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**FOSTER A BETTER FUTURE: A COMPARATIVE ANALYSIS OF
FOSTER CARE PROGRAMS FOR TRANSITION-AGE FOSTER YOUTH
AND A RECOMMENDATION FOR THE STATE OF MISSISSIPPI**

**by
Caroline Elizabeth Glaze**

**A thesis submitted to the faculty of The University of Mississippi in partial
fulfillment of the requirements of the Sally McDonnell Barksdale Honors
College**

**Oxford
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Abstract

The purpose of this study is to find and evaluate different programs aimed at supporting older youth in foster care. This population of youth could be those in high school and extends to youth who have aged out of the foster care system. Through the evaluation of the selected programs based on a set of characteristics, the study provides a policy recommendation for the state of Mississippi to begin to better the lives of Mississippi foster youth. The methodology of this study is qualitative and literature-based. Data was gathered from websites and other published articles of the selected programs and compared to a researched list of services that are necessary in meeting the most critical needs of this population. The study found three programs that offered services with a high number of these characteristics and also showed evidence of success for their participants. These programs include Just In Time, Youth Villages-LifeSet, and First Place For Youth. Based on these findings, I recommend Mississippi's foster program should include services related to mental health support, mentorship, independent living skills, housing assistance, and provision of emergency needs. By consolidating services to one major program and using a team of specialists approach, the needs of youth aging out of the foster care system in Mississippi can be better met, and improved outcomes for their futures can be achieved.

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Chapter One: Introduction

According to Kools (1999) foster care is defined as “the residence in a supervised setting outside the biological family as mandated by the social services or juvenile justice system. Foster care placements for children and adolescents include foster family care, group homes, and various forms of residential treatment. Foster care placement is most often precipitated by stressful family circumstances that endanger a child and/or deem the biological parent(s) unable or unavailable to adequately care for the child. These include child abuse and neglect, parental substance abuse, and family homelessness.” There are approximately 4,525 children and youth in foster care in Mississippi currently, and 437,000 in the United States (Children’s Rights, 2020). Of those children in foster care in Mississippi, approximately 1,100 range in age from 16-25, which is defined as the critical transition age for youth. More specifically, in “August of 2019 there were 948 youth in foster care aging from 14-20” (Mississippi Youth Voice). Nationally, approximately 150,000 of those youth are in the same transition age (ChildTrends, 2015). According to the Centers for Disease Control and Prevention “half of all chronic mental illness begins by age 14 and three quarters begin by age 24” (Centers for Disease Control and Prevention, 2018). However, teenagers and young adults in the foster care system more often than not do not have the necessary care and positive adult-interaction to support the level of

emotional and academic development that is needed during this crucial time of life. Because of this, mental health for these youth is negatively affected. The Foster Care Alumni Studies' article *Assessing the Effects of Foster Care* (2003)

notes:

“Mental health outcomes among alumni appear to be disproportionately poor in comparison to the general population. The twelve-month rate of panic disorder among alumni was over three times that of the general population. Alumni experienced over seven times the rate of drug dependence and nearly two times the rate of alcohol dependence experienced in the general population. The alumni rate of bulimia was seven times higher. The rate of post-traumatic stress disorder (PTSD) among alumni was nearly five times that of the general population and, at 21.5%, exceeding the rates for American war veterans (Vietnam—15%; Afghanistan— 6%; and Iraq—12-13%). The PTSD recovery rate for alumni was 28.2%, while the rate for the general population was 47.0%. Recovery occurred when a lifetime diagnosis of a mental health symptom was not present in the past 12 months.”

The purpose of this study is to research the services and opportunities available for older youth in foster care and provide a policy recommendation to improve the services available for youth in Mississippi. The specific research question for this study is as follows: What programs exist for older youth about to age out of or aging out of foster care systems around the United States, and how might it look to bring similar programs to Mississippi? This study sought to suggest a model that adequately supports foster care youth in the critical transition ages of 16-25 and research the feasibility of implementing a program of this kind in Mississippi.

There is little to no support for older foster care students, so often, they fall between the cracks of our education system. One study states that “Compared with 70% of peers who are not in care, it is estimated that only half of adolescents

in care complete high school (Zetlin, MacLeod, & Kimm, 2012), and by the age of 25 only 11.8% complete an undergraduate degree compared with 28% of their non-foster peers” (Benbenishty, Siegel, and Avi Astor, 2017). First Place For Youth notes that “40% of former foster kids will experience homelessness, 25% will be arrested or incarcerated, and 54% will drop out of high school” (Miller, 2020). Through this study, I hope to understand the shortcomings of the Mississippi child welfare system and also find other states that provide more adequate and thorough services for their foster care youth. These supports could include mental health therapy, college and career preparation, transition services, tutoring, food, and housing. The need for a program that offers the listed services is crucial because without this assistance, foster youth are left to navigate the difficulties of independent living without the necessary skills to succeed. This study aims to research programs in the United States that have already been implemented and have concrete data on successes and failures. By comparing several different programs, I am able to formulate a policy proposal that could be the first step in a more positive direction for Mississippi’s foster care children. Mississippi could implement an effective and financially feasible program to end the cycle of poverty that exists for youth in the foster care system.

This thesis includes the following sections: Background and Literature Review, Methodology, Results, Discussion and Recommendation, and Conclusion. The Background and Literature section describes how the foster care system began in the United States and how it has evolved since its establishment. It also highlights the history of the foster care system in Mississippi specifically.

The literature review describes prominent literature in the subject of foster care. It begins with literature describing the problems that foster care faces, then explores what research shows are best practices for supporting foster care, then finishes with current services that are being offered to foster youth in the country. The Methodology chapter explains the process used to complete the research including an extensive review of programs and search for evaluations of the current services provided to youths. The Results section combines the findings of the analyses of the foster youth programs and describes the summary, logic model, and effectiveness of the programs I evaluate. Lastly, the Discussion and Recommendation section includes a discussion of the results and a policy recommendation. This policy recommendation provides a suggestions for a potential foster youth program for Mississippi to improve outcomes for foster youth reaching the end of their time in the foster care system. The discussion evaluates the trends identified in the evaluation of the foster care programs and concludes with best practices to ensure success for foster youth.

I use three main avenues of research to answer my research question. I conducted my own review of current literature about the effects of foster care on young adults, I compared programs offered in other states and analyzed their effectiveness, and finally, I sought feedback from young adults involved in Mississippi Youth Voice who are researching and advocating for the same goal as my thesis. I combined these three forms of research to then propose a policy to benefit young adults in foster care and who will be aging out in the near future.

Chapter Two: Background and Literature Review

In this chapter I review the historical context of foster care to provide a background for the research that will follow. In addition, I center my research in academic conversations that are happening around foster care.

Background

This background section seeks to provide context about the history of foster care in the United States and in Mississippi, specifically. It provides a timeline for how the foster care system came to be what it is today.

History of Foster Care in the U.S.

Foster care in the United States is first mentioned in 1562 in relation to English Poor Law. When it first began, it was a way for rich families to provide shelter for poor or orphaned children and use them for service (Jones, 2018). Since then, foster care has morphed into a more nurturing form of care for children and young adults who have trouble in their families to the extent that they need to be removed to ensure safety and wellbeing. Even though foster care has existed since the 1500s, legislation to better the rights and wellbeing of children in care have been far and few between. One of the biggest acts to be passed occurred only 22 years ago when Congress passed the “Adoption and Safe Families Act (ASFA; 1997). Gelles (1998) described this legislation as the most significant change in federal child welfare and child protection policy in nearly 20 years.” (Lindsey,

2001). Several acts such as the Indian Child Welfare Act, the Rehabilitation Act of 1973, the Abandoned Infants Assistance Act of 1988, and the Multi-Ethnic Placement Act of 1994 have also contributed to the current state of foster care in the United States. In addition, in 1999 the John H. Chafee Foster Care Independence Program was created to provide funding assistance to youth older than 14 in foster care. Foster care is mainly run at the state level, and states have different laws and regulations for children and families involved in the foster care system. More recently, states have been making changes to provide more services and opportunities for foster care adolescents (National Conference for State Legislatures, 2020). Policies also address systemic barriers that prevent foster care adolescents from breaking the cycle of poverty in which so many find themselves stuck.

The foster care experience differs greatly for every child who is a part of it. Based on statistics from the U.S. Department of Health and Human Services AFCARS Report from 2017, not even a majority of adolescents share the same circumstances in their foster care experience. In 2017 the number of children in foster care was 442,995 with 269,690 entering care in the year and 247,631 exiting care. Of adolescents in care, 22% had been in care for 1-5 months, 21% for 6-11 months, and 15% for 12-17 months. The average time spent in care was 20.1 months. Of the 247,631 children exiting the foster care system, the most common reasons were reunification with family and adoption. 49% of them were reunified with their primary caregiver and 24% were adopted (U.S. Department of Health and Human Services, 2017). The primary goal of foster care is to reunify the child

with his or her parents or primary caregiver; however, it is clear from available statistics oftentimes that is not an attainable goal. Foster children move foster homes on average 4 to 6 times, with some changing homes as many as 15 times or more ((Child Welfare Information Gateway, 2017). Child Welfare Gateway lists the commonality of different types of placements for children in foster care; they are as follows: “45 percent in nonrelative foster family homes, 32 percent in relative foster family homes, 7 percent in institutions, 6 percent in group homes, 5 percent on trial home visits (situations in which the State retains supervision of a child, the child returns home on a trial basis for an unspecified period of time, and after 6 months the child is considered discharged from foster care), 4 percent in pre-adoptive homes, 1 percent had run away, 1 percent in supervised independent living” (Child Welfare Information Gateway, 2017).

History of Foster Care in Mississippi

The history of foster care policies and trends in Mississippi is consistent with its history in the United States as a whole. Federally mandated policies control most states’ policies regarding foster care services and norms. Mississippi has stayed pretty true to the policies established by the federal government while occasionally making changes of its own. In 2011, states were given the option to extend foster care up to the age of 21, and Mississippi accepted. However, despite the availability, there are still many barriers to accessing care past age 18 because Mississippi has not accepted the federal funds to adequately do so. Most notably, Mississippi has many smaller partnerships and localized programs around the state to improve the lives of foster youth.

Mississippi's most recent focus has been on "in-home" preventive care to reduce the number of youth in foster care, and it has seen success; there has been a 20% decrease in foster care enrollment since 2017. Essentially, Mississippi is focusing more on preventive family care and smaller scale support. However, only 47.06% of foster youth ages 14-20 were "provided services to adequately prepare them for independent living when the child leaves foster care and that there is a living arrangement that is permanent where the child will remain until discharged from foster care," from 2016 to 2017, and mental health assessments have not been prioritized for youth as they enter care (Mississippi Child Protection Services, 2018). While Mississippi is making strides in a better direction, there are notable problems facing older youth in care.

Literature Review

This section provides insight into the academic conversations that are occurring around the state of foster care and the experiences of foster care youth. It discusses the foster care experience, the mental and emotional health of foster care teenagers, what makes a good foster home, and opportunities that are available for foster youth currently.

The Foster Care Experience

Cris Beam provides qualitative evidence of the foster care experience in her book *To the End of June*. Beam spent five years interviewing foster families and adolescents to complete the research for her book. Having personal experience with childhood neglect and fostering as an adult, Beam believes in the child welfare system. The stories provided in the book give real-life examples of how

the foster care system works—providing the reader with foster parent and child emotions and the sometimes gut-wrenching truth about the foster care system. In one particular story, Beam interviews a foster family who took a baby, Allen, in after he had already been to four homes within the first year of his life. The family talked about the difficulties that came with trying to bond and connect with a baby who had already experienced so much neglect. They also mentioned the progress Allen made in their family—their connection to the child was clear. Then they learned that Allen’s birth father had started to clean up his life and was seeking custody of Allen. The parents were clearly hesitant and unsure of this transition for Allen, but the goal of foster care must be remembered. Reunification with a child’s birth family is most important if it can be achieved. By the end of the story, Allen was awarded back to his birth family, and the foster parents had to accept that they provided the necessary care for Allen when he needed it most.

Stories like this show the difficulty of the foster care experience, but they also show the redemption that is often overlooked. The rest of the book is dedicated to stories like Allen’s. However, due to the vastly different lives of each foster family and child, no one story is exactly like the other. This shows the uncertainty of the foster care experience, but the book also highlights the good that often does come from the system (Beam, 2013). This book represents one source out of many that captures the true nature of the foster care experience, struggles, and redemptive nature.

Emotional and Mental Health of Foster Care Teenagers

According to the National Conference of State Legislatures, “up to 80% of children in foster care have significant mental health issues, compared to approximately 18-22% of the general population” (Mental Health and Foster Care, n.d.). The effects of being uprooted from their biological families and beginning new home lives are significant for these foster care adolescents. Approximately 21.5% of foster care alumni experience post-traumatic stress disorder, 15.3% major depressive episodes, 11.9% modified social phobia, and 11.4% panic disorder. The percentages range from 3-5 times greater than those of the general population (The Foster Care Alumni Studies, 2003).

“Adolescent Identity Development in Foster Care” by Susan M. Kools is an study that seeks to understand how living in long-term foster care, specifically group homes, affects foster care teenagers’ social and personal identity development. The main findings focus on several processes of development that are crucial for understanding adolescents’ mental health. The first of these is the “Process of Devaluation of Self by Others.” This is defined as “the lessening of discounting of one’s status by others through their beliefs that are, in turn, reflected in their actions.” The article talks about the stereotypes and “lesser status” given to kids who live in foster care group homes by peers and classmates. These beliefs about foster care teens lead non-foster care teens to treat their foster care counterparts as being on a lower social status. These interactions lead foster care teens to think less of themselves and feel inferior, especially in school settings, thus, forcing them to isolate themselves from others. The same ideas of

isolation and devaluation of self are also visible in family relationships. Without appropriate connection with their own culture and family, teenagers begin to question their own identity in relation to their new life. Because of these stresses put on adolescents by others, their confidence in their own independence is negatively affected. They view their futures as limited and defined by “what I cannot do,” instead of “what I can do” (Kools, 1997).

In the summary of her findings, Kools writes “the consequences of devaluation of self by others on the self, interpersonal relationships, and the development of independence are interwoven. Of primary importance is the development of a stigmatized self-identity” (pg 268). The discussion then gives clinical and program implications to offer improvements to the current practices to protect foster care teenagers’ self-identity development. Adolescents in foster care need mental, emotional, and social guidance. They need to be allowed to experiment with their young independence to appropriately create their own self-identity (Kools, 1997).

A different perspective on this topic is given in Anouk Goemans, Mitch van Geel, and Paul Vedder’s article “Over Three Decades of Longitudinal Research on the Development of Foster Children: A Meta-analysis.” This study used the findings of 29 prior studies that researched the effects of foster care on development to determine if foster care positively or negatively affects foster care adolescents’ mental health. The research showed that after being placed in a foster home, adolescents experienced no improvement in their mental health. This shows foster families need to improve how they interact with foster children

because there should be mental health improvement once the child is removed from their negative family life (Goemans, Geel, Vedder, 2015).

What Makes a Good Foster Home?

The qualities and characteristics of a foster family play a crucial role in the physical and emotional health of foster children and young adults. The dynamics of the family and living situation can affect foster children in many different ways depending on their cultures, backgrounds, and usual norms. Several studies have researched how foster homes affect behavior, and mental and emotional health in these children. In the study, “Foster Family Characteristics and Behavioral and Emotional Problems of Foster Children: Practice Implications for Child Welfare, Family Life Education, and Marriage and Family Therapy,” Elizabeth W. Lindsey addresses the implications of the Adoption and Safe Families Act of 1997 on family therapists, social workers, and foster families. Lindsey’s findings are crucial to consider when trying to understand how a foster home can affect a foster child. When considering new foster parents, it is important to screen and train them adequately on appropriate and beneficial parenting techniques. Even parents with the most positive parenting techniques can struggle with the emotional turmoil that some foster children can bring into the home. In addition to parenting behavior, the home environment should also be considered and ensured to be safe and stimulating for the children, as in any home for any child.

Secondly, foster care placement should be carefully matched and monitored to ensure it is the best fit for the child. The child’s background should

be considered and then the family dynamic should be monitored by speaking to the foster parents and the child (Lindsey, 2001).

Another study that highlights the positive characteristics of a foster home is “The Potential for Successful Family Foster Care: Conceptualizing Competency Domains for Foster Parents” by Cheryl Buehler, Kathryn W. Rhodes, John G. Orme, and Gary Cuddeback. This article lays out 12 domains of competencies that give a greater chance for positive foster family outcomes. It defines competency as “a combination of knowledge, interest, and skills needed to perform successfully the tasks of fostering” (pg 6). The domains are as follows: “Providing a safe and secure care environment, providing a nurturing care environment, promoting educational attainment and success, meeting physical and mental health care needs, promoting social and emotional development, valuing diversity and supporting children’s cultural needs, supporting permanency plans, managing ambiguity and loss for the foster child and family, growing as a foster parent—skill development and role clarification, managing the demands of fostering on personal and familial well-being, supporting relationships between children and their families, and working as a team member.” Each of these domains has an underlying aim to ensure that foster children’s physical, emotional, psychological, intellectual, social, and familial needs are met. The rest of the article defines and describes each domain in detail and provides evidence for the reasons that each domain is critical for foster families to be successful in caring for foster children (Buehler, Rhodes, Orme, and Cuddeback, 2006).

These studies are important in the context of my research because they lay the foundation to understand where foster care children are being raised and give insight into some improvements that could be brought to Mississippi. By knowing the characteristics of foster parents that promote appropriate development and support in a child's life, we can begin to provide better and more nurturing foster experiences for foster youth.

Services and Opportunities for Foster Kids

Some states have begun to change the dynamic that exists for foster youth by offering different services both during and after aging out of foster care. The National Conference of State Legislatures lists different legislation that some states have implemented or are hoping to implement to improve the foster care experience for foster youth. Some of these services include extending foster care beyond the age of 18, state tuition waivers and other support for higher education, housing assistance programs, and increasing normalcy in post-care life for foster youth. Other services help foster care teenagers get driver's licenses and increase their financial literacy (National Conference of State Legislatures, 2020). Many of these services are state-based and not nationally funded or supported. Advocacy groups of young adults who have aged out of foster care have begun to create change for those still in foster care. These groups work together to meet with legislators to advocate for the services listed above. Because these young adults have experienced the challenges that come from not having had these services, they can more appropriately fight for the services adolescents in foster care need (Older Youth Housing, Financial Literacy and Other Support, n.d.).

This research is critical for this thesis and will be expanded upon in later chapters because by learning and understanding what services are offered in other states that are beneficial and show success, we can suggest what sort of services and supports should be offered in Mississippi.

These articles are important in the context of this thesis because to understand what services and programs should be offered for foster care adolescents in Mississippi, we must first understand the issues and struggles these youth are facing. These children and teenagers are facing a tremendous amount of stress and change and are being forced to bypass important developmental stages in their lives, yet adequate services are not in place to support and meet them where they are. We should provide support for the mental health issues foster care adolescents are facing, and it begins with the knowledge of what these needs are.

Chapter Three: Methodology

My methodology is qualitative and literature-based. My plan was to identify specific characteristics based on my literature review to analyze programs aimed at supporting foster care youth. I then planned to send this list to Claire Graves, the Mississippi Site Director for First Place for Youth. She works first-hand with former foster youth to advocate for foster youth support. Based on her feedback, I then planned to edit and revise these program characteristics using her recommendations and expertise. I then would develop a checklist with this final list of program characteristics. These characteristics essentially would describe the “must-haves” or “perfect world option” for any program providing services to youth about to age out of or aging out of foster care.

Program Characteristics

The set of program characteristics that I identified was intended to show the scope and potential effectiveness of a foster care support program. I identified these characteristics based a synthesis of my literature review findings to determine which services are most important. There were overwhelming trends and similarities in the literature surrounding foster youth support, so I compiled a list that would prove to be the “most ideal” program if it existed. The program characteristics that I originally identified included the following: Mental Health

Support, Mentorship, Foster Parent Training and Support, Academic Support, Social Skills Training, and Transition Services.

After compiling this list, I then it to Claire Graves, who works first-hand with foster youth as the Mississippi Site Director for First Place for Youth. Part of her work is to meet with 10-15 former foster youth from the state of Mississippi and collaborate with them to advocate for policy change relating to foster care. I asked Graves to provide her feedback on the characteristics, so I could include any revisions or suggestions. Her suggestions are quoted below:

- “1. Transition services may be too broad of a category. There are a lot of different services (independent living skills classes, apartment placement programs, etc.) that could be considered part of that category. You may have an easier time using this list if you break that category down more or create a very clear and specific definition of what you are considering to be transition services.
2. The foster parent support category stands out from the rest because it is not a direct service to youth. It is very important, but interested in how you’ll incorporate this. Especially if you look at programs serving youth who have already exited custody, this may not be relevant / applicable. Definitely not saying drop it(!), just think it through some. It is also a very broad category.
3. You might consider adding a category related to job readiness/employment as well as a category related to housing. Extra bonus points if you add a category related to supporting youth in accessing transportation (including learning to drive) – I would be interested in learning what programs include a focus on these very important issues.”

I used this feedback to revise my first set of program characteristics. The final list included all of the original categories, but I did choose to expand on the Transition Service category to include Independent Living Skills, Housing Placement, Job Readiness/Employment, and Transportation Services. I considered her comment on foster parent support, but ultimately decided to include the category in hopes that some programs might offer some sort of support in that area.

Below you will find the justification behind each program characteristic.

Mental Health Support

The mental health consequences that result from an youth's adolescence spent in foster care are countless. As noted in my literature review, youth who spend time in foster care experience higher rates of post-traumatic stress disorder, depression, social phobia, panic disorders, and identity struggles compared to their non-foster care peers. In addition, the results of one Adverse Childhood Experiences survey, which surveyed the number of experiences with physical abuse, sexual abuse, emotional abuse, and neglect, noted that "51 percent of the children in the child welfare system who have taken this questionnaire have had four or more ACEs," (Alvarez, 2018). Providing support in this area, whether through therapy, evidence-based treatment practices, or other supports is critical to help this population move forward into adulthood.

Mentorship

Because youth in foster care have been uprooted from their biological families and placed in homes of extended family or strangers, they do not have appropriate positive adult contact that aids in crucial development. In his article *Mentoring and Social Skills Training: Ensuring Better Outcomes for Youth in Foster Care*, Charles A. Williams defines mentorship as “the contribution of a trusted, nonparental adult in the life of a child or youth.” He also notes the importance of helping these youth learn to create and maintain lasting relationships. These long-term relationships can give youth outlets to ask questions, release stress, and develop healthy self-esteem (Williams, 2011).

Foster Parent Training and Support

This characteristic is focused more on older youth in care who still have a few years left in the system. Evidence for the importance of a healthy relationship and positive interaction with foster parents can be found in the literature review section of this thesis. The section dedicated to “What Makes a Good Foster Home” highlights the importance of foster parents’ support. The foster parent home environment plays a major role in the foster care experience for youth, so providing training and support for foster parents could very positively affect the experiences for foster youth.

Academic Support

Academic support for youth in foster care can be exhibited in many different ways. Options for this program characteristic could include tutoring, positive reinforcement for academic success, financial support for secondary education,

and more. These services are crucial because foster youth often move to different schools throughout their time in care, thus reducing their educational achievement and attainment. By providing academic support, this gap could be shrunk, and the youth in foster care could see an increase in secondary educational attainment and high school graduation rates.

Social Skills Training

Social skills are a major aspect of succeeding in adult life. Again, one can find evidence regarding this skill in *Mentoring and Social Skills Training: Ensuring Better Outcomes for Youth in Foster Care* by Charles A. Williams. There are four major categories of social skills: self-related, environmental behaviors, task-related behaviors, and interpersonal behaviors. Experiencing success in these areas can provide success in other areas such as employment, education, and social interactions. Having these skills will positively affect youth as they age out of foster care and move into independent living (Williams, 2011).

Transition Services

Transition services cover a large variety of services to specifically help foster youth as they begin to live on their own outside of the foster care system.

Independent Living Skills. Independent living skills include financial responsibility, physical and emotional wellness, personal hygiene, personal awareness, time management, housing skills, and others. Often youth in foster care do not learn these skills because they have been focused on larger needs such as safety and hunger; therefore, learning how to live a responsible, healthy life on their own is important for their success.

Housing Placement. One of the biggest problems facing youth leaving foster care is housing instability. According to the National Foster Youth Institute, approximately 20% of youth who age out of foster care will become homeless. This housing instability can then lead to further problems. Helping to solve this uncertainty in these youths' lives can lead to positive effects in many other areas of their lives (National Foster Institute, 2020).

Job Readiness/Employment. As youth age out of the foster care system, only about 50% will have "gainful employment by the age of 24" (National Foster Institute, 2020). While this could be the result of lower educational outcomes for this population, it is also a result of a lack of the necessary skills for finding gainful employment. Skills such as how to dress, where to find employment, interview skills, and professionalism are all imperative to successfully finding employment, so providing support in this area is critical.

Transportation Services. This service is often overlooked; however, having a means of transportation is critical for youth aging out of foster care to be able to succeed in their post foster care independent lives. This service could include assistance in acquiring a driver's license. Especially in areas without public transportation, this service can provide former foster youth with more opportunities.

My next step was to find six to ten programs that offered support services for foster youth who were about to age out of or were aging out of the foster care system. I anticipated that there would be a relatively large number of programs that had a few of the characteristics, so I would narrow my search by only

including programs that offered four or more of the characteristics listed. Using the characteristics checklist, I intended to summarize and evaluate each program I had identified. I planned to do my research solely based on the data and information provided willingly by programs on their websites or related sites. Because of this my understanding and summary of program models and execution would be based on my understanding of the information given online.

I then planned to narrow my list of programs down to three based on which programs provided the most comprehensive set of services based on the characteristics. I also planned to pick the final three programs that I analyze based on which programs provided adequate amounts of data online. I would then research the program models, demographics, effectiveness, and success rates of the top three programs in more depth. I anticipated looking at data such as graduation rates, employment rates, housing stability rates, mental health data, and justice system involvement. I planned to use this data to create a policy proposal for a foster youth program to support youth aging out of foster care that could feasibly be implemented in the state of Mississippi. Once I developed this policy proposal, I planned to send it to the former foster youth in Mississippi Youth Voice to get stakeholder feedback. Based on this feedback, I planned to revise my policy proposal to reflect the recommendations of the former foster youth.

Limitations

There are several limitations to this study. Since program websites most likely only provided their best information and data to appear to be as successful as possible, there is a limitation of website bias. It is important to take this bias into consideration when analyzing the success of each program. Also, the kind of data provided to assess the success and effectiveness of each program differed, so I was unable to assess the effectiveness of each program with my predetermined set characteristics in terms of success rates. In addition, because I only used the information provided online, my understanding of each program is limited to information given. However, despite these limitations, I was able to adequately understand the services provided and adequately assess the program models.

Another limitation to this study is the difference in the context of the environments where these programs are offered. Many of the programs were set in locations that had differing demographic makeups than that of Mississippi. However, despite this fact, the overall service implementation could be evaluated and considered in the context of Mississippi.

Chapter Four: Results

The first major step of this project was to search for foster youth support programs that exhibited some, or all, of the characteristics identified in the methodology. The programs could be government implemented, non-profit, or for-profit. Because this research involved online program resources, I used Google as a tool to locate programs that fit my program characteristics. After searching “Foster Care Programs,” I was directed to Foster Coalition which provided me with a compiled, sorted list of different foster youth support programs (Foster Coalition, n.d.). From this website, I was able to find five of the eight programs that I included in my first round of program evaluation. Those programs included: Just in Time For Foster Youth, Youth Villages-LifeSet, The Center for Fostering Success at Western Michigan University-Seita Scholars Program, Fostering Great Ideas, and Youth Moving On. The final three programs resulted from separate searches and previous knowledge of available resources for foster youth. They were Court Appointed Special Advocates-Guardians ad Litem (CASA-GAL): Fostering Futures, MyLife, and First Place For Youth. For each program, I looked for evidence of more comprehensive services instead of very narrow service offerings. I chose the eight programs because each of them appeared to offer at least three or four of the services on my program

characteristics list. In Table 1, you will find an outline of the mission and goals of each program and the characteristics that I was able to identify in their services.

Table 1

Program Name	Mission Statement/Overview	Characteristics Identified
Just in Time For Foster Youth	To engage a caring community to help transition age foster youth achieve self-sufficiency and well-being (Just in Time For Foster Youth, 2020).	- Mental Health Support - Transition Services including Independent Living Skills, Housing Placement, and Transportation Support - Mentorship
Youth Villages-LifeSet	Youth Villages helps children and families live successfully (Youth Villages, 2019a).	- Mental Health Support - Transition Services including Independent Living Skills, Housing Placement, and Transportation Support - Mentorship - Academic Support - Social Skills Training
The Center for Fostering Success at Western Michigan University-Seita Scholars Program	This program offers financial support for specific needs and helps students at Western Michigan University find support throughout the community (Seita Scholars Program, n.d.)	- Mental Health Support - Transition Services including Housing Placement and Job Readiness/ Employment - Academic Support
Fostering Great Ideas	We are dedicated to improving the lives of children as they struggle in foster care (Fostering Great Ideas, 2018).	- Mentorship - Foster Parent Training and Support - Academic Support

Program Name	Mission Statement/Overview	Characteristics Identified
Youth Moving On	YMO provides transition-age youth (TAY, ages 16 – 25) with a continuum of support services to empower them to find lasting independence and a lifetime of personal fulfillment (Youth Moving On, n.d.).	<ul style="list-style-type: none"> - Mental Health Support - Transition Services including Independent Living Skills, Housing Placement, and Job Readiness/ Employment - Academic Support
CASA/GAL-Fostering Futures	The National CASA/GAL Association, together with state and local member programs, supports and promotes court-appointed volunteer advocacy so every child who has experienced abuse or neglect can be safe, have a permanent home, and the opportunity to thrive (CASA-GAL, 2019).	<ul style="list-style-type: none"> - Mental Health Support - Transition Services including Independent Living Skills and Job Readiness/Employment - Mentorship - Academic Support
MyLife	The purpose of <i>My Life</i> is to support young people in learning how to direct their lives and achieve their education and transition to adulthood goals (California Evidence-Based Clearing House for Child Welfare, 2017).	<ul style="list-style-type: none"> - Mental Health - Mentorship - Academic Support - Social Skills Training
First Place For Youth	First Place’s work has been driven by two goals: provide results-driven direct service to young people who need our help; and change public policies to improve the lives of as many transition-age foster youth as possible. First Place believes that our direct service work drives our advocacy efforts and that our advocacy provides the context in which our direct services can succeed (Ranftle, 2020).	<ul style="list-style-type: none"> - Mental Health Support - Transition Services including Housing Placement, Independent Living Skills, and Job Readiness/ Employment - Mentorship - Academic Support

From this list of eight programs, I needed to narrow my search down to three programs I believed offered the most comprehensive services and exhibited success in their execution. I first looked at how many of the characteristics were met and the scope to which they were offered. I also looked at the goals and missions of the programs. Some of the programs were more meta-cognitive in nature, while others focused on meeting physical needs over meta-cognitive ones. In the end, I picked programs that focused on both physical and meta-cognitive, or self-awareness, goals for their participants.

Evaluation of Success and Effectiveness

In the methodology section, I noted I would evaluate the success of three programs by researching the program models, demographics, effectiveness, and success rates in more depth. To do this step, I anticipated looking at data such as graduation rates, employment rates, housing stability, mental health data, and justice system involvement. However, as I began looking for this data, not all programs' websites offered the same data as others, and none gave all the data I wanted to use. Because of this I created a logic-model showing the if-then scenarios of each program and the services they provided (Wilder Research, 2009). With this model, I then compared the logic model to the data provided on each program's website to show how effective each program is in providing appropriate and useful services for youth aging out of foster care. In the next section of this results chapter, you will find a summary of each of the three programs I analyzed further, the logic model for their program, and the

effectiveness analysis based on the data provided compared to the logic model I created.

Youth Villages-LifeSet: Summary

Youth Villages-LifeSet is a branch of the Youth Villages program. Youth Villages is a program that serves youth facing “a wide range of emotional, mental, and behavioral problems.” Serving over 30,000 youth and their families, Youth Villages provides five different services: Residential Treatment, Intensive In-Home Treatment, LifeSet, Foster Care and Adoption, and Specialized Crisis Services and Crisis Support. LifeSet focuses specifically on providing services for “at-risk youth and young adults leaving the foster care, juvenile justice, and mental health systems.” In this program participants meet with LifeSet specialists for 6-12 months, depending on the need. LifeSet specialists use “evidence-based practices and research-driven interventions (such as trauma-informed care and trauma-focused cognitive behavioral therapy) to help participants face challenges and meet goals.” Youth needs are identified and then the appropriate practices are used to help youth meet those needs. LifeSet has served over 9,000 young adults and provides services in 15 states, including Mississippi (Youth Villages, 2019b).

Youth Villages-LifeSet: Logic Model

For Youth Villages- Life Set goals drive the logic model. They provide services with the belief that if they provide youth with a LifeSet Specialist who evaluates the specific needs of the youth, and this specialist meets with the participant at least once a week for 6-12 months to help establish specific goals and decide what evidence-based practices should be utilized, then the foster youth

will achieve their defined goals. These goals could be education-based (earning a high school diploma or GED, or attending a secondary school), independent living based (money management, insurance, wellness, etc), relationship-based, or employment-based.

Youth Villages-LifeSet: Evaluation of Effectiveness

Youth Villages-LifeSet serves over 1,295 young adults in Tennessee currently, and 11,000 youth since 1999. While its national base is in Tennessee, it has branches in Georgia, Massachusetts, Mississippi, Oklahoma, Oregon, California, Connecticut, Illinois, Louisiana, New York, Pennsylvania, Washington, Washington D.C, and North Carolina. Participants range in age from 17-22 years old. When searching for data on the effectiveness and success of this program, I was directed to a two-year evaluation study conducted by the Manpower Demonstration Research Corporation, now known as MDRC, in 2015. This study focused only on participants in Tennessee. As stated in the MDRC report, “The evaluation uses a rigorous random assignment design and is set in Tennessee, where Youth Villages operates its largest Transitional Living program. From October 2010 to October 2012, more than 1,300 young people were assigned, at random, to either a program group, which was offered the Transitional Living program’s services or to a control group, which was not offered those services. Using survey and administrative data, the evaluation team measured outcomes for both groups over time to assess whether Transitional Living services led to better outcomes for the program group compared with the control group’s outcomes” (MDRC, 2016).

This study also provided a more descriptive run-down of the model of the program and gave results of the evaluation of the Youth Villages Transitional Living Program. Participants in this program can expect the program to consist of the following, if deemed necessary: Meetings with their LifeSet specialist, Goal Planning, Cognitive Behavioral Therapy, Trauma-Focused Cognitive Behavioral Therapy, Motivational Interviewing, Adolescent Community Reinforcement Approach Therapy, Preparing Adolescents for Youth Adulthood, Skill Building, and Ansell-Casey Life Skills Assessment. Specialists must be trained on each of the prior services in order to adequately provide the service to participants, and specialists typically have caseloads of 8-10 youth. The main goal of the LifeSet specialists are listed as follows: “Self-sufficiency skills, community reintegration, education, vocational skills and job training/experience are the major focus areas. The program provides the young adult with the knowledge and skills necessary to: “maintain safe and stable housing, achieve or maintain work and/or education, remain free from legal involvement, become self-sufficient, build and maintain healthy relationships” (Youth Villages, 2019).

In addition, participants are able to receive funding for necessities such as interview clothing and application fees. The findings of the study that MDRC conducted are as follows: 1. The program did not have a significant impact on participants’ educational outcomes. 2. There was evidence of significantly increased yearly youth income from formal employment. The increase averaged at around \$600. 3. The program had a significant impact on housing stability. 4. The program had a significant impact on economic well-being. 5. The program

did not have a significant impact on social support. 6. The program significantly improved the mental health of youth. 7. There was a reduced experience of violence with romantic partners; however, there is no significant impact on other safety outcomes. And 8. There was no significant impact on the primary measures of criminal involvement. These results were consistent across urban and rural locations (MDRC, 2016).

Based on these results, Youth Villages-Life Set only partially meets the defined outcomes expected based on the logic model of cause and effect. However, despite not achieving all of its defined goals, there are measurable positive outcomes for participants.

Just In Time For Foster Youth: Summary

Just in Time for Foster Youth is a program based in San Diego, California. It began in 2002 as merely a “gift-basket” service for youth who had aged out of foster care. Since then, the program has expanded to provide more services for this population of youth. It is a 501(c)3 nonprofit organization, established in 2006, that seeks to give youth leaving the foster care system a “community of caring adults and peers” the “assistance that a healthy family would normally provide” Now it offers financial, emotional, and physical support. The program provides a variety of services including Basic Needs (emergency and foundational financial support), My First Home, Changing Lane/Auto Access, Financial Fitness and FinFin101, Career Horizons, Bridges to Success, College Bound/Learning to Succeed/Master Your Dream, Pathways to Financial Power, and Rise to Resilience. Youth seeking to participate in this program can apply

online on the nonprofit's website. Participants do not have to take advantage of all services and instead are encouraged to determine where their needs are and apply to those specific services (Just in Time For Foster Youth, 2020).

Just in Time For Foster Youth: Logic Model

The logic model for this program is focused on specific services related to different needs. They follow the logic that if they provide a service to meet a specific need in a youth's life and give participants a community of caring adults, then through meeting those physical and emotional needs, participants will be better equipped to thrive independently. More specifically they follow the logic that with each service provided, if a former foster youth participates in the service, then he or she will experience the positive effect of that particular service, and they will see this impact in their own data.

Just in Time For Foster Youth: Evaluation of Effectiveness

Just in Time's budget for FY2020 is approximately \$4 million, and 70% of the budget goes directly to the Youth Services. JIT notes that usually youth seek emergency financial assistance from the organization initially, and then build the trust needed to seek assistance in other aspects of their transition. Rise to Resilience is its newest service, and it aims to educate participants on Adverse Childhood Experiences by helping with "nutrition, exercise, mindfulness, sleep, healthy relationships, guided self-exploration, and play. Just in Time notes that a unique feature of their program is that over half of their staff and ALL of their Youth Services coordinators are former foster youth. This gives youth a connection to the adults providing assistance and care. Just in Time serves more

than 800 youth each year aging from 18-26 years old. To qualify for the program you must “live in San Diego County, have spent any time in foster care..., and are currently working, going to school or have plans to do so.”

JIT provides data on its impact including: 80% of youth enrolled in JIT College Bound either graduated or are still enrolled in school; 79% of participants in Pathways had confidence in their networking skills; in Career Horizons for Youth Women, 94% appreciated their uniqueness, 81% can identify their self-limiting beliefs, and 88% believe they can leverage their strengths; In Walk the Talk Celebration, 87% of participants were confident their story has value and deserves to be heard; and in Bridges to Success, 75% of participants reported a genuine connection to B2S Volunteer Coaches, 81% reported a consistent connection to 2+ volunteer coaches, and 100% reported a consistent connection to 2+ B2S Peers (Just in Time For Foster Youth, 2019).

Taking into consideration that this data comes from program statistics and not an independent evaluation and based on the data provided in their annual report, and in comparison to the logic model of their anticipated impact, Just in Time appears to reach its goals of impact for specific services and positively affects the lives of former foster youth in each of their services.

First Place For Youth: Summary

First Place for Youth “seeks to help foster youth build the skills they need to make a successful transition to self-sufficiency and responsible adulthood.” Located in six counties in California and having partners in New York and Massachusetts, First Place for Youth served 1,667 youth in FY2019. In addition,

there is a branch of First Place For Youth in Mississippi. This branch, titled Mississippi Youth Voice, serves as an advocacy program for former foster youth. This program has two major components: My First Place and Independent Living Skills Program. For the sake of this study, I focused on My First Place. My First Place provides youth with a team that includes a Youth Advocate, an Education and Employment Specialist, and a Housing Specialist. Together the team supports the foster youth's healthy living skills, educational goals, employment, and housing security and skills. In addition, First Place For Youth focuses on advocacy led by former foster youth who understand the critical needs from first-hand experience.

First Place For Youth: Logic Model

The logic model for First Place For Youth involves the work of the team provided to participants. If the participant meets with his or her Youth Advocate that has a caseload of 1:12-15, Education and Employment Specialist that has a caseload of 1:30-36, and Housing Specialist at least once a week to develop the specific skills and meet the varying needs of the youth, then youth are anticipated to reach their educational, employment, and independent living goals. The steps that are followed for this program with the specialist team are Assessment, Build Basics, Explore and Select, and Training for Career Pathway. If these steps are followed then data will show tangible and measurable impacts on the quality of life for participants leaving foster care and entering into independent living.

First Place For Youth: Evaluation of Effectiveness

First Place For Youth seeks to serve youth with the greatest need in the community. According to their website, participants “have spent more than eight years in the foster care system and lived in six different foster homes.” The ethnicity of the participants for this program is: 55% are Black, 15% are Hispanic, 11% are Biracial, 5% are Caucasian, 5% are Multiracial, and 3% are other. At their entry of the program, 54.3% of participants had some postsecondary education, 14% had a high school diploma, 15.4% were still in high school, 11.8% had dropped out of high school, and 4.5% had no data. In addition, at their entry of the program, 59.9% of participants were not employed, 23.1% were employed part-time, 12.9% were employed full-time, and 4.1% had no data. Lastly, at their entry of the program, 50% of participants were involved in the justice system, 68% experienced housing instability, and 23% had children of their own (Youth, F. P. F.,2020).

In contrast to these staggering statistics, the impact of this program is evident in their success rates. According to their website, with the support given by the services provided in First Place For Youth, 96% of participants were employed or pursuing their education, 90% experienced housing stability at their exit of the program, 98% avoided involvement in the justice system while in the program, and 95% avoided pregnancy while in the program (Youth, F. P. F.,2020). It is important to note that these statistics are based on success while participants are in the program and do not focus on results once youth leave the program. However, based on the data provided by the website and compared to

the logic model, First Place For Youth appears to adequately reach their anticipated impacts and show improved quality of life for their participants.

Chapter Five: Discussion/Policy Implications

This chapter discusses the trends on program characteristics and best practices identified in my research. In addition, I provide a recommendation for a program model that could be implemented in the state of Mississippi based on the results of my study.

Trends in Program Characteristics

The major trends in the program characteristics were mentorship, independent living skills, housing assistance, and mental health support. Each of the three programs I evaluated provided some form of these services. While the method in which these services were provided was different, each program recognized the importance of these particular needs. As youth age out of the foster care system, it is clear they have some needs that are more prevalent and immediate than others. By providing youth with independent living skills and provisions for emergency needs, these youth are better prepared to begin their journey towards life on their own. In addition, housing instability directly affects all other aspects of any person's life, so helping to meet this need directly impacts success in other areas of these youths' lives. Finally, mentorship and mental health support work together to provide these youth with the foundation in relationships and coping mechanisms to be able to move forward in all aspects of life. Given that "Children in foster care are at least five times more likely to have anxiety, depression and/or

behavioral problems than children not in foster care,” these base level needs must be met before other needs can be considered (Generations United, 2017).

The trends in these services show that the most important services to offer are ones that directly impact all of the others. Each of these needs has consequences if not met, so these programs recognize the importance of meeting each of them so that youth who are aging out of the foster care system can have a well- rounded experience to adequately prepare them for life outside of foster care. Programs seeking to positively impact the lives of youth aging out of the foster care system must aim to first meet the most basic of needs—housing, mental health, and independent living skills, thus, teaching youth the skills necessary for eventually living on their own and becoming the best versions of their independent selves.

Another important trend to consider in service provisions are those that were excluded most often. The service most often not offered in these program models was foster parent support. This is to be expected considering the nature of the programs that ultimately provided support for foster youth leaving the system. Because each of these programs was focused more on youth that were beginning their independent lives, foster parent support was no longer as necessary as other services. This service is extremely important in foster care; however, it should be focused on more with younger foster children to promote healthy family relationships at a young age and throughout adolescence.

Consolidation of Services and Accessibility

Through my research on each of the programs offered, including the five others that I did not further investigate, I am able to conclude that consolidating services into one overall program makes it easier for foster youth to become involved in the programs. By having one point of application to a program that offers a variety of services depending on need, foster youth are able to participate in whichever parts of the program are most critical for them. This takes away the stress of having to find several different provisions for their needs. Having this kind of consolidation makes the services more accessible for these youth and gives social workers more ability to recommend services. I am also able to conclude that these programs had measurable success when offering multiple services.

Another benefit of consolidating services into one or two programs is the reduction of services for both social workers and foster youth to keep track of. Both of these populations experience tremendous amounts of stress in their daily lives and occupations, so by providing all the most necessary and critical services in one or two points of contact, some of this stress can be reduced. In addition, policymakers' and program administrations' energy could be focused directly on providing the best form of care from one point of contact. This would increase accessibility to foster youth and decrease stress for social workers. One program model could be developed that includes the best aspects of each of the three programs researched, and that program model could encompass the consolidated services that best benefit both foster youth and caseworkers.

Benefit of a Team Approach

As seen in First Place For Youth, a team approach to offering services can be very beneficial for foster youth. By providing participants in a program with several mentors and professionals, foster youth are given several adults who care about their well-being, and these professionals are able to focus solely on their specific role. This provides better care for each specific need in foster youths' lives and takes stress off of a single caseworker or mentor. This team approach also provides several invested adults the ability to work together to best meet the needs of the foster youth who they are serving, consequently resulting in better, more comprehensive care. In addition, First Place For Youth may have experienced such immense success for their participants because of this team approach provided in their service My First Place. Having several adult contacts could relieve the relational stress that could result from only having one mentor/caring adult. Therefore, this approach benefits the mental health of both foster youth and professionals. In addition, each professional has specialized knowledge of their field of study and expertise; therefore, the quality of advice and services will be higher due to professional specialization.

Recommendation for Mississippi

In my initial methodology, I planned to create a policy proposal for the state of Mississippi, and then seek recommendations from former foster youth who participate in the advocacy program, Mississippi Youth Voice. However, due to the Covid-19 global pandemic, I was unable to do this. I have instead provided

only my initial policy recommendation for improvements for youth leaving the foster care system.

Taking into consideration the program models and impacts of the three foster care programs that I analyzed in this research, I have created a potential program model for the state of Mississippi to provide in individual cities and/or counties depending on capacity. Meeting the needs of mental health, mentorship, independent living skills, and other transition services are critical. There are three major components that are the most beneficial. These components are service consolidation, a team approach, and the provision of emergency physical needs. Therefore, I propose that Mississippi consolidate the services currently offered in small programs state-wide. While these small services are doing good work for the youth in their own towns, there are counties and districts receiving fewer to none of same services for their foster youth. Creating a larger, state-wide program that can be branched to individual counties and cities could reduce the stress on social workers, and a more uniform program could improve the services for youth in cities where needs aren't currently being met. In addition, using non-profit fund raising models, the state could create an emergency physical need fund to support these youth in their post-foster care lives.

This program model would consist of the team approach used by First Place For Youth. The team should include a housing specialist, employment and education specialist, and youth advocate. However, in addition to these services, a specialist who focuses on evidence-based practices for mental health and trauma treatment should also be included. Each of these specialists should maintain

biweekly meetings with foster youth participants. Thus, participants in this program will meet with two of their team members each week and will meet with the other two the next week.

The Team

The specialists should each be certified in their specific field and should receive support of their own from the appropriate state agencies related to their specialty. Below are descriptions of each of the members of the recommended team who will work with the foster youth and a list of their potential responsibilities.

Housing Specialist. The housing specialist of the team should focus on helping youth find affordable and appropriate housing. In addition, they would help with housing skills such as budgeting, mortgage/rent management, lease knowledge, insurance, etc.

Employment and Education Specialist. The employment specialist should focus on interview skills, the employment search, necessary certification, etc. This specialist should help youth find employment that fits their skills and budgeting needs. In addition, if additional education or certification is needed, the employment specialist should assist in these aspects.

Youth Advocate. The youth advocate should act as the mentor and independent living skills specialist. The youth advocate should provide academic support, social skill development, healthy living skills, and goal-development and planning.

Mental Health Specialist. The mental health specialist should be knowledgeable in evidence-based practices for trauma and mental health treatment

and should provide the necessary, individualized therapy and treatment to help move the youth forward in his or her mental health journey.

It is important to offer this kind of service to foster youth before they enter their post foster care life, so this program should be available to youth ages 16 to 25. High school youth will benefit from the goal-oriented and preventive aspects of the program, while youth who have already graduated from high school will benefit from the emergency fund and reactive aspects of the program. Both groups require the services provided by this program, and services should be available to both prevent negative outcomes and correct negative aspects that youth who do not receive these services soon enough might experience. The program should last anywhere from 12-18 months to ensure participants are receiving an appropriate amount of care for their needs.

Chapter Six: Conclusion

In conclusion, foster youth experience many negative outcomes when they age out of the foster care system. These outcomes include housing instability, unemployment, mental health issues, and lack of independent living skills. Mississippi has very few provisions to prevent these negative outcomes, therefore, we need a program that will provide the necessary services for these youth as they begin their lives outside of Child Protective Services.

While there are not many programs for this population in Mississippi, other states have program models that have proven to be successful in providing positive outcomes for youth leaving the foster care system. Three of the programs are Just in Time For Foster Youth, Youth Villages-LifeSet, and First Place For Youth. These programs have different models for providing services for foster youth; however, each has some sort of focus on mental health support, mentorship, transition services including employment skills, housing assistance, and independent living skills. In addition, these programs show evidence of having positive effects on the youth that they serve, so we can conclude there exists a way to change the negative trajectory of these youths' lives.

In addition to the trends in services these programs provide, there are a few notable aspects to these services that should be considered when creating a program for the state of Mississippi. Consolidating services and using a team

approach should be prioritized. Having fewer points of contact for support reduces stress on foster youth and social workers, and having several members of a team to provide specialized support gives higher quality service to participants in the program, thus creating a bigger and better impact.

Finally, a program for Mississippi should include all the notable aspects of the three programs, including services for mental health support, employment, housing, and independent living skills. These needs should be met with a team approach and should all be met within the limits of a singular program. By providing this kind of service for Mississippi youth leaving the foster care system, we can reduce the negative outcomes for these youth and increase the quality of life for a large population of youth that are so often left behind.

Next steps for this research include a further evaluation of the feasibility and cost of implementing a program of this kind in Mississippi. This thesis covers only the first step in bettering the lives of former foster youth, so next we must research the cost of hiring a team of specialist, creating an emergency fund, and ultimately consolidating many of the programs that are already being provided for these youth. Through further research and to adapt more fully to the environment of Mississippi and the needs that Mississippi Youth Voice addresses as critical, some changes might be warranted; however, this framework ultimately begins the work for necessary changes to child welfare policies in the state of Mississippi.

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Appendix A- Summaries of Selected Foster Care Programs

Just in Time For Foster Youth

JIT is a program based in San Diego, California. It began in 2002 as merely a “gift-basket” service for youth who had aged out of foster care. Since then, the program has expanded to provide more services for this population of youth. It became an established nonprofit organization in 2006. Now it offers a “community of caring adults” to help financially, emotionally, and physically support youth aging out of the foster care system. Each year JIT serves 800 youth aging from 18-26. The program provides a variety of services including Basic Needs (emergency and foundational financial support), My First Home, Changing Lane/Auto Access, Financial Fitness and FinFin101, Career Horizons, Bridges to Success, College Bound/Learning to Succeed/Master Your Dream, Pathways to Financial Power, and Rise to Resilience. Youth seeking to participate in this program can apply online on the nonprofit’s website. Participants do not have to take advantage of all services and instead are encouraged to determine where their needs are and apply to those specific services. They have access to the community of adults, however.

Youth Villages-LifeSet

Youth Villages-LifeSet is a branch of the Youth Villages program. Youth Villages is a program that serves youth facing “a wide range of emotional, mental, and behavioral problems.” Serving over 30,000 youth and their families, Youth Villages provides five different services: Residential Treatment, Intensive In-Home Treatment, LifeSet, Foster Care and Adoption, and Specialized Crisis

Services and Crisis Support. LifeSet focuses specifically on providing services for “at-risk youth and young adults leaving the foster care, juvenile justice, and mental health systems.” In this program participants meet with LifeSet specialists for 6-12 months, depending on the need. LifeSet specialists use “evidence-based practices and research-driven interventions (such as trauma-informed care and trauma-focused cognitive behavioral therapy) to help participants face challenges and meet goals.” Youth needs are identified and then the appropriate practices are used to help youth meet those needs. LifeSet has served over 9,000 young adults and provides services in 15 states, including Mississippi.

The Center for Fostering Success at Western Michigan University

The Center for Fostering Success at Western Michigan University has been a part of the Western Michigan University campus since 2012. This program has two components: Seita Scholars Program and Fostering Success Coach Training. For the purpose of this research, I focused on the Seita Scholars Program because it focuses on the youth aging out of foster care; however, the two components work together. The Seita Scholars Program is a scholarship program that assists recipients of the scholarship and aims to “create transitions to lead to success...develop a community of scholars... educate WMU students from foster care... to enhance their professional skill set... transform WMU students from foster care... to build opportunities for their futures.” In addition to the services provided to the scholarship recipients, the program has recently started the Seita Scholars Extended Support Program for youth who have aged out

of the foster system but are not recipients of the scholarship. This extended program directs youth in the direction of other services that could benefit them.

Fostering Great Ideas

Foster Great Ideas is a program that serves all ages of youth in the foster care system. This program offers services in three categories: Dignity, Relationship, and Community. In Dignity, services are donation-based to let foster children know they have people who care about them. The Relationship category includes a variety of services that include helping birth moms reach their treatment goals, tutoring, mentoring, and supporting foster parents.

Youth Moving On

Youth Moving on is a subprogram of the Hillsides program located in Pasadena, California. Hillsides provides services to at-risk children and their families. They offer five core services which include Residential Treatment Services, Hillsides Education Center, Family Resource Centers, Foster Care and Adoption, and Youth Moving On. Hillsides created Youth Moving On in 2005 in response to the over 5,000 youth aging out of the foster care system in California each year. It began as a transitional housing program but has since expanded to offer a myriad of services. These services focus on “health and wellness, workforce development, life skills, and financial literacy.” In addition, the program provides support with transitional housing, internships, and education.

CASA/GAL-Fostering Futures

CASA/GAL-Fostering Futures is a new branch of the CASA/GAL organization. CASA/GAL is an advocacy program that provides at-risk youth with court-appointed volunteer advocacy. These volunteers help ensure that “every child who has experienced abuse or neglect can be safe, have a permanent home, and the opportunity to thrive.” Recently, CASA-GAL has begun the work to launch Fostering Futures. This program is designed to change the narrative of youth aging out of foster care. They hope to help all youth reach their potential by providing services to help increase high school graduation rates, living wage employment, housing, and healthy adulthood. This program has not officially been launched or finalized, but the mission lines up with the missions of the other programs.

MyLife

MyLife is a program that comes from the California Evidence-Based Clearing House for Child Welfare. MyLife is a program model and can be implemented anywhere as long as the proper steps are taken to effectively implement it. As stated in the Program Overview, “The purpose of MyLife is to support young people in learning how to direct their lives and achieve their educational and transition into adulthood goals. Serving youth ages 15-19, MyLife is a 9-12 month program that provides youth with relationships, goal coaching, and experiential activities. This program relies heavily on the “coaching and mentoring” aspect of support for youth. Goal setting and achievement,

metacognition, self-determination, and self-management skills are improved to then improve outcomes for these youth as they age out of foster care.

First Place For Youth

First Place for Youth is a program that “seeks to help foster youth build the skills they need to make a successful transition to self-sufficiency and responsible adulthood.” Located in six counties in California and has partners in New York and Massachusetts, First Place for Youth served 1,667 youth in FY2019. This program has two major components: My First Place and Independent Living Skills Program. My First Place provides youth with a team that includes a Youth Advocate, an Education and Employment Specialist, and a Housing Specialist. Together the team supports the foster youth’s healthy living skills, educational goals, employment, and housing security and skills. In addition, First Place For Youth focuses on advocacy led by former foster youth who understand the critical needs from first-hand experience.