FROM FOSTER CARE TO ADULTHOOD:
Where Do We Go From Here?
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Abstract

Former foster youth becoming parents face many unfortunate events starting with the difficult transition from foster care. Currently, there is not any research which discusses successful transitions from foster care to parenting. This is a qualitative study that included interviews of five former foster youth’s experiences as parents. The study sought to answer the question, how do social service and supports for parents who have experienced the foster care system affect their child’s development? The researcher determined several common themes which include reasons for entering foster care, the foster care experience, resources and support, parenting models/styles, development of child, and unavailable resources. Results suggest that social services and support utilized by the participants decreased the chance of these participants’ children entering the foster care system, but aided tremendously in the children’s development. Although funding and support are available, they do not prepare former foster youth for the rigorous job of actually raising a child and do not provide a parental model. Improvements are suggested in program development and resources, as well as more research in this specific area.
Inspiration

September 1, 1999, she was 18 and on her own after 10 years in foster care. She left with a bag full of clothes, a high school diploma, a bus pass, and a job making $5.25 per hour. The housing plan at the college where she was accepted had fallen through. She didn’t have another plan. She said her goodbyes, got in the van and was taken to her older sister’s house, where she lived for four months before her sister put her out. She was enrolled in the local community college, but slowly stopped showing up for class as her living situation began to deteriorate. By the end of the semester she had a “D” in College Algebra, a class in which she had excelled during high school, had dropped her reading and writing courses, and was living with a friend until a bed became available at the local transition center.

Things seemed to get better once she was at the transition center. She was accepted into the Texas A&M University system and enrolled for classes. Later, she began dating a young man whose background was similar to hers. It was not too long before the domestic violence began. Before she realized it, she was in a relationship she had vowed never to be in because that’s what her mother went through. Little did she know this violent relationship would be the reason she would lose her dignity, hope, freedom, and for which she would be sentenced to prison. She served two years in prison, where she realized she, too, played a role in facilitating the abuse. She vowed to make a change. She would not go back to the same city or county. She would enroll in college, finish, and never become involved with another abusive man. Upon her release, she enrolled in college with her tuition waiver and began taking classes. One very
short year later she would face homelessness, pregnancy, and single parenting.
Two years later, with custody of her two-year-old daughter, she graduated with a Bachelor of Social Work degree. She is me.
Introduction

Childhood has not always been thought of as a special stage in life. During the late 1800s, children were forced to work in factories, “thousands suffered from neglect and homelessness, only to be taken in by families to become boarders, apprentices, or live-in laborers” (The Adoption History Project, 2007). There are untold stories about children such as Mary Ellen Wilson¹ who was severely abused by her “step-mother” (American Humane Society, 2008).

Today, society views childhood as an important and distinct period in life. It is the stage where important foundations are formed to prepare for adulthood. Resources are heavily invested to assist in caring and educating children. More resources need to be made readily available for the children of former foster youth. During pregnancy it is hard for parents to think about what life will be like after the birth of their new baby. Being responsible for a new life can feel unbearably overwhelming at times. An essential resource for anyone caring for a child is a thorough understanding of child development. Development is a lifelong process beginning at conception and ending at death. Childhood development breaks down into two principle concepts: growth and development. Growth and development, according to Allen and Marotz (2000), are “specific physical changes and increases in the child’s actual size along an orderly progression on a continuous pathway in which the child acquires more refined knowledge, behaviors, and skills” (p.22).

¹ See Appendix A
Teen parents often need the help of their families to assist with meeting the child’s developmental needs. According to Sarri and Phillips (2004), early parenthood might reflect pre-existing aspects of the mother’s development such as:

- antisocial behavior,
- frequent changes in residency,
- increasing their chances of experiencing homelessness,
- lack of education, leading to a series of low wage employment and poverty, or
- impulsive temperament, which can influence the child’s behavior.

Many of the adolescent parents, like foster youth, face

- parental rejection,
- substance abuse, delinquency, and
- depression.

As a result they suffer from social, economic, educational, and emotional barriers.

One foster alumnus describes parenting as the best thing that could have happened, but also difficult. However, many youth who age out of the foster care system exit without a support system, thus making them more susceptible to failures and hardships. For example, because youth lack sufficient credit to rent apartments, co-signers are needed. But co-signers are often unavailable for youth who have grown up in the foster care system without parents or significant
others. Compound this already difficult situation with a child, and the transition is much more difficult.

With the large number of youth who exit the foster care system each year, recent federal legislation has provided funding to states specifically to offer additional services and supports for youth aging out of the foster care system. The Foster Care Independence Act and the Chafee Foster Care Independence Program provide a significant amount of funding, allowing states to enhance programming in the areas of education, housing, life skills, and other needed support areas. But, what about those adults who exit the foster care system as parents or who have children very shortly after emancipation? This study aims to find out directly from the former foster youth themselves how the support available prepared them for the rigorous job of raising a child. It also seeks to find out how former foster youth, now parents, are doing in raising their children while reducing recidivism among their offspring. It is believed that a significant number of former foster youth’s children experience foster care as well. The cause is that many foster youth lack the necessary life skills needed to raise a child.

Literature Review

There is very little research on parents who have been in the foster care system. However, there is agreement that individuals in the foster care system are at a higher disadvantage for a number of reasons. The transition from adolescence to adulthood is a hard developmental stage for all youth, but foster youth have to also make a transition from a system they regard as home and to which they cannot return (Lemon et al., 2005). Some of the disadvantages foster
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youth face while in care and when making the transition from foster care to adulthood consist of multiple placements, establishing an inability to attach, disconnectedness from biological families, low school performance due to foster care drift, and lengthy stays in the foster care system without a definite permanency plan. These challenges hinder the foster care population from reaching their highest potential. (Lenz-Rashid, 2006; Pecora, 2006; Lemon et al., 2005)

Many of these young adults make the transition from foster care without the necessary social skills, education, vocational experience, and financial self-sufficiency needed to succeed independently (Reilly, 2003; Stoner, 1999). Often, they have histories of abuse, neglect or exploitation that can greatly affect their ability to live alone (Collins, 2001). Many experience significant challenges in negotiating the transition to self-sufficient living because they have not received the proper preparation and support while in foster care. As documented by Lenz-Rashid (2006), this population of young people is at extreme risk of poverty, homelessness, victimization, and criminal activity. Many living on the streets lack money to meet basic living expenses, fail to maintain regular employment, are involved with the criminal justice system, are unable to obtain healthcare, experience early pregnancy, and have mental health or substance abuse issues.

Young female teens are at an even greater disadvantage if they become pregnant in the system. After emancipation, the transition out of care is quite difficult. To add on the responsibility of another person decreases the ability to reach self-sufficiency. Cook (1994) states, “While there is no evidence to suggest
that former foster youth have any less desire for self-sufficiency than does the general population, there is the general impression parenthood is satisfying especially for one who has only a series of foster home placements that self-sufficiency is of less importance” (p. 220). Parenthood can be satisfying for the simple reason that children love unconditionally. Many times foster youth undergo multiple foster home placements because they feel as though they do not deserve the affection that a family is trying desperately to provide. Therefore, the unconditional love and affection from a baby proves to be one that is genuine, since “for some it is the first time they have established a family tie” (Cook, 1999, p.? ). Parenting is that much more satisfying because of their need for indisputable love and affection is met.

The transition to independence can become a great struggle for these teenage mothers leaving the foster care system. Having been in multiple homes and moving from school to school, these youth may not have received the proper social skills needed to reach self-sufficiency. Stoner (1999) speaks of the programs that are available to assist pregnant teens but emphasizes that they are lacking due to the fact that “[f]ew, if any, are specifically targeted to emancipated foster youth,” (p. 165). As a result, these young mothers are in competition with the general population for limited resources.

According to a study by the Midwest Evaluation of the Adult Functioning of Former Foster Youth (2005) and the Casey National Alumni Study (2003), in the first few years after a young person emancipates from foster care, one in four will end up homeless for at least a night, roughly half will end up unemployed, only
half will have graduated from high school, and as many as six out of ten young women will become pregnant (Barth, 1990; Geenen et al., 2007, Pecora et al., 2006; Lenz Rashid, 2006). Though many youth report exposure to independent living training programs while in foster care, few indicate that they were exposed to concrete assistance. Multiple placements while in foster care and less education correlated with difficult post-discharge planning (Pecora et al., 2006). Youth who were exposed to training services, positive support networks, and job experience while in care are associated with a more positive adjustment to independent living once they exit the system (Pecora et al., 2006). Research illustrates that former foster youth have difficulty finding stable housing and supporting themselves financially after leaving care (Geenen & Power, 2007; Pecora et al., 2006; Pecora, et al., 2003; Propp, et al., 2003; Seyfried, et al., 2000; Stoner, 1999).

Currently, transitional or independent living services enable foster youth to support themselves while making the transition to independence and self-sufficiency. The independent living services include supportive housing, and life skills training in areas such as money management, credit management, consumer skills, education, and employment. Independent living services give youth the opportunity to earn and save money for move-out costs.

In the State of Texas, there are currently 11 transitional programs, one for each region, available to youth who exit the Texas foster care system. However, most of these programs are not designed for the teenage mother emancipating from foster care (Stoner, 1999). These mothers have to compete for services
such as childcare management solutions, fair market housing, and other entitlement programs, not only with other foster youth, but with the general population as well. Stoner (1999) states the other problem that exists is the lack of programs that assist single parents with two or more children. Therefore, the mothers do not receive services that are tailored to meet their needs.

Child welfare agencies face a number of challenges in satisfactorily meeting the mission of protecting children and assisting families. Policy, practice, and public opinion focus on prevention and re-unification. For some young adults the child welfare system through foster care provides their only access to concrete and emotional support. In 1985, legislation to address the growing needs of adolescents in foster care youth was passed. The Independent Living Initiative amended Title IV-E of the Social Security Act to provide federal funds to states to help adolescents in foster care develop independent living skills (GOA, 1999; Pecora, 2003). This legislation was an important beginning of much-needed services for youth who exit foster care, as it recognized problems that child welfare systems face, and provided initial resources for child welfare systems to begin to respond through development of independent living programs. Although independent living initiatives were implemented, attention to the needs of adolescents in foster care systems around the United States remained the focus.

Since the introduction of independent living programs, practical limitations in this body of research have been serious. The National Evaluation of Title IV-E Independent Living Programs conducted only one national study for Youth in Foster Care, identifying a slight, but positive impact of independent living
services (Cook, 1994). There was also a government report (GAO, 1999), which documented the differences and drawbacks in services provided by states, the unknown effectiveness of independent living services, and the limited federal supervision of state application of the independent living programs (Collins, 2001). Questions remain about the most helpful mechanism to provide effective support to adolescents within the foster care population (Collins, 2001).

States may use the Chafee funds in any manner that will accomplish the programs' purposes of independent living. The goals of the Chafee funds are as follows: (1) identify youth who are expected to age out of foster care at age 18 and help them to make a transition to self-sufficiency; (2) help those youth receive the education, training, and services necessary to obtain employment; (3) help youth prepare and enter post secondary training and education institutions; (4) provide personal and emotional support for youth aging out of foster care; and (5) provide a range of services and support for former foster youth between ages 18 - 21 years to complement their own efforts to achieving self sufficiency (U.S DHHS, 1999; Jaklitsch, 2003; Massinga & Pecora, 2004).

Recent legislation provides additional emphasis on higher education for foster youth. With the implementation of the Promoting Safe and Stable Families Amendments of 2001, section 477 of the Social Security Act adds a new purpose to the Chafee Foster Care Independence Program. The objective of the Chafee Education and Training Voucher Program (ETV) is to provide vouchers for post secondary training and education to youth aging out of foster care or to youth adopted from public foster care after age 16. States may allow youth participating
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in the voucher program to remain eligible until age 23, as long as they are enrolled in a post secondary education or training program and are making satisfactory progress towards completion of a program. Those eligible can receive up to $5000 per year, which can only be used towards the cost of attendance at an institution of higher education as defined in section 102 of the Higher Education Act of 1965 (Levin-Epstein, & Greenberg, 2003; GAO, 1999).

Based on this information, the goal of Child Protective Services (CPS) is to assist former foster youth with making more successful transitions. However, Child Protective Services fails to recognize the needs of those who become parents before they age out of foster care or very shortly after emancipation. Therefore, these young parents are forced to transition without the added and needed support that most exiting foster youth receive. In spite of this, some youth go on to do extremely well while transitioning to adulthood as well as parenthood. There are services that CPS offers but, as iterated before, these parents have to compete for services with other former foster youth. According to Pecora, more research is needed to find out how these youth are faring as parents (Pecora, P, personal communication, 2008).

Methodology

This study was designed to answer the question, how do social service and supports for parents who have experienced the foster care system affect their child’s development? The participants interviewed are those who have exited the foster care system and now have children. All interviewees were over the age of eighteen years, and of various ethnic backgrounds. Because this is a
small qualitative study, there was not an attempt to obtain a representative sample. The questions used to interview the participants included (1) the reason(s) they entered the foster care system and their experience while in foster care, (2) resources made available to them upon emancipation which affected the development of their child(ren), and (3) how effectively they raise their child(ren). Participants were obtained through personal and professional contacts who provided names of parents meeting the qualifications and who agreed to be contacted for the study. Approval for this research was granted through Texas State University’s Institutional Review Board, and the participants signed informed consent documents. Participants were then interviewed in face-to-face sessions lasting approximately one hour. These interviews were audio taped and transcribed. The researcher then examined the transcripts for themes using grounded theory principles (Strauss & Corbin, 1998). Future analysis will determine if experts’ identification of themes match those of the researcher.

**Limitations**

One limitation of this study is that it is not a representative sample. Because the sample is a small study from two regions, it is not generalizable. Recruitment for the study was difficult. Two participants made contact with the researcher and later decided not to participate. Specific reasons for not following through are not known by the researcher. Receiving permission from agencies to interview with possible participants was not granted, thus limiting the number of participants. Although the researcher made substantial efforts to obtain further participants, none were obtained.
Sample

There were a total of five interviewed participants: 1 male and 4 females. Of the five participants, there were two African Americans, two Caucasians, and one Latino. Their average age was 23.8 and ranged from 21 to 28. Participants were placed in foster care between the ages of 10 and 14, and the average age was 12.6 years. None of the participants was adopted. Three wanted to be adopted, and 2 did not. Their length of stay in foster care was between 3 and 8 years averaging out to approximately 5 years. The number of foster placements of participants was reported as being from 2 to 15 placements, with an average of about 7. Participants reported having their first child between the ages of 18 and 21. There were a total of 6 children between the 5 participants: 3 girls and 3 boys. Four of the participants had 1 child, and one of the participants had 2. The ages of the children ranged from 7 months to 5 years. All the participants are high school graduates. One is a college graduate and in graduate school. Four are in college.

Results

From the transcribed interviews, the researcher identified several themes. These include reasons for youth entering foster care, the foster care experience, resources and support, parenting models/styles, development of child, and resources they wished were available.
**Reasons for Entering Foster Care**

Children enter the foster care system due to serious maltreatment related to abuse and/or neglect. Many of the children have experienced extreme hardships, which are often associated with poverty (Baumann, D., personal communication, 2008). Common reasons for termination of parental rights include abandonment, parental incarceration, and substance abuse, as well as repeated sexual, physical, and psychological abuse (McGuinness & Broome, 2007). All of these were described by participants as the reasons their families encountered CPS. For example, two participants described their experience of abandonment and encountering CPS.

“When I was just a baby, 6 months old, my biological mother left me in a dumpster behind the babysitter’s house.”

“My mother threw me out of the house when I was twelve, because her boyfriend did not like me. She later relinquished her rights.”

**The Foster Care Experience**

Foster care is an experience shared by more than 513,000 children in the United States and Puerto Rico (US-DHHS, 2008). The five participants in this study shared common sentiments about growing up in foster care and the difficulty it posed. One participant expressed positive experiences of growing up in foster care, but the remainder did not.
“…I grew an attachment to my foster family, and the feeling was mutual.”

Growing up in foster care is difficult, because the expectation is for the child to accept and adjust to the ways of the new family. When this does not happen, the child is said to have an attachment disorder, and often placed on medication. What really happened was life, and the child attached accordingly. One participant felt betrayed by the foster care system due to being over medicated.

“I felt betrayed by the judicial system because my perpetrator was allowed to plea bargain and by the foster care system because I was over medicated and bounced from home to home.”

Others felt uncared for, abandoned, unloved, and as if their foster parents were in the business of fostering for money.

“God! I hated it. I cried a lot. In the beginning I thought no one loved me and no one cared how I felt because no one asked how I felt. Or told me they cared. I went from an unstable biological home to a home where I was a stranger.”

“The foster parents act like they wanted me there, but they really didn’t…half of the foster parents that were there looked at me as if I was a dollar sign.”
One participant, when asked about his/her experience in foster care, spoke of the systemic chaos and disorganization. Another participant described being bounced from one foster home to the next.

“Chaotic and unorganized. No one was completely knowledgeable about what was going on with my case.”

“I would also say it was different and I felt disconnected, it was hard to continuously move around and change schools. I moved a lot and eventually I was separated from my sister.”

**Use of Resources and Supports**

Since exiting the foster care system, respondents have relied on a number of social services and supports to survive, and some relied on the services to care for their child(ren). When asked about the number of children each had, the average response was 1.2. When asked about formal resources used, common themes emerged. All relied on some form of educational support. Four were accessing the Tuition and Fee waiver, except for one who became ineligible because of early emancipation. The Tuition and Fee waiver is awarded to all youth in foster care on their 18th birthday who have graduated from high school or an approved equivalency program. Three had accessed the Education and Training Voucher (ETV), and 2 of the 3 remain eligible for assistance through this program. The ETV program provides vouchers for post secondary training and education to youth aging out of foster care. The vouchers may be used to cover
the cost of childcare. One participant was eligible, but unaware of the program, and one was ineligible because the program was not available at the time of emancipation. One relies on student loans and 4 qualify for grants.

One quote illustrates how important the tuition waiver program is to youth aging out of the foster care system. These youth do not have family to whom they can turn for financial support during college. Therefore, the tuition waiver alleviates stress due to lack of funding to cover tuition.

“The only way I can pay for college is the one thing that I got from foster care and that was the tuition waiver. No matter how old you are you need the tuition waiver because you may be 19 or 20, and you are incarcerated. You may be 19 or 20, and you have to work. You maybe 19 or 20, and you maybe too sick to go to school, but when you are back on your feet no matter what age you are the tuition waiver is there.”

Other forms of formal resources utilized by four of the five participants were governmental and community assistance. Governmental assistance programs used by participants included:

- Child Care Solutions, a subsidized child care, which is a program of Worksource

- Women, Infant, and Children (WIC) program, which provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk (USDA, 2008),

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2 offers no- and low-cost employment services for job seekers and employer (Worksource, 2008).
• Food stamp benefits,
• Public and transitional housing
• Medicaid, which provides medical coverage to eligible needy persons (DHHS, 2008)\(^3\).

All interviewees use these programs to varying degrees, from one person who uses only food stamps and Medicaid to those who use all of them. Only one receives child support, and none use Temporary Assistance to Needy Families, as it provides a very inadequate income and severely restricts recipients’ ability to go to school or obtain certain jobs. Community assistance utilized by participants included:

• parenting classes
• utility payment support
• spiritual guidance
• wrap-around services for youth coming out of foster care, such as Baptist Children Family Services, Casey Family Programs, and LifeWorks.

In Austin, LifeWorks is considered to offer wrap-around services because youth may go there to obtain counseling, GED classes, job readiness training, tax preparation, job search, housing assistance, transportation vouchers, assistance with education materials; it’s a one-stop shop. Again, all participants, except one, use these programs to varying degrees, from one person seeking spiritual guidance to others who use all of them. One participant described using almost all the services, while another described using none.

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\(^3\) Medicaid is different in every state.
“When I had my son I had to use Child Care Delivery systems to pay for child care. We were on Medicaid for medical insurance, and I applied and received food stamps and WIC. I relied on help from the church, and community organizations. I lived in public housing, and I used whatever service PAL was able to offer me given my situation and emancipating myself from care.”

The Preparation for Adult Living (PAL) is a program of Texas Child Protective Services and is designed to prepare foster youth, beginning at the age of 15, for the transition out of foster care. PAL’s staff is involved with youth up until the age of 21. The PAL program provides four 250 dollar stipends to youth who are working, and/or enrolled and attending a college, university, or vocational study. Parts of the PAL program were not in effect when some of the participants emancipated from foster care.

“None after I was emancipated. CPS was done with me. If it wasn’t for the tuition waiver CPS wouldn’t have had anything else to do with me.”

Participants also identified forms of informal supports such as family and friends. Three participants described having friends to rely on for advice or babysitting. The other two participants did not.

“My family and friends help with advice and help when I need someone to watch my son for whatever reason.”
None of the participants have any biological family members who are helpful; two have spouses/partners who are extremely supportive. One participant expressed extreme gratitude for the help received from the partner. Additionally, one participant received assistance from their former foster family.

“Recently, [my daughter] needed to go up in her pampers… [my partner] was like blah, blah, blah, blah. I am like woo and we went up in pampers. There are certain things that I don’t notice like with feeding patterns…I read a lot but there are certain things [my partner] helps me on that I would just be dumb to.”

Other forms of informal support discussed by one participant were from a school teacher.

“I have to give credit to Ms. Jane Doe.⁴ This lady had more faith in me than I did and this lady would kick my butt if I didn’t go to school.”

Another interviewee’s former foster family allowed the participant and their family to live with them temporarily when they were evicted from their apartment.

“We have no family and my family ended up homeless because we didn’t have anywhere to go after we had been evicted once. We were attacked in our home by a guy I would baby-sit for. The landlord was upset we knew the guy, and he was on drugs, he thought we were selling him the drugs. Me and my family [sic] had to go live with my

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⁴ Name changed to protect privacy of interviewee.
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former foster mother for a little bit because we could not find anywhere to go. It was so embarrassing. We both had jobs, but with an eviction on your rental record no one wants to work with you.”

Parenting Models/Styles

Overall, respondents learned how to parent by trial and error, or picking and choosing from several sources. Some stated all parents learn through trial and error. One participant described her knowledge of parenting as coming from several sources.

“I asked questions, pick and chose from foster parents parenting style. I took three different parenting classes.”

One respondent described her knowledge of parenting through trial and error by asking questions when she didn’t know.

“When my daughter came home from the hospital no one had told me that your breast milk does not come in right away, so my daughter was screaming and hollering. I had no idea what was wrong with her. I called the nurse line and asked if her crying was normal. The nurse asked me if she had eaten and I said I put her on my breast and she sucks and then pulls away and starts screaming. That’s when the nurse explained to me that I have to wait for my breast milk to come in. I would call non emergency police and go to the hospital when I did not know.”
Another respondent described knowledge of parenting by reading and researching on the Internet, watching and observing others, and watching television shows.

“I watch the darn Cosby show. I watch the Cosby show, and a lot of the other white shows, but mostly the Cosby show. I watch how they act because I do not have family to tell me what to do. I have to read, get on the Internet, or just go with common sense.”

All have attended parenting classes except one. There was also the common theme of “what not to do.” Under this theme participants included the desire for their children to have what they never had, to do better than their parents or foster parents did, and to prevent abuse. At least four spoke about the precautions they take to prevent their child from being abused.

“Due to the things that have happened to me before, I do not trust anyone with my daughter. She is my daughter… she is all my responsibility.”

“My son has never been in a day care. I did put him in a private home day care and had a back ground check done on that home.”

“I teach my son to protect himself, but I also teach him that mom does the best she can but ultimately GOD is your protector.”
“I do not leave my daughter anywhere except at daycare because I can’t protect her if I am not there...”

**Development of Child**

When participants were asked whether they thought their children were developing normally, four answered positively. They stated that their children were on target or ahead, according to the participant, doctor, and/or daycare or school. One participant downplayed the validity of milestones and did not answer the question specifically about the child.

“Yes, my daughter started walking at nine months. Even now they say that she is advanced. She can count to twenty, knows all her colors and shapes, and is said to have a vocabulary of a four year old and she just turned three last month.”

“She is only 7 months, she is not sitting up just yet but she is trying... she rolls over back and forth...she is imitating speech.”

“My baby walked early and [is] considered educationally advanced because I taught him. I felt that while I was going to school he had work to do as well. Recently he was eligible for entering the gifted and talented program, but his behavior stopped him.”

**Resources (Not) Available**

Lastly, when asked about resources that were or were not available, but would have been helpful, two participants said they did not need any other resources. The other responses included
• the need for priority housing,
• legal aid to help with obtaining child support,
• a credit recovery program to aid in budgeting, and
• programs designed to help married young parents who are experiencing hardships, since most of the programs are for single parents.

Implications
The researcher noticed some participants were not aware of resources for which they were eligible. Services need improvement in program development with regards to providing adequate information, and culturally competent services. Foster care has a culture of its own and some youth often feel depressed, lonely, and hopeless. Youth need continued support in and out of care if the expectation is for them to become productive, law-abiding citizens. One interviewee said it best.

“Everyone needs a support system and I didn’t have one.”

The federal government can continue to appropriate funds to help youth make successful transitions, but without “continued support, someone to show they still care, someone to say, ‘no I don’t think that’s a good idea’ or ‘should you do that?'”, youth cannot be expected to make successful transitions. Youth need caring individuals who will not necessarily tell them what to do, but will provide caring guidance during the emancipation process.
“Yes, continued support more than anything someone to say ‘no I don’t that’s a good idea’ or ‘should do that?’ You cannot tell me what to do but you can at least give me something to think about.”

Programs or agencies that provide assistance to foster youth need to offer more wrap-around services. These are services youth may obtain in one stop, such as counseling, GED classes, job readiness training, tax preparation, job search, housing assistance, transportation vouchers, or assistance with education materials all at one location.

There needs to be more research in this area. Additional research with large more representative samples needs to be done on what the foster youth themselves think. The researcher found it particularly difficult to find literature specifically related to the topic of foster youth as adolescent parents and their resiliency. All the literature is in reference to what is expected of foster youth when they exit foster care. Resiliency is the ability to overcome or recover from adversity. The more professionals understand resiliency, the better they can successfully safeguard against undesired outcomes with youth at risk. If professionals know what helped some foster youth succeed, we can learn from them, duplicate this achievement, and apply it to those new generations of foster youth exiting foster care to attain some of the same accomplishments.
Recommendations

The recommendations for policy and program design stem from conversations with the participants as well as the outcomes of the study. Participants of this study were not particularly satisfied with their experience with the foster care system. All except two of the participants wanted to be adopted. Of the three wanting to be adopted, one went through the necessary steps and had prospective families. Due to inadequate information, the participant gave up the opportunity to have a “forever family”. Caseworkers, foster families, and other stakeholders should encourage young people in foster care to opt for adoption. Adoption minimizes placement changes and allows youth to have the support of family when they are making decisions to go to college, bear children, or marry.

Professionals should provide tangible resources to youth as they leave care. One participant described feeling abandoned once emancipated from foster care. Increasing the amount of resources such as support from foster parents, caseworkers, and agency staff, could result in more stability (Pecora et al., 2006).

Providing more varied housing options for youth after they leave care can prevent homelessness. Adult guidance programs for low income foster care alumni, such as Section-8, public housing, and other forms of transitional living with case managers would benefit former foster youth by helping them to create a budget, providing an opportunity to build credit without the use of a co-signer, and to provide family living.

Professionals in health care delivery systems should develop programs that offer assistance such as, in/out-patient breastfeeding support, prenatal
assessment, breastfeeding classes, and comprehensive bedside consultations. With regard to breast-feeding, programs should also offer in-home services to teach techniques for latch-on and positioning, how to tell if the baby is feeding well, and the proper use and selection of breast pumps. Other services might include encouraging young parents to attend parenting classes to obtain the much needed support while learning about child development, nonviolent discipline techniques, and how to have effective discussions with children. These services have the potential to increase the confidence of young parents and to decrease the likelihood their children will experience the foster care system. Hopefully, this will result in decreasing the number of alumni’s children who grow up in foster care as well.

Conclusion

Substitute care by the state of Texas has the potential to provide children and young people with nurturing substitute families. Such a service should be expected to adequately serve all youth at risk of abuse, neglect, and separation from their birth families. However, when children are removed from their families of origin, immersed in a culture of adversity and placed into foster care, cultures often clash (McGuinness & Broome, 2007). The expectation is that the child will adjust and adapt to the new families’ systems. This often results in frequent changes in schools, placements, therapists, and, at times, separation from siblings. The good news is, even after all the adversity and instability, youth can emerge victorious. Former foster youth, young parents, single parents need more support and assistance to continue being successful. Professionals and
administrators should strive to become more educated in the area of foster care transition, teen and single parenting to more effectively aid these young persons in becoming successful parents and individuals.
REFERENCE


http://www.worksourceaustin.com/aboutus/who_we_are/who_we_are.htm
APPENDIX A

“Mary Ellen’s story marked the beginning of a world-wide crusade to save children. Over the years, in the re-telling of Mary Ellen Wilson’s story, myth has often been confused with fact. Some of the inaccuracies stem from colorful but erroneous journalism, others from simple misunderstanding of the facts, and still others from the complex history of the child protection movement in the United States and Great Britain and its link to the animal welfare movement. While it is true that Henry Bergh, president of the American Society of the Prevention of Cruelty to Animals (ASPCA), was instrumental in ensuring Mary Ellen’s removal from an abusive home, it is not true that her attorney—who also worked for the ASPCA—argued that she deserved help because she was “a member of the animal kingdom.”

The real story—which can be pieced together from court documents, newspaper articles, and personal accounts—is quite compelling, and it illustrates the impact that a caring and committed individual can have on the life of a child.

Mary Ellen Wilson was born in 1864 to Francis and Thomas Wilson of New York City. Soon thereafter, Thomas died, and his widow took a job. No longer able to stay at home and care for her infant daughter, Francis boarded Mary Ellen (a common practice at the time) with a woman named Mary Score. As Francis’s economic situation deteriorated, she slipped further into poverty, falling behind in payments for and missing visits with her daughter. As a result, Mary Score turned two-year-old Mary Ellen over to the city’s Department of Charities.

The Department made a decision that would have grave consequences for little Mary Ellen; it placed her illegally, without proper documentation of the relationship, and with inadequate oversight in the home of Mary and Thomas McCormack, who claimed to be the child’s biological father. In an eerie repetition of events, Thomas died shortly thereafter. His widow married Francis Connolly, and the new family moved to a tenement on West 41st Street.

“Mary McCormack Connolly badly mistreated Mary Ellen, and neighbors in the apartment building were aware of the child’s plight. The Connolly’s soon moved to another tenement, but in 1874, one of their original neighbors asked Etta Angell Wheeler, a caring Methodist mission worker who visited the impoverished residents of the tenements regularly, to check on the child. At the new address, Etta encountered a chronically ill and homebound tenant, Mary Smitt, who confirmed that she often heard the cries of a child across the hall. Under the pretext of asking for help for Mrs. Smitt, Etta Wheeler introduced herself to Mary Connolly. She saw Mary Ellen’s condition for herself. The 10-year-old appeared dirty and thin, was dressed in threadbare clothing, and had bruises and scars
along her bare arms and legs. Ms. Wheeler began to explore how to seek legal redress and protection for Mary Ellen.

At that time, some jurisdictions in the United States had laws that prohibited excessive physical discipline of children. New York, in fact, had a law that permitted the state to remove children who were neglected by their caregivers. Based on their interpretation of the laws and Mary Ellen’s circumstances, however, New York City authorities were reluctant to intervene. Etta Wheeler continued her efforts to rescue Mary Ellen and, after much deliberation, turned to Henry Bergh, a leader of the animal humane movement in the United States and founder of the American Society for the Prevention of Cruelty to Animals (ASPCA). It was Ms. Wheeler’s niece who convinced her to contact Mr. Bergh by stating, “You are so troubled over that abused child, why not go to Mr. Bergh? She is a little animal surely” (p. 3 Wheeler in Watkins, 1990).

Ms. Wheeler located several neighbors who were willing to testify to the mistreatment of the child and brought written documentation to Mr. Bergh. At a subsequent court hearing, Mr. Bergh stated that his action was “that of a human citizen,” clarifying that he was not acting in his official capacity as president of the NYSPCA. He emphasized that he was “determined within the framework of the law to prevent the frequent cruelties practiced on children” (Mary Ellen, April 10, 1976, p. 8 in Watkins, 1990). After reviewing the documentation collected by Etta Wheeler, Mr. Bergh sent an NYSPCA investigator (who posed as a census worker to gain entrance to Mary Ellen’s home) to verify the allegations. Elbridge T. Gerry, an ASPCA attorney, prepared a petition to remove Mary Ellen from her home so she could testify to her mistreatment before a judge. Mr. Bergh took action as a private citizen who was concerned about the humane treatment of a child. It was his role as president of the NYSPCA and his ties to the legal system and the press, however, that brought about Mary Ellen’s rescue and the movement for a formalized child protection system.

Recognizing the value of public opinion and awareness in furthering the cause of the humane movement, Henry Bergh contacted New York Times reporters who took an interest in the case and attended the hearings. Thus, there were detailed newspaper accounts that described Mary Ellen’s appalling physical condition. When she was taken before Judge Lawrence, she was dressed in ragged clothing, was bruised all over her body and had a gash over her left eye and on her cheek where Mary Connelly had struck her with a pair of scissors. On April 10, 1874, Mary Ellen testified:

“My father and mother are both dead. I don’t know how old I am. I have no recollection of a time when I did not live with the Connolly’s. …. Mamma has been in the habit of whipping and beating me almost every day. She used to whip me with a twisted whip—a raw hide. The whip always left a black and blue mark on my body. I have now the black and blue marks on my head which were made

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5 Etta Wheeler’s account of Mary Ellen can also be found at the American Humane Website as well.
by mamma, and also a cut on the left side of my forehead which was made by a pair of scissors. She struck me with the scissors and cut me; I have no recollection of ever having been kissed by any one—have never been kissed by mamma. I have never been taken on my mamma’s lap and caressed or petted. I never dared to speak to anybody, because if I did I would get whipped…. I do not know for what I was whipped—mamma never said anything to me when she whipped me. I do not want to go back to live with mamma, because she beats me so. I have no recollection ever being on the street in my life” Mary Ellen, April 10, 1874, (Watkins, 1990).

In response, Judge Lawrence immediately issued a writ de homine replagiando, provided for by Section 65 of the Habeas Corpus Act, to bring Mary Ellen under court control.

The newspapers also provided extensive coverage of the caregiver Mary Connolly’s trial, raising public awareness and helping to inspire various agencies and organizations to advocate for the enforcement of laws that would rescue and protect abused children (Watkins, 1990). On April 21, 1874, Mary Connolly was found guilty of felonious assault and was sentenced to one year of hard labor in the penitentiary (Watkins, 1990).

Less well known but as compelling as the details of her rescue, is the rest of Mary Ellen’s story. Etta Wheeler continued to play an important role in the child’s life. Family correspondence and other accounts reveal that the court placed Mary Ellen in an institutional shelter for adolescent girls. Believing this to be an inappropriate setting for the 10-year-old, Ms. Wheeler intervened. Judge Lawrence gave her permission to place the child with her own mother, Sally Angell, in northern New York. When Ms. Angell died, Etta Wheeler’s youngest sister, Elizabeth, and her husband Darius Spencer, raised Mary Ellen. By all accounts, her life with the Spencer family was stable and nurturing.

At the age of 24, Mary Ellen married a widower and had two daughters—Etta, named after Etta Wheeler, and Florence. Later, she became a foster mother to a young girl named Eunice. Etta and Florence both became teachers; Eunice was a businesswoman. Mary Ellen’s children and grandchildren described her as gentle and not much of a disciplinarian. Reportedly, she lived in relative anonymity and rarely spoke with her family about her early years of abuse. In 1913, however, she agreed to attend the American Humane Association’s national conference in Rochester, NY, with Etta Wheeler, her long-time advocate. Ms. Wheeler was a guest speaker at the conference. Her keynote address, “The Story of Mary Ellen which started the Child Saving Crusade Throughout the World” was published by the American Humane Association. Mary Ellen died in 1956 at the age of 92” (American Human Society, 2008).
Where Do We Go From Here?

**APPENDIX B**

Gradebook

veronica lockett (ID: 7432)

CITI Collaborative Institutional Training Initiative

*Announcements and Frequently Asked Questions (FAQ)*

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### Human Research Gradebook

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APPENDIX C

Interview Questions (#2008-80489)

1. Under what circumstances were you placed into foster care?
2. How long were you in foster care?
3. How many placements did you live in?
4. Were you ever adopted?
5. Did you complete high school?
6. When you were in care was the tuition waiver around for you to attend any Texas public college or university for free?
7. How many children do you have?
8. What resources have you had to utilize since leaving care?
9. Do you have friends and “family” to help you with your child(ren)?
10. How do you think that obtaining help from friends, “family,” and social services has aided in your child’s development? Social services mean TANF, food stamps, housing, after care transitional services, Women Infant and Children (WIC) services, education and training vouchers, child care assistance, daycare, etc.
11. Have you ever attended any parenting classes?
12. How did you know what to do as a parent?
13. Did your child reach developmental milestones on time? Examples are holding his/her head up between 1 and 2 months, sitting up between 1.5 and 3 months, rolling over between 2 and 4.5 months, or imitating speech sounds between 3 and 6 months, etc.
14. Are there resources that are/were not available that would have been helpful? If so, what are these?
APPENDIX D

SYNOPSIS OF PROPOSAL #2008-80489

From Foster Care to Adulthood: Where Did We Go From Here?

1. The sources of the participants will be personal and professional contacts who will provide names of people who meet the qualifications and who have agreed to be contacted for the study. The subjects intended for interviewing are those that have exited the foster care system and now have children. The participants will be eighteen years of age or older, and will potentially be of various ethnic backgrounds. Because this will be a small qualitative study, there will not be an attempt to obtain a representative sample. The participants will be males and females. Participants will include individuals who clearly articulate and have the ability to state whether or not they desire to participate, and sign the informed consent. Mentally disabled persons will not be included in this study. Any individual who feels the research rehashes too many memories will be excluded and their interviews will not be used. Persons of vulnerable populations such as fetuses, pregnant women, children, institutionalized mentally disabled, or prisoners will not be included in this study.

2. Potential subjects will be obtained through personal and professional contacts; they will be approached by electronic mail, phone, or face-to-face visits. They will be asked to contact persons who would qualify for the study and ask them if they want to participate. If so the researcher will contact them to invite them to participate. If they agree, the researcher will arrange a meeting and go over the consent form.

3. The potential risks that may occur as a result of participation in the research are painful feelings emerging from discussing the reason for removal from their homes and placement in the foster care system. This risk would be mild because many of the former foster youth have discussed this event before with counselors. As a result of one question asking the participants their opinion about their child’s development, the participants may become worried about the development of their child. This risk is mild as well due to the fact that the research questions are minimally based on child development.

4. Participants will be advised of the potential risks involved. Participants will also be given a list of resources available in their county and surrounding areas where assistance can be obtained. Participants will also be advised that any cost incurred will be the responsibility of the participants. Confidentiality safeguards include the researcher being the only person that will know the names and contact information of the participants. All
tape recordings and transcribed interviews will be kept at the residence of the researcher in a locked cabinet.

5. The possible benefits of participating in the study include the participants increasing their knowledge and awareness of how well they have done in raising their children despite the circumstances in which they were raised. Another benefit to participating in this study includes the participants’ contributions to what researchers do not know about how many former foster youth perform in raising their children.

6. The risks outweigh the benefits.

7. No agencies will be used. Subjects will be obtained through personal and professional contacts. The interviews will be conducted at various private locations. (i.e. their homes)

8. As a student in the Mitte Honors Program, the researcher is conducting the research to complete the honors thesis requirement. The supervising faculty member for this research is Dr. Sally Hill-Jones in the School of Social Work.

9. Dr. Sally Hill-Jones will provide documentation of this approval.

10. This project has not been previously reviewed by the IRB.

11. Individuals who will have access, during or after completion to the unpublished results of this study are Veronica Lockett, Dr. Jones, Dr. Pape, Dr. McCabe, Dr. Galloway, Dr. Holt, and individuals who attend thesis forum.
APPENDIX E
CONSENT FORM (#2008-80489)

INTRODUCTION
You are being asked to volunteer for a research study, which will seek to find out how social service and supports for parents who have experienced the foster care system affect their child’s development. You were selected as a possible participant because you are an alumnus of the foster care system and a parent. However, before you decide to volunteer you must read and sign this form called a consent form, which explains the study. Please feel free to ask as many questions as you need in order to decide whether you want to participate in this study. To meet the criteria to graduate with the Mitte Honors Program Veronica Lockett, Texas State University-San Marcos School of Social Work student, 512-487-4637, veronica.lockett@sbcglobal.net will conduct research. The supervisor for this research is Dr. Sally Hill-Jones, PhD, LCSW, Assistant Professor at the School of Social Work at Texas State University-San Marcos, 512-245-1712, sh29@txstate.edu.

BACKGROUND INFORMATION
The purpose of this study is to see how social services and supports for parents who have experienced the foster care system aid in their child’s development. With the large number of youth that exit the foster care system each year, recent federal legislation has provided funding to states to provide additional services and supports for youth and young adults that exit the foster care system. The Foster Care Independence Act and the Chafee Foster Care Independence Program provides a significant amount of funding to allow states to enhance programming in the areas of education, housing, life skills, and other needed support areas. What about those adults who exit the foster care system as parents or who have children very shortly after emancipation? I hope to find out directly from the former foster youth themselves how the support available prepared them for the rigorous job of raising a child. I also hope to find out how former foster youth, now parents, and are doing to raise their children while reducing recidivism among their offspring? It is believed that a significant number of former foster youth’s children experience foster care as well. The reasoning behind this belief is that many foster youth lack the necessary life skills needed to raise a child. If you choose to participate in this study, you will be asked about the reason(s) you entered the foster care system and your experience while in foster care, as well as questions about any resources that were made available to you upon emancipation or in an effort to effectively raise your child.

PROCEDURE
If you agree to be in this study, I will ask you to spend about one hour in a tape-recorded face-to-face interview with me where you will talk about your experience entering and exiting the foster care system, the resources available to you, and how you think that these may have impacted your parenting and/or relationship with your child as well as your child’s development.
RISKS OF BEING IN THIS STUDY
In participating in this study we will be revisiting the past such as how you entered the foster care system. Because you will be asked to discuss how you entered foster care and what your experience was like this may stir up some painful memories and traumatic events. I will hand out a resource sheet with suggestions for getting professional help, should you need it. Any cost incurred for counseling will be the responsibility of the participant. You will have the researcher’s contact information, as well as the supervising professor’s, in case you need more information.

BENEFITS OF BEING IN THIS STUDY
One of the possible benefits of being in this study is increasing your own awareness of how well you have done in raising your children despite the circumstances in which you were raised. Another benefit to participating in this study is your contribution to what researchers do not know about, which is how many former foster youth do in raising their children. The more we know in this area, the more we can know how to prevent, minimize, and address the risks for the children of former foster youths entering the foster care system.

CONFIDENTIALITY
Your identity and the content of your interviews will be kept confidential. The researcher will be the only person who knows your name and contact information. No other persons, not even the supervising professor, will have information of your identity as a participant. The results of this study will be made available in the Texas State University Library and possibly academic journals, but in a way that no individual will be able to be identified or connected to their responses. The results will be reported for example as, “interviewee experienced ____”. I will keep the audiotapes and transcripts of your interview securely locked at my residence for one year and then will destroy by shredding.

VOLUNTARY NATURE OF THE STUDY
Your decision whether or not to participate in this study will not prejudice your current or future relations with the Texas State University-San Marcos. In the event that you are receiving services from the Department of Family and Protective Services (DFPS), it will not affect your current and future relations with DFPS. If you have questions before or after consenting to participation, you may contact the researcher, Veronica Lockett, Texas State University- San Marcos School of Social Work student, 512-487-4637. If you decide to participate, you are free to withdraw at any time without affecting those relationships. You will be given a copy of this form to keep for your records. A summary of the findings will be provided to you if you indicate to me that you so desire. Questions about the research or your rights as a participant, or research-related injuries should be directed to Dr. Lisa Lloyd at (512) 245-8358 and Ms. Becky Northcut at (512) 245-2102.

STATEMENT OF CONSENT
I have read the above information. If I had questions, I have asked them and have received answers. I consent to participate voluntarily in the study.
APPENDIX F

Resource List (Proposal #2008-80489)

All of the counseling centers listed on this resource list serve adults and youth on a sliding scale fee. All centers accept regular Medicaid, Medicare, and private insurance. Please be advised that some centers accept CHIP.

Austin Area

- **LifeWorks Counseling Center**  
  2001 Chicon Street  
  Austin, TX 78722  
  Phone: 512.735.2100

- **Samaritan Counseling Center**  
  5425-A Burnet Road  
  Austin, Texas 78756  
  Phone: 512-451-7337

San Marcos Area

- **The Hill Country Community Mental Health Mental Retardation Center**  
  Scheib MH Center  
  1200 N. Bishop  
  San Marcos, TX 78666  
  Toll free: 1-888-648-3947  
  Phone: (512) 392-7151

- **Samaritan Counseling Center**  
  First United Methodist Church  
  129 West Hutchison  
  San Marcos, TX 78666  
  Phone: 512-392-7091

San Antonio Area

- **San Antonio Catholic Charities**  
  1844 Lockhill-Selma Rd., Suite 101  
  San Antonio, TX 78213-2768  
  Phone: 210-377-1133
January 10, 2008

IRB Committee
Texas State University

This is to verify my approval of the research proposal #2008-80489 submitted by Mitte Honors student, Veronica Lockett. I have been involved with her in the process of developing the proposal and will continue to supervise the project throughout. Thank you for your consideration of her proposal.

Sally Hill Jones, PhD, LCSW
Assistant Professor, School of Social Work
Texas State University – San Marcos
601 University Drive
San Marcos, TX 78666
512-245-1712
Sh29@txstate.edu