Relationships and Connections in Foster Care: Why It Matters

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**ABSTRACT OF THE DISSERTATION**

Relationships and Connections in Foster Care: Why It Matters

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Foster care placement elicits conversations on whether it is an effective intervention for children and adolescents. Youth and adolescents in foster care placements often experience difficulties in building supportive, lasting social connections due to instability in foster care placements and lack of trust. The change in environment from a child's family home to an unknown home, environment, and location affects them. Losing connections to family and support systems impacts social relationships and outcomes since a social support system is often difficult to build or maintain in foster care. The results of this study illustrate the significance social support and relationships have on an individual's social outcomes. At the same time, in foster care placement, how does that translate once discharged from placement? The participants' experiences with connections and relationships impacted how they defined support and trust and built professional and personal relationships.

Additionally, their perspective on positive and negative relationships was based on learning whom they could trust, what behaviors they had to exhibit to meet their needs, and what benefit they would receive from various encounters and relationships.

Signature of Investigator_____          Date_____

## Acknowledgments

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Thank you for your support and guidance, whether I asked for it or not. It did not go unnoticed and has been much appreciated. While this chapter ends, a new beginning presents itself while I continue to chapter my way through life.

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# Chapter 1: Introduction

Children and adolescents learn to feel safe, trust, and build relationships with the people in their lives and their surrounding environments. When children are placed in foster care, they often lose a sense of self, familial connections, and the ability to foster and expand their social support systems. Despite this, child welfare services at the federal, state, and local levels are designed to ensure the safety and well-being of children and adolescents. These services are government-funded interventions to protect children from abuse and neglect (Paddock et al., 2022).

Within the child welfare system, various interventions have been established, from the least restrictive provision of services to children and families in their homes to the most extreme, such as removing a child from their home and placing them in foster care. Foster care refers to a temporary living arrangement for children whose parents are unable to care for them as identified by child welfare agency staff due to abuse and/or neglect. Depending on the circumstances, "children may live with relatives, traditional foster families, or in group facilities" (The Annie E. Casey Foundation, 2023). Relatives are often considered kinship foster care, but kinship foster care can also include people who do not have a biological connection but can know the child or family before placement, and traditional foster families are families the children did not know before moving into their homes.

The Child Abuse Prevention and Treatment Act of 1974 defines abuse and neglect as "Any recent act or failure to act on the part of a parent or caretaker, which results in death, serious physical or emotional harm, sexual abuse or exploitation" or "An act or failure to act

which presents an imminent risk of serious harm" (Child Abuse Prevention and Treatment Act of 1974). Children enter foster care after assessments have determined that they need a foster care placement to ensure their safety and well-being. A state's child abuse hotline first receives reports of suspected child abuse or neglect (Children's Bureau, 2020).

The child abuse or neglect hotlines are call centers where child welfare professionals are trained to receive, screen, and assess all allegations of abuse to determine the level and severity of response needed. All 50 States within the United States have a designated child abuse hotline number and a National Child Abuse Hotline number for anyone to call from anywhere if there is a concern about abuse or neglect (Children's Bureau, 2020). Child abuse hotlines and guidelines for reporting and investigating child abuse and neglect were some of the structured nuances established upon developing and implementing the Child Abuse Prevention and Treatment Act in 1974.

Once an alleged child abuse or neglect report is assessed and documented, a child abuse/neglect investigator is assigned to investigate the allegations. The investigator determines whether the child is at risk of child abuse and neglect or whether a child needs to be removed from the home (Children's Bureau, 2020). The primary goal of removing a child and placing them in foster care is to ensure their safety and well-being. However, this process can sometimes result in the loss of biological and social connections for children. Being disconnected from their familiar surroundings and support can adversely affect their well-being and family relationships, ultimately leading to compromised social outcomes.

**Evolution of Child Welfare: Child Protective Services Policy and Practice**

Before the development of social service agencies and legislation that protected abused and neglected children and adolescents, children were often viewed as the property of their parents or guardians (Longley, 2020). They were often used for laborious work and treated poorly. Relationships between children and adults were not viewed as nurturing. Instead, they mirrored more of a cost-benefit relationship where the children received minimal food, shelter, and clothing for the labor services they completed which correlates with Social Exchange Theory, defined as an exchange of activities between individuals where the interactions benefit or lack thereof is evaluated by those involved (Rice & Cook, 2016).

The first documented protective custody case was for a young child named Mary Ellen, who suffered abuse and neglect by her caretaker until 1873 (Eide, 1990). This incident marked the origin of formulating regulations and protocols directed at safeguarding minors from maltreatment. The New York Society for the Prevention of Cruelty to Children (NYSPCC) was founded by Henry Bergen in 1874. It was the first child protective service to meet the needs of children and adolescents (New York Society for the Prevention of Cruelty to Children, 2023).

Between 1850 and 1860, several organizations were established to address poverty, homelessness, child abuse, and neglect. Some of these organizations were The New York Juvenile Asylum, which facilitated placements via the orphan train (National Orphan Train Complex, 2023); Children's Aid Society, founded in 1853 (Children's Aid, 2024); The New York Juvenile Asylum, now known as The Children's Village, was established in 1851 (New York Juvenile Asylum, 2024); and The New York Foundling was founded in 1869 (New York Foundling, 2023). However, despite these efforts, children and adolescents, as they reached adulthood, did not maintain relationships and could not build the social connections to thrive as adults because they were not exposed to positive or supportive relational interactions. Children

placed outside their homes through various organizations were often utilized to complete labor tasks that benefited families or the organizations that cared for them. They were not nurtured or taught how to establish and maintain familial relationships (Longley, 2020). Although the relationships provided a home and food for the child, the placement did not contribute to their social development. Hence, the children lacked the appropriate skills to build nurturing and supportive relationships during their placements.

The mentioned organizations aimed to help needy children. However, the orphan train migrations to strangers' homes in the Midwestern and Southern States often led to abuse, neglect, and estrangement from their biological families and familiar environments. Children living in strangers' homes were treated as servants, responsible for maintaining the household and property, rather than being viewed as part of the family. Longley (2020) noted that the children were often selected based on physical attributes and their ability to work on farms. Specific requests were placed for certain skills, hair color, complexion, and size. Unchosen children were taken to the next train stop until all were given to a family. Additionally, there were no means to ensure that the homes where the children lived were safe, as there were no mechanisms to perform criminal and child abuse background checks to determine whether the soon-to-be guardians were safe. Some results of the orphan trains were the abuse and neglect of children during their time in the homes and the loss of connections and relationships with their biological families (Longley, 2020). Due to the abuse and neglect sustained, children ran away from their newly placed homes, became homeless in an unfamiliar place, and lacked social connection and support. They lived independently, as many had been placed on the orphan train and had no voice or choice in where they would be placed. The children did not have trusting, secure, and stable relationships with anyone to depend on and often had to fend for themselves.

A significant concern developed for the well-being of children, which led to the creation of the US Children's Bureau in 1912 to provide oversight and monitoring processes for children's services (Administration for Children and Families, 2023).  The US Children's Bureau was the first federal agency focused on the well-being of children and families. Since its inception, the US Children's Bureau has worked on issues related to foster care, juvenile delinquency, orphanages, abuse and neglect, and child labor (Administration for Children and Families, 2023).

Kemp (1962) created and developed guidelines for identifying and reporting child abuse or neglect for physicians but no other professions that interacted with children and families. There was an apparent need to develop such guidelines for other professionals who worked with children and families. Kemp's (1962) guidelines allowed for the development of the Child Abuse and Prevention Act, which provided legislation for the reporting and monitoring of child abuse and neglect.

**Child Abuse Prevention and Treatment Act**

Congress signed the Child Abuse Prevention and Treatment Act (CAPTA) into law in 1974 (Child Abuse Prevention and Treatment Act of 1974). CAPTA is a federal legislature that provides grants to states for preventing child abuse and neglect. It also improves processes and systems that respond to abuse and neglect and funds training research on reducing maltreatment. CAPTA is one of the first laws enacted to protect against child abuse and neglect. However, prior to CAPTA, other organizations, such as the Children's Aid Society, The New York Foundling Hospital, The New York Juvenile Asylum, and The American Female Guardian Society, were developed to provide aid and protection to abused or neglected children. The New York Society for the Prevention of Cruelty to Children was founded in 1874 and incorporated in

1875 as the first child protection agency (New York Society for Prevention of Cruelty to Children, 2023).

CAPTA shows how the child welfare system evolved from the 19th to the 20th century and has some oversight and monitoring overall. CAPTA was the first step by the federal government to provide guidance and oversight and monitor the child welfare system. Various laws and legislation have continuously been enacted to provide oversight and monitoring of child welfare institutions, organizations, and interventions. The addition of oversight and monitoring and the introduction of state and federal legislature opened the realm of child welfare and reviewing the interventions in place and whether they were successful, helpful, or relevant to those receiving services. Foster care has been used as an intervention for the orphaned, abused and neglected since the 19th century. It has been reviewed, researched, and improved over time. However, in the past, children were put on trains and sent to unknown caregivers, which caused separation from their families and familiar environments. Foster care provides temporary home placements for these children, but not all have a positive experience.  Many children lingered in care. Children were moved from foster home to foster home, causing fragmented social connections and instability, and thus the Adoption and Safe Families Act was enacted into law in 1997.

**Adoption and Safe Families Act**

The Adoption Safe Families Act (ASFA) was initially signed into law on November 9, 1997, and is in place to ensure reasonable efforts are attempted by child welfare professionals regarding reunification, safety, and permanency of children and adolescents (Adoption and Safe Families Act of 1997).  ASFA laid the groundwork for states and child welfare organizations to establish quality measures for standards of care, assess state performances, and conduct criminal

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background checks for foster parents. In addition to ensuring safety, reasonable efforts, and permanency, ASFA also included provisions related to healthcare and other important aspects of foster care. The Act has been instrumental in improving the welfare of children in foster care across the United States (Adoption and Safe Families Act, 1997). One small portion of ASFA focuses on preventing children from being in a foster care placement or out-of-home placement (e.g., Residential Treatment Facility, Long Term Residential Facility, Kinship Foster Care Home, etc.) for extended periods or spending their entire child or adolescent years in an out-of-home placement without permanency. According to ASFA, terminating a parent's parental rights can begin if a child has been in placement for 15 out of the last 22 months (Adoption and Safe Families Act, 1997). However, certain circumstances, such as abandonment, voluntary surrender of parental rights, parental death, extended prison sentences, severe abuse, neglect, etc., allow the termination hearing to proceed before the 22-month mark (Adoption and Safe Families Act, 1997). ASFA can affect the amount of time a child spends in foster care, depending on the resources and services the parent needs to complete for reunification. However, the permanency time limit may not always align realistically with the required service, which can lead to youth and adolescents remaining in foster care for extended periods. This separation from their families can create a disconnect, and the longer they are apart, the harder it is to maintain a strong connection and bond. The Family First Prevention Act was signed into law in 2018 to support the building and nurturing of supportive connections.

**Family First Prevention Services Act**

The Family First Prevention Services Act (FFPSA), which became law in 2018, aimed to reduce the number of children and adolescents placed outside of their homes and provide necessary services to families in their homes (Children's Bureau, 2020). Keeping families

together minimizes the trauma of removing a child from their home and allows for therapeutic services to be provided to the family unit in their environment. This approach enables all aspects of what led to child welfare intervention to be addressed while utilizing all the child's environmental systems in the service provision process. States can also use Title IV funding to deliver services that prevent removals from the home, providing more significant support for children and families and keeping them together. FFPSA also allows young people to remain in foster care or independent living services until they are 23, providing additional support and services and extending educational and vocational training until they reach 26 (Pennsylvania Department of Human Services, 2023).

In summary, the evolution of child welfare is evident through the continual implementation of legislation directed at oversight and monitoring and the development of measures to ensure stability, permanency, and support for children and families. The initial focus was on defining and protecting against abuse and neglect, revising child protection measures, encouraging adoption to avoid long-term foster care placements, and, more recently, providing support and services to maintain families in their natural environments. The continued progression towards improving child welfare interventions, including building, and maintaining familial systems, is a positive step towards ensuring children and adolescents have access to social support networks and systems.

**Problem Statement**

Foster care placement continues to evoke conversation on whether it is an effective intervention for children and adolescents. Youth and adolescents in foster care placements have trouble building supportive, lasting social connections due to instability in foster care placements and lack of trust (Carmicheal et al., 2018). In 2021, about 206,812 children entered foster care,

and there were about 391,098 total children in the foster care system in the United States (Statista, 2022). Children of any age can enter foster care from birth up until 17 years of age.

Young adults aging out of the foster care system are typically between 18 and 21 years old. In 2022, the US Department of Housing and Urban Development released an annual report detailing the number of people who experienced at least one night of homelessness in 2021. The report noted that over 300,000 people experienced at least one night of homelessness; of these, more than 15,000 were under 25 years old (U.S. Department of Housing and Urban Development, 2023). While homelessness is one example of a negative social outcome, another correlation is the lack of social support, which increases rates of incarceration and mental health diagnoses. Research notes that 25% of young adults who have aged out of foster care will be involved in the criminal justice system within two years of leaving foster care (Anspach, 2018; Perez, 2021).  Additionally, statistics note that 50%-75% of youth entering foster care have behavioral challenges that require mental health intervention and treatment. Youth in foster care have higher rates of mental health challenges than their peers (Baker et al., 2017). Patterson et al. (2015) noted foster care placement as a precursor to mental health diagnosis and substance abuse use amongst adults who were in foster care during their youth and that there is a more significant number of psychiatric diagnoses amongst homeless adults who were in foster care.

When placed in foster care, the children's different ages and developmental stages can impact each child differently. However, the change in environment from their family home to an unknown home, environment, and location affects the children, too. Hint and Leon (2022) discussed the correlation between the loss of ecological components such as school, family connection, and church and well-being. Losing connections to family and support systems

impacts social relationships and outcomes since a social support system is often difficult to build or not maintained through one's time in foster care placement.

All families' situations are different, and while removing the child may be the best and safest option in the immediate moment, the intervention may not be best overall. Previous research studies regarding foster care placement and out-of-home placement have focused on how placement impacts children and adolescents. This research study explored the effects of social connections in foster care on youth and one's social outcomes.

**Statement of Purpose**

Child welfare organizations provide interventions and access to resources for children, adolescents, and their families when there is a concern regarding safety, neglect, or abuse. When the least restrictive child welfare interventions are unsuccessful in children and their families remaining together, then foster care placement is utilized. Foster care placement is intended to be a temporary placement of a child away from their home until safety issues within the family are mitigated. The foster home consists of an adult who has received training through the State and local child welfare organization, completed criminal and child abuse background clearances, and received a license to care for children found unsafe in their family homes. The purpose of this study was to explore the long-term consequences of a lack of social connections experienced by children during their time in foster care. Specifically, it aimed to understand how social connections and relationships affect social outcomes. Understanding the effects of social connections during foster care is essential for effective social work practice. Child abuse and neglect are serious issues within the child welfare sector, and they can lead to various social problems, including substance abuse, mental health issues, poverty, homelessness, and criminal justice involvement. The results of this research provided valuable insights into the impact on

youth and will help inform the development of child welfare policies to enhance positive social outcomes and improve foster care services or interventions.

**Aim and Research Question**

This research study explored how relationships and social connections during foster care impact children and adolescents' social outcomes. The study evaluated the following qualitative research question:

RQ: How did relationship experiences within foster care affect social outcomes?

## Theoretical Framework

This section outlines the theoretical framework that emphasizes the role of relationships in a child or youth's development, ultimately leading to positive social outcomes after their discharge from foster care. Foster care programs aim to ensure the safety and well-being of children while their parents work towards their return. However, it is worth noting that when children and adolescents are placed in foster care, they may lose connections to familiar environments and relationships, leading to adverse social outcomes (Hint & Leon, 2022). This research study explored the impact of social connections in foster care on children and adolescents' social outcomes. To achieve this, the researcher explored the Social Exchange Theory as the theoretical framework. This theory allowed us to understand how relationships within the foster care system affect social experiences and relationships. Examining these factors will help improve the foster care system's practices and policies to better support children and adolescents in developing social support during placement and after their release from foster care.

**Social Exchange Theory**

George C. Homan introduced Social Exchange Theory, a sociological and psychological concept (Rice & Cook, 2016). He defined Social Exchange Theory as an exchange of activities between individuals, where the interaction's benefit or lack thereof is evaluated by those involved (Rice & Cook, 2016). The development of relationships among people is based on a cost-benefit analysis process. The cost is viewed as the negative value and impact of the relationship, while the benefit is the positive value and impact of the relationship (Lemert, 2021). The experiences, interactions, and relationships of children in foster care significantly influence their perceptions and social outcomes related to emotional and social development throughout their teenage years and into adulthood.

This theory aligns with understanding the individual perceptions of those in foster care because these perceptions are developed and formed based on the interactions, experiences, and relationships that have been established, whether negative or positive, over time in foster care. The relationships children develop during adolescence play a role in their development into adulthood. They influence the perceptions and social outcomes related to emotional and social development. The exchange of activities between one in foster care, the foster parent, social worker, therapist, etc., impacts their overall outlook and how they form, define, and build a social support system. A social support system can be formed if the interaction is beneficial and promotes trust and stability. Rosenberg (2019) defined social support as relationships that make an individual feel cared for and part of a wider community. When the interaction is not beneficial for any reason (continued abuse, multiple foster care placements, inconsistencies in assigned workers or therapist), that decreases trust and stability, adversely impacting the potential of a

social support system being formed. Individual perception is rooted in personal experience and understanding how early relationships play a role in the impact of an overall experience was reviewed and analyzed throughout this study.

Children and adolescents often do not have the option to choose their foster home placements, their social worker, their therapist, or the people they interact with while in foster care. They do not have the ability to decide who they must trust, and building relationships with them affects their sense of self and belonging, which in turn impacts their level of trust. McTavish et al. (2022), Munford (2022), and Carmichael et al. (2018) each discussed the importance of including the youth in their child welfare process decision-making and how support and social connections improve social outcomes. When they are not included in the process and decisions, the relationships become a cost-benefit analysis of the child building relationships for survival and necessity versus a nurturing and supportive relationship. The child may not feel welcomed, nurtured, or loved but receives necessities such as food, shelter, and clothing. These relationships, at times, can be at the detriment and the cost of a child's social development and growth because they lack the necessary skills to learn how to trust and build secure and attachment-based influenced relationships.

Children build relationships with those in their familiar surroundings based on familiarity, trust, and stability. Disruptions to any system within their direct or indirect environment, such as changes in foster care placements, school settings, therapists, social workers, childcare, or transportation schedules, etc., impact the ability to build and form relationships, which then impacts forming a social support system beyond foster care placement. Carmichael et al. (2018) focused on the impact various foster care placements had on youth in foster care and the continued disruptions in relationships and connections the multiple placements have on youth.

The multiple foster care placements negatively impacted social connections in schools with biological family, friends, etc. The relationships were not maintained and lacked substantial development, which hindered how the youth viewed relationships and social connections throughout the years in and out of foster care.

Children and adolescents in foster care are exposed to traumatic experiences that have long-lasting negative impacts, such as health problems, mental health challenges, and difficulty forming relationships (Bartlett & Rushovich, 2018). They experience these negative impacts due to family disruption and placement in multiple foster homes, which leads to experiences of separation and loss, further worsening the areas noted above (Bartlett & Rushovich, 2018).

Trust and stability within relationships are developed based on compassion, empathy, and inclusivity regarding an individual's life situation and experience. When one feels as though they are included in decisions about their life and circumstances and experience being seen and heard, they can begin to feel a level of support and connection. This component of relationship building encompasses a cost-benefit perspective, which determines what level of trust is gained in conjunction with whether forming a relationship is beneficial.

Maintaining social support throughout the foster care placement and beyond has been found to have a positive impact on social outcomes. Hindt et al. (2022) note that children and adolescents in foster care lose connections to familiar environments and relationships, which research has shown can result in adverse social outcomes.

In summary, Social Exchange Theory offers a personalized and individualized perspective on how relationships and social connections in foster care can impact an individual's life even after they leave the foster care system. This study provides valuable insight and context for a mezzo-level intervention in the foster care system by examining the experiences of those

personally affected by foster care. Foster care is an evolving service that is provided to children

and families. However, gathering direct narratives and thoughts from those who have already

received the service is important to bring about productive changes for those currently in foster

care.

**Chapter 2- Literature Review**

This chapter consolidates research on the impact of relationships and social connections on the social outcomes of youth after leaving care, which informed this study. A comprehensive literature review was completed using Millersville University Library, Google Scholar, JSTOR, Psychnfo, PubPsyc, and Science Direct. The keywords used were "foster care," "impact of foster care placement," "outcomes of foster care placement," "the social impact of foster care," "impact on youth in foster care," "youths' perception of foster care," "relationships" and "social supports". The literature review was limited to peer-reviewed, full-text English articles published in the past decade (2013-2023).

The results focused on the following: (a) youth who were currently in foster care, (b) people who were no longer in foster care, (c) people who have interacted with youth and parents with child welfare involvement, and (d) people who had no direct involvement with foster care. The studies also discussed youth outcomes related to relationships and social connections developed in foster care. The research noted social connections as a protective factor against the risk of entering the juvenile detention system and mental institutions or becoming homeless. Lack of social connections was also a risk factor related to a lack of skills to obtain and maintain employment and earn a sustainable income, being incarcerated within 2-6 years of no longer being in foster care, exposure to sex and human trafficking, and substance abuse use. The length of stay of youth in foster care was also considered in the literature review but did not significantly affect the social outcomes. However, it was noted that youth having the opportunity to remain in foster care until 21 years of age experience positive social outcomes as access to services and opportunities to build social support systems are available (Dworsky et al., 2013; Fowler et al., 2017; Rosenberg, 2019; Kelly, 2019).

**Social Support and Relationship Impact**

Rosenberg (2019) defined social support as relationships that make an individual feel cared for and part of a wider community. Best et al. (2020) and Rosenberg (2019) explored what social support meant to youth and young adults in and aging out of foster care. The common examples are aligned with trust, relationships, connectivity, transparency, finances, and guidance. Lack of stability during a youth's time in foster care leads to and is attributed to a cycle of instability and a lack of social support and relationships upon their discharge from foster care or aging out of the foster care system.

Ie et al. (2022) explored the perception, definition, and views of family to current foster youth and foster youth alumni. Family was defined as biological, non-blood related and included persons the youth did not live with (Ie et al., 2022). While Ie et al. (2022) noted various definitions of what a family was or consisted of, the commonality among the study was a discussion about relationships and social supports and connections. Family was viewed as being equivalent to a support system, including communication, support, love, close relationships, unconditional acceptance, tolerance of differences, and no boundaries to love, to name a few. The family was connected to their teachers, social workers, friends, and other people they developed relationships with during their time in foster care and built trusting connections with (Ie et al., 2022).

Children and adolescents in foster care are exposed to traumatic experiences that have long-lasting negative impacts, such as health problems, mental health challenges, and difficulty forming relationships (Bartlett & Rushovich, 2018). They experience these negative impacts due to family disruption and placement in multiple foster homes, which leads to experiences of separation and loss, further worsening the areas noted above (Bartlett & Rushovich, 2018).

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When youth leave foster care either via reunification with their families, adoption, or are discharged because they have reached young adulthood, there can be continued life challenges and adversities. Young adults who age out of foster care do not always have a permanent residence or place to live, often leading to homelessness. Dworsky et al. (2013) noted that 11%-36% of young adults aged out of foster care experienced homelessness. Fowler, Marcel, Zhang, Day, and Landsverk (2017) argue that there are over 20,000 young adults who age out of foster care annually and, when aging out of foster care, lose their access to services provided to them during their time in foster care, such as housing. The Annie E. Casey Foundation (2023) notes that 30% of the youth aged out of foster care annually experience some form of homelessness.

The risks that contribute to homelessness are youth who have run away from their foster care placements, trauma before entering foster care, lack of social connections and relationships, child welfare involvement, and frequent placement changes (Dworsky et al., 2013; Fowler et al., 2017; & Kelly, 2020). Similarly, there are protective factors against homelessness, such as connection and relationship with family or an adult and the ability to remain in foster care until age 21, which allows for additional time to build and strengthen support systems (Rosenberg, 2019 & Best et al., 2019).

In 2022, the US Department of Housing and Urban Development released an annual report detailing the number of people who experienced at least one night of homelessness in 2021. The report noted that over 300,000 people experienced at least one night of homelessness; of the 300,000, over 15,000 were under 25 years old (The US Department of Housing and Urban Development, 2023). Young adults aging out of the foster care system are typically between 18 and 21 years old. In some instances, youth who have not aged out of foster care but have instead run away are also at greater risk of experiencing homelessness (Kelly, 2019). Jones (2014) noted

that the average young adult leaves home at 23 but returns home when necessary and finally

transitions out of their home at the age of 28. Young adults age out of foster care between the

ages of 18 and 21, do not have a home to return to in a time of need, and do not have the support

system that their peers who were not in foster care have. Lacking a solid support system is the

risk of adverse social outcomes.

Greeson (2013) correlates the connection between youth aging out of foster care, also

known as "emerging adulthood," the connection to a developmental stage in their lives, and the

difficulties youth have during this stage due to the lack of familial support systems. A possible

protective factor discussed within the study is mentoring /mentorship relationships between

young adults and older adults. This relationship provides security, support, and guidance for

young adults aging out of the foster care system, so they have some form of connection.

Mentoring relationships have also been linked to less risky behaviors exhibited by young adults

and provided a positive outlook on life for young adults. However, one limitation discussed

regarding mentoring relationships is the difficulty in building those connections because of one's

lack of ability to trust adults given their historical experiences and relationships that were not

positive or beneficial to them (Greeson, 2013). A lack of positive experiences with adult

relationships leads to strained connections and relationships and mistrust when attempting to

build relationships.

McTavish et al. (2022), Munford (2022), and Carmichael et al. (2018) each discussed the

importance of including the youth in their child welfare process decision-making and how

support and social connections improve social outcomes. Including youth in their processes and

discussions about support services and relationships equates to positive social outcomes both

during and after discharge from foster care placement. In addition to inclusivity about case

decisions and transition planning, the studies noted transparency and honesty as age-appropriate with youth regarding placement disruptions, permanency, etc., which appears to be beneficial regarding relationship building and trust between the youth and social workers.

Carmichael et al. (2018) also focused on the impact various foster care placements had on youth in foster care and the continued disruptions in relationships and connections the multiple placements have on youth. The multiple foster care placements negatively impacted social connections in schools with biological family, friends, etc. The relationships were not maintained and lacked substantial development, which hindered how the youth viewed relationships and social connections throughout the years in and out of foster care.

The Juvenile Law Center (2022) reports that 90% of children who experience five or more foster care placements will enter the juvenile justice system, and youth in foster care are 67% more likely to be involved with the criminal justice system (Juvenile Law Center, 2022). The lack of stability within foster care placements increases the risk of incarceration, decreasing the potential for building a positive social support system, which is a protective factor against incarceration and other negative social outcomes.

Researchers have explored correlations between the foster care-to-prison pipeline (Anspach, 2018; Font et al., 2021; Yamat, 2020; & Crawford et al., 2017). The foster care-to-prison pipeline describes practices and policies that lead youth in the child welfare system to the criminal justice system (Anspach, 2018). Practices and procedures that increase the rate of incarceration amongst youth in foster care begin with the initial removal of a youth from their biological parent. Removal of youth and placement into a system that may not provide adequate services or treatment, safety, structure, and stability exacerbate risk factors for incarceration.

Research notes that 25% of young adults who have aged out of foster care will be involved in the criminal justice system within two years of leaving foster care (Anspach, 2018; Perez, 2021).

Youth are also at a higher risk of having law enforcement called as the default reaction to managing immediate issues or concerns by foster parents. When foster parents call law enforcement on youth, this can lead to the youth being arrested and spending time in juvenile detention centers or adult county jails, depending on their age, which leads to a direct correlation of adult criminal justice involvement (Anspach, 2018).

Yamat (2020) argues that the lack of training and education for foster parents on the mental health and behavioral health needs of children and trauma-informed practices often leads to the foster parents resorting to calling law enforcement to de-escalate situations within the foster homes as the first line of defense. When a foster parent introduces law enforcement into a foster child's life, the risk of that child becoming involved within the juvenile justice system increases. Crawford et al. (2017) and Anspach (2018) note that one of many risk factors related to involvement with the criminal justice system is the lack of a support system (e.g., parents, guardians, advocates) for the youth in placement and placement instability.

Another risk factor Font et al. (2021) noted is youth reuniting with their guardian or parent. Youth who reunited have a higher rate of incarceration than youth who aged out of foster care. Also, those who continued in foster care have access to various resources and support that those reunited with their families do not have access to. Despite this notion, Font et al. (2021) noted that reunited youth with their families needed more support than those who remained in foster care placement.

As noted above, criminal justice involvement is a social outcome for youth in foster care and for youth who have aged out of the foster care system. The common themes in the literature

about criminal justice involvement and foster care are a lack of placement stability, trauma-informed care, abuse and maltreatment, and social support networks. Foster parents, school staff, and others who interact with youth in foster care and youth who have aged out of foster care should be adequately trained and educated on how to navigate behavioral and mental health behaviors instead of contacting law enforcement authorities. Understanding how to work with trauma can end the initial introduction of the child welfare system to the criminal justice system. Building a rapport and supplying a stable and safe environment for youth to express themselves and receive the care they need can also reduce the involvement of law enforcement. Juvenile crimes and convictions can be a pathway to adult criminal activities and convictions if the youth do not receive the resources and support needed to change the behavior that contributed to them being involved with the criminal justice system.

Changes in social connections and various foster care placements also lead to increased mental health challenges and diagnoses (Tan et al., 2023). Instability can cause behavioral issues, which may result in even more changes in placement. As a result, the need for mental health services may increase, but the inconsistency of access and use of these services can also be disrupted. Foster care placements of youth are not always near their primary residence, which often results in changes in school, extracurricular activities, religious activities, and medical and mental health services, hence severing their social connections.

Patterson et al. (2015), Keefe (2021), and Baker et al. (2017) explored the correlation between foster care placement and mental health diagnosis. Research notes that 50%-75% of youth entering foster care have behavioral challenges that require mental health intervention and treatment. Youth in foster care have higher rates of mental health challenges than their peers (Baker et al., 2017). Patterson et al. (2015) noted foster care placement as a precursor to mental

health diagnosis and substance abuse use amongst adults who were in foster care during their youth and that there is a greater number of psychiatric diagnoses amongst homeless adults who were in foster care. In addition, Tan et al. (2023) and the American Academy of Pediatrics (2023) show mental and behavioral health as the most significant unmet health needs for children and adolescents in foster care.

Tan et al. (2023) explained that one risk factor contributing to mental health challenges in youth is instability in their living arrangements. As a result of the loss experienced by the youth, they exhibit behavioral issues in placement, resulting in being prescribed psychotropic medication to manage identified behaviors. Baker et al. (2017) and Roos et al. (2014) noted that youth in foster care commonly experience symptoms related to psychotic disorders, anxiety, depression, aggression, and post-traumatic stress disorder. However, Keefe (2021) argued that the five most prevalent mental health diagnoses for children in foster care were (a) depression, (b) conduct disorder, (c) bipolar disorder, and (d) developmental and motor disorders. These diagnoses require mental health treatment to decrease and manage symptoms. The mental health treatment included therapy and sometimes prescribed medication, monitored by a physician (Keefe, 2021)

Medication management treatment specific to youth in foster care is concerned with antipsychotic prescribing increasing by 4.9% with each change in foster care placement, additional prescribing of medication increasing eight times with each change in placement after the initial prescribed antipsychotic medication (Tan et al., 2023).  Simmel et al. (2021) noted that youth in foster care are prescribed antipsychotic medications at a rate of 2-4.5 times higher than their peers. Additionally, they receive higher recommended doses and are prescribed medications for off-label purposes (Tan et al., 2023). Furthermore, Tan et al. (2023) noted each change in

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foster care placement attributed to an increase in mental health diagnosis and antipsychotic prescribing for youth in foster care.

The overall outcomes of the research in this literature review were mixed; some results were positive and showed how foster care might have a positive impact on youth, and some results were negative and showed a negative impact on youth. Some results showed no significant differences in length of stay in foster care, education, or employment status. Despite this, the common theme related to relationships and social supports being protective factors against negative social outcomes. There was a familiar narrative in the literature about the lack of stability, connection, resources, and support, which enhanced the risk of homelessness, criminal justice involvement, and increased mental health challenges.

There is a need to evaluate and assess the type of support and what will be most effective for fostering youth in foster care to allow for positive outcomes and success. As Munford (2022) and Pfister et al. (2021) discussed, engagement with the youth and transparency, honesty, and inclusivity are the gateways to the beginning of building trusting relationships between the youth and the social workers, which is the foundational relationship for the other relationships, developed during one's times in foster care.  Additionally, relational practices in social work are paramount to promoting and creating supportive alliances for the youth to ensure an understanding of their needs that will make them successful (Munford, 2022).

In summary, this study explored the impact of relationships and social connections in foster care on social outcomes and whether it is an effective intervention for children and adolescents. Children and youth in foster care often experience instability in their placements and a lack of trust, preventing them from establishing supportive and lasting social connections. Hindt and Leon (2022) found that losing ecological components such as school, family

connection, and church negatively impacts the well-being of children and adolescents in foster care. Losing connections to family and support systems can significantly affect social connections and outcomes, as a supportive social network is often not built or maintained during a child's time in foster care. The findings of this study can be valuable for social work professionals as it can aid them in creating practical tools to teach children and adolescents to establish social relationships while they are in foster care and after they leave care. This can help promote better social outcomes for all children and adolescents in the foster care system.

## Chapter 3: Methodology

This chapter provides a comprehensive overview of the research methodology employed to investigate the primary research question: How do relationship experiences within the foster care system impact social outcomes for individuals? The chapter will detail the specific approaches and techniques used in the study, including data collection methods and participant selection criteria. Additionally, the researcher will elaborate on the strategies implemented to ensure the trustworthiness and rigor of the research process, thereby enhancing the credibility of the findings.

As previously discussed in earlier chapters, this research study focused on examining the effects of interpersonal relationships on the social outcomes of children and adolescents after they have transitioned out of the foster care system. The investigation sought to understand the qualitative aspects of these relationships and their long-term implications for social integration, emotional well-being, and overall life satisfaction among the participants.

**Research Design**

This qualitative research study employed a phenomenological approach to explore participants' lived experiences, allowing them to freely express their thoughts, feelings, and perceptions about their time in foster care.  Thyer (2010) explained qualitative research as primarily interpretive and seeking to understand human experience from an individual's perspective. This methodology is particularly effective in capturing the essence of their experiences, revealing how they make sense of their past. The theoretical framework guiding this study is Social Exchange Theory, which posits that social behavior results from an exchange process to maximize benefits and minimize costs.

Creswell and Poth (2018) and Padgett (2017) discuss the first two study steps in conducting phenomenological research as determining if the intended study is best explored via a phenomenological approach and identifying a phenomenon of interest to study and describe the phenomenon. A firsthand account of the participant's emotions, thoughts, and feelings about their story will provide an insider's view and understanding of their experience in the foster care system. It was determined that this research was best suited for a phenomenological approach and aligned with the purpose of phenomenological research design due to the need to gather data based on the participant's experiences.

Padgett (2017) discusses phenomenological research as participants' experiences and the conditions surrounding the experiences in addition to finding common themes shared by the participants. Developing themes from the data received from the study participants helped categorize the information and assisted with the analysis. The phenomenological approach aligned with the intended outcome of this study to understand and describe the participants' lived experiences and how they may or may not have been impacted by those experiences.

To ensure the ethical data collection for this research, the researcher took necessary steps to obtain Institutional Review Board (IRB) approval from Millersville University in Pennsylvania on December 13, 2023.

**Participant Sampling**

Purposive sampling was used to select participants for this study. This technique involves choosing individuals based on specific criteria relevant to the research (Creswell & Poth, 2018). The participants included individuals who have experienced foster care and could provide insight into how this experience has affected their social outcomes. The sampling method employed a

snowball strategy, where existing participants referred others who met the criteria (Creswell & Poth, 2018).

This study yielded six participants (n=6), aligning with Padgett's (2017) recommendation for phenomenological research. The recruitment process continued until the concept of saturation was achieved. Creswell and Poth (2018) state that saturation is reached when the researcher no longer finds new information that adds to their understanding of the study category. This process ensures that the findings are robust and comprehensive, capturing the essence of the participants' experiences without redundancy (Padgett, 2017).

The focus was on individuals aged from age 18 to 45 years, from diverse backgrounds in terms of gender, race/ethnicity, and occupations, who had spent time in foster care after the Adoption and Safe Families Act (ASFA) was enacted on November 9, 1997. Concentrating on individuals placed in foster care after the implementation of ASFA allowed for a more cohesive sample during a similar timeframe and under the same legislative framework. The ASFA established quality measures for standards of care, evaluated state performance, and mandated criminal background checks for foster parents.

**Data Collection**

Approval for this research study was granted by the Institutional Review Board (IRB) at Millersville University in Pennsylvania. This marks an essential step in ensuring the ethical conduct of the project. The recruitment process commenced with the researcher actively reaching out to potential participants. The focus was on individuals who were at least 18 years old and who had experienced life in foster care after the Adoption and Safe Families Act was enacted on November 9, 1997. This law aimed to promote the safety, permanency, and well-being of children in the foster care system, making it crucial for the study to include participants who had

lived through the post-implementation effects of this legislation. By targeting this specific demographic, the researcher aimed to gather insights reflecting foster care experiences' long-term impact on individuals' lives. These individuals were personally known to the researcher. After each interview, each was asked if they could refer others who may be interested in participating in the study, which aligned with snowball sampling employed in the study. Additionally, a requirement for participation was that the individuals no longer be under the supervision or monitoring of any child welfare agency. This allowed for a concentrated sample of participants in foster care during a similar timeframe.

The recruitment process for this study was conducted through email invitations (see Appendix D) sent to individuals known to have experienced involvement in the child welfare system, specifically foster care, during or after the signing of the Adoption and Safe Families Act (ASFA) in November 1997. The participants were known individuals who had presented at child welfare workshops and training sessions or openly discussed their experiences in a social service setting. The email included a link to a Qualtrics survey containing demographic questions (see Appendix A) to gather general participant information and obtain informed consent (see Appendix C). Once participants completed the Qualtrics surveys for demographic information and informed consent, the researcher carefully reviewed their responses to ensure all participants met the established criteria.

Eight participants (n=8) responded to the email invitation for recruitment. The Millersville University Qualtrics software, which contained the surveys that collected demographic information as well as informed consent, which included the use of the Zoom Conferencing platform to hold the interviews and Zoom recording for transcription purposes, was reviewed to ensure all participants met the inclusion criteria. Six respondents (n=6) met the

requirements, while two (n=2) were excluded from the study because their survey responses did not meet the inclusionary criteria. An email was sent to the excluded participants, thanking them for their willingness to participate. Two potential participants interested in participating in the study were referred. An email invitation was sent. However, they did not respond to initial or follow-up emails. Inviting potential participants was crucial to ensure that a snowball approach to increase sampling was implemented and that data collection was conducted ethically (Padgett, 2017).

The National Association of Social Workers' "Code of Ethics" (2021) 5.02. (e) states, "Social workers engaged in evaluation or research should obtain voluntary and written informed consent from participants, when appropriate, without any implied or actual deprivation or penalty for refusal to participate; without undue inducement to participate; and with due regard for participants' well-being, privacy, and dignity. Informed consent should include information about the nature, extent, and duration of the participation requested and disclosure of the risks and benefits of participation in the research" (p. 28).

After the recruiting participants met the study's criteria, emails were sent to schedule interviews at a time convenient to the participant. Once the participant agreed, the interview process began utilizing the Zoom Conferencing platform. The researcher chose a room that ensured privacy, employing a sound machine outside the door to maintain confidentiality. During the beginning of the interview, the participants were encouraged to select a private space to maintain their confidentiality and privacy, allowing them to engage in discussions from their preferred environment. The interviews were also recorded to ensure accuracy for transcription purposes. Recording and transcribing the interviews enabled the researcher to observe participants' non-verbal reactions and have a written transcript assisted while reviewing the data

for clarity and accuracy in responses. The questions during the interview were guided by a semi-structured interview guide, which consisted of open-ended questions related to the participant's specific experiences regarding relationships and connections during their foster care experience (See Appendix B).

On the interview day, the researcher carefully reviewed the signed informed consent with each participant to ensure their understanding regarding their participation as being entirely voluntary, and they could withdraw at any time without facing any penalty. The NASW "Code of Ethics" (2021) also states that in 5.02 (i): "Social workers should inform participants of their right to withdraw from evaluation and research at any time without penalty" (p. 28). The participants were also informed about the delicate nature of the interview topic and offered counseling resources if needed after the interview. When researching delicate issues that may trigger past traumatic events, it is significantly crucial to provide participants with access to supportive services if needed. The NASW "Code of Ethics" (2021) 5.02 (j) "Social workers should take appropriate steps to ensure that participants in … research have access to appropriate supportive services" (p 28). It further states in 5.02 (k) a that social worker engaged in … research should protect participants from unwarranted physical or mental distress, harm, danger, and deprivation" (p. 28).

Following the Millersville IRB policy and procedure, the data collected from this study were stored in a password-protected, privately owned laptop and a passcode file. Participants' names and other identifying information were reidentified and assigned a number. The NASW "Code of Ethics" (2021) 5.02 (o) states that "social workers should protect participants' confidentiality by omitting identifying information . . ." (p. 29). The data collected will be stored for three years and discarded after the period has lapsed under Millersville University IRB

policies and procedures. The interviews lasted between 30 minutes and an hour, depending on the participants' engagement and the depth of their responses.

**Data Analysis**

To analyze the data, the researcher used the four steps of phenomenological analysis, which involved summarizing each participant's experience, grouping similar statements into themes, reviewing the data to examine the context of the experience, and summarizing meanings into essences (Padgett, 2017). The researcher used a memo-writing technique and observation of non-verbal reactions to document thoughts and ideas that emerged while reviewing and observing data. Observing non-verbal reactions allowed for a deeper understanding of data, including facial expressions and body language correlating with verbal responses (Denham & Onwuegbuzie, 2013). This technique allowed the researcher to record notes and thoughts while reviewing the interview recordings and transcripts, which assisted in developing initial themes.

After developing initial themes, such as 'Positive,' 'Negative,' and 'Family,' the researcher used an open coding approach with a sensitizing concept. This involved reviewing the data from a broader view and then narrowing down what to focus on while coding. For example, after developing an initial theme of 'Positive', the researcher then examined the code labels assigned and noted through the interview transcripts that defined or aligned with positive. Those examples included feeling included, trust, support, and love, which then developed an overarching theme such as a 'Sense of Belonging.' The researcher completed all coding via notes and memos in Microsoft Word. Code labels were developed to organize and define the statements and themes from the interviews. A codebook was then created, which included the code name, code description, and examples from the data

(Creswell & Poth, 2018). The codebook was used to analyze and develop an interpretation of what the research revealed, providing a comprehensive understanding of the participants.

**Trustworthiness**

Trustworthiness and rigor were introduced to determine the quality and significance of research and evidence within a qualitative research design (Thyer, 2010). It is defined by four criteria: credibility, transferability, dependability, and confirmability (Thyer, 2010). Within the four criteria, various methods exist to achieve trustworthiness. Two of the methods utilized to ensure trustworthiness through the course of this research study were confirmability (peer debriefing and reflexivity) and dependability (memoing). Thyer (2010) explains peer debriefing as allowing the researcher to explore their observations and exposing them to questions to process and feedback. Padgett (2008) defines reflexivity as the ability to examine oneself. This researcher used peer debriefing and reflexivity via notetaking, journaling, and conversation with colleagues in the Social Work field. Peer debriefing was specifically completed with social workers who had experienced working within the child welfare field. They provided insight into best practices versus what is implemented when working with children and families and possible ideas for improvement.  Documenting and acknowledging thoughts, emotions, reactions, and feelings that presented themselves while collecting and analyzing the data obtained limited this researcher's biases and allowed the researcher to confront and explore what subconsciously or consciously developed. Utilizing peer debriefing and reflexivity allowed the researcher to examine their own biases to avoid influencing participants' responses or outcome analysis of the study. Moustakas (1994) suggests that the first step in phenomenological data analysis is for the researcher to document their own experiences within the phenomenon to limit the influence of the experience. Having a list of the researchers' own experiences to review during a peer

debriefing session before analyzing the data practiced the concept of epoch, defined as the distancing of a personal experience (Padgett, 2017). In essence, trustworthiness is essential to qualitative research to avoid influencing participants' responses, misinterpreting data based on assumptions and biases, and informing policy at all levels of social work practice.

**Chapter 4: Findings**

This chapter presents the research findings and themes derived from the semi-structured interviews conducted with participants to address the overarching research question, 'How did relationship experiences within foster care affect social outcomes?' This qualitative study explored whether the participants attributed their experiences and interactions during their time in the foster care system to positive or negative outcomes in their social lives after leaving foster care placement. The participant's responses to the questions are documented in a complete narrative, rather than minimal captions, to provide the context of their experience, rather than extracting specific words that correlate with the research.

**Participant Demographics**

Six participants (n = 6) were interviewed for this research study. All participants were reidentified and assigned numbers for confidentiality, as shown in Table 1 below.  Of the six, five (83%) were female, and one (16%) was male. The average age of the participants was 28.8 years. While all the participants entered foster care placement at different ages, they all aged out of the foster care system at the ages of 20 and 21.  All identified their ethnicity as African American. Three of the six (50%) are employed in a position connected to or related to advocacy and child welfare. Two (33%) are youth engagement specialists; one (16%) was a peer advocacy coordinator but was recently promoted to a senior manager with the mayor's office and the other occupations consist of being employed at a law firm, as a security guard, and as a customer service supervisor. Additionally, all experienced foster care placement after November 9, 1997.

**Table 1**

*Participant Demographics*

| Participants | Age | Placement Type | Ethnicity | Occupation | Age in Foster |
|---|---|---|---|---|---|
| P. 1 | 30 | Kinship | African American | Youth Engagement Specialist | 13-21 |
| P. 2 | 30 | Kinship and non-Kinship | African American | Senior Manager | 2-21 |
| P. 3 | 29 | Non-Kinship | African American | Law Firm | 13-21 |
| P. 4 | 31 | Kinship | African American | Customer Service Supervisor | 4-20 |
| P. 5 | 25 | Kinship and non-Kinship | African American | Permanency & Youth Engagement Specialist | 15-21 |
| P. 6 | 28 | Kinship and non-Kinship | African American | Security | 14-21 |

**Semistructured Questions**

Four semi-structured questions were asked during the interviews, which resulted in participants providing answers that described specific examples of how they defined, built, and viewed relationships, as well as how those relationships and experiences affected their social outcomes. After careful analysis, six themes emerged, as listed in Table 2, which will be explained below. The themes discussed emerged from at least 50% of the participants.

**Table 2**

*Semi-structured questions, themes, and % of respondents represented*

| Semi-Structured Question | Themes | % |
|---|---|---|
| Q1. Describe the foster care placement in which you were placed. | Sense of Belonging | 66% |
| Q2. Describe the relationships developed while you were in foster care. | Professional Relationships | 83% |
| | Stigma/Hidden Identity | 50% |
| Q.3 What has your experience been with building relationships since your exit from foster care? | Trust and Support | 50% |
| | Healthy v Unhealthy Relationships | 50% |
| Q4. Is there anything you would like to share regarding how the relationships you encountered during foster care affected you, today? | Support | 83% |

**Q1. Describe the foster care placement in which you were placed.**

When asked this question, all participants specifically talked about whether they were in kinship or non-kinship placements. One theme that emerged from the participants, regardless of the type of foster care placement, was a sense of belonging. A sense of belonging was evident through the experiences discussed, where individuals felt welcomed, loved, and included.

**Sense of Belonging**

A sense of belonging emerged from opposing views. A sense of belonging was explicitly expressed in four (66%) of the participants, but two (50%) expressed they experienced or felt a sense of belonging while in placement because they were placed in kinship care with their grandparents, and two (50%) expressed feeling as they belonged in their non-kinship placements.

P.1 expressed: "My foster care experience was very different because I was in kinship. However, it was good of course, because it was my grandma, so it was kind of like first nature cause of course I know my grandmother and so the placement was normal."

P.4 expressed: "Well, I got lucky 'cause I was with my dad's mom and her husband/boyfriend at the time. So, I was with family". "Some people that were in the system had a different perspective than I did, or they just weren't as fortunate as I to get placed with my grandmother like you know, she didn't have to take me and I'm thankful for it anytime I think about it." "I don't think I lacked any type of love growing up."

P.6 expressed: "From the day they met me to the time I left the home, like they never treated me no different than who I was, or they never treated me like a foster kid. I always felt like I was their son. So that relationship, that relationship was important to me….it helped me understand that a person don't have to be blood related to you, to actually care about or actually have love for you. So that showed me that not all people just love within a family and stuff like that cause I was under the impression for a long time that people only love you know the people that's really around them."

P.3 expressed: "I felt like they were good, but they were in a place in life where I wasn't comfortable with like their religion, their rules and goals. I was there like I felt it was unfair and plus there was no voice for me…….it was certain things I wasn't able to do as a kid and I hated it."

However, P3. Was able to discuss: "Well my last placement that I was placed in, I have grown to adjust into the family. I became the family, even though we're not blood. We became family over the years."

**Q2. Describe the relationships developed while you were in foster care:**

  a. How did you build those relationships?
  b. What were the positive aspects of the relationship?
  c. What were the challenges within the relationship?
  d. What do you believe you gained from the relationship?

Question 2 and the sub-questions elicited more in-depth responses regarding the type of relationships developed and their influence during and after foster care placement. The themes that emerged from this question were professional relationships, stigma, and the concept of a hidden identity. Professional relationships provided a space for learning and personal development.

**Professional Relationships**

Five (83%) participants immediately referenced professional relationships when this question was asked. While they did transition into discussing personal relationships throughout the interview, personal relationships were not the initial focus.

> P.1 expressed: "I remember the first conversation we had like, it wasn't like you need to do Blah Blah Blah Blah! Her first question to me was like, What do you want to do with your life?" …" and her last question to me was like, I know I'm your caseworker, but how else do you see my role?" …" And I will never forget that." …"She wasn't bullshitting lying, she was real" …." She held herself accountable."…"There was always a follow-up like."

> "When I got into care, like I was an ou." …f-control teenager…my tenth-grade year I had 2 credits because I just wasn't going or going late." "I met with the education specialist and I'm going to shout out this service. Amazing." "And they were like, Oh, what do you wanna do? I'm like f school, I wanna be a bartender, whatever the case and the education specialist was like you not doing that, literally her words was we not doing that? Mind you she's an old white lady." "She worked with me in a sense of trying to like learn like what it is that I actually like to do and help me realize like different career choices."

> "I actually, honestly, I gained a lot. I feel like I gained my life in a sense of I was out of control, running away, getting into drama, I ain't gonna lie, like I was out. I was in the street."

> P.2 expressed: "So of course, with caseworker, I will say the Judge, legal aid and I would say on forced appearance and my foster care agency CEO." "So you know we are automatically appointed a caseworker. So that was given to me, so I kinda had no choice to build a relationship with that person as they was the most related person in my life." "To be transparent, after a while, when the agency started realizing I knew my rights, I started to be labeled as the problem child. So if they were not letting me know certain things, didn't want to meet with me. So the relationships kind of came from a negative situation and me just reacting and the behaviors that the system taught me. So I became very violent and I started breaking laptops and tearing up supplies, like you're not utilizing this to help me. That's when the CEO want to pop their little head out of the office. So now after 15 placements you wanna ask what happened. So I think the relationship building came from them like oh man, she know her rights now where did this come from and so a lot of them was just doing due to the policy and I don't think they really wanted to build the relationships with me, but it was a kind of thing keep your enemies close."

> "I gained a lot in terms of being a professional. When I was younger I didn't understand the other side of the working professional and I was just stuck in my situation. I didn't

understand workforce shortage, entry level jobs with caseworkers straight out of school and don't really understand the depth of the work." "But I think also, one thing is really being a strong advocate, it really came out just knowing your rights-being forced to learn policy, a lot of good things unconsciously came out of it."

P.4 expressed: "So the first thought that comes to mind would be caseworkers only because we had so many of them. So it wasn't consistent and by the time I'm actually opening up and getting to know them, it's kinda like now I'm switched to somebody else. So that was probably like the most inconsistent part of like the whole being in the system part."

"I'll be honest, I'm just, I'm an easygoing person, so I try to give people a chance from the gate. So I basically just gave everybody a chance in the beginning and then it kind of got to the point where if I liked this person, I personally feel like I if like them, if I gravitated to them, next thing, they're switching them out."…  "I never took anything personal at that age, or maybe I just didn't understand it at that age. And as an adult, now, I'm kinda like okay, well he just kept popping in and popping out like it just wasn't consistent."

"I learned how to interact with different personalities and different people. I know I can't always approach people the same way, everybody is different."… "Helped me when it comes to how I am and how I handle my friends and you know my family or just me being in work and trying to build relationships with people I don't know."

P.5 expressed: "What end up happening is like I had a therapist who I'm still connected with today. She's one of the people that I identify as a natural support in my life.".,"And so I used to just vent a lot about my experience and just what I was facing. And she was like, you know, I think you would really benefit from this youth advisory board like we're really trying to allow you to tell us, give us feedback, how was your time in care like what could have been done better."

"I got involved with the like a youth advisory board when I was in care and so like those relationships like my relationships, not only to like the youth that I met in those spaces but the relationship I was able to sustain and create with the agency that was housing our youth advisory board.".. "The adults who supported that youth advisory board as well are like a part of my natural support system."

"I found a lot of power in being able to share what I wanted about my story. It wasn't that I had to pour my hear out to these people…but I was able to share what I felt like was important. It was more about how I felt I was treated or how I was perceived and less about like all the trauma that I had been through."

P.6 expresses: "My mindset, my mindset was really based on ya'll get paid for this." "I'll speak for social workers at first for me when it came to social workers, a lot of people didn't want to deal with me so they best option was to give me this young black dude that they had for me and me and him, me and him connected because we were from Brooklyn,

for me we came up in the same struggles. We grew up running the same street stuff so that was kind of cool for me."

"I would say it was another caseworker I had, she was more like my youth coach. Honest to God, truth, I was acting out one day at my foster care agency and she's just like laughing honestly and it pissed me off. I kind of started cursing her out a little bit and she pulled me to the side and she spoke her peace and after that we both ended up you know, both laughing and then for me we just started talking and building a relationship." "She taught me a lot, like keeping myself in check, and how to handle business."

"I became a better person because of them people and because they sat in my corner and they wouldn't give up on me. It changed my mindset, so that's the biggest thing I gained was maturity and the mindset not to have that wall up." "I'm not scared. I'm not too scared to let them people in no more 'cause I trust people to be who they are for me."

## Stigma and Hidden Identity

Three (50%) of the participants specifically discussed their embarrassment about being in foster care, regardless of whether the placement was kinship or non-kinship. Stigma and hidden identity emerged via the discussions. Stigma revealed the negative connotation with which outsiders perceived the foster care system and those in foster care. Their hidden identity was manifested in keeping their foster care status a secret.

P.1 expressed: "I've always been afraid to tell, like a partner that I was in foster care because of the stigma that came along with it. So when I was a teenager throughout my life, like, you know dating I would go to the agency because they used to have meetings-and my friends or somebody would ask me what I was doing or where are you going and I'm like oh I'm just going over here like I will make up a lot of excuses and never wanted to be open, even like people that I had long term relationships with didn't know I was in foster care until probably a couple of years ago and then like they ask why you didn't say anything but to me it was embarrassing because I feel I feel like there's a stigma- oh your parents don't love you kind of thing -but as I got older I'm like of some people's parents passed away and they were in foster care, but as a teenager I was super embarrassed."… "it was easy because it was my grandma and it was just like my grandma and they never asked where's your mom- I don't know its so weird, cause I think once I became an adult and a late adult probably like almost 25 to be okay with it but there are still people I grew up with that don't know I was ever in foster care.".. "The stigma that comes with being in foster care like nobody loves you or kids is dirty, like I don't know, I just always heard negative connotations that goes along with it. And people don't understand the different reasons and aspects of why. Because it isn't always that. It

isn't that you were abused. It isn't always that you were starved, beaten in the closet and I had to learn." "Everything I was able to hide any and everything, like even my worker, she never came to my school. She really respected privacy, she would always come to the home but she never popped up at my school, ever, ever, ever."

P.2 expressed: "So police officers, what a start for me. Actually bringing out that hidden identity of me being in foster care as child, as you know, growing up, my age, being a foster child, was not accepted. You was considered nothing, you was made fun of, so I had to keep that identity hidden." "Then one day, my brother ran away from the foster home, it was an Amber alert and they found him and the police came to my school and handcuffed me so I wouldn't run away. And everyone thought I was a criminal but this was the first time I had to start telling people I was in foster care because I didn't want the label of a criminal."

P.5 expressed: "There's a certain stigma with being in foster care that you don't really think anyone else understands, or their judgment, or like foster care is almost sometimes equated with poverty as well like. If I'm in foster care then I'm poor, which isn't necessarily the case."…"And so I constantly felt like I had to lie to my people, my community around me that didn't know I was in foster care, and that really like burdened a lot of the relationships that I had, you know, just I just didn't feel like nobody understood me."

**Q3. What has your experience been with building relationships since your exit from foster care?**

      a. How did you build those relationships?
      b. What were the positive aspects of the relationship?
      c. What were the challenges within the relationship?
      d. What do you believe you gained from the relationship?

Question 3 and the sub-questions focused on relationships developed since exiting foster care. The themes that emerged throughout this discussion were trust and support, and healthy and unhealthy relationships.

Three participants (50%) discussed trust and support in building relationships upon their exit from foster care and their experiences with connecting and forming relationships.

**Trust and Support**

P.2 expressed: "When I first exited foster care, I immediately aged out to homelessness"…."I'm telling you at this point because at this point I wasn't really fond of building relationships because I didn't trust no one, specifically adults. I grew a strong hatred for adults, because I feel like they were supposed to be the ones to be guiding me, but in reality they were ones that were truly screwing me"…"I end up joining a gang and felt like everything at the moment, it was safety, it was security, it was rules, it was books, it was education."…"What everybody did, it really hindered me building relationships, even if I wanted to, you know. So after I kind of got shot in the game, just started thinking, you know crazy, I kind of found an escape plan and in my escape plan, I met this lady and she was like yo, like the same thing, like yo, you so angry, you always fighting and yo, one day you just gone end up dead and I'm like, what the hell is this lady talking about. So from that moment, I say, you know what, let me give this lady a chance, an adult and see if whatever they talk me through is gonna work because at this point I have nothing to lose, nothing to lose you know, to try something new."…"And that lady really came into my life and I just listened to everything she said and it really worked out, you know, it really worked out".."It brought me back to life to reality, what to do, what not to do, really go and get help and things like that. So it was rough in the beginning and then I just trusted one person and just started trusting a process."…"..she was the first person that actually had a plan, so that was it. Then it wasn't just that she was telling you something is wrong, she was saying, I see something is wrong, but here's how we probably can fix it, cause I was wondering what was it about this person and I guess maybe I just at that moment I just heard her plan more clear cause I was tired of it. It kinda bought me back to that problem child. I was already deemed that in foster care, so now I'm out of foster care and I feel like I'm still that child, so maybe when other adults was talking to me my hatred was so strong I didn't hear it. But in that moment, I guess, because my back was really against the wall, you know, I saw something more clearer."

P.5 expressed: "I think since exiting foster care it's definitely a lot harder to build relationships. Because now it's on you, right? Like you're given the skills I your time in services and its modeled for you or its facilitated for you. And so no now, with those things not there, its on you to sort of own the facilitation of creating and maintaining those relationships, so for me I have been more open since when I first exited foster care"…"When I first got to college, I was like I'm not coming to college to make friends. I'm here to graduate, so I was really that girl that was like no I'm not looking for friends."…"ya'll know not to fuck with me…, you come with a certain guard up"…"I think my plan was just to be as invisible as possible."

"Like a lot of people told me I hold them at a certain distance in my life, or there's a guard there or I just have a general mistrust for people. I'm not very trusting to strangers….I think a lot of challenges with real relationships for foster youth, you trying to rebuild that part in your brain that can even accept connection."

"I know what I bring to the table as a friend, as a person, as a family member, whatever, so I sometimes need to see that from people before I'm willing to put myself out there

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wholeheartedly, authentically, to be accepted from them and that has probably limited me from maximizing friendships that I could have had with people just because I'm waiting on them to do it. And they're probably like well girl I'm not doing it….so its definitely hard because you just have a lot of preconceived notions about how people are, gonna perceive you or how you want to be perceived. …But the relationships that I built, the people that were able to break through that barrier are now like my life long friends and so the relationships that you do create tend to stick with you forever… But they tend to be scarce and far and few just because of how hard it is to get to that point." "I've gained having other people in my life, I think that's just an innate feeling that everyone wants to have people to rely on. You have that safety net that if you get in trouble you have someone that you can call on to you. And so I feel like being able to have that brings a world of security to the things that you might be experiencing and because of the relationships that I have, I feel like I'm in a place where I can focus on my dreams, my hopes and less about you know surviving cause I know its not just me alone in my corner trying to get it done. But I can so and so for this connection or so and so to help me out there and that's just a good feeling."

P.6 expressed: "When I first left foster care, I was living somewhere where I was around a bunch of new people, you feel me and like I was just not having my walls up and not being so just distant to myself and antisocial, just warming up to people. Actually being vulnerable to a certain extent so people could come and try to talk to me and stuff like that." …But life is a lesson and like everybody you sit with you may call your friend or you might be cool, hang with, might not really be for you. So….just as I went, I lived and learned and I came through it….at least I could say now a good, solid 7 or 8 friends that encourage me to do right, like they encourage me to be a better father. They encourage me to do better for myself. They encourage me to not sit here, not let my past be the judgment of my future and I really appreciate that because I could tell that its genuine because it don't necessarily be a time where I'm venting my problems and they're just giving a response, like they could look at my face and just know."

"And its not like fake friendships where we just cool or talk on social media, like my kids go play with their kids. And we like do Christmas and stuff together, host like Thanksgiving and stuff like that. So its cool like, I just like, its nice having people that you could connect with on your own you feel me and not be and feel like they got alternative motives."

**Healthy and Unhealthy Relationships**

Three (50%) of the participants mentioned healthy and unhealthy relationships that they were aware of after exiting the foster care system. Learning to differentiate between unhealthy

and healthy relationships was common among the participants, based on their experiences, as they navigated trust and support. Healthy and unhealthy relationships were explored by discussing the building of relationships after foster care placement.

> P.2 expressed: "I don't know what healthy relationships look like, even though I'm accepting relationships, I don't know what healthy relationships look like. So anything that felt healthy because I grew up so alone, I just."…I think, well you know I'm not naïve no more, so I know when something is not healthy, now do I utilize my tool for the best way to get out of it, and that's probably because I'm used to thriving in unhealthy situations"…" how do you undo all that stuff they learn 21yrs in such a short span of time like, how do I? "But I also have this thing where I have to figure out and my life is, how long do I owe someone? That's also another boundary, I don't know. I'll also want for the rest of their life, even if they help me with one thing, because help was not a common thing for me."

> P.4 expressed: "It's hard to make friends as an adult. So like schools, always easier, because you have the same classes and things like that. But like as an adult kind of you like you've been through so much. How do I know to trust as an adult?"

> "I guess, just me trying to help and fix everybody. I guess, cause I had so many helping hands with me growing up….its a blessing and a curse….because then people started to take advantage of you…it can be a catch 22 that I get taken advantage of right. I had people help me growing up and that's what I wanna do for somebody else."

> P.5 expressed: "I've had to continue doing therapy to understand how to be in relationships with people and have authentic relationships that I'm not building on false foundation."

**Q4. Is there anything you would like to share regarding how the relationships you encountered during foster care affected you, today?**

Question 4 focused on the participants' general thoughts on how the relationships they experienced during foster care have affected them today. The theme that emerged from their response was support. 83% of the responses discussed the foundation of support connected with relationships. Trust was established through discussions about vulnerability and allowing

someone to understand their concerns, needs, and wants. Support was connected to relationships, and having someone available for them without expectation.

> P.1 expressed: "I mean you know I think it helped me a lot grow as a person, as a mom, a professional. All that stuff" … "I wish, like other young people in care like, I know sometimes you can't really understand it when you're in your own funk, but then recognizing like even if you don't mesh with everybody in the agency its so good to just keep one connection, cause like look at me. I'm in social service. So how easy it is for me to get a recommendation or like support. So I do think its important to just even if there's the receptionist, like one relationship."

> P.2 expressed: "I think I tried to manipulate everything, even if I don't have to. I try to manipulate everything. I will try to find shortcuts for everything. My brain is filled with so many survival skills still."

> P.3 expressed: "It made me want to know what I want to be in life. So my main goal for my career is working with juveniles or working for the system that helps juveniles. Because I realized all of you guys, no matter if you guys are my social worker or part of my team, you guys still help me know what I wanted to be. So I didn't necessarily want to be a social worker, but working in that field, the law field fighting for juveniles. Watching everybody fight for me and wanted to know what was best for me made me pick my career and what I wanted to do in life."

> P.4 expressed: "My situation is different because I was with family, but I do feel like some people who were not with family, its kind of like the approach needs to be different, or the supports needs to look a little bit more different or structured for them because they don't have a family to go to. They don't have that."

> P.5 expressed: "The minute you're displaced from your family, from your unit, from your community, it does make you stick out like a sore thumb when you try to come back or when you want to fit in again, and its hard. And so we just have to be intentional about how we welcome our kids back into these spaces, how we remind them they still have a space there and its not on us to come back in and just fix all the relationships."

> P.6 expressed: "Like my first caseworker, I had a few, but the first caseworker was the dude I was talking about earlier, I would call him at 2 in the morning and be like meet me at McDonald's. I just need somebody to talk to Bro. He be mad, but he gonna be there for me. So that just showed me like that's the person I wannna be like. If a person calls me, it doesn't matter if its 2 in the morning, I might curse you out because you woke me up, but I'm still there for you. So its just like they just showed me, like certain principles and morals to have when you have people you care about." "I just wish like foster parents really like just listen to the foster kids sometimes and for foster kids to actually listen to the foster parents too."

## Chapter 5 Discussion, Implications, and Conclusions

This chapter discusses the themes that emerged from the research in the context of the existing literature and theoretical framework. After reviewing the study results in Chapter 4, it became evident that all participants emphasized the importance of supportive relationships. They provided insights into how they perceived and received support, which took various forms, including relationship building, access to services, family connections, education, housing, and more. The study also highlighted that having just one support person had a significant impact on the participants in foster care placement, providing them with a sense of belonging that affected their experiences both during and after their time in care. The discussions on support align with Best et al. (2020) and Rosenberg's (2019) exploration of support, which includes examples such as trust, relationships, connectivity, transparency, and guidance.

**Discussion**

While various themes emerged from the research, the overarching theme that connected all the themes was a sense of belonging, as this allowed for relationships to be fostered and developed with caseworkers, foster parents, and other individuals encountered during one's time in foster care placement. These relationships were built because *trust* and *support* were developed, which allowed for positive and meaningful interactions and, in turn, supported the development of healthy, sustainable relationships. Shipley et al. (2018) note that healthy relationships encompass mutual respect, trust, honesty, compromise, individuality, effective communication, anger management, problem-solving, understanding, self-confidence, and serving as a role model.

A sense of belonging was evident through discussions around feeling welcomed, loved, and included. The common component within this theme was *family*. Ie et al. (2022) define

family as biological, non-blood related, and includes people with whom the youth did not live. The authors also discussed how family is viewed as an equivalent support system, encompassing communication, support, love, close relationships, unconditional acceptance, tolerance of differences, and the absence of boundaries to love.

The responses aligned with the literature and the theoretical framework, Social Exchange Theory, in how support and relationships emerged as protective factors against adverse social outcomes and the cost-benefit of relationships experienced. A social support system can be formed if the interaction is beneficial and promotes trust and stability. Rosenberg (2019) defined social support as relationships that make an individual feel cared for and part of a wider community. The benefit of relationships allow space for vulnerability and trust, such as believing that family is not defined as only biological relatives; being loved by and allowing oneself to love someone who is not a biological relative, the ability to share feelings and emotions unconditionally without fear of judgment and also knowing there is someone in the world who without a doubt is present to support you in any way needed, in both bad and good instances (Best et al., 2020; Rosenberg, 2019; and Ie et al., 2022). The cost of relationships was manifested in negative behaviors or attitudes towards relationships and being guarded due to the lack of support received.

The study participants were placed in both kinship and non-kinship homes, where they were able to build relationships, feel supported, and learn to trust during their time in foster care placements. They were able to have positive and supportive connections regardless of whether they were placed with family or non-family.

Hindt and Leon (2022) found that losing ecological components, such as school, family connections, and church, negatively impacts the well-being of children and adolescents in foster

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care. A sense of belonging in foster care is important after losing what has been familiar to you, whether it was a good or bad experience before entering foster care. The participants' biological families and foster parents provided support and love, which ultimately enabled them to build trust and develop relationships, thereby fostering a sense of belonging.

**Implications for Social Work Practice**

Building relationships and connections takes time and effort. In foster care, foster parents should undergo training on the importance of relationship building and understand its impact on children and adolescents. Going beyond the scope of just providing a home and basic life necessities is paramount to fostering a connection and sense of belonging. Storer et al. (2014) discuss how foster parents can build relationships and connections by way of engaging in everyday family interactions such as having dinner together and prioritizing family time, which can include discussing everyone's day, game night, watching a movie, etc.; authentic inclusion, such as creating and fostering an inclusive environment that gives the child a voice and place within the family and caring enough to set boundaries. Adults in the child's life should ensure to ask questions and show an interest when communicating during all interactions and encounters. Being genuinely present, concerned, and actively engaged with children and adolescents in foster care creates a profound sense of belonging for them. When caregivers and support systems invest their time and emotional resources, it helps foster a sense of value and understanding in youth and adolescents. This sense of belonging is crucial for their emotional well-being and development.

Moreover, this idea aligns with Social Exchange Theory, which posits that social relationships are built on exchanging resources and benefits. In the context of foster care, the emotional support, stability, and connection provided through these relationships offer

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significant benefits to young people. As they experience these supportive interactions, they are more likely to feel accepted and secure, reinforcing their sense of community and connection

Per previous studies and research, an implication of youth and adolescents leaving foster care is the loss of social support developed during the time spent with foster families, siblings, friends, mentors, and teachers. The lack of stability connected with foster care placements impacts the ability to build and maintain relationships that could lead to a social support system beyond foster care placement. Social support is a protective factor for positive social outcomes, and a lack of social support has been shown to lead to homelessness, criminal justice involvement, and increased mental health challenges, which impact those who were in foster care placement at greater rates than their peers who did not experience foster care placement. A theme from the study related to building relationships once exiting foster care focused on support, trust, and unhealthy versus healthy relationships. While the participants expressed that trust and support helped them build relationships during their placement, upon leaving foster care, they struggled to build relationships, make friends, and understand what constitutes a healthy relationship. The participants in this study acknowledged that building relationships once they exited foster care was difficult and took time for them. It almost seems as though what they learned and developed during their placement did not translate into life after the placement.

This study, along with previous research, can have a significant impact on policy and practice at the micro, mezzo, or macro levels. At the macro level, it is crucial to continue implementing systemic changes to policies related to discharge processes, including reunification, adoption, and aging out. It is also essential to ensure that the requirements for social connections and support are in place, so that youth can only be discharged with a stable support network.

At the mezzo level, the development of educational and training opportunities to help social workers and foster parents understand their role within child welfare agencies. This training should include statistical data and real-life testimony from youth and adolescents on the impact and importance of social support to youth in foster care. It is also important to partner with community organizations or develop third-party (advisory board/committee) entities to oversee and monitor a youth's discharge process to serve as a stopgap when all required support is not in place or accessible. Furthermore, governmental entities should ensure an accessible gateway to building and maintaining sustainable social support connections by building relationships and partnerships amongst community organizations to create a domino effect of connections.

Finally, at the micro level, social workers and foster parents who are connected to youth and families must prioritize educating by example in their day-to-day interactions. This lead-by-example approach would involve modeling soft skills, such as conflict resolution and effective communication, educating individuals on the differences between positive and unhealthy relationships, and demonstrating how to build and maintain social connections and support.

As children in foster care approach the age of 18, their eligibility for support from the foster care system is no longer mandatory. There is an option to receive extended placement beyond 18, but this must be court-approved and depend on conditions such as attending school, obtaining employment, or having a medical or mental health concern (Gateway, 2022). This process of aging out can be challenging, and that is why services for youth and adolescents who are aging out of the foster care system are critical. These services aim to provide these young adults with the necessary resources to transition successfully into adulthood.

Some services include independent living skills training, which can help them learn how to manage their finances, prepare meals, and maintain a home. Financial assistance is also provided for education or vocational programs to help them gain the skills and knowledge they need to succeed in their chosen career path (Gateway, 2022). Additionally, medical coverage is available to ensure they receive proper healthcare.

It is important to note that these resources alone may not be enough. Concrete relationships and support for children and adolescents are also essential. They need caring adults willing to provide emotional support, guidance, and mentorship as they navigate the challenges of adulthood. Thus, services focusing on building such relationships and support systems are necessary to ensure these young adults have the best chance of success. Within social work practice, it is important to emphasize relationship development with youth and adolescents as it is on education, independent living, and finance discussions. Fostering and building the skills to develop and recognize supportive and healthy relationships can enhance the tangible and emotional supports that are already seen as protective factors against adverse outcomes for individuals exiting the foster care system. Ensuring the foster parents are involved not only in the typical day-to-day in terms of meeting the school attendance requirement and providing a drawer for clothing in the foster home and a bed and meal but also being engaged in the youth's extra-curricular activities such as attending school events, sports engagements, chaperoning trips, etc. enhances opportunities for relationship development which becomes a benefit for the youth and adolescent. Foster parents should be present both physically and emotionally to build reassurance, trust, and safety with the children and adolescents in their care. This presence creates a foundation that enhances the foster child's desire to engage in a reciprocal relationship with their foster parent.

Engaging in inclusive conversations about young people's concerns, wants, and needs can significantly enhance the development of supportive relationships. Researchers affirm the importance of including youth in their child welfare process decision-making (McTavish et al., 2022; Munford, 2022; and Carmichael et al., 2018). Involving young people in the decision-making process highlights the significance of transparency, honesty, and inclusivity. These elements are essential for establishing trust between youth and social workers, which serves as the foundation for building other important relationships. (Munford, 2022; and Pfister et al.,2022). Relational practices in social work are also paramount to promoting and creating supportive alliances for the youth to ensure an understanding of their needs that will make them successful (Munford, 2022).

Developing educational and training opportunities to help social workers and foster parents understand their role within child welfare agencies will provide a more in-depth understanding of their role in the lives of youth and adolescents. This training should include statistical data and real-life testimony from youth and adolescents on the impact and importance of social support to youth in foster care. It is also important to partner with community organizations or develop third-party (advisory board/committee) entities to oversee and monitor a youth's discharge process to serve as a stopgap when all required support is not in place or accessible. Furthermore, governmental entities should ensure an accessible gateway to building and maintaining sustainable social support connections by building relationships and partnerships amongst community organizations to create a domino effect of connection.

Connections and partnerships within a community can lead to mentorship relationships. Greeson (2013) notes that one limitation discussed regarding mentoring relationships is the difficulty in building those connections because of youth and adolescents' lack of ability to trust

adults given their historical experiences and relationships that were not positive or beneficial to them. However, if the social workers, case workers, and foster parents are taught the importance of relationship development, make connections themselves, and continue to foster and connect the youth to partners in the community, this can build a positive supportive mentorship network. It is important to ensure that social workers, caseworkers, and foster parents who interact with youth and families lead by example. This approach involves modeling soft skills like conflict resolution and communication, educating about the differences between positive and unhealthy relationships, and teaching how to build and maintain social connections and support.

**Implications for Policy**

All the themes that emerged in this study connect with why relationships and support are important for children and adolescents in foster care and their social outcomes. While the societal norms of positive social outcomes such as attaining higher education, employment, and housing are positive across the full sample of participants, there was a consistent presence of the need to understand and be aware of different types of relationships and how to build, manage, and maintain them both professionally and personally.

It is important to continue making systemic changes to policies related to discharge processes through reunification, adoption, or aging out. It is also essential to ensure the requirements of social connections and support are in place so that youth can only be discharged with a stable support connection. Ensuring a sense of belonging during placement in foster care is a protective factor that allows relationships to be built and maintained. Jones (2014) notes that young adults age out of foster care between the ages of 18 and 21, and do not have a home to return to in a time of need, do not have the support system their peers who were not in foster care have (Jones, 2014).  This author also states that the average young adult leaves home at 23 but

returns home when necessary and finally transitions out of their home at the age of 28. Lacking a solid support system is a risk of adverse social outcomes.

Developing policies and legislation that force relationship-building as part of practice will ensure that healthy and sustainable relationships are created and are legitimately in place for youth exiting the foster care system. The policies need to ensure there is a mechanism for oversight and monitoring that will not allow discharge from foster care if the appropriate supportive relationships are not in place and have not proven to be an adequate level of support.

**Limitations and Strengths**

A limitation noted in this research study's review is the lack of diversity among the participants and the method of advertisement used. These factors may have an impact on social connections and outcomes after foster care. All six participants were African American, with five (5) identified as female and one (1) as male, resulting in a lack of diversity in gender and ethnicity. The youngest participant was 25 years old, while the oldest was 31, giving a mean average age of 28.8. This sample was very narrow and only focused on a minimal African American participant group. Out of six participants, five (5) were in foster care in New York City and one (1) in California. Furthermore, four (4) participants were employed in the service field as youth engagement specialists, and two (2) in the legal field. These professional fields are essential to assisting individuals and communities in need. The limitations experienced restricted the data to focus on experiences in one main geographical location, a majority female population, and one ethnic background.

Additionally, no other measurements were utilized to assess social outcomes except self-reporting from the participants. This limited the study outcomes as there was no way further

explore the data obtained. This researcher didn't verify the information gathered and does not know if it was factual, which could have impacted the overall results of the research.

An area of strength to recognize and possibly consider for further research is that all the participants were gainfully employed in some area of service. This similarity can be explored to determine if their choice of employment was impacted specifically by their foster care relationship experience, which four participants acknowledged played a role in their education and professional choices. They each discussed being influenced and inspired by either someone or an experience that was a driving force for them to enter the field of service to be a voice or catalyst for advocacy or change.

**Conclusion**

In consideration of potential further study, this researcher would consider additional recruitment efforts to broaden the scope and diversity of the participants, such as utilizing social media platforms, foster care alum groups, and social service agencies. While the recruitment for this study entailed direct outreach to people the researcher knew had experienced foster care and a snowball sample, the sample was not diverse and minimized the generalizability of the research data, which then does not allow the results to be representative of an overall population who experienced a similar phenomenon (Padgett, 2017). Additionally, the study did not explore factors related to the type of foster care placement, the age at which the participants entered foster care, or the length of stay in placement.

Expanding the scope of the research study to explore the experiences of various races, nationalities, genders, geographical locations, etc., can provide the data and research necessary to influence change in legislation and practice. Compiling data that highlights a phenomenon that

traverses people from all different walks of life will be the evidence and foundation to establish the need for change to enhance the child welfare system for improved outcomes.

Navigating the unknown can be overwhelming and daunting for anyone who has experienced foster care. Despite the challenges, some individuals have overcome obstacles and achieved positive social outcomes such as obtaining employment, starting families, and pursuing higher education degrees. However, the journey is not without its challenges. Many of these individuals have reported experiencing internal struggles with relationships and trust due to their past experiences in the foster care system.

The lack of stability and the ever-changing environment of foster care can lead to a sense of uncertainty and anxiety for these individuals. The constant moving from one home to another, and the absence of a permanent family structure, can make it challenging to form meaningful relationships. As a result, many individuals who have experienced foster care may struggle with trust issues and may find it challenging to open up to others.

Despite the challenges, it is important to acknowledge the resilience of those who have experienced foster care. Many of these individuals have overcome their past experiences and achieved positive outcomes through perseverance and determination. However, it is equally important to recognize the impact that foster care can have on a person's mental and emotional well-being and to provide the necessary support and resources to help them overcome these challenges. While the participants all experienced the phenomenon of foster care, they encountered different situations and scenarios that shaped their perspectives. However, the foundation of the experience was connected to the social support they were provided during and after their time within the child welfare system. They all attribute relationship experiences and interactions to their social outcomes, some more positive than others, but they all connect.

Within social work practice, the youth and adolescents in the child welfare system are entitled to a fair and equal opportunity to achieve positive social outcomes. This can be accomplished with informed and dedicated professionals, supportive families, and anyone the youth identify as support. Being intentional about building a youth's support system will provide a foundation and safety net they typically do not have due to a lack of stability and frequent placement changes (Carmichael et al., 2018).  Youth and adolescents can learn and practice while still in placement by building solid support, educating, and demonstrating what relationships should emulate. Once they have exited placement, this is not a skill that they need to learn while attempting to navigate emerging adulthood and beyond.

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**Appendix A**

**Demographic Questions**

1. What is your name?

2. How old are you?

3. What is your ethnicity/race?

4. What is your occupation?

5. Were you in foster care at any point after November 9, 1997?

6. How old were you when you were in foster care?

**Appendix B**

**Semi-Structured Interview Question**

1. Describe the foster care placement in which you were placed.

2. Describe the relationships developed while you were in foster care.

    a. How did you build those relationships?

    b. What were the positive aspects of the relationship?

    c. What were the challenges within the relationship?

    d. What do you believe you gained from the relationship?

3. What has your experience been with building relationships since your exit from foster care?

    a. How did you build those relationships?

    b. What were the positive aspects of the relationship?

    c. What were the challenges within the relationship?

    d. What do you believe you gained from the relationship?

4. Is there anything you would like to share regarding how the relationships you encountered during foster care affected you, today?

# Millersville University

**Informed Consent Template: General**

**Consent to be part of a Research Study**

Title of the Project: Relationships and Connections in Foster Care: Why It Matters
Principal Investigator: Dymonde Davis-Fairfax, MSW-Millersville
University
Faculty Advisor: Dr. Bertha DeJesus, DSW- Millersville University

| Invitation to be Part of a Research Study |
| :---: |

You are invited to participate in a research study. To participate, you must be at least 18 years old, speak and understand the English language, have been in foster care as a youth or adolescent after November 9, 1997, and are no longer under the custody of a child welfare entity. Participation in the research project is strictly voluntary.

| Important Information about the Research Study |
| :---: |

- The study aims to investigate whether experiences in foster care influence social outcomes after leaving placement.
- If you agree to participate, we will ask you 6 questions regarding your experience in foster care and some demographic questions such as race, gender, age, occupation, age at time in foster care, and whether the foster care experience took place after November 9, 1997.
- You will need access to Wi-Fi/Internet and a device, such as an iPad, telephone, or computer, to participate in the interview through Zoom.
- The interviews will be scheduled based on the participant's availability and will take up to two (2) hours to complete in one session.
- Risks or discomforts may arise from revisiting foster care experiences during the research. The researcher will offer resources for counseling support services if needed.
- The study will have no direct benefit to the participants.
- Taking part in this research project is voluntary. You may end your participation at any point.

| What is the study about and why are we doing it? |
| :---: |

The study aims to explore whether the participants attribute their experiences and interactions during their time in the foster care system to positive or negative outcomes in their social lives after leaving foster care placement. This research will add to the current body of knowledge and inform systematic policy changes within the foster care system.

**What will happen if you take part in this study?**

If you agree to participate in this study, you will be asked 6 semi-structured questions related to your experience in foster and demographic (age, gender, occupation, and race). You will need access to Wi-Fi/Internet and an IPAD, Telephone, or Computer to participate in the interview via Zoom. The interviews will be scheduled at the convenience of the participant's availability. There will be one interview for each participant. I expect this to take about two (2) hours and will be completed in one interview.

**What risks might result from being in this study?**

There are some risks you might experience from being in this study. There may be a possible psychological reaction to re-exploring one's experience in foster care. The researcher will provide a list of resources if participants feel they need counseling support services.

**How could you benefit from this study?**

There will be no direct benefit for the participants in this study.

**How will we protect your information?**

The data collected from this study will be password-protected on a privately owned laptop and a passcode file. Participants' names and any other identifying information will be reidentified and assigned a number.

**What will happen to the information we collect about you after the study is over?**

The data collected will be stored for a period of five years and then discarded after the period has lapsed.

**Your Participation in this Study is Voluntary**

Taking part in this research project is voluntary. You may end your participation at any point.

**Contact Information for the Study Team and Questions about the Research**

If you have questions about this research, **Dymonde Davis-Fairfax, dydavisf@millersville.edu, 347-743-6630or Dissertation Chair Dr. Bertha Saldana DeJesus, Bertha.DeJesus@millersville.edu, 717-871-7350.**

**This study has been approved by the Millersville University of Pennsylvania Institutional Review Board. Dr. Jerry Porter, Associate Vice President for the Office of Grants, Sponsored Programs and Research, can be contacted at either 717.871.4829 or at jerry.porter@millersville.edu.**

If you have any questions about your rights as a research participant or would like to discuss any concerns with someone other than the researcher(s), please use the following contact information:

Associate Vice President for the Office of Grants, Sponsored Programs and Research:

**Contact Information for Questions about Your Rights as a Research Participant**

Millersville University
PO Box 1002
Millersville, PA 17551

Dr. Jerry Porter
717.871.4829
mu-irb@millersville.edu

| Your Consent |
|---|

By signing this document, you agree to be in this study. Make sure you understand what the study is about before you sign. I will give you a copy of this document for your records. I will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the studyteam using the information provided above.

*I understand what the study is about, and my questions so far have been answered. Iagree to take part in this study.*

_____
Printed Subject Name

_____
Signature                                              Date

By signing this document, you agree to be audio/video recorded via Zoom:

_____
Printed Subject Name

_____
Signature                                              Date

**Appendix D**

**Recruitment Email:**

Hello, you have been identified as a person who may be interested in participating in my research study. My name is Dymonde Davis-Fairfax, and I am a doctoral student at Millersville University, PA. I am conducting a research study about thoughts, feelings, and perceptions of young adults' past experiences in foster care related to relationships and social connections and the impact on their social outcomes after leaving foster care placement. Please consider participating in this research study as it would add to the current body of knowledge related to youth in foster care and influence policy change in the foster care system. To participate in the research project, you must meet the following requirements: you must be 18 years old, be able to speak and understand English, have been in foster care as a youth or adolescent after November 9, 1997, and not be under the custody of a child welfare entity. Also, if you know of others who meet the criterion mentioned above and would like to participate, please forward their contact to my email address: Dydavisf@millersville.edu Participants will be interviewed about their thoughts, feelings, and perceptions of their past experiences in foster care-related to relationships and social connections and the impact on their social outcomes after leaving the child welfare system. The interview will take place using the Zoom conferencing platform, which will take approximately two (2) hours. Participants will be asked four (4) questions regarding their thoughts, feelings, perceptions, and experiences related to relationships and social connections in foster care. Linked here: https://millersville.qualtrics.com/jfe/form/SV_cG7G3363F467qmO is a Qualtrics Survey with (6) demographic questions and a consent form if you wish to participate. If you have any questions about the study, please email me at Dydavisf@millersville.edu or Dr. Bertha Saldana De Jesus, MSW.

Thank you for your consideration.

Dymonde Davis-Fairfax

347-743-6630