing for some youths who were with him.

Beth showed signs of a cold and admitted to being exhausted, yawning several times throughout the interview. She was pleased to have the opportunity to get some extra rest over the next two days. She sat down quickly to begin the interview, wearing shorts, a T-shirt, and a baseball style cap and carrying an unopened cold soda with her. It was 10:30 a.m. We met for about an hour.

In order for me to understand Beth's circumstances, she thought it important to begin by telling me about her experiences beginning with the previous marriage of her mother which lasted until her step-brother was five years old. At that time her mother and father met and her mother left her husband and young son. Beth described her father as a "crackhead" who in a short time got her mother "hooked on drugs." She described the first six years of her life: "...as I was growing up my dad was physically, emotionally, verbally, and sexually abusive of my mom and (me)...we left him when I was six years old and went to five battered women's shelters...but my dad was still on the lookout for us..."

Her mother was still struggling with drug addiction when a relative invited them to join her in a move across the country. By this time, Beth was thirteen years of age. Once moved, she entered the first of three high schools she would attend before graduating. After the relative's failed business venture and some criminal activity, they moved again. Beth's mother, who had been drug-free for four years, started up with crack again. Beth called the police and was placed in the care of the same relative with whom they moved across the country. However, the previous criminal activity caught up with the relative and Beth entered the foster care system.

In Beth's first placement she met Greg and Cici Peterson (pseudonyms for the foster parents) whom Beth describes as "...the best I ever had." It is primarily this experience that led Beth to refer to her time in foster care as "blessed." She explains,

I was blessed. God blessed me because of the fact that I hear so many stories from people in foster care today, how their foster parents just used them to get money and they don't listen to their needs, and they're abused by their foster parents or they'll be the ones who clean the entire house and they work them like slaves or they'll be grounded for no reason and can't have friends over, can't do nothing and my foster parents treated me as their own...they helped me get my first vehicle; they said, "whatever you save up we will match"...they took me on outings; they even took me to the beach for the first time. They did a lot of good things for me physically, in materialistic ways, and in spiritual ways.

Beth was "torn apart" when she had to leave the Peterson's. After she had lived with them for about ten months, she became involved with a boy. Her foster parents did not approve. The boyfriend was involved with marijuana and some other drugs, the names of which Beth could not remember. Beth started smoking marijuana. This resulted in the termination of her stay with the Petersons and her placement in another foster home.

In the second home, Beth's foster mother had a biological daughter close to Beth's age. At a time when Beth admits to being stressed because of work, school and family issues and the approaching anniversary of her separation from her mother, Beth was involved in a fight with her foster sister. The fight quickly moved to shoving each other and ended with Beth not remembering what happened and her foster sister suffering a concussion. As a result, Beth was transferred to a group home.

Beth describes her experience in the group home as “weird.” The group home took in adolescent girls from twelve to eighteen years of age who suffered from neglect or had behavioral issues. Eighteen to twenty adolescent girls stayed there at a time. Because she was just four months shy of her eighteenth birthday, Beth stayed in the group home for about four months before aging out.

It was a weird experience...In the group home I got into three other fights, because, I mean there is no excuse for it, but I know why I had so much anger...I was there for four months, I never left once...you have to ask to get up to go to your cubby or to get up from your seat to go get food, to go in the kitchen and you had designated spots, literally designated spots on the sofa in the living room and you had to ask to go on the floor and you have to ask to do everything so my first day out of...I felt brainwashed because I did not know how to act in society...

The state in which Beth was living offered an extension of the foster care program. This program enabled Beth to go to college. She was unable to finish due to health reasons and regrets not having taken a medical leave. Because she did not finish, she must pay the state back for the education she received. Beth desires to become a veterinarian and at the time of the interview, she was working to pay off her debts so that she can continue her education. She is eligible for state help from the foster care extension program if she enrolls before her twenty-third birthday.

When asked for further description of her experience in the group home, Beth spoke of both positive and negative aspects of her time there.

We had to ask to go outside and the staff had to bring us outside; that didn't happen. No one wanted to bring us outside so even on a nice, hot, sunny day, we didn't get to go

outside. We'd have to see it through the windows because no one wanted to bring us outside. The food was good, but it was fast food. They had a big pantry. We were never underfed. There was never a lack of food but the quality of the food, it was not good, it was very processed and fattening and that is all we had...they'd like to say how we are gaining weight, but no one would take us outside to exercise.

Cleanliness was pretty good. It was based upon us to clean it but the girls seemed to get into arguments a lot depending on different groups...I was the oldest there for four months and I butted heads with a lot of younger kids...we had a house cat...she was beautiful and I loved animals so that was awesome. Now if the cat wasn't there, I probably would have gone crazy...

It (the experience) opened my eyes to after foster care...it opened my eyes to some of the things I want in my life and my goals that I need to set for myself and some of them I am still working on today.

Beth retained some of the lessons she learned from her first foster parents. She spoke about her struggle to forgive and the importance of setting goals.

It's hard, being that some, and I am not just speaking for myself, but for some of us who came from the background that I just described, it's hard to forgive people. Some of us forgive easier than others but I don't know how to forgive and that is one of my goals is to forgive my mom and my dad for what I went through and I need to learn to grieve for not having a childhood. I had to raise my mom at the age of six, paying bills, paying the car note, fill it up with gas. Now that I'm at the stage where I have to be an adult, I am getting a taste of what it is to be a child, not a child but a young adult and what it means to have fun and I get my priorities mixed up sometimes...my foster parents told me that

no one is going to take care of you better than you; no matter what you go through, there is always a light at the end of the tunnel; no matter what you face, there is always a sunnier tomorrow... They also taught me to set up this goal, like set up six things you want to achieve, these will be your goals. I kid you not, I achieved every single goal within my timeframe if not before... they taught me that no matter what, God loves me. There (are) a lot of things that foster care has taught me that are good, but the foster care system... I don't like it.

The group home in which Beth lived cared for teenage girls with behavioral issues. As such, the home had established a behavior modification practice and well as precautionary routines. Beth described her experience as feeling like she was in jail.

...they also would house girls in a spare bedroom, when they first came in so they would observe them and see how they act and all that. We had early bedtime... they had this thing where you could earn points and go to the store and use your points to get things that you need in the store, things you want. They have shampoo, conditioner, lotion, shirts; they'd have clothes, shoes, sunglasses, deodorant, things like that... if no points you can't go shopping. You have things provided but they had nicer brands in the store. You couldn't wear shoes in the foster home either. When we'd come in from school they'd make us take our shoes off. They'd search us whenever we got back from school, make sure we don't have any sharp objects or weapons, or any drugs; they'd have us strip searched, and we'd go to the living room after school and sit down and talk about our day, go for snack, and then we'd come back and have free time, so it was kind of like jail, mini jail cell. It made me feel a bit like in prison... it makes me not want to go to prison.

Beth shared that she was told that if she kept getting into fights, she would have to be placed in a juvenile detention center. When asked about the influence of peers in group homes, Beth spoke of the need for adjustment. Although she has had difficulties with peers, she does find them to be more of a support.

Each time in the group home that I've had an issue with a girl we got to be good friends. It started off bad because we didn't know one another and we're so much alike and we go through the same stuff and then collide. We actually get to know one another from falling back and observing from the background and we get to be good friends. So my take on it is more peer support...I don't think we're a bad influence on others just because we go through something others don't know the meaning of...

Beth has a desire to be a veterinarian but also to try to change the lives of those in foster care, particularly those who are suffering from drug abuse, physical abuse or sexual abuse. While Beth indicated that initially all the girls had visitors on Sundays except for her, eventually her first foster parents were contacted and they came for visits. It was helpful to have them back in her life, mentoring her as they did when she lived with them. This has been a stable contact for Beth up to the present time.

When asked about change, the strongest desire for change Beth mentioned concerned communication. She shared her frustrations about the lack of punctuality of her caseworker and the inability to contact her, even after contacting the caseworker's supervisor. Beth also recommended a "more kid-oriented" approach. It seemed to her that some caseworkers did not really care about their kids and suggested some "just pretended" to care. When Beth aged out of foster care, she went to an extension place where she received help applying for college and finding housing. She particularly enjoyed the process employed to match each young person

with a caseworker rather than the randomness she felt happened in the foster care system. She recommends a test to match children with the “perfect caseworker.”

Beth never felt she had control over her situation and while she wishes that she never had to enter the foster care system, she credits it for the “mind frame” she has and where she is today. “...to be honest, to be one hundred percent honest, I don’t wish anything else would have happened differently because of the fact that if I were to change things about what happened in foster care, I wouldn’t be the ten times better Beth that I am today.” Better communication and a greater effort to match caseworkers with their clients were her only desires for change.

Beth indicated that a stable, family-like residential care setting would be attractive to her, even “awesome.” She even offered her services.

If something like that were to pop up, I’d be the first one to volunteer there because the foster system, I said already, the foster system is not fun. Some of the kids in foster care currently, and some of them here, they just feel hopeless...I always seem to be able to pick myself up out of it (depression)...I’ve learned coping skills like no other. Moving from place to place I just put it in the back of my head and I just pretend it is a dream and I just go about my day...as foster kids we learn to put things in the back of our heads because we have been through so much. I think that that facility would bring out the emotions and the anger and the hurt and the hatred and that would make us more mentally healthy and not have us coming out so angry and hostile in today’s society and it will help us with our responsibilities... I recommend a big foster home with sections, with different families, say about four kids to a family, limit...at the end of the day the foster kids could get together and share their day and the foster parents could share their day and learn how they can get better...and the kids would do the same thing, come

together and talk about their day and talk about their struggles, with a therapist in the room, someone that they choose or maybe an adult that they trust that they choose to come together and talk about their problems and their fears every day and work on it and have at least a dog for like a house pet, that would help, or a cat, and definitely some kind of yard for physical activities outside and a basketball court or a basketball goal at least. I think something simple like that. It doesn't even have to be a big house. It could be an open level house with multiple families.

### **Seven**

Seven is a twenty-three year old African American woman. Although she described herself as “socially awkward,” laughing periodically during the interview, it was quite pleasant to visit with her. One of nine children, she entered the foster care system at the age of fourteen after she ran-away from home. She did not know where she was going when she ran away, but she says she wasn't scared because she was so young and did not care as much as she does now that she is older. After living for six months as a run-away, Seven turned herself in to the police because “I felt like I wasn't doing anything for myself except cleaning the house. I was too young to work and couldn't go to school because the police would find me there so I just gave that up and said, ‘I'm sick of this.’” Seven stated that she is uncertain why she was not returned to her parents, but rather to another relative. She did not want to stay with this relative so she was handed over to the state. It was then that she entered her first foster home.

Seven liked it at her first foster home until she met a boy whom her foster mother “didn't think was good enough for me; she thought I could do better.” Seven describes her relationship with her foster mother as becoming a “little distant.” One day she “got into it” with her boyfriend and went home angry. Her foster mother, whom Seven describes as “knowing

everything” said something to her when she got home reminding her that she told her not to talk with him. Seven admits,

I guess I was so angry I said some mean stuff. She said some stuff but mine was like you can't take back some stuff so I regret it...I had it in my head I didn't want to stay there anymore and I was ready to run so I called my social worker and told her I was unhappy, I didn't want to be there...But the next day I changed my mind. I slept on it and told her but she said it has already been put into motion...I think it was the horrible things that I said...I wasn't going with my boyfriend and I felt like the whole world, the whole thing was just falling apart.

Seven resigned herself to the change, thinking she would meet another lady and a few other girls and stay with them. She and her social worker did not speak in the car the next day but Seven noticed they drove past everything that was familiar to her, “We drove past everything I knew and there was nothing but trees, but she kept driving.” Seven was stunned when she came to the entrance of a hospital and the car turned in. She said, “She dropped me off at the hospital and I never saw her again.”

Seven began working with a new social worker who came to visit her often. According to Seven, the new social worker and staff did not believe that she needed to be in the hospital placement. While there, she attended a public school during the day with a few other patients. Most of the patients, she admits, did not go out to school because they were at risk of running away. Seven explains,

It was still crazy for me because how the hospital was set up, the school was set up, the neighborhood itself was like far away from everything. It was nothing but trees so it was a waste of time trying to run; run to who? We didn't have neighbors; we were far away

from the main road. I guess some people just woke up and said they wanted to give the staff a run for their money. If you can't go anywhere, what do you want, to not eat or get eaten. It's bad; it was really the country out there.

Seven had abundant suggestions for a residential care setting, coming from both her hospital experience and her first foster home where her foster mom cared for Seven and three other girls. Her first piece of advice was to not show favorites. According to Seven, this causes an uncomfortable situation for everyone, the one being favored as well as the others. In her first foster home, Seven felt like the favorite. When a new person came, Seven had a difficult time with what she referred to as "pettiness." She noticed a change in her relationship with her foster mother. Seven referred to the difficulty caused by her boyfriend as "the icing on the cake" and it was this that prompted her to ask to be removed from the home.

Despite these difficulties, Seven nevertheless recommended having a group of foster kids together. She added,

I am thinking if you put a group of foster kids together in a room, or a group of regular kids, if they have anything negative going on, of course it is going to rub off on others. I think it could anyway; I think good and bad rubs off on people; people rub off on people, so you just have to pick and choose who you surround yourself with, what energy you surround yourself with...

When asked whether she felt in control of her circumstances, Seven gave a mixed answer. Yes, she felt control but then she "didn't necessarily feel (it)..." She seemed very proactive and mature in her response, "...the only thing I have control of is me and how I respond, how I react...decision to shower at a certain time...it kind of pushed me and motivated me to hurry up and do what I have to do to get on my own..."

Seven described herself as a “runner.” When she hasn’t liked a situation in her life, she ran away from it. She realizes now that there are other ways of handling such circumstances and experienced one recently. She was tempted to run away from her work and actually did not show up for work for two days. An attentive staff member at Joshua’s Home sent her an email asking to see her. Although her first inclination was not to go, she met with the staff member. She was given support to discuss the problem at work with the management, an issue that had to do with racism. With a little bit of pride, Seven shared that the person who caused her difficulty was let go and Seven resumed work. This experience built up her confidence in addressing concerns rather than running away from them.

When asked what would be important to keep in mind when planning a residential care facility, Seven mentioned the need for privacy. It does not have to be one’s own room, but someplace where a young person can go to be alone. At the same time, she believes it is important to do things together, to make sure that young people are not spending too much time alone. She suggested having a “mandatory family night” where the youth can play games and engage in other activities together. Instruction in areas such as personal hygiene and money management were also important to include. Counseling was needed, especially anger management, but Seven recommended not calling it counseling or therapy or other similar terms that might turn youth away. She also advised not asking too many questions as that will cause foster children to shut down. Having a choice in what one does for fun was important to Seven.

Seven’s short term plans involve getting her driver’s license. She wants to then work for her Commercial Driver’s License and drive a truck. Travelling all over the place, with a dog for protection, was very appealing to Seven. Her long range plans include becoming a foster mom. She does not mind spending her life going to football games and cheerleading practice. She sees

it as a way to get to experience childhood, something she feels she missed growing up. Seven also believes that she can be a good foster mother because she knows what it is like to be a young person in foster care.

### **Jody**

Jody is a twenty-three year old African American young man. He likes to cook and works as a chef at a local hotel. He doesn't like to go out much and prefers staying home and watching movies. He described himself as liking to relax and not do too much.

Jody entered the foster care system when he was thirteen. He ran away from home because of abuse he received at the hands of his father and which was not reported before he ran away. Child Protective Services was called because his father did not report his son missing after the three days had passed. After a caseworker interviewed Jody, it was determined he would go to a residential care facility close by. Thus began a series of moves for Jody. He moved to another city and then to a third place. Although he liked his second placement, he was moved to the third in an attempt to give him a more stable place to live. His stay in the third residential care facility lasted two years. He went to a fourth home for nine months and then into his first foster home setting. He explained, "it wasn't really a family, it was a man and he had another foster child that he had allowed to stay with him...I ended up going there, not too long, maybe three or four months. I didn't really like it there. I didn't like his practices." Jody notified his caseworker of his desire to leave and was placed with another foster parent of whom he said, "Her, I definitely didn't like; I didn't like the way she treated us so I notified my worker that I didn't like it there..." At that time he was moved back to another residential care facility.

When Jody aged out of the foster care system he was given a voucher, financial help with the transition to independent living. When the funding for this program ran out, he tried to go

live with his mom and his brother. It worked out for a brief period. His mother had experienced the loss of Jody's brother and aunt, a sister to whom she was very close. She started to take drugs. When Jody and his brother noticed what was happening, they were both "kicked out" of the house. It was at that time that Jody found Joshua's Home which, like the other two young people I interviewed, he found it very helpful to him as far as offering a place to stay, someone to talk with and the ability to get a job.

Jody admits that he does not have much family, but it was important to him to live in a residential care facility that was in close proximity to the family he did possess. The judge who handled his periodic reviews was a significant person for Jody. She provided motivation for him to do well because he did not want to get in trouble with her. He seemed to have a great deal of respect for her and sensed that she had respect for him. He said,

...she didn't like the fact that the places I was going to, you had to be there so long before you could see your family and you had to earn it like it was a privilege...she didn't like that so she enabled it so that I could see my family. It was available like through scheduled times and we did not have any transportation. Someone could come get me; I could see them but we just didn't have any transportation so she arranged it to where a driver would pick me up and bring me to my family whenever we scheduled it and like I would get to spend the weekend with them...

When asked to talk about his experiences in the residential care facility in which he spent two years, Jody quickly admitted that his behavior was "very impulsive and bad." He explains, I had to get used to it, I had to just basically be at peace with myself and accept it, like this is where I am, do what you have to do in order to move forward so maybe halfway

toward the end, that is when my behavior improved and that is when they recommended that I should move closer to my family, so I would like that...

It was a home school setting...It was in like a classroom setting; it was still home school and they tried to make it feel like we were switching...classes...one class would go into this classroom while the other class went next door and we'd stay there like four hours and then we would swap and then we'd stay there for another four hours after lunchtime...taught us our basic subjects, Math, English, Science, Social Studies, whatever the curriculum was at the time. But it was okay. I learned not to pay attention to it too much. I only realized it was home school when I walked out of the classroom. The number (of residents) could range from twelve or less but generally about twelve. It is almost like a dormitory setting. You could have a roommate or you could be put in a room by yourself, you don't determine it...we really did not have much control over our circumstances, basically I just had to behave and do whatever to follow the program...either you're following the rules or you're not following the rules and you just prolong your stay there...we also had a therapist...I generally think that talking to the therapist helped me...

One of the challenges Jody found in residential care was the amount of time he was there. He did not expect to be there for two years. He found it challenging that he had to earn privileges, which he said was not easy to do.

...it was like a level system where you level up and as you level up your privileges become greater...you get to do better things but it is not easy to just do that; it takes time, so that's where the time came in because at first I wasn't with the program. I wasn't...following it. I started like halfway in between to finally start getting serious, but

I was like something's got to change. I couldn't just keep doing the same thing; I wasn't liking the results I was getting.

While the level system was challenging for Jody, it was one of the things he liked when he was able to earn privileges.

...when you were good, if you could be good all week, on Friday nights you would get like a whole pizza to yourself; that was good. And also if you were good for like a week or just good period, just stayed good we would go on these outing events like car shows, Frisbee, golfing, laser tag, skating, fishing, lots of stuff, but you had to earn that. I got tired of seeing people going and I wasn't going.

Jody stayed in this residential care setting for fourteen months. He liked it better than his previous placements because it was closer to his family and his brother could come to visit him, there were more opportunities to do things and it was less strict. It was also more like a home setting and less like a prison. Jody describes it,

...it was like a big house and it had wings. The other side of the wing belonged to the family caretaker. He used to stay on campus and live with us so he had the whole entire wing to himself and we had the other wing, ten or however many were there. It was like a home type of place. It was not in the country; it had stuff around it; it felt like a good place. There is already the fact that you're going someplace, but when there is nothing around it, it feels like you are being taken to a secluded prison; you feel like you are being sent somewhere because there is nowhere else to go. In the end there is no place like home.

When asked what made the latter place feel like a home, Jody elaborated,

We had meals together at a table. We would say a prayer before we all ate, the whole table before we ate...it would be more like a family style meal, stuff in baskets that we passed around. The other place was like a cafeteria type. You stand in line and get a plate. They fix food and give it to you. That's what made it better...I enjoyed going to the public school. It gave me the opportunity to interact with other people besides the ones at the place I was at. ...they knew who I was at the place but when I stepped outside, no one else knew me.

Although Jody readily admits that he did not like therapy at first, it was the first thing he mentioned when asked about aspects of his experience that was helpful. The counseling that was offered "gave me help to cope and manage." Some of the more challenging parts of his experience were being far away from home during his two year stay in a residential care facility. Finding out he was going on very short notice was also difficult. He was informed of the change the night before he moved. Jody felt like he had no choice in the matter. He never felt like he had a choice in anything that mattered, only in small things. He relates, in "small things, not that I could really make a difference and if it was, it was me protesting and if I was protesting that was me not following the rules and if I'm not following the rules it was me getting in trouble."

When asked for his suggestions for planning a residential care facility, Jody offered, "Try to make it as homey as possible...meals together at one table, layout like the room setting, what type of bed you have, my room felt like a room I would have had in my home, it was basically just the set up; it was built like a house...if they want a good group home, can't really elaborate more on it but that is a good start."

Jody's preference would be to stay with a family. He did not see himself ever in a group home. The size and number of people in a given place made a substantial difference for Jody.

He responded,

I just want it to feel as close to home as possible. So when you see a place like everybody's been here, it just...you don't want to feel like the whole world has been in this, the rotation of the place, you just feel disgusted, and not clean, unsanitary, you don't want to feel like that so when you have a small setting, when not too many people, not too many kids at a time, you feel like there is not that much going on, there is less drama or the environment is easier to contain if it becomes unfavorable due to one of the kids...when you walk into a situation you don't want to be thrown into a big group of people.

### **Research Questions**

When reflecting upon the responses of the three former residents of residential foster care, some similarities can be seen as well as insightful suggestions. In an attempt to address the research questions that framed the study, I created a systematic breakdown of the data derived from the interviews. Moreover, I created a visual representation of the responses provided by the participants according to the issues embedded in the original research questions. The responses are presented in Table 1. This table provides a way to compare the responses for similarities as well as to review the suggestions for improving foster care from the perspective of the participants.

*Table 1. Participants' perceptions on their foster care experiences and suggestions for improvement*

	Beth	Seven	Jody
Circumstances	<ul style="list-style-type: none"> <li>• abuse</li> <li>• drugs</li> <li>• jail</li> </ul>	<ul style="list-style-type: none"> <li>• runaway</li> </ul>	<ul style="list-style-type: none"> <li>• abuse</li> <li>• runaway</li> <li>• drugs</li> </ul>
Residential Care Benefits	<ul style="list-style-type: none"> <li>• opened eyes to set goals</li> <li>• taught me structure</li> <li>• peer support</li> <li>• helped make me the person I am today</li> </ul>		<ul style="list-style-type: none"> <li>• therapist</li> </ul>
Residential Care Difficulties	<ul style="list-style-type: none"> <li>• prison feel (i.e. permissions, searches, restrictions)</li> <li>• lack of communication</li> <li>• food quality (processed)</li> <li>• no stability</li> <li>• no control</li> </ul>	<ul style="list-style-type: none"> <li>• far away from everything</li> </ul>	<ul style="list-style-type: none"> <li>• prison feel</li> <li>• no stability</li> <li>• being far away from family and everything else</li> <li>• no choice in things that mattered</li> </ul>
Suggestions	<ul style="list-style-type: none"> <li>• better communication</li> <li>• more “kid-oriented”</li> <li>• campus like with different sections &amp; different foster families</li> <li>• parents come together and youth come together for support (therapist present)</li> <li>• freedom to move about</li> <li>• pet</li> <li>• outside physical activities</li> </ul>	<ul style="list-style-type: none"> <li>• privacy</li> <li>• courses in personal hygiene, money management, anger management</li> <li>• do things together, i.e. mandatory family night</li> <li>• don't show favorites</li> <li>• outdoor activities important</li> </ul>	<ul style="list-style-type: none"> <li>• family setting (i.e. meals together at a table served family style)</li> <li>• school outside (provide opportunity to make friends outside of home)</li> <li>• certification</li> <li>• good staff, experienced</li> <li>• layout like home, i.e. bedrooms</li> <li>• limited number of kids</li> </ul>

**Table 1**

While Beth, Seven, and Jody have unique circumstances, there are some commonalities. Some information is incomplete for Seven. She shared that she ran away and was returned to a relative but did not elaborate on the circumstances that led her to run away. She did not seem desirous of sharing the details, other than she couldn't live at home. Her three biological sisters also stayed with the first foster parent, though at different times.

Abuse was the cause of both Beth and Jody leaving their original family setting. Drugs resulted in Beth leaving the care of her mother and caused Jody to have to leave home after returning when he aged out of foster care. Seven and Jody made a decision to run away because of conditions at home. They also made decisions during their time in foster care to change their placements when they were unhappy or in an angry moment.

The benefits of residential care mentioned largely apply to foster care in general. While all three spent time living with foster parents and in one or more residential facilities, except for Jody, the majority of their time was spent in a family setting. Communication was important to all of the young people, whether it was communication in general or difficulties caused by distance away from relatives and people and places known to them. Each of the young people experienced a prison-like quality during their time in residential care. It seemed important to Seven and Jody to have friends outside of the foster care system as they related their experience of going to school outside the residential facility. All three young people spoke of the lack of stability and the little control they had, especially over things that were important.

Having someone to talk to was important to Beth, Seven, and Jody. For Beth, it was her first foster parents. Seven and Jody benefitted from speaking with a counselor or therapist, though Seven prefers not to refer to the sessions as counseling or therapy. When foster parents were significant figures for the young people, they were able to maintain contact them. Even

though the legal arrangement had ended, the relationship continued. This was relayed during the interview with Seven and especially in the interview with Beth.

Family seems to be the most common thread in the suggestions for change, whether it be Jody stating this explicitly, Seven recommending a “Family Night,” or Beth desiring a place where families with foster children could live together and offer support to one another. Doing things together was an important factor for the young people as well as limiting the number of children cared for in a single place. According to Jody, this should be limited not just in number of youth living together at any given time but how many youth stay in one place over the course of time, reducing the “revolving door” effect.

## **CHAPTER 5**

### **DISCUSSION**

#### **Introduction**

This research set out to answer the particular question of what youth wish could be different in the manner of foster care they received in a residential setting as well as to explore their suggestions for change. Its purpose was to gather data leading to insights that might be used to improve the care of young people presently living in residential facilities. The literature review and interviews provided a substantial amount to consider. Many of the challenges or suggestions mentioned by the young people I interviewed resonated with the existing research. They also offered insights that came from a lived experience of residential foster care. While I originally intended to interview young people presently living in residential foster care, I believe the retrospective testimony of the young adults was an advantage as they could see that some things they did not particularly enjoy in the moment were indeed helpful to them in the long run.

#### **Interpretation of the Data**

When asked about what they would change if they could, I was surprised to hear both Beth and Seven express that they would not change anything. They attribute all of their experiences, positive and negative, to making them into the people they are today. While they admitted that they wish the foster care experience had never happened at all, their responses revealed a certain contentment with who they are now.

It is worthy of taking note that the suggestions Beth, Seven, and Jody had for improving the residential care experience were generally simple recommendations. They enjoyed outings and wanted to engage in activities together as a traditional family would. They preferred meals

at a table where food is passed around and the furniture in the bedroom to be as it would in a bedroom in a traditional family home. Their desires support the research of McGoren et al., (2012), Rygaard (2010), and Ward (2004) who concluded that residential care facilities should try to create an environment as “normal” or a family-like as possible. Rygaard (2010) and Ward (2004) also wrote of the importance of peer support, something the young adults I interviewed perceived as a helpful part of growing up in foster care.

Avery (2010), Neimitz (2011), and Scholfield (2002) wrote of the importance of attachments and the significance of having at least one caring person consistently present in the life of a young person. Beth provided evidence of the beneficial impact this can offer. Though she was in her adolescent years when they met, her relationship with her first foster parents, the Petersons, was a powerful influence in her life. Even when she left their home and found herself in a group home, visits from the Petersons helped her through a difficult time. She was able to check back with them during a stressful time, a factor Schofield (2002) found helpful in his research. Beth felt she was treated as if she were their own daughter when she lived with them and they continued to care for and advise her up through the time of the interview. While Seven did not have as a strong an attachment with her first foster mother, the woman who also served as a foster mom to her three other sisters continued to be a presence in her life. In fact, her youngest sister who lived with her after Seven departed, maintains a close connection with her foster mother to this day.

Relational permanence is referred to as “having a relationship or connection with a caring adult” (Child Welfare Information Gateway, 2013). According to Stott & Gustavsson, (2010), this is the type of relationship young people desire. Beth found this in her first foster parents. Jody fought to maintain it with his own family, having difficulty when visits with his family

were viewed as a privilege rather than a basic right. He received support in his efforts from the judge who reviewed his case. Jody's case also provides support for the findings of Sala Roca et al. (2009) of the importance of youth in foster care to maintain links to the biological family.

The frequent moves and school changes referred to in the research (Allen & Vacca, 2011) was clearly demonstrated in the lives of the young people I interviewed, attending three to five different junior high and high schools. Even the suddenness of change referenced in Hyde and Kammerer's (2009) work is consistent with Jody's description of his move to a residential facility far away from where his family was and learning of his move the night before it happened. Perhaps ironically, he liked where he was but was moved to a new facility where he could stay for a longer time period to provide a little stability for him. He had already lived in two different places in his first five months in foster care.

Existing research is clear and rather strong in its findings about the value of allowing young people to have a voice in decisions concerning them (Rutter, 2000; Hayden, 2010; Hyde and Kammerer, 2009). Neither Jody nor Beth felt he or she had any control over decisions that mattered to them and the only thing that Seven felt she had control of was her response to what happened in her regard. This loss of control seems to be the main loss experienced by the young people I interviewed. The loss of connection with family members was a second area of loss. For Jody, this connection was important to maintain and it took effort, both on his part and on the part of the judge who arranged for transportation to take him to his family on given weekends and to pick him up after the visit since his family did not have transportation of their own. Seven seemed to prefer the separation from family, which speaks to the conditions in her family that led her to run away in the first place. Both Seven and Beth referred to their lost childhood and their desire to get it back. Seven even spoke of "grieving" for her lost childhood and Beth wished for

it. This was important to both young women but was not referenced very much in the existing research. Beth admitted expressing this desire in some of the choices she made, claiming that she sometimes gets her “priorities mixed up” now that she is an adult without as many responsibilities as she felt she had as a child. Seven desired to make up for her childhood by spending time at football games and cheerleading practice with foster children of her own.

### **Conclusions Drawn from the Data**

The responses of the young people I interviewed underscored the importance of particular research findings. Sinclair and Gibbs (1998) wrote of the three characteristics of good residential care homes. They are set up like a family home, structured, and have a committed and caring staff. These three characteristics were highlighted during the interviews with Beth, Seven, and Jody. I am confident they would agree with this viewpoint. In their recommendations for setting up a residential care facility, all three young adults said it should be family like, both in the physical setting of the place (i.e., rooms that look like they would in a family home) and in the activities that take place, such as having a “family night.” Beth spoke of the value of structure she learned from her experience in foster care, both with her foster parents and in the group home. Structure generally helps individuals to feel safe and to know what to expect. Jody made special mention of a good staff. It was important to him that they care and have experience working with youth who might find themselves in a foster care setting. It was interesting that some of the recommendations brought up, resembled some conditions in the Teacher-Family Model (Thompson et al., 1996), conditions such as “families” living together and having as a source of strength, meetings together where they can share what is happening, what is going well, and have an opportunity to gather thoughts for those areas where caregivers or young people need assistance. This setting also offers the opportunity for peer support.

## **Implications and Recommendations for Practice**

I set out at the beginning of this project to investigate what a Home of Mercy should look like for children in need of foster care. From the research gathered, it would clearly have to be offered as a choice for the young person and in the home young people need to have the ability, as much as they are able, to make choices for themselves. I believe if this is encouraged in a setting where caring adults are present for support, it is a valuable opportunity to help young people learn to make decisions about those things that concern them. The second important characteristic of the home is that it be structured as family like as possible. It would be offered as a long-term place to stay and it would be important that the caregivers remain constant. The opportunity to go to a school with children not in the home would be offered and activities and outings would be scheduled on a regular basis (i.e., recreational activities, vacations, educational outings, visits with various people and places). Support would be provided as the young people transition into young adulthood, to college or settle into their vocation, and a place to stay would be theirs until they were ready to move out on their own, similar to the transition to young adulthood for those who grow up in a traditional family.

Family meals would be an essential part of the day with an opportunity to talk about their day and to listen to others, offering assistance and encouragement when appropriate. Special days would be celebrated for each individual and participation in sports and outside activities would be encouraged. While I do not know the perfect number, the number of youth in each home would be limited so that it can be more like a family than an institution serving a large number of youth. Time would be set aside for homework assistance and youth will be held accountable for their schoolwork. Regular check-ins would be scheduled to ensure adequate communication between the school and the home.

One aspect of a residential care facility that both Beth and Jody mentioned was the prison-like feel. This was experienced in the strict discipline, the multitude of permissions needed, and the searches when returning from school. The young people acknowledged that these procedures were certainly put in place for the safety of the youth (i.e., checking for weapons, drugs, and taking precautions to ensure that the youth did not run away). This present study does not address how to maintain the same level of safety while removing the prison-like atmosphere and creating a true family environment. This is an area for further investigation as it was revealed as an area of concern by the youth.

### **Need for Future Research**

The sample size for this study was very small, too small to make any generalizations with the results. I believe each of the interviews, however, was a worthwhile conversation for anyone interested in improving the manner in which foster youth are cared in a residential setting. It would be beneficial to continue the interviews with a greater number of former foster youth to gain a wider perspective and to see what themes brought up in the interviews with Beth, Seven, and Jody would be present in a broader sample. I also believe that a panel of former residents of residential foster homes would make an important contribution. What would a home look like if it were planned by this panel of young people with their combined experiences to draw from?

Children are precious gifts to be loved and treasured. The youth I spoke with, like many youth in foster care, do not ask for very much. They want to have a say in decisions that affect them and they want to have normal experiences that their peers being raised in a traditional family environment enjoy. They want to be kids. Most of all, they want to know that someone cares about them. Often times, decisions concerning the welfare of others are made in light of what is expedient, efficient, or economical. My hope and prayer is that these children, who are

denied the basic need of a loving parent to care for them, will be heard and cared for in the manner that we have studied and learned works best for them.

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## **APPENDIX A**

### **RESEARCH QUESTIONS AND PERSONAL INTERVIEW GUIDE QUESTIONS**

#### **A Phenomenological Study of Youth Experiences in Residential Foster Care and Their Recommendations for Change**

1. What are the circumstances that led you to residential foster care?
2. What was the experience like?
3. Was there anything that you found helpful?
4. What things made it especially difficult?
5. How would you change those circumstances if you could; what would have made it better?
6. What would you tell someone who was planning a home for residential care today?

## **APPENDIX B**

### **LETTER OF CONSENT**

Dear Sir or Ma'am,

My name is Sister Mary Elizabeth Ann McCullough and I am a doctoral student in Education at George Fox University in Oregon. I am conducting research on residential foster care. My goal is to talk with some young adults who have experienced at least two years of residential care. I believe those who have lived the experience of residential care are best suited to speak about it. I am interested in learning about your experiences and especially in your ideas for how this type of foster care can be improved. You are invited to participate in a 60 minute long personal interview to share your experience and your ideas.

The interview questions relate to the experiences which led to your placement in residential foster care as well as your experience while in care. Much of the interview time will be spent on open-ended questions in order to provide the opportunity for you to share what you believe is significant to your own situation and whatever ways you believe it could have been improved if you had the opportunity to do so.

The risks are minimal and your participation is completely voluntary. You may decline any questions you do not wish to answer or terminate our participation at any time during the interview.

The results of this study will be presented in the dissertation required for the completion of my program. My hope is that this research will also contribute to improving residential foster care for current and future youth. Any personal information, including the location, will be kept

strictly confidential so your identity will remain anonymous. All data collected will be kept safe in my personal possession until it is no longer needed, at which point I will personally destroy it. No one else will have access to the information.

Thank you for considering participation in this study. If you have any questions regarding the research, please do not hesitate to contact me at 337-348-1847. You may also contact my dissertation committee chair, Dr. Terry Huffman at 504-554-2856.

If you understand the use of this research and agree to participate, please sign below.

Participant signature \_\_\_\_\_ Date \_\_\_\_\_

Researcher signature \_\_\_\_\_ Date \_\_\_\_\_