

YOUNG ADULTS SPEAK  
ABOUT THEIR EDUCATIONAL EXPERIENCES  
AS RESILIENT YOUTH IN OUT OF HOME CARE

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By  
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## ABSTRACT

The study of resiliency theory allows for an examination of successful processes people have relied on to overcome difficult situations. In this study, former youth in care who have demonstrated resilience through educational success as defined by enrollment in post-secondary educational programs, were interviewed to gain an understanding of the factors that contributed to their resilience. Nine former youth in care participated in this study. Analysis of the transcripts from the conversations resulted in several factors that the participants identified as promoting resilience. These included supportive relationships, self advocacy, externalization of perceived negative attitudes, a high value placed on education, and access to community support through Amanda's Gift, a bursary program available to former youth in care.

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CHAPTER 1

*Introduction*

*1.1 Introductory Overview*

This study is about how, despite very difficult circumstances, a group of young adults were able to realize their aspirations for post-secondary education. The adults who participated in this research spent a large part of their lives growing up in the corporate care system of a child welfare agency due to family situations that were characterized by child maltreatment. The life situations they encountered, including their individual school experiences, impacted their development in many ways. Through their personal narratives described in this document, we are able to learn more about what barriers they faced on their educational journey and what factors helped them to overcome adversity in their lives. This research is exploratory in nature and has been conducted in the context of resilience theory. A qualitative research design has been used to explore factors reported by the participants as promoting resilience.

*1.2 Researcher in Context*

*1.2.1 Professional.*

As a social work practitioner, I have had the privilege of meeting hundreds of children, their families, caretakers and the service providers involved in their lives in dozens of communities across Canada. Many of these experiences were in the capacity of delivering child welfare services. I have had opportunities to observe genuine care and concern for these children from the people and communities who have surrounded them. Through this journey I have also been witness to human tragedy in the form of abuse and neglect, systemic devaluation of children in out of home care, and a general lack of appropriate service provision for young victims of abuse-related trauma, particularly for

children of minorities. Ultimately I have found that many children and youth in care are not experiencing the same developmental gains as other young people in our communities.

There are many aspects related to the aforementioned concerns that I believe warrant further attention. One critical concern has continued to impose itself in my work. The difficulty associated with meeting educational needs of children in out of home care has emerged as a critical concern. It is my belief, based on my experience, that educational experiences can present critical assets in the life of a child. These assets can, in turn, allow children and youth to navigate toward well-being. It has been my experience that educational needs of children in out of home care are often not prioritized in a way that reflects the importance of these needs. In my experience, systems encountered by children and youth in care create barriers to positive educational experiences and restrict the ability for this group to navigate toward available protective processes.

I have observed that experiences children have in a school community such as competence, social interaction, exposure to cultural heritage and diversity, and access to supportive relationships, all have the potential to afford children in out of home care crucial protective processes that foster resilience and healthy development. However, in practice I have often found that educational planning tends to be an afterthought for children in out of home care. Further to this, social workers and substitute care givers are not always knowledgeable or efficient advocates for education services. Resources available to out of home care youth are limited, fragmented and under funded. Educators are not always equipped to deal with the exceptionalities associated with abuse, neglect

and out of home care. Finally, children are not afforded centralized and interdisciplinary support services through what could be an ideal setting – the school.

Without negating the importance of other aspects of child well-being for children in out of home care, this study begins to explore educational issues from the vantage point of the experts, the young adults who have experienced out of home care first hand. More specifically, young adults with care experience who are on a pathway to completing their educational goals have shared their voices in this study. They were asked to talk about what risk factors they have had to overcome, and they have shared insights into the protective processes that have helped them experience resilience despite the adversity in their lives. As a practitioner, I have had little opportunity to stay connected with young adults once they left care. As a professional who has encountered children and youth in care through my work, it was a unique experience to talk with adults who have achieved their educational goals.

### *1.2.2 Personal.*

Reflecting back on my own experiences of being raised in a small fishing village on the coast of Prince Edward Island in a white working class family, I am continually reminded of the many ways my school life impacted positively on my development. Despite facing challenges in my life, I regularly think about the abundance of privileges that have been afforded to me. Having had the opportunity to be cared for by parents who were able to provide for my basic needs, and to be part of a large extended family caring system, I consider the difficulties that I have endured to have been mediated by the positive factors in my life. Further to this, my parents encouraged my educational goals

and provided consistent support throughout my early development to assist me in completing high school and to pursue a post-secondary education.

My parents shared a belief that for me, self sufficiency and quality of life would be enhanced by post-secondary education. While some of my friends and family members chose private family enterprise through the local fishing industry or farming, my circumstances were best served through the pursuit of further studies. In particular, school allowed me to become French speaking and to explore my French Acadian heritage. This was of particular importance to me due to the fact that in my parents' generation, students in our community were not afforded the opportunity to speak French in school. Living in Canada and enjoying working class economic and social privileges available in this country were also major factors in my development.

Adversity in my adult life has come in the context of my social work practice. I have struggled to find a balance between the responsibility of ensuring child safety and well-being for children in out of home care and ensuring that their educational needs are met. I recall the many meetings I have attended, trying to secure educational placements for children in out of home care. These same children and youth were often drifting through numerous foster care and residential placements. In many cases their natural families were simultaneously working on intense participatory planning to reunify the family. I have found these situations to be highly complex, leaving children to go without their needs being met on a number of levels during the process. These experiences have challenged me both personally and professionally. I have often wondered how systemic processes could be reorganized to ensure the availability of positive and meaningful educational experiences to all youth in care.

As a practitioner who subscribes to structural social work theory (Mullaly, 1997), the information collected in this thesis is geared toward promoting change in the systems that are encountered by children in out of home care. I have chosen to focus on resilience theory as a basis for understanding, from the perspective of young adults, what has worked to help them achieve their educational goals, though barriers must also necessarily be explored in understanding resilience. This thesis contains a description of the research that I completed in the province of Nova Scotia and, in the appendices, the results of a pilot study conducted in the province of Saskatchewan. Young adults from both provinces have shared their thoughts on resilience. They have also described assets which helped them to achieve their educational goals, and identified barriers which made their journeys more difficult.

In the following chapter of this thesis, important terms for this research are defined. In chapter three relevant literature on resilience theory and youth in care which informed this thesis are explored. Outlined in chapter four is the methodology that was used to conduct the research. In chapter five the results of interviews with participants are described. In chapter six results of the research are discussed, limits to this research are presented and recommendations for further research are outlined. Finally, in chapter seven, stakeholder recommendations and conclusions are presented.

## CHAPTER 2

### *Definitions*

The following are definitions and descriptions relevant to this study.

#### *2.1 The Nova Scotia Council for the Family*

The Nova Scotia Council for the Family (NSCF) is a not for profit organization representing over 30 member agencies who serve children and families across the province of Nova Scotia, Canada. This organization first came into being in 1967 and was inspired by a common desire among service providers, government agencies, and community leaders to protect children from abuse and neglect, and to provide quality services for children and families in Nova Scotia. The NSCF is a voluntary organization which believes in the integrity of the family and in the fundamental rights of children. The NSCF is governed by a board of directors and provides a range of research, advocacy, education and special initiative services for its member organizations (NSCF, 2006).

#### *2.2 Amanda's Gift*

Amanda's Gift is a bursary designed in 2000 to meet the needs of former youth in care who are working toward educational goals in the province of Nova Scotia (NSCF, 2006). All of the participants in this study were awarded this bursary.

Amanda, a former youth in care, understood through first hand experience that many youth in care have few available supports to help them achieve educational goals. It was Amanda's personal struggle to complete post-secondary education that led her to provide a gift donation in the amount of \$500.00 to the NSCF. This initial \$500.00

donation to the NSCF inspired the members of the council to create the Amanda's Gift (AG) bursary program.<sup>1</sup>

At the time of the data collection for this study, the AG bursary was available to any young person between the ages of 16–25 enrolled in an educational program, and who was previously in the care of the province of Nova Scotia through the provincial Child and Family Services Act. The age of eligibility of the AG bursary was extended to 28 in 2007. Through the bursary program former youth in care are awarded funds to cover costs such as tuition, text books, computer equipment, conference fees and adult education courses. Applications are accepted twice a year and previous recipients are permitted to re-apply. Funding for the AG bursary program is derived solely from annual charitable donations (NSCF, 2006).

### *2.3 Resilience*

#### *2.3.1 Description of resilience theory.*

“What is it about some children, their families, or their larger environments that allows them to maintain a positive developmental trajectory when many of their peers in similar circumstances are not able to do so?” (Roosa, 2000, p. 568). Luthar, Cicchetti and Becker (2001) defined resilience “as a dynamic process encompassing positive adaptation within the context of significant adversity” (p. 543). Masten (2001) described two important factors that must be considered when defining resilience. The first consideration is the presence of a threat. “Individuals are not considered resilient if there has never been a significant threat to their development” (Masten, 2001, p. 228). The second consideration involves a judgment about what criteria are used to measure an individual or group as resilient on a particular outcome (Masten, 2001). An individual or



group cannot be deemed “resilient” without some type of measurement or comparison that demonstrates they have reached a positive outcome, despite having experienced adversity (Masten, 2001). “A key requirement of resilience is the presence of both risks and promotive factors that either help bring about a positive outcome or reduce or avoid a negative outcome” (Fergus and Zimmerman, 2005, p. 399).

A helpful approach to understanding resilience is to know what it is not. Resilience theory does not imply that an individual who has faced adversity must demonstrate extraordinary competency. Instead, normative functioning is accepted as a resilient outcome when development has been threatened in some way (Masten, 2001). Resilience is different from positive adjustment or competence. “Positive adjustment refers to an outcome of resilience” (Fergus and Zimmerman, 2005, p. 401). Competence is considered a developmental asset that can be drawn upon to help achieve resilience (Fergus and Zimmerman, 2005).

“Resilience reflects the ability to maintain a stable equilibrium” (Bonnano, 2004, p. 20). Resilient outcomes following the experience of serious adversity are now understood to be achieved more often than not. More people than were previously believed commonly experience healthy and productive adulthoods despite having adverse experiences during early development (Bonnano, 2004; Flynn, Ghazal, Legault, Vandermeulen, and Petrick, 2004; Masten, 2001; Werner and Smith, 2001). Ungar (2004) provided a constructionist view of resilience founded on an understanding that everyone has an inherent ability to heal from adverse experiences and define health and well-being in their own context.

*2.3.2 Application of resilience theory.*

Resilience theory is a framework that has been developing over the past thirty years (Flynn et al., 2004; Masten, 2001; Roosa, 2000), that can be used to understand how the young adults in this study were able to find pathways to well-being and achievement despite the high levels of risk present in their lives. In general the study of resiliency theory allows for an examination of successful processes people have relied on to overcome difficult situations. "...Resilience researchers seek to understand the propensity for health among at-risk populations" (Ungar, 2004, p. 360). Masten (2001) explained that "the recognition and study of resilient children has overturned many negative assumptions and deficit-focused models about the development of children growing up under the threat of disadvantage and adversity" (p. 227). Research about the construct of resilience can provide a foundation for preventative intervention and aids in the identification of individual and environmental factors that contribute to healthy development and adaptation to adversity (Robinson, 2000). In the context of adolescent development, "...resiliency theory provides researchers and practitioners with a conceptual model that can help them understand how youth overcome adversity and how we can use that knowledge to enhance strengths and build the positive aspects of their lives" (Fergus and Zimmerman, 2005, p. 411).

Resilience is not something that one has or does not have. "Rather than an invariant trait, resilience is a dynamic response to a multiplex of biological, psychological, social and other environmental influences" (Fraser, Richman, Galinski and Maeda, 1999, p. 136). Individual behaviours, family functioning, peer relationships, and

community supports all work together in a complex system to promote resilience and conversely to create risk (Flynn et al., 2004; Masten, 2001; Newman & Blackburn, 2002).

Resilience theory also has implications on social justice. The evolution of research on resilience has moved away from placing the responsibility of resilience on the individual. “It is not up to the individual child alone to determine his or her success in life – the entire community must contribute to positive, resilient outcomes” (Osher, Kendziora, VanDenBerg, & Dennis, 1999, para. 12). Social injustices that are associated with high levels of risk and adversity are important considerations in resilience research (Osher et al., 1999; Ungar, 2004; Werner and Smith, 2001).

Flynn et al., (2004) described four interacting levels identified in resilience research which promote protective processes – the individual, family, inter–personal and community levels. Most recently, Ungar (2004) and Masten (2005) explored culture as a fifth system where resilience can be negotiated. Protective cultural processes are now being explored in resilience research to gain a better understanding of how children and youth access protective processes through cultural practices. Family, individual, peer and community interactions are carried out in the context of culture. Access to cultural experiences is particularly relevant for children and youth in care who may not be placed with race matched caregivers Further exploration on the impact culture has on resilience will be relevant to child welfare practice.

Models of resilience provided in research are beginning to explain how risk and protective factors are interacting to promote positive outcomes. In a 20 year longitudinal study, Masten et al. (2005) found that competence demonstrated in one area has the ability to cascade and improve outcomes in different areas of development.

“Some children who face stressful, high risk situations fare well in life, but their chances of doing so depend on the extent to which the risk factors in their lives are balanced by protective factors, both individual and environmental” (Jackson and Martin, 1998, p. 571). Dearden (2004) suggested that many risk factors faced by children and youth today are not easily changed, therefore increasing known protective factors in the lives of children and youth who have faced adversity is a useful means to promote resilient adaptation. Understanding the dynamic interaction of risk and protection is a complicated process involving many factors. Masten, in a conference proceeding (2005), provided a summary of ten important points to be considered identified in resilience research.

- (i) risk and problems tend to snowball, particularly in transitional periods;
- (ii) problems rise as risk accumulates;
- (iii) high risk usually means low assets or resources;
- (iv) Some at risk children succeed off the gradient in highly positive trajectories;
- (v) high risk children who succeed have more resources and protections;
- (vi) systems at multiple levels play a role in individual resilience;
- (vii) what matters is not rare or extraordinary;
- (viii) resilience can be promoted;
- (ix) resilience research provides a useful framework for action;
- (x) no child is invulnerable to sustained high risk situations.

Making a judgment about what constitutes resilience and adversity in the lives of children and youth is not a simple task and has presented a challenge for researchers exploring this construct. Ungar (2004) provided a constructionist view of resilience

theory as an alternative to the ecological model of resilience theory. Ungar (2004) challenged the dichotomous view that resilience is either present or not present in any given individual's life situation. He presented a concept of resilience that adopts "an understanding of health as residing in all individuals even when significant impairment is present" (Ungar, 2004, p. 352). Further discourse on resilience theory will undoubtedly provide a deeper analysis of theoretical applications for research and intervention.

### *2.4 Amanda's Gift Bursary Recipients and Resilience*

From an ecological view, the first consideration in measuring resilience is the presence of adversity (Masten, 2001; Werner and Smith, 2001). Children and youth in out of home care have experienced some level of family disharmony, abuse or neglect to the degree that their care and/or custody has been transferred to a child welfare agency. All AG bursary recipients are young adults who have previously resided in out of home care. Further to this, young adults who have received the AG bursary have experienced a transitional period in their lives when they left care. This transitional period resulted in increased risk factors in their lives. Given these combined experiences, AG recipients have had life experiences that to some degree threatened their healthy development.

A second consideration in measuring resilience from an ecological view is the presence of competence or positive trajectories (Masten 2001, Werner and Smith, 2001). Educational competency is defined in this study as completion of grade 12 and subsequent enrollment in post-secondary education. Young adults who are awarded an AG bursary must first provide confirmation of enrollment in an education program. AG bursary recipients have demonstrated resilience through competence which allows them to be engaged in an education program despite facing significant early adversity. It is the

premise of this study that the combined educational competence and early experiences of adversity that characterize the life situation of AG recipients is a demonstration of resiliency as defined by ecological resilience researchers. AG recipients will later describe their personal experience of resilience.

### *2.5 Child Maltreatment*

Child maltreatment is a risk factor that threatens the healthy development of children and youth. The structure of child welfare service provision in Canada has contributed to a variety of maltreatment definitions which in turn makes research on national samples of child maltreatment problematic. Child welfare legislation and services in Canada are organized at the provincial and territorial levels (Trocmé et al., 2005). Although definitions and legal statutes regarding maltreatment differ among provinces and territories, forms of maltreatment are generally classified under five categories, “physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence” (Trocmé et al., 2005, p. 32). This definition of child maltreatment is characterized by experiences of adversity which would be considered a threat to any child’s healthy development.

### *2.6 The Child Welfare Agency (CWA)*

At the current time there are twenty Child Welfare Agencies (CWAs) throughout Nova Scotia. Six of these agencies are Community Services district offices who are part of the provincial government’s Department of Community Services (DCS). There are fourteen privately run societies/family and children’s services agencies. These CWAs continue to be charged with the responsibility of providing child welfare services to children and families in Nova Scotia under the Children and Family Services Act

(Government of Nova Scotia, 2006). At the time of this study, many of the fourteen privately funded CWAs were being incorporated into the provincially governed system.

### *3.7 Out of Home Care*

The young adults involved in this study have all experienced out of home care. For the purpose of this research ‘children in out of home care’ will refer to children who are, or have been in the care of the local CWA.<sup>2</sup> The child welfare system in Canada is comprised mainly of two types of placements including foster homes and group homes (Bala, Hornick and Vogl, 1991). Foster homes are typically where most children in the foster care system reside. “A foster home is simply an ordinary home in which people have agreed to take children who have been committed to the care of protection authorities” (Bala et al., 1991, p. 79). Adolescents facing particular challenges are more likely to be placed in a group home setting. Group homes are described as “facilities operated by paid staff for the express purpose of caring for children” (Bala et al., 1991, p. 80). Some young people are also placed with extended family through special agreements with the local CWA. For the purpose of this study, ‘out of home care’ will refer to non-parental care, in care, care history, corporate care, foster care, residential care and combinations thereof.

### *2.8 Incidence of Maltreatment*

Child maltreatment is an adverse experience shared by many children and youth in our communities. The overall number of youth in care in Canada who have been removed from their families has increased by 67% between 1995 and 2001, reaching 75,000 in 2001 (National Youth in Care Network, 2007). The first Canadian incidence study (CIS) on maltreatment was conducted based on information collected in 1998

(Trocmé et al., 2005). A second CIS was conducted in 2003 and it was found that “in Canada, outside Quebec, an estimated 130,594 families were investigated because of alleged maltreatment. Maltreatment was substantiated for 49% of these families, suspected for 13%, and unsubstantiated for 38%” (Trocmé et al., 2005, p. 34). It was also found that between 1998 and 2003 “the number of investigations of suspected child abuse and neglect doubled” (Trocmé et al., 2005, p. 100). It is impossible to determine what numbers of children and youth, not identified by CWAs, experience abuse and neglect, however, as of March 31, 2007 there were a total of 2,089 children and youth in care in Nova Scotia; 55% of those children and youth were in the permanent care and custody of a provincial child welfare agency (J. Nearing, Coordinator of Children in Care, Department of Community Services, personal communication November 11, 2007). The Government of Nova Scotia Department of Community Service (2008) reported the following,

The increase in complexity of clients served by child welfare has resulted in rising numbers of children coming into the care of the Minister. Since 2004, there has been a general increase of children in care of 3.5 %. However, the number of children in care taken into permanent care and custody of the Minister since 2004 is 8.6 %. (p. 7)

In this chapter I explored definitions important to this research including the AG bursary and resilience theory. Also presented were definitions of child maltreatment, child welfare agency, out of home care, and incidence of child maltreatment in Canada. The following chapter will include a summary of resilience research. Next, I will describe the methodology that was used to conduct this research. Following will be the



presentation of results and then discussion of results and recommendations for further research. Finally, I will present recommendations for stakeholders and conclusions.

CHAPTER 3

*Literature Review*

This chapter contains an examination of the literature that explores the application of resilience theory in child welfare. Because of the interdisciplinary nature of this study, I have chosen to explore the literature particularly as it relates to the educational experiences of children in out of home care.

*3.1 An Out of Home Care Resiliency Framework*

Resilience researchers estimate that two thirds of individuals faced with adversity are able to overcome the difficulties in their lives without major harm to their development (Flynn et al., 2004; Masten, 2001; Newman and Blackburn, 2002; Werner and Smith, 2001). Applying this ratio to the developmental trajectories of children and youth with care experience is difficult because information about the developmental outcomes of youth in care is very limited, is rarely aggregated by type of abuse, and is confounded by varying definitions of abuse (Heller, Larrieu, D'Imperio and Borris, 1999). One reason for this lack of information is that data about the development of children in out of home care is not being collected. It has been documented that child well-being is under reported in CWAs with measures of risk and permanency taking priority (Altshuler and Gleeson, 1999).

A lack of understanding and an inability to measure and monitor how children in care are actually functioning on multiple developmental outcomes is problematic in identifying resilient and non-resilient groups. There are currently a wide variety of child well-being measurement tools that assess the overall individual functioning of children in out of home care and document progress over time. Altshuler and Gleeson (1999)

described a political climate where CWAs are pressured to evaluate aspects of service provision but not to measure how children in out of home care are actually doing on multiple outcomes,

Often what is measured shapes our definition of success. If measures of child well-being are not routinely collected and recorded, the impact of new permanency initiatives, managed care, and outcome-based contracting will be judged solely by caseload size, length of service, and cost. (p. 143)

Monitoring the well-being of children in out of home care and their development over time allows for a determination about the impact of protective factors in children's lives.

It would follow that a better understanding of what brings about resilience could have a far reaching impact if implemented to help a greater number of individuals achieve resilient outcomes. Engle, Castle and Menon (1996) explained that a positive impact on the well-being of one generation of young people could greatly improve the well-being of the following generations, creating a resiliency ripple effect in our communities. Ultimately, it is recommended that each CWA adopt evaluative processes that begin to analyze how children are doing and incorporate supports that are understood to enhance resiliency (Engle et al., 1996).

### *3.2 Pathways to Resilience for the Maltreated Child*

There are examples of children in the care of CWAs who experience positive development and achieve positive outcomes. Enhanced understanding about what processes contributed to these positive outcomes could aid in the development of a more responsive child welfare community, a child welfare community better able to promote resilient outcomes for children with the experience of out of home care. It has been noted

by researchers that resilient outcomes in children in out of home care are not well studied (Heller et al., 1999). In a meta-analysis of extant research, Heller et al., (1999) were able to create a plausible portrait of what a resilient child or youth who had experienced maltreatment might look like:

This individual would likely have a high level of cognitive skill, a high sense of self esteem and self worth, and/or high levels of ego-resilience and ego-control. Females resilient to the effects of sexual abuse appear to maintain an internal locus of control for good events and hold an external attribution of blame. In early childhood individuals resilient to the effects of maltreatment probably experience some form of sensitive care giving through foster care, a positive, adaptive family status change, intervention, or the presence of a caring adult (e.g., a nonabusive parent or other nonabusive figure). A structured school environment and involvement in a religious community or extracurricular activities also may be part of the resilient individual's life. (p. 333)

### *3.3 Educational Outcomes for Children in out of Home Care*

Researchers have been able to rely on some available data about children with corporate care experience, to create a body of evidence about their overall functioning compared to children in the general population. Unfortunately most research about youth in care indicates poor outcomes compared to children not in care. "Compared to other children in similar classes, children in family foster care consistently perform at and are placed below age-appropriate grade levels, demonstrate inappropriate school-related behaviors more frequently, have poorer attendance records, and have higher retention rates" (Altshuler and Gleeson, 1999, p. 139). Vinnerljung, Öman, and Gunnarson (2005),

have challenged the notion that poor educational outcomes for children and youth in care should be expected due to the difficult experiences that they have had prior to coming into care. They conducted a national study which found that, after controlling for pre-care confounding variables, former child welfare clients were less likely to achieve comparable educational outcomes to their non care peers.

In an effort to collect information about children in out of home care and a measure of attained resilience on a variety of outcomes, Flynn and colleagues (2004) conducted a study of children in the care of 23 Children's Aid Societies in the province of Ontario, Canada. The authors' defined their research as mainly descriptive and exploratory in nature. The use of a national sample of children in Canada as a normative comparison sample was constructed. Data that had been collected by the National Longitudinal Survey of Children and Youth (NLSCY) comprised the population from which the comparison samples were drawn. The study was conducted in the context of an international developmental approach called Looking After Children "that seeks to improve the quality of the 'corporate' or substitute parenting provided by child welfare organizations to young people in out of home care and to monitor the young people's progress on an annual basis" (Flynn et al., 2004, p. 67). The second Canadian adaptation of the Assessment and Action Record (AAR) was used as the data collection instrument (Flynn et al., 2004).

The outcome domains that the researchers chose to assess, using child and caregiver assessment tools, included health, educational performance, self-esteem, relationships with friends, pro-social behaviour and anxiety and emotional distress. The study revealed that one area of notable discrepancy was educational competence, where

48% of out of home care children aged 5–9 years were receiving special education compared to only 6% of the Canadian normative group. Overall, only 15% of youth in out of home care scored ‘resilient’ in the area of academic performance when compared with their peers in the NLSCY sample (Flynn et al., 2004). These findings suggest a need to further explore why children and youth in care may be over-represented in special education. Flynn et al. (2004) also identified that children in out of home care are much more likely to miss days at school than children in the general population. Absenteeism, and other unique educational pathways experienced by children and youth in care must be described by those who have successfully negotiated these systems. How youth with care experience attach meaning to their educational and care journey are important considerations in resilience research in child welfare and education. Further explorations into school success of children in out of home care across provinces are warranted.

### *3.4 Child Maltreatment and Exceptionality*

Children who experience maltreatment present in the school setting with specialized learning needs and require individualized support. “Learning and behaviour problems are among the most common effects of child maltreatment even when no organic damage is noted” (Sobsey, 2002, p. 33). Educational competence has been found to be a salient developmental achievement that predicts healthy functioning later in life (Roisman, Masten, Coatsworth, and Tellegen, 2004; Werner and Smith, 2001). “Understanding the associations between maltreatment and children’s behavior and learning difficulties can contribute to greater insight into the school-related problems of these children” (Thompson and Wyatt, 1999, p. 174).

Describing the complex relationship between abuse and exceptionalities demonstrated by maltreated children and youth is not an easy task. “Although we know that there is a very strong link between child maltreatment and disability, we know little about that link” (Sobsey, 2002, p. 31). Historically this relationship was over-simplified by a belief that caregivers of children with special needs experienced a level of stress that induced abusive behaviour toward the child, and that physical abuse was the single form of maltreatment impacting on child development (Sobsey, 2002). These theories did not capture the complexity of the relationships between abuse and disability. “We can now say for certainty that the relation between abuse and disability is bidirectional. Abuse causes disability and disability increases the risk for victimization” (Sobsey, 2002, p. 37).

Although still not well understood, there is growing research on the link between child maltreatment and learning disabilities. Ensuring that children in out of home care have access to meaningful and positive educational experiences is an investment in their future and understanding what those experiences are and how to create them is necessary in order to better meet the needs of these young people.

### *3.5 The Effects of Early Neglect*

It is difficult to draw conclusions about how children in out of home care are affected academically by the variety of experiences they have prior to coming into care and while they are in non-parental care. Morison and Elwood (2000) studied the impact of institutionalized neglect on the cognition of Romanian adoptees and have been able to uncover more predictive outcomes of early neglect. Their study is an example of how children who have experienced one particular form of maltreatment may require enhanced educational support in a school setting.

Three groups of children were studied by Morison and Ellwood (2000); the first group being Romanian children who had spent a minimum of eight months in a Romanian orphanage prior to being adopted by a Canadian family; the second group consisted of Romanian children who were adopted early by Canadian families, preventing the need for institutionalization; the final comparison group was made up of non-adopted Canadian born children. After controlling for a variety of factors, the researchers found that Romanian children who had been adopted earlier and avoided institutional care scored significantly higher on total IQ than the children who had been in the Romanian orphanages. In addition to this, the study also found that despite having lived with a stable adoptive family for a median of 39 months, the orphanage cared for children scored lower overall on verbal and non-verbal IQ than both the other groups (Morison and Ellwood, 2000). Two important mediating factors that promoted resilience in the children were found. Earlier adoption was correlated with higher IQ as well as the overall quality of care available in the adoptive home (Morison and Ellwood, 2000). This study is an example of how stability and the availability of attachment relationships contributed to resilient outcomes for children exposed to maltreatment. Ultimately, children who have experienced early neglect may have challenges in the school setting.

### *3.6 The Child Welfare Agency and Educational Resilience*

As explored in the definitions section of this document, a CWA is organization charged with the care of children who, for a variety of reasons, are not able to be cared for by their family of origin. CWAs as corporate parents must consider how to assist youth in care to be successful students. For children in care who have experienced significant adversity, school can be a place where resilience is promoted. Gilligan (1998)



stated, “schools rank secondary only to the family in their developmental impact” (p. 4). Given this statement, CWAs and educators must consider the important influence educators have in the lives of children and youth in care.

As an example, a study was undertaken by Zetlin, Weinberg and Lois (2003) to measure the extent of involvement that a large U. S. state run CWA had in the educational experiences of children who were placed in out of home care. The goal of the researchers was to establish base line data for future comparisons. The research was done in the context of an initiative implemented by the CWA to adopt educational passports for children in out of home care that were to follow the children through any changes of placement. “The educational passport is meant to inform caregivers of relevant educational information for each child in their care” (Zetlin et al., 2003, p. 115). As part of the initiative, specialized training for caseworkers in the area of advocacy, resource availability, special needs identification and inter-agency collaboration was provided. Analyses revealed an increase in school related problems for children or youth in long term care (Zetlin et al., 2003). The researchers noted 52% of children in long term care experienced school related problems, while only 21% in short term care and 27% in moderate term care experienced problems (Zetlin et al., 2003). A large number of caregivers, 67%, reported having never heard of the educational passport, indicating a large gap between policy and practice (Zetlin et al., 2003). The questionnaire used to assess supervisor and line-worker awareness of the educational processes and available services for the youth in their care revealed that both groups demonstrated little knowledge in this area (Zetlin et al., 2003).

One positive finding from the study was that a high number of caregivers, 91%, reported that caseworkers had demonstrated a number of helpful actions in assisting them in meeting the educational needs of the children in their care including advocacy, interagency collaboration, service provision and information sharing (Zetlin et al., 2003). Similar research exploring the priority of educational service provision within a Canadian CWA is not currently available. However, a participatory research study conducted by the National Youth in Care Network (2001) identified that CWAs need to improve on meeting the educational needs of Canadian youth in out of home care.

### *3.7 Promoting Resilient Outcomes & Interagency Collaboration*

Resources found in community settings are important protective factors identified in resilience research (Flynn et al., 2004; Masten, 2001; Werner and Smith, 2001). For example, protection can be afforded to children who have experienced adverse situations in the form of effective school experiences (Flynn et al., 2004). According to Masten (2005), children who have experienced a level of adversity requiring out of home care must be supplied with every protective factor available to promote resilience.

Inter-agency collaboration is one way to promote positive developmental trajectories for maltreated children in the school setting. Zetlin et al. (2003) recommended that a liaison, stationed either at the CWA or school, be charged with the responsibility of co-coordinating services, educating staff from both agencies and working to facilitate overall cohesion and efficiency in educational service delivery to children in out of home care, particularly for the large number of children and youth who have been identified as having the need for special services.

Dent, Renuka, and Cameron (2003) highlighted the critical importance of a positive experience of school for children in out of home care, a need for CWAs to adopt policies that ensure timely school placements and a reduction in moves for these children while in care, and the education system's responsibility to modify school policy and practice to meet the needs of this population. Collaboration between agencies responsible for the prevention, reporting and intervention in cases of child maltreatment is imperative if the complex needs of children in non-parental care are to be met. Unfortunately, services to children who have experienced maltreatment are often fragmented and are characterized by a collection of service agencies that have conflicting mandates (Sheid, 2003).

### *3.8 Systemic Pressures Impacting on Protective Processes*

There are systemic issues that decrease the availability of protective processes, as described in resilience theory literature, for children in out of home care. Zetlin et al. (2003) reported in their study on the educational needs of children in corporate care, that in addition to a lack of co-ordination and knowledge, another possible barrier to ensuring that educational needs of children in out of home care are being met are the workload pressures of child welfare workers. Altshuler and Gleeson (1999) noted that child welfare workers are often experience a volume of administrative demands which compete with time spent planning with and supporting children, youth and their caregivers. Ultimately over tasked case workers who are charged with assisting in the development of a high number of children, many of whom have specialized needs, may not be able to manage those needs efficiently in current systems.

### *3.9 Educational Intervention Strategies that Promote Resilience*

“The safety & well-being of children...depends on the ability of the school and community to move beyond detection and provide follow-up services” (Graham, 1993, para, 42). There is little research available about the educational experiences of youth in out of home care that allows for an exploration of important protective processes that bolster the potential for academic success. However, there is a body of research that systematically explores the educational experiences of migrant youth who share similar characteristics of youth residing in out of home care. The two groups have faced comparable adversity. The information from the literature focused on migrant youth could inform the development of an intervention framework to support positive educational experiences for children and youth in out of home care.

In a study that examined children of Mexican migrant workers attending a U.S. school, researchers found that many of the youth had missed extensive time in school, were below grade level entering school, and had experienced being minorities and strangers in the new school, which was predominantly white (Gibson, 2003), not dissimilar to the experience of youth in care as described previously in this literature review. The youth in Gibson’s study (2003) had access to a program that provided academic guidance, after-school tutoring, options to make up courses or credits, access to technology, advocacy and mentoring, college transitioning support, and connections to other school resources. The program also promoted cultural identity by providing a space in the school for these youth, and encouraged inclusion of family of origin in school activities (Gibson, 2003). The results of the study suggested that there were mediating

factors that promoted educational competence for the youth who had access to specialized supports. It was found that 77% of the youth attending the school with the treatment program graduated from grade 12 while only 39% of similar youth in a nearby school that did not offer the program, graduated from grade 12. In addition to this, many more of the youth receiving the specialized program went on to post-secondary education (Gibson, 2003).

Support for the generalization of the research with migrant youth to youth in care includes a report by Yu, Day, and Williams (2002) which indicated that high expectations by teachers have a positive impact on the school experiences of youth in care. As well, Fitzgerald (1998), who interviewed educators in the province of Nova Scotia who were providing specialized supports to children exposed to maltreatment, found that integrating academic with personal and social development was an effective strategy promoting positive school experiences for this group of children and youth.

### *3.10 Resilient Pathways to Educational Competence*

There is a paucity of literature that explores the risk and protective factors of resilient adults with a history of out of home care. A study by Jackson and Martin (1998) provides some direction for improving the outcomes of children in corporate care. The adults in the study were found to have been typical of most children entering local authority care (Jackson and Martin, 1998) and is an example of how resilient consumers of out of home care resources can contribute to a better understanding of what processes help foster positive outcomes. Following is a summary of the important protective factors and processes reflected in this group of resilient adults that made a difference to them in achieving positive outcomes in their lives:

Among the protective factors that were identified as most strongly associated with later educational success were (i) stability and continuity; (ii) learning to read early and fluently; (iii) having a parent or carer who valued education and saw it as the route to a good life; (iv) having friends outside care who did well at school; (v) developing out-of-school interests and hobbies (which also helped to increase social skills and bring them into contact with a wider range of non-care people); (vi) meeting a significant adult who offered consistent support and encouragement and acted as a mentor and possibly role model; and (vii) attending school regularly. (Jackson and Martin, 1998, p. 578)

The adults in this study were reported to have endured many risk factors which threatened educational success during their experiences in corporate care. Many had limited access to books during their time in care and most had not owned their own books. Disruptions due to placement that were not sensitive to the school calendar were also common, and most had received attention to their physical well-being but not to academic progress, resulting in low educational expectations. Those who had resided in residential settings experienced environments with high distractibility, and an emphasis on social activities over education. Virtually all of the adults in the study conveyed that they did not feel social workers contributed in any way to their educational resilience (Jackson and Martin, 1998).

### *3.11 Perception of Support and Academic Achievement*

Understanding the internal thought processes experienced by children and youth who are attending school who also have the experience of corporate care, is important if systems are to better meet their needs. In a study of children in out of home care,

Rosenfeld and Richman (2003) explored social support availability and how children's perceptions of this support related to their general affect and overall performance at school. The research was completed in the context of a local education initiative that designated all children in out of home care as recipients of special support services designed for academically at risk students. "Regardless of any other risk factors the children in out-of-home care might have, out of home placement was recognized as a risk factor that warranted the invocation of extra-ordinary educational support" (Rosenfeld and Richman, 2003, p. 69). The findings of the study revealed that students in corporate care perceived less teacher support, less friend support, less parent/adult caretaker support and had poorer attendance than their peers not in care (Rosenfeld and Richman, 2003). Students in corporate care not identified as at risk academically repeated more years in school than any other group. Ultimately the researchers reported that "students in out-of-home placement are academically at risk, regardless of whether they are identified as such by school personnel" (Rosenfeld and Richman, 2003, p. 81). The implications of this study are that students in out of home care may not receive needed specialized support services because educational professionals might not recognize the need to provide these services.

In a 40 year longitudinal study on resilience reported by Werner and Smith (2001) it was found that 70% of all study participants struggling with significant adversity during early development were able to grow into healthy and capable adults. Access to at least one supportive adult, and educational competence were two common factors in promoting resilient outcomes in the Werner and Smith (2001) study. Jackson and Martin (1998) explain that for children in out of home care "educational success is a crucial

factor in determining adult life-styles and ensuring social inclusion for this most disadvantaged group of children” (p. 581). Adopting educational models that foster resilience is important to ensuring that health and well-being is available to children and youth.

### *3.12 Resilience Education*

Resilience education seeks to prepare all children for our current fast pace world, intends to promote resilient processes for all students, incorporates well-being for teachers and students, and draws upon multidisciplinary evidence based research (Brown, D’Emidio-Caston, Bernard, 2001). “Resilience education is defined as the development of decision-making and affective skills within each person and connectedness between people in the context of a healthy democratic learning community” (Brown et al., 2001, p. 28). This approach drew on research in brain development, developmental psychology, and physiological and educational psychology and is presented as a broad based application for intervention for students including children who have experienced maltreatment. Through this model students are encouraged to explore issues that are relevant to them and to develop decision making skills. Further to this, and most relevant to youth in care, resilience education encourages the exploration and open communication of the resulting emotions associated with adverse experiences (Brown et al., 2001). Fitzgerald (1998) presented a similar approach as having been beneficial to teachers working with maltreated children.

Resilience education challenges a risk model of educational intervention. “With resilience education, the emphasis shifts from a focus on adversity to a focus on possibility, or from in-ability to ability” (Brown et al., 2001, p. 31). The application of a



risk-based model to contemporary education has been described as obsolete due to the following four problems with the model: competing risk factors that present in the lives of children make it difficult for educators to apply the risk model; formulation of funding that centers around specific risk reduces the flexibility of program delivery; imposing risk-based labels contributes to marginalizing populations; and, risk-based models subscribes to the concept that problems are inherent in the child, rather than difficulties being attributed to the adverse processes the child encounters (Brown et al., 2001). Ultimately an approach to education that allows youth with out of home care experience to truly engage in the learning process is seen as a valuable mediator of risk and adversity.

The Youth in Care Newsletter Project is one example of an educational model that adheres to resilience education for youth with care experiences (Norris, Ross and Safer, 2006). The Youth in Care Newsletter Project is a community based program in Nova Scotia, Canada where youth in care come together to produce an annual newsletter called *The Voice of the Future*. This unique project curriculum draws upon a participatory strength based approach to education that allows for a broad range of experiential learning often translating into school credit for some participants. Norris, Ross and Safer (2006) outlined five essential graduation learnings as necessary outcomes of the project. These include aesthetic expression, citizenship, communication, personal development and technological competence. The Youth in Care Newsletter Project is a unique example of an educational intervention that seeks to promote resilience among youth in care.

*3.13 Importance of Cultural Protective Factors in Resilience*

Exposure to cultural experiences that foster resilience is often a challenge for youth in care. In a study of children in out of home care in the province of Saskatchewan it was found that less than 10% of Aboriginal children and youth were placed with race matched caregivers (Rosenbluth, 1995). Masten (2005) highlighted the importance of ensuring that cultural diversity is promoted due to the protective factors inherent in cultural practices that help children achieve resilient outcomes.

Aboriginal children and youth in Canada have historically experienced disconnection from cultural heritage due to child welfare system involvement and educational experiences. It has been documented that Aboriginal children and youth have not been afforded necessary opportunities to incorporate essential protective cultural practices due to the impact of educational assimilation in the form of residential schools (Royal Commission on Aboriginal Peoples, 1996). Children and youth with the experience of residential schools did not have the opportunity to take part in and learn about their culture. This exclusion from their cultural identity also limited the ability to incorporate cultural practices in their individual development and in relationships with family, peers and community (Royal Commission on Aboriginal Peoples, 1996). Current child welfare practices can perpetuate this cycle when Aboriginal children and children of other minority groups are not placed with race matched caregivers and in turn continue to be impacted by a lack of opportunity to access cultural experiences that mediate risk and promote resilience.

The lives of all children are characterized by a multitude of dynamic processes; however, research with children and youth of minority groups necessitates careful

consideration when exploring implications of resilience theory. “While there is agreement that certain factors put children at risk and others mitigate risk, there is no universal set of conditions that can be said to protect all children” (Ungar, 2004, p. 350). Some children who have experienced adversity may demonstrate behaviour that is not perceived by the dominant culture as indicative of positive development (Ungar 2004). Perceived negative behaviour could be acting as a protective factor for a child, and may be a necessary adaptation to cope with adversity. “A constructionist perspective invites us to examine how race, gender, class, ability, and other factors affect not just access to health resources, but, at a more fundamental level, our definition of resilience itself” (Ungar, 2004, p. 360). Cultural protective processes are critically important to children and youth in non-parental care that may not be placed with race matched caregivers. Further exploration into these issues is necessary.

### *3.14 Youth in Transition to Adulthood*

Educational planning is part of the process to ensure a healthy and safe transition from childhood to early adulthood for young people who are in the care of a CWA. “Transitional periods in the lives of children and young people are times of threat but also of opportunity for changes” (Newman and Blackburn, 2002, p. 7). Educational competence has been found to be a salient developmental achievement that predicts healthy functioning later in life (Roisman, Masten, Coatsworth, and Tellegen, 2004; Werner & Smith, 2001). Youth who are preparing to leave the foster care system and have reached the age of majority face specific challenges during this transition. “Because they have spent large parts of their lives in substitute care and generally come from families that experience multiple problems, adolescents in foster care rarely have access

to the type of sustained support provided by most families of origin” (Collins, 2001, p. 271).

In a participatory qualitative research study on school experiences for youth in out of home care, the National Youth in Care Network (NYICN) (2001) conducted a series of focus groups including 100 youth with care experience. One of the concerns noted in the report from this study was that youth ageing out of the foster care system were not afforded “the luxury of returning to the parental home throughout their early adult life for personal and financial support” (NYICN, 2001, p. 18). It was recommended that youth be provided with a gradual discharge from care and that “the process and effectiveness of gradual discharge should be explored in more depth by child welfare researchers” (NYICN, 2001, p. 18).

Youth ageing out of the foster care system typically have spent a significant portion of their lives in out of home care, have not been able to re-unite with their family of origin and have not been able to be adopted (Collins, 2001). Youth in out of home care have limited access to the necessary supports they require to move toward well-being and self-sufficiency in a timely way. “The family safety net for young people ageing out of the foster care system may be non existent, problematic, or, at best capable of limited and sporadic support” (Collins, 2001, p. 272). Ultimately, children and youth with care experience move through the same developmental pathways as other young people, however they do so with much less support and fewer resource options in their navigation toward adulthood, increasing their vulnerability.

### *3.15 Best Practice Approaches*

Yu, Day and Williams (2002) described several best practice initiatives for improving educational outcomes which should be in place for children and youth in care. Some of these include a universal commitment to keep children in the same school, and training on the importance of school stability for those charged with the responsibility of placement changes. It is also recommended that foster parents be prepared to be educational advocates on behalf of the children and youth they are caring for. In addition to this, foster home recruitment should be targeted to the communities from which children are coming into care to minimize school transience. Expectations for positive educational attainment on the part of children and youth in care must be raised and biases challenged. Finally, educational liaisons should be available to assist in a collaborative approach to educational planning for children and youth in care that includes their families, care givers and professionals involved in their lives (Yu, Day and Williams, 2002).

### *3.16 Research Questions*

Given the literature reviewed, I believe it is imperative to gain a better understanding of processes which support children and youth to overcome adversity. This knowledge can be used to create a continuum of supports and services that promotes resilience among this population. It was the aim of this study to generate an understanding about the journeys of young people in care with respect to education through the voices of adults who are alumni of corporate care, and to begin to document which processes allowed them to overcome the challenges in their lives to achieve their educational goals.

In particular, this research explores the experiences of care alumni of the child welfare systems and education systems that have informed their individual development. This interdisciplinary approach is intended to inform both systems of the lived experiences of youth in corporate care. The adults who participated in this study are the knowledge keepers. Their lived experiences are a reflection of our ability as a society to respond to their needs. In addition to this, their responses provide insight into the adversity they experienced and their pathways to resilience. The following research questions guided the research process:

In what ways do youth with care experience perceive themselves as being resilient?

What do youth with care experience believe contributes to a positive and meaningful educational experience?

What barriers to positive and meaningful educational experiences do youth with care experience believe exist for children and youth in out of home care?

CHAPTER 4

*Methodology*

Presented in this chapter is the methodological framework used for this thesis. First described is the theoretical foundation for the methodology. Next, is a description of the methodology used to conduct the preliminary pilot study. Following is a description of the recruitment and data collection processes for the main study. Provided in closing is a description of how the resulting data has been presented.

*4.1 Methodological Theory*

A qualitative approach has been used in this study to gather information about the experiences of youth who have received the AG bursary. Ungar (2003) described qualitative research as a preferred method for resilience theory researchers to best achieve a rich understanding of how children experience resilience. Principles of naturalistic inquiry were used to guide the research design and data analysis process (Guba and Lincoln, 1982; Lincoln and Guba, 1985; Lincoln and Guba, 1986).

The process of naturalistic inquiry followed the outline described by Lincoln and Guba (1985). Accessibility to an audit trail was established through the development of semi-structured interviews which were used to dialogue with participants to explore how they negotiated meaning in experiences that they had. Raw data were collected in the form of transcripts; research notes were used to form a reduction of the themes found in the participants' responses. 'Thick description' was developed as participants' responses emerged into themes and clustered categories emerged from the resulting data. Through open ended questions, participants were able to present information that was meaningful from their lived experiences. Formal checks were conducted with the adults who

participated in the research where each had opportunity to review interview transcripts and detailed profile descriptions. Stakeholders described in the research were also able to provide feedback on relevant components of the work. Peer debriefing was achieved through consultation with an inter-disciplinary professional proficient in both education and child welfare. Finally, triangulation was met through the analysis of additional documentation and interaction with AG recipients, NSCF staff and volunteers, as well as consultation of relevant literature.

This study was grounded in the awareness that participants were more knowledgeable about their lives than I as the researcher. Further to this, their responses were understood to be linked to social justice outcomes, through the potential to inform beneficial changes in policy and practice affecting other people facing similar circumstances. Naturalistic inquiry challenges a positivist notion that there is one given set of circumstances which can predict a particular set of outcomes (Lincoln and Guba, 1985). Therefore, this approach was well-suited to achieve this end as the research design was constructed to explore how young adults negotiated the meaning of resilience and the educational experiences in their lives as youth in corporate care.

Structural social work theory (Mullaly, 1997), which guides structural social work practice, was a conceptual component of this research design and created the impetus for the research design. Following is a description of structural social work theory from an historical perspective provided by Mullaly (1997):

Firstly, the term 'structural' is descriptive of the problems that confront social work in that they are an inherent, built-in part of our present social order. Our social institutions function in such a way that they discriminate against people



along lines of class, gender, race, sexual orientation, disability and so on.

Secondly, the term 'structural' is prescriptive for social work practice as it indicates that the focus for change is mainly in the structures of society and not solely on the individual. Thirdly, structural social work theory appears to be more flexible and inclusive and, in many cases more realistic than most other radical theories. For example, it is not only concerned with one group of oppressed people, such as the poor, but with all groups of people who are victims of the present social order. Also, it does not restrict social work practice to either inside or outside the existing social welfare system. And, finally, much of the developmental work of structural social work theory has been carried out in Canada, where it is now assuming increasing importance as a major social work perspective. (p. 104)

Structural social work, with a view to this research design, serves as a sound theoretical framework for three reasons. First, it is characterized by a framework for social justice, presenting a natural connection to both resilience theory and naturalistic inquiry, both of which are concerned with social change. Second, structural social work is a natural framework for this thesis because of the goal of examining participant experiences of social structures. Resilience theory is similarly concerned with social structures as theorists have identified systemic levels where assets can be found to promote health and well-being. These have included community and culture, as well as the interaction between individual, peer, and family systems within community and cultural settings. (Flynn et al., 2004; Masten, 2001, 2005; Newman and Blackburn, 2002; Ungar, 2004). Thirdly, the inter-disciplinary facet of this research lends itself well to

structural social work theory application due to the interest in not only improving social systems, but from a fundamental level, the intention for the resulting lived experiences of youth in care to emerge from the research process through naturalistic inquiry. Young adults speak in this thesis about their experiences, both good and bad. Structural social work theory allows for the construction of both negative systemic experiences that require amelioration and positive experiences that could be further developed to promote social change.

Ethical considerations described in naturalistic inquiry call for researchers to allow for adaptation along the way in response to the needs of the participants. In this research process interviews were set up at times and locations that were convenient and comfortable for participants, encouraging participants to choose their pseudonyms if they so desired, co-constructing interview guides, as well as co-constructing participant profiles and accommodating a review of transcripts with recommended changes incorporated. These practices are outlined in naturalistic inquiry and shared by researchers from a wide range of disciplines who subscribe to the latter (Guba and Lincoln, 1982; Lincoln and Guba, 1985; Lincoln and Guba, 1986).

### *4.2 Pilot Study*

To begin to collect information about the underlying processes contributing to the resilient outcomes of youth in corporate care a pilot study was conducted to develop the research questions (see Appendix A). This preliminary research was delivered in the format of a semi-structured interview with a former youth in care and staff member of an advocacy group working closely with youth in care who have received specialized support for education through Section 56 of Saskatchewan's Child and Family Services

Act (SCFSA, 2000). The interview questions were constructed through a participatory design process (Bogdan and Biklen, 2003). This interview resulted in a summary of what youth in care in that province have expressed about their experiences as section 56 recipients. The results of the pilot study provided a framework from which the open ended questions for the main study were derived.

#### *4.3 Main Study Sample Selection and Recruitment*

An information letter was sent to the president of the NSCF for the purpose of obtaining permission for the main study (see Appendix B). A copy of this letter was also forwarded to the chair of the AG selection committee, and the chair of the fundraising committee for their information. With formal permission from the NSCF president, the executive director of the NSCF was then contacted to request that ‘an invitation to participate’ letter be sent to the AG bursary recipients and directions on how to participate in the study (see Appendix C).

At the time of the data collection in March of 2007 there were a total of 28 individuals who had been awarded the AG bursary. The NSCF maintains a database of information related to each bursary recipient. The data base was utilized by NSCF staff to identify mailing and email addresses of all recipients. Given the small number of potential participants, all 28 alumni of the AG bursary program were invited to participate in the study. Each respondent who expressed an interest in participating in the study was invited to do so. The goal was to gather as much available information from participants as possible to contribute to the initial exploration of resilience among youth with care experience.

In order to invite the AG alumni to be part of this research, a letter was mailed from the NSCF office to all participant addresses listed within the database. In cases where there were two addresses, letters were mailed to both addresses listed in the database. This duplication was intended to increase the likelihood that recipients of the AG bursary would receive the participation invitation letter. Where there were email addresses, the participation letter was also sent electronically from the NSCF email account to all potential participants. In addition to AG recipients, the individual whose donation to the NSCF inspired the AG bursary program was also invited to participate via email. A total of 29 participants were invited to be part of the study.

Of the 29 letters that were mailed, a total of nine were returned to the NSCF office marked undeliverable. It is estimated that four bursary alumni were not able to be informed of the study as all letters that were sent to their available addresses were returned marked undeliverable and there was no alternate contact method. In total, nine participants responded to the invitation to participate in the study and completed the interview process.

The AG fundraising committee provided a \$400.00 fund to cover expenses related to the study. Assistance with transportation to the interview was offered to participants in the form of a bus ticket or mileage reimbursement calculated based on current Nova Scotia provincial government mileage rates. Each participant was awarded a gift certificate to a local movie theatre as a thank you token for their participation. When possible, a meal was shared with the participants. Should any of the participants have chosen to terminate involvement in the study, they would have received thank you tokens anyway, and each was advised of this prior to their participation.

### *4.4 Main Study Methodology*

To collect information about the underlying processes contributing to resilient outcomes among young adults who have received the AG bursary, a series of individual interviews were conducted. Open ended questions in the form of a conversation guide were utilized (see Appendix D). These questions were developed through the previously completed pilot study. Each participant was advised that the interview guide was a starting place for our conversations and that there were no right or wrong answers to the questions. It was explained to everyone that their experiences were intended to be shared and that they should define what was important and relevant, as opposed to the researcher doing it for them. The participants were asked to sign a consent form (see Appendix E). The interviews were audio-recorded. One participant who has specialized learning needs, requested an opportunity to review the questions before beginning the interview to help organize her thoughts.

The interview guide was delivered in person in the format of six individual interviews and one dyad interview. With approval from the Behaviour Research Ethics Board of the University of Saskatchewan, an email interview was also conducted to accommodate one participant who resided outside of Canada. The interview guide was sent to the participant and responses were returned via email. The interviews were carried out either at the NSCF, at a coffee shop or restaurant, or at the home of the participants. One individual telephone interview was also conducted, and audio recorded using the telephone speaker function. For each participant there was approximately 60 minutes of recorded interview time.

Each participant was asked to complete a confidential form to collect general information (see Appendix F). The questions included on the form were in part derived from a similar research tool utilized in the 2001 study reported by the National Youth in Care Network titled *Creating Positive School Experiences for Youth in Care: Who will teach us to learn?* The research participants were also provided with a handout detailing supports available to them should they have any questions about the services provided to them under the Nova Scotia Children and Family Services Act (see Appendix G). The handout also included information about counseling services and additional available supports. After the completion of the interviews each interview was transcribed into a narrative with false starts, repetitions, and paralinguistic utterances removed to make it more readable. Original names of people and places were removed from the transcript to protect the confidentiality of the participants with the exception of Amanda, who consented to the use of her actual first name in this study. Third parties named by participants were also given pseudonyms. Once transcribed, the accuracy of the transcripts was tested by checking 20 random samples with approximately 30 seconds of tape for errors and the audio recordings were subsequently destroyed, as required by the Behaviour Research Ethics Board of the University of Saskatchewan. Each participant was asked to review their transcript and change their responses in any way they wished. One participant made changes to their transcript and provided the changes electronically. Once satisfied with their transcripts, each participant was asked to sign a transcript release form (see Appendix H). Each participant was invited to create their own pseudonym and also had an opportunity to review the individual participant profile

description written about them and make any changes that they wished. All participants were informed of where they could access this study upon its completion.

#### *4.5 Description of Data Presentation*

Once the transcripts were approved by the participants, the information was coded by dividing the data into categories. Once coded and analyzed for themes, the data was presented in narrative form including specific quotes and stories to highlight the overall themes. Participant profiles were also developed based on my interactions with the young adults and their interview responses. To test the accuracy of the themes, results of the interviews were reviewed by a colleague who is both a social worker and an educator with the experience of having served as an administrator in a school setting. The NSCF executive director reviewed the initial draft of the results section to validate the description of the AG bursary program and the description of the NSCF. Participant profiles were created as a means of introducing the reader to participants involved in the study by creating a description of them as individuals. Each participant was invited to read their profile and make any changes that they wished.

At the start of this thesis, I provided a general outline of this research followed by a description of my personal and professional experiences that inspired me to focus on this topic. In chapter two I explored definitions relevant to this research and in chapter three provided a summary of literature on resilience and youth in care. In this chapter, I have provided a description of the methodology used to guide this research. A theoretical framework for the methodology was also described. Also provided was the methodology used to guide the pilot study which was conducted prior to the main study. Finally, the main study participant recruitment process and data collection methodology has been

presented. In the following chapters I have presented the results of interviews with participants as well as a discussion of the results and presented stakeholder recommendations and conclusions.



CHAPTER 5

*Results*

The results section is divided into two components – participant profiles and themes emerging from the interviews. The participant profiles have two purposes. First, the profiles are intended to introduce each of the participants, to prepare the reader for later stories shared about each young adult. The second purpose of the profiles is to give an overall sense of the participants and the collection of life experiences that are unique to them. The profiles are derived from the data and are intended to trigger thoughts of other young people in similar circumstances, connecting the profiles to the readers' own experiences in some way.

The second component of the results section is comprised of themes that emerged from the interviews with the study participants and information from the forms completed by them, supported by the relevant literature and my own thoughts about the results.

To reorient the reader, the research questions, which will be addressed in this section, are restated here:

In what ways do youth with care experience perceive themselves as being resilient?

What do youth with care experience believe contributes to a positive and meaningful educational experience?

What barriers to positive and meaningful educational experiences do youth with care experience believe exist for children and youth in out of home care?

*5.1 Participant Profiles*

It was an amazing experience to have met the young adults who participated in this research. I am forever changed by what they had to say and inspired by their wisdom and insight. With the assets available to them, they have overcome tremendous barriers to

achieve educational goals. They are all unique individuals who encountered a wide range of barriers and supportive resources in the course of their lives.

*5.1.1 Amanda.*

I met Amanda in person and she began the interview by describing her passion for helping children who are displaced due to circumstances in their lives beyond their control. She has focused her work and research both on children in care who have experienced abuse and neglect and on children who have experienced trauma associated with war. Her initial financial contribution to the NSCF inspired the development of the AG bursary. Amanda has traveled all over the world to further her mission to improve circumstances for children. Amanda described her personal journey to me.

*I have to say that I am on a journey of hope, healing and reconciliation. These threads are woven through the fabric of my life, in my past, in the present and the future. I see these threads woven through my international work with Agent Orange victims in Vietnam, in speaking to landmine victims, women and children in Afghanistan, in talking with conflict affected families in Northern Ireland and working with children and Palestinian olive farmers in Palestinian occupied Territories.*

*Throughout my adulthood, I have had to re-define my concept of home and family to the broader sense of having brothers and sisters in humanity. In search of myself, I have found my home in the most unlikely of places. For example, when I walked through the gates of SOS Children's Village in Zimbabwe to work with orphaned children I knew I had arrived home. It [international work] really is something that I am going to do for the rest of my life. And I think*

*advocacy will always be part of it, and allowing young people to have the avenue in which they can express themselves by having their voices heard in any circumstance whether it be foster care or children affected by conflict and war. Leaders really listen to what young people are saying, after all, they are the future of villages, communities and nations...*

Amanda told me about her personal experiences in foster care. She sustained an injury in the care of her natural family that has created lasting health problems. *"I came into care when I was 19 months old...and was placed in permanent care..."* She resided with the same foster parent until the age of 10 and then her situation changed. *"...my foster mother became ill and couldn't take care of me...she later died of illness."* At that time Amanda began the journey of meeting her natural family. While Amanda was going through the process of meeting her natural family, her living situation did not stabilize and she experienced numerous placement changes. *"... I went from one foster home to another it was a very difficult and painful time for me..."*

Amanda made the decision to move to a city where she knew a family who had been involved in her life when she was very young. She was able to get the support she needed to finish high school. Her brother's suicide created additional grief and loss for her to have to cope with.

*"...my grade 12 year, my brother that I met when I was 11 committed suicide. So that was really a step back. I was really determined despite the grief to complete school and it took me until I was almost 20 but I did!"*

After completing grade 12 Amanda went on to further her education and work. She has received numerous awards for her work with children and youth. Amanda spent much of

her early adulthood feeling a tremendous sense of loss that she did not fully understand. After having been given a book by a friend that talked about the importance of each person's inner child, she said that she realized that her inner child needed some attention. Amanda believed her ability to make the following realization was a powerful turning point for her, “...in all my grief and despair it never occurred to me until I was 30, I realized I was grieving loss of self. Not something they tell you in therapy!” Amanda has worked hard to recover her identity and to make positive connections in her community and the world. She expressed the following sentiment, “It is evident that when we heal ourselves; we heal a part of the world.”

### 5.1.2 Amy

At the time of our meeting Amy was in her second year of university. She came to meet with me after leaving the hospital where a close relative was recovering from surgery. I was really honored that she made time to talk with me while the competing demands of school and family were in play. Through the course of my time with her, Amy shared some information about her aspirations, care history and her life in general.

Amy first came into foster care when she was eight years old along with her brother. Amy explained that family violence perpetrated by her father was the reason for child welfare involvement in her family. Amy's overall report of her experience with the child welfare system was positive. She reported having a high degree of stability during her time in care. “I remember like two or three foster homes. I was with the one family that I really liked. I was actually brought back [to primary foster parents] a little while later. So I was in and out three times I think.” Amy kept in touch with the foster parents that she had connected with even while she was not in their care.

Amy spoke very highly of her in care experiences. She had this to say about her foster family. *“They were just wonderful. And they helped me be who I am today.”* She explained that her foster family treated her and her brother as part of their family while in care and she really felt valued when she was invited to go on family vacations with them. *“They took me on vacations and paid for me and my brother when they didn’t even have to.”* Amy reported that she felt her educational needs were prioritized while in care. She did not have to change schools. Her foster parents committed to driving her to the school she attended prior to coming into care. *“They’d drive us into school every day...across the other side of town just to make sure that we had some stability.”*

Amy and her brother were eventually able to return to their mother’s care. The family continued to struggle with issues related to poverty. Amy explained that community supports and the social worker involved with the family had been very helpful to her. Amy reported having stayed in a shelter of some kind with her mother and sibling. *“We had a lot of counselling ... the Children’s Aid Society, they helped my mom with stuff. They helped us through for Christmas...to keep our spirits up.”* Amy explained that her former social worker was truly an asset to their family. *“She was always there for my mom, she helped my mom through.”* Amy has maintained a relationship with her former social worker. *“I am still talking to my former social worker. I will still call her every so often; let her know what I am doing. She helps me with the [Amanda’s Gift] bursary, she’s my reference.”*

Amy has struggled with her career aspirations and these struggles ultimately led her to feel apathetic toward her post-secondary educational goals. She failed two of her university courses. She was able to articulate that she just did not have any direction until

she came to the realization that she wanted to become a social worker. *“It was like an epiphany and I realized what I wanted to do and that was social work.”* Her marks improved drastically once she was able to discern what her aspirations were. *“...I’m getting As and Bs now which is amazing...”*

### 5.1.3 Natalie

I met *Natalie* and her daughter *Natasha* at their apartment. *Natalie* was the only single mother I met during this project and her daughter *Natasha* was less than one year old. *Natalie* was very open about her early care experiences and current life situation. She was a high academic achiever throughout school, however she faced significant adversity through her early development and early adulthood. She explained the following about her life situation.

*“...I was taken into custody when I was eleven years old as a ward of the court...but then the following year my mother passed away...my mom had a drug addiction. I wasn’t in care because my mother gave me away. I was taken from her you know and I know that hurt her a lot...”*

While in care *Natalie* struggled to make meaningful attachments. She didn’t feel she was successful in this regard. When she left care and was in university doing well academically, she chose to move to another province with her boyfriend. *Natalie* soon discovered that she was pregnant and she and her common law partner were faced with an unplanned pregnancy. *Natalie* told me about how she navigated her way through this process.

*“...when she [my mother] passed away any foster mother that I had or any female role model, I just wanted them to love me. I wanted them to love me like my mom*

*did and they didn't so when I was faced with a pregnancy I said here is my opportunity to give some child what I longed for and wanted when I was growing up..."*

*Natalie* chose to move forward with the pregnancy. She and her common law partner then began to experience problems in their relationship. "...*I wanted him to help me finish my education and I wanted us to have a family because family was so important to me where I didn't have my own...*" *Natalie* was disappointed to discover that her common law partner had begun to abuse drugs. She made the difficult decision to end the relationship and soon after he died of a drug overdose. "*I was in the process of leaving him because he was a drug addict and actually he died a month and a half ago.*" *Natalie* commented that both she and her daughter *Natasha* now shared the loss of a parent to drug addiction.

*Natalie* returned to school around the time of her partner's death. She managed to complete her course work and stay on track with her academic goals while moving through the grief process. At the time of our interview *Natalie* was struggling financially and was unsure of where she and *Natasha* would be moving at the end of the semester. Through hard work and perseverance, and with the financial assistance she received from the AG bursary, she was able to complete her education program and secure employment in her field of study.

#### *5.1.4 Scott*

I talked with *Scott* on the telephone. He was very friendly and it was easy to talk with him even though we were not able to meet in person. *Scott* reported that he was comfortable talking about his childhood. He described to me the process of how he

became a long distance runner. *“When I was 13 or 14 I started running. When things would get gritty...I used [running] to...stabilize myself.”* Being from a very small rural community where running was not a common practice, *Scott* stood out. *“I would say I was different down there, just was the only person out there running and stuff. Everyone else was standing at the end of the road.”* *Scott* had missed out on stability during his early development due to his parents’ addiction issues.

*Scott* never really felt out of place having been a youth in care in his home community. *“I’m from a very small community. Everybody knows everything about everybody.”* The level of acceptance he experienced speaks to the value placed on inclusion that characterizes his home community. *“I never felt alienated or anything.”*

*Scott* reported a positive care experience in that he had little to no placement disruption. *“I lived in the same spot. Once they [alternate care givers] stepped in everything was pretty stable.”* He had an excellent relationship with his social workers. He also found his teachers and guidance counselors very helpful in the preparation for his postsecondary education. When I asked him if he could identify any barriers, he was hard pressed to come up with anything. In addition to the coordinated effort that went into preparing for his post-secondary education *Scott* also received funding from his CWA while attending university to pay for living expenses.

Both of *Scott*’s parents struggle with addiction which is progressively worsening. *Scott* continues to deal with the strain of having parents who are deteriorating due to their addiction. *“Actually the situation with the family is worse than it ever was...if my parents were in the shape they are in now when I was growing up I would have been a lot worse*



off.” *Scott* is taking some time off from his post-secondary education program and did not discuss his future plans.

#### 5.1.5 *Skye*

I communicated with *Skye* via email as she was living in another country at the time of this research<sup>3</sup>. *Skye* described her commitment to helping children and youth learn. She has a passion for education and has remained focused on her career aspirations. *Skye* explained to me that she struggled in her care situations and had a high number of placement changes. She described in her email response some of the specific educational barriers she faced while growing up in care:

*“Having low grades in high school from consistently moving homes and changing cities during my high school years; being limited in my opportunities because of my experiences in high school; going to school when I didn't know what I wanted to do with my life. After high school I had no choice but to enter post-secondary if I wanted to stay in care; not having enough money to pay for education, even with bursaries; working many jobs in post-secondary to assist with paying for my education; my post-secondary marks suffering from juggling work and school.”*

*Skye* talked about the strain she experienced while in care due to numerous placement changes and stints in hospital due to mental health challenges. She mentioned that her grandfather was a positive support for her during her development. Despite her adverse experiences *Skye* continues to strive to meet her goals. She has traveled to other countries where she has taught English as a second language. She currently works in the education system and also provides some English as a second language teaching support via the internet.

Skye worries about her younger sibling who is in care, in high school, and recently experienced a placement change. *Skye* is concerned about the disruption. She is very proud of her younger sibling who continues to do well in school and volunteers in the community despite the changes and difficulties associated with in care status. *Skye* described how her younger sibling helps mediate the occasional visit that she has with their natural mother. *Skye* finds contact with her mother awkward and having her younger sibling part of the visit makes the experiences less stressful for her. *Skye* would like to see programming in place that would focus on helping young people in care as they transition to early adulthood. *Skye* is currently working in her field of study part time and continuing with further studies. Her goal is to become a teacher.

### *5.1.6 Annabelle and Alicia*

*I met with Annabelle and Alicia together at Alicia's home. They have been a great support to one another and both have contributed immensely to the well-being of others through their work with young people in the community.*

*Annabelle* was a good student throughout her early school career and did not struggle academically. She had career aspirations from an early age and planned on going to university. *Annabelle* came into care at the age of three. She had a number of disruptions in her care situations and ultimately lived in residential care settings before moving out into an independent living situation while still in high school. *Annabelle* struggled with the experience of living in a residential care setting and at times felt very alone. She described how that affected her willingness to participate in extra-curricular activities. *"I didn't play sports in junior high and high school...because there was*

*nobody to push me to do that, there was no one to encourage me to do that...and no one to come and watch...*”

*Annabelle* has worked hard to create a supportive network for herself in her early adulthood and she credits in part the support she has received from a community agency whose aim is to engage youth in meaningful ways. Through her involvement with this organization she was able to “...*meet different people...*” *Annabelle* believes having access to this supportive group of people led her to be ready to let go of unhealthy relationships in her life. “...*I pushed away those people who were not so great in my life.*”

*Annabelle*’s wish is that all youth in care would have access to a support network of caring individuals to help them move through the developmental pathways experienced by youth who live with their families in the community. At age 18, *Annabelle* and her mother were able to begin a new relationship and the two have remained connected throughout *Annabelle*’s adulthood. *Annabelle* challenges the community to find ways to “...*create a life for a young person in care that is much like a young person that would be at home...creating something as normal as possible...*”

*Alicia* is a multitalented person. Prior to coming into care, *Alicia* and her family experienced living in poverty. For many reasons *Alicia* learned skills that would help her when she exited care at an early age. “...*I’ve been doing my own laundry since I was seven years old....*” *Alicia* is a very friendly person who is easy to be around. For these reasons, *Alicia* has always had friends and her relationships with caregivers were generally positive. *Alicia* experienced many disruptions while in care. She experienced

foster placement changes and ultimately lived in residential care settings during her adolescence.

*Alicia* dreamed of going to university at a very young age. She found that she had little support and guidance available to her as she tried to chart this course on her own.

*“...one of the more challenging things for me was around figuring out what I wanted to do, navigating the university system. I didn’t know anything about university calendars and what they mean, or how to search and find out what different degrees there are out there...”*

*Alicia* believes that additional support to youth with care experience who aspire to post-secondary education is critical for facilitating achievements. *Alicia* had to overcome many practical challenges just to get to university as a youth leaving the care system. *“I had nobody to take me to university and so my boyfriend’s mother drove me...”*

*Alicia* has enjoyed a successful career in her field of study. Before she was able to achieve her career aspirations, she had to put her educational goals on hold due to uncertainty about employment prospects and accumulating financial debt. The supporting adults she encountered through the AG bursary program helped her to achieve her goals despite those barriers and she was able to complete her education. She still struggles to make ends meet while paying back her student loans. *Alicia’s* strongest recommendation for the community is to place higher expectations on youth in care and that we communicate to young people in care that they can achieve their goals.

*“Growing up, people just don’t expect you to accomplish anything...let alone graduate from high school and go on to university. I think it is important to have*

*those expectations for young people [in care] and to encourage them and let them know that it is absolutely possible.”*

#### *5.1.7 David*

I met with *David* at a coffee shop near his home. *David* started our conversation by talking about his son *Jason*. *David* is a proud father. He and *Jason* share a passion for soccer. At the time of our meeting he was working a physically demanding summer job to make ends meet. He had a different job lined up for summer employment but it had fallen through. *David* explained,

*“...when I was getting out of school this guy promised me a job. It was going to be in the line of what I am taking in school. And I am just sitting there waiting for him, and all my bills fell back...he told me to call back, call back...and finally I said no. Took the worst job I could take but it's getting me through the summer...I'm working construction, jack hammer and stuff. It's not easy work.”*

*David* first came to Canada as an immigrant due to chaos caused by a civil war, in his home country. *David* lived with his older sister for a period of time.

*“She kind of...adopted me so I was...like her kid. We moved here and she married. Things didn't work out between us so I had to go and live in a foster home. A year later they [David's sister and husband] moved to Ottawa. That's almost ten years and I have seen them once.”*

*David* told me that the loss of contact with his sister has been a struggle for him. *“Oh it's hard. I've got a kid of my own now. It's hard.”* *David* came close to repeating this pattern when he and his son's mother were not able to be a couple. *“...when we broke up I left. I*

*just wanted to be away from her for a long time...I realize that wasn't the best thing so I came back. So I'm here."*

*David* is a dedicated student and despite the adversity that he has faced, feels that he has a lot advantages. "...*There's a lot of people who would like to be in my position.*" After high school *David* experienced frustration when he applied to educational and employment support programs for which he was not eligible. After several years of struggling to find his path, an acquaintance told him about college and he felt this was the best path for him. *David* found that other people in his college program had previous experience. He didn't let his lack of experience stop him from being successful. "*I wasn't experienced...It was hard but I was willing to learn...I stayed back many times...just to finish projects. Everybody else is done because they have the experience...*" *David* has one year left of his two year college program and he is looking forward to being finished. His son *Jason* is a high priority for him. "*I just want to give him what I wasn't given. Be there for him so he can have whatever I can provide for him...*"

#### *5.1.8 Danielle*

*Danielle* has a fierce determination to achieve her goals. She and I met in person at a restaurant to talk about her experiences. From an early age, *Danielle* was aware of the important role education could play in her life.

*"I think education is very important. I was lucky in the fact that somebody at a very young age made the connection between education and the type of lifestyle that I saw and wanted to pursue, just having a stable job. Growing up in a low economic income, living off welfare to support our family and seeing the generations repeat itself; I didn't want that type of lifestyle. I didn't want to grow*

*up on welfare and I knew that if I didn't get education to certify me in the field that I wanted to work in I was going to end up working for minimum wage or end up on income assistance."*

Danielle believes that her grade two teacher who showed her tremendous care and concern at a critical time in her life played a very important role in helping her to overcome adversity.

*"Ms Hood...knew my home situation due to my behavioural issues, knew that there was something going on and she always took the extra time, always made sure that I got the extra help if I needed it. If I was getting really frustrated she would give me a minute to cool off. She just really knew how to engage children in the class. So from a very young age I always enjoyed school."*

Danielle experienced a tremendous amount of disruption during her time in care. She feels she did not have the support required to make a smooth transition from care to an independent living situation. Danielle has faced dire circumstances including being homeless. Despite these challenges she maintained employment in the service and retail industry while she completed her first post-secondary education program.

*"...I found [going to university] a little more overwhelming in a sense...a girlfriend of mine who is taking the same course as me, she can go home for the weekend to her parents' [home] and do laundry and get caught up on sleep and not have to worry about making so much [money] because she can receive financial support from other means. But I found it really frustrating trying to balance everything. Making the transition from having support and that circle of advisors [while in care] to having nobody and feeling like I am on my own."*

*Danielle* has been able to secure contract employment in her field of study. She is enrolled in her second post-secondary education program and plans to pursue her dream of becoming a social worker. She has been actively involved in supporting other youth with care experience to build new skills and to experience personal growth. *Danielle* believes that the high expectations she had for herself allowed her to overcome many of the challenges she has faced. She gave the following advice:

*“...a lot of kids in care have behavioural issues. It is an excuse for them to not be able to function in school. I would make suggestions both to the youth and the social workers to have expectations for yourself...they can go to school. I don’t think going to school should be a choice.”*

*Amanda, Amy, Natalie, Scott, Skye Annabelle, Alicia, David and Danielle* are the nine young adults who participated in this research. Their personal profiles have been provided to create an introduction to them as individuals and to orient the reader to the following section. In the next section, the themes that emerged from the interviews with the young adults are provided.

### 5.2 AG Recipients Discuss Resilience Theory

The following section describes themes that emerged from the interviews as they relate to the three research questions. Quotes and stories from the interviews are used to highlight these themes. In cases where quotes are not connected to individual participants, it is because of ethical considerations such as confidentiality and the disclosure of sensitive information.



Research Question One: In what ways do youth with care experience perceive themselves as being resilient? Ten distinct components emerged from the interviews and are presented here.

### *5.2.1 Achieved Resilience*

Masten (2001), and Werner and Smith (2001) described two important factors that must be considered when defining resilience. The two factors include a threat to development followed by a demonstrated positive outcome. When I met with participants I asked them to consider more than the individual risk factors and assets in their lives. I asked them to consider resilience theory in the context of their life journeys to date. This was the context from which discussions about resilience began.

Each AG bursary recipient who participated in the study believed, given their life experiences to date, that indeed they were resilient young adults. They collectively reported a belief that they had overcome the adversity and barriers they faced in their lives, having achieved a level of health and well-being they agree warrants the label of resilience.

### *5.2.2 A tug of war between assets and adversity.*

Luthar, Cicchetti and Becker (2001) described the complexity of resilience. The experiences reported by participants were certainly dynamic and complex. *Alicia* explained her pathway to resilience in the following way. “*Always in my life something...would happen. I could be at a low and I would meet someone who would...open my eyes.*” *Annabelle* described the network of support that helped achieve well-being.

*“I would say it’s a network, it’s a net of people, it’s not just one person who offers assistance. I think if I had one single person who was consistent throughout my life that would be very true, but I didn’t just have one person I had a number of people...shifting in and out.”*

Finally Amanda described her experiences as a journey, *“...it just seems to me that at every...step in my journey the right person has come into my life at the right time.”*

The following excerpt captured one participant’s individual experience of the push and pull tug of war.

*“There are things that go one way or the other. For example...I went to see one particular therapist and by the time I left I wanted to kill myself...he had just pushed and pushed me in a direction that I was not ready to go in...asking me to face things that I was not ready to face...That pushes you one way...around that time...my alternative worker came into my life and...started to swing me the other way...”*

Annabelle explained that she believes her inner strength paired with available support helped her to achieve resilience.

*“...you either have an inner strength in you that allows you to push on or you don’t. I certainly think that I have that and I think on top of that...I had people and experiences...[who] pushed and shoved that strength into the right direction.”*

Finally, Amy believes that she has experienced resilience and her *“happy go lucky”* nature is, in her opinion, a good indicator of this. She explained that others have told her that,

*“...if they went through what I went through as a child they would be probably on drugs...I think resilience has to do with all of the support that I had...and just everyone supporting me and encouraging me. I can do anything.”*

As Ungar (2004) explained, there is no given set of circumstances that will promote resilience for every individual. Although each participant was able to articulate that they had achieved resilience, I used the words of five participants to illustrate that the risks and assets experienced by each were unique and varied.

### *5.2.3 People who promote resilience.*

Although participants share a wide range of experiences that promoted resilience, supportive relationships with key individuals of varying duration were a common factor. Jackson and Martin (1998) provided a list of characteristics found among resilient individuals who had experienced adversity in the form of maltreatment. One of the factors was having a significant adult who offered consistent support and encouragement. Werner and Smith (2001) also noted in their 40 year longitudinal study that a significant relationship with a caring adult was found to be a salient factor in the lives of resilient adults. Though not all participants in this study had access to a consistent caring adult, many reported significant care and concern from adults at pivotal times throughout their development. *Alicia* described an experience that she believes changed her life forever.

*“...When I was in grade five, just before I went into care, I had this teacher,...I was going through some really challenging things at home and...I didn't have any money for a winter coat and one day she saw me walking outside late November with a t-shirt on...she took me down to K-Mart and bought me a winter coat. Just*

*that, her demonstrating that generosity made all the difference for me and so there were things that kind of pushed you and shoved you in different directions...”*

Alicia’s encounter with this caring adult changed how she saw herself in the world. She stated that she felt more important and valued and this changed her interactions with others over the course of her life.

Annabelle provides us with a second example of how one key individual made a critical contribution toward mediating risk to overcome adversity.

*“...when I lived at the group home I had a really great key worker who was fantastic and went out of her way to make me feel special...so Christmas time...as a special gift from her, she redid my bedroom...she had put a border on my room that had matched the curtains and the bedspread that she had bought so that it was my room. Cause if not you would have the same kind of room as everyone else, same kind of pillow as everyone else. She went out of her way to make me feel special.”*

Ultimately key people in the lives of the young adults helped them move toward well-being. The following statement summarizes Amanda’s view about her experience of resilience. *“...I would not be where I am today if my extended family hadn’t taken me in, or if this person hadn’t offered some support...”* Although she did not have access to a stable consistent family who was able to provide support, this woman was able to describe how a collection of people were able to mediate the risks in her situation. *“When I think about my life and about how many families I have, it’s a lot. And sometimes that is really bizarre and...strange for me to think that there are a number of people who would*

*say that I am their other daughter...*” Social workers were reported by most participants to have been key adults in their lives that promoted resilience. This finding contradicts Jackson and Martin’s 1998 report on their study of former youth in care who reported that social workers were not an asset. Amanda had this to say about her social worker,

*“...My social worker called [the university] on my behalf pretending that she was me saying... ‘How can I get into university?’ and I was like ‘wow she did that for me? That’s amazing’. She believes in me so much that she would call the university and pretend that she was me. And I still think of that to this day.”*

Scott also reported an excellent relationship with his care social workers, one of whom was a former youth in care herself.

#### *5.2.4 Resisting the resilience label.*

One unexpected finding was that not everyone was keen to self-identify as resilient. This was not reflected in the reviewed literature. In particular Werner and Smith (2001), Jackson and Martin (1998) and Flynn et al. (2004), did not measure participants’ perception of resilience. For example, *Annabelle* described how as an adolescent in care she had been resentful of being labeled resilient. She described how maturity and an opportunity for personal reflection have changed her view on resilience.

*“I always struggled with this idea of being resilient...When I graduated from high school I hated, hated that there was a lower expectation for me...everyone was like ‘oh my god’ and there was this excitement and I was like ‘well...everyone is graduating from high school.’ I don’t see someone’s mother being all shocked that their kid graduated from high school. It was an expectation, it was just that you grew up with that expectation...I remember that ‘oh wow it’s so amazing’ and*

*I was like ‘shut up I’ve always been smart. Of course I graduated high school.’ So... people saw me as resilient or... they saw ‘look at this life she’d had and look she is finishing high school.’ And I always struggled with that because I never liked that the expectations were lower. And I think now looking back at my life, absolutely I was resilient...”*

#### *5.2.5 Risk and resilience in perspective.*

Ungar (2004) explored a constructionist view of resilience whereby health and well-being are inherent in everyone at any given time. Due to his life circumstances, *David’s* interpretation of risk and resilience seemed to differ from other participants. *David* reported a parallel view of resilience and adversity. Having faced difficult circumstances prior to coming to Canada, *David* has been witness to much higher levels of adversity than he has experiences as a youth in care of a CWA in Canada. His experiences were not dissimilar from those reported among migrant youth by Gibson (2003). He described his feelings about resilience. “...*I say yes [I am resilient] because of my situation and where I come from...there’s better living here than where I come from...so I look at that and say well I am here and if I don’t do something with my life then I won’t have anybody to complain to...cause there’s lots of people who would like to be in my position...*” *David* believes the protections that have been afforded to him as a youth in care in Nova Scotia have provided him with what he needs to make strides toward health and well-being despite the adverse experiences that he has faced. *David* believes his perception of risk may be different from his peers due to the level of risks he was exposed to as a refugee in another country.

*5.2.6 Turning risk into resilience.*

External attribution of blame was found by Heller et al. (1999) among resilient females who had been sexually abused. Although not in the context of sexual abuse, several participants were able to externalize negative and abusive attitudes of adults in their lives. In addition to this, they reported an ability to translate these negative attitudes into resilient outcomes. These participants were able to externalize negative attitudes projected on them by key adults due to their status as children and youth in care. Two participants reported how exposure to negative attitudes from key adults in their lives promoted resilient outcomes. Following is one excerpt from my interview with *Danielle* who would not allow others to dictate her future.

*“...I do [see myself as resilient] because I have expectations of myself. And there was times in my life...where people didn’t have expectations and I had them for myself. So in that sense I think I am resilient. And in another sense I had...attitude, where you tell me I can’t do something then I want to do it twice as better just to prove you wrong...I had social workers who told me I wasn’t going to get anywhere blah blah blah, and those individuals, I just wanted to prove to them that I wasn’t going to repeat that cycle because I knew I made some bad decisions doesn’t mean that I don’t have good values or morals. So I just wanted to prove people wrong. I didn’t want to be a statistic you know.”*

*Natalie* also identified that she was able to externalize the negative messages received from care providers and used her frustration to motivate her toward positive

outcomes. It seems that both *Danielle* and *Natalie* took risk factors and flipped them into mediators for their positive development.

*5.2.7 The complexity of resilience.*

*Skye's* perception of resilience highlighted complexities associated with the lives of people who are struggling to overcome adversity. Her thoughts indicate that resilience is not linear; rather it involves a multitude of processes and responses related to a person's external environment and internal physiology. Fraser et al. (1999) described resilience in a similar way. In her email interview, *Skye* shared her feelings about how she perceives resilience in her life. This excerpt from her email response, is an example of the multiple processes co-occurring which can bring about resilience or conversely create risk.

*"I see myself as lucky. A lot of support people in my life see me as resilient and are inspired by how far I've come in my life. I know that I'm stubborn and I have a lot of inner strength. I have gained...a lot of knowledge over the years and this has assisted me in progressing through difficult times. I also know that I have made a lot of mistakes along the way and if any of my mistakes had...different results I may not be where I am today. I have had hard times and still do today...but I guess in some ways, (through my support system and my own willingness to practice good self care and reach out to others) I am resilient to a point. When I am getting depressed, I know the warning signs and can look after myself so I don't let myself go too far. If I have a problem then I am able to deal with it or have a community of support around me to assist me in dealing with it. I am resourceful and this has helped me in getting to this point in my life."*



This speaks to the notion that maintaining resilience, and continuing to benefit from available assets is an ongoing process which continues throughout development.

*5.2.8 Thoughts on resilience among peers.*

Having leadership ability was one area that was noted by several participants as a prerequisite for resilience. This feature was not described by Jackson and Martin (1998) among the adults who participated in their study of former youth in care who achieved post-secondary goals. The following interview passage describes how *Natalie* expressed her belief about why she was able to achieve positive outcomes where other youth in care have not.

*“...Well I think it’s about figuring out who you are and maybe a lot of those foster kids out there never ask themselves who am I, who do I want to be. They are such a product of their environment and they are so angry you know, because of their circumstances...and some of them don’t have that extra step to say, ‘you know what, it doesn’t matter that all these people think that I am a bad dysfunctional person. I am going to show them that I am not that person.’ They just don’t have that level of thinking. They just go with the flow and if the flow says roll with the crowd then roll with the crowd. But mine definitely said to not roll with the crowd. Mine definitely said you know you’ve got to take your own path...make it work for you.”*

In this example *Scott* explained why he believes his brother succumbed to an unhealthy lifestyle, while he was able to take a different path.

*“...My brother was in the same situation I was in...same age essentially and all that...he’s in the worse shape of anybody I know right now. He wasn’t resilient.*

*He had the same support...that I took advantage of...I think he was more of a follower, you know, did what everybody else did. I did my thing...they [social workers] afforded him the same amount of attention and all that sort of thing...I sat around waiting for them [social workers], my brother took off. He didn't care. He didn't take advantage of the opportunities they did present...and maybe success in care has something to do with the child itself I would think."*

Annabelle explained that in her experience youth in care have a poor self concept. "When you actually ask [youth with care experience] what they are good at [they say] nothing and you dive into how they are feeling about themselves, it's generally not very positive..." Finally Annabelle reported that she believes being tenacious is a necessary quality for all youth in care. "...There is something very important about not giving in...asking lots of questions and challenging...if my social worker wasn't around and I needed something I didn't care...so let me talk to who ever is working her cases today...I was able to do that but most young people aren't..."

#### *5.2.9 Shared desire to promote resilience among others.*

Another theme that emerged among participants was the belief that their personal experiences have led them to be more sensitive to the need to foster resilience among others. This theme was not explored in the literature. In particular, Rosenfeld and Richman (2003) explored youth in care perception of available support, but did not examine support offered to others. In the following example, Amanda explored how her international work with children and youth victimized by war, helped her to understand how her own personal adversity has informed her work as an adult.

*“When I was preparing to go to Zimbabwe...I had an interesting realization...I was going to work with... a group of orphaned children...I realized that I was really connected to these children...I don’t understand this because I don’t know these children. And then I said oh yes I do know these children. Their spirit is within me and my spirit is within them because I didn’t grow up in a traditional family either...then I realized that this is the journey that I am on.”*

Amanda realized that her own experience of being displaced within the care of a CWA was similar to experiences of children living in refugee settings displaced by war. Connecting with and helping others who faced similar difficult circumstances seemed to be a part of the resilience process for many participants involved in this research. All but one of the participants aspires to a career intended to improve the life circumstances of other children and youth with similar circumstances. During the interview process all participants reported a strong interest in the well-being of other youth in care and a desire to be able to reach out and help youth with similar experiences.

#### *5.2.10 The AG Bursary contributed to resilience.*

Community supports are one of five systems which offer assets that foster resilience (Flynn et al., 2004; Masten, 2001; Newman and Blackburn, 2002; Ungar, 2004). The AG bursary is offered in Nova Scotia through the support of volunteers and community donors who wish to be a part of the health and well-being of former youth in care. Participants reported that having been a recipient of the AG Bursary was a factor in their personal resilience. The following eight critical elements of the AG bursary program were reported to have been mediating factors in the lives of participants:

(i) provided unconditional support by offering help to youth who were perceived to have previously made poor choices, (ii) did not restrict applications from youth who had dropped out of education programs and were seeking to return, (iii) fostered contact between youth and supportive adults who encouraged them and challenged their thinking, (iv) created a climate of expectation for youth to succeed, (v) community investment in the bursary fostered a sense of personal value among participants, (vi) availability of financial support to cover expenses minimized the need for part time work, allowing recipients to concentrate on post-secondary education, finish school sooner, and enhance the overall experience, (vii) offered hope for a brighter future as youth in care who aspired to post-secondary education.

Most participants explained that completing post-secondary education was very challenging and at times they stopped or considered dropping out. *Annabelle* explained the following about her experience of the AG bursary.

*“So just when you were ‘like, I don’t know if I want to keep going’, suddenly it would be... time for the scholarship. It is always nice to get a letter that says it is so fantastic that you are doing well and here is some money.”*

*Natalie* found herself in very difficult circumstances as a single parent with a small child.

*“I was very delayed in getting my student loan for different issues, trying to prove that I am a single parent. Trying to prove that I don’t get support, when basically I am just telling [the AG selection committee] this is who I am. This is what I am going through. [The AG bursary] was my only means of support for the last four months...so it put the roof over my head when student loan wasn’t there for me. I wouldn’t have been able to get through the year without it.”*

Participants also described circumstances where the bursary allowed the timely purchase of text books, the ability to purchase computer equipment and other resources necessary for their course work, and in some cases to pay for basic living expenses in times where they fell short.

For review of the processes reported by the recipients of the AG bursary organized by four levels reported in resilience literature including individual, peer, family and community, refer to Appendix I. Culture is not included in the review found in Appendix I as participants belonging to a cultural minority were not exposed to cultural processes throughout their development and therefore had no exposure to cultural assets. The remaining participants did not identify cultural assets in the course of conversations on resilience.

### *5.3 AG Recipients Provide Ideas on Resilience for Others*

Expressing adverse experiences and identifying solutions was explored by Brown et al. (2001) and found to be critical components of resilience education. Through the course of this study, participants were also encouraged to provide words of advice for other people facing similar circumstances. *Alicia* indicated that no one had ever invited her to provide advice for younger youth with care experience about how they might move toward resilience. In the following section, I have named each participant and included their corresponding words of advice for other youth in care. Following was the question I used to frame our discussions.

*“Let’s say that you had an opportunity to talk with other young people in a similar situation. Maybe they are in junior high or high school and they are trying to get through things what might you tell them?”*

5.3.1 Amanda's message.

*"I would tell them to look within themselves...limitations, boundaries they are in your mind. Just to go for what you want in life. Step outside your comfort zone. Do what you believe in. Strive to be the best you can be. There's always people around if you need help and support. I ask for help everyday. And don't be afraid to ask for help. Certainly it doesn't show that you are a weak person. It shows that you are a strong person."*

5.3.2 David's message.

*"Don't give up. Keep trying. If a door is shut in your face there is always another door to go knocking on...If I can give any advice to anybody just don't stop. Just keep at it and people will eventually get tired and give up and give in or something. That's just the attitude I have now. It's like don't quit. It's too easy to quit I find now, it's too easy to quit."*

5.3.3 Amy's message.

*"Never give up. Pursue your dreams and don't let anyone bring you down."*

5.3.4 Alicia's message.

*"I would encourage them to dream big and to believe in themselves. And that no matter what comes along in life, you always have it within your capability to handle what ever life presents to you...the other really important thing is...making sure you have a support network. And build that because it is really, really important. Allow strong, healthy, loving people in your life because everybody needs somebody at some point."*

5.3.5 Danielle's message.

*"Have expectations for yourself...it's easy to get caught up in today and what's going wrong with today but you need to be building toward smaller steps, to bigger steps, to bigger goals, and looking at the bigger picture..."*

5.3.6 Natalie's message.

*"...Just because you come from a difficult childhood doesn't mean that you can't have a successful future and it doesn't mean that you can't be a good parent...you have to deal with the tough stuff...putting it away somewhere, that's not going to do you any good..."*

5.3.7 Scott's message.

*"For me, what worked was not really hiding anything...there's other people in that situation and for me letting people know what kind of childhood I had...helped a lot because I didn't have to hide anything. It just made me feel more comfortable. I know a lot of people may not be like that but for me, it was great just to have everything on the table."*

5.3.8 Annabelle's message.

*"Be as tenacious as hell...having a support network for yourself and being part of a support network for someone, because I think there is something important that you learn from having to support someone else...it is an important experience to have."*

5.3.9 Skye's message.

*"What ever you want to do, you can do...don't let your past define who you become...embrace it, accept it, learn from it and then leave it in the past so you*

*can live your future!...It is better to try and to fail than to have never tried at all...Education isn't what life is about...but it can have a significant impact on the life you live in the future. The most important thing you have to learn is who you are and how to be okay with that...As you get older you learn that a lot of people who weren't in care had a rough life too and that more people are lost and insecure with themselves than actually know who they are. Your experiences aren't who you are but they can inspire the person you chose to become."*

### *5.4 AG Recipients Negotiate the Meaning of Education*

In the following section, the young adults involved in this research describe how they made sense of their educational pathway, how care alumni define positive and meaningful education experiences and ultimately how they have negotiated the meaning education had in their lives. This section is in response to the second research question, What do youth with care experience believe contributes to a positive and meaningful educational experience? In order to gain understanding about what was meaningful and positive about the participants' educational experiences, I asked the care alumni involved in this research what education meant to them and what had motivated them to pursue their educational goals.

#### *5.4.1 Education as a pathway to a better life.*

Jackson and Martin (1998) described the importance of foundational educational experiences in the lives of youth with care experience and how success at school can promote inclusion and well-being in early adulthood. Overall, participants involved in this research indicated that they believed furthering their education would lead to a better life situation. Notably, a commonality found among participants is that each came from a



family of origin of low socioeconomic status. In the following excerpt, *Natalie* made an evocative statement about the significant role she believes education has in her life.

*“...education is the only thing that is going to help me escape poverty. Education is the only tool that I have to fight the statistics against me...” Danielle mirrored this sentiment. She explained that in her mind, education would allow her to break the cycle of dependency on formalized government programs which she experienced in her family of origin. “...I didn’t want to grow up on welfare and I knew that if I didn’t get education to certify me in the field that I wanted to work in, I was going to end up working for minimum wage or end up on income assistance.”*

The theme that emerged was that the participants shared the dream of a better life and that education was the pathway to that life. Education seemed to represent change for the better and was highly valued by all participants. *Amy* communicated that she felt her options would be limited without furthering her education. She indicated that *“there’s not a whole lot you can do with a high school education. I didn’t really want to come [to university] but I knew it was all that I had.”* *David* indicated that he believed his educational achievements would help secure employment.

*“One of the main reasons I decided to go back to school to get some kind of trade...because around here employers aren’t willing to pay you well. They are looking for experience but yet they are not willing to hire people to train them...I might as well go to school and do something that will have meaning when I go to an employer.”*

*Skye* explained how her educational competence allowed her to move into an employment situation at an early age. *“Education is very important to me because it has*

*helped me to have a significant and successful career at a very young age...my education has given me an extra foot in the door.*” Finally, *Annabelle* articulated that a successful school experience would help her to overcome the stereotypes that she believes are held of youth in care.

*“I always had this frame of mind. I am not going to be a statistic. I am not going to be like everyone else...despite the fact that I had lots of off trail moments in my life, school was always on trail and that was always a reason to get back to what my aim was.”*

It was clear that whatever the life circumstance of the participants, they recognized educational outcomes as an integral component to achieving resilience and means of overcoming the adversity experienced in the course of their earlier development.

*Danielle* explained that for her, junior high was a struggle. The message that she could achieve a better life helped her to overcome apathy toward her education.

*“I was skipping school[in junior high] and my social worker made it very clear that if I wanted the nice clothes and the nice things and comfortable lifestyle I wasn’t going to get it living on a fixed income so I had to go back to school. And the people that I looked to for support, and looked up to, valued education. And so I figured if everyone is making such a big fuss about it, it must be a big deal and then I wanted to pursue a career in youth services and I knew there was a lot of years of school so I had to get high school done with to get to where I wanted to be.”*

Educational attainment was obviously a priority for participants and demonstrated by their eligibility for the AG bursary as young adults enrolled in an education program.

At the time of this study, five participants had completed at least one post-secondary education program. Three were in the process of completing their first post-secondary education program. Only one had stopped mid program and was not actively enrolled. Two participants had completed two post-secondary education programs and three were in the process of completing their second post-secondary education program. The areas of study ranged from college certificate programs in heavy duty mechanics, public relations, and English as a second language training to professional university programs in education, social work and library studies as well as general arts. One participant reported that she is currently working on a master's level degree in conflict resolution.

### *5.4.2 School as a Safe Place.*

A theme that emerged from the participants' discussions was the unfortunate reality that school can take on a whole different meaning for some children and youth who do not enjoy a safe and supportive childhood. The priority of school as a place of safety for children who have experienced maltreatment was described by Dent et al. (2003). *Danielle's* statement seemed to capture this important fact.

*"School was also an escape for me growing up in such an unhealthy environment, knowing that when I went to school, all I had to do was concentrate on those studies instead of reality, you know my life situation, so I used it as a healthy escape."*

These sentiments were reflected in the statements of several participants.

For *Alicia* life at home with her natural family and life in the residential care system of a child welfare agency was filled with adversity. This is her description of what school meant to her: *"It's been my life saver really. Cause the only thing I ever had was*

*school. That was it. Despite the fact that the rest of my life was falling apart around me I had school...*” For *Danielle*, a special relationship with a teacher helped her to have positive school experiences despite presenting with significant behavioral problems in the classroom.

*“My earliest memory...Ms. Hood, who knew my home situation due to my behavioural issues, knew that there was something going on and she always took the extra time, always made sure that I got that extra help if I needed it. If I was getting really frustrated she would just give me a minute to cool off. She just really knew how to engage the children in the class. So from a very young age I always enjoyed school.”* I wondered what school would have been like for *Danielle* had *Ms. Hood* not had the skills and insight into *Danielle’s* world to be able to meet her individual needs at a critical juncture in her development.

#### *5.4.3 Education as an opportunity for competency.*

A final theme was that school provided early opportunity for these adults to feel successful, and to experience mastery and competency. This was highly valued by participants. For children with care experience, opportunities to regain positive self concept can be critical in the journey toward health and well-being. Masten (2004) described a phenomenon of resilience where competency in one area has the ability to cascade and result in improvements in other areas. *Natalie* explained that success at school was a critical part of improving self-concept.

*“I think somewhere in my earlier grades I decided I was going to be smart and that I liked school because I had a hard life at home. School was always my outlet*

*to shine...So from a very young age I have had my own vested interest in education..."*

*Annabelle* navigated school changes by constantly adapting to the new environment.

*"I always did well in school. School was the only thing consistent in my life that was fairly easy. When I switched schools I always caught up really quickly and the teachers always liked me and so it was just the one simple thing and so because it was the one simple thing I always loved school, I loved learning and I still love learning."*

### *5.5 Do Educational Experiences Differ for Youth in Care?*

In order to understand how educational experiences are meaningful for youth in out of home care, I asked each participant to reflect on whether or not they believe educational experiences are different for youth in care compared to the experiences of youth who live in the community with their family of origin. These responses provide further insight into how alumni of foster care understand educational processes that they go through. The results presented here compliment earlier work in this area by the National Youth in Care Network (2001) in their report on focus group interviews with Canadian youth in care about education and the unique challenges faced by youth in care. In the National Youth in Care 2001 report issues such as available support, help for homework and housing were identified. The following collection of responses is intended to provide in-depth explorations of these issues. Some responses depict barriers while others are stated as differences. Both are included in the results section to further explore meaning attached to the experiences. Themes are summarized that have emerged from

the collection of responses provided. *Alicia* has provided a reflection of her thoughts on how educational experiences differ for youth in corporate care.

*“I recognize that a lot of young people experience various challenges to varying degrees in life. And obviously that has implications on their education... whether they are in care or not. But having said that, being taken from the people that are supposed to raise you and take care of you I think has implications on people’s well-being. And so there is a whole thing...going through the grief and loss process. And so I think that there are a lot of situations that arise. Like moving from one house to another or just the different things you experienced in your life and witnessed and then trying to get up and go to school the next day. Or even while you are in care...I lived in a couple of group homes and watching the chaos unfold around you...at the end of the day you are like I don’t want to have to get up and go to school. And then I ran into barriers as well like not living in the geographic area for the school. So by the time I had hit junior high, when I was in elementary I went to nine different elementary schools...I was fairly adamant about not wanting to change schools again. And so I never lived in my school district and the school board was going to kick up a fuss and make me pay in order to be an out of bound student or what ever and in the end they decided not to do that. So even little things like that. Like running into those kinds of challenges. Stupid things.”*

### *5.5.1 Placement changes.*

Altshuler and Gleeson (1999) provide a description of the educational challenges faced by young adults in corporate care. The National Youth in Care Network (2001)

report also identified transience as a barrier to positive educational outcomes. For those young adults in this study who had numerous placements, the disruption of moving from one location to another, from one school to another was difficult. These placement changes often were not able to accommodate the educational needs of the young people resulting in school changes during semesters as described next by *Danielle*.

*“...I don’t think a lot of individuals who don’t grow up in the child welfare system ...move as much as children in the child welfare system do. The inconsistency of schools and having to switch in the middle of semester and picking up in a different spot really affected my progress because every time I would get a grasp of what’s going on it would only be a matter of time before they would have to move me and I would have to start in the same subject in a totally different spot.”*

*Natalie* talked about placement changes and stated that she believes that for children who live in family settings, family moves that do occur take into account the educational needs of the children in the family. Her observations were that many families move in the summer months to avoid school disruptions.

In the following excerpt, *Amanda* described an experience as a child in care that affected her learning career for years to come.

*“...I struggled with school. It was very difficult for me, I think, because I was moving around from foster home to foster home. I never knew what was going to happen from one day to the next. One experience I had was my social worker came to the school and said you are no longer going to that foster home any more and took me to another foster home and I never went back and got my belongings, nothing. So I constantly had to deal with this insecurity and wondering what was*

*going to happen to me from one day to the next and so it is very hard to concentrate in school when you are wondering if you are going to have a home to go home to.”*

Participants agreed to anonymously share the age they entered care and the number of placement changes they experienced while in care. For a review of this information see Appendix J.

#### *5.5.2 Privacy issues.*

While some participants were comfortable sharing their circumstances with their educators, others who had demonstrated behavioural problems in the school setting felt they had no control over the access of information that their educators had about their life circumstances. In the 2001 report by the National Youth in Care Network on creating positive school experiences for youth in care, some youth reported experiencing discrimination on the part of educators due to their care status. *Danielle* described the problem of balancing confidentiality with the importance of helping educators understand her needs.

*“...it was also hard because [the educators] know so much about you because they have to know how to deal with your behavioural problems that come along with the inconsistencies and your environmental issues that are affecting your behaviour, that I sometimes felt that I was treated special or different...I didn’t like the teachers and the principals knowing so much about my situation...”*

#### *5.5.3 Competing demands.*

Youth in care sometimes have many things happening in their lives as a result of care status. Therapy, assessments, family visits and court dates are a few of the kinds of



appointments that often happen during the school day. Flynn et al. (2004) found that youth in care in Ontario are more likely to miss school than other Canadian children. One AG alumni described what it was like to navigate these competing demands.

*“...I would feel like I am being pulled in two directions...my social workers pulling me out in the middle of class and having to go to court and stuff in the middle of the day and missing class or whether it be to therapists appointments. It seemed to butt heads with one another a lot...so I didn't know what's number one. Is my education number one...is everything else around me number one and being able to balance those was really hard.”*

#### *5.5.4 Environmental distractions.*

Some young people felt that they were not able to concentrate on their studies due to their environment. Jackson and Martin (1998) described living environments for youth in care that did not support educational achievement. Living in a group home setting was one factor that several adults involved in this research believed negatively impacted their ability to focus on school. Children and youth in care often live with other children and youth in care who have special needs. These needs were described by participants as behavioural issues that require intervention which inevitably impacts everyone living in the placement. *Alicia* explained the following,

*“...it's hard to go home and do homework at a group home at night while the kids are, you know, acting out and the house has no privileges and needs to have a special meeting to address what's going on. It's just really hard to stay focused because there were so many other things going on in my life.”*

One participant had been in the care of a CWA temporarily while the remaining eight participants had all been in the permanent care and custody of a CWA in Nova Scotia. All participants identified having lived in a foster home at one point during their care history. One participant reported having resided in a residential care facility in the United States for approximately three years period. Five participants lived in foster home settings for most of their care history. Three reported living in residential care settings during their adolescence prior to their transition from care to independent living. One reported having returned home to parental care. Those youth who lived primarily in rural communities largely resided in a foster care setting, while those youth who lived in residential care settings were all in a larger urban center. Three reported having transitioned to an independent living situation while in high school.

### *5.5.5 Care giver support.*

Some of the young adults who were part of this research project shared their feelings about not having access to consistent care giver support. In the following excerpt *Natalie* comments on her perception of support afforded to youth living in the community with their parents. “...*I can’t speak for everybody but most parents I have encountered have been nothing but supportive to their children...and I think that is not the same for youth in care, as much as we try to make it that way.*” Unfortunately, most participants reported a general sense of feeling neglected as they did not have parental figures who they believed were actively participating in their lives.

Youth in care perceptions of poor support were reported by Rosenfeld and Richman (2003) as a risk factor which negatively impacted educational achievement. The adults in this study were able to overcome this lack of support. When *David*, for example,

was not able to receive the support he needed from his foster parents or social worker, he was able to navigate toward the support he did need. *David* came very close to dropping out of high school due to the problems he was dealing with in his foster care placement. He explained that the support he received from his friend's mother helped him to stay in school.

*"...I was close to dropping out...this guy I know since I moved here...his parents treat me just like they treat him so...I talked to them...they are always willing to talk to me...they helped me a lot. His mother actually went to the guidance counselors and talked to them, told them my situation and what I was going through at the time..."*

*David* did not drop out of high school. He actually stayed in high school for an extra year to improve his grades. He also moved in with his friend's family when the situation at his foster placement was not working out.

#### *5.5.6 Available support during early adulthood.*

Many young adults who are pursuing post-secondary education do have access to parental support during that time. This was identified as a risk factor for youth leaving care in the 2001 participatory study conducted by the National Youth in Care Network, whereby their peers were able to return home to family care during early adulthood. The participants in this study did not feel that they had access to the same kinds of support as their peers in post-secondary programs. *Skye* described this process in the following excerpt.

*"...For youth who have not been in out of home care, they can often depend on some kind of support from their families (whether this is financial, a place to live,*

*learning independent living skill, etc.) For youth who are in out of home care, many of us are lacking in our own self confidence and often the skills to live independently. Depending on when we begin our post-secondary career, we will also have the added pressure of leaving the care system on our 21<sup>st</sup> birthdays, amidst our post-secondary careers.”*

Amanda provides public education presentations about youth in care experiences. She described the following message for the public who are learning about youth who have aged out of the foster care system:

*“I talk to them and I say these young people have to leave the system when they are 18 and for me, I was 21, which was very lucky...You know you wouldn’t expect your own child to go out if they are not ready. You wouldn’t send them out there with no resources, no support, and in today’s society a lot of young people are staying home longer...I say how many of you have 19 year olds home? How many have 21 year olds? How many have 25 year olds? How many have 30 year olds...to make them realize that this is a forgotten group of young people...”*

As mentioned previously, many of these young adults reported occasional contact with former social workers and consistent contact with supportive adults only through the biannual AG application process. Only Amy, who had been in care temporarily had the opportunity to live with her mother during the summer months and receive continued emotional support from her throughout the school year.

#### *5.5.7 Routine school experiences.*

For youth in care routine school related situations, such as parent-teacher night, are sometimes difficult experiences which cause a number of complications and

increased anxiety. I had not had an opportunity to review literature on this topic in my literature review. I include this here because the young adults described what it was like to experience routine school practices. *Alicia* explained the following about parent-teacher night. *“I hated parent-teacher nights. I hated them... just not having a parent to go to parent-teacher night...my social worker didn’t go to parent-teacher night. Some do, but mine didn’t.”* For young people in care, whose lives are characterized by the experience of growing up with corporate care, important developmental considerations like a caregiver’s regular attendance at parent-teacher interviews are often overlooked. The lack of presence at parent teacher night was reiterated by another young person. *“I don’t think any of my teachers in high school ever would have had a visit from anyone and in junior high as well.”*

Extra-curricular activities often posed another problem for participants in this study. Jackson and Martin (1998) reported that involvement in extra curricular activities is a notable factor promoting resilient outcomes among children and youth who experience maltreatment. Participants in this study also noted a lack of access to transportation, extended family or support network to reach out to fundraise for these activities. Despite tremendous challenges, these former youth in care had attempted to overcome them. Following one participant talked about what it was like for her to remain involved in activities.

*“It was such a pain...to do extra-curricular stuff because...you are fundraising and you have to reach out to that network, or whether you need to get somewhere. I played basketball in junior high...it used to take me a good solid hour, hour and 20 minutes to bus to my school and to have to ask someone’s parents to go out of*

*their way to come and pick me up so we could go to the tournament, or finding my way home after a game...it was such a huge ordeal.”* The young adults talked about not having consistent caregivers who could share in the responsibility of supporting their extra-curricular activities, and having overcome this by relying on the parents of their peers.

Some of the young adults involved in this research moved into independent living situations while in high school. This posed different challenges for them. *Annabelle* described how working on a special project for school was sometimes difficult.

*“...When you are 17 or 18 and you live on your own, you have a project to do...it is a whole different world that you don't have access to this network which a lot of people have...family network that is there and helps you do things. You don't really have that...you have somewhat of a network if you need them between 9 to 5.”*

Further to this, not having a parent or guardian for educators to consult with was problematic. This participant described having a teacher ask her to give permission for herself to be absent from school. *“...I had to write dear teacher please excuse me from being in class. I have a doctor's appointment, signed...me. It's the stupidest thing but it's in the laws and the rules.”*

Participants also talked about specific school events or projects posing difficulties for them. Safe grad, prom and take your child to work day were all examples of times where participants struggled with fewer supports. This woman explained the process that she would go through.

*“...I would always go through this process. Who do I ask to do that, and always feeling like I am imposing on them...whereas if you live at home it’s just hey dad or hey mom, or hey grandma. It probably feels, I haven’t experienced it but I imagine that it doesn’t feel so guilt ridden.”*

Access to transportation to and from events like prom and safe grad were also reported as challenges. *“...even a taxi [voucher] to get to prom would be helpful...”*

#### *5.5.8 Peer relationships.*

AG recipients reported a wide range of social experiences during their school careers. Jackson and Martin (1998) found having friends outside of care was a positive factor among resilient alumni of care. Most of the AG recipients reported having good social networks, while one reported having been shy and lacking access to a peer group during her school career. Following are a few key peer relationship issues that arose for participants which in their view were unique to their experiences as youth in care.

*“...For me I get one of two reactions. Usually not from my friends but from their family [who] would be ‘oh my god this person’s a hoodlum, what do you mean they are sleeping over at our house?’, or generally once they got to know me they were like wow, you have been through so much, you are an amazing person.”*

For this participant high school was a lonely time.

*“I dreaded high school...I was very much a loner. The peer groups that I could have hung out with did drugs and I wasn’t really into that so I spent a lot of time by myself...I just remember not having any confidence in myself...”*

The AG recipients talked about having non-care friends who were accepting of them but did not really understand what it meant to be a youth in care. *“...my friends*

*were always supportive but had no concept whatsoever of what that [in care] meant and so it wasn't something we spent a lot of time talking about.*" For those who moved out on their own at an early age and subsequently had little to no adult supervision, having their own place was a draw for their friends. One person described her friends' reaction to her independent living situation. *"...They really loved it when I moved out on my own when I was sixteen. They liked that part."*

Getting permission to socialize with peers from caregivers was sometimes a barrier to young people. *"I remember living in group homes and asking to go to friends' houses. 'Well have they been checked out by the department' [CWA] and these stupid things and you are just like oh my god."* Another AG recipient talked about the barriers of socializing with peers in their own home. *"...or even being allowed to have your friends at your house."* There were many additional considerations that youth living in family settings may not have to endure.

*"...having one [friend] over was an event. Every kid in the house couldn't have someone over at the same time. You could only have them over at certain blocks of time. It's not like hey do you want to come watch a movie tonight..."*

#### *5.5.9 Relationships with educators.*

The relationships with educators were reported to have been affected by in care status as previously described by *Danielle*. This was also identified among youth in care who participated in group interviews in the National Youth in Care 2001 participatory study on education. *"I had a lot of teachers who were very caring and concerned but I had also a lot of teachers who were suspicious and...not sure how to behave around me...they were cautious of how they interacted with me and so that was always weird..."*



Some participants felt that attempts by individual educators were inappropriate. *“I had one teacher who drove me crazy. He was always like...trying to save me.”* In this instance, the AG recipient felt that overtures made by teacher did not match the needs that she had on many occasions. Conversely, teachers also went far beyond the expected teacher student relationships then would have been likely for children and youth living in the community with their family. *“I had a math teacher in grade 10 who was very supportive when I was going through a rough time and she’d often come out and visit me at my apartment or pick me up.”*

### 5.5.10 Family of origin perceptions of education.

Jackson and Martin (1998) found that having a parent or caregiver who saw education as a path to a better life was a predictive outcome among former youth in care who pursued post-secondary education. Of the participants involved in this research, most of their families of origin were reported to have limited education. Participant family of origin support for their educational goals varied. *“I come from a family where nobody is educated.”* Natalie’s family of origin is not currently supportive of her educational goals. She explained the following about her sister’s lack of support, *“My sister has a very different view of education than I do. You know she doesn’t think I should be going to school right now, she thinks I should be working. She doesn’t see the long term benefits of education the way I see it.”* David did not remember a lot about his parents but they did instill in him their desire for him to pursue educational goals. He explained that, unlike Natalie’s family, his parents and his sister communicated support for education. *“My parents...they always talked about education. I don’t think they had education. They did what they did to survive...they talked to me about it [education] at an*

*early age.*” While all the young adult’s families of origin were reported to have limited education, there was a range of messages given to the young people from their families about the priority education should play in their lives.

*5.5.11 Experience of starting post-secondary schooling.*

For some participants, the experience of moving into residence or shared living situations with peers at college or university was not appealing after having moved through foster care placements or having lived in group home settings. It appeared that after having lived in care with so many different people, the excitement of being in that group environment lost its appeal. *Alicia* described what it was like to arrive at school and see other youth moving into campus life with the support of their parents. “*I remember when I was first moving into school and everyone was moving into the residence and stuff like that and it was their parents with the minivan you know and I hated that...and even if I did want to do that, it would be different.*”

Of all the participants involved in this research, only one reported having received the support required to appropriately plan for post-secondary education while in high school. Gibson (2003) identified the importance of preparatory support in maximizing positive outcomes for migrant youth. *Scott* had this to say about his high school guidance counselor,

*“She was great actually. She knew exactly what was going on with the family...with Children’s Aid and the workers...she had a great grasp on what was going on. She did what she could for me to make sure that I got into good schools and fill out for all the scholarships I could...”*

*Scott's* guidance counselor was able to help him take important steps toward planning for his education. His move to university went smoothly, and he felt prepared to take those next steps.

Rosenfeld and Richman (2003) found that a large proportion of youth in care report having little access to support. Although she felt that she had to navigate a plan toward post-secondary education by herself, *Natalie* did feel tremendous support and concern for her emotional well-being from her educators. She explained the following,

*“...when I graduated from high school I received two personal scholarships of \$500.00 apiece from high school teachers that I had had throughout junior high and high school. They inspired me so much...and every time I didn't do so well they would give me that second chance.”*

*Natalie* was so inspired by the educators in her life that she wanted to become a teacher. Unfortunately she felt that pursuing this goal would not be possible due to student loan debt she would have to accumulate over a lengthy educational program. *Natalie* abandoned this dream and recreated another educational goal that she believed was more attainable for her and would require fewer years of study. *“...Even though [I had] that desire to teach...I need to go into a professional program...something that is going to open doors for me upon graduation...”*

The following excerpt from the interview with Amanda depicts how she approached the transition.

*“...The first semester of college I received straight Cs and I was so happy that I hadn't failed one class...that really helped build my self confidence and the next*

*semester I got As and Bs and the next year I got As and Bs and I said oh I can do this.”*

Amanda was able to keep a positive perspective on her abilities and as Masten et al. (2005) found, this competency translated into gains in other areas of Amanda’s life.

#### *5.5.12 Students with special education needs.*

Four participants reported having been exceptional students during their early school careers. One reported having been an average student. One reported having struggled in school and nearly dropped out of high school. Two reported having significant academic difficulties, one having been diagnosed with a learning disability by an educational professional. One participant reported having had an undiagnosed emotional behavioural disorder that was characterized by behavioural problems in her early school career. Two reported having received special education services. Of the two who reported having received special education services, one accessed the services of a tutor. The other reported having attended summer school and having received individual tutoring from a teacher due to failing course work. One participant reported having a physical disability that impacted learning.

Thomson and Wyatt (1999) described the importance of having a good understanding of the relationship between behaviour and learning styles of children and youth who have experienced maltreatment. Sheid (2003) highlighted the need for educational assessments to help understand how learning and behaviour may be impacted by maltreatment and care status. Several of the participants described behavioural and learning difficulties that were directly associated with early maltreatment. Sobsey (2002) reported a higher rate of disabilities among children and youth who have experienced

maltreatment. *Danielle* has already described for us how *Ms. Hood* handled her behavioural problems in a positive and constructive fashion during her early school career. This participant needed extra help to be able to achieve her educational goals. She advocated for her own tutor in high school to make sure that she had the support she needed.

*“I was diagnosed with ADD [Attention Deficit Disorder] as a child so I was medicated and [diagnosed with] a mild form of dyslexia when I was younger...so I did need the extra attention in some courses...I was fortunate enough that I got those services...I had extra tutoring in high school. My tests because of my dyslexia when I was younger were orally given to me...they would go over the questions with me before...so that I would understand. But they didn’t treat me differently. They still expected the same amount of work...”*

This woman received the adaptations that she needed to be successful and developed knowledge and understanding of her learning disability.

#### *5.5.13 Impact of studying social sciences.*

Notably, six of the young adults involved in the research commented on learning about human development during post-secondary course work. The information that was presented to them during their course work was helpful to them and allowed them to make better sense of earlier life experiences. Several participants were able to understand that they were not personally responsible for many of the adverse circumstances in their lives. This was true for *Scott, Danielle, Annabelle, Alicia, Amy* and *Amanda*. This process was similar to the ability to externalize blame described by Heller et al. (1999). In the following quote one AG recipient explained how this was a valuable experience for her.

*Danielle* explained how specific courses exposed her to content that brought up issues about her childhood.

*“...Taking some psychology courses that looked at relationships of family and the psychology of love and feeling like you belong and the origins of human behaviour ...in one sense it was frustrating and in another sense I learned a little bit more and I was able to accept ...the feelings that I have...”*

Knowledge about development seemed to help these young adults gain perspective on their earlier experiences of maltreatment and the adverse experiences that some of them had while in the care of a CWA

*“...it was through college that I started researching the child welfare system... and I started looking at finding books...and started reading and I was like ‘oh there’s problems with the system. Oh it’s not me. Oh okay. Wow this is very enlightening’ ...when my third year came along I researched attachment grief and loss of foster children and I came home to Nova Scotia and I presented it to the Foster Families Association...it was very well received and I realized from that...educating foster parents and social workers was paramount and so that was very empowering for me too and so then I realized that I’d like to go on to university.”*

All of the participants expressed an interest in reviewing the results of this study. They also indicated that they had a desire to educate others about their experiences with the hope that services could be improved for youth in care.

### *5.6 Reported Barriers*

After having explored some of the educational pathways that are unique to young people with care experience, I asked the participants if they could tell me about the barriers that they have had to face during the journey toward meeting educational goals. This exploration was centered on the third research question: What barriers to positive and meaningful educational experiences do youth with care experience believe exist for children and youth in out of home care? Following are the key issues which young people with care experience believe are barriers that impede positive and meaningful educational experiences.

#### *5.6.1 Low grades.*

Altshuler and Gleeson (1999) reported low grades as a barrier for positive outcomes among youth in care. Several of the participants reported having low grades which affected their options after high school. *“When I graduated high school my marks were not good enough to get into university...”* Three participants completed some form of upgrading to be able to move on to prepare to complete their desired post-secondary education program. Amanda described how her social worker tried to help her continue on her educational journey. Although her grades were not high enough to get into university her social worker wanted to be sure that she had information that she needed to upgrade and later be eligible for the university program. This social worker went so far as to call the university pretending that she was a potential student to model the process.

#### *5.6.2 Minimal incentive for educational achievement.*

Receiving positive acknowledgment for good grades or school behaviour was not a common experience among the participants. Most felt that adults in their lives were not

consistently focused on their educational goals. This is similar to the observations of the group of high educational achievers studied by Jackson and Martin (1998). *Scott* explained that although he felt care and concern from the adults in his life, he had no one who consistently encouraged him to study and focus on school. The following excerpt depicts why *Natalie* believes there is a lack of incentive for positive educational achievements on the part of youth in care.

*“I don’t think there is enough reward for initiative...if you were to...put that out there that if you do something for yourself we recognize that and we value that and you will be rewarded for that and maybe the reward is a pat on the back but you know, at least hand that out...”*

Rosenfeld and Richman (2003) identified perceived support as potential mediator of academic risk among youth in care. Two of the AG alumni described an occurrence that allowed them to experience positive support through recognition for achievements. They received recognition through the Nova Scotia Council for the Family’s annual Youth Achievement Award celebration where youth in care are recognized for their positive achievements. *“...I got that [Youth Achievement Award] once. That was a good experience. There was...a big awards ceremony and all the different people from Nova Scotia, they all meet...and other children in care...so that was a nice experience.”* This individual had an opportunity, through an awards ceremony for youth in care, to see other youth in care who are striving to meet their goals. This was a rare experience as this participant resided in a rural community where there were no other youth in similar circumstances. This participant recognized other youth in care at the event who attended



the same university and took comfort in that, stating, “...*at the very least it is something that we have in common...*”

*5.6.3 Over-burdened child welfare system.*

There seemed to be a disparity in the level of support provided to each young person for their educational needs. Ultimately, social workers are tasked with the responsibility of helping to raise a large number of children each year, many of whom have specialized needs. Therefore, it is not surprising that youth would report having felt neglected. Zetlin et al. (2003) explored these concerns in their review of how educational needs of youth in care are not integrated into child welfare service delivery. *Natalie* described her perceptions of the child welfare system that was so much a part of her development as a youth.

*“...The system, God love it...it’s there to help us but it’s so overworked and under-serviced. It’s kind of like dogs chasing its tails around. How can a social worker be there for a kid when they’ve got...forty cases?...It’s not feasible. It’s not realistic. When you are calling that social worker to say I got an A on my test and they don’t return your call for five days you kind of lose the...excitement of it all is gone...”*

*Scott* explained that he had a good relationship with his children in care workers. He was able to talk about how he negotiated the meaning of these relationships in his life.

*“...they are actually playing a big role as a guardian kind of thing so its great to have a good relationship and I always loved talking to them. I loved talking about my childhood and all that kind of stuff...I guess that’s why I took advantage of all the things that were presented to me like that.”*

The role of the social worker involved in this capacity in the life of children and youth was reported as extremely important to *Scott*. *Alicia* explained the following about her perception of the role of social workers.

*“...Unfortunately social workers have become paper pushers and administrators and so they are not really able [to help], and the ones that do [and] genuinely want to, really struggle to even be able to do that and find the time...really that is not the upper level priority...”*

As previously discussed, social workers were reported to have had no positive influence on the educational success in the study completed by Jackson and Martin (1998) of former youth in care who had completed post-secondary education. Despite the strain on the child welfare system described by AG recipients, all of them cited the role of social workers in their lives who, to varying degrees, helped them achieve educational goals. Some social workers had been very involved to the point where they participated in the step by step process of helping the young adults on their educational path. Others participated by simply referring the young adults to the AG bursary.

#### *5.6.4 Accumulation of financial debt.*

The fear of being over burdened by student loan debt was a concern reported by several participants.

*“I was told that I shouldn’t do my degree. Oh you will just be another person with a BA in psychology...and so that and the financial constraints of going to university was really why I stopped. And just not feeling like I was making the right choices and at that point you start thinking about career prospects and am I*

*going to be able to find a job after I graduate from university and what about all that student loan debt that I am accumulating.”*

With guidance and support in part provided by the staff and volunteers of the Nova Scotia Council for the Family, this young adult was eventually able to complete her education program and discern a career path. She has since completed a second university program and is working in her field of study.

At the time of this research, only one participant reported having received funding for tuition from a CWA. Vinnerljung et al. (2005) highlighted the importance of community support for youth with care experience including funding for post-secondary education. Most participants had accumulated student loans to be able to attend post-secondary education programs. *Danielle* described her feelings about student loan debt.

*“I am grateful that I have my degree but I don’t feel anymore...financially stable then what I was before because now I have this huge debt to pay off with only a bachelor of arts that doesn’t get you in the door. So I feel like I have almost set myself backwards a bit while trying to step forward. So it’s like the lesser of two evils.”*

#### *5.6.5 Lack of a financial safety net.*

Other than the original sponsor for the AG bursary who was in her thirties, all participants involved in this research were in their twenties at the time of this research. All participants reported that they currently lived on their own in rental situations, with one exception where one participant reported living at home with their natural parent during the summer months. At the time of this research all but one participant held a full or part-time job. Of the seven young adults who had completed their educational

programs, all reported having worked in their field of study. Each had accumulated student loan debt to pursue their educational goals and each was at a different stage of paying back those debts.

Collins (2001) explained that former youth in care are generally not afforded the support of a family and extended family network. For many young people the experience of pursuing their post-secondary education was in a sense a personal risk due to the limited resources that they had available to them. In the following excerpt, *Natalie* described her feelings about the lack of financial resources available to youth with care experience who are working to achieve their educational goals.

*“...There’s nothing to fall back on...and we all know that income assistance...does not support people going to university. So then there...is no incentive to reward people who are trying to get an education. It seems like education isn’t valued but it is of value to me.”*

*Danielle* described how she navigated the time in her life when she did not have a financial safety net available to her while pursuing her educational goals.

*“...I went to the food bank a lot. I had to get a roommate and unfortunately I ended up moving in with my boyfriend which probably if I wasn’t in care and more financially stable I wouldn’t have made that decision...I found it hard when your student loan doesn’t come in on time and you don’t have your text books and you have exams you haven’t had time to read the text book.”*

#### *5.6.6 Housing.*

Many of the adults involved in this research were discharged from either their foster care placement or residential care setting. Some transitioned directly into

independent living situations while being supported by their CWA. Ultimately, children and youth who graduate from the foster care system are not permitted to return to their foster care or residential care setting. This was also identified as an issue among the youth in care who participated in the National Youth in Care (2001) focus groups. *Scott* explained that a challenge for him was not having anywhere to live during the summer months. “...[I] can’t return home you know to save money.” Many of his friends returned to their parents’ homes between the months of May to August and worked summer jobs. These friends were able to pocket their savings to contribute towards their educations. “Thinking back now just the impact that would have had to be able to have things paid for would make a very big difference.”

*5.6.7 Lack of key information at critical transition points.*

*Scott* had an exceptional experience while in care that involved support at a critical juncture in his development. He had this to say about his career/educational discernment process.

*“...The workers they really stepped in and definitely offered me a lot of guidance where my family, in particular, don’t have the slightest clue about anything academic or anything related to getting out in university and doing simple things like that. And they [social workers] did everything they could to make sure that I applied to different schools...”*

Unfortunately there was disparity in the level of preparation reported by youth involved in this study in preparation for early adulthood, and in particular preparation for their educational goals. Newman and Blackburn (2002) described this transitional time as a time of vulnerability but also as chance to capitalize on positive changes. *Alicia* found

the process of seeing a school counselor to discuss personal goals awkward and unhelpful.

*“I remember in grade 11 we had to meet with [the guidance counselor] to make sure that we had the right courses picked for grade 12 for what we wanted to do. But really other than saying to them I want to go to university, ‘oh great you are taking all the right courses – you are fine’, other than that – that was it. There was no talk about what universities are you going to, what program are you looking into.”*

David struggled to find a path that would lead him to his educational goals. He spent several years after high school applying to programs that would help him get into university but for which he was not eligible. David explained that while he was in foster care he felt decisions were largely left up to him. He described the following about life decisions

*“Pretty much, most of my decisions I make on my own. My guidance counselor didn’t really [help me]. One of the main reasons why I am going to college late is, if somebody would have sat me down and said, these are all of the college options, I never learned about any trades until a year or two ago. It was always about university.”*

David happened to find out about college programs in his early adulthood by chance from an acquaintance who told him about a course he had taken at community college.

*“...And then I went to the community college and I look and there are a bunch of things you can do and I’m like how come they don’t promote this in high school. Not everybody is cut out for university nowadays. University is very expensive.”*

It seemed that many young people had chance encounters that propelled them toward their goals rather than planned processes that supported their desire for post-secondary education. Gibson (2003) reported that specialized educational support offered to migrant youth such as academic guidance, after-school tutoring, options to make up courses or credits, access to technology, advocacy and mentoring, college transitional support, and connections to other school support all fostered higher educational outcomes.

Finally, *Alicia* described what it was like for her to prepare for university with little guidance and support. *Alicia* explained,

*“It took me a long time sitting and looking at the university calendar to understand what it...meant, even the language that it was written in. Literally I remember the first summer I would pick it up and read it almost like a book just to try to decipher and figure out and look at the different courses.”*

I thought at this juncture of our interview how powerful it would be for youth in care to be afforded preparatory support to help them navigate their future educational and career paths.

#### *5.6.8 Institutionalized parenting.*

In a sense, the young adults involved in this research received a parenting service. This experience of corporate care was reported by many of the young adults as a barrier to their educational goals due to the adverse experiences associated with institutional care. The lack of flexibility and depersonalization of care experiences hindered natural development processes. Ungar (2004) described the importance of flexibility for individuals who have faced adversity in their navigation of resources identified by them as essential for resilience. The following description provided by participants suggests

that formalized care processes lack flexibility. One woman described an encounter that depicts the rigidity that characterized the lives of the young adults.

*“I first moved into the group home when I was 12 years old and I am meeting a whole slew of strangers and all of a sudden they are digging through my suitcase and counting the number of t-shirts I have and how many pairs of panties...literally counting my panties. It was just absolutely horrifying...it is such a degrading process to go through.”*

Ultimately this woman felt that the ever present lack of trust of her in residential care eroded the relationships that she had with the caregivers in her life. *“You are never trusted...I was the queen of the group home. All of the staff loved me. All of the girls loved me...but fundamentally there was a lack of trust there...”*

This lack of access to normal developmental expectations also characterized *David’s* foster care experience. *David* explained that he felt he couldn’t continue living in his foster home as he did not have the flexibility he needed as a young adult. He ended up moving in with his friend *Shane’s* parents. He and *Shane* had been friends for a long time and *Shane’s* parents knew his situation well. *David* described the conflict which led to him leaving his foster home.

*“...I was seventeen years old and my curfew was ten thirty and I mean when I was younger I didn’t mind, but somebody seventeen going to graduate...even my social worker tried to talk to them about it. They weren’t willing to negotiate anything. I wasn’t asking for much.”*



Several AG alumni described feeling emotionally isolated while residing in care, and that this experience was also accompanied by an unwanted vigilance because of care status. This participant explained the dichotomy in the following way:

*“...there is this light that is always on you whether you are in school...and your teachers are paying just that much more attention to you, whether it’s good or it’s bad. You are in the group home and they are paying that much more attention...you are on the bus and you are with all the kids you live with in the group home and the bus driver knows and all the people who get on that bus know...you are a kid that lives in the group home.”*

Finally, several adults explained that institutionalized care was difficult because they were afforded little access to natural consequences. Further to this, there were few opportunities to observe everyday family interactions in a group home setting.

*“...There were not natural consequences. It doesn’t exist. Everything is preset. Never having a conversation about that behaviour and how does that work for you? Why are you behaving that way? Is that the best choice and what can you do so that it doesn’t happen in the future?”*

AG alumni were able to identify this rigidity because of some of the opportunities that they had to be in a family setting.

*“...I had lived in family settings and I had friends who lived in family settings and you know very well that what is happening at your house isn’t the same. Like when snacks are locked up in the closet, you go to your friend’s house and...you don’t have to unlock that closet.”*

Flexibility while in care to increase capacity building opportunities was felt to be limited. *“Everything is so institutionalized...it’s just so different...your study times, all those things...it’s such a mechanical way of being.”* Another participant reported experiencing a progression of responsibility that for her did not seem to be grounded in natural development. *“Like when you first move to a group home you are allowed one hour walk outside. Now after three days you are allowed two hours of a walk. Who does that?”* One AG recipient wanted more control over her living environment. Although she had finally achieved a stable foster care placement, Amanda strongly believed that she needed to move in with a family who had been part of her care system during her earlier development. She experienced resistance to her self-identified plan of care from her social workers and CWA. *“I wanted to go live with people that I knew. So what’s wrong with that? I always felt like I was fighting against the system.”* Ultimately, with the support of her foster father who advocated on her behalf, she was able to move in with the family who she believed would best be able to support her.

Finally, *Annabelle* made an observation of how living in an institutionalized setting impacted upon the development of youth in care.

*“And young people who grow up with that...they start to manipulate it...because it’s an institution, they start to manipulate it and they start learning these institutional ropes. I know I did this...you have to make those choices because there is no flexibility on the other side.”*

#### *5.6.9 Low expectations for positive outcomes.*

One participant shared with me that she is most disappointed with the low expectations that are placed on youth with care experience by their caregivers, educators

and social workers. Yu, Day and Williams (2002) described the importance of raising expectations for positive outcomes among youth in out of home care. This was reiterated by four other participants. Many AG alumni reported that social workers, caregivers, friends and community members express surprise at the positive outcomes they have been able to achieve to date. *Alicia* stated the following about expectations.

*“...expectations are really important. Growing up [in care] people just don’t expect you to accomplish anything. Like really they don’t expect you to do anything let alone graduate and go on to university. I think it is important to have those expectations of young people and to encourage them that absolutely it is possible.”*

#### *5.6.10 Ongoing family issues.*

All of the young adults involved in this research had maintained some type of relationship with their family of origin. Collins (2001) described challenges among families of youth who have grown up in corporate care. Despite having grown up in non-parental care, most of the AG participants were connected in some way to their families of origin. These relationships were with parents, siblings and extended family. Many of these families of origin continue to struggle with the issues that resulted in child welfare involvement in the family system in the first place. These factors continue to be a part of the fabric of the lives of each participant in this project. *Scott* explained the following about his family and about how he negotiated these feelings and experiences in early adulthood.

*“...Now the situation with the family is worse then it ever was...I’ve seen the cycle in my family with drugs and abuse...It’s sad...In the past, my parents were*

*trying but... it's my mother in particular. She will be dead soon...drinking herself to death."*

When *Scott* shared this with me, I thought about how important it is for youth in care to receive support in their personal plan for navigating family relationships.

#### *5.6.11 Mental health, grief and loss.*

In terms of overall mental health, two participants reported having been diagnosed with a mental health condition by a mental health professional. One participant reported never having been diagnosed with a mental health condition but reported having experienced symptoms of depression during early adulthood. Two study participants reported having been admitted to health care settings for mental health assessments, one of whom also reported having been involved in the criminal justice system as a young offender largely due to actions resulting from an emotional behavioral disorder. The National Youth in Care Network (2001) participatory study identified the experience of leaving family care and adjusting to living within the child welfare system as important considerations that impact all areas of development for youth in care.

As described earlier, AG recipients have endured adversity. Some of the adversity has been the result of child maltreatment and family disharmony. Adversity has also come in the form of loss of key relationships with parents, substitute care givers, teachers, peers, family pets, and extended family. It was reported by several participants, that undergoing this kind of emotional trauma resulted in an early adulthood that consisted of periods of time dedicated to dealing with the resulting feelings. This issue was also identified in the pilot study to be a barrier for youth in care. Grief and loss were

reported by most participants to have had an impact on educational outcomes. Amanda described this processes:

*“...I was still grieving. I was still processing stuff...I had to grieve ten foster homes, my brother’s death, my biological parent’s stuff, you know all this stuff. It wasn’t until I was 24 that I realized that I was grieving...I think the biggest challenge for me was the grieving process throughout it all because there was times that I had to stop school because I felt...depressed or just things kept coming up...for me that I had to, I couldn’t go on another day I just had to stop and deal with things. So I mean it took a little bit longer to finish my university degree.”*

#### *5.6.12 Differences of ability.*

Youth with out of home care experiences often live with physical and emotional problems which are a direct result of the adverse experiences they have had during their early development. Sobsey (2002) has explained that it is difficult to fully understand how these experiences affect learning. Researchers, including Morison and Ellwood (2000), are beginning to explore the implications of maltreatment and the mediating assets that help promote resilience. This type of information will undoubtedly help inform child welfare service provision and educators on how best to support children and youth exposed to maltreatment through the course of their development. One participant provided an example of she has managed to achieve her educational goals while coping with a physical impairment to achieve her educational goals. This woman has a lasting physical impairment as a result of the maltreatment that she experiences as an infant prior to entering the foster care system. *“...the challenges that I had to over come was my*

*visual impairment. It took me a little longer to do my papers and to study...*” This physical impairment is a tangible example of the barriers faced by some young people with care experiences who are pursuing their educational goals.

#### *5.6.13 Emotional poverty.*

Rosenfeld and Richman (2003) found that youth in care perceive little access to support and they are the most vulnerable of any group for poor educational outcomes. It is difficult for me to imagine the sense of loneliness that young people living within our child welfare systems experience. Having been displaced from their family of origin, participants were faced with situations where adults involved in their lives were not able to demonstrate a commitment to their emotional well-being. Seven of the nine participants in this study revealed that they experienced a level of emotional poverty which posed a threat to their development.

Emotional poverty was identified as a barrier to meaningful and positive educational experiences. As they attempted to navigate through childhood and adolescence to achieve educational goals, a lack of sustained emotional support threatened their healthy development. One participant was able to describe her feelings which captured her experience of emotional poverty.

*“...Am I going to be here next week? Am I going to be here tomorrow? Do I need to make friends? Is it worth it? Does any of this matter because I’m just another person in a bedroom here...that sense that you don’t belong anywhere and so if you don’t have it in yourself to say I want to do good in school... I don’t care is a whole lot easier.”*

Another woman described how she made sense of emotional poverty in her life.

*“...There is nothing that will make you feel more lonely in the world then having to go through those experiences [alone] that t.v. tells you, I say t.v. because that was always huge for me...I wanted to be like on t.v. or normal like my friends. And having to go through all those things by yourself is fucking shitty.”*

A lack of emotional support for youth involved in the child welfare system was most evident when participants talked about their participation in social events as well as extra-curricular activities. Several reported that they chose not to engage in these activities because their feelings of loneliness were too painful. One woman felt that the birth children of the foster parents she lived with enjoyed the attention and emotional support that she would have liked to have experienced.

*“My foster parents never came to a soccer game. They never came to a cheerleading competition. I mean I watched them go to seven a.m. hockey practices three days a week to watch a morning hockey practice. You know you just don't have the support. Who cares if you scored a goal if they are not there to see it? They just don't expect you to excel at anything so most of them do not put the time in. I mean there are a lot of great foster parents out there and without foster parents people like me would be in an orphanage.”*

For this AG Alumni financial support was available to cover the cost of sports but she did not have someone in her life committed to helping her be involved. *“...at least you can go and get some soccer fees but if you don't have anybody taking you to the games it's still a struggle.”*

*5.6.14 Attachment and interpersonal relationships.*

Werner and Smith (2001) described the critical role supportive relationships play in the lives of children and youth who face adversity. The young adults who participated in this study have experienced impaired relationships with adults in their lives during their development. These impaired relationships have had an impact on their development and their ability to achieve healthy relationships with peers, romantic partners, and other critical people in their lives. One participant described how this affected her day to day life.

*“I wasn’t ready for [caring relationship with others] while I was in care. I think of that time as being a seed frozen in the dead of winter and not being able to. There was just so much in here and I didn’t know what to do with any of it. And it was hard for me to show someone that I cared about them or that I loved them. Expressing anything like that when you are just trying to survive every day...”*

Another described how despite her adverse experiences she was able to make some strides toward connecting with the adults in her life.

*“...due to other issues of growing up and trust issues of authority figures I kind of distanced myself [from caretakers]...I did build relationships with my teachers and my social workers...they were really influential...they made it very clear that education is very key to get to where I want to be.”*

Further to this, peers became an important part of her network of support.

*“I have a lot of trust issues being moved around all the time; living with strangers...I didn’t want to build that strong connection with them only for them to let me down. So it was easier to relate to someone your own age, so my friends,*



*who were also youth in care could understand where I was coming from. So I built more of a connection with them just trying to you know we're all in the same boat. Sink or swim type deal."*

#### *5.6.15 Self Advocacy is not promoted.*

Youth involved in the National Youth in Care 2001 participatory study identified motivation, determination, goals setting and self-reliance as personal determinants for positive outcomes for youth in care. Several participants in this thesis described how the ability to advocate for themselves was a critical factor in helping them to overcome the adversity they have faced in their lives. These same participants reported that their care experience negated the importance of this skill. They experienced a lack of opportunity to challenge the systems and structures at play in their lives. *"They [youth in care] are not taught that they have the right to challenge things."* Self advocacy was not promoted by the adults in their lives.

*"...if you are not able to challenge things...you've been shut down so many times what is the likeliness that you are going to challenge your landlord when he screws you over with your damage deposit...challenge a prof...who has marked your paper incorrectly?"*

Not having the opportunity to learn appropriate assertiveness skills was identified as a barrier by youth who participated in this study.

#### *5.7 AG Alumni Recommendations for Resilience Programming*

The collective knowledge of the young adults about resilience and the systems they encountered was evident in my conversations with them. Their personal experiences, and in many cases their educational and professional experiences have fostered a high

degree of insight. From a resiliency perspective, participants were able to move beyond the barriers they faced to achieve their goals. This process varied from participant to participant, but ultimately they encountered assets along the way that bolstered their ability to achieve their educational goals. Based on their respective experiences, I asked each participant at the end of our time together to describe an ideal program that would help other resilient youth in care who aspire to post-secondary education. Each young adult involved in the research had a different experience in their preparations for post-secondary education. From their responses a framework for intervention emerged. There were twelve recommendations made by participants. These suggestions further help us to understand what assets could assist youth in care to overcome barriers, and achieve educational goals.

### *5.7.1 Recommendation One – Mentorship and peer support.*

There are many programs available in our communities where peers and mentors are part of the support structure. I have not encountered a provincial program for youth with care experience that fully utilizes this component. The young adults involved in this research explained that they wished for a program that would allow them to provide peer and mentorship support to other youth with similar experiences.

*“I believe it is really important to have former youth in care who have already made those transitions and know the struggles first hand...have been able to strategize different ideas...use different resources...its key to have that mentorship component.”*

*5.8.2 Recommendation Two – Access to support outside of business hours.*

It was also pointed out by several participants that access to support after business hours is important and should be incorporated into any programming. The following comment illustrated that this was critical in providing the support required by young people who are transitioning to post-secondary programs, “...so that you have an individual that you can call from 5 – 9 not 9 – 5...” This was also noted in the pilot study as a key resource many youth in care do not have access to.

*5.7.3 Recommendation Three – Career advice.*

Alicia explained the following, “I hadn’t been exposed to a whole lot and I would have done a different undergraduate degree than I did because I would have known what was out there.” Several participants indicated that they wished they had had access to career advice when planning for their post-secondary education.

*“Career advice would be really good...and somebody to really walk you through that process of all the different types of post-secondary education and what is going to work in terms of what it is that you are aspiring to...”*

It is critically important that every young person have access to career development support as they prepare for early adulthood.

*5.7.4 Recommendation Four – Starting early.*

End of the line preparation for youth during their last months in care was not seen as an effective process for helping young people to move on to the next phase of their lives. “...it’s not something that you start when a young person is 16, or six months before they leave care...the day they come into care it’s the skills you are developing...”

Some of the participants explained that support for youth in care to achieve their

educational goals must start early. *Danielle* identified a target group for potential intervention.

*“If you are going to start preparing them for post-secondary education you need to be going after them in the last year of junior high before their first year of high school so that they know what classes to take...think about maybe getting a part time job to help pay for some of the cost...I don’t think it is made clear enough to youth how expensive education is so being proactive and creating that opportunity financially if that’s what they plan on doing.”*

It was suggested that young people in care should be asked as early as elementary school and junior high “... *What do you see yourself doing?*”

#### *5.7.5 Recommendation Five – Preparedness and stepping outside crisis.*

As difficult as it can be to move away from the crisis oriented issues that often permeate the lives of youth in care, the young adults involved in this study said repeatedly that education needs to be a priority when talking with and planning for youth in out of home care. Social workers, teachers, foster parents, group home staff and alternate caregivers need to be regularly talking with young people about their future aspirations and working on preparation for that goal. “...*Just starting those conversations with them.*” Consistency from adults about the interest in their future was recommended. “*Talking to them more about it.*” It was also recommended that youth in care be invited to go to university and college campus as part of their plan of care, “...*so that kids could go on a university campus and know what that was like and ...just see what that looks like...being exposed to those things is important.*” Above all other issues, preparedness for early adulthood was reported as the most critical component of a plan of care. The

opportunity to develop skills and abilities and to achieve a good level of educational attainment was indicated to be the highest priorities for AG recipients.

*5.7.6 Recommendation Six – Key information at critical transition points.*

*Danielle* explained that she did not have the necessary information and did not always know where to find it at key points in her development. She recommended,

*“...Providing [youth in care] with information: this is where you go to find...student loan information; this is where you go to find out banking information; this is where you go to find out about furniture banks and food banks...”*

Care providers, social workers, educators, group home employees are busy and often tasked with many competing demands. Planning with young people who are in the care systems seems to be lacking for too many of these youth who need to have every resource available to them as they work to overcome adversity in their lives.

*5.7.7 Recommendation Seven – Life skills.*

It was also suggested that opportunities to develop life skills must be part of preparatory planning with young people who eventually leave the child welfare system and no longer have access to the support and services of that system.

*“... And making sure that when they do age out of care that they do have the proper life skills so that they’re able to juggle all the stresses that come from post secondary education...if they can’t utilize the tools then we are really setting them up for failure.”*

*Alicia* commented that she did not feel her care experience really provided her with the opportunity to develop those skills.

*“...I think the system does a really poor job of integrating those things into the system. The different group homes and foster homes, living in those places and not learning those skills...learning how to live on a budget, learning how to get groceries...cooking, all sorts of things...”*

*5.7.8 Recommendation Eight – Foster community connection.*

In conversations with participants we discussed the difference between independence and inter-dependence. It was suggested by participants that youth in care be prepared for inter-dependence versus independence. One participant explained, *“You are never independent.”* For many youth involved in this research, transitioning to post-secondary education also involved the process of care termination where they were no longer eligible for services from their respective CWAs. *Danielle* recommended community supports a means of preparing for a post care life situation. *“...seek these support systems through other means besides just child welfare. It’s important for them [youth in care] to have that connection before they leave.”*

AG alumni challenged the systemic language used to describe this process. The term independence was thought to create unrealistic expectations for young people leaving the care system.

*“...a key part of helping a young person transition from care is about building a support network. It’s not about being independent. And I think it sends the wrong message that you have to know everything and that you have to do it all on your own.”*

*5.7.9 Recommendation Nine – De-institutionalize programming.*

AG alumni talked about the importance of creating developmental opportunities for youth in care that would be similar to youth who were living in the community with their families. *Annabelle* captured this sentiment in the following excerpt.

*“I also struggle with the idea that we do this with young people in care...we put everything in boxes and we say we need to give them this box as opposed to just figuring out...how...you create a life for a young person in care that is much like a young person that would be at home...creating something as normal as possible...young people who live with families they don’t have a parent who suddenly says it’s time to do that transition to independence stuff. Let’s put you in a program.”*

*5.7.10 Recommendation Ten – Provide access to guided support.*

Some participants felt that having someone to provide guided support would be helpful as many were left on their own to make sense of the changing circumstances in their lives on their journey to post-secondary education. *“I think it is also important to have somebody to take you to school...I had nobody to take me to university and so my boyfriend’s mother drove me...”* It was recommended that this kind of support be provided by someone with whom young people have forged a relationship. *“...having a more natural person in that young person’s life that isn’t 9 to 5 and they naturally want to have that experience...go through those thing with you and it doesn’t feel so boxed. You have a conversation...”* One participant recommended specific support during transitional points such as getting settled at university.

*“I remember arriving [at university] and not having anyone...unfortunately my roommate and I clashed...so we really didn’t do that stuff together...even...the administration building, okay here is the cafeteria, okay here is where my classes are, and here’s getting books and the little piddley things...and I mean not all young people would want that but for some that do it would be good to have that.”*

*5.7.11 Recommendation Eleven – Match youth with compatible support.*

For many young adults who transitioned into post-secondary education, their social worker was the primary care giving relationship in their lives. While some of the adults felt that they had a positive connection with their social worker, others did not feel that they received adequate support. One young person made the following recommendation.

*“...personality matching with your social worker would be really great...I loved my social worker...do we have anything in common, absolutely not, was he the right person for me as a social worker, absolutely not...he just wasn’t able to do what I needed to have done for a social worker. He would vent to me...like this happened at work...it really became an unhealthy relationship and I was never really able to ask for what I needed. And he also was not paternal / maternal...I felt very much like that institution type relationship which is unfortunate...”*

Scott talked about the level of relationship he was able to have with his children in care workers. *“It was never like he was my social worker or case worker or what ever you call it. He was just my buddy that showed up...a good friend. I always considered him a good friend not a worker.”*



*5.7.12 Recommendation Twelve – Offer financial support.*

David reported that for him, financial support has been critical in helping youth in care who aspire to post-secondary education programming.

*“...a program that is just there, especially financially, to help someone [who] really, really wants to do things, not just say that they want to do it. Financially is a big deal for some people. There’s a lot of financial things that deter people from doing things...I was looking at...\$8,000.00 in two years. Where am I going to come up with that you know? I was working a job that was paying me nine bucks an hour and I had a child to support...for some people just having the support system would be great but I think from what I went through financially would be great. It would be nice to say if you need this, not just to go splurge but you know you need something ...I failed computers. I had to take computers on line and that cost me an extra \$180.00. I had to save up for that...”*

In this chapter, participants involved in this research were described through their individual profiles. Following the profile descriptions, the themes that emerged from the interviews were described and outlined. The themes were organized and presented under each of the three overarching research questions that guided this thesis. Finally, the participants provided recommendations for programming based on their personal experiences of adversity and resilience.

CHAPTER 6

*Discussion*

In the previous sections, the literature on resilience theory and the educational experiences of children and youth in care has been explored. Nine amazing young adults have shared their thoughts on resilience and the collection of life experiences that led them to achieve their educational goals. *Amanda, Amy, Natalie, Scott, Skye, Annabelle & Alicia, David and Danielle* have talked about adversity and assets which have characterized their experience of resilience. Following is a summary of the key lessons that I, as a social worker, have learned.

*6.1 A Tug of War Analogy*

Jackson and Martin (1998) stated that “some children who face stressful, high risk situations fare well in life, but their chances of doing so depend on the extent to which the risk factors in their lives are balanced by protective factors, both individual and environmental” (p. 571). After careful reflection on the information collected in this study, an analogy became very clear to me, an image of the study participants at different stages in their lives, pulling on one end of a rope, trying to win the balance of resilience with individual skills and environmental assets. On the other side of the rope is a symbol of adversity tugging ruthlessly, attempting to destabilize the AG recipients. Behind each youth is a growing collection of supporters and collection of experiences attempting to keep the youth from toppling forward. At different times through the course of each person’s development, the competition on the either end of the rope waxes and wanes. Sometimes there are more assets and other times there are more risks. At the end of the

journey toward early adulthood, each AG alumni involved in this study is standing with the rope in their hands triumphantly and the risks have dissipated.

Masten (2005) stated that some children who have faced very high levels of risk are able to achieve high levels of resilience. Given the life circumstances faced by the participants involved in this research, they certainly fall in the high risk, high resilience category. However, in the process of better understanding resilience we must consider whether or not resilience is static. I believe that *Skye* shares my perception of how resilience plays out in our lives. The analogy I described earlier is of the participants with a rope in the air having triumphed over adversity after a long tug of war. This analogy involves a belief that the tug of war ends at a perceived developmental stage, or when a given measure of achieved resilience is applied. Ultimately, I have reservations about applying the resilience label as a final outcome. *Skye* seems to understand what I believe to be true about development, that throughout its course we all have the potential to face adversity at each developmental stage. Resilience and well-being are not static; rather, maintaining these is an ongoing process. As each AG recipient involved in this study moves into other stages of life which require navigation such as parenting or interpersonal relationships, there will continue to be a tug of war, and available assets will be required to help maintain well-being.

### *6.2 Positive Educational Outcomes are Attainable*

When I first began this research, I wondered about common characteristic shared by AG recipients. Ultimately I was not able to predict these characteristics as I had very little practical experience working with young people involved with a CWA who had achieved high educational attainment. I held a pre-conceived notion that perhaps each

AG recipient would be a high academic achiever, would have had very few placement changes disrupting their school calendar, and that each would have had a strong connection to one adult caregiver who consistently had been available to them during their development. I was wrong on all accounts.

Ungar (2004) explained that resilience is possible in every situation and invited us to consider varying interpretations of resilient outcomes. I have learned that youth in care, who have a wide range of adverse experiences, can achieve positive educational outcomes if they have access to protective processes to achieve these goals. The practical application of this information is that we must work with each young person in care to prepare them for positive outcomes that are within their reach. We must have higher expectations, even for those who are perceived to be on a path to poor outcomes. If we chose to tailor programs based on strengths as opposed to deficits we will undoubtedly foster greater resilience among youth in care.

Ungar (2004) challenged what should be considered indicators of resilience. We are challenged to understand the behaviour of children and youth in care within the context of their lives. We must begin to deconstruct how each individual may be adapting to their circumstances in the best way possible given the resources available to them. What one person may perceive as undesirable behaviour on the part of a young person in care, viewed from a resilience framework may be adaptive behaviour that is sustaining a level of health and well-being that is otherwise unattainable. AG recipients in this study explained that leadership skills, self advocacy, determination and plain stubbornness were critical individual traits that helped them fight for the necessary resources in their lives.

They have invited us to consider these as desirable traits among youth in care, and indicators of resilience that should be fostered among all youth with care experience

Ungar (2004) also invited us to think critically when considering external measures of competence. For example, educational milestones such as graduating from high school could be used as an external measure of resilience. However we cannot be sure that for some youth in care, dropping out of high school where they are not experiencing success may lead to achieving other goals. Perhaps parenting, employment skills, or other endeavors will lead to an individual's experience of moving through adversity. What is lived as success and well-being for one person may not be experienced as success and well-being for another. The young adults involved in this research forged positive experiences within the school setting. Unfortunately, many youth in care do not experience success at school. In these circumstances school experiences may create adversity that further compounds the negative experiences in their lives.

### *6.3 Resilience Theory & Social Justice*

Osher et al. (1999) explained that resilience theory is concerned with social injustices found in our society. The incidence of child maltreatment in Canada, reported by Trocmé et al. (2005), suggests that the well-being of children and youth in our communities is not a priority. Child maltreatment is not found in any diagnostic manual because it is perpetrated by an external individual and is often a result of structural inequalities found within our economic and social institutions. Child maltreatment is also 100% avoidable. Dearden (2004) explained that resilience theory is applicable to youth who experience child maltreatment. A resilient framework can be used to build on the best aspects in the lives of children and youth. Given the information that the participants

shared, the importance of helping youth in care to chart a different path, a path toward well-being, can serve to have an inter-generational impact on resilience in our communities. The higher the numbers of children and youth in care who leave care highly educated and well prepared for early adulthood, the less likely they will experience a cycle of poor outcomes.

### *6.4 Child Welfare Involvement Creates Risk for Youth*

In my experience as a social work practitioner involved with many CWAs across Canada, it was not a surprise for me to hear AG recipients describe risk factors they experienced as a direct result of the child welfare systems and policies designed to protect them from child maltreatment. This is certainly an ethical dilemma faced by all child welfare service providers and administrators. It is a difficult topic and in my experience, a topic that has not been fully explored in research or in practice.

While the participants in this study were able to talk about the protections afforded to them as children and youth in corporate care, one AG recipient candidly explained that she is not convinced that growing up within the child welfare system created a higher degree of safety than would have been afforded to her by her natural family had she continued to reside with them in the community. In her experience the level of adversity and the risk to her development as a youth in corporate care was not balanced by readily available assets within the systems she encountered. Conversely, another participant explained that the services and support provided by a CWA certainly changed the course of his development for the better. The disparity among services available from one participant to another is notable. Resilience theory can provide a framework to begin to carefully examine what collection of protections and risk factors

children and youth in non-parental care face during the course of their development while being served by a child welfare system. Engle et al. (1996) explained that CWAs must evaluate how children in care are actually doing and incorporate known resilience promoting factors into planning.

Masten (2005) explained that high levels of risk that are sustained over time, coupled with few supports and resources, create circumstances which reduce each child's potential to overcome those difficulties. It is therefore critical to ensure that children and youth have supports that counteract the risks in their lives. For example, experiences of child maltreatment that are followed by repeated placement changes while in care are systemic problems that greatly reduce a child's ability to achieve health and well-being in a timely way. Young adults involved in this research described the grief and loss process and residual post traumatic symptoms that delayed their educational success. We must take every measure to reduce the overall level of adversity experienced by children in care.

### *6.5 Limits and Challenges to this Study*

The first challenge encountered in the research processes was reaching participants to inform them of the study. It appeared that the AG data base did not contain current postal information for all AG recipients. The same was true of the email addresses. This is not surprising as care alumni and post-secondary education students in general are at a transitional stage in their lives that result in regular moves.

A second challenge in conducting this research was the difficulty associated with setting up a group interview because of the busy schedules of the AG bursary recipients and their geographical locations. To accommodate individual schedules and geographical

locations, it was decided that the group interview questions would be used to conduct individual interviews with participants who could not attend the group interview.

Interviews were completed via telephone, email, as well as face to face to maximize participation. I believe this change to the methodology ultimately resulted in a deeper level of participation on the part of the alumni.

One notable limitation to this research is the application of the results to the population of young people in care. The experiences and information provided by participants in this research do not necessarily reflect the experiences of and ideas about resilience of all youth in care and therefore should be applied with careful consideration. In order to further understand the concept of resilience and how it plays out in the lives of youth with care experience, a more diverse representation of youth must be consulted. In particular, youth who do not appear to have achieved the normative positive outcomes that are accepted widely by mainstream society could be consulted about their thoughts on risk and resilience. In addition to this, the voice of young people in care who have not been able to achieve their educational goals should be consulted to provide further analysis on the educational experiences of youth in care. However, the information gained by this study can be used as a starting place to begin to weave a resilience framework into child welfare service delivery.

This study has facilitated a dialogue with young adults who have had an opportunity to reflect on their care experiences. These young adults have offered tremendous insight into the strengths and limitations of the child welfare and to some extent education systems and services designed to assist them in their development and the insights of these participants their input warrant attention.



### *6.6 Recommendations for Further Research*

This study was intended to provide an opportunity for young adults with care experience to talk about their personal journey toward resilience with a view to their educational needs. I had wondered what it was like for youth in care to experience some of the systemic problems that I described in my introduction and how they were to overcome those difficulties. This research was exploratory and was intended to create more awareness of how youth in care are experiencing the programs and services available to them as they grow up in corporate care. Building on this, there are a number of specific topics that warrant further attention.

The first recommended area for further research involves gaining a better understanding of how children and youth in care who are not experiencing educational successes navigate the services available to them. This information would help further our understanding of the needs of children and youth in care. Questions that might be asked include “What are the experiences of those who have been suspended or even expelled from their school?”, “What are the experiences of those who have dropped out of school?”, “What are the experiences of those who have failed out of their post-secondary education programs?”, “What information do they have to share with us about their respective journeys?” Cassidy and Bates (2005) provide an excellent starting point for this topic in their exploration of the ethics of care in the school setting which fosters hope for drop outs and push outs.

Secondly, further research into how foster parents, social workers, educators, group home staff, alternate caregivers and natural family define their role in preparing young people in care to be successful in school would be valuable. Through this research

we have heard from young adults with care experience about how they have navigated the systems they encountered as they journeyed toward educational goals. It would be useful to explore how those involved in the lives of youth in care see their respective role in the educational journey of children and youth in care. It would also be interesting to explore the dichotomy of the professional social worker's role in parenting children in the care of a child welfare system. For those youth who have a positive relationship with their children in care worker, the clinical language of client and social worker seemed to cause discomfort. "When a social worker is a primary guardian, how does this impact on the youth?" "How does the social worker make sense of social worker as parent or guardian?" In particular, both the pilot study and the principle study highlighted the concern of available support outside of business hours.

A third area for further research is an exploration into how youth in care create meaning in terms of their personal identity, their identity among peers, and their identity in relation to their natural family, their caregivers and with the community. Identity formation for youth in care is a critically understudied area. Youth in care undergo developmental processes that are different from children and youth who live with their natural families. Their experiences also differ from those who are raised by extended family and those whose custody is impacted by separation and divorce. One comment was made during the course of this research that could ground further studies. "*...I was very distraught about the fact that I was no longer my own individual self but that I belonged to this court who ever this court was.*" Questions that might be asked include "How do youth in care talk to their peers, educators and others about their life situations?", "How do they create meaning for the relationships that they maintain with

siblings, natural parents and others?”, “How do they make sense of their cultural heritage?” Further research in this area could contribute to gaining a better understanding of the youth in care navigate meaning making attached to identity in system care.

A fourth recommendation for future research focuses on an exploration into mentorship and peer support in the lives of youth with care experience, an examination of how youth with care experience can provide support to each other, and how adult alumni of foster care could provide support to younger youth. It would be valuable to explore this approach as a viable intervention model. Adults with care experience are experts on this experience. Those who have successfully navigated the process could be a tremendous source of guidance and support to younger youth. It has been my experience that this network of support exists informally in our communities. It would be worthwhile to further examine this support network to better understand the benefits and potentially how this network of support could be strengthened and expanded to include a greater number of young people. Participants in this study, and the pilot study also noted a lack of available support outside of business hours. Further exploration into the continuum of support available to this group would also be of value.

A fifth area for further inquiry is with respect to culture. Culture is a system identified by Ungar (2004) in which resilient processes can take place to bolster health and well-being. Two participants involved in this research indicated they belonged to cultures of minority. These same participants explained that at no time in the course of their care history did anyone foster an understanding of their cultural heritage. This is reflective of the study by Rosenbluth (1995) who found that among Aboriginal youth in care in Saskatchewan, young adults were not placed with race matched caregivers.

Further understanding of cultural protective processes available to youth in out of home care is warranted.

Finally, it would be very powerful to interview *Amanda, Amy, Natalie, Scott, Skye Annabelle & Alicia, David and Danielle* in ten years' time. It would be of great value to explore with them what the next decade of their life experience will reveal to them about their earlier experiences of adversity and their thoughts on resilience. Checking back with them in ten years would undoubtedly provide a greater understanding of resilience from a longitudinal standpoint.

In this chapter, I have presented a discussion of the results collected through the course of this thesis. This discussion was based on the literature reviewed for this work, the information shared by the young adults through the course of their interviews, and my own thoughts and experiences related to the latter. Also reviewed were the challenges faced through the course of this work and recommendations for future research.

## CHAPTER 7

### *Recommendations for Stakeholders & Conclusions*

Given the literature reviewed and findings of this study, several recommendations are outlined for stakeholders involved in the lives of children and youth in care. Each stakeholder identified here has a vested interest in the well-being of children and youth who become involved with CWAs in our communities, and make up the support network most readily available to youth in care. These recommendations are organized by stakeholders and are based on my review of the all of the material provided in this thesis. They are intended to compliment the recommendations made by the participants for programming. Further to this, these recommendations must be considered within the context of individual, peer, family, community and culture. As Ungar (2004) has described, how such things as education or health and well-being are defined at these levels is integral to what understanding what processes are most relevant and valuable to them.

#### *7.1 Child Welfare Agencies*

##### *7.1.1 Collect base line data.*

*Rationale* ‘How do we plan when we don’t know what we don’t know?’ The AG recipients involved in this research described how valuable education was to them. It is critically important to further examine educational patterns of youth involved with child welfare agencies. Questions that would be useful to ask include: “How many youth in care successfully complete grade 12?”, “How many are receiving special education services?”, “How many have a diagnosed learning disability?”, “How many have been suspended from school?”, “How many are accessing tutoring? How many move on the

post-secondary education?”, “How many complete post-secondary education?”, “How many drop out of school?”, “How many would report a positive connection to their school?” Answers to these questions would allow decision makers to determine where resources and services should be allocated. This information should also be collected over time to analyze the effectiveness of planned services intended to improve educational outcomes. As examples, Zetlin et al. (2003) and Flynn et al. (2004) developed measures to begin this process in a CWA. Economic participation for youth once they leave care is dependent on their education attainment

### *7.1.2 Provide training on educational advocacy.*

*Rationale* All children and youth spend a large portion of their developmental time in the school setting. Zetlin et al. (2003) described a need for training among service providers regarding education. Child welfare service providers, foster parents, alternate care givers and natural parents need to have available information on how to work collaboratively within the education system, particularly for the large percentage of children and youth involved within the child welfare system who have specialized learning needs.

### *7.1.3 Prioritize educational needs of youth in care.*

*Rationale* Each meeting, each decision, each discussion about children and youth with care experience should take into account the education needs of that individual child. *Danielle* explained how important these ongoing messages were to her. Placement changes, visit schedules, case management meetings, and time spent talking with the child should always have a focus on the educational planning for that young person given the role education can play in the life of a child.

*7.1.4 Provide preparatory support for post-secondary.*

*Rationale* Each youth deserves an opportunity to explore their career goals and have access to the life skills and personal support to successfully attain their educational goals. The available support for this population was reported to be limited for some and available for others. A service delivery model is needed to help ensure more young people are successful. This is discussed in detail in Chapter 5.

*7.1.5 Employ youth engagement approach.*

*Rationale* It is critical that an evaluative framework exist within child welfare service delivery that includes consultation with the very people it is intended to serve. Altshuler and Gleeson (1999) described the importance of this. Without a consistent and timely mechanism to confer with children, youth and their families about the services they receive, future decision making and resource allocation may not be effective or relevant to the recipients of child welfare services. Consultation should be conducted within a youth engagement model that is bidirectional, where young people benefit by participating in the process.

*7.1.6 Offer after care supports.*

*Rationale* At the current time in Nova Scotia there is no provincial service delivery mechanism designed to provide support to adolescents and young adults who have aged out of the foster care system. These young adults were previously assessed by our communities to be children and youth in need of protection under child welfare legislation. These same youth and young adults may age out of the child welfare system while they are still in need of support and guidance. This is a time when they are perusing educational goals, working on their personal development and processing earlier

emotional trauma, they are parenting or becoming parents for the first time and becoming part of the work force. They are learning about money management and developing relationships. These are all processes that require ongoing support.

It was evident from my consultations with the participants that some social workers stay connected informally with these young people. *Amy* described her ongoing contact with her former social worker who initially referred her to Amanda's Gift and provides an annual letter of support for the bursary. Although no longer an expectation of their employers, social workers continue to advocate on behalf of, and provide support to these young adults by identifying resources such as the AG bursary. We must ask ourselves if it is appropriate to place this after-care responsibility solely on social workers who are already working with many children and families who need much support. One possible step forward could be a survey of former youth in care, children in care workers, group home staff, foster parents and alternate care givers about what kinds of relationships are maintained with former youth in care and what services they believe would be most beneficial.

#### *7.1.7 Adopt a collaborative model.*

*Rationale* There are a number of best practice examples of collaborative models including wrap around that enhance collaboration on a number of levels. Several are described by Anderson–Butcher and Ashton (2004). Sheid (2003) described various conflicting mandates and fragmented service provision among services available for many youth in care. Wrap around is one example of a case management approach that allows all professionals, natural supports, children, youth and their families to have an active role in co–constructing a plan that best meets the needs of the service recipient and



maximizes the resources available to them in all settings. In my experience, children and youth involved with the child welfare system are typically over represented in the service delivery systems of mental health, social services, special education, and justice.

Negative outcomes contributing to systems over– representation was found by Tweddle (2005) in a review of outcomes literature on youth in care where this group was identified as more likely than their peers to be on income assistance, have mental health problems, be at higher risk for substance abuse, and to be incarcerated and to leave school early. This is a sector of our population who are consuming a large amount of resources and there is not always a productive way for these service delivery mechanisms to work collaboratively with children, youth and their families.

### *7.2. Educators*

#### *7.2.1 Recognize child maltreatment as an exceptionality.*

*Rationale* Steps should be taken to better understand the impact of child maltreatment on the learning processes of children and youth in our communities. Sobsey (2002) describes the need for a deeper understanding of the effects of child maltreatment which is critical for educators to provide for the learning needs of children and youth in our communities. Children spend a large part of their development in the school setting; school can mediate risk for children and youth exposed to child maltreatment as described by Graham (1993) if educators are made aware of the issues related to maltreatment.

#### *7.2.2 Adopt a collaborative approach.*

*Rationale* Wrap around and other collaborative models identified by Anderson-Butcher and Ashton, (2004) are models that can be used by inter–disciplinary teams

working to support children and youth in care. A collaborative approach, where the expertise and knowledge of each person and professional are valued, and where roles and responsibilities are clearly defined, is an approach that increases the likelihood for positive outcomes. Anderson-Butcher and Aston, (2004) describe a number of collaborative approaches that can be used in the educational setting.

### *7.2.3 Recognize the intrinsic value of relationships.*

*Rationale* Children and youth who have experienced abuse and neglect, and particularly those who have not attained a stable placement while in the care of a CWA, have had limited access to supportive relationships with adults (Collins, 2001). Werner and Smith (2001) found that supportive relationships were a key contributor to resilience among individuals who had faced adversity. The role an educator can play in the life of such a young person is critical. *Alicia* told us about the teacher in her life who taught her that she was valuable and validated the fact that it was unacceptable for *Alicia* to be cold in winter. Her teacher shared her personal resources when she purchased a coat for her on a cold November day. For some participants, teachers were the first caring adults they encountered in their lives.

## *7.3 Inter-disciplinary Implications*

### *7.3.1 Apply Resilience Theory*

*Rationale* Resilience theory has contributed to the emergence of models that could have an inter-disciplinary application for child welfare agencies and education systems alike. Given that Engle et al. (1996) described resilience as having the potential to create a ripple effect across generations, each discipline should be exploring resilience theory as an opportunity to foster health and wellness.

*7.3.2 Systems Collaboration for Education and Child Welfare*

Collaboration at both the micro and macro level between child welfare service providers and educators is critical to foster systemic changes that would enhance resilience among youth with care experience and should improve educational outcomes for this population. Zetlin et al., (2003) have indicated that a liaison stationed at both agencies would be a starting point to begin to examine policy and administrative implications. Further to this, teachers, social workers, care providers and other stakeholders should be provided the time and necessary resources to work collaboratively. Coordination of services at the inter-departmental level, community and agency level, as well as front line service delivery level requires collaborative mechanisms. Collaboration is defined as "a process through which parties who see different aspects of a problem [or issue] can constructively explore their differences and search for solutions that go beyond their own limited vision of what is possible" (Gray, 1989, p. 5). Multi-sector collaboration requires a commitment at all levels, as well as tools and resources to achieve true collaboration that leads to meaningful gains for children and youth. (Zetlin et. al, 2003).

*7.4 Social workers, foster parents, group home staff and alternative care givers.*

*7.4.1 Have high expectations for positive outcomes.*

*Rationale* If children and youth understand that the adults around them do not expect them to be successful, they are at great risk to internalize the devaluation of their skills and abilities. Have expectations of children and youth in your care, even if they appear to be on a pathway to negative outcomes and communicate those expectations regularly.

*7.4.2 Provide capacity building opportunities.*

*Rationale* Youth in care should be learning new things all of the time about how to be in the world. Financial literacy, career exploration, extra-curricular activities, communication skills, cooking are a few examples of the learning opportunities that must be woven into the fabric of the lives of each young person in care. These learning opportunities must start early and should be a shared responsibility of everyone involved in the youth's life. Amy described how her foster family facilitated this process by including her in all family activities.

*7.4.3 Ensure access to natural caring relationships.*

*Rationale* This is especially critical for youth who live within residential group home settings. Several participants in this study described how institutionalization was damaging to their healthy development. Some questions for policy discussion might include: "Are they getting to see couples interact and support one another?", "Are they getting to see parents provide care to their children?", "Do they have access to a relationship with a supportive and mature adult who communicates trust?", "Do they have access to natural consequences and rewards that promote learning?", "What proportions of youth in care grow up in residential settings compared to foster care settings?", "If residential care is the most likely setting for many adolescents involved within the child welfare system, are models of residential care family inclusive and allow the families of staff to be part of the residential facility activities?" "Do the policies of the residential care setting and or foster home setting support the educational needs of the young person?"

*7.5 Nova Scotia Council for the Family.*

The following recommendations are made with the clear understanding that the Nova Scotia Council for the Family (NSCF) is a not for profit organization made up of member agencies who deliver the AG bursary through annual charitable donations. Further to this, the AG bursary program is largely implemented through the volunteer efforts of two Council committees. It is understood that these recommendations are restricted by available volunteer time and community investment in the bursary program.

*7.5.1 Continue Amanda's Gift.*

*Rationale* The AG bursary recipients involved in this research were able to describe a wide range of positive outcomes afforded to them through their involvement in the AG bursary program. These positive outcomes suggest that the AG bursary is filling a gap in service and is an effective method of providing support to this population. The AG bursary is a capacity building service that fosters positive outcomes for youth with care experience.

*7.5.2 Create an AG email group.*

*Rationale* AG recipients are not asked to provide their email address where contact information is collected. Due to changes in technology and communication patterns most participants involved in this research utilize email and the internet. The NSCF could provide a service through this communication modality to increase information provided to AG bursary recipients that is most relevant to them in a timely way. Also, many young people are moving at this time in their lives, email addresses can be an effective way to maintain consistent contact. This will increase the timely notification of application deadlines and other pertinent information.

*7.5.3 Survey AG recipients.*

*Rationale* Creating an evaluative framework within the service delivery model would allow the NSCF to track data which would be of value to the delivery of the AG bursary program. A questionnaire could be administered confidentially and conducted intermittently. This would create a feedback loop for recipients to inform the administration of the bursary. For example recipients could provide comments about the application process and how the funds were helpful in their circumstances. Relevant statistics could also be compiled to examine the percentage of youth who receive the bursary and complete their education program. It was obvious through the course of this study that participants were pleased to have an opportunity to share their feedback.

*7.5.4 Examine AG relationship to other funding.*

*Rationale* The AG bursary has traditionally been intended to be made available to those who are most in need. The NSCF should continue to assess other available funding sources for youth with care experience and position the AG bursary for youth who are not eligible for any other programming. This could result in referrals to the Ken Dryden Scholarship, the Nova Scotia Department of Community Services Education Bursary, as well as provincial and federal funding programs. This will also allow the NSCF to examine the relationship between AG and these programs. Due to the changing nature of other programs, and gaps in services, the AG Bursary certainly remains relevant and necessary.

*7.6 Community and allied agencies*

The well-being of children, youth and their families goes far beyond the scope of a child welfare agency or a local school (Graham, 1993). Each member of each

community must be an active participant in creating an environment where the well-being of children, youth and families is the primary focus.

*7.6.1 Explore ways to support youth in care.*

*Rationale* Parenting support to families, foster care placements, financial contribution to AG, or becoming an adoptive home for children and youth are all valuable contributions that community members can make. A community that is engaged in a meaningful way will be a community that shares resources and reduces risk to children (Barter, 2006).

*7.6.2 Create opportunity for youth contribution.*

*Rationale* Meaningful engagement and collaboration for everyone in the community is a step toward creating participation and increasing available resources that already exist within a community. The adults involved in this research identified a strong desire for belonging that was absent during parts of their development. Community partners can help reduce emotional poverty experienced by youth in care by becoming involved in their lives in a meaningful way.

*7.6.3 Explore ways to support child welfare agencies.*

*Rationale* Child welfare service delivery goes beyond what one child welfare service office can provide to a community. The integrated support of all community based organizations is critical if community capacity building is able to address the root causes of abuse and neglect in our communities. While child maltreatment is certainly an exceptionality that warrants further attention by all, it is 100% avoidable. Barter (2006) explores the role of community agencies and active participation by all community members are critical components missing in child welfare service delivery. Youth with

care experience, who age out of foster care, are no longer eligible for child welfare support services. If they are not connected with community supports prior to leaving care, they will be without the supports required to successfully transition to early adulthood.

### *7.7 Conclusion*

This research process began with a search to find a group of former youth in care who had achieved their educational goals. AG recipients were identified as a group of former youth in care with post-secondary educational success who could speak about resilience in the context of their educational experiences. A literature review of current research on resilience and the educational experiences of youth in corporate care provided a framework for the study. A qualitative research design was constructed drawing on principles of naturalistic inquiry. Dialogue with AG recipients revealed a shared belief that they had experienced resilience. Further to this, AG recipients provided insight into the risks and assets they encountered through the course of their development while on a path to achieving post-secondary education.

Vinnerljung et al., (2005) made the following statement when summarizing their national study which identified that youth with care experience are more vulnerable than their peers to poor educational outcomes:

Child welfare clients are – irrespective of issues of causality and regardless of birth parent’s educational background – a high risk group for low educational attainment. Child welfare agencies, when in the capacity of loco parentis, should spare no efforts in trying to improve ‘their’ children’s chances of actually getting an education. This is especially valid for those children and youths under the authorities’ responsibility for long spells of time, for whom professionals have



ample opportunities to attempt to improve the odds. Considering the scope of this responsibility and the poor outcomes presented here it is also appropriate to call for societal support targeting former child welfare clients who want to pursue educational goals once they reach adulthood – especially for those who have been in long term care. (p. 274)

Amanda's Gift, inspired by the gesture of a former youth in care, is certainly one example of how community can provide targeted support for child welfare clients who want to pursue educational goals.

As Ungar (2004) described, "When researchers construct studies with greater attention to the relativistic nature of resilience, they discover a less determined or arbitrary understanding of resilience phenomena" (p. 355). Amanda, Amy, Natalie, Scott, Annabelle and Alicia, David, and Danielle have not described a step-by-step plan for practitioners. Rather, they have demonstrated that difficult circumstances do not preclude health and well-being. Their rich and telling accounts of life in corporate care suggest that there are many changes that could reduce the amount of risk faced by children and youth who find themselves in similar circumstances. They have highlighted the importance of ensuring a resource rich environment for youth so that they are able to navigate toward available supports that are meaningful to them in the context of their lives. Further research in this area will continue to uncover more information about the journey of youth through corporate care systems, and the pathways that lead them to educational or other defined success.

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**Appendix A**  
Results of Pilot Study

Youth in out of home care carry more than the average burdens of growing into adulthood. Many of these youth are in a constant battle to make sense of their world so that they are able to etch out a path toward independence and self-sufficiency. Following is a description from youth themselves of what is needed for them to be resilient or okay, particularly in relation to their educational experiences. Through the voice of one observer in the lives of youth in out of home care, we are provided with some insights into what is helpful to these youth and what acts as barriers to meaningful and positive educational experiences. *Alex* provides us with a retrospective reflection on the issues of youth in out of home care that have been brought to the attention of advocacy agencies who are positioned to respond to these concerns. Further to this, *Alex* describes personal experiences of being in out of home care and a personal pathway toward resilience.

*Facilitating Meaningful Educational Experiences*

*Access to Strong Support*

Having access to strong support “*wherever they could get it,*” was the primary resounding component identified by the youth that helped them in their individual pathways to resilience. Teachers, social workers and caregivers were identified as the main support providers. Social workers who met with youth on a regular basis, who were available to the youth, who were “*easy to get a long with,*” were identified as providing quality support. Youth reported that having had a social worker to work with consistently over a long period of time was beneficial. Qualities of supportive teachers included those who took an interest in the youth “*just seeing the young person excelling at something in school*” pointing it out and suggesting they pursue those talents and skills. Caregivers

such as supportive foster parents were also identified. *Alex* described a personal source of support: “I had *a great foster mom.*”

Having access to social workers that they were familiar with outside of business hours was seen as a positive by the youth. Another important consideration identified was access to caretakers who could assist with homework. This was especially important for youth who may have a different first language than their caretakers, such as French speaking youth.

### *Collaborative Services & the Child Centered Approach*

Youth in out of home care identified a perception of strong support when people were working together. “*Even having the support of two people who were communicating, whether it be a teacher and a social worker, having them all together.*” A child centered approach was recommended, with the goal of building on the child’s strengths. This was only possible when the service providers were familiar with the youth and knew where the youth were at in their personal journey. Youth reported that meeting with social workers on a regular basis was helpful, but especially if the social worker knew the child. Youth wanted inclusion in decision making processes: “*Not having your social worker and your counselor meet with out you.*” School plus was recognized as a possible means for future collaborative service provision: “*Their framework is putting the child center and then having everyone work around with them.*”

### *Aspects of Section 56 Services that Facilitate Protective Processes*

Section 56 gives youth in out of home care a “*chance to grow up.*” These youth are in their young adulthood and compared to many of their peers who have family support, they have a short path to independence. *Alex* had found that the mean age for

youth in Saskatchewan entering university according to recent University of Regina statistics to be 23.5, and the mean age in the province of Saskatchewan for leaving the family home was between 25 and 26. *“So at least it gives them a few years to the age of 21 for support.”*

*“It[Section 56] is not only used for education, could be for counseling purposes, going to work, trying to find some kind of job, maybe a mentorship program, anything like that. Financially it’s helpful if you have a good social worker who is very supportive, who can help you access information, guide you, let you make your personal choice.”*

### *Barriers to Positive and Meaningful Educational Experiences*

#### *Basic Needs*

Not having access to basic needs such as food, shelter and transportation were identified as problems getting in the way of resilience. Youth expressed their concerns to others in the following ways:

*“My social worker is not giving me money for my bus pass or I lost my bus pass and they won’t give me another one. I live in a foster home and I can’t get there (school), I live in a group home I can’t get to the school. What am I supposed to do?”*

While some youth seek out support to access post-secondary education and vocational training, many of the youth accessing services under section 56 are still in high school. *“Really what it comes down to for them is what they need to even get to school. Very simple things.”* Youth living in foster homes, group homes or independent

living situations seemed to share this problem of not being able to make ends meet or to navigate the financial policies associated with their services.

### *Stigma*

Youth in out of home care report having a family situation that is often very different from their peers and in most situations their teachers, social workers and peers know they are in out of home care.

*“I think it takes you down a notch, depending on who finds out. It’s kind of a hard thing to keep under wraps, all of a sudden your friends are like well you don’t live at home, what’s going on? Alienation some of them felt, depending on their close personal set of friends, or who’s in the school. You’ve got your bullies that may bring it up. Just maybe not even wanting to attend school, feeling like there is something wrong with them, for some reason they’re the odd ball out because their family situation didn’t work out.”*

Youth reported feeling as though others had not considered that something may have happened to them, that others didn’t recognize that being in out of home care was not their fault. *“It’s sort of that ignorance even of the community and their peers not knowing what care is.”* There is sometimes a perception that the child or the youth is the cause of being in care. *“I think over the years it has become a little bit more acceptable among peers, and a little bit more among teachers and staff personnel.”* It was also reported that youth who *“end up behind schedule on the appropriate time lines of the education system, for a quite a few having to go back, being a certain age and then still being a grade or two behind isn’t the greatest.”* Changing from semestered to non-semestered schools mid-stream was also a common problem.

*Personal Choice*

*“Let me pick what I want to do. Don’t tell me what I want.”* Youth provided many examples of where they felt that their right to a personal choice was ignored in decision making. *“A lot of them thought that their social workers didn’t trust them or respect them.”* Youth reported feeling coerced in some instances and expressed *“They’re not letting me take the courses I want.”* *“My social worker doesn’t think that I am smart enough to take this program.”* Students identified as requiring special needs services reported that they are sometimes *“placed in settings where they don’t want to be.”*

Financial autonomy was connected to personal choice in several instances. Youth expressed that instead of being allowed to manage their finances they were provided with provincial government food vouchers. Stigma was associated with the use of the food vouchers. *“To them it was humiliating and degrading having to go in trying to be university students or even living on your own trying to make it and having to go shopping with a food voucher.”* Alex reported being surprised with the lack of autonomy reported by youth receiving services under Section 56.

*Making Things Explicit*

Youth identified experiencing emotional worry that was often affiliated with a lack of awareness of what services were available, how to use those services, and how decisions are made that affect them directly. It was identified that youth in out of home care often spend a bulk of their time at school and require necessary supports in this setting.

*“A lot of the times school systems aren’t very aware of child welfare legislation and they might have a young person that’s just come into their school, maybe this*

*is their last year and finishing, and it (planning) hasn't been addressed in any previous schools and they (the school staff) don't understand the history of the child."*

Many youth in out of home care were not familiar with the services provided under section 56, nor were they aware of what employment or educational opportunities existed. As Alex explained: *"Just falling through the cracks."* A need for social workers, caregivers, school counselors and educators to regularly engage youth in planning processes was identified. *"Even just to have that information available, a close connection, someone who knows they're a young person in care, who could be available for this (planning), but no body has told them yet."* It was also especially important for youth with cognitive disabilities who experienced *"not being able to access resources that they need or counseling. Or vice versa, being placed in those settings when they don't really want to be there."*

Youth also needed information about decisions affecting their placements. Many youth could not identify why they had moved from one placement to another.

#### *The Limits of Section 56*

A limit to the program was the cut off age. Section 56 is available to youth who are permanent or long term wards in Saskatchewan who are between the ages of 18 – 21.

*"A lot of young people don't even get out of high school until they are 18, 19 sometimes 20. Section 56 only covers until 21. The time limit isn't a good thing. Other provinces have put in place either to a higher age, like 22 to 24, or it's just a program you can access at any time."*

Some youth have experienced difficulties in getting access to the program because they are generally not seen as being compliant with the guidelines of the program. Youth have expressed frustration about this exclusion. It was not clear to Alex how many youth who are ageing out of the foster care system are not receiving the services and what the reasons for the exclusion might be.

Youth reported a problem in regards to distributive justice when it came to financial support. *“Whether it’s just your living allowance or your spending money it was any where from, someone would get twenty to fifty dollars, and someone would be getting a hundred to three hundred dollars.”* Overall awareness of the program among youth, social workers, and outside agencies was also noted as a barrier to service delivery. *“I don’t think it is mentioned to a lot of young people. I don’t know where the reasoning comes in behind that.”*

Youth also reported difficulties associated with having a *“nine to five parent.”* The problems or successes of youth did not always happen between regular business hours. Youth felt that the lack of access to adults that they were familiar with during evenings and weekends was sometimes problematic.

### *Disruptions*

Youth in out of home care experience a wide range of disruptions that can get in the way of positive and meaningful access to education. Often times they are required to interact with external agencies causing absenteeism. *“Whether it be that they have to meet with their social worker, have to attend court, counseling sessions,”* all were reasons identified as times when children or youth had to be away from school.

*“Just the life of the child in care, there’s disruptions. A lot of them are trying to deal with other issues, family issues. It could be biological family, non-biological issues that they are still trying to deal with and they’re are not given the appropriate resources...It just makes it a little bit more difficult.”*

Further to this, poor mental health was associated with absenteeism. *“Just maybe not well enough to go to school, a lot of times truancy comes from that.”*

### *Culture*

*“Your cultural well-being and your cultural knowledge is part of education.”* Alex identified that Saskatchewan has a high Aboriginal population and was not sure if there was an adequate number of Aboriginal foster homes and group homes. Although it was identified as a *“sensitive and touchy subject”* Alex reported that youth had expressed this sentiment: *“I don’t really know a lot from my cultural heritage.”* Alex wondered if Aboriginal youth who had access to schools with a high number of Aboriginal students had more opportunities to be exposed to their culture through curriculum. Alex also wondered what impact would be had for youth who were not able to be maintained in these schools due to changes in placements.

### *The Role of Natural Family*

Youth reported a diverse range of relationships with natural family.

*“It totally depends on the young person and the situation whether or not some of them will have natural family sort of come into the picture afterwards and be like “that’s great, you’re going to school, and then sometimes nothing at all.”*

Some youth reported a sense of accomplishment when they were able to be the first member of their family of origin to complete grade twelve or post-secondary education.



*Personal Reflections*

On the cold walk back from the coffee shop, on what was the first really wintry day of the year, Alex shared a personal experience of having come into foster care at 15 years of age. What made the difference in *Alex's* understanding of resilience was having a great foster mom who was supportive. *Alex* also talked about a teacher who had spent time explaining the child welfare system and planning with *Alex* for attendance at a post-secondary educational institution. We talked about how my own situation was different not having been in out of home care. My family, particularly my older cousins, had schooled me on steps toward post-secondary education.

*Alex* wondered what would have happened if she had not encountered a supportive teacher who made explicit the workings of the systems in which *Alex* was involved, including child welfare policy and transition planning in education. I later wondered about my own learning opportunities that were so carefully supported by my family, and how my life might be different without having had access to that support.

## **APPENDIX B**

### Letter to the President of the Nova Scotia Council for the Family

President,  
Nova Scotia Council for the Family  
Suite 602, 5121 Sackville St.  
Halifax, NS  
B3J 1K1

I am currently a graduate student at the University of Saskatchewan in the College of Education in the Department of Educational Psychology & Special Education. I am writing to request formal permission from you to conduct a study involving young adults who have previously been awarded the Amanda's Gift Bursary. Following is a summary of the research and an outline of the research questions.

#### **Purpose of the Study**

The purpose of this study is to uncover information about perceived access to meaningful and positive educational experiences on the part of youth in out of home care and their perceptions of resilience. This research will be exploratory in nature and will be conducted in the context of resilience theory. The study will also draw on developmental theory and child welfare concepts. Young adults who have previously been awarded the Amanda's Gift Bursary are the focus of this study. The study will be conducted using a qualitative methodological design with the use of focus group interviewing.

#### **Research Questions**

In what ways do youth in out of home care who have received the Amanda's Gift bursary perceive themselves as being resilient?

What barriers to positive and meaningful educational experiences do youth in out of home care who have received the Amanda's Gift Bursary believe exist for children and youth in out of home care?

What do youth in out of home care, who have received the Amanda's Gift Bursary, believe contributes to a positive and meaningful educational experience?

#### **Assistance Required**

The goal of the research is to conduct a small focus group interview involving Amanda's Gift recipients in the province of Nova Scotia. I would like permission to contact the previous recipients of the Amanda's Gift Bursary. I am requesting that a form letter (Please see attached), be sent out on my behalf to all Amanda's Gift recipients in that area.

The ethical standards and protocols of this study will conform to the Tri-Council directives and will be approved by SSHRC Ethics Board at the University of Saskatchewan. If you have any questions about the study please do not hesitate to contact me at (902) 444-9281, or contact Dr. Teresa Paslawski, Research Supervisor at (306) 966-5262.

I am requesting that you provide written permission for the study. Please forward any correspondence to:

Stacy McRae  
#17 A, Princeton Ave  
Halifax, NS  
B3R 2A1

Thank-you for your time and attention to this matter.

Sincerely,

Stacy McRae

**APPENDIX C**  
Participant Invitation Letter

**Study:** Young Adults Speak about their Educational Experiences as Resilient Youth in Out of Home Care

**Researchers:** Stacy McRae, BSW. (M. Ed. Candidate)  
Department of Educational Psychology & Special Education  
Dr. Teresa Paslawski, Professor, College of Education,  
University Saskatchewan

**Research Description**

Hi. My name is Stacy McRae and I have asked the Nova Scotia Council for the Family to send you this letter on my behalf. The reason I did this was to ask you to be part of a research project. I am asking you, a young person who has received the Amanda's Gift bursary, to be part of a group interview to find out about your school experiences and your ideas on what has helped you to stay involved in school.

The group interview will last from 1 to 2 hours and will held in Halifax at the Nova Scotia Council for the Family Office, Suite 602, Sackville St. on \_\_\_\_\_ from 2:30-4:30pm. Assistance for transportation to and from the group interview is available. Gas mileage will be provided to you in the amount of \_\_\_\_\_ if you are driving to the interview. I can also send you bus tickets if you are traveling by city transit. If you do come to the interview everyone is invited to share in a meal after the interview.

\*Bus tickets or gas mileage will be provided to help you get to and from the Group Interview\*

***Privacy and Confidentiality***

Anything you share during the interview will be kept private and no one will know, other than the researchers and the others in the group, that you have been a part of the study. I will use a tape recorder during the interview to record your words. Later I will listen to the tape and write out your words into a transcript (a paper copy of your words). Any words like um or repeated words will be taken out so it will be easier to read. I will ask you to meet with me to look over your words in case you want to change them in any way. Once you are happy with your words I will ask you to sign a permission form so that I might use your words in my research project. Your real name will not be used in the project. Instead I will make up a name to go along with your words. No one, other than the people at the interview, will know you were part of the study.

Any thing you say during the interview will be kept private. After, I will write a report of all the things you and the other group members told me during the meeting. Other people will be able to read the report and learn about what you had to say. No information that would allow other people to guess who you are, like where you live, will be in the report. The other people at the interview will be asked to keep your words and your name private however the researcher cannot guarantee that they will do so.

### ***Research Participation***

Taking part in the study is your choice. You do not have to answer any questions that make you uncomfortable. You may refuse to participate, refuse to answer any questions, or leave the study at any time without any penalty. You will still receive movie bucks and will be invited to share in some pizza even if you chose to leave the study.

### ***Potential Benefits Associated with Participation***

We believe what you have to say about your experiences is important. What you have to say could help others learn about what is helpful for young people with similar experiences as you.

This letter is yours to keep. After reading this letter you can call me to ask any questions you might have. My work number is (902) 444-1316. You can leave a message form if I am not there. If you need to call long distance you can use this toll free number: 1-877-525-0554. If you have access to a computer you can also email me at stacymcrae@gmail.com. If you want to participate in the research, please call me to have your name and contact information placed on the participant list. The group interview is scheduled for \_\_\_\_\_ so please call as soon as possible if you are interested in being part of the study.

Stacy McRae  
Researcher, University of Saskatchewan  
Phone: home (902) 444-9281  
Work (902) 422-1316  
Work Toll –Free 1-877-525-0554  
Email: stacymcrae@gmail.com

If you do chose to be part of the study, you will be given a consent form with more details about being a person who is part of a research project. This form will tell you more about your rights as a research participant. If you have questions about this study or your rights as a research participant you may also call the Office of Research Services, (306) 966-2084 at the University of Saskatchewan. You may call the Office of Research Services collect if you live outside the city of Saskatoon. Thank you for your time.

**APPENDIX D**  
Conversation Guide

Tell me about your experience of Amanda's Gift. – What was that like for you?

What have been some of the struggles you have experienced related to your educational experiences?

Early education – late education

How do you think your educational experiences differ from those of youth who do not have care experience?

Why do you believe you have been able to achieve enrollment in a post-secondary education program?

Do you believe you have supports in your life that have helped you in school, if so can you tell us about those supports?

Description of Resilience Theory

Do you believe you are resilient or okay? Please explain.

Do you believe that culture and education are connected? If so in what ways?

If there was a program to help young people in care get ready for post-secondary education, what do you think it should look like?

What advice might you give other young people in care with similar experiences?

Any other thoughts?

**Appendix E**  
CONSENT FORM

*You are being asked to be a part of a research study called: “Young Adults Speak about their Educational Experiences as Resilient Youth in Out of Home Care.” Please read this form carefully, and feel free to ask any questions you might have.*

**What is this study about?**

As a young person who has been awarded the Amanda’s Gift Bursary, you are being asked to be part of a group interview to find out about your school experiences and your ideas on what has helped you to stay involved in school. There will be other young people who have been awarded the Amanda’s Gift Bursary at the group interview. All of you will have a chance to answer some questions and make some comments about your experiences.

There are no right or wrong answers to any of the questions. The researchers want to know what you think and what you experienced. The group interview will last from 1 to 2 hours.

**Potential Benefits:**

We believe what you have to say about your experiences is important however there are no certain benefits to you. What you have to say could help others learn about what is helpful for young people with similar experiences as you. The information that comes out of the interview will be added to a report. This report may help other people learn about what you have experienced. I also plan to use this report for my thesis which I have to do as part of the school program I am taking. I might also present this information at conferences and I might write articles about this information that would be published in journals.

**Risk or Deception:**

**Participants will not be deceived in the course of this study. Risks due to the limits in the ability to guarantee privacy of participants drawn from a small population is addressed in the next section.**

**Your Privacy**

**This interview will be tape recorded. Only I will have access to the tape. Once I write out your words from the tape into a transcript (a paper copy of your words) I will be destroying the tape. Because there are only a small group of young people who have received the Amanda’s Gift Bursary, I cannot totally ensure that no one will know that you participated. However, I will do lots of things to protect your privacy. Your name will never be used in the report or in the paper copy of your words. I will make up a name to go along with what you have said for the report to protect your privacy. I will ask that all group members to keep your name and words private but I cannot guarantee that they will do so.**

I will be keeping all of the forms and the transcripts in a private place. I will use locked file cabinets, in a locked office (for paper files such as consent forms and

interview transcripts). Any information you give me will only be available to research staff. Any information that I will keep on the computer will be accessed by password only; computers are kept in locked offices. Backup copies of the information will be kept by the researchers and contained in a locked file drawer in a locked office. When the study is all finished **the paper copy of your words, which will not contain your name, will be kept at the University of Saskatchewan at the office of Dr. Teresa Paslawski.**

### **Right to Withdraw:**

As a person who is agreeing to be part of this study, you can change your mind at any time. If there are some questions you don't want to answer you do not have to. You will not be punished in any way if you do not wish to be part of the study. If you withdraw from the study this decision will in no way change your involvement with the Nova Scotia Council for the Family. Choosing to leave the study will not affect your access to, or continuation of, services provided by public agencies such as Universities, hospitals, social services, schools, and in no way affect your eligibility for the Amanda's Gift Bursary. If you choose to withdraw, your data will be deleted from the study and destroyed. You will be provided with movie bucks and pizza as a participant in this study and you will be entitled to these even if you withdraw from the study.

Although the information that you share will be published and presented publicly, the information will be reported in a way that protects your identity, so that it will not be possible to figure out who you are. The consent forms will be stored separately from the materials used, so that it will not be possible to associate a name with any given set of responses. Please do not put your name or other identifying information on the materials used.

### **Questions:**

If you have any questions concerning the study, please feel free to ask at any point; you are also free to contact the researchers at the numbers provided below if you have questions at a later time.

### **Consent to Participate:**

I have read this form and I understand what it means to be part of this study. Any questions that I had have been answered. I give my consent to be a participant in this study described above, with the understanding that I may change my mind to be part of the study at any time, without any consequence to me. **A copy of this consent form has been given to me for my records.**

### **Feedback on Results**

We are happy to share the results with you. When the report is finished you will have chance to read it. A copy of the report will be at the office of the Nova Scotia Council for the Family for everyone. If you would like to be able to read it contact their office and they will help you access the report.

### **Ethics Approval**

This study has been approved by the Behavioral Research Ethics Board at the University of Saskatchewan on \_\_\_\_\_. Any questions can be directed to



the researchers or to the Office of Research Services, (306) 966-2084. You may call the Research office collect if you need to make a long distance call.

**Researcher(s):**

Stacy McRae  
Researcher, University of Saskatchewan  
Home Phone: (902) 444-9281  
Work Phone: (902) 422-1316  
Email: stacymcrae@gmail.com

Dr. Teresa Paslawski  
Assistant Professor, University of Saskatchewan  
Phone: (306) 966-5262.

**I agree to participate in the study as outlined above. I understand that I can withdraw from the study at any time without giving reasons and without any consequences.**

\_\_\_\_\_

(Signature of Participant)

\_\_\_\_\_

(Date)

\_\_\_\_\_

(Signature of Researcher)

\_\_\_\_\_

(Date)

**Appendix F**  
Information Form

Age \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

Ethnicity \_\_\_\_\_

Are you currently enrolled in a school program? \_\_\_\_\_

If you are currently in school what grade or program are you in?  
\_\_\_\_\_

If you are not currently in school what grade or program were you in when you left school? \_\_\_\_\_

Did you complete the grade or program? \_\_\_\_\_

At what age did you enter into care? \_\_\_\_\_

What are your current living arrangements? \_\_\_\_\_

How many times did you move while residing in care? \_\_\_\_\_

Do you have children? \_\_\_\_\_ If so how many? \_\_\_\_\_

If you have children what are there ages? \_\_\_\_\_

Did you participate in extra-curricular activities while you attended school programs?  
\_\_\_\_\_

Have you ever been involved in the correctional system as a young offender?  
\_\_\_\_\_?

Do you have a job currently? \_\_\_\_\_

If so could you describe your work briefly?  
\_\_\_\_\_  
\_\_\_\_\_

Did you maintain employment while completing a school program?  
\_\_\_\_\_  
\_\_\_\_\_

(Derived from the NYICN participatory research study, 2001)

**Appendix G**  
Support Services Information

Dear Participants,

Thank you for participating in the study entitled “Young Adults Speak about their Educational Experiences as Resilient Youth in Out of Home Care.” If you have any questions about the services you have received under the Children and Family Services Act, or if you feel that you could benefit from further support services or counseling, please contact the researcher who will provide you with support contact information for your area. Young people can also contact the Youth Secretariat about concerns and questions regarding youth services available in the province of Nova Scotia.

Sincerely,

Stacy McRae, Researcher

**Support Services Contact Numbers**

Stacy McRae, Researcher  
(902) 422-1316  
Toll Free: (1-877-525-0554)  
Email: stacymcrae@gmail.com

Office of the Ombudsmen (NS Youth Secretariat)  
Direct telephone line: 902-424-6780  
Telephone toll-free within Nova Scotia: 1-800-670-1111  
Youth Services toll-free within Nova Scotia: 1-888-839-6884

**Appendix H**  
Transcript Release Form

Study Title: “Young Adults Speak about their Educational Experiences as Resilient Youth in Out of Home Care”

**Transcript Release Form**

I, \_\_\_\_\_, have reviewed the complete transcript of my focus group taped conversation, and have been provided with the opportunity to add, alter, and delete information from the transcript as appropriate. I acknowledge that the transcript accurately reflects what I said in my focus group taped conversation with Stacy McRae, researcher. I hereby authorize the release of this transcript to Stacy McRae to be used in the manner described in the consent form. I have received a copy of this Data/Transcript Release Form for my own records.

\_\_\_\_\_  
Participant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Researcher

\_\_\_\_\_  
Date

APPENDIX I

Table 1

*Reported Examples of Resilience at the Individual, Peer, Family & Community Level*

Individual	Peer	Family	Community
<p><b>Optimism</b>  <i>“I am just the type of person that I just always try to find the best in...situations”</i></p>	<p><b>Friend’s Parents</b>  <i>“.. This guy I know since I’ve moved to Canada...his parents treat me like they treat him...I talked to them...they are always willing to talk to me. They helped me, actually helped me a lot. His mother actually went to the guidance counselors and talked to them, told them my situation and what I was going through at the time.”</i></p>	<p><b>Natural Parent Support</b>  <i>“My mom has been so strong and she has always been there for me.”</i></p>	<p><b>Foster Parent and Social Worker Support</b>  <i>“I owe most of the way I am today to my former social worker and my foster family.”</i></p>
<p><b>Insight</b>  <i>“There’s not a whole lot you can do with a high school education”</i></p>	<p><b>Boyfriend’s Parent</b>  <i>“...I had nobody to take me to university and so my boyfriend’s mother drove me.”</i></p>	<p><b>Extended Family Support</b>  <i>Amanda went to live with her aunt and uncle while she attended college. She had only met them a few times before but they ended up being a big part of her life. “I lived with them for three years while I went to college ... and that really gave me my stability back and the grounding that I needed...”</i></p>	<p><b>Guidance Counselor</b>  <i>“She was great actually. She knew exactly what was going on with the family...with Children’s Aid and the workers...She had a great grasp on what was going on. She did what she could for me to make sure that I got into good schools and fill out for all the scholarships I could...”</i></p>

Educational Experiences of Resilient Youth in Care

<p><b>Courage</b>  <i>"I didn't really want to come but I knew it was all I had."</i></p>	<p><b>Peer Group</b>  <i>"Positive peer relationships really did help. Just knowing that if I needed help that I had friends that I could ask and that would encourage me and just positive competition..."</i></p>		<p><b>Social Workers</b>  <i>"They made sure I was financially stable. They did what they could to get money to me, different bursaries and stuff like that...Moral support...John would call me even when I wasn't what would you call it...a client"</i></p>
<p><b>Motivation</b>  <i>"I had goals in mind. I was always reaching for something."</i></p>	<p><b>Friends</b>  <i>"I remember my grade 12 prom...I had a friend of mine who was older...married with children...[she] took me to get my shoes and helped me get my dress and then her husband had a bottle of champagne for before I left...we popped the cork and had some champagne..."</i></p>	<p><b>Caregivers</b>  <i>"When I think about my life and about how many families I have it's a lot. And sometimes that is really bizarre and...strange for me to think that there are a number of people who would say that I am their other daughter..."</i></p>	<p><b>Child Welfare System</b>  <i>"My experience [in care] was pretty good... I wasn't you know moved...it was pretty stable."</i></p>
<p><b>Self Advocacy</b>  <i>"I came in [care] about the time when they [child welfare agency] didn't even help me get a driver's license... So I really put the pressure on....I said listen you need to help me and with enough perseverance and hard work he [social worker] finally</i></p>		<p><b>Caregivers</b>  <i>"...my foster mother...was quite older when she took me and of course they didn't foresee illness at that point...and they said if anything ever happens to Jean you can always come an live with us."</i></p>	<p><b>Community Acceptance</b>  <i>"I never felt alienated"</i></p>

Educational Experiences of Resilient Youth in Care

<p><i>started handing sown some information and some applications.”</i></p>			
<p><b>Adaptive Coping Skills</b>  <i>“Running is my way to cope...when things were gritty I used it to you know stabilize myself.”</i></p>			<p><b>Social Worker with Care Experience</b>  <i>“I met a social worker...and she was in care and I think that that really helped me because I realized that hey you know I can get past this...I can overcome this...”</i></p>
<p><b>Ability to Ask for Help</b>  <i>“When I was 16...I said to my social worker I need a therapist, I’m ready and I need that.”</i></p>			<p><b>Social Worker</b>  <i>“...my social worker called on my behalf pretending that she was me saying that ‘How can I get into university?’ and I was like wow she did that for me that’s amazing. She believes in me so much that she would call the university and pretend that she was me. And I still think of that to this day.”</i></p>
<p><b>Dedication</b>  <i>“It was hard but I was willing to learn...I stayed back many times...just to finish projects”.</i></p>			<p><b>Teachers</b>  <i>“...When I graduated from high school I received two personal scholarships of \$500.00 a piece from high school teachers that I had had throughout junior high and high school. They inspired me so much...and every time I didn’t do so</i></p>

Educational Experiences of Resilient Youth in Care

			<i>well they would give me that second chance.”</i>
<b>Valuing Education</b> <i>“...dropping out of school didn’t even occur to me even during my challenging times. It was something I always wanted.”</i>			<b>School</b> <i>“School was also an escape for me growing up in such an unhealthy environment, knowing that when I went to school all I had to do was concentrate on those studies instead of reality, you know my life situation...”</i>
<b>Boundaries</b> <i>“I have had enough and I need to go and step out of this situation and make things better for myself and...take my power back.”</i>			<b>Teachers</b> <i>“I had a math teacher in grade ten who was very supportive of me when I was going through a rough time and she would often come and visit me at my apartment or pick me up at the bus stop.”</i>
			<b>Teachers and Social Workers</b> <i>“...my teachers and my social workers...they were really influential...they made it very clear that education is very key to get to where I want to be.”</i>



Educational Experiences of Resilient Youth in Care

			<p><b>Therapist</b></p> <p><i>“...I went to therapy with a fantastic therapist for many years. And Children’s Aid only paid for I think two years and after that he continued to see me for free because I was not ready for that to be finished and I think he realized that there was still a bit left to do...”</i></p>
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## Educational Experiences of Resilient Youth in Care

### APPENDIX J

*Table 2*

*Placement Changes by Age Entered Care*

Participant	Age entered care	Number of placements
1	12	12
2	12	1
3	0	40 +
4	9	30 +
5	14	1
6	8	3
7	19 months	9
8	10	10
9	3	11

Author Note

As a student researcher, I feel that the learning experiences I have had through this research process have been truly transformational. My social work practice has been informed tremendously by the wonderful individuals whom I met through the design and completion of this project. These individuals were both participants and supporters of my research endeavors. My interest in education and the learning process has been strengthened. My hope is that through the development of this document I have presented the voices and wisdom of the young adults who trusted me with their knowledge and life experiences in a meaningful way to you the reader. They truly are the knowledge keepers and have tremendous insight into the systems and processes they encountered through the course of their development. I was also impacted by the range of literature that I reviewed and the opportunity to reflect on my own practice.

What I won't forget about this process is that *Amanda, Amy, Natalie, Scott, Annabelle and Alicia, David, and Danielle* are unique individuals. Their life situations however, are not unlike the many children and youth that I have encountered in my work. I have thought about those children and youth many times during the course of this study. I wondered how they were, what they were doing and if *Anna* still wanted to be a teacher, or if *Daniel* still has someone to take him skating. I thought about whether or not the brief and sometimes extended time I spent with them impacted their development in any way. I wondered how my interactions with them as a professional were playing out in their lives. I wondered how the schools in their lives were adapting to having them as part of the school community, and how their care takers are engaged in their learning processes.

I think the greatest lesson that I can take away from this experience is that we should expect the unexpected. Resilience can be achieved, with available assets. Further to this, what matters most as described by Masten (2005) is not rare or extraordinary. We may not need to respond with elaborate interventions and costly programming. What we need to provide most are opportunities where relationships are formed and strengthened. This is best accomplished through community capacity building. The AG participants involved in this research have not provided step by step instructions about how to help youth in care achieve resilience; rather they have encouraged us to have open minds and to provide assets and opportunities at every stage of development.

I was delighted to know that during the course of my research the Nova Scotia Department of Community Services announced the extension of a bursary program designed to support young people who were in permanent care and custody of a CWA up until the age of twenty four. This bursary program, for which many of these participants were no longer eligible, is intended to cover the cost of living expenses and tuition for youth enrolled in a full time education program. (Nova Scotia Department of Community Services, 2007). Further to this, a registered education savings plan program was also introduced that will help youth in care to save for their post-secondary education. Educational and vocational planning is critical if youth in care are to transition to an early adulthood with timely opportunities for well-being. It is my hope that more and more youth in care will attain a level of well-being that will allow them to benefit from this and other supports. If you wish to contact me you can send me an email [stacymcrae@gmail.com](mailto:stacymcrae@gmail.com)

Endnotes

<sup>1</sup>A similar national program available in Canada is the Ken Dryden Scholarship program administered by the National Youth in Care Network (NYICN, 2007).

<sup>2</sup>Out of home care is a term commonly used in current research; however I used this term initially in the work before recognizing the value statement embedded in the language. Out of home care implies that the child or youth is not currently in a living situation that they would consider their home.

<sup>3</sup>I was later able to meet her in person and was immediately impacted by her energy level and excitement about her plans for her future.