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FEATURE

Reality and Resiliency: The Educational Needs and Strengths of Former Foster Youth

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Each year an estimated, four in every hundred children in the United States are victims of child maltreatment (Sedlak et al., 2010). Annually the child welfare system cares for about 400,000 children across the United States (Child Welfare Information Gateway, 2016). The vast majority of these children endure the challenges associated with being uprooted from their homes and separated from their parents and/or guardians. In many ways the child welfare system addresses the immediate danger of abuse but often falls short in addressing the complex challenges faced by these children. Among these are the challenges of succeeding in school once they enter, and exit, foster care, and overcoming myriad educational obstacles from a place of instability and uncertainty.

This article is meant to present the realities of education, especially postsecondary education, given the challenges faced by foster youth. This article begins with an overview of the foster care system and then turns to obstacles related to accessing and completing postsecondary education faced by former foster youth (FFY). This article advocates for a strengths-based, resilience-focused approach to improving postsecondary outcomes for FFY.

Child Maltreatment in the United States

Every year millions of reports of suspected abuse and neglect of a child by a parent or guardian are made to child welfare agencies (CWA, e.g. title IV-E agencies) across the country. In fiscal year 2014, reports of child abuse and/or neglect involving 3.2 million children across the country were investigated by CWA personnel (Children's Bureau, 2016). These investigations identified 702,000 children as victims of abuse and neglect, including 1,580 children who died as a result of abuse and neglect (Children's Bureau, 2016).

On September 30, 2014, there were 415,129 children in the child welfare system (Child Welfare Information Gateway, 2016). While the number of children in the child welfare system in 2014 was higher than in 2013, the trend over the last decade has been a decrease in the number of child maltreatment cases and an increase in response rate of CWA (Child Welfare Information Gateway, 2016; Sickmund & Puzzanchera, 2014). However, it is important to note that researchers have found that due to underreporting and inconsistent screening of child abuse and neglect reports, only 32% of cases where child victims are harmed and 43% of cases where children are endangered by one or more caregivers had been investigated by CWA (Sedlak et al., 2010).

CWA are responsible for the care and placement of children who are wards of the state. The vast majority of children who are wards of the state because of maltreatment (e.g., child abuse or neglect) are placed in substitute care, separate from their parents or other legal guardians, as a means of providing the child a safe living environment. This is commonly referred to as foster care. In order for a child to be placed in foster care for more than a temporary placement, the court must have just cause to believe that remaining in the home poses a risk of maltreatment to the child (45 CFR Ch. XIII § 1355.20, 2012). The majority of the children in the child welfare system are placed with nonrelatives (46%), relatives (29%), or in institutions or group homes (14%, Child Welfare Information Gateway, 2016). The remaining 11% are on trial home visits, are in pre-adoptive homes, are living in supervised independent living, or have run away (Child Welfare Information Gateway, 2016).

Child abuse and neglect is defined in Child Abuse Prevention and Treatment Act (CAPTA, 42 U.S.C. § 5101 P.L. 111-320, 2010) as follows:

> Any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act, which presents an imminent risk of serious harm.

Each state is required to legislatively define what types and level of risk constitutes child abuse and neglect (45 CFR Ch. XIII § 1355.20, 2012). Typically neglect includes acts of blatant disregard for the health and safety of a child, including such things as failing to provide appropriate supervision, food, housing, education, or medical treatment. Neglect can include exposing children to dangerous environments, including sexual perpetrators, illegal substances, or where there is negligent discharge of firearms or other weapons.

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Typically, the inability to provide for a child due to financial restraints is not considered neglect unless a parent refuses to utilize supports and service necessary to provide for the basic needs of their child or children. However, only 12 states and the District of Columbia specifically include an exception for cases of poverty in their definition of neglect (Child Welfare Information Gateway, 2014). Abuse includes physical and sexual assault on children by a parent or guardian. Physical abuse includes any physical act that caused or could case physical injury or death by other than accidental means (Children's Bureau, 2016). Sexual abuse of a child involves any form of sexual acts or exploitative acts that are for the sexual gratification or financial benefit of the perpetrator (Children's Bureau, 2016).

Most child abuse and neglect cases (85.8%) are indicated on a single type of maltreatment (Children's Bureau, 2016). Neglect was the predominant form of maltreatment, affecting 75.0% of child victims, with physical and sexual abuse impacting 17.0% and 8.3% respectively (Children's Bureau, 2016). The final category of maltreatment affected 6.8% of child victims is aggregated into the category other, and includes children who have been emotionally abused, who are at risk due to parental substance abuse, and other factors that place the child at risk of maltreatment (Children's Bureau, 2016).

The Who of Child Abuse and Neglect

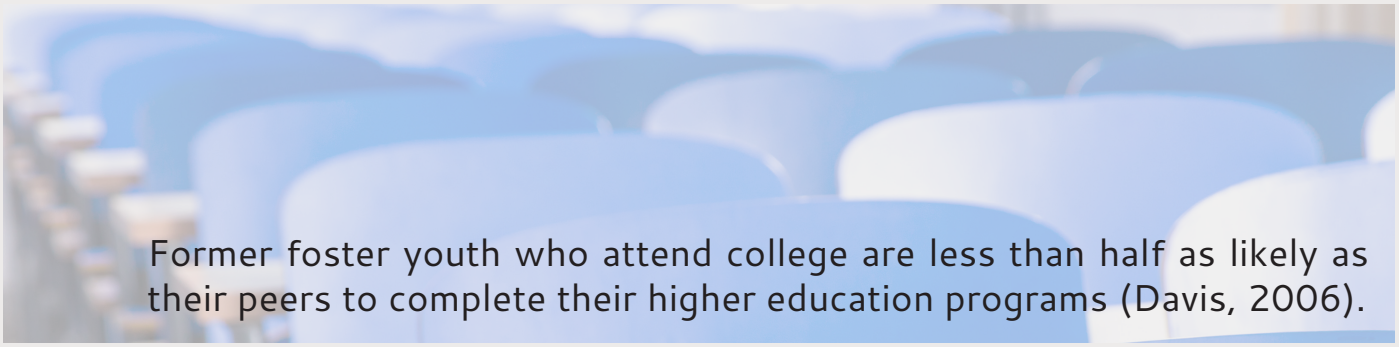
Child abuse occurs in every sphere of society, every geography and demographic. However, there is a persistent overrepresentation of children from culturally marginalized populations within the child welfare system. Specifically, children of color and children living in poverty are overrepresented in child maltreatment cases (National Working Group on Foster Care and Education, 2011; Sedlak et al., 2010). The highest rates of child maltreatment cases involve Black, American Indian, Alaska Native, and multi-racial children (Federal Interagency Forum on Child and Family Statistics, 2016). Among these racial groups, the overrepresentation of Black children in foster care is most notable, where approximately 14% of all children in the United States are Black and 24% of all children in foster care are Black (Child Welfare Information Gateway, 2016; Federal Interagency Forum on Child and Family Statistics, 2016). In 1978, the Indian Child Welfare Act (25 U.S.C. §§ 1901–1963, 1978) was enacted to "protect the best interest of Indian children" noting a finding that... "an alarmingly high percentage of Indian families are broken up by the removal, often unwarranted, of their children from them by nontribal public and private agencies and that an alarmingly high percentage of such children are placed in non-Indian foster and adoptive homes and institutions."

Native American populations continue to be overrepresented in the child welfare system, with 1.6% of all Native American children in care, a rate that is 1.6 times the expected level (Austin, 2009). However, the disparity by socioeconomic class is the most notable, with the rate of child maltreatment for children living in low-socioeconomic households five times that of other children (Sedlak et al., 2014). The overrepresentation of children of color within the foster system reflects in part the higher rates of poverty that impact populations of color, the criminalization of both men and women of color, and racialized stereotypes of parental unfitness (Cooper, 2013; Roberts, 2012; Smiley & Fakunle, 2016).

Former Foster Youth (FFY)

Examinations of the outcomes of former foster youth in secondary education primarily focus on two subgroups of adults who were formally in the child welfare system. The first subgroup consists of adults who aged out of the foster care system. The majority of foster youth who age out of the system do so upon turning 18 years of age; however; a growing number of states have extended foster services for some youth in care up to the age of 21 (Curry & Abrams, 2015; McCoy-Roth, DeVooght, & Fletcher, 2011). Of the foster youth who exit the child welfare system annually, approximately 9% age out (Child Welfare Information Gateway, 2016). In 2014, of the 238,230 children who exited the foster care system, 22,392 were youth who had aged out or had otherwise been emancipated by the courts (Child Welfare Information Gateway, 2016). The second subgroup sometimes referenced as FFY expands beyond those youth who aged out of the system. The specific criteria for this subgroup varies across research studies but typically involves being in the foster care system for one or more years after a specific age.

FFY are not a homogenous group of young adults. Instead, FFY diverge significantly in their experiences, circumstances, and future prospects. Keller, Cusick, and Courtney (2007) found that among foster youth on the verge of aging out of the child welfare system there were four distinct subgroups based on employment, grade retention, parenthood, problem behaviors, placement type, placement stability, and runaway history. Each of these subgroups has differing challenges, resources, and needs (Keller et al., 2007). The existing research provides important information about the transition into adulthood and outcomes for young adults who were in the child welfare system during their adolescence. However, the findings in these studies and reflected in this article are unlikely to reflect the broader population of adults who were under the care of the child welfare system at some point in their childhood.



Former foster youth who attend college are less than half as likely as their peers to complete their higher education programs (Davis, 2006).

Educational Barriers for FFY

A small fraction of FFY access postsecondary education and complete their studies. In 2003, there were 300,000 FFY in America between the ages of 18 and 25 (Wolanin, 2005). Roughly half of these FFY had graduated from high school (Wolanin, 2005). Based on national averages for high school completion and postsecondary enrollment, we can estimate out of 300,000 students 126,000 or 42% would enroll in postsecondary education (Wolanin, 2005). Of the FFY who graduated from high school, about 20% enrolled in postsecondary studies (Wolanin, 2005). The difference between this and what would be anticipated based on national average for high school completion and postsecondary enrollment is staggering. Basically, among this group of FFY there were 96,000 less FFY who enrolled in postsecondary education than what would be anticipated based on national averages. Further compounding this disparity, FFY who attend college are less than half as likely as their peers to complete their higher education programs (Davis, 2006).

Scholars have identified a litany of barriers faced by FFY that interfere with their ability to access and complete postsecondary study. First, to qualify for postsecondary study, FFY have to complete their primary and secondary studies. FFY commonly experience disruptions in their primary and secondary educational experiences. This includes changes in schools, delays in enrollment, inconsistent attendance and increased truancy, high rates of disciplinary infractions, and a higher likelihood of dropping out (National Working Group on Foster Care and Education, 2011). The impact of these disruptions is especially pronounced for the 65% of children in child welfare who have multiple placements while in care and for children with special education needs (National Working Group on Foster Care and Education, 2011). These disruptions in primary and secondary education contribute to later graduations, higher dropout rates, and lower standardized test scores for foster youth (National Working Group on Foster Care and Education, 2011).

In accessing postsecondary studies, FFY are faced with more barriers. These include a lack of knowledge on how to navigate postsecondary processes, poorly timed and insufficient financial aid, and support staff who lacked the training and resources necessary to effectively support FFY (Cooper, Mery, & Rassen, 2008; Hernandez & Naccarato, 2010). While many of the postsecondary educational barriers faced by FFY are reflective in part of those experienced by low-income first-generation college students, the extent to which these barriers impact FFY is far greater. In fact, almost twice as many FFY drop out of their studies without a degree as compared with low-income first-generation college students with no history with the child welfare system (Day, Dworsky, Fogarty, & Damashek, 2011). Compounding these challenges is the fact that FFY often face these barriers without a sufficient social support network and while experiencing intense pressure to be independent (Curry & Abrams, 2015).

FFY face substantial barriers to postsecondary success outside of the educational setting. Some of the most notable barriers are related to financial hardships, dangerous environments, and mental issues. Financial barriers contribute to high rates of homelessness, food insecurity, lower income rates, and joblessness (Courtney, Dworsky, Brown, Cary, Love, & Vorhies, 2011; Curry & Abrams, 2015). Despite these financial barriers, FFY often are burdened with more substantial familiar responsibilities than their peers, such as providing care and financial supports for their parents, siblings, and their own children (Courtney, et al., 2011; Curry & Abrams, 2015; Hernandez & Naccarto, 2010). Additionally, youth who are homeless and jobless have higher rates of exposure to violence, drugs, and other dangerous environments (Curry & Abrams, 2015). This corresponds to the high level of involvement with the criminal justice system observed among FFY. FFY are more likely to be arrested, convicted, and incarnated as young adults than are other young adults (Courtney et al., 2011). The rates at which these young adults are arrested are alarmingly high. Courtney et al. found that 41.6% of female FFY and 68.2% of male FFY in their study reported they had been arrested at least once between the ages of 18 and 26 (Courtney et al. 2011). Further, FFY experience high rates of exposure to and victimization to violent criminal acts. This is especially true for young male FFY. Almost a quarter of the 590 young male FFY included in Courtney et al.'s study reported

having experienced at least one of the following events in the last 12 months: a) saw someone being shot or stabbed, b) someone pulled a knife or gun on you, c) shot or stabbed by someone, or d) beaten up. Further, 5.9% of female FFY and 5.5% of male FFY reported being victims of sexual violence during the same period (Courtney et al., 2011).

Mental health issues create substantial barriers for FFY. Most children involved in the child welfare system experience a series of traumas that affect their mental health (Kerker & Dore, 2006). The abuse and neglect experienced prior to engagement with the system for most children in the system is a series of traumatic events often over a period of months or years. Likewise, most children in the system are removed from their homes and separated from their parents. This separation frequently extends beyond the home and parents, including separation from siblings, extended family, pets, friends, neighbors, teachers, etc. Sixty-five percent of children in the child welfare system experience multiple placements, during which the children repeated suffers from both the separation and a loss in security (National Working Group on Foster Care and Education, 2011). Sixteen percent of children experience six or more placements while in care (National Working Group on Foster Care and Education, 2011). Further, the child welfare system is woefully under-resourced and under-staffed, resulting in unmet needs and additional trauma for children. Finally, the termination of parents' rights and failed permanency both constitute traumatic events for the children who experience them.

There is a high prevalence of the need for mental health treatment among children and adolescents in the child welfare system. It is estimated that as high as 80% of children in the child welfare system have mental health problems (Kerker & Dore, 2006), and 26% percent of children in the child welfare system have high levels of emotional and behavioral issues (Kortenkamp & Ehrle, 2002). These rates are significantly higher than those experienced by children outside of the child welfare system, even when controlling for socioeconomic status and family structure (Kerker & Dore, 2006; Kortenkamp & Ehrle, 2002). The child welfare system is under resourced to meet the substantial mental health treatment needs of these children. As a result, children with mental health treatment needs are frequently not provided treatment or are provided inadequate treatment for their level of need (Brenner, Southerland, Burns, Wagner, & Farmer, 2014; Kerker & Dore, 2006; Raghaven & McMillen, 2008). Further, researchers have highlighted the overuse of psychotropic medications to manage the emotional and behavioral issues exhibited by children in the child welfare system (Raghavan & McMillen, 2008; Zito et al., 2008). Even among children in treatment foster care—an intensive treatment-focused intervention for youth with emotional, behavioral, and mental health problems—questionable polypharmacy practices and high reliance on non-psychiatrist medical doctors to prescribe and oversee mental health treatment are alarmingly common (Brenner, et al., 2014).

The transition from mental health services geared for children to those provided to adults is fraught with obstacles for FFY (Dworsky & Courney, 2009; Jones, 2014; McMillen & Raghavan, 2009). Approximately 30% of FFY have clinical mental health problems six months post having aged out of the child welfare system (Jones, 2014). As high as 50% of these FFY could benefit from mental health or substance abuse treatment (Jones, 2014). However, as youth age out of the child welfare system, there is a drop in mental health service utilization of about 60%, with between 9% and 11% of FFY receiving mental health services within the first year of aging out of the system (Jones, 2014; McMillen & Raghavan, 2009). This is in part because nearly half of FFY do not have health insurance, not all insurance plans include mental health services, and the out-of-pocket costs of mental health services are often cost prohibitive (Courtney et al., 2011; Dworsky & Courtney, 2009; McMillen & Raghavan, 2009). The transition to adult mental health services is often the first point where FFY have autonomous power to make decisions about their care. The sharp decrease in utilization of mental health services reflects for many FFY a dissatisfaction with the treatment and its outcomes (McMillen & Raghavan, 2009). Similarly, a lack of health insurance, cost of care, limited knowledge about the health care system, and a lack of transportation all contribute to FFY not seeking or receiving necessary medical care (Courtney et al., 2011).

Focusing on Resilience to Improve FFY Postsecondary Outcomes

Building awareness around the barriers and outcomes for FFY is a critical step in narrowing achievement gaps and attainment disparities for FFY. However, deficit-focused inquiry presents limited opportunity to identify actionable practices educational institutions can take to steward FFY achievement on their campus. Likewise, a focus on deficits can serve to amplify negative stereotypes that have lasting negative impacts on FFY. In contrast, research that recognizes resilience and other strengths demonstrated by foster youth and FFY can be used to engineer changes necessary to steward FFY into and through postsecondary education.

Research that focuses on resilience can identify means to improve the postsecondary outcomes of FFY. Resilience is not a fixed personal attribute held by some and not others (Ecclestone & Lewis, 2014). Instead, resilience is

Educational Barriers and Resiliency of

Foster Youth in America

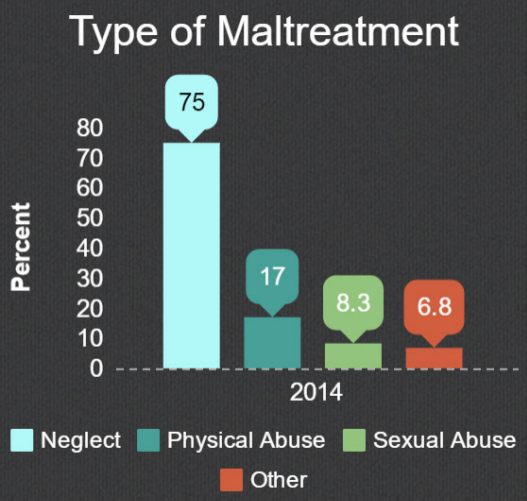
In 2014, the number of children who were in...

3.2 million
Maltreatment Reports

702,000
Indicated Cases

415,129
Foster Care

Compared to a national average of 42%, only about 10% of former foster youth aged 18-25 years old enroll in postsecondary education.



Educational Barriers

Secondary
• Enrollment delays • Changed placements and schools • Inconsistent attendance/truancy • Over medicated • Untreated mental and behavioral health issues

Postsecondary
• Insufficient / late financial aid • Low college knowledge • Food insecurity • Homelessness or dangerous living environments • Involvement with criminal justice • Untreated mental and behavioral health issues

Protective Factors That Support Educationally Resilient Foster Youth

Personal Strengths
• Sense of autonomy • Social competence • Problem solving abilities • Sense of purpose • Achievement motivation

Support Structures
• Academic support • Assistance securing stable housing • Assistance with food, financial, and other emergency needs • Personal counseling and guidance

Sources: Brenner, Southerland, Burns, Wagner, & Farmer, 2014; Child Welfare Information Gateway, 2016; Children's Bureau, 2016; Cooper, Mery & Rassen, 2008; Courtney, Dworsky, Brown, Cary, Love, & Vorhies, 2011; Curry & Adams, 2015; Hernandez & Naccarota, 2010; Morrison & Allen, 2007; National Working Group on Foster Care and Education, 2011; Wolanin, 2005

a process both temporally and contextually bound wherein the individual adapts to adversity with a successful outcome (Garmezy & Masten, 1991; Greene, Galambos, & Lee, 2003). Resilience in any given instance is the result of a complex interplay of the individual's characteristics, social and familiar supports, and systematic support systems that are available when the individual is faced with adversity or trauma (Waxman, Gray, & Pardon, 2003).

Resilience can be supported through development of protective factors by either by changing the support structures and associated resources available to FFY or by building the personal strengths of FFY (Benard, 1993; Morrison & Allen, 2007; South, Jones, Creith, & Simonds, 2016). Personal strengths that correspond to resilience include a sense of autonomy, social competence, problem solving abilities, and a sense of purpose can contribute to successful navigation of adverse conditions (Benard, 1993). FFY who are strong in these areas of personal strengths, may both influence the resources available to them, and be better positioned to effectively utilize these resources (Hines, Merdinger, & Wyatt, 2005). Support structures consist of a network of people and resources that help FFY to prepare academically, secure stable housing, address emergency needs, face personal challenges, secure financial resources and assistance, and advocate for themselves effectively (Hernandez & Naccarato, 2010).

Interventions designed to promote resilience processes among foster youth have been shown to empower foster youth with new behavioral models and increase access to important support structures. These interventions targeted at youth in early childhood through adolescence have resulted in fewer placement disruptions, increased pro-social behaviors, increased positive affect and reduced rates of depression, reduced substance use, reduced likelihood of running away, and lower rates of teen pregnancy (Leve, et al., 2012). Similar interventions that promote the intentional development of protective factors at the family, school, and community levels have shown to lead to improved primary and secondary educational outcomes for foster youth (Morton, 2016). Additionally, practitioners have been encouraged foster youth in actions designed to build resilience by developing foster youths' personal strengths, including building their autonomy, sense of purpose, social competence, problem solving, and achievement motivation (Morrison & Allen, 2007).

Universities and community colleges across the country are developing new and expanding existing services tailored to support FFY (Fried, 2008). While these programs vary to reflect the local context, they primarily focus on foster youth outreach, housing, financial aid, and mentoring (Fried, 2008). Further, these programs typically utilize a designated coordinator, have external champions, utilize external resources (both fiscal and otherwise), and tap external expertise and guidance (Fried, 2008). Specifically, these programs provide students with academic and career advising, tutoring, mentoring, housing assistance, scholarships and tuition waivers, and referrals for mental health and other services (Hernandez & Naccarato, 2010).

Research on initiatives aimed at improving postsecondary outcomes for FFY have shown positive outcomes (Geenen, Powers, & Phillips, 2015; Hernandez & Naccarato, 2010; Kirk & Day, 2010). However, it is also clear from the existing literature these efforts reach a small fraction of FFY and there is still substantial knowledge needed to test and expand these interventions at scale (Hernandez & Naccarato, 2010; Kirk & Day, 2011). In most occasions, the efforts to serve FFY are rarely integrated with the other services offered at the institution and they rely heavily on an individual staff coordinator or a small staff (Cooper et al., 2008). These positions have a high rate of turnover and are provided limited professional development opportunities (Cooper et al., 2008). Further, these initiatives often do not have access to the level of support necessary to meet FFY needs, especially in the critical areas of financial aid and housing (Cooper et al., 2008).

Existing research on effective means of supporting FFY is limited and is primarily reflective of supports offered in university settings. While there are substantial gaps in the literature, the lack of research on serving FFY at community colleges is notable. This omission in the research is especially problematic given the role of community colleges in providing access to postsecondary education for underserved populations, including students of color and low-income students. Further, while there is substantial theoretical and growing empirical evidence supporting the development of resilience processes through targeted interventions, there is a limited knowledgebase on the implementation and scaling of these practices. Finally, research shows that practitioners' understanding of resiliency is varied and further study is needed to develop effective professional development resources for practitioners who are designing and implementing resilience-based interventions (South et al., 2016). Overall, research and evaluation are needed to understand the most effective means of supporting FFY on community college campus. As stated in Fried (2008),

> The many opportunities that community colleges offer to first-generation and underrepresented students also need to reach young adults who come through the foster care system. It might be their only—and certainly their best—chance to escape the daunting challenges that life has presented them, and to enjoy the benefits and privileges afforded by a higher education. (p. 39)

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