

1-1-2021

## Stress, Coping, and Adjustment of Young Adults Who Have Transitioned out of Foster Care

Helen S. Hogin  
*Walden University*

Follow this and additional works at: <https://scholarworks.waldenu.edu/dissertations>



Part of the [Counseling Psychology Commons](#)

---

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact [ScholarWorks@waldenu.edu](mailto:ScholarWorks@waldenu.edu).

# Walden University

College of Social and Behavioral Sciences

This is to certify that the doctoral dissertation by

Helen S. Hogin

has been found to be complete and satisfactory in all respects,  
and that any and all revisions required by  
the review committee have been made.

## Review Committee

Dr. Amy Hakim, Committee Chairperson, Psychology Faculty

Dr. Carl Valdez, Committee Member, Psychology Faculty

Dr. Brandy Benson, University Reviewer, Psychology Faculty

Chief Academic Officer and Provost

Sue Subocz, Ph.D.

Walden University

2021

Abstract

Stress, Coping, and Adjustment of Young Adults Who Have Transitioned out of Foster  
Care

by

Helen S. Hogin

MA, Argosy University 2013

BS, Life University, 2010

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Educational Psychology

Walden University

December 2021

## Abstract

Current research lacked information on the stress, coping, and adjustment of individuals transitioning to adulthood from foster care. Transitioning out of foster care when adulthood is reached can be challenging, resulting in mental and physical health problems, decline in overall wellbeing, and poor outcomes. Elevated stress can make coping and adjusting to social life more difficult. The purpose of this study was to explore former foster youths' perspectives and experiences of stress and what coping strategies were effective as they adjusted to society. The transactional model of stress and coping served as the study's framework. The research questions focused on the experiences of former foster youths' transitions to adulthood, transition challenges that can diminish wellbeing, and coping with the stress of adjusting to adulthood. Data were collected from seven former foster youth through Zoom interviews, and NVivo software was used to help organize, categorize, and code data. Analysis of the data revealed four themes: foster care shapes transition to adulthood; stressors, barriers, and challenges associated with transitioning out of foster care system; resources for transitioning to adulthood; and coping with stress of transitioning from foster care to adulthood. Implications include the need to enhance support to better serve young foster care adults during the often-stressful transition to adulthood. Support should include facilitating independence and job-seeking skills. Implications for positive social change include societal and individual benefits from prosocial and life skills development in young adults from foster care as they transition to adulthood. Further research is recommended on identifying effective resources for transition.

Stress, Coping, and Adjustment of Young Adults Who Have Transitioned out of Foster

Care

by

Helen S. Hogin

MA, Argosy University, 2013

BS, Life University, 2010

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Educational Psychology

Walden University

December 2021

## Dedication

This research is dedicated to God, and my family. I thank you God, for answering my prayers, moving obstacles and guiding me through this journey. And without the loving support of my family, none of this would be possible. To my husband, Omar Hogin and children, Seth Hogin and Ayden Hogin, you were of enormous inspiration to my success. You are my encourager, inspiration and shining light. To my mother, Helen Yearns, words cannot express all the things you have sacrificed for me. Mom, you have always been my biggest cheerleader. You instilled in me the drive to go this distance and be great. To all, for every part of me that can give, I dedicate my greatest academic achievement to you. And for everything, I love you.

## Acknowledgments

First, and foremost, I would like to thank God, whom I give all praises and glory. To my chair, Dr. Amy Hakim, I am blessed to have someone who is encouraging and committed to helping her students succeed. I wholeheartedly appreciate your knowledge and expertise that you provided through this journey. Thank you for believing in me and my ideas on this research topic. Dr. Carl Valdez, committee member, thank you for your valuable insight and willingness to serve as my committee member. I was fortunate to have Dr. Benson serve as my URR. Her knowledge and expertise was valuable and I thank you for being a major part of this milestone.

Lastly, I would like to thank the participants that dedicated their time to be the voices of my study. I appreciate all of you and your willingness to be a source of social change for the youth and young adults in the world.

## Table of Contents

List of Tables .....	v
Chapter 1: Introduction to the Study.....	1
Introduction.....	1
Background.....	2
Problem Statement.....	5
Research Questions.....	7
Purpose Statement.....	7
Conceptual Framework and Theory.....	8
Nature of the Study.....	9
Definitions.....	10
Assumptions.....	11
Scope and Delimitations .....	11
Limitations .....	12
Significance and Implications for Social Change.....	12
Summary.....	13
Chapter 2: Literature Review.....	15
Literature Search Strategy.....	16
Conceptual and Theoretical Framework.....	17
Phenomenology.....	18
Literature Review Related to Key Concepts.....	19
Challenges of Former Foster Youth.....	19



Stress .....	30
Effects of Stress on Physical and Mental Health .....	33
Stressors with the Challenges of Young Adulthood .....	35
Coping .....	36
Coping Strategies and Stress .....	39
Strength-Based Approach .....	41
Supportive Relationships and Social Networks .....	43
Summary and Conclusions .....	51
Chapter 3: Research Methods .....	53
Research Design and Rationale .....	53
Role of the Researcher .....	57
Methodology .....	58
Participant Selection Logic .....	58
Instrumentation .....	59
Recruitment Procedures, Participant and Data Collection .....	61
Data Analysis Plan .....	63
Issues of Trustworthiness .....	65
Ethical Procedures .....	67
Summary .....	68
Chapter 4: Results .....	69
Setting .....	69
Demographics .....	70

Data Collection .....	70
Data Analysis .....	72
Evidence of Trustworthiness.....	76
Results.....	77
Theme 1. Foster Care Shapes Transition to Adulthood.....	77
Theme 2. Stressors, Barriers, and Challenges Associated With Transitioning out of Foster Care System .....	82
Theme 3. Resources for Transitioning to Adulthood.....	86
Theme 4. Coping With Stress of Transitioning From Foster Care to Adulthood .....	90
Summary .....	92
Chapter 5: Discussion, Conclusions, and Recommendations.....	94
Interpretation of the Findings.....	95
Theme 1: Foster Care Shapes Transition to Adulthood.....	95
Theme 2: Stressors, Barriers, and Challenges Associated With Transitioning out of Foster Care System .....	96
Theme 3: Resources for Transitioning to Adulthood .....	97
Theme 4: Coping With Stress of Transitioning From Foster Care to Adulthood .....	99
Conceptual Framework.....	100
Limitations of the Study.....	102
Recommendations.....	103

Implications.....	105
Conclusion .....	107
References.....	109
Appendix: Interview Protocol.....	120

## List of Tables

Table 1. List of Codes..... 73

Table 2. Alignment Between Research Questions, Themes, and Codes ..... 75

## Chapter 1: Introduction to the Study

### **Introduction**

Over 20,000 youth between the ages of 18 and 20 transition out of foster care every year (Children's Bureau, 2016). Child welfare system responsibilities to the young adults end at age 18, and for some states age 21. The longer the young adults are able to remain in foster care the more benefits there are for life preparation and adjustment. Many of the children were brought into the foster care system due to abandonment, neglect, abuse and parental incarceration (Children's Bureau, 2016). This vulnerable population experiences frequent displacements, which increases risks of the development of insecure attachments and lack of emotional and social connectedness (Gauthier et al., 2004).

Due to instability while in foster care, normal development has been impacted for these youth, which hinders successful transition into adulthood. The frequent life interruptions in childhood make it difficult for the young adults to prepare to live independently, which makes adjustment to their new life out of foster care challenging, causing academic setbacks that typically lead to lower wages and higher financial stress upon adulthood (Courtney et al., 2010; Hook & Courtney, 2011). This time period can be critical, due to these young adults having transitioned out of foster care, while simultaneously transitioning to adulthood (Shook et al., 2011). For the first time in their lives, these individuals have to make major decisions and choices that can affect their lives. The focus of this study to gain an understanding of the experiences of life after emancipation of the young adults who were in foster care during their childhood.

## **Background**

According to the U.S Department of Human Services (2016), there were an estimated 427,910 children in foster care. During the 2015 fiscal year, 269,509 entered foster care and 243,060 exited. Moreover, there was an increase in numbers when compared to the 2014 fiscal year. While in foster care, this vulnerable population experience life disruption and broken relationships. Many experience maltreatment and trauma, which can affect the foster youth's psychological functioning into adulthood (Galaif et al., 2003; Vanderwerker et al., 2014). When the young adults are approaching the transition to adulthood independence, stress increases—especially for the adults without emotional, social, and financial support (Piel & Lacasse, 2017)

Research has indicated that difficulties for the population in foster care include legal system involvement, high school dropouts (Day et al., 2011), unplanned pregnancy (Daining & DePanfilis, 2007), substance abuse, homelessness and mental health disorders (Shook et al., 2011). Courtney et al. (2010) conducted a study explore how former foster youth ages 23 and 24 are functioning in adulthood. The findings of their study indicated engagement in illegal behaviors, incarceration, homelessness, early pregnancy and mental health treatment. Courtney et al. found that 1% had reported homelessness, 40% had been homeless, and nearly half of the sample had experienced economic hardship during the year prior to the study. Despite some of the challenges, a few of the former foster youth managed to obtain their high school diploma or GED and attend college. However, adults who transitioned out of foster care demonstrate 35% lower household income than adults their same age who were never in foster care

(Pecora, 2003). Due to constant living disruptions, it is difficult to retain employment. Research shows that individual support and personal development is necessary for a positive outcome when transitioning youth to adulthood (Graham et al., 2015). Without learned coping skills and social support throughout the process, the foster youth are at risk for difficulty adjusting to new relationships and life changes in adulthood (Cowan, 1991).

Grey et al. (2015) explored the associations of the resource availability and coping effectiveness of emancipated foster youth. According to the study, coping strategies are needed to help the young adults as they face unique challenges, such as lacking interpersonal supports, housing, and resources. Furthermore, there is a need to cope with the complexities of shifting from dependence to interdependence. Findings suggested that this vulnerable population needed strategy specific coping skills to meet the unique needs of the individual. For example, youth have reported increased substance use, anxiety, and depression symptoms when they engaged in specific coping strategies without the coping strategies geared towards strategy relevant resources. Youth who engaged in coping strategies such as substance use and had poor housing reported higher level of depression. Additional findings suggested that the youth who tested with high levels of support, education, and cognitive reframing correlated with increased rates of coping strategies. In the study, due to the quantity of stressful events that the former youth endorse traditional coping skills have not been effective.

There are vast numbers of young adults exiting foster care each year, which leads to increased attention of child welfare policies and program planning. This population has

had increased attention due to the many ongoing challenges and poor outcomes of the young adults as they transitioned out of foster care (Courtney et al., 2010). Research demonstrates the importance of social support, independent living planning, and relational networks during the transition to adulthood will increase positive outcomes, while in adulthood (Osgood et al., 2005; Whiting & Lee, 2003). Studies highlighted that although building self-worth and receiving guidance and encouragement throughout the transitioning process is beneficial to a successful outcome, many transitioning adults are left abandoned (Schoeni & Ross, 2005).

Foster youth who aged out of foster care have fallen short because their needs for survival and adjustment in the real world after foster care have not been met (Stott, 2013). The studies from the previous paragraphs, provide examples of stories by foster children while in foster care, surveys of youth transitioned out of care, stress and coping of foster youth, point of views from social workers and quantitative studies (Courtney et al., 2007; Geenen & Powers, 2007; Havlicek et al., 2013). It was anticipated that the series of lived events commonly projected as stressful appraisals would assist with creating future policies and interventions with obtaining an understanding to minimize the foster youth and emerging adult's stressful experiences. To prepare emerging youth into adulthood, effective coping strategies are needed. Wells and Freer (1994) argued that the traditional hypothesis testing methods in foster care fall short, so qualitative research in this area is needed to explore the unheard experiences. This qualitative research filled the gap in the literature on the detailed experience of young adults who were in foster care during their childhood years. Furthermore, the findings of this study add to existing



research by obtaining the perspective of the young adult's stress, coping and adjustment in adulthood after living in society.

### **Problem Statement**

Research has suggested that the transition out of foster care when adulthood is reached can be challenging and traumatic, resulting in mental and physical health problems (Boyd & Hunsaker, 2018; Geenen & Powers, 2007; Piel & Lacasse, 2017). The challenges that youth face while in foster care are associated with poor outcomes when transitioned to adulthood, which lead to high school dropouts, homelessness, incarceration, adjustment issues, and poor psychological outcomes (Courtney et al., 2007; Geenen & Powers, 2007; Havlicek et al., 2013; Jones, 2013). Moreover, many children and adolescents encounter psychological distress while in foster care, which can make the challenges in adulthood more difficult to manage (Graham et al., 2015).

During the foster-care process, children are taken and brought to a foster home without any say in what happens to them. The children are sometimes physically separated from their legal guardians and placed into a new environment without forewarning. Besides being separated from their biological parents or caregivers, some children experience multiple placements, feeling unloved without building familial permanent relationships. When these children grow up, they feel displaced in the world due to the lack of support. Due to some of these transitions in foster care, stress while in adulthood increases and can lead to poor outcomes. Elevated stress can make coping and adjusting to the world after childhood years in foster care challenging. Although there

have been many poor outcomes, some transitions after foster care have been successful (Singer et al., 2013).

While there have been qualitative studies about foster care, most of those have been from the perspective of foster parents or service providers (e.g., Radey et al, 2016). Few studies have been able to incorporate the voices of adults who have been in foster care in their childhood. The voices of these adults provided useful research to obtain meaningful information about stress, coping, and adjusting to the real world after emancipation. Also, the study examined how these individuals adjusted to life from their point of view. The adult's perspective in this study provided the opportunity to obtain information, to get a clear understanding with hopes to shape the institutions; as foster institutions often lack clear and consistent policy directives (Geenen & Powers, 2007). Getting individuals who have lived in the foster care system involved in the decision-making process can lead to higher stability rates (Rock et al., 2013). The gap in the literature that was the foster adults' detailed experiences and perspectives pertaining to stress, coping, and adjustment while living in society during adulthood. Other research was done on specific areas in the foster care system, such as the comparison of their foster families' verses biological families, examining children's aspects of placement, children's experiences, mental health issues, stress of caregivers and suggestions from foster care workers (Antle et al., 2009; Greeson & Bowen, 2008; Piel & Lacasse, 2017; Spencer et al., 2010).

### **Research Questions**

1. What are the lived experiences amongst the young adults after being emancipated from the foster care system?
2. What coping strategies did the young adults who were emancipated from the foster care system use to manage stress and stressors in adulthood?
3. How do young adults who were emancipated from the foster care system describe their adjustment to societal living?

### **Purpose Statement**

The purpose of this study was to explore the stress, coping, and adjustment of adults after being emancipated from or otherwise leaving foster care. The intent was to understand how challenging the process was for the adults when navigating society and how their interactions uncovered gaps in where the foster children' needs were unmet in preparing them for their transition to adulthood. The various perceptions of the adults indicated what was helpful and not helpful to them during their lived experience in foster care. Also, what was implemented while in foster care helped make adjusting to society after foster care beneficial. It was proposed that the foster care transition for the child to be experienced in one or more separable transactions; that was not beneficial to the child and deemed stressful and sometimes traumatic (Spencer et al., 2010). Research supports socioemotional needs and supportive relationships during the transition to adulthood will increase higher success rates in adulthood (Antle et al., 2009; Greeson & Bowen, 2008; Jones, 2013).

### **Conceptual Framework and Theory**

Lazarus and Folkman's (1984) transactional model of stress and coping theory was the conceptual framework that guided this qualitative study. This framework describes how life events and challenges can impact individual's emotions, which incorporates cognitive appraisal and coping with stress. During the appraisal process, a person evaluates the importance of situation, determine whether it poses a threat or challenge or is relevant to their well-being. Cowan (1991) purported that life transitions involve two qualitative shifts; which is the psychological sense of self and the interpersonal world. This theory provided the implication that how people interpret their personal experience determined their emotional reaction (Lazarus & Folkman, 1984).

Lazarus and Folkman's (1984) cognitive appraisal describes two stages: primary and secondary appraisal. In primary appraisal, the individual evaluates the encounter and makes a determination about whether it is relevant or beneficial to their well-being. The potential risks and harms are viewed. In secondary appraisal, the individual looks at prevention of harm, coping with stressors, and coping options in means of altering, accepting, or being able to use the resources available to them. Cognitive appraisals are strong predictors of the emotional well-being of youth, as many lived past experiences shape them into their personal well-being upon adulthood (Hitchcock et al., 2015). Lazarus and Folkman's transactional theory aligned with my study and demonstrates a historical context because provided ways former foster youth to appraised stress in connection to their well-being and coping options when navigated in adulthood. Each individual is unique and the meaning of the stressor/stressor might vary by context

(Lazarus & Folkman, 1984). Therefore, how the former adults appraised their stress/stressor differed amongst other participants. My study highlighted resources and available tools that contributed to the former foster youth personal and emotional well-being. Additionally, I examined the effectiveness of coping strategies that helped navigated youth while in adulthood.

### **Nature of the Study**

A qualitative phenomenology approach was used to describe the experience of stress and coping of adults after emancipation. Also, this approach was used to obtain an understanding of how adults adjusted to life after emancipation. Qualitative research is designed to review, explore, and gain insight of the uniqueness of the individual life experience (Creswell, 2009). This approach was chosen for participants to share their experiences in their own voice, and for researchers to gain an understanding from each individual innermost viewpoint (Patton, 2015). I hope that researchers will use the data and analysis from this study to pay increased attention to child welfare policies, training, and program planning for this vulnerable population. Also, it is my hope that the described lived experiences can serve as encouragement and support to help individuals who are about to age out of foster care or have already reached emancipation.

According to the previous literature, research has been done to review and analyze youth while in foster care and adults who reached emancipation (Geenen & Powers, 2007; MacGregor et al., 2006). However, many of those studies outlined the experience of foster families, social workers, and children that currently are in foster care. Other studies, examined foster youth transitioning to adulthood and mentoring children

while in foster care. There are few qualitative studies done on adults who reached emancipation, but most of those studies are based on surveys or focus group and data was limited due to small size. In one study, data were collected in a qualitative approach from foster parents to examine the motivation, support, and preservation during fostering (MacGregor et al., 2006). In contrast, this study examined young adult's experiences and perspectives while living amongst society after living in foster care during their childhood by providing phenomenological interviews. To obtain a comprehensive understanding of their lived experience from their perspective, the phenomenological data were broken down into codes to analyze the meanings to create themes (Creswell, 2009). Within this process, commonalities and differences was examined.

### **Definitions**

*Adjustment:* To adapt or get accustomed to a new situation.

*Foster care:* A placement of substitute services that provide 24-hour care to children who have been placed away from their guardians or parents. The care can be provided by group homes, foster care family homes, emergency shelters, childcare agencies, residential facilities, and so forth (Children's Bureau, 2016).

*Phenomenology:* A method or philosophy that aims to describe the perception or experience based on the interpretation of human life (Paton, 2002).

*Emancipation:* Refers to children when reached young adulthood and are legally able to leave foster care. In most states, at the legal age of 18 the young adults are transitioned from foster care and released to independence.

*Young adults:* Refers to the young adult stage in human development that ranges from age 18 to the mid-20s.

*Stress:* The physiological and psychological response to a condition or barrier.

*Coping:* The effort to change thoughts and behavioral actions of internal and external stressors (Grey et al., 2015).

*Adjustment:* To become familiar and adapt to a new situation.

### **Assumptions**

I have made a few assumptions in the study. I have assumed that some participants found their transition from foster care to be challenging and that most needs were unmet (Courtney et al., 2010). I assumed that the participants were honest and truthful when answering questions pertaining their experience during independence, to provide a clear perception of their story.

### **Scope and Delimitations**

A qualitative study provides the lived experience of the participants that reveals common themes and the meaning of their experience (Merriam & Tisdell, 2016). Young adults who are about to transition out of foster care were not within the scope of the study due to not experienced living outside of foster care, which limited the scope of the study to young adults who have already transitioned from foster care. The participants recruited were at least 18 years old and already have been emancipated from the foster care system. The results gathered from the study will only be used for the population that is within the scope of the study.

### **Limitations**

Qualitative phenomenological research study enables the researcher to provide the detail stories of the phenomenon being studied. The participants were provided interviews to tell the perspective of their experience. The results of the study were limited to those who were in foster care during their childhood and are no longer in foster care. In the study, biases could have been introduced due to the participants' providing self-reports from their perception of their experience. A different interpretation might have been heard from the interviewer. To avoid bias, the participant was provided with a copy of the transcription to validate their responses. Due to the study being a qualitative phenomenological approach, I was required to interpret the participant's experience. The research participants needed to be able to articulate their experience. Depending on the individual, it might have been difficult to express themselves, due to language barriers, limited intellectual ability, and other factors.

### **Significance and Implications for Social Change**

While there are numerous studies that examined mental health issues of those formerly in foster care, there are fewer studies that explicitly examined stress and coping after emancipation. However, little is known how this population who have been emancipated from foster care adjusted to life. Moreover, qualitative studies have been done that entailed the perspective of foster parents and service provides, but haven't examined the perspectives of adults after emancipation. Hearing from adults who have been emancipated from foster care will improve knowledge to create programs to better serve them. Providing research in this area will contribute to making a difference



nationally and promoting social change by establishing a foundation to assist with creating future policies, training and network support. These adults' perspectives will help shape a positive future for this vulnerable population worldwide and provide hope for youth who are transitioning out of foster care.

According to Wells and Freer (1994), the traditional hypothesis testing methods in foster care have fallen short, so qualitative research in this area is needed to get the unheard stories. This study provided the perspective of the adults lived experiences of their life after emancipation. With this study, the researchers will contribute to the growing body of literature to help provide positive psychological outcomes and adjustment for those who emancipated from foster care.

### **Summary**

In this section, I described the challenges and problems that individuals can face while living in foster care, which can cause setbacks with successful transition to adulthood. Due to foster care instability and displacements, normal development has been impacted, which hinders the preparation for the young adults to live independently. Each year, vast numbers of young adults transition out of foster care. Transitioning out of foster care and into adulthood are happening simultaneously, which can be a critical life event. Long-term commitments are made, which can impact their lives. The problem states that elevated stress, coping, and adjusting to the world after childhood years can be challenging. Moreover, the transition can be traumatic, resulting in mental and physical difficulties. Insufficient research was available to examine stress, coping, and adjustment of young adults who have been in foster care during their childhood years. Chapter 1

introduced how the phenomenological study described the perceptions of the young adults to gain insight on the lives of this vulnerable population. Chapter 2 will provide the review of the literature in the research. Chapter 3 will provide the qualitative research design and rationale, followed by the data collection, results, and summary in Chapter 4. Chapter 5 will conclude with the conclusion and recommendations for further research and implications for positive social change.

## Chapter 2: Literature Review

This chapter examines previous literature on the transition of foster youth to adulthood and the factors related to stress and coping in this population. The transition while being in foster care is one of the most distressing situations, which many youths encountered psychological distress, and poor outcomes into adulthood (Graham et al., 2015). The challenges of youth aging out of foster care, will be addressed (Geenen & Powers 2007; Shook et al., 2011). Stress and coping strategies in youth and young adults will be presented to understand how these individuals cope with various stressors, including coping effectiveness (Grey et al., 2015). The ability to cope can increase chances of dealing with life challenges in adulthood. Existing studies listed in the literature review were used to guide and provide a context of this study.

It was important to research previous literature on youth in foster care and as they transition to adulthood to get an understanding of the past experiences of this vulnerable population. There is not much known about the experiences of the young adults who were in foster care during their childhood; therefore, further studies need to be done to understand this population. In my research, there were not any qualitative articles from a phenomenological perspective that specifically focused on stress, coping, and adjustment of adults who were former foster youth. Geenen and Powers (2007) conducted a qualitative study about the experiences of youth who transitioned to adulthood. The data of this study were collected through focus groups; participants included foster care youth who were currently in foster care, foster parents, child welfare professions, foster care alumni, independent living programs and other professions. Data and themes were

gathered to describe the experiences of youth during the transition into adulthood by those participants.

The problem is that the needs of the former foster youth continue to remain unmet, so further research is needed to gather data to help meet the needs of these individuals. This societal problem continues to exist, resulting in numerous challenges, adjustment difficulties, and poor outcomes in adulthood (Courtney et al., 2010). The purpose of this qualitative study was to explore the experiences of stress, coping, and adjustment of young adults after leaving foster care. This study was conducted to learn about and explore the young adults' views and their stories. This chapter will provide the literature review, conceptual framework, and theoretical foundation as it applied to this study. I will also examine and analyze the strategy, methodology, concepts and findings of various studies on the foster care system, which will demonstrate why this study was conveyed.

### **Literature Search Strategy**

The literature search for this study was conducted utilizing various sources and databases. I have researched and composed data through Walden's Library, Google Scholar, and government child welfare online resources. The databases used through Walden library included PsychINFO, PsycARTICLES, PROQuest, SAGE, ScienceDirect journals, and Walden's Dissertation and Thesis. The search was conducted to find articles related to my study pertaining to stress, coping, and adjustment of adults who were in foster care during their youth. I used the following key words specific to this study: *foster youth, foster care history, emancipation, transitioning adult, aged out, placement*

*stability, positive outcome, negative outcome, mental health, physical health, emerging adulthood, adjustment, stress, coping mechanisms, resilience, foster parents, cognitive appraisal, and social capital theory.* In my search, there were very few findings about the perspectives of adults who were former foster youth, but there were articles gathered that entail information related to youth in foster care and emerging adulthood. Despite the few articles that addressed research about adults who were former youth, those articles particularly focused on youth while in foster care, youth transitioning to adulthood, risk factors, stressors of transitioning to adulthood, effectiveness of coping and longitudinal patterns. There were not any qualitative articles that addressed stress, coping, and adjustment of adults who were former foster youth after being independent from foster care within the first 10 years.

### **Conceptual and Theoretical Framework**

Lazarus and Folkman's (1984) transactional theory was the conceptual framework used for this study. This framework evaluates how an individual's major life events or daily life hassles influence their emotions using cognitive appraisal and how the individual copes with stressful events. Cognitive appraisal is an assessment of an event or encounter to determine whether it poses a challenge, harm, or threat to their well-being. Cognitive appraisal consists of two processes: primary and secondary appraisal. In primary appraisal, the individual evaluates the risk, harm, benefits, or challenges of the encounter. In secondary appraisal, the individual evaluates prevention of harm, ways to manage the encounter and coping options are reviewed (Folkman et al., 1986). Lazarus and Folkman (1984) described the two primary functions of appraisal: change in the

relationship and environment that the individual experiences and the effect of emotional distress.

Lazarus and Folkman (1984) suggested that the significance of the individual experience, life stage, and circumstance is what determines how the individual will interpret its meaning. The meaning of the event may not hold the same significance to each individual when experienced it (Park & Folkman, 1984). The way an individual views their experience impacts their emotions and coping response (Lazarus & Folkman, 1984). A stressful experience that an individual encounters depends on the appraisal of the event. Cognitive appraisal is significant in evaluating thoughts and feelings to help identify the types of coping strategies that are beneficial. Current research does not address how former foster youth view and experience stress in the environment and the coping response from a phenomenological approach. Using this theory, I examined former foster youths' perceptions of stressful encounters and coping strategies demonstrated during their adjustment in adulthood.

### **Phenomenology**

A phenomenological approach was selected to examine meaning by communication and observation of the phenomenon described by the shared interpretation. Phenomenology allows the participants to have a voice to share their perspective. Through this approach, meaning was provided to draw insight of the participant's world in their transition into independence (Creswell, 2009). In contrast, I examined the individuals' stories to draw meaning from the events that they recalled. Phenomenological interviews provided a comprehensive understanding of their lived

experience, and from the interpretations, the data were broken down into codes to analyze the meanings to create themes (Creswell, 2009). Commonalities and differences in the themes were also examined.

## **Literature Review Related to Key Concepts**

### **Challenges of Former Foster Youth**

Foster youth are challenged due to reaching a critical period in their lives by simultaneously transitioning out of foster care and reaching adulthood. These individuals share commonalities of their same age counterparts of needing to become independent, develop life skills to manage themselves, and obtain support systems. However, fulfilling these needs are uniquely challenging for individuals transitioning out of foster care. As the young adults reach independence, stress increases as many are left without meaningful supports and resources (Piel & Lacasse, 2017). Foster youth who are transitioning to adulthood experience several life challenges that lead to numerous negative outcomes including, housing problems, homelessness, legal system involvement and incarceration (Geenen & Powers, 2007). Most individuals in the general population move out of their parental home by age 23. Due to hardship or life complications, often individuals have to move back into their parental home. The average adult in the general population in America moves out of their parental home at age 28, which provides a better opportunity for successful independence (Jones, 2013). Young adults who are emerging from foster care are expected to transition into independence, when it is time to exit foster care at age 18, and in some states 21. Within the first few years of exiting foster care, young adults have reported housing problems and homelessness. Researchers

have focused on the links that contribute to the factors of homelessness and housing problems of emerging youth in the transition to adulthood (Fowler et al., 2009, 2017). Although, \$140 million of the John H. Chafee Foster Care Independence program annual funding is divided by percentage amongst the states to prepare youth to transition into adulthood, housing problems and homelessness amongst this population continues to be at rise (Fowler et al., 2009).

Fowler et al. (2017) conducted a study on the prevalence of homelessness and housing instability of former youth who have aged out of foster care. The research was done to provide a national comparison of data to investigate whether foster care is a contributing factor of homelessness in emerging adults. In the study, a sample of 5873 participants from year 2008-2009 second cohort in the national welfare system was used. The age group of the participants are from caregivers with children age 2 to 17.5. There were a small analytic sample of 350 participants that were age 18. These individuals were investigated in the past, due to reports of neglect and abuse. In the study, 18 and 36-month follow-up interviews was conducted with the sample from The National Survey of Child and Adolescent Well-being (NSCAW II). The interviews were provided to indicate if youth who age out of foster care experience high risk of homelessness as they transition to adulthood, compared to youth who have not experienced being in foster care. In the study, a test was conducted to compare the differences of those who have experienced independent living services, factors that contribute to those that are less likely to experience homelessness; such as comparing youth who remained in foster care longer to least likely experience homelessness. The results indicate that 25% of



participants in the study experienced the risk for inadequate housing during the transition to adulthood. Findings from the study did not show that adolescents have benefited from state policies that provide extended care or independent living services, in which proper transitioning planning and skills training can increase development.

Reunification with families among the adolescents who were placed in foster care demonstrates an association of lower homelessness risk. It is essential that family connections or social support is established, which can reduce homelessness during the transition to adulthood. This study aligns with Fowler et al.'s (2009) study, which examined the prevalence of housing problems and the associated psychosocial effects. A sample of 265 of adolescents aged 19–23 leaving foster care in 2002 and 2003 and the nature of homelessness were examined. The study took place in the Midwestern area over a 2-year follow up. The study was conducted due to former inadequate assessments of housing problems. There is little research on the onset and frequency of homelessness and housing problems in this population. Findings report that (57%) of participants experienced stable housing, during the follow-up (20%) were chronically homeless. Participants report housing instability was due to emotional and behavioral problems, such as high school drop-out, physical and sexual victimization, criminal activity. This study also concludes that adolescents are at risk to homelessness upon leaving foster care. Preventative programming and interventions are needed to be implemented to target individuals leaving foster care to improve outcomes.

Research showed that the individuals that were in foster care are less likely to have a high-school diploma or attend college, due to academic and behavioral problems

(Fowler et al., 2009; Geenen & Powers, 2007). The many displacements and abrupt changes that most youth encountered in foster care, led to high absenteeism and poor academic achievement in school (Pecora et al., 2006). They also experience difficulties with obtaining employment, and chronic risk factors of legal system involvement during youth and incarceration in adulthood (Geenen & Powers, 2007; Lee et al., 2015).

Courtney et al. (2015) conducted a study on the labeling and effects of adolescent's legal system involvement and outcomes using the labeling theory. The data were collected using the Midwestern Evaluation (Midwest Study). A sample of 732 youth of age 17-18 that were preparing to leave foster care. The same youths were interviewed at age 19, 21 and again at age 23 or 24. The method was used by survey to conduct the questions and was self-reported by the participants. The findings suggested that the youth reported higher adult criminal activity at 21 and criminal activity decreased by age 23 and 24. In addition, Courtney et al.'s study shows evidence that due to lack of education attainment or high-school diploma by 19, individual's engaged in legal activity and employment instability by 21. Legal system involvement is a contributing factor of the exclusion of conventional opportunities.

According to a study of a group of youth who aged out of three Midwestern states, found that by age 26, 46% of the participants have obtained work, however due to working with low income resulted to needing government assistance to assist with meeting their basic needs of living (Courtney et al., 2011). Emancipated youth reported economic hardship, including food insecurity, eviction, not enough funds to pay for utilities and phone service disconnection (Courtney et al., 2010). Finally, this population

experienced higher rates of mental health and substance abuse problems than their counterparts that have not experienced being in foster care (Piel & Lacasse, 2017). Individuals who were in foster care typically have a lengthy trauma history that might have not been addressed while in the child welfare system, demonstrating the impact of complex clinically mental health issues (Hulburt et al., 2004). The experience of trauma and child maltreatment in youth, endorse emotional and behavioral issues that most often continue into adulthood (Piel & Lacasse, 2017). Despite the challenges of transitioning to adulthood, youth have report that aging out has been thought as simultaneously empowering and anxiety provoking (Greeson & Bowen, 2008).

Piel and Lacasse (2017) conducted a study to examine the engagement in mental health services of youth transitioning to adulthood. The researchers explored the intensity and frequency of mental health services utilized by former foster youth. To obtain an understanding of what supports are most useful in obtaining the necessary needs and engagement in mental health services for this population. Focus groups and surveys were used to obtain results for this study. The researchers examined 55 former foster youth, 29 of the participants were chosen to participate in focus groups. 121 surveys were conducted, with mean age of participants taking the survey was 19. Findings report 61% used mental health services, 49% utilized services from a mental health center or outpatient clinic, 43% were prescribed psychiatric medication for mental health problems prior to turning 18. The findings report that mental health services have decreased after age 18. Due to the systematic barriers, such as lack of resources, financial constraints, social support and lack of insurance, mental health services has discontinued (Kruszka,

Lindell, Killion & Criss, 2012; McMillen & Raghavan, 2009). Findings support that foster youth whom engage in empowering, mentoring and supportive relationships can increase the likelihood of positive outcomes with obtaining and meeting the needs of youth regarding mental health services. Mental health issues are more complicated, as the adults are transitioning out of care with the lack of emotional and social support. Building collaborations with foster youth transitioning to adulthood and mentors, builds trust confidence and independence in the transition process and continuing their need of mental health services (Lietz, Lacasse, Hayes, & Cheung, 2014).

Rome and Raskin (2019) conducted a study examining the experiences of former youth, during the first 12 months after transitioning from foster care. The sample included 19 youth who aged out of care between 18 and 21. Seven of the former youth were males and 12 females. Phenomenological semistructured interviews were used to highlight the experiences of the former youth. One former youth terminated a pregnancy, four gave birth and two were expected fathers by the end of the study. Successful high school achievement involved all youth and two were still enrolled when transitioned from care. Fourteen of the youth reported being employed during emancipation and 15 report having former work experience. Four reported recent criminal justice involvement and 12 reported having a legal history. Challenges reported amongst all former youth was employment attainment, financial instability and poor relationship choices. Most former youth reported successful housing. Seven former youth moved in with their biological families or former caregiver. The participants reported positive and negative experiences residing with families. Obtaining resources was described as being familiar and needed

supports, such as obtaining health insurance, tuition assistance, independent living assistance, welfare assistance, but reported accessing those services was unfamiliar. Independent living services was acquired by all youth, but all report forgetting how to do the basic tasks that was learned. Some reported not being able to recall if those services were provided to them. The experience of the youth was captured well and identified common themes of the former youth. The study has limitations, due to the population only represented a small sample size and the study took place during a time of economic downturn. During the 12-month time span, the economic downturn might have affected the former foster youth and the overall general population in that area.

Schelbe and Geiger (2017) examined the lived experience of youths transitioning to adulthood who are parents. There were thirty-three participants in the study between the ages of 17 and 23 that were recruited from local contacts and agencies serving youth who were transitioning out from foster care. Out of the 33 participants, 21 were female; 12 were male. The data collected was from a previous study, an ethnography using collected data from field notes and observation (Schelbe, 2013) in combination with detailed interviews from the current study. The findings of the study show that the young parents demonstrated challenges as parents while transitioning to adulthood. Challenges reported was having limited resources and support. All of the participant's report having financial barriers and almost all were experiencing poverty. There were challenges with employment, which led to housing problems. Several of the mother's report difficulties with receiving support from the children's fathers. Many of the parents relied on the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) for

baby formula, milk and food and government benefits for other supports. A nonresidential independent program provided referrals and resources to many of the parents. The parents that did not engage in services from the independent program were unable to receive services due to being over age 21 or chose not to. Some of the parents discussed having limited parenting skills; due to not be taught by their own parents. However, many of the parents received parenting classes in their local county; which provided miscellaneous incentives to assist with some of the children's needs. Throughout the study many of the youth expressed having fear that their child will be taken away from them and placed in foster care. Due the parents in the study formally being in foster care, might provide underlying fear that their children might one day be placed in the foster care system (Schelbe & Geiger, 2017). Some of the parents lost custody of their children, due to mental health issues, financial barriers, lack of support and being unable to create a safe and stable environment for their children. Although, the young parents encountered several challenges they all reported having a desire to create a better life for their children and being motivated to improve the life that they were experiencing.

The researchers gathered unique stories of the youths aging out of care in their journey through parenthood. The study provided details of the stress and challenges that was experienced, contributing factors, complications and individual defined successes. Although the experiences of the young adults were examined the study findings were limited. The data collected was obtained from almost the same source of agencies involved in the foster care system and from foster youth who immediately transitioned

from care. Therefore, experiences of foster youth who did not receive services from the agencies might differ. Also, the study took place for almost 2 years, the outcomes could have changed if the results was collected over a longer time period.

The information obtained from this study suggest that it is relevant to gather experiences of stress and coping due to the challenges that former foster youth are faced with. The gathered information is important to the study because young adults who were in foster care during childhood are at risk for poor outcomes. The pregnancy rate of youths aging out of care contribute to higher national averages than their counterparts that did not experience being in foster care (Dworsky & Courtney, 2010) and are faced with unique challenges related to unemployment, housing instability, mental and physical health issues (Piel & Lacasse, 2017). Further research is needed to examine the experiences of former foster youth at least during a time period over 5 years, using data from sources other than agencies assisting foster youth. This study outlined the stress and challenges of parenting after aging out of foster care. More research is needed to address how those individuals cope with the stress and challenges that they have encountered.

Reilly (2003) examined 100 (55% female and 45% male) former foster youth post-discharge functioning and outcomes. The researcher explored this topic to get a better understanding of the former foster youth post-discharge functioning pertaining employment, education, healthcare, living arrangements, support systems, community preparedness and personal adjustment. Interviews were conducted with the former foster youth between September 2000 and January 2001. The data consisted of youth who had exited the Nevada's Division of Child and Family Services (DCFS) within the past 3

years. The participants ages ranged from 18-25. To receive the demographic information from the participants, the researcher asked standard questions to obtain the age, race, gender, education, employment status and educational experience. Hardship was experienced by most of the participants. 63% were employed, and those that were employed 60% reported making \$10,000 or less annually per year. Some participants report dealing drugs (24%) and used sex for the exchange of money (11 %) to support themselves. The youth had substantial involvement with the legal system and reported being incarcerated (41%), charges filed against them (26%) and involvement with law enforcement since leaving foster care (45%). The youth reported since leaving foster care, they lived in homeless shelter (18%), Streets (19%), were homeless (2%), lived with biological parents (7%), friends (24%), partner or spouse (29%), personal residence (11%), siblings (7%), relatives (8%), incarceration (7%), former foster parents (3%) and in the military (2%). Most of the participants reported being in contact with family, biological parents, foster parents, group home staff, case workers and most reported being able to rely on friends and family if they needed them. The former foster youth results show that maintaining healthcare since leaving foster care was quite difficult. Although 30% of the youth had health issues, 54% of the former foster youth report being in good health, 55% report not having health insurance, 25% were using Medicaid 25%, 11% was provided public assistance, and 9% reported having private insurance. Many foster youth experience early or unplanned pregnancies (Reilly, 2003; Schelbe & Geiger, 2017) during their journey into adulthood. In this study, 70 pregnancies occurred out of the 100 participants (15 miscarried and 18 were aborted). Most of the youth utilized



independent living services and 53% report being prepared for independence and satisfied with the services received.

To obtain the overall adjustment and indicators of difficulties and successes of the former foster youth correlations was used to identify the positive and negative experiences and satisfaction with services provided to them upon leaving care. The positive experiences that some of the participants reported was being satisfied when they received more training to prepare them to be independent and being overall satisfied with their lives when having a larger support system. When the participants were provided with the opportunity to receive training in several areas and provided more services, they reported receiving quality services and were satisfied with their current living arrangement. The participants that received more services for preparation for independence had less legal involvement and the participants that were already currently working while in foster care report having regular employment after being discharged from care. Higher rates of incarceration were reported with having less education. Some of the negative experiences that was encountered were associated with the foster youths having more foster care placements. It was reported that the participants with more placements, experienced more violence when in relationships, been incarcerated, more likely to experience homelessness and is associated with higher rates of pregnancy. The researchers found that participants with smaller support systems were more likely to become homeless in the future. The data suggest that foster youth face significant challenges after being discharged from foster care. Although, there were some positive experiences of former foster youth doing relatively well, there were many of the former

youths that lacked the necessary needs for independence and were not satisfied with their experience. In addition, unemployment, incarceration, unplanned pregnancies, mental health illness, poor health issues and homelessness continues to be prevalent amongst this population (Reilly, 2003).

The aforementioned research studies explored the challenges of former foster youth (Geenen & Powers, 2007; Dworsky & Courtney, 2010; Reilly, 2003; Schelbe & Geiger, 2017; Piel & Lacasse, 2017), but none of the studies did not provide any information about the experience of former foster youth pertaining stress, coping and their adjustment after reaching independence. The transition to adulthood is already challenging, even for those individuals that have not been involved in the child welfare system. Former foster youth have to concurrently face adulthood and transition out of foster care. Young adults encounter stressors near the transition out of foster care and stress increases without adequate help, systematic barriers and supportive means to transfer out of foster care independently. It is important to understand stress and coping amongst former foster youth that influence the navigation process in adulthood.

### **Stress**

Stress is defined as a state of being when the external and internal demands are perceived and is exceeding the available resources personally available (Lazarus & Folkman, 1984). The stress is a circumstance that cause or threatens the individual well-being and disrupts the individual ability to cope (Boyd & Hunsaker, 2018). Stress can be conceptualized as the result of how environmental factors effects the individual. Stress is a constant interaction between the individual and the environment, where the individual

uses their thought process, evaluation and provide a response (Lazarus & Folkman, 1984).

Stress has a major influence on our mood, behavior, health and overall wellbeing. Individuals have experienced stress early in childhood and adolescence years; whereas left untreated cause negative outcomes in adulthood (Piel & Lacasse, 2017). Being exposed to stressors in the developmental years, puts the individual at risk for mental and physical health issues over time (Piel & Lacasse, 2017). Stress can cause changes in one's behavior, depression, anxiety and acute and chronic illness (Lazarus & Folkman, 1984). Life events that individuals perceive as stressful, along with high stress consecutive conditions are associated with alcohol usage and self-medication abuse (Zimmerman, Wittchen, Hofler, Pfister, Kessler & Leib, 2003), increasing the probability for addiction (Lazarus & Folkman, 1984).

Recurrent life difficulties are considered chronic stressors, such as conflict between social roles, lack of control in life demands, unemployment and overall daily hassles. Stressors can be discrete or continuous. A discrete stressor can occur when an individual need to adjust to a life change, such as loss employment or relationship conflict. In contrast, continuous stressors are life problems that are ongoing. There is an association with chronic stressors, daily hassles and psychological distress (Lazarus and Folkman, 1984; Serido, Almeida & Wethington, 2004). Research has suggested that the well-being is affected by a common everyday stressor, verses a stressor related to a major life event that might occur less frequently (Lazarus and Faulkner, 1984). Individuals of poor socioeconomic status are reported to be more vulnerable to the effects of chronic

stress (Serido, Almeida & Wethington, 2004), such as former youth who have exited foster care (Schofield & Beek, 2005 & Jones, 2013).

Personal factors contribute to how individuals perceive stress and react to it. DeLongis, Folkman and Lazarus, (1988) examined the impact of stress on health and mood. Participants included 75 married couples that was studied during a 6-month period. The common effects of daily hassles were reviewed and showed that daily stressors contributed to health problems. The data suggest that lack of supportive relationships and low self-esteem were more likely to experience somatic and psychological problems. In addition, there were an association with individuals of low psychosocial resources and vulnerability to mood instability and illness, upon the increase of their stress levels. Nonetheless, individuals that have experienced acute or chronic stress levels has contributed to behavioral and health complications. Some of the complications, included gastrointestinal, cardiovascular, respiratory and immune diseases (Boyd & Hunsaker, 2018 & Schneiderman, Ironson, & Siegel, 2005).

Every individual is unique and will respond to stressful situations in their own way. There are in-person characteristics, genetic factors, individual personality traits and immune system diseases that can influence how people respond to stress (Schneiderman, Ironson, & Siegel, 2005). Moreover, populations of individuals that are more likely to experience financial hardship, low educational attainment, poor health and mental health are more vulnerable to the effects of stress (Schneiderman, Ironson, & Siegel, 2005).

## **Effects of Stress on Physical and Mental Health**

In a stressful event, there are series of changes that take place in the cardiovascular, endocrine, immune, and nervous systems (Schneiderman, Ironson, & Siegel, 2005). The changes in the body create the stress response. The changes are generally adaptive in which stress hormones are released and energy distribution surfaces. When the energy develops it divert to the skeletal muscles and brain tissues, that becomes more active when under stress. During this time, the immune system cells begin to activate and spaces in the body are created for battle (Schneiderman, Ironson, & Siegel, 2005). Stress tends to exacerbate diseases. For example, individuals that suffer from rheumatoid arthritis demonstrate symptoms of inflammation in the joints, swelling and pain. When an individual has arthritis while experiencing stress induced symptoms, increased swelling and reduced mobility occur (Schneiderman, Ironson, & Siegel, 2005). The acute stress responses cause the blood pressure to increase due to the energy that is sent to the organs. There is an increase of the heart rate and stroke volume of the myocardial mechanism. When the blood pressure becomes chronic, it triggers the heart to work harder, which causes hypertrophy that can appear in the left ventricle. Blood pressure that's chronic and constantly elevated can lead to damage arteries. Controlled studies demonstrated men with low socioeconomic status are at higher risk for coronary heart disease (Marmot, 2003). However, both men and women report cardiovascular disease and hypertension due to work stress (Schneiderman, Ironson, & Siegel, 2005), and demonstrated increased respiratory issues such as a cold virus when subjected to stressful live events than those that have not (Schneiderman, Ironson, & Siegel, 2005).

Exposure to chronic stress in the developmental years can lead to neurobiological outcomes, which can put an individual at risk for mental health issues, medical morbidity and coronary heart disease (Schneiderman, Ironson, & Siegel, 2005). Piel, Lietz, & Lacasse, (2017) examined 29 foster youth in a sample from southwestern state. The participants were asked questions in a semistructured interview about their transition process from foster care pertaining the challenges and support that occurred pertaining meeting their mental health needs. The interview was recorded and transcribed. To determine reoccurrence two social workers and adolescents tested the results inventory. The final survey was pilot tested with 20 former individuals that transitioned from foster care. After phase 1 was reviewed, the study was administered to a sample of 121 participants in phase 2 by survey. The study was conducted using Likert-type scales. Although, mental health services decreased when the participants turned 18, the participants report ongoing mentorship and social support was useful in their transition to independent living. It is important for young adults who discontinued mental health services and have navigated from foster care to receive other emotional supportive services, to help with the challenges of independent living. The stress related outcomes will vary according to what type of factors that the individual might have experienced.

Youth who have experienced long-term foster care usually have encountered a multifaceted trauma history, that may not have been addressed during their time in care. Left unaddressed, youth have demonstrated experiences of anxiety, depression and other psychological problems into adulthood (Burns, Phillips, Wagner, Barth, Kolko, Campbell & Landsverk, 2004). Stressful experiences that led to the diagnosis of anxiety disorders

and panic attacks were associated with increased alcohol consumption (Zimmerman, Wittchen, Hofler, Pfister, Kessler & Lieb, 2003). Typically, foster youth represent poorer mental health functioning than their peers of the same age group. Difficulties that are faced by former foster youth have impacted their ability to cope with developmental challenges (Schofield & Beek, 2005) and are at higher risk for developing post-traumatic stress, dissociation and clinical depression in adulthood (Stein, 2006). Individualized approaches and collaborative support services to former foster youth is important with helping to meet mental health needs (Lietz, Lacasse, Hayes & Cheung, 2014).

### **Stressors with the Challenges of Young Adulthood**

Former foster youth have a unique set of challenges as they transition from foster care into adulthood. They encounter internal and external stressors, such as having higher rates of physical and mental illness, incarceration, homelessness, poverty and low educational attainment (Courtney et al., 2007; Geenen & Powers, 2007; Havlicek et al., 2013). After a few years after leaving foster care 12%-14% report experienced homelessness. In addition, surveys of former foster youth and providers shows difficulty securing housing and high rates of homelessness (Fowler, Toro, & Miles, 2011). Most young adults who were not in foster care have their biological families to provide emotional and financial support as they engage in independence. Former foster youth are eager to reconnect with family relationships after being discharged from foster care (Geenen & Powers, 2007). Problems with adjustment into adulthood are common in former youth, if the individual have not fully grieved the loss of family or relationship change and past is overlooked. Complicated relationships amongst former foster youth

and their caregiver, jeopardize the needed support that can protect and assist the foster youth in emerging adulthood (Fowler, et al; 2017). Independent living services that provide concrete daily life skills are critical, but is not enough to support the young adults. Former foster youth who can rely on family for support with financial assistance and independence advice, reduce the chances of homelessness (Fowler, et al; 2017).

Individuals that were in foster care report less educational attainment, than individuals that were not former foster youth. 50% of foster youth report not graduating high school (Chapman, Laird, & Kewal Ramani, 2010). According to the criteria for post-traumatic-stress disorder, 30% of foster youth met the criteria verses 7.6% of their peers that are in general population (Pecora, Kessler & Williams, 2005). Rates of depression in former foster youth (41%) in adults ages 20-30 were found higher than their peers in the general population (21%) and 11.4% demonstrated meeting the criteria for panic disorder (Pecora et. al., 2005). These challenges further limit former foster youth capacity to navigate the developmental challenges of adulthood, therefore coping can be used to manage the stress and reinforce desirable behaviors.

### **Coping**

Coping is described as changing behavioral and cognitive efforts to control internal and/or external stressors (Lazarus & Folkman, 1984). Former youth experience internal and external stressors as they transition into adulthood. Many former youths face the challenges of lacking basic resources to assist with their transition to adulthood, such as interpersonal support, access to housing and education (Courtney, Dworsky, & Peters, 2009). To help with the success and wellbeing of the young adults in the transition into



adulthood, 36% of the young adults between age of 18-31 were able return home to familial relationships (Pew Research Center, 2013). Individuals that might need resources to partake in coping strategies, but does not have access to them might endorse a negative impact. The combination of stressors and limited resources will make it more difficult to effectively cope with stress (Galaif et al., 2003).

Individuals that was involved in the foster care system typically experience a combination of various stressors and history of trauma, that might not have been addressed during their time being in care (Galaif et al., 2003; Vanderwerker et al., 2014). Every individual is unique and demonstrated their own experience, however due to the impact of trauma almost half of the individuals in the foster care system demonstrated behavioral and emotional outcomes (Leslie, Hurburt, Landsverk, Barth, & Slymen, 2004). To cope with the trauma, prescriptions of psychotropic medications was prescribed (Vanderwerker et al.; 2014). Adolescents and adults who have experienced maltreatment found emotion-focused coping to be effective. Research suggest emotion-focused coping have been effective through the life-span when assisting individuals that experienced maltreatment (Jackson, Huffhines, Stone, Fleming & Gabrielli, 2017). Regardless, of the need for continued mental health support, within in a year after transitioning out of foster care nearly 60% of former foster youth discontinue mental health services (Mcmillen & Raghavan, 2009). Due to financial limitations, insurance and lack of resources, many individuals that aged out of care withdraw from mental health services (Courtney et al., 2005; Galaif et al., 2003; Mcmillen & Raghavan, 2009).

Grey et al. (2015) conducted a study examining the associations between resource availability and coping effectiveness. 172 emancipated foster youth was used in the sample. Resources reviewed was housing quality, social support and education level. Coping strategies reported in the study was active coping, support seeking and cognitive reframing. The findings suggest that effectiveness of coping is associated with having resources available, high level of social support was associated with support seeking, cognitive reframing and increase levels of coping strategies. Finally, youth who engaged in low levels of social support, support seeking endorsed greater anxiety and depression symptoms. In order to provide effective coping interventions, resources must be available to assist those individuals. Even if resources are available and the individual are unable to obtain it, will likely increase the stressors in that individual. This study employs implications for positive development in foster youth. It demonstrates the benefits of having resources to assist youth during emerging adulthood.

Foster youth have experienced the transition from living with their biological families or caregivers to foster care, which can be traumatic for the adolescent child (Nesmith, 2017). When the foster youth reach adulthood, typically they experience the transition of aging out of care. Nesmith (2017) examined how youth cope with change using the Bridges Transitions Framework. The purpose of the Bridge Transition Program is to normalize the emotional reactions of change, help to provide an understanding of how change affect how youth behave and feel and create coping strategies catered from the information provided. A transitions framework expert provided training to social workers that was going to implement the study. Then the social workers conducted the

training to adolescents and their foster parents. There were 63 youth who participated in the study. Both of the questionnaires was completed by 54 youth. The social workers found value in the framework, and view the framework as an important tool to create acceptance and ease in the youth's transition. Youth involvement in the transitions framework, created confidence and acceptance in their transition process. The Bridge's acceptance can be helpful with determining youth coping with change, but the study is limited to a small sample size. Also, being that the youth was currently in foster care create factors that can influence the youth responses.

### **Coping Strategies and Stress**

Lazarus and Folkman, (1984) describes emotion-focused and problem focused as two major functions of coping when faced with stress. Emotion coping is to regulate the emotional response that is causing the stress, whereas problem coping is means to deal with stress by altering the situation. Problem avoidance is to avoid thinking about the problem, such as engaging in alternative activities instead of dealing with the problem (Tobin, Holroyd, Reynolds and Wigal, 1989). Folkman & Lazarus (1985) have found that problem-focused coping and positive reappraisal provide satisfactory outcomes.

Folkman, Lazarus, Christine, Schetter, Delongis & Gruen, (1986) examined relationship between cognitive appraisal, coping and stressful encounters. There were 85 married participants between the ages of 35 and 45. The participants was interviewed once per month during a 6-month period. The data was collected by self-report interviews about their most stressful encounter. Primary and secondary appraisal was used in the interview structure of this study. Primary appraisal was used to describe the stake of the

participant stressful event and secondary appraisal described the threat of the individuals well-being. Coping was assessed using the instrument WAYS of coping (Folkman & Lazarus, 1985). The findings concluded that coping was related to cognitive appraisal and the type of coping used was determined by what was at stake. Overall, the relationship between secondary appraisal and the encounter outcome was stronger than primary appraisal and encounter outcomes. The weakness in this study is that the results was determined by self-report questionnaire, and sometimes outcomes need to be determined by other resources of verification.

Zambiachi and Bitti (2014), conducted a study to analyze the influence of proactive coping strategies, the perspective of time, future time perspective, family communication and social-wellbeing in emerging adulthood. Participants included 232 emerging adults in a regression model. The researchers found that open family communication shows positive correlations with social well-being, time perspective, proactive coping strategies, divergent thinking and the regulation of positive and negative emotions. Carbonell, Reinherz, and Beardslee (2005) participants report that coping in means of avoidance was beneficial when their options of response was limited and they felt threatened. Low problem coping is when individuals use avoidance to cope, which reduce the effort to handle the stressor (Gol & cook, 2004). Although, avoidance is considered problematic and least effective (Blalock & Joiner, 2000), it was most useful in the previous study.

Jackson, Huffhines, Stone, Fleming and Gabrieli, (2017) conducted a study on coping styles of youth in foster care that have a history of maltreatment. The participant

sample consisted of 291 males and 251 females from age 8 to 22, totaling 542 foster youth who are currently residing with the Midwest. The participants reported a history of maltreatment in their lives by self-report. The types of maltreatment measured were physical abuse, sexual abuse, psychological abuse and neglect and coping was measured using a behavioral inventory. The results concluded that 58% of the sample preferred direct coping strategies, which was the preferred style of more than half of the participants. Some of the participants preferred to use multiple coping strategies: Indirect Action, Direct Action, Prosocial Action and Asocial Action. This study addressed preferred coping styles by youth, but the gap in this study is that it does not address how many youths engaged in treatment and the type of treatment provided. The behavior inventory was used in the study to measure the type of coping endorsed. It is unclear if any of the participants used the cognitive behavior therapy treatment modality to influence the type of coping most used.

### **Strength-Based Approach**

Social service providers, community care organizations and practitioners have focused on the strength-based approach as a tool to enhance individual's awareness and understanding of their own strengths and capabilities to promote a positive well-being. Strength-based approach is a therapeutic practice that builds on the individual strengths, values and resources (Saleebey, 1996). This approach help individuals identify their talents, aspirations, competencies and values. A tool for creating a better life can be within ones' talents. Strengths can be identified or distorted due to life circumstances; such as history of tyranny or trauma. Some individuals learn about themselves through

their life tribulations and from the world around them. Unique strengths are built from the individual narrative or personal story, developing meaning to the individuals' life. The strengths based perspective is geared to help individuals instill hope in themselves and make positive changes. Recognizing qualities, such as motivation, individual skills, resourcefulness, empowerment and resiliency are key to the strengths perspective.

Saleebay (1996) described the components of the strength perspective:

1. Individuals are considered unique and the strengths are their talents, traits and resources.
2. The experts are the individual, family or community.
3. Therapy is possibility focused-based.
4. Childhood trauma is not predictive.
5. The family, community and individual aspirations is the focal point.
6. Resources pertaining work are with the use of the individual, family and community.
7. Moving on with your life, establishing and developing values and commitments and using community resources or involvement is how help is centered.

Foster youth described the strength-based engagement as an essential part of meeting their mental health needs (Piel et al., 2017). Although, former foster youth reported strength-based of engagement as being essential, previous research found fault in these principles from the perspective of parents, youth, and workers (Lietz, 2011; Michalopoulos, Shaw & O'Conner, 2012). Many foster youth lack experience and might

make an assumption of their best care, which put them at risk for vulnerabilities. However, for decades, strength-based practice was used to improve outcomes of youth and families to help the complexities of the individual's needs. Importantly, most helpful was foster youth engaging in strength-based practice concurrently with individualized services, empowerment, preserving relationships and collaboration of mentors and professional services to prepare them for independence (Piel et al., 2017). Despite some challenges of youth who might have experienced homelessness, unemployment, incarceration, poor education attainment, victimization and mental health issues (Courtney et al., 2011), studies have shown some positive outcomes of youth with the use of services that provided emotional support and mentorship (Collins et al., 2011; Greeson & Bowen, 2008).

### **Supportive Relationships and Social Networks**

Some of the challenges that foster youth face as they enter into adulthood are lack of healthy and stable supportive relationships, which is important in the successful transition into adulthood. The disruptions that occur in the foster youth home care due to frequent moves, cause instability and detachment from those most needed healthy relationships (Spencer et al., 2010). Some of those relationships that have been lost are mended. Often young adults are able to reside with biological parents, extended family or siblings during their transition into adulthood. Others do not know their biological family to go back home to and even if they are found it is uncertain if their biological family would want to reconnect with them (Collins, Paris, & Ward, 2008). The disconnect and broken ties with family members or guardians; as they entered in foster care as youth

make it difficult for former youth to reconnect with them after exiting foster care. The former youth that do not connect with former relationships, frequently have connected with supportive nonparental adults from their most current supportive network (Spencer et al., 2010).

Permanent, emotional and supportive networks are needed to sustain independence as the former youth navigate through the obstacles and challenges that might be faced during their transition through adulthood (Spencer et al., 2010). Research have shown that mentoring is probable to meeting the precarious needs of youth for supportive relationships and networks (Ahrens, DuBois, Richardson, Daining, et al.,200; Fan & Lozano, 2008; Massinga & Pecora, 2004). There are various forms of mentoring to assist foster youth and emerging young adults (Britner & Kraimer-Rickaby, 2005). Examples include online mentoring; where individuals can communicate via email, Big Brother and Big Sisters of America, School-Based Mentoring, Adoption and Foster Care Mentoring Program, Foster care Mentoring Program and Peer Mentoring Programs (Spencer et al., 2010).

Ahrens et al. (2008) found better outcomes with youth that transitioned into adulthood having at least one positive mentor in the process. There are associations of youth having a mentor while in foster care led to doing well in adulthood. Important social networks were achieved through foster youth mentors, caregivers and peers (Collins, Spencer & Ward, 2010). Munson & McMillen (2008) found that there were decreased levels of stress in youth that have been involved in a mentoring relationship for more than a year. Also, the youth that have been involved in the mentoring relationships



shows less likelihood of being incarcerated than youth that did not have a mentoring relationship. Grossman and Rhodes (2002) found mentoring relationships that lasted for at least one year contributed to better outcomes for youths age 10-16. Emotional and behavioral functioning and academic achievement were improved in the youth, with the greatest success being improvements in the quality of parental relationship, perceived social acceptance, scholastic competence and self-worth. Youth that engaged in mentoring relationships for less than 3 months, demonstrated a decrease in perceptions of scholastic competence and self-worth. Having a consistent, trusted emotional connection have proven to achieve better outcomes for youth (Grossman & Rhodes, 2002) and relationships that abruptly end result to poor outcomes (Spencer, 2007). The rates of failure pertaining relationships in mentoring programs can vary with each program. Youth in foster care are unique and often have complex problems. Increased failure rate most often occurs with youth that have complex problems and was referred to receive mentoring services due to psychological and educational problems (Grossman & Rhodes, 2002). Foster youth with complex problems, such as maltreatment or history of abuse tend to demonstrate mistrust and low sense of self (Price & Glad, 2003). Sometimes while in foster care complex problems are left untreated (Piel, 2017). Many youths are unaware of available resources and opportunities to serve them. The youth past experiences may cause barriers with establishing relationships with mentors. However, once trusted relationships are built with appropriate matched mentors, the mentors can ease the negative effects by providing the youth with a stable, supportive and consistent experience (Spencer, Collins, Ward, and Svetana Smashnaya, 2010).

A mentoring program can help some youth to achieve a healthy, positive and productive adulthood. However, due to the complex difficulties, concurrently both micro and macro efforts need to be addressed. Typically, youths that are transitioning from foster care need social networks and concrete support. Mentoring programs is an important component to provide services to transitioning youths, but cannot supplement concrete supports that are needed to achieve sustained success (Spencer et al., 2010).

Singer, Berzin & Hokanson (2013), conducted a qualitative study on the supportive relationships as former youth have transition to adulthood. The participants explored was between the age 18 and 21 years old. Two community based programs that provide services to foster youth was used to recruit the samples. Each participant completed semistructured interviews. The study concluded that support was provided to the emerging adults by their relational network. The study described informational, instrumental, appraisal and emotional support as the four groups of support from the relational network members. Informational support provides guidance; instrumental support help with resources for financial development; appraisal provides assessment and feedback and emotional support includes companionship. Sixteen youth received informational support by informal and formal networks. Eleven youth report received appraisal support by child welfare professionals and teachers. Instrumental support from child welfare workers was received to eighteen youth and sixteen youth reported receiving emotional support from family and friends. The quality of support in child welfare professionals, biological families, old friends, former relationships with former foster parents was described as an important factor in the emerging youths support

network. It was reported by the youths that their child care worker enhanced their self-esteem and self-worth. The study provides meaningful knowledge pertaining the emerging youth supportive networks and quality of those networks. However, due to the small sample size and purposeful sampling, the study child-welfare programs, results are just a small contribution to the foster care population.

Jones (2013) examined foster youth adaptations to adulthood and the role of social networks in the transition process. The sample consisted of ninety-seven participants that was discharged from foster care and have entered the residential facility between October 2001 through June 2005. All participants had to be at least age 17 to participate in the study. The study took place over a 2-year time period after the foster youth was discharged from the residential facility. The interview process took place in cohorts and intervals after discharge. The participants were interviewed at 6 months, 1 year and 2 years. 60% of the participants consisted of females. 58% were age 18 (n=58), 31% were age 19(n=30) and 17 and 20-year-olds (n=11) were divided and contributed to 11%. Social support was assessed by measuring the participants use of emotional or instrumental support. Social support represents received advice, comfort or guidance when faced with a conflict. Instrumental support is the assistance provided for the use of tangible items, such as food, shelter accommodation and financial assistance. The types of supports were organized into categories of professional, mentor, friend or family. The professionals included supports from counselors, social workers, therapists, former foster parents and teachers. In the study resilience was the dependent variable. Resilience, social support, behavioral and mental health and readiness for independent living were

assessed to determine findings. Resilience was measured in the study by the discharged youth demonstrating the ability to achieve self-sufficiency, continuing education, obtaining employment, living independently, obtaining supportive relationships and resourcefulness. Behavioral and Mental health was measured using the Young Adult Self-Report (YASR), to measure the discharged youth mental health status. According to the YASR report, more than half of the respondents demonstrated mental health or substance outcomes ( $n = 48$ ), 23.7% report having alcohol or drug issues ( $n = 22$ ). The study concluded that most of the former youth utilized social support after discharge. A combination of emotional and instrumental support was reported being received by most youth. However, the prediction of utilizing social support and social networks contributes to having resilience reported mixed results. Residing with close friends or family showed an association with resiliency and provided an essential source of financial support. Friends were associated with resiliency, but the report does not indicate whether friends were other former foster youth or if the friends reported was obtained in the general population after discharge. Friends were favored for social support and advice over family. Youth that moved back in with family were associated with the least resiliency then their peers living in other arrangements. Maintaining supportive relationships by professional relationships did not show a significance in association with resilience. Belonging to a group or organization demonstrated the strongest association of resiliency. Youth that graduated high school indicated having more resilience than youth that did not graduate. Youth that reported mental health and substance use problems demonstrated less resilience. The study highlighted that independent living skills and having a sense of

belonging shown a positive association with resilience. The findings of this study outlines with findings from previous studies, pertaining the significance of having social support as being a positive factor in establishing independence and a positive wellbeing in former foster youth (Dworsky & Courtney, 2009 & Collins et al., 2010). The limitations of the research are: (a) due to the small sample size being from one residential facility, limits the capability for generalization. (b) the data measured was by self-report; therefore, responses might be reflected by the participant interpretation, but a different reality might be interpreted by another person, and (c) the study was correlational; which identifies the association between the measures, however details about the perceptions pertaining the results are unable to be obtained. There is little known about the social networks and sources of support when former foster youth reach independence (Collins, Spencer, & Ward, 2010 & Jones, 2013). Foster youth that received social support obtained by sources of professional systems of care demonstrated the ability to buffer distress better than the youth that only used one source of social support (Perry, 2006). This research gathered information that is relevant for the study because it highlighted the significant challenges that former foster youth encountered while being followed for 2 years, including the types of social support that was beneficial. However, every individual is unique and perceptions might differ, therefore it was important that the former foster youth individual stories of how social support and other coping strategies are used during independence were examined.

Jackson and Cameron (2012) conducted a study to examine the experience of education with participants age 18-24-year-old. The participants were from five countries

and was interviewed twice, during the time span of 1 year over 3 years. All of the participants experienced similarities and report that their protective factors are adults who are caring and supportive, housing stability, foster care, financial assistance and education placement. In a qualitative study, conducted with five youth from Sweden, age 19-21, similar themes included the importance of stability in care, supportive informal relationships and resiliency (Hedlin, 2016).

Building a collaboration of mentors and professionals to help foster youth transition to adulthood led to improved outcomes (Piel et al., 2017). The psychological wellbeing and healthy relationships are promoted through normalizing the feelings of foster youth and bringing awareness about the transition process of adulthood (Nesmith, 2017). Youth reported the mentors and professionals were an important factor, that helped them build the confidence and trust in themselves to achieve independent goals (Lietz, et al., 2014). When individuals have a network of support enhances their sense of value and decrease their doubts of goal achievement (Coleman, 1998). Through the child welfare and mental health system, formal and informal relationships are provided and can impact youth experiences (Lietz, et al., 2014). Some youth encountered negative experiences with seeking professional help (Del Mauro & Williams, 2012). If the individuals from the established social networks are not trusted, adolescents or young adults will not seek care. When trusted relationships are formed the adolescents and young adults will ask for help from the supportive relationships. Consistency and perceived effectiveness in professional relationships are associated with youth positive service engagement (Lietz, et al., 2017), especially due to the history broken relationships

(Collins et al., 2010). Youth found informal and formal relationships to be important (Collins et al., 2010). Foster youth appreciated services that was provided from social workers, case managers and counselors and found them to be professional and helpful (Piel et al., 2017).

Lietz et al. (2014) found supports that are individualized, flexible and specific to the individuals' needs are essential. Individualized services, include validating individual's experiences past history of trauma, related to maltreatment is pertinent in emerging adults. Individualized support services demonstrated the committed ability to serve emerging youth, and describe skills needed in increments for healthy navigation after age 18. The supports instilled improvement of the emerging adults developmental and emotional needs, by providing support during first time task completion.

Overall, leaving foster care while needing to face the transitions of adulthood can be anxiety provoking, and decision making about how to navigate can impact the lives of those individuals. Supportive services that provide the former youth to work in collaborative as equal partners when planning goals and decision making, encourage the development of problem solving skills (Munson & Mcmillen, 2009). Engaging youth in specific skills to maintain support networks, is important for success rates in adulthood (Piel et al., 2017).

### **Summary and Conclusions**

Transition and change occurs simultaneously as the former foster youth navigate through independence, and the ability to cope is beneficial with promoting a positive outcome and well-being. Studies have shown there are numerous challenges when former

foster youth reach independence (Courtney et al., 2007 & Geenen & Powers, 2007). It is important to understand the coping structure to determine the impact of the individual's stress/stressors and how their well-being is affected (Lazarus & Folkman, 1984). The review of the literature showed that each individual is unique and how one-person stress is appraised and determined, another individual might differ and demonstrate a different response to the stress (Folkman, Lazarus, Christine, Schetter, DeLongis & Gruen, 1986). There were very few studies that specifically outlined how former foster youth cope with stress, but the conceptual framework in these studies aligned with my research (Lazarus and Folkman, 1984). The literature revealed that research was needed to address how former foster youth cope with stress from their perspective. The findings from this phenomenology study, provided former youth with a voice to be heard, so we can learn their story and how to better meet their needs. By knowing how former foster youth coped with stress and strategies used, added to existing research with providing researchers with the coping approach and effective interventions that former foster youth used to adjust through independence.

Chapter 3 will provide the research methods and design of the study, including data collection, role of the researcher, participant selection, population, instruments, procedures, and data analysis plan used to conduct this study.



### Chapter 3: Research Methods

The purpose of this qualitative study was to explore the lived experience of adults after emancipation from foster care. The individuals provided their perspective of how they have navigated in adulthood and adjusted to society from their life experience. A phenomenological method was utilized in this qualitative study to explore and gain insight of stress and coping during this experience. I decided that other methods were not appropriate for this study because I sought to understand the adults' perspective from their very own lived experience rather than using the perspective of other individuals who have not encountered this experience firsthand.

This chapter includes details on the research methodology and rationale, including the specific procedures used in this study. The role of the researcher will be reviewed. I will describe the research design, participant selection logic, instrumentation, data collection and data analysis. Additionally, issues of trustworthiness and ethical procedures will be addressed.

#### **Research Design and Rationale**

I used a qualitative method and phenomenology design using interviews to explore the lived experience of adults who have emancipated from foster care. Qualitative research provides a foundation to understand and find meaning of the human or social problem (Creswell, 2009). Qualitative studies are used to help researchers gather an understanding and meaning of the issues that are found complex or a problem, behind the experiences of the participants (Merriam & Tisdell, 2016). The qualitative method and phenomenological design allows researchers to examine the participants' lived

experiences by developing patterns and themes of participants who share the same problem. I developed the following research questions to explore the lived experiences of adults who have emancipated from foster related to stress and coping:

- RQ1 – What are the lived experiences amongst the young adults after being emancipated from the foster care system?
- RQ2 – What coping strategies did the young adults who were emancipated from the foster care system use to manage stress and stressors in adulthood?
- RQ3 – How do young adults who were emancipated from the foster care system describe their adjustment to societal living?

Qualitative research provides the opportunity for researchers to find meanings and make sense of them, through exploring the participant's worlds (Creswell, 2013).

Participants are given the power to share their story and have their voice heard, and researchers can obtain meaning from each individual point of view of their experience (Patton, 2015). Qualitative research is beneficial to create theories when there is minimal information found on a specific population. The goal of a qualitative phenomenological method is for the researchers to use a smaller participant size, gather data, and interpret meaning from the individuals that describe their experiences (Creswell, 2009; Moustakas, 1994).

Researchers who conduct qualitative studies are looking to obtain a profound understanding of the problem, issue, or phenomenon (Merriam & Tisdell, 2016).

Creswell (2009) stated that qualitative research is designed for the researchers to be able to explore and gain insight of the uniqueness of the individual life experience. The

researcher plays a crucial role and is the key instrument for data collection and data analysis. The data are collected, examined, and interpreted, but are not transformed in a statistical format, as they would be in quantitative research. Qualitative research is descriptive in nature and the process is inductive. The words from the participants' stories are analyzed to depict trends and themes of what the researcher has learned about the participants (Merriam & Tisdell, 2016). From the stories about the participants' experience, data are reviewed and interpreted to help the researcher understand and find meaning from the participants' perspective (Merriam & Tisdell, 2016).

The qualitative method of phenomenology was chosen for this study to explore the lived experiences of stress, coping, and adjustment of the young adults who have been emancipated from foster care. To obtain meaning behind the participants in a study, phenomenological interviewing is a method used to explore and gain insight behind the participant's social problem, while researchers find meaning about the participants' experience (Creswell, 2009). The information from this study allowed me to learn, understand, and interpret information about the participants' experience. This approach allowed me to examine real-life situations and analyze them to find meaning, patterns, and themes of the experiences of the young adults who have transitioned from foster care. To provide a theory that is meaningful, researchers must be able to understand and gain insight about the participants in the study (Creswell, 2009). This study was aimed to provide an understanding of a problem, issue, or phenomenon by obtaining the experiences of the participants in which statistical data would be less effective (Merriam & Tisdell, 2016).

When identifying a research method to select for the study, researchers should choose a method that will correspond with the nature of the problem addressed, research questions, and audiences (Creswell, 2009). The researcher should consider the limitations and benefits of how the study will contribute to existing literature (Creswell, 2009).

There were other research methods considered for this study, but I did not choose them because they would have been less effective in obtaining the perspectives, experiences, and meaning of the lived experiences of the adults emancipated from the foster care system.

Qualitative researchers who focus on ethnography as the design for their study study the cultural group in a natural setting (Creswell, 2009). The data collection takes place over a prolonged period of time, by observing the individuals in their natural environment. The data collection is composed by face-to-face interviews and participant observations during the field research (Creswell, 2009). Ethnographic researchers focus on human society and the culture of a specific group of individuals (Merriam & Tisdell, 2016). Although ethnography is one of the most familiar approaches to researchers, this approach would not have been beneficial for the current study.

Researchers find conducting research using a case study to be beneficial with obtaining detail information when investigating a contemporary phenomenon within its real-life context (Merriam & Tisdell, 2016). A case study is where an intrinsically bounded system or multiple bounded systems are explored (Merriam & Tisdell, 2016). Case studies are bounded by length of time and activity that can be used to describe and analyze what is already known about a phenomenon (Merriam & Tisdell, 2016). A case

study would not have been beneficial to the current study because the approach does not address the participants lived experiences and the meaning behind them.

### **Role of the Researcher**

In qualitative research, the researcher is considered the human instrument in the study. The qualitative researcher is the key instrument to collect and analyze the data (Merriam & Tisdell, 2016). The researcher is able to be adaptive and respond instantly when collecting and analyzing the data. As the human instrument, the researcher must be able to identify their values, assumptions and own biases, which can provide an impact to the study. Besides being able to identify their own values, assumptions, and biases, the researcher needs to monitor and identify their own interests to make sure they do not shape how the researcher collects and interprets the data (Merriam & Tisdell, 2016). As the primary researcher in this study, I was the key instrument for collecting and analyzing the data. In addition, I transcribed, interpreted, and searched for themes in the findings. In being the primary researcher and being involved in the full process, I made sure to refrain from my own personal bias that might influence data (Creswell, 2013).

For this qualitative study, I conducted the phenomenological interviews to obtain the real-life experiences from the participants' perspectives. In qualitative research, bias can be led by the form of the interview questions. As a licensed professional counselor and primary researcher in the study, I believe my experience was valuable to this study. My experience has taught me how to interview and assess individuals in a nonjudgmental and neutral manner, refraining from bias. A qualitative researcher must be able to explore their own experiences and personal viewpoints and refrain from judgements (Merriam &

Tisdell, 2016). To avoid bias, I made sure that the interview questions were prepared objectively and with care. The participants in the study were able to voice their own story by using their own words. A researcher must be able to listen carefully in a neutral manner to find meaning about the experience or phenomenon (Patton, 2002). As the researcher in this study, I reviewed and organized the data into categories and common themes that emerged from the interview process (Creswell, 2009).

## **Methodology**

### **Participant Selection Logic**

Participants in this study consisted of adults who have been in foster care during their childhood and are no longer in foster care. Individuals who are about to transition out of foster care were not within the scope of the study due to not being experienced living independently amongst society. All individuals participating in this study have aged out of foster care and were over the age 18. In this study, I explored the lived experience of young adults who were in foster care during their childhood related to stress, coping, and adjustment. It was important that the individuals were over the age of 18 to provide a fresh perspective of their experience during independence. The determination of the inclusion criteria was to obtain information about participants' lived experience after foster care and provide current information about what was happening now in their world. The participants were recruited from local agencies in Georgia that have been working with foster youth during their childhood, independent transitioning living programs, and community-based services. Prior to participating in the study, the participants that were selected was asked to review and complete a consent form. The

study consisted of 6–10 participants who were asked to complete an interview and share their experiences with me using Skype or Zoom videoconferencing technology (see Appendix B). Phenomenological research requires engagement and exploring a small number of individuals to understand the meaning and develop patterns (Moustakas, 1994). To be considered for this study, the participants had to have been emancipated or aged out from foster care and be willing to share their lived experience. These criteria were most appropriate for this study to have examined the lived experience of the young adults pertaining stress, coping and adjustment.

Purposeful sampling is derived from the belief that researchers want to learn, understand, and obtain insight about their participants; therefore, the sample selected should contribute to obtaining the most information that can be acquired (Merriam & Tisdell, 2016). I chose purposeful sampling, which allowed the selection of the type of participants that would fit the criteria essential to answering the research questions for this study. When beginning purposeful sampling, I determined which criteria were selected when choosing the individuals or sites that was explored (Merriam & Tisdell, 2016). I chose purposeful sampling and obtained seven participants, based on the criteria for this study. Creswell (2009) purported that a convenient sample size for a qualitative phenomenology study can have 3–10 participants to be interviewed.

### **Instrumentation**

The researcher is the human instrument in qualitative research who collects, organizes, and analyzes the data (Merriam & Tisdell, 2016). It was important that the participants felt safe and were in a friendly environment, to help ease tension to allow

them to focus and be able to answer the research questions accordingly (Patton, 2002). To provide a sense of comfort, I made sure any additional questions that the participants might have were answered before we began. The participants were asked to partake in an interview that I conducted by Skype or Zoom technology, using the interview protocol instrument (see Appendix). I have formulated the interview protocol in a semistructured format, which consists of open-ended questions (Creswell, 2013). The interview protocol was used to help guide the interview process to help me conduct the interview in a way that enabled the participants to share their experiences of life after foster care and obtain meaning from their experience. The protocol served as a guide to promote accuracy and constancy.

The interview was conducted using Zoom, which allowed the participants to choose a safe and friendly environment in which to partake in the interview. I began the interviews by asking the participants if they would like me to explain any questions. My goal was to provide the language in the interview that was clear, concise, and understandable. Next, I asked the participants to partake in a brief warm-up activity to promote trust and rapport building. Merriam and Tisdell (2016) suggested finding commonalities, being friendly, showing interest, and fitting into participants' routines are ways for establishing rapport. My goal was to create a positive safe space for the participants by being nonjudgmental, friendly, and respectful. Being that the interview was conducted by Zoom technology, the interview was recorded, which allowed the interview to be transcribed verbatim and rechecked for accuracy. The interview recordings and transcriptions were protected by password. All data will be stored on my



computer for approximately 5 years. After 5 years, the data will be rescinded and destroyed.

### **Recruitment Procedures, Participant and Data Collection**

The purpose of this research study was to explore the lived experience of young adults who had been in foster care during their childhood related to stress, coping, and adjustment. I recruited the participants using a flyer that outlined the basis of the study, including the nature of the study and participant criteria. The flyers were distributed to local agencies in Georgia that have been working with foster youth during their childhood, independent transitioning living programs, and community-based services. The criteria for the study indicated that the individuals must have aged out of foster care and be currently over the age 18. My goal was to obtain six to 10 participants for the study, with the minimum of six participants. In a qualitative study using a phenomenology approach, there must be a minimum of 10 participants to reach data saturation, but through extensive and prolonged engagement, the researcher can obtain meaningful information with a smaller number of participants (Moustakas, 1994). Therefore, in-depth interviews were used to help establish meaning. If I had received only the minimum of six participants, follow-up interviews could have been arranged to help reach saturation. The individuals had to be willing to share their stories truthfully in a one-on-one interview using Zoom technology. Upon review of the potential participants, the participant and I determined whether the study was of interest to partake in. Once interest was established and the participant was confirmed to fit the criteria of

the study, I emailed the participant a welcome letter and invitation to participate in the study.

The participants were given adequate information and time to make an informed decision pertaining participation in the study (APA, 2010). Once the selected participants made their decision to participate in the study, the participants were provided an informed consent form. I asked for the participants to read the form thoroughly and I answered any questions to assist with the process. Also, explained the procedures to make sure that the participants understood and were fully aware of what they were consenting to. I explained if there are any potential harm or risks involved and informed the participants that the study was voluntarily with no cost to the participants. If the participant decided that they did not want to partake in the study, they were able to decline at any time. Once the participant decided that they would like to participate in the study, I asked for the participant to sign and return the consent form via email, by responding “I accept”, so the interview can be scheduled.

On the scheduled date of the interview, the participant chose a quiet location, that that they found of comfort. Since the one on one interviews were taken place by Zoom technology, the participants chose any place to interview of their choice as long as they had access to use the technology. Before the interview, I advised each participant that the interview will take approximately 1-2 hours. I used semi structured open-ended phenomenology interviews to collect data from the participants in the study. The questions were descriptive to allow the participants to describe their experience or phenomenon about the young adults that have been in foster care during their childhood

related to stress, coping and adjustment. An important part of the analysis process was taking field notes and self-reported responses of the samples. This allowed me to remember details of the participant's experience, and allowed the details of the story to not become loss or biased (Moustakas, 1994). At the end of the interview, I showed appreciation to each participant, explained any additional steps and answered any questions that the participant had. To ensure accuracy of comments and statements, I utilized member checking to rule out the likelihood of any misunderstanding of the meaning of what the participants stated. The participants were able to compare my transcription to their interview responses. Credibility can be achieved when triangulation and member checking is used in a study (Thomas, 2017). To ensure accuracy and reliability, I provided triangulation and member checking in this study to help maintain credibility of the findings (Merriam & Tisdell, 2016).

### **Data Analysis Plan**

Data analysis is a complex process, which involves collecting, preparing, managing and interpreting the data for the researcher to make sense out of it (Merriam & Tisdell, 2016). The data was collected from the participant's interviews that met the criteria of this research study. I organized and labeled the data, according to categories and themes. The number of categories are depicted from the research focus and data. Creswell (2013) purports working with 25 to 30 categories early in the data analysis process and consolidating those categories into 5 to 6 themes are preferred in his research. Findings can be organized in the form of theories or consist of themes, categories and descriptive interpretations. This data analysis process was used to answer

the research question, which I interpreted from the findings, themes or patterns of this research study (Merriam & Tisdell, 2016).

In data construction, there is a step-by-step process. The first step begins with reading the initial documents collected, transcripts and field notes from the first interview (Merriam & Tisdell, 2016). The first step was composed from the first interview that I conducted by zoom technology. I kept a notebook to make notations of thoughts, ideas, reflections and observation notes that might occur during the interview process to construct categories of recurring themes and patterns that are in the data. The first step was repeated with each participant to look for recurring regularities or patterns in the study (Merriam & Tisdell, 2016). All interviews from the study was recorded, transcribed verbatim and verified for accuracy. To organize the data, I transferred the data into a computer program that is password protected.

In a qualitative study using phenomenological interviews, data analysis often includes sorting, categorizing and coding to make sense and find meaning of the problem, issue or phenomenon of the participants experiences (Merriam & Tisdell, 2016). In the second step in the data construction process, I used NVivo software package to organize, categorize and code the data. NVivo is a software package that is used in qualitative studies to help the researcher categorize the data to create themes from the transcribed interviews to evaluate. I organized the data into the computerized filing system to help sort the data into categories, themes and trends that can easily be retrieved (Creswell, 2013). The second step was repeated with each participant to look for emerged themes or

word frequencies that are retrieved from the participant's experiences (Merriam & Tisdell, 2016).

### **Issues of Trustworthiness**

It is imperative that research studies are rigorously conducted, to present insight and show enough detail that the author findings persuade trustworthiness and makes sense to the readers (Creswell, 2015; Merriam & Tisdell, 2016). The researcher can approach the concerns of validity and reliability by diligently providing details of the conceptualization of the study, data analysis plan and how the results are presented (Merriam & Tisdell, 2016). Lincoln and Guba (1985) substituted validity and reliability with credibility, transferability, dependability and confirmability as more suited concept in assessing trustworthiness in qualitative research. In qualitative research, the researcher can obtain credibility in the findings by triangulation. I used triangulation by comparing and cross-checking the collected data and field notes from the interviews. Triangulation is a significant strategy to increase credibility or internal validity by countering the problem (Patton, 2015). Member checks is another common strategy to ensure credibility and its used to rule out any misinterpretations of how the researcher interpreted the meaning of the data, and the participants' perspective behind the phenomenon or problem (Maxwell, 2013). I utilized member checks by providing the analysis to the participants to determine if my interpretation of the participants' lived experiences were accurate. Member checks is another way to help eliminate any misinterpretations or bias that can occur in a study (Merriam & Tisdell, 2016). Although, the wording from the researcher

might be different from the participant, the participant should be able to identify their experience from the researcher interpretation.

In qualitative research, strategies that a researcher can use to achieve dependability, reliability and confirmability is by triangulation, audit trail and maintaining a reflexive journal (Merriam & Tisdell, 2016; Morse, 2015). Dependability is when the same findings are acquired, if the study were to be replicated (Lincoln & Guba, 1985). Dependability was attained in this study by providing face-face interviews with each participant by zoom technology. Triangulation occurs when data is collected by multiple methods to help the researcher understand the meaning or phenomena, to increase reliability and validity in the research (Merriam & Tisdell, 2016). The audit trail is in detail how the study was conducted and analyzed (Merriam & Tisdell, 2016). To conduct an audit trail, I provided a record of a journal, including notations of my engagement, reflections and ideas throughout the study (Merriam & Tisdell, 2016). To achieve confirmability, the audit trail, reflexive journal, and triangulation strategy will claim validity of how I conducted the study, created themes, analyzed and interpreted the data. The findings of the study can be authenticated by its viewers, if the study is consistent with the researchers' trail (Merriam & Tisdell, 2016).

In qualitative research, transferability can be achieved when the researcher findings can be applied to other situations (Merriam & Tisdell, 2016). Lincoln and Guba (1985) argued that in order to achieve the possibility of transferability, the researcher must create a thick description so similarities can be evaluated between the sending and receiving context. To enable transferability of the study, I provided a thick description of

the participants, analysis and findings of the study with adequate evidence. Evidence can be obtained from the participants' interviews, notations, journals, and reflections to increase the possibility for the findings to be transferred.

### **Ethical Procedures**

To establish validity, reliability and trustworthiness in a qualitative study, ethical practices must be conducted. To ensure the study is conducted with ethical procedures and guidelines, researchers must obtain approval from the university or college Institutional Review Board (IRB; Creswell, 2013). The approval must be obtained before the study can be conducted. Before I conduct the study, I have acquired approval from Walden University IRB. Once permission was obtained from Walden University, began the process of recruiting participants' and collecting data. Once the participant showed interest and met the criteria of the study, I will have emailed a welcome letter and invitation to participate in the study. I explained the research purpose, process and procedures of the study to the participants. Questions was answered to assist with any concerns and to provide the participants with an understanding of the overall research process. The participants were informed that their participation was voluntary and they had the right to withdraw from the study at any time without penalty.

If the selected participants would like to participate in the study, the participants were provided with an informed consent form. The informed consent was reviewed and signed by the participant, to consent to partake in the study. Once the informed consent was signed, I scheduled the interview with the participant. The informed consent includes a description of the study, details stating their rights to privacy, do no harm and

confidentiality clause. I assured confidentiality and privacy amongst all participants in the study. I made certain that none of the participants' will be identified, therefore each participant was provided with a letter and number to identify each participant. I provided an understanding that none of the participants' information would assume identification, as the participants will remain anonymous. All interview transcripts, recordings, journals and notes from the study was be locked securely in the researchers' home. As required by Walden University, all records from the study will be locked and stored safely for five years and destroyed.

### **Summary**

This chapter outlined the phenomenology method that was used in this qualitative study. The research methodology and rationale were described, as well the researcher's role in the study. Included in this chapter, is the research design, participant selection logic, data collection and data analysis. To conclude this chapter, issues of trustworthiness and ethical procedures were presented. Chapter 4 will provide the results gained from the analysis of the study.



## Chapter 4: Results

The purpose of this study was to explore the stress, coping, and adjustment of adults after they have been emancipated or left foster care. To address the purpose and answer the research questions, I conducted a phenomenological study with adults who had emancipated from the foster care system. I present the results of this study in this chapter. The research questions were the following:

- RQ1 – What are the lived experiences amongst the young adults after being emancipated from the foster care system?
- RQ2 – What coping strategies did the young adults who were emancipated from the foster care system use to manage stress and stressors in adulthood?
- RQ3 – How do young adults who were emancipated from the foster care system describe their adjustment to societal living?

The chapter begins with an overview of the research setting, demographics, and data collection process. Then, I describe the data analysis process and how I established trustworthiness of the data before turning to a presentation of the results. The chapter concludes with a summary.

### **Setting**

The participants in the study included seven adults who had experienced foster care during their childhood. I collected data that would deliver a means of providing former foster youth experiences with managing stress, coping, and adjustment to societal living. I conducted the study through organizations and agencies that served former foster youth. The agencies and associations distributed invitations on my behalf. During this

process, I recruited five participants. I was advised by the agencies and associations that due to COVID-19, many employees were working virtually, and many of the programs were closed. I thought it would be beneficial to recruit participants online because many individuals were home or working virtually due to the COVID-19 pandemic. Therefore, I made a request through the IRB to recruit participants using an online platform. The IRB provided an approval to recruit via social media as another strategy and within one week I received two additional participants that met the criteria for the study.

### **Demographics**

The inclusion criteria for the study were that participants (a) were adults over the age 18 years old, (b) had experienced foster care in their childhood, and (c) were no longer residing in foster care. Data saturation was achieved at seven participants, although my goal was to recruit at least eight participants. Participants in the study included one man and six women, all between 22 and 43 years old. One participant was Hispanic, four were of African American descent, and two were of European American ancestry. I selected participants who were willing to share their experiences of coping, stress, and adjustment from their perspectives. All participants had demonstrated living independently or had experienced working towards living independently after emancipation.

### **Data Collection**

I conducted face-to-face interviews with the seven participants via the Zoom web conferencing platform, which provides individuals access to meetings virtually by video communications. The participants interviewed in a safe, quiet environment of their

choice, where they could access the Zoom software on their computer or phone. The interview protocol instrument that I designed included semi structured open-ended questions. All the interviews were conducted using a phenomenological design, which provided the ability to examine the participants' lived experiences and to obtain an understanding of the meaning (Merriam & Tisdell, 2016). The interviews took approximately 1 hour. Before the interviews, each participant responded via email "I accept" after they reviewed the informed consent and consented to the interview. I explained to each participant in detail the purpose and procedures of the study and provided them the opportunity to ask any questions. Initially, I was unsuccessful with my attempt to recruit eight participants, as I had only recruited five participants who met the criteria for the study, so I made a request to the IRB to use social media as another platform to obtain participants. By using social media, I was able to recruit two more participants who met the criteria of the study. Although my goal had been to recruit at least eight participants, I was able to reach saturation with seven participants.

All interviews were conducted and recorded in Zoom, transcribed, and saved on a safe and secured password-protected computer. I used a reflexive journal to take notes of my thoughts, observations, and interpretations of the experiences. To build rapport, I asked each participant to take part in a brief warm-up activity before we began the interview (Merriam & Tisdell, 2016). Creating a positive, safe place can be shaped by forming a space of warmth, friendliness, and nonjudgment.

### **Data Analysis**

Qualitative data analysis is the process of distilling large amounts of textual data into categories, or patterns, to make sense of the data. After I collected data through participant interviews, I transcribed those interviews verbatim into Word documents. Then, I uploaded those documents into NVivo, a software package used in qualitative research to help researchers organize and categorize data, for data analysis.

I began data analysis in NVivo by reading and reviewing each interview in order to fully understand what each participant was saying and to gain a better understanding of the whole picture of their experiences. Then, I reviewed and coded each participant's interview transcript. In the coding process, I extracted passages of text salient to the experience of emancipating from the foster care system into adulthood by highlighting them in NVivo and clicking on the Code function, which allowed me to assign a descriptive title to that passage of text. I repeated this process for each interview, assigning subsequent passages of text that spoke to the phenomenon of interest with descriptive codes or assigning codes I had previously created to those passages. In the end, this process yielded a list of codes across all participants' interviews. Those codes are presented in Table 1.

**Table 1***List of Codes*

List of Codes	
Focus on survival	Adulthood is continual learning
Future goals	Case manager
Not a bad experience	Programs did not meet individual needs
Pretty rough	Learning financial skills
Resourcefulness	Domestic skills
Desire for connection	Learning interpersonal skills
Difficulty trusting others	Professional development
Empathy for others	Mental health resources
Resilience	Public and housing assistance
Feeling alone	Residential program
Financial stress	Social network friends and family
Housing insecurity	Support group
Lacking sense of security	Focusing on goal
Professional know-how	Physical activity
Interpersonal relationship challenges	Positive affirmations
Learning to accept help	Prayer
Making poor choices	Therapy
Mental health concerns	Staying connected to others
Pretty rough	Taking time for self
Feeling alone	Managing conflict
Financial stress	Case worker
Housing insecurity	Domestic skills
Sense of security	Professional development
Interpersonal relationship challenges	Mental health resources
Mental health concerns	Residential program
Making poor choices	Support group
Felt lost	Felt alone

Using this list, I began clustering these codes into larger categories based on the connections between the codes, or their relatedness. NVivo makes this process easy with a drop-and-drop feature, allowing me to move codes—and all associated passages of text—together into larger categories or to merge codes. This process yielded a total of four categories, or themes. All themes addressed RQ1. Themes 2 and 3 address RQ2,

which asked how young adults emancipating from foster care described their adjustment to societal living. Theme 4 addressed RQ3, which focused on the coping strategies participants used to manage stress and stressors in adulthood. The research questions, themes, and their associated codes are presented in Table 2.

**Table 2***Alignment Between Research Questions, Themes, and Codes*

Research questions	Themes	Codes
1	1. Foster care shapes transition to adulthood	focus on survival future goals not a bad experience pretty rough resourcefulness desire for connection difficulty trusting others empathy for others resilience
1, 2	2. Stressors, barriers, and challenges associated with transitioning out of foster care system	feeling alone financial stress housing insecurity interpersonal relationship challenges lacking sense of security learning to accept help making poor choices mental health concerns professional know-how
1, 2	3. Resources for transitioning to adulthood	adulthood is continual learning process, case manager did not meet individual needs learning financial skills domestic skills learning interpersonal skills professional development mental health resources public and housing assistance residential program social network friends and family support group
1, 3	4. Coping with stress of transitioning from foster care to adulthood	focusing on goal physical activity positive affirmations prayer therapy staying connected to others taking time for self

In some cases, I considered but then set aside codes that did not fit neatly into any of the categories that I had created and determined that there was not enough support to place them into a larger category. In cases where those codes did not fit but illustrated a discrepant case, or a participants' experience that appeared to contradict the main findings, I made note of those to discuss in the results section, within the discussion of that theme.

### **Evidence of Trustworthiness**

In a qualitative study, trustworthiness can be established through credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985). In this study, I established credibility with the use of triangulation, by cross-checking and comparing data from my reflexive journal, and notes from the interviews. Also, I used member checking by asking each participant to review my interpretation of the transcripts, to cross check to review whether any of their views differed. Using member checking let me rule out any possible misinterpretations of the data (see Maxwell, 2013).

Transferability was established by providing a rich, thick, and detailed description of the analysis and findings in this study with adequate evidence. Also, I used purposeful sampling to select participants that met the criteria to answer the research questions and to provide the ability for other researchers and readers to determine if the results were transferable to other studies. By using purposeful sampling, I recruited seven participants and met saturation. A convenience sample size of three to 10 participants is appropriate in a qualitative phenomenological study (Creswell, 2009). I utilized direct quotes to provide meaning to support the findings. Evidence was established through my journal



reflections, notations, and participants' interviews to provide the ability for findings to be transferred.

I established dependability and credibility by providing face-to-face interviews via the Zoom platform. By using this platform, I was able to capture the context and noted experience in the study process. Consistency was accomplished by acquiring the same findings by triangulation. This provided the ability to understand the meaning of the phenomena, which helped me to increase reliability in the research.

I established confirmability in the study by using triangulation, a reflexive journal, and audit trail. I used triangulation by collecting data from multiple methods. By audit trail, I was able to conduct and analyze the study. In this process, I created a record and journal of my ideas, notes, reflections, and any biases throughout the study. With my notes from the reflexive journal, audit trail, and triangulation, I was able to recollect any thoughts, views and recall meaningful details that participants had shared. Merriam and Tisdell (2016) suggested that authentication of a study's findings can be established by readers if the researcher's trail is consistent. The interpretation of the notes provided a comprehensive understanding of the lived experience of the individuals, in which I used the data to analyze meaning to create themes.

## **Results**

### **Theme 1. Foster Care Shapes Transition to Adulthood**

Theme 1, in conjunction with Themes 2–4, addressed RQ1, What are the lived experiences amongst the young adults after being emancipated from the foster care system? No matter the circumstances of participants' foster care placement, there were

fundamental ways in which the experiences shaped their lives as they emancipated from the system and into adulthood. The foster care system impacted participants' current and future relationships with other people. The system also impacted participants' goals for the future, and how to meet those goals. Participants attributed their resilience and resourcefulness to their experiences in the foster care system.

The foster care system impacted several facets of participants' interpersonal relationships, including their desire for the feeling of closeness with others and, somewhat contrastingly, their ability to trust others. Participant A1 explained that the foster care system made her "want to have a connection with other people." Participant G6 recognized this desire for connection was not necessarily healthy and caused her to maintain relationships that she should have let go. Participant G6 described how her desire for connection led her into an abusive relationship:

Being in foster care caused me to hold onto relationships or friendships that might not be worth holding on to. I can give you an example. After coming out of foster care, I lived in independent housing. I met a guy that was very abusive to me, but I just could not leave him. I stayed with him for 3 years knowing that I was being verbally and physical abused. I felt that I needed to hold on to him because it felt good to finally feel like someone loved me. I was blinded, although he was hurting me.

Her need for someone to love her led Participant G6 to maintain unhealthy friendships, too. In her independent housing program, Participant G6 described meeting a friend who "was always there for me when I needed someone to talk to," but who also

stole from Participant G6 multiple times. Participant G6 said she had a hard time letting go of that relationship for reasons similar to her abusive romantic relationship.

Participants A1 and G6 desired connection with others, even when unhealthy. Participant B2 said her experiences in foster care impacted her ability to trust others. “There was one family that treated me like I meant something to them,” said Participant B2, “Everything was going so well, so I didn’t understand why they did not adopt me. It seems like from that experience, I don’t trust people in general. I thought they loved me, but they let me go.” Participant B2 has noticed even today, she has a hard time trusting others and, perhaps as a self-protection mechanism, she pushes people away before they can get too close to her. “I feel that I push everyone away, including my daughter’s father,” she said.

Experiences in foster care also shaped participants’ future goals in different ways. For some participants, the foster care system created a desire to succeed in adulthood and provide a better life for their own children. For others, the foster care system shaped their desire to help others. Participant A1 finished high school and went to college because of her experiences in foster care. She said, “It made me want to do good for myself so I can one day have a family and make sure that they are not in foster care ... I was eager to be somebody.” Participant C3 was also driven to attend college because of the foster care system. Participant C3 said, “Being in foster care taught me that I did not want to be like my parents, and to be somebody when I grew up. I graduated from college last year with my bachelor’s degree.” Importantly, both participants attributed their drive to pursue future goals specifically to their experiences in foster care. Participants A1 and C3 stated

that their goal to make something of their lives, starting with obtaining college degrees, came from the desire to avoid being like their own parents and ensure their children were not placed in foster care.

Participants also credited the foster care system with shaping their aspiration to help other people. D4 explained,

Foster care shaped me to be a caring, a giving person with wanting to help other people. Currently, I am in school to be a social worker. I had a great experience with mine and figured I wouldn't mind providing support to those in need. I lived with other families [that] provided me with the opportunity to see how life should be.

Participant E5, the only man in the study, was pursuing a similar career goal to help others, which he directly attributed to his experiences in foster care. His desire to help others led him to pursue a career in teaching because, as he said, "When I was in foster care, my teachers became my family and helped me through some of the toughest times." Participant E5 also attributed his empathy to what he experienced in the foster care system. In addition to wanting to help others in his career, he said that because of the foster care system, when he sees someone "having a bad day or maybe bad attitude," he is able to have empathy and suspend judgment against that person because he knows firsthand that he may not know what that person has been through.

Participants learned through their foster care system experiences to be resilient and resourceful. Participant A1 said she adjusted to adulthood from the foster care system because she "stayed focused and never gave up." The experience in foster care also

impacted Participant B2's adjustment and created the resilience she needed to provide a better life for her daughter. She said she did not want her daughter to experience her life, which helps her "strive to be more."

Being resilient also related to resourcefulness. As Participant H7 explained, being in the foster care system made her "resilient and resourceful." Participant D4 described how her experiences in the foster care system shaped her resourcefulness. Though she received some guidance navigating the emancipation process into adulthood, she said she was, "very good at doing my own research." She recalled spending a lot of time at the local library searching for information that would help her transition. This resourcefulness also came in handy when Participant D4 decided to pursue a career in social work, as she said she also spent lots of time "looking up information and programs."

Overall, participants seemed to describe less-than-positive experiences in the foster care system. However, Participant D4 had a different experience, saying, "I may be one of the very few that did not have a bad experience." D4 elaborated,

I lived in good homes, with great people, and when I was emancipated, I reunited with my father. My mother had passed away. I didn't have my own family at the time, but two of the three parents that I had made me feel loved. For example, they celebrated my birthdays and bought me presents along with their own kids. We celebrated holidays together and I was treated as if I was one of their children.

## **Theme 2. Stressors, Barriers, and Challenges Associated With Transitioning out of Foster Care System**

Emancipating out of the foster care system and into adulthood was an experience full of challenges and barriers, causing stress in participants. Those adults who emancipated out of the foster care system faced challenges in many aspects of their lives, including feelings of loneliness and a lack of security in close relationships with others, financial stressors, housing instability, and feeling like they did not have the professional savvy to obtain good jobs. Some of these challenges were similar to what emerging adults who were not in the foster care system faced while transitioning into adulthood, but others were unique to the foster care system experience.

As they emancipated from the foster care system, participants felt lost and alone, lacking strong support networks their peers who moved out of parents' homes may already have had in place. Participant A1 used the words lost and alone to describe her feelings. She lived in a residential housing facility, but this caused "the stress of feeling alone, because I didn't have the family support," Participant A1 said. This feeling led to a sense of sadness and lack of belonging. Participant A1 explained,

When I see other people and their families, I get sad sometimes. I wish that I had a parent to call and say, "hey, can I come over to visit?" Or, have a sister or brother to just fool around with. It's like, I am out of foster care and just have to do this all alone.

Participant A1 was not the only participant who experienced this sense of loneliness associated with leaving the foster care system. This loneliness was

accompanied by feelings of grief and feeling lost. Some adults who aged out of foster care were able to reconnect with their biological families, but this is not the case for everyone, and those who had no biological family to lean on or reconnect with experienced an empty feeling or feeling of loss. Participant C3 attributed feeling lost directly to the lack of biological family:

Another stressor was not knowing where my biological parents or family are located. Some people are able to reunite with their family. I always felt an empty space inside of me by not having any family around me. I can't explain the feeling, but it's like feeling lost. All I can remember is going through school and seeing other people's parents joining on school trips and coming to events and me not having anyone to come join me. And now, I am an adult with the same feeling. You would think that those feelings would just disappear, but the empty feeling stays with you...not having the support of my family by my side and always feeling lost was another barrier for me...grief from not having any family.

Similarly, Participant H7 said the stress of "being alone" in the absence of a "large support system" was barrier. However, even those who are able to reconnect with biological family after emancipating from foster care struggle. Participant D5 was reunited with her biological father in early adulthood. She described this experience:

It was great to live with my father, but I felt sort of a disconnect. I felt like he let me stay there out of obligation. Ugh, he was in a new marriage with his own new family. I know he is my dad, and it was nice to let me stay there knowing we haven't had any relationship in over 10 years for him to let me stay there, but it

just didn't feel right. When my mother passed, I wasn't told and I guess it's because my dad and my mother haven't spoken in years, but it's just not fair. I was living in this household with people that seem foreign to me and many times, I felt as if I was yearning for my mom.

In addition to the sense of loneliness, loss, and grief associated with a lack of support system or biological family, participants lacked a sense of security in their other interpersonal relationships. "I never had the security of parents to help me when I became an adult," Participant C3 explained. Participant A1 felt the lack of security in "not knowing what's next," because she did not have family to help her.

Perhaps the most commonly noted challenge associated with emancipating from foster care and into society was financial, and this challenge impacted other aspects of participants' lives, like their housing. "As far as leaving foster care, some stressors were financial and housing," said Participant E5. Similarly, Participant G6 said, "Money and employment was barriers." Without a family that could help support them, participants had to rely on themselves and any social support systems they had cultivated on their own for financial support. Participant B2 had a young daughter when she left the foster care system and was only able to secure housing and income through public assistance. She said, "I was able to support myself financially by obtaining food stamps...eventually, I was able to secure housing for my daughter and I with a voucher program," which kept her and her daughter from being homeless.

Participant D4, who reconnected with her biological father after emancipating from foster care, was able to live with her father for a while. She said her dad let her live



with him rent free, which helped her because she was unemployed for quite some time.

“It was great that my father let me live with him without paying rent,” Participant D4 said. After 8 months without employment, Participant D4 obtained a job in retail.

Participant A1 was also unemployed for about two months, and without money to support herself she said she “almost went homeless.” Through a friend’s help and a local support group, she found a room to rent, and the person she rented from allowed her to live her first month rent-free. Though Participant G6 secured housing through a residential program, she said life was still challenging because she was “not able to buy clothing or other nice things; it’s like all I wore was clothes from places like community clothing closets where they gave out used clothes.”

Obtaining employment and, thus, an income, was a particular challenge because participants had never been taught how to build a skill set and apply for jobs. “I did not know how to professionally apply myself and what attire would be appropriate at my job interviews,” said Participant D4, who also shared that with no job history, “it took me awhile for someone to hire me.” This was also the case for Participant G6, who also said she had “no job history.” To mitigate the lack of job history, Participant G6 spent time volunteering and researching what employers were looking for in employees to improve herself and gain valuable skills needed to obtain a good job.

Somewhat related to challenges like finances, housing, and employment, and in the absence of strong support adults who moved out of foster care also faced mental health challenges. Three participants described working through barriers related to mental health. Participant A1 said she fell into a depression that threatened her job stability,

connecting mental health back to financial challenges. She said, “I knew that if I remained smothered in this sadness like this, I would lose my job.” To counter this, she stayed focused on her goal of having her own family in the future. Participant A1 leaned on friends and her case worker “to have someone to talk to whenever they were available.” Though her case worker suggested a counselor, Participant A1 said she never took advantage of the opportunity to see a therapist, she eventually “became so busy with work that I felt that I did not have the time to be sad.”

Participants C3 and E5 also experienced mental health concerns. After two years of living with mental health challenges, Participant C3 finally saw a therapist. She explained how helpful it was to have a therapist to help her process her emotions:

It took two years for me to see a therapist, but having one really made a huge difference. I had someone to help me process the guilt, that grief from not having any family. It was great to have someone to talk to and process my stuff.

Similarly, Participant E5 said he had a difficult time managing his mental health when emancipating from the foster care system. “I started treatment to get myself stable,” he said. Participant E5 said he had been successfully managing his mental health for over 10 years.

### **Theme 3. Resources for Transitioning to Adulthood**

Numerous programs are in place for adults who are transitioning out of the foster care system. While many of these are helpful, participants did not believe that any was completely adequate to meet their unique needs. However, participants were resourceful,

making the most of what resources were available to them and seeking out other help, when needed.

Programs available to those individuals moving out of foster care cater to more basic living and domestic skills. Participants noted taking classes to help them live independently, like cooking classes. Participant A1 noted that in her foster homes and in the foster care system, foster children were not allowed in the kitchen or to cook. Other classes catered to independent living skills. Participant E5 learned cooking skills as well as “life skills and social skills,” though he did not elaborate on what those particular skills were that he learned. Participant A1 apparently did not receive classes in social skills like Participant E5 did, and she said this was something that would have helped her. “I never learned how to interact with other people...so learning to communicate with other people would have been something that I could have used,” Participant A1 said. Participant H7 took advantage of all programs available to her. “I actively participated in the independent living program and did their courses and their workshops and things like that,” Participant H7 said.

In contrast to others, Participants C3 and D4 reported receiving handouts but not classes. Participant C3 received “a lot of resources...it was a printout with a bunch of information on how to do different things.” In addition, Participant C3 received information on mental health resources and a case manager who helped her through the process. Participant D4 received information on public assistance and other programs available to her, like where she could receive low cost or free medical services. She said that, like Participant A1, she would have benefitted from learning interpersonal skills like

building relationships with others. Participant D4 also said, “It would have been nice to have a program that helped me with budgeting, managing my credit, buying a house,” when she transitioned out of foster care.

Participant B2 had a young child when she left foster care. She said that the independent living classes available to her were not that helpful to her. “The independent living classes were probably great for foster kids leaving the system, but not helpful for a new mother,” Participant B2 said. She did not know how to change a diaper or prepare a bottle, she said, and she “didn’t know the basic items that’s needed to prepare me for her arrival.”

Participants made the most of the resources available to them during the transition into adulthood but said these resources did not meet their individual needs. Like Participant B2, who did not receive new mothering classes, all other participants wanted more personalized classes not only to learn other independent living skills, but also to feel like somebody cared about their needs as individuals. “Nobody gave me a questionnaire to ask me exactly what I was going through, or asked me what I needed,” explained Participant C3. Participant A1 explained that being an adult is “a lot of work” and the skills necessary for adulthood are not skills that can be learned in a few classes.

Participants had ideas for a more individualized approach to resources for young adults emancipating from the foster care system. Participant E5 suggested the foster care program “should have come up with individual goals for our last few years in foster care to get us ready for when it was time to exit.” Participant H7 noted that by the time she was placed in the foster care system, she was “already, like, an independent person.”

Participant H7 said, “I feel just having someone that just takes the time to understand you, your situation, your mindset, goals, challenges would be beneficial with putting together a structure plan for this one person.”

One resource that participants were given, and took advantage of, was their case managers. Participants reported that their case managers were helpful in assisting them with their emancipation. Case managers provided resources to participants, like help with resume building, according to Participant A1. Participants felt comfortable to ask any questions of their case managers, and Participant C3 said found this aspect of her case manager very helpful. Participant E5 used his case manager to help him with the process of becoming a teacher in his state. “I had a case manager that provided information to me [state] programs, on what I needed to teach elementary school” said Participant E5. Case managers were instrumental in helping provide mental health resources to participants who needed them. Participant A1 received help for her depression from her case manager, who referred who to a therapist. Participants C3 and E5 were also provided with resources to help their mental health through case managers at the agency.

Though participants did not necessarily have large support systems, they made the most of what they had, leaning on close friends and family as resources while transitioning from foster care to adulthood and independent living. Participant E5 transitioned into a residential living program out of foster care, and then to college, where he developed his support network. He described the resources available to him and the relationships he made:

I met so many friends that was in the program. I really enjoyed the groups and outdoor activities that we did together...Once I started school on campus, I met other students that needed roommates, so four of us moved in together. My three roommates became my brothers ... They are the family that I never had, so it is great having them in my life. One of my brothers just got married and it was great being his best man. Normally, when someone is a best man in a wedding, it's because you were childhood friends or maybe biological family members, so that really meant the world to me. I never thought from being in foster care I would have met anyone that would consider me to be like a brother to them.

Participant H7 also developed a support network to rely on in adulthood.

Participant H7's support network included her grandmother, who she lived with for a while. "She was definitely in my support network," said Participant H7, as was her husband at the time. Participant H7 said she reconnected with one of her foster parents after leaving the system, who was also an important part of her support network and even did her hair for her wedding.

#### **Theme 4. Coping With Stress of Transitioning From Foster Care to Adulthood**

Participants shared their strategies for coping with transitioning from foster care to adulthood. Staying connected to others, like their support systems, was critical for transition success. Participant B2, who had a hard time trusting people because of her experiences with the foster care system, said that "being more open with people" would have helped her transition, and making those connections was important. "Even though you may feel alone, that does not mean that you have to be alone," said Participant A1,

who reached out to support groups to cope with the stress. Participant C3 agreed that “having that one person of support does wonders” for stress associated with the transition. Participant D4 recognized that not everyone had family they could connect or reconnect with but recommended if people had “any family that can help support,” that could be a big stress reliever. Participant H7 stayed connected with her friends and Participant E5 hung out with his “brothers,” who were not his biological brothers but his college roommates with whom he had developed a familiar relationship.

Taking time for themselves was important for coping. For some, this came in the form of physical activity. Physical activity, especially being outside, seemed to help many participants. For Participant A1, this was born out of necessity because she did not have a car. “I did a lot of walking, so that helped me a lot, just by me walking and getting fresh air helped me a lot,” Participant A1 explained. Participant C3 did the same, saying, “I also did a lot of exercising and did a lot of walks.” Hiking and jogging were important coping mechanisms for Participant D4, who enjoyed being in “the wonderful parks and just getting lost in the wood.” She referred to the scenery as her “calm place.” Participant E5 also stayed physically active, which helped him cope. “I played basketball with my friends and go to the gym to lift weights,” Participant E5 said. He said that doing things that gave him energy was most helpful for coping, and suggested others in similar situations do the same.

Taking time for themselves also included doing “things to make me feel good,” according to Participant G6. She did this by going shopping or getting a massage. Participant G6 also used positive affirmations, reading positive affirmations “every time I

get negative feelings” and to take a moment for herself. For Participant H7, this included journaling and writing, but also included in this going to school to learn new skills, which helped her beat stress by boosting her confidence. Participant B2 took time to pray as self-care. “I prayed and prayed to Jesus that there was going to be a way for us. I prayed that my life would be different from mine. Prayer was the key for me,” said Participant B2.

In addition to staying connected to others and taking time for themselves, participants found it helpful to cope by focusing on their goals. Participant A1 used her experience to suggest how others might cope with emancipating from the foster care system. She said,

I stayed busy with working, so I honestly didn’t have the time to feel stress ... I had something to look forward to and I knew that by working, I was working towards building my future ... I think that people should find something that they love to do and work on that. I found that when I had something to look forward to, it made me feel better about myself.

Participants B2 and E5 said the same; Participant B2 stayed focused on her daughter and Participant E5 on his teaching career. Participant E5 found it important to be “motivated to achieve something you really want.”

### **Summary**

In this study, I sought to address three research questions about the experiences of adults related to emancipating from the foster care system. Participants described numerous stresses, challenges, and barriers associated with the emancipation process, including in their interpersonal relationships and learning independent living skills like



finances, securing housing, and learning how to apply for an obtain jobs. To cope, participants described leaning on the social support networks they had established and using resources available to them through the foster care system. Participants were clear, however, that those resources were not adequate not individualized, and while some appreciated learning how to cook, others wanted more personalized programs and resources. Staying active, making time for themselves, and also staying connected to others provided healthy mechanisms to cope with the transition from foster care to adulthood. In the next chapter, I explore these findings in greater detail, and provide recommendations based on the findings.

## Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this study was to explore the stress, coping, and adjustment of young adults after being emancipated from or leaving foster care. I explored how young adults, formerly in foster care, interpreted their lived experiences after emancipation from foster care through semi structured interviews, which allowed participants' experiences to be heard in their own voices. The study involved a phenomenological approach to explore the experiences of stress and coping of adults after emancipation.

Phenomenology helps researchers organize and categorize data to examine the meaning behind the lived experiences of participants (Merriam & Tisdell, 2016). In Chapter 4, I presented the in-depth data collection and data analysis processes, as well as the findings from the data obtained from the semi structured interviews. In Chapter 5, I interpret the findings, discuss implications, provide recommendations for future research, and end with a conclusion.

The following research questions helped obtain information on the stressors, challenges, and barriers of former foster youth after transitioning to adulthood, including their strategies to cope and adjust to societal living:

- RQ1 – What are the lived experiences amongst the young adults after being emancipated from the foster care system?
- RQ2 – What coping strategies did the young adults who were emancipated from the foster care system use to manage stress and stressors in adulthood?
- RQ3 – How do young adults who were emancipated from the foster care system describe their adjustment to societal living?

Analysis of the data yielded four themes: foster care shapes transition to adulthood; stressors, barriers, and challenges associated with transitioning out of foster care; resources for transitioning to adulthood; and coping with stress of transitioning from foster care to adulthood. Findings are discussed in relation to previous research in the following section.

### **Interpretation of the Findings**

Previous research revealed that former foster youth face internal and external stressors because of the challenges and barriers they experience as they transition from foster care into adulthood; these difficulties contribute to higher rates of physical and mental illness, homelessness, poverty, housing concerns, and low educational attainment (Havlicek et al., 2013). The findings of the present study revealed some similar outcomes related to the stress and stressors associated with transitioning into adulthood after emancipation. However, participants also reported positive aspects of transition experiences, including resilience and resourcefulness.

#### **Theme 1: Foster Care Shapes Transition to Adulthood**

Foster care shaped the experiences and lives of participants as they emancipated from the system into adulthood. The results of this study indicated that the innumerable experiences that former foster youth encountered shaped their lives in fundamental ways. Participants reported current and future relationships were impacted, including interpersonal relationships and how they connect with other people. Participants described engaging in inappropriate relationships, making poor choices, or having difficulty leaving relationships that caused harm to them—including being unable to

determine how to detach from unhealthy relationships, with the fear of being alone. The foster care system influenced participants' current and future relationships with others, as well as participants' goals for the future and how they met those goals. These findings confirm findings from previous studies. Participants used their negative experiences and turned them to a positive by using their life experience to develop their goals for themselves. These findings confirmed that some individuals developed unique strengths from the experiences encountered to determine their career path. Piel et al. (2017) noted that utilizing a strength-based approach with former foster youth, helped to improve outcomes with those of complex needs. Being able to identify your unique qualities, motivation, resourcefulness, and individual skills is prevalent in the strengths perspective, and can create a positive well-being for those who understand it (Saleebey, 1996). However, a strength-based approach is more beneficial concurrently balanced with individualized services, supportive relationships, and professional services in preparation for independence (Piel et al., 2017).

## **Theme 2: Stressors, Barriers, and Challenges Associated With Transitioning out of Foster Care System**

Transitioning from the foster care system into adulthood was an experience fraught with challenges and barriers, causing stress in participants. Challenges included feelings of loneliness and a lack of security in close relationships, financial stressors, housing instability, and participants feeling like they did not have the professional savvy to land good jobs. Some challenges were similar to what emerging adults who were not in the foster care system face while transitioning into adulthood, but others were unique to

those from the foster care system. The findings included that all participants faced common stressors related to housing, financial barriers, mental health concerns, and employment difficulties. Many of these stressors and challenges are common amongst former foster youth and their same age counterparts while transitioning through adulthood, as the occurrence of transitioning to adulthood and independence occurs simultaneously. However, this continues to remain a societal problem because many former foster youths lack familial support and resources, as reported in the present study. For instance, Participant H7 reported having the stress of feeling alone and the absence of a large support system. Participant C3 reported feelings of grief due to the absence of family and having empty feelings was a barrier. Although participants reported not having the family support, Participant D4 connected with her biological father after leaving foster care and was able to reside with him rent free while she searched for employment. It was determined by the former foster youth that needing some type of financial or supportive assistance to obtain secured housing was a necessity. Although, Participant D4 was able to obtain employment, it took quite a while to secure employment due to the lack of skill set and being unfamiliar with the appropriate job etiquette. Similarity, previous studies show difficulty with securing housing, unemployment rates, and high rates of homelessness among foster youth (Fowler et al., 2011; Geenen & Powers, 2007).

### **Theme 3: Resources for Transitioning to Adulthood**

There are numerous programs to support adults transitioning out of the foster care system. Although many are helpful, participants did not believe that any of the programs

were completely adequate to meet their unique needs. Participants, however, were resourceful and made the most of the resources available to them and sought help when needed. Researchers have found there is increased stress when former foster youth leave foster care without obtaining meaningful supports and resources. The findings in the study support that engaging former foster youth in mentoring or other supportive relationships can increase the likelihood to positive outcomes in adulthood (Piel & Lacasse, 2017). Participants in this present study reported being in touch with their social worker, case manager, or a therapist to get support in their transition. Those who reported having received resources described positive outcomes in their transition to adulthood. The data from this study confirmed that engaging in supportive meaningful relationships is associated with healthy transition to independence.

Almost all participants reported feeling that their needs were unmet, due to resources provided in their transition not being individualized to meet their specific needs. For example, one participant reported that being pregnant during her transition to adulthood required additional resources that she did not receive. The participant expressed that the independent living program addressed basic independent skills, but she did not receive any services that could assist her during pregnancy. Another participant reported that the programs were not adequate to meet their unique specific needs. However, the participants were resourceful, using resources that were available to them and seeking help when necessary. The stressors and limited resources while navigating adulthood can cause difficulty to effectively cope with stress (Galaif et al., 2003). This was revealed in the present study as well. While numerous programs are made available

to young adults that are transitioning from foster care, several of participants did not believe that these programs were helpful. Most participants were resilient and resourceful in their experiences in adulthood. The participants were able to make the best out of the resources gained and seeking help, when needed. Five participants reported receiving resources, but it was generic and not individualized according to their specific needs. Supports that are individualized, flexible, and specific to the individuals' needs are essential to successful navigation through adulthood (Lietz et al., 2014).

#### **Theme 4: Coping With Stress of Transitioning From Foster Care to Adulthood**

Participants shared their strategies for coping with transitioning from foster care to adulthood. They reported that staying connected to others, including their support systems, was critical for transition success. Participants also reported that taking time for themselves was important for coping, which, for some, involved physical activity, hiking, jogging, and going outdoors. The findings show that having a support system and being connected to others are being crucial in the transition process. Singer et al. (2013) examined supportive relationships of former foster youth who transitioned to adulthood and concluded that informational support provides guidance for resources pertaining financial development and emotional support provided companionship for former foster youth during their transition to adulthood. It was reported by the youths in Singer et al.'s study that their childcare worker enhanced their self-esteem and self-worth, which supports the findings from the present study. Other participants reported that therapy, prayer, learning positive affirmations, journaling, writing, and participating in overall self-care helped with their mental and physical health. Moreover, participants' lived

experiences created the desire to pursue personal goals and inspired them to build a positive future for themselves. Just pursuing something that was important to them increased their confidence and self-worth.

### **Conceptual Framework**

The conceptual framework used in this study was Lazarus and Folkman's (1984) transactional model of stress and coping. Life events and challenges can impact individuals' emotions, which involves cognitive appraisal and coping with stress. How people interpret their personal experiences can influence their emotional reactions (Lazarus & Folkman, 1984). Study participants provided their perceptions of their lived experiences of transitioning to adulthood and reported that the stressors and challenges of the experiences shaped their lives.

According to Lazarus and Folkman (1984), cognitive appraisal includes two stages: primary and secondary appraisal. In primary appraisal, the individual evaluates the circumstance and determines whether the circumstance will pose a threat to their well-being. In my study, participants provided their assessment of their circumstances during their experience in transitioning to adulthood. In the primary stage, all the participants expressed feeling stressed while navigating into adulthood. Their experiences shaped their current and future relationships with people. Some reported having difficulty connecting and/or trusting others due to not having the support from biological family members or other supportive networks during their transition periods. Participants also reported a lack of individualized care to support their individual needs. Due to their specific experiences, the individuals were left with emotional concerns, trust issues,



feelings of loneliness, mental health concerns, financial distress, and poor decision-making skills. However, the individuals reported that their experiences also enhanced their resourcefulness and resilience. In secondary appraisal, the individual look at ways to prevent the harm, potential ways of coping with stressors, and coping options. In this stage, the individual can seek possible ways of altering the situation, accept what occurred, or seek out available resources available to them. Additionally, life transitions involve two qualitative shifts involving a psychological sense of self and the individual's interpersonal world (Cowan, 1991). Because participants lacked individualized support, they found ways to transform their impactful experiences and to alleviate stressors and emotional concerns on their own. Although some reported being provided with helpful resources, others navigated through adulthood by finding their own resources.

Cognitive appraisals are strong predictors of the emotional well-being of individuals, which involves how individuals perceive their lived experiences and determine the effects of stressors on their personal well-being. The individuals in the study appraised that how they adjusted in adulthood contributed to how their stress was managed, available resources that were available to them, and how they managed to apply the networks found by them. The individuals discovered ways to cope by using support networks they established and the resources provided to them while navigating from foster care. Every individual is unique, and their response to stress might differ from that of others. The transactional model of stress and coping holds that individuals attribute unique meaning to stressors and that stress and stressors vary by context. (Lazarus & Folkman, 1984). Lazarus and Folkman (1984) suggested that how individuals

appraise stress influences their well-being and how they use the resources available to them.

### **Limitations of the Study**

This study was limited to adults who were former foster care youth emancipated from foster care. The individuals could be no longer be in foster care because they reached the age of 18. I did not consider the perspectives of other individuals who were currently residing in foster care. All participants in the study provided perceptions of their lived experience within the state of Georgia. I conducted the study in one state, which leaves individuals' experiences in other states unknown. I also conducted the study through agencies and organizations that served former foster youth in Georgia. Focusing on agencies and organizations only in Georgia limits the generalizability of the results.

Additionally, participants were interviewed through Zoom, so I was unable to meet individuals in person. Meeting in person would help to determine body language and other behaviors that participants might have presented in person. I relied instead on presentations via video to make determinations of such. Using the participants' own perceptions, study biases could have been assumed because the participants provided self-reports from the perception of their experience. The study was phenomenological and required the researcher to interpret participants' experiences; however, another researcher may have interpreted individuals' information in different ways. However, I provided individuals the opportunity to validate their responses to help avoid misinterpretations.

## **Recommendations**

Several recommendations for further research are provided based on the study findings, the strengths and limitations of the study, and previous literature from Chapter 2. Literature reviewed in Chapter 2 suggested that there are challenges when individuals transition from foster care into adulthood. These challenges can lead to stress, requiring coping and adjusting mechanisms to successfully transition to adulthood. The literature in Chapter 2 helped support the importance of studying this population due to the lack of research in the area.

One recommendation for future research is conducting similar studies of foster youth transition experiences in other states. Learning about the experiences of individuals in other states can assist practitioners with helping former foster youth in their transition to adulthood more comprehensively. The study was limited to only seven former foster youth, but the strength is that former foster youth were given the opportunity for their voices to be heard. Future researchers can expound on this research by expanding the scope to include individuals of different races and backgrounds to identify patterns among ethnicities or groups. Knowing whether there are patterns between specific races and backgrounds can help provide information to assist organizations that serve former foster youth to enhance outcomes for individuals of particular races or groups.

The individuals in the present study reported the assistance they received from organizations and agencies was not individualized to meet their specific needs. Training should be developed and provided to agency staff on implementing individualized treatment programs. I recommend organizations and agencies assess each foster youth's

specific needs and strengths. From the results of the assessment, agencies and individuals can collaboratively work toward developing goals and interventions for transition. Every individual is unique, so providing one-size-fits-all assistance may not cater to each individual's specific needs.

Additionally, each program should provide mental health assistance for all individuals enrolled in care. Present and past literature suggests former foster youth experience mental and physical health concerns. Participants in the present study reported not having direct connections to therapists or mental health professionals. Providing mental health assistance will validate individuals' feelings and help to address their mental health concerns, potentially leading to positive outcomes in adulthood. Therapeutic support while emerging into adulthood will provide individuals with ongoing support they were unable to receive while in foster care. Most foster care youth constantly move throughout their time in foster care, so by providing ongoing therapeutic support and resources as individuals transition from youth to young adulthood will offer consistency to assist with the healthy transition to independence.

I further recommend for future researchers conduct qualitative and quantitative studies on the associations between former foster care youth and individualized treatment services. The studies should explore and examine the outcomes of participants in programs that are individualized to meet former foster care youth needs. Finally, I recommend additional research on how to assess for and treat stress, as well as how to facilitate coping, in former foster care youth to enhance the probability of their successful transition to adulthood.

## **Implications**

The findings of the study have implications for social change and may positively impact individuals, organizations, and society. The significance of this research will contribute to making a difference nationally and promoting social change by establishing a foundation to assist with creating future policies, training and network support that will better serve the young adults. The voices of the adult's perspectives could be an asset to shape a positive future for this population and to instill hope for youth that are transitioning out of foster care by knowing ways to navigate through independence when faced with stress and coping strategies used that's most effective. Also, to help provide positive psychological outcomes and adjustment for those who emancipated from foster care.

Other implications for social change that was gained from this study are for foster care families and agencies serving foster care youth to be more mindful and sympathetic to the individual's voices. Hearing the voices and promoting conversations to hear and learn more about the individual's life experiences, and by acknowledging them can help empower individuals to obtain support and empower them to manage or cope with their stress. Being provided with the opportunity for former foster youth voices to be heard, provide means for better support to enhance healthy transitions into adulthood. There is minimal qualitative research in this area, as traditional hypothesis testing methods, were favorable amongst quantitative researchers. However, qualitative research in this area is needed to receive the unheard stories of former foster youth (Wells & Freer, 1994), to create best practices to transition successfully in adulthood.

Hearing the perspectives of former foster youth that emancipated from foster care can assist organizations with creating the tools to better serve them. The organizations can create programs that are conducive to the individual's specific needs and address the issues at hand. Suggestions for social change include societal and individual benefits from prosocial and life skills development in young adults from foster care as they transition to adulthood. Moreover, this study can assist with the development of future policies, initiatives, training, and network support that can provide a worldwide impact on how former foster youth exit foster care and live healthier lives with better outcomes.

The transactional model of stress and coping was the conceptual framework used to guide the study (Lazarus & Folkman, 1984). Elevated stress can make coping and adjusting to the world more difficult. Utilizing the framework of the Transactional model of stress and coping theory, the research questions focused on the experience of the former foster youth life in adulthood, challenges that can impact individual's experience and wellbeing, coping with stress and how those individuals have adjusted to society. The results from the study, aligns with the theoretical and conceptual framework. The individuals in the study appraised their stress from their experiences, in connection to their well-being and coping options when navigated in adulthood. The individuals navigated by using the resources available to them and also by compiling their own research. The individuals report their personal experiences, was impactful in which shaped how they managed their lives. Despite the challenges and barriers, the individuals made use to the supportive networks and resources that was available to them. The

strategies used to help cope from their experiences, demonstrated favorable outcomes for most participants in the study.

### **Conclusion**

Former foster youth experience challenges and stressors during their transition to adulthood. These stressors include mental health concerns, financial barriers, housing insecurity, lacking a sense of security, making poor decisions, and difficulty trusting and connecting with others. Emancipating out of foster care is a major stressor because these individuals are no longer being provided care to assist with their individual personal needs. Most participants reported receiving resources, but they were not adequate for successful transition when they needing to rely more heavily on their own resources and resilience. Many reported needing to reside with a family member or friend until they were able to sustain themselves. One participant indicated that they almost became homeless, due to the lack of support. The participants were grateful for the independent learning skills and basic job training that was received, but rather prefer personalized programs and resources. Participants reported lacking interpersonal and social skills, where building and maintaining social relationships were complex. Having poor childhood relationships and instability, while in foster care was a huge factor in being unable to build trust and connect with others emotionally. Participants in the study that report having difficulty with building personal relationships in adulthood, experienced having attachment issues with either having difficulty with letting go of abusive relationships or being taken advantage of by others with the fear of not wanting to be alone. Mental health concerns were prevalent, where participants report either needing to

partake in therapy or wishing they were provided resources to receive therapeutic mental health services. Some participants expressed experienced trauma, grief, depression & anxiety from unresolved life experiences. Having a therapist during the transition, can be effective for helping individuals process unresolved past issues and providing therapeutic support through the emerging adulthood transition.

The study helped fill the gap in the literature on the types stressors former foster youth experience as they transition to adulthood. The study not only provided the opportunity for readers to hear individuals' perceptions of their experiences but to learn what strategies were most effective in navigating to societal living. Specific coping strategies the participants used included prayer, positive affirmations, physical activity, supportive networks, taking time for self, and overall self-care. Utilizing therapy services, connecting with biological family members, and social networks were also effective.

Participants also indicated their drive to achieve personal goals, like earning a college degree or to pursuing a career in teaching or social work. The stress, and how participants coped with stress, from life events and demands helped motivate them to strive for a better life for themselves and their children, as well as to succeed in adulthood and helps. Study findings support previous research on the types of stress and stressors encountered during the transition to adulthood and on the impact that unmet needs have on former foster youth transitioning to adulthood. Information provided from the study, can help organizations and agencies that serve former foster youth to create programs, policies, and initiatives to provide healthier transitions to adulthood.



## References

- Ahrens, K. R., DuBois, D. L., Richardson, L. P., Fan, M. Y., & Lozano, P. (2008). Youth in foster with adult mentors during their adolescence have improved adult outcomes. *Pediatrics, 121*(2), 246-252. <https://doi.org/10.1542/peds.2007-0508>
- Antle, B. F., Johnson, L., Barbee, A., & Sullivan, D. (2009). Fostering interdependent versus independent living in youth aging out of care through healthy relationships. *Families in Society: The Journal of Contemporary Social Services, 90*(30), 309-315. <https://doi.org/10.1606/1044-3894.3890>
- Boddy, C. R. (2016). Sample size for qualitative research. *Qualitative Market Research: An International Journal, 19*(4), 426-432. <https://doi.org/10.1108/QMR-06-2016-0053>
- Boyd, B., & Hunsaker, R. (2018). Cognitive behavioral models, measures, and treatments for stress disorders in American Indians and Alaska Natives. In E. C. Chang, A. Downey, J. K. Hirsch, & E. A. Yu (Eds.), *Treating depression, anxiety, and stress in ethnic and racial groups: Cognitive behavioral approaches* (pp. 313-336). American Psychological Association. <https://doi.org/10.1037/0000091-013>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology, 3*(2), 77-101. <https://doi.org/10.1191/1478088706qp063oa>
- Burns, B. J., Phillips, S. D., Wagner, H. R., Barth, R. P., Kolko, D. J., Campbell, Y., & Landsverk, J. (2004). Mental health need and access to mental health services by youths involved with child welfare: *Journal of the Academy of Child &*

*Adolescent Psychiatry*, 43(8), 960-970.

<https://doi.org/10.1097/01.chi.00000127590.95585.6>

Carbonell, D. M., Reinherz, H. Z., & Beardslee, W. R. (2005). Adaptation and coping in childhood and adolescence for those at risk for depression in emerging adulthood. *Child and Adolescent Social Work Journal*, 22(5-6), 395-416.

<https://doi.org/10.1007/s10560-005-0019-4>

Child Welfare Information Gateway. (2019). Concept and history of permanency in U.S. child welfare. <https://www.childwelfare.gov/topics/permanency/overview/history/>

Children's Bureau. (2016). *The AFCARS report: Preliminary FY 2015 estimates as of 2016* (Report no. 23). U.S. Department of Health and Human Services, Administration for Children and Families.

<https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport23.pdf>

Collins, M. E., Paris, R., & Ward, R. (2008). The permanence of family ties: Implications for youth transitioning from foster care. *American Journal of Orthopsychiatry*, 78(1), 54-62. <https://doi.org/10.1037/0002-9432.78.1.54>

Collins, M. E., Spencer, R., & Ward, R. (2010). Supporting youth in the transition from Foster care: Formal and informal connections. *Child Welfare*, 89(1), 125-143.

Courtney, M. E., Dworsky, A., Brown, A., Cary, C., Love, K., & Vorhies, V. (2011). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 26*. Chapin Hall at the University of Chicago.

Courtney, M. E., Dworsky, A., Cusick, G. R, Havlicek, J., Perez, A., & Keller, T. (2007). *Midwest evaluation of adult functioning of former youth: Outcomes at age 21*.

Chapin Hall at the University of Chicago.

Courtney, M. E., Dworsky, A., Lee, J., & Raap, M., (2010). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 23 and 24*. Chapin Hall at the University of Chicago.

Cowan, P. A., & Hetherington, E. M. (Eds.). (1991). *Family transitions* (Vol. 2). Psychology Press.

Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches* (3rd ed.). Sage Publications.

Creswell, J. W. (2013). *Qualitative inquiry & research design: Choosing among five approaches*. Sage Publications.

Daining, C., & DePanfilis, D. (2007). Resilience of youth in transition from out-of-home care to adulthood. *Children and Youth Services Review*, 29(9), 1158-1178.  
<https://doi.org/10.1016/j.childyouth.2007.04.006>

Day, A., Dworsky, A., Fogarty, K., & Damashek, A. (2011). An examination of post-secondary retention and graduation among foster care youth enrolled in a four-year university. *Children and Youth Services Review*, 33(11), 2335-2341.  
<https://doi.org/10.1016/j.childyouth.2011.08.004>

Del Mauro, J. M., & Williams, D. J. (2012). Children and adolescents attitudes toward Seeking help from professional mental health providers. *International Journal for the Advancement of Counseling*, 35(2), 120-138. <https://doi.org/10.1007/s10447-012-917-6>

DeLongis, A., Folkman, S., Lazarus, R. S. (1988). The impact of daily stress on health

and mood: Psychological and social resources as mediators. *Journal of Personality and Social Psychology*, 54(3), 486-495. <https://doi.org/10.1037/0022-3514.54.3.486>

Dworsky, A., & Courtney, M. E. (2010). The risk of teenage pregnancy among Transitioning foster youth: Implications for extending state care beyond 18. *Children and Youth Services Review*, 32(10), 1351-1356. <https://doi.org/10.1016/j.childyouth.2010.06.002>

Folkman, S., & Lazarus, R. S. (1984). If it changes it must be a process: Study of emotion and coping during three stages of a college examination. *Journal of Personality and Social Psychology*, 48(1), 150-170. <https://doi.org/10.1037/0022-3514.1.150>

Folkman, S., Lazarus, R. S., Dunkel-Schetter, C., DeLongis, A., & Gruen, R. J. (1986). Dynamics of a stressful encounter: Cognitive appraisal, coping, and encounter outcomes. *Journal of Personality and Social Psychology*, 50(5), 992-1003. <https://doi.org/10.1037/0022-3514.50.5.992>

Fowler P. J., Marcal, K. E., Zhang, J., Day, O., & Landsverk, J. (2017). Homelessness and aging out of foster care: A national comparison of child welfare-involved adolescents. *Children and Youth Services Review*, 77, 27-33. <https://doi.org/10.1016/j.childyouth2017.03.017>

Fowler P. J., Toro, P. A., & Miles B.W. (2009). Emerging adulthood and leaving foster care: Settings associated with mental health. *American Journal of Community Psychology*, 47(3-4), 335-348. <https://doi.org/10.1007/s10464-010-9401-2>

Fowler P. J., Toro P. A., & Miles B. W. (2009). Pathways to and from homelessness and

associated psychosocial outcomes among adolescents leaving the foster care system. *American Journal of Public Health*, 99(8), 1453-1458.

<https://doi.org/10.2105/AJPH.2008.142547>

Galaif, E. R., Sussman, S., Chou, C., & Wills, T. A. (2003). Longitudinal relations among depression, stress, and coping in high risk youth. *Journal of Youth and Adolescence*, 32(4), 243-258. <https://doi.org/10.1023/a:1023028809718>

Gauthier, Y., Fortin, G., & Jéliu, G. (2004). Clinical application of attachment theory in permanency planning for children in foster care: the importance of continuity of care. *Infant Mental Health Journal*, 25(4), 379-396.

<https://doi.org/10.1002/imhj.20012>

Geenen, S., & Powers, L. (2007). “Tomorrow is another problem”: The experiences of youth in foster care during their transition into adulthood. *Children and Youth Services Review*, 29(8), 1085-1101.

Graham, K., Schellinger, A., & Vaughn, L. (2015). Developing strategies for positive change: Transitioning foster youth to adulthood. *Children and Youth Services Review*, 54, 71-79. <https://doi.org/10.1016/j.childyouth.2015.04.014>

Greeson, J. K., & Bowen, N. K. (2008). “She holds my hand”: The experiences of foster youth with their natural mentors. *Children and Youth Services Review*, 30(10), 1178-1188. <https://doi.org/10.1016/j.childyouth.2008.03.003>

Grey, I. K., Berzenski, S. R., & Yates, T. M. (2015). Coping in context: Associations between resource availability and coping effectiveness among emancipated foster youth. *Emerging Adulthood*, 3(5), 295–305.

<https://doi.org/10.1177/2167696815576457>

Grossman, J. B., & Rhodes, J. E. (2002). The test of time: Predictors and effects of duration in youth mentoring programs. *American Journal of Community Psychology, 30*(2), 199-219. <https://doi.org/10.1023/a:1014680827552>

Harwick, R., Lindstrom, L., Unruh, U. (2017). In their own words: Overcoming barriers during the transition to adulthood for youth with disabilities who experienced foster care. *Children and Youth Services Review, 73*, 338-346.

<https://doi.org/10.1016/j.childyouth.2017.01.011>

Havlicek, J., Garcia, A., & Smith, D. C. (2013). Mental health and substance use disorders among foster youth transitioning to adulthood: Past research and future directions. *Children and Youth Services Review, 35*, 194-203.

<https://doi.org/10.1016/j.childyouth.201210.003>

Hitchcock, C., Ellis, A. A., Williamson, P., & Nixon, R. D. V. (2015). The prospective role of cognitive appraisals and social support in predicting children's posttraumatic stress. *Journal of Abnormal Child Psychology, 43*(8), 1485-1492.

<https://doi.org/10.1007/s10802-015-0034-7>

Hook, J. L., Courtney, M. E. (2011). Employment outcomes of former foster youth as young adults: The importance of human, persona, and social capital. *Children and Youth Services Review, 33*(10), 1855-1865.

<https://doi.org/10.1016/j.childyouth.2011.05.004>

Jackson, Y., Huffhines, L., Stone, K. J., Fleming, K., & Gabrielli, J. (2017). Coping styles in youth exposed to maltreatment: Longitudinal patterns reported by youth

in foster care. *Child abuse & neglect*, 70, 65–74.

<https://doi.org/10.1016/j.chiabu.2017.05.001>

Jones, J. (2013). The family and social networks of recently discharged foster youth:

*Journal of Family Social Work*, (16), 225-242.

<https://doi:10.1080/10522158.2013.786307>

Kruszka, B. J., Lindell, D., Killon, C., & Criss, S, (2012). “It’s like play of don’t have it and now I’m doing without”: The voice of transitional uninsured former foster youth. *Policy Politics Nursing*, 13, 27-37.

Lazarus, R. S. (1996). The role of coping in the emotions and how coping changes over the life course. In C. Maletesta Masni & S. H. McFadden, *Handbook of emotion, adult development, and aging* (pp. 289-306). Academic Press.

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer Publishing Company.

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer Publishing Company.

Lee, J., S., Courtney, M. E., Harachi, T. W., & Tajima, E. A. (2015). Labeling and effects of adolescent on adult outcomes for foster youth aging out of care. *American Journal of Orthopsychiatry*, 85(5), 441-451. DOI 10.1037/ort0000090

Lietz, C. A., Lacasse, J. R., Hayes, M. J., & Cheung, J. (2014). The role of services In mental health recovery: A qualitative examination of service experiences Among individuals diagnosed with serious mental illness. *Journal of the Society for*

*Social Work and Research*, 5(2). 161-188.

- McMillen, J. C., & Raghavan, R., (2009). Pediatric to adult mental health service of youth in the foster care system. *Journal of Adolescent Health*, 44, 7-13.
- Morse, J. M. (2016). Critical analysis of strategies for determining rigor in qualitative inquiry. *Qualitative Health Research*, 25(9), 1212-1222
- Munson, M. R., Narendorf, S. C., & McMillen, J.C. (2011). Knowledge of attitudes Towards behavioral health services among older youth in the foster care system. *Child and Adolescent Social Work*, 28, 97-112.
- Narayan, D. And M.F. Cassidy (2001). "A Dimensional Approach to Measuring Social Capital: Development and Validation of a Social Capital Inventory." *Current Sociology* 49(2): 59-102.
- Nesmith, A. (2017). Coping with change: Using the Bridge's Transitions Framework with foster youth. *Children and Youth Services Review*. 78.  
10.1016/j.chilyouth.2017.05.009.
- Osgood, D., Foster, E. M., Flanagan, C., & Ruth, G. R. (2005). Introduction: Why focus on the transition to adulthood for vulnerable populations. In D. W. Osgood, E.M. Foster, C. Flanagan, & G. R. Ruth, *On our own without a net: The transition to adulthood for vulnerable populations* (pp.1-26). Chicago, IL: University of Chicago Press.
- Parry, S., & Weatherhead, S. (2014), "A critical review of qualitative research into the experiences of young adults leaving foster care services. *Journal of Children Services*. 9(4), 263-279.



- Patton, M. Q. (2009). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Patton, M. Q. (2015). *Qualitative research and evaluation methods* (4th ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Pecora, P.J., Kessler, R. C., Williams, J., O'Brien, K., Downs, A. C., & English, D. (2005). Improving family foster care: *Findings from the northwest foster alumni study*. Seattle, WA: Casey Family Programs.
- Reilly, T. (2003). Transition from Care: Status and Outcomes of Youth Who Age out of Foster Care: *Child Welfare League of America*. 82(6), 727-746
- MacGregor, Rodger, Cummings & Leschield, (2006). A Qualitative Study of Motivation, Support, and Retention: The Needs of Foster Parents: *Qualitative Social Work*, 5, 351.
- Massinga, R., & Recora, P. (2004). Providing better opportunities for older children In the child welfare system. *Future of Children*, 14(1), 151-173.
- Maxwell, J. (2013). *Qualitative research design: An interactive approach* (3<sup>rd</sup> ed.). Thousand Oaks, CA: Sage.
- Merriam, S. B., & Tisdell, E. J. (2016). *Qualitative research: A guide to design and implementation* (2<sup>nd</sup>ed.). San Francisco, CA: Jossey-Bass
- Rhodes, J. E., & DuBois, D.L. (2006). Understanding and facilitating the youth Mentoring movement. *Social Policy Report*, 20(3), 3-19.
- Rock, S., Michelson, D., Thomson, S., & Day, C. (2013). Understanding foster placement instability for looked after children: A systematic review and narrative synthesis

of quantitative and qualitative evidence. *British Journal of Social Work*, 45(1), 177.

Rome, S. H., & Raskin, M. (2019). Transitioning Out of Foster Care: The First 12 Months. *Youth & Society*, 51(4), 529–547.

<https://doi.org/10.1177/0044118X17694968>

Saleebey, D. (1996). The strengths perspective in social work practice. *Social Work*, 41(3). 296-305.

Schneiderman, N., Ironson, G., & Siegel, S. D. (2005). Stress and health: psychological, behavioral, and biological determinants. *Annual review of clinical psychology*, 1, 607–628. <https://doi.org/10.1146/annurev.clinpsy.1.102803.144141>

Schoeni, R. F., & Ross, K. E. (2005). Material assistance from families during the transition to adulthood. In R. A. Setterstenjr., F.F. Furstenbergjr., & R. G. Rumbaut (Eds.). *On the frontier of adulthood: Theory, research, and public policy*, The University of Chicago Press. 396-416.

Serido, J., Almeida, D. M., & Wethington, E. (2004). Chronic Stressors and Daily Hassles: Unique and Interactive Relationships with Psychological Distress. *Journal of Health and Social Behavior*, 45(1), 17–33.

<https://doi.org/10.1177/002214650404500102>

Shook, J., Goodkind, S., Pohlig, T., Schelbe, L., Herring, D., & Kim, H. (2011). Patterns of mental health, substance abuse, and justice system involvement among youth aging out of child welfare. *American journal of Orthopsychiatry*, 81(3),420-432.

Singer, E. R., Berzin, S. C., & Hokanson, K. (2013). Voices of former foster youth:

- Supportive relationships in the transition to adulthood. *Children and Youth Services Review*, (35), 2110-2117.
- Spencer, R., Collins, M., Ward, R., & Smashnaya, Svetlana. (2010). Mentoring for young people leaving foster care: Promise and Potential Pitfalls. *National Association of Social Workers*. 225-234.
- Stott, T. (2013). Transitioning youth: Policies and outcomes. *Children and Youth Services Review*, 35, 35, 218-227.
- Vanderwerker, L., Akincigil, A., Olsson, M., Gerhard, T., Neese-Todd, S., & Crystal, S. (2014). Foster care, externalizing disorders, and antipsychotic use among Medicaid-enrolled youths. *Psychiatric Services*, 65(10), 1281-1284.
- Whiting, J. B., & Lee, R. I. (2003). Voices from the System: A Qualitative Study of Foster Children's Stories. *Family Relations*, (3), 288.
- Zambianchi, M., & Bitti, P.E. R. (2014). The role of proactive coping strategies, time perspective, perceived, perceived efficacy on affect regulation, divergent thinking and family communication in promoting social well-being in emerging adulthood. *Social indicators research*, 11(6), 493-507
- Zimmermann, Petra & Wittchen, H & Höfler, Michael & Pfister, Hildegard & Kessler, Ronald & Lieb, R. (2003). Primary anxiety disorders and the development of subsequent alcohol use disorders: A 4-year community study of adolescents and young adults. *Psychological medicine*. 33. 1211-22.  
10.1017/S0033291703008158.

## Appendix: Interview Protocol

### **Introduction**

Thank you for participating in the study and sharing your experience. My name is Helen Hogin, and I am a doctoral student at Walden University, Educational Psychology program. The study that I will be conducting is about stress, coping and adjustment of adults that were in foster care during their childhood. You will be asked questions to obtain your experience about the topic. The participation in this study is voluntarily. You can refuse to answer any questions, that you might find difficult or uncomfortable. You can cancel at any time, without any penalty. Your identity is confidential will remain confidential. A number and letter will be assigned to your name, to maintain your confidentiality. The data will be kept for a period of at least 5 years, as required by the university and then shredded and disposed of following appropriate guidelines for disposal of personal data.

The interview will be conducted by Skype or Zoom and will take approximately 1-2 hours. If you have any questions, please call or email me and I will be glad to answer any questions or concerns that you may have.

Thanks again for providing the opportunity to share your story.

### Interview Questions

1. What is the young adult's perspective of how the experiences in foster care shaped them into adulthood?
2. What stress or stressors are experienced amongst the young adults after emancipated from the foster care system? Please elaborate.
3. Did your foster agency provide an emerging adult program to help prepare your exit from foster care? If so, please describe your experience with the emerging adult program in preparation for independent living?
4. Describe the adjustment to societal living as a young adult after navigated from foster care?
5. If any, what barriers that you faced in adulthood after navigated into society? Please explain. How did you cope with the barriers that you faced?
6. Have you used any support networks or supportive relationships during your journey of independence? If so, how did you obtain those resources and can you describe your experience using the support network and supportive relationships?
7. Did the support that you obtained on your journey to adulthood meet your needs and provide the tools needed for adulthood?
8. Each individual is unique in their own way and have specific needs; during your journey to adulthood were there individualized services provided to meet your needs. If so, please describe. If not, please describe how would individualized services catered to your needs would have been beneficial?

9. What coping strategies did young adults develop that was found affective to manage stress/stressors in adulthood? Please elaborate.
10. From your perspective, what can young adults do to manage stress and enhance the prospects for successful coping?