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TRANSFORMING OUTCOMES TO INCREASE PARTICIPATION IN THE INDEPENDENT LIVING PROGRAM SPONSORED BY SUNRISE CHILDREN'S SERVICES

Richard R. Burslem

University of Kentucky, rbu243@g.uky.edu

Author ORCID Identifier:

 <https://orcid.org/0000-0001-8756-480X>

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Richard R. Burslem, Student

Dr. Tricia Browne-Ferrigno, Major Professor

Dr. Justin Bathon, Director of Graduate Studies

TRANSFORMING OUTCOMES TO INCREASE PARTICIPATION IN THE
INDEPENDENT LIVING PROGRAM SPONSORED BY SUNRISE CHILDREN'S
SERVICES

DISSERTATION

A dissertation submitted in partial fulfillment of the
requirements for the degree of Doctor of Education in the
College of Education at the University of Kentucky

By
Richard R. Burslem
Lexington, Kentucky

Director: Dr. Tricia Browne-Ferrigno, Professor of Educational Leadership Studies
Lexington, Kentucky
2021

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<https://orcid.org/0000-0001-8756-480X>

ABSTRACT OF DISSERTATION

TRANSFORMING OUTCOMES TO INCREASE PARTICIPATION IN THE INDEPENDENT LIVING PROGRAM SPONSORED BY SUNRISE CHILDREN'S SERVICES

Research demonstrates the transition for aging-out foster youth evidences they are not equipped with the necessary tools to live a self-sufficient adult life. Many children who age-out of the foster system have encountered trauma at multiple levels. Sunrise Children's Services is an agency in Kentucky committed to changing negative outcomes for this population of individuals.

The optimum goal for children and youth is for them to grow up within their biological family where they receive guidance and support as they mature. For some individuals that is not an option, and the government along with agencies like Sunrise are focused on helping these individuals be successful and productive human beings once they reach adulthood. Turning 18 years old is tragically problematic for many adolescents because one's chronological age does not automatically endow adulthood on an individual.

Through this research I sought to understand the proclivities of emerging emancipated youth who choose to participate in Sunrise's Independent Living Program and to discover reasons why some of their peers choose not to participate. This understanding helped guide development of recruitment materials intended to inform and inspire aging out clients to receive benefits that include being a participant in Independent Living.

KEY WORDS: [Foster Youth, Aging Out, Independent Living, Outcomes for Out-of-Home Care, Mentoring]

Richard R. Burslem

(Name of Student)

04/29/2021

Date

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SERVICES

By

Richard R. Burslem

Dr. Tricia Browne-Ferrigno

Director of Dissertation

Dr. Justin Bathon

Director of Graduate Studies

04/29/2021

Date

DEDICATION

To the young people that talked with me: This dissertation is your story. You told me that you needed support, and you want to have hope. I pray you will find both and be able to have your dreams fulfilled. You are my heroes!

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Without the support of my wife Vicki, this dissertation would not have happened. She has always been my cheerleader, advocate, and in many instances my editor. Thank you for who you are and your constancy at every level in my life. I love you with all my heart.

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CHAPTER 1

CONTEXT AND SUPPORTING LITERATURE

According to the federal Children’s Bureau, within every ten seconds one allegation of child abuse is reported. Of the 3.5 million abuse reports, approximately 656,000 of those reports are substantiated, which equates to 1 child abused every minute (Children's Bureau, Administration on Children, Youth and Families, 2019). In the United States of America, between the years of 2013-2017, the average number of children in out-of-home care (OOHC) due to experiencing child mistreatment was 424,279 (*The AFCARS Report*, 2018). That means that these children were receiving foster, relative, residential, institutional, or other care from adults other than their biological parents. Approximately 116,000 youth leave the foster care system annually, which includes individuals between the ages of 16 to 21 years who are categorized as emancipated adults (Fowler, Marcal, Zhang, & Landsverk, 2017). Of that group, approximately 20,000 are 18-year-olds. Although now considered adults by governmental standards, they are known to be one of the most vulnerable groups of young adults, consistently experiencing poor outcomes in relation to financial distress, mental health, employment patterns, and high rates of withdrawal from higher education. Concomitant with these outcomes are poor prospects for their social mobility and living conditions (Melkman & Benbenishty, 2018). Although emancipated as defined by age, these young adults typically lack personal attachment and permanency over time that anchors their personhood in an unresolved past, which often leads to an uncertain future.

As of January 2021, approximately 9,200 of Kentucky’s children are in OOHC among the over 400,000 youth in OOHC nationally. Prior to their emancipation,

individuals in the age range between 14 and 17 years are eligible to enroll in pre-Independent Living through the Kentucky child welfare system, an all-inclusive program that includes life skill classes on topics covering approaches to becoming employed, managing money, and utilizing community resources, housing, and educational resources available to them in their area. Even though Kentucky has approximately 2,200 youth in the 16-18 year grouping in its OOHC population, only 258 individuals (11.9%) in that age group have taken advantage of the alternative traditional living arrangement (Foster Care FACTS, 2019). “In this arrangement the youth is under the supervision of the agency but without 24-hour adult supervision, is receiving financial support from the child welfare agency, and is in a setting which provides the opportunity for increased responsibility for self-care” (Independent Living Programs, 2019).

Sunrise Children’s Services had a total population of 282 foster and residential care clients in OOHC on January 11, 2021. These 282 clients included 89 young people between the ages of 15-18 under Sunrise’s care. Thirty young adults were in our ILP. Eight of the clients in that cohort came from Sunrise’s foster care or residential programs.

While the passage to adulthood is granted governmentally, the preparation and support for this dramatic change in status for emancipated youth is insufficient. Their poor outcomes demonstrate a need for Sunrise Children’s Services to change its strategies on behalf of this very vulnerable population. The purposes of this action research study were to develop strategies to identify ways to increase participation in Sunrise’s transition program so that they may be able to receive all its benefits and support needed for their future.

Understanding Child Welfare

Understanding foster care in the United States historically is imperative to understanding how those antecedents were the impetus that have yielded a significant and enduring change in the current child welfare system. Policy at the federal, state, and local levels has been enacted to help provide a path of life for the foster-youth population upon leaving structured care. However, while legislative actions vis-à-vis policies and mandates have been established with positive intent, the aspired outcomes have not resulted—with emancipated youth still encountering high rates of homelessness and imprisonment from criminal activity, unemployment and use of public assistance, limited educational attainment, and poor mental and physical health (Spencer, Collins, Ward, & Smashnaya, 2010). This reality is the foundation for the question guiding this research: *What opinions held by foster children including alumni, those in independent living, and those choosing to not participate in IL programming, as well as their caseworkers, would assist Sunrise to better inform and positively affect a foster care client's perspective and improve the percentage of foster children to participate in ILP each year?* The literature reviewed below informs the foundation upon which findings answers to this question are based.

Children who have been displaced from their nuclear family confront multiple barriers, both internal and external, that they must face and overcome to enable a higher probability of their successful transitioning to adulthood. The lack of a significant adult-child relationship serves as a major barrier to success, while the opposite also holds true: An adult's presence and personal commitment can help a child gain the internal strength required to overcome those barriers to becoming a resourceful adult. As the data will

show, a significant relationship with a healthy adult is essential for a foster youth to envision a promising future. Life-giving mentors, or at the least an adult who can stand alongside an emancipated adult as they transition to living on their own, are a critical connection point for a young person's resiliency and decision making. Those affiliated with Sunrise are guided by this assertion: "What we would do for our own kids, we need to do for the kids at Sunrise."

Study Context

Sunrise's Independent Living Program (ILP) was started in 2013 and is a partnership between the Department for Community Based Services (DCBS), Sunrise Children's Services, and the young person. Starting with five applicants in its first year to 30 youth participating in the ILP at the time this research commenced (Sunrise Census Report, January, 2021), Sunrise has seen an increase. Yet, given the benefits of the ILP, a question remains as to why the other aging-out youth elect not to participate. The current two-page brochure about Independent Living (Appendix C) includes the following statistics about why a young person should consider participating in the ILP:

50% will have some type of gainful employment by the age of 24

20% will be homeless after reaching the age of 18

3% will earn a college degree at any point in their life

71% will have an annual income of less than \$25,000.

The caption under these statistics states, "But it does not have to be this way. NOT FOR YOU" (Sunrise Brochure for Independent Living, 2019).

As Vice President of Marketing and Advancement, I can expand and enrich the information packet provided in addition to developing other approaches that capture the

interest of the pre-IL client. The hopeful outcome would be that current and future young people under our care receive more complete and positively stated information about the options available for them to consider in preparation for this next phase of life. The intent of redesigning the brochure and the creation of other materials such as various forms of digital media and video testimonials is to allow me to interact with and receive feedback from the current IL clients. Through the surveys I can also glean their perspectives regarding their passions, future educational goals, and what support structures they think they will need to achieve those goals. I perceived that survey data would inform me about the IL client's sense of connectedness with another adult, such as their specialist, who is part of the team guiding them through the process of decision making. For the foster youth to decide whether to recommit with the state and come under Sunrise's care for three to four more years or not, is a significant fork in the road for them. It is incumbent upon us to help the transitioning youth want to take the most productive and supportive pathway that enables their success as an adult.

The context and setting for performing the research was Sunrise Services' marketing department, and the study participants included (a) staff members who work directly with the independent living clients, and (b) the current Sunrise independent living clients. Study participants were asked to complete surveys and questionnaires and may potentially be asked to participate in interviews.

Challenge of Leadership Practice

In 2017, only 12 young people out of the total of 78 available population of foster care took advantage of the IL opportunity. Two dropped out of the ILP within a few months of their emancipation. From residential care, only 4 out of the 12 youth chose

Independent Living; they dropped out within a few months of being in the program. As of January 21, 2021, there are 30 individuals enrolled in our IL program. Only eight individuals out of that cohort came from Sunrise's programs.

On January 25, 2021, Sunrise Children's Services) interfaced with 78 youth: Male and female youth in residential care (24 hours a day, 7 days a week). The youth ranged in ages from 6 to 17 years with 32 between the ages of 15 and 18 years. Among those who turn 18, many return to live with family, extended family, friends or have gone on to be on their own. Two 17-year-old young ladies enrolled in pre-IL program that was started at the Glendale residential center with the intent to proceed to a full IL program once they age out. Historically, those who have entered the IL program from residential care have a very low rate of retention.

Research questions. The primary focus of this research was to determine the preconditions that need to be in place to affect positively a foster care client's perspective on choosing Independent Living as a step toward developing his or her career or educational pathway. Given the low percentage of participants entering the IL program at Sunrise and our desire to see a higher participation, the following two questions guided this research:

1. What are the factors that influence a pre-aging out individual's thinking about future study and work, including perceived barriers and support needed to be successful?
2. What preconditions need to be in place that will positively affect a pre-aging out individual's perspective on choosing independent living as a step toward developing their career or educational pathway?

From an internal point of view, the marketing materials created by Sunrise Children's Services lack appeal to the very population for which it matters most. The brochure was written from a perspective that lists the negative statistical odds for a foster child entering adulthood. As a marketing piece created to supposedly motivate pre-independent living candidates, it had not been successful with increasing our rate of enrollment. Our marketing materials needed to be reconfigured to convey a positive statement of what young people *can* do to be successful. Additionally, the two-page glossy flyer was not appealing to young people. Kenny Williams, Vice President over Community Based Services (CBS), superintends the Independent Living Program. His assessment of the recruiting documents was very clear:

The materials do not connect to this generation. There is nothing that would draw them in. The best way to appeal to them is to create an online modality or video that has them interface with what an apartment looks like and having real people talk with them via a video link on a website that is appealing to young people. Content is not king, presentation is. (Personal conversation, January 10, 2019)

Significance of organizational problem. Because Sunrise Children's Services has had a long history of serving children, it is important to state that "organizational change is not separate from an organization's history or from other circumstances from which the change emerges. Rather it should be regarded as a continuous process that occurs in the historical, cultural, and political contexts of the organization" (Choi & Ruona, 2011, p. 60). While there is so much history linked to Sunrise, it had become apparent to that how we did business then and in the future required change (e.g., more technologically innovative in how we seek business, employees, and partners; more effective communication across many locations). The result of those actions were intended to make Sunrise a better organization whose focus is on assuring hurting

children heal. One strategy perceived as essential was promoting the benefits of IL from a positive perspective to increase the young people who choose to participate in supportive structures that they need to beat the odds stacked against them.

History of the Child Welfare Movement

The history that surrounds the protection for children in the United States of America can be divided into three periods. The first originates from colonial times to 1875 and is known as the era where there was little, if any, child protection. The next era spans from 1875 to 1962 where non-governmental child protection agencies emerged. The last era represents the modern era of government sponsored child protection services (Myers, 2008).

Colonial era to 1875. The colonial era was generally circumscribed by religious practices and a slow-growth economy based on the exchange of goods and services that were generated and used in the context of small communities. The family unit was integrated with work, social systems, and community, thus making it the economic unit of this emergent society. Although there was a high birthrate, approximately two-thirds of all children died before the age of four. Those who lived past this age were expected to start contributing labor as soon as possible by helping with household and farming chores, caring for younger siblings, and so forth. Hence, children moved quickly from infant status to serving essential economic functions for their families. “Children were perceived as a scarce and valued resource for the nation, but little attention was paid to individual differences or needs” (McGowan, 2014, p. 11). With moderate to high death rates of parents, children bereft of parents were taken care of by next of kin. Kinship care was prevalent because the Judeo-Christian ethic of attending to the needs of the

orphan and widow was a high value, and children whose parents died or were unable to support them were often taken in by family.

The strength of the emerging townships as social systems provided a degree of familiarity within the community. The strength of the community also promoted fictive kinship: Neighbors or friends known to the children and, while not family, the orphan would be taken in. If those options were not available, other less enviable options existed for their care. For example, children could be auctioned off to other families who were paid a fee for their keep, sent to almshouses or poorhouses where they were warehoused, which particularly occurred in more dense townships and cities, or become indentured servants through which they were also taught a trade (McGowan, 2014). The perspective of the child from society's point of view was that they were property. "The goal was to make provisions for dependent children that would best serve the interests of the community, not the individual child" (p. 12). The next two eras demonstrated a transition from perceiving the child as property to one acknowledging that a child is a person with diverse needs during each phase of life.

Orphan trains. America's population growth rate accelerated with the influx of immigrants who came from many other parts of the world seeking refuge. "Beginning shortly after the War of 1812, torrential immigration and the nation's uneasy transition to industrial capitalism had divided American cities into hostile camps of the affluent and the desperately poor" (O'Connor, 2001, loc. 55). Mass poverty was a burgeoning social disease whose major victims were most commonly children. Large port cities like New York grew so quickly that housing and other infrastructural systems were insufficient to sustain the influx of slaves and immigrants in addition to the existing population. In

1849 New York's first police chief reported that 3,000 children—close to 1 percent of the city's total population—lived on the streets and had no place to sleep but in alleys and abandoned buildings or under stairways (O'Connor, 2001, loc. 78). Almshouses were abundant but were eventually deemed inappropriate for children. The orphanage, known as orphanage asylums, grew rapidly. "In 1825 New York City had two such institutions, but by 1866 there were more than sixty such organizations" (Kadushin, 1974, p. 520).

In the backdrop of this era, the orphan train movement emerged. D. Bruce Ayler, a descendent of the orphan train movement, wrote the following reflection on its history.

The Orphan Trains were needed at the time they happened. They were not the best answer, but they were the first attempts at finding a practical system. Many children that would have died thus lived to have children and grandchildren. It has been calculated that over two million descendants came from these children moved out of the cities and into farmland in the west. The trains gave the children a fighting chance to grow up. (Charles River Editors, 2016, loc: 18)

The credit to creating the orphan train movement belongs to Charles Loring Brace. He emerged in the backdrop of a culture that was beginning to shift away from perceiving orphaned children as property for auction or sale as indentured servants to individuals needing care and nurturance, hopefully leading to a permanent home. He tipped the balance in that direction. Thinking he was going into church or the pulpit ministry, Brace took note of the conditions that many children were experiencing at this time in New York City. His diary noted a nine-year-old girl begging, ten-year-old boys smoking and gambling, and other girls prostituting themselves (O'Connor, 2001). His diary entry was his burning-bush experience that transformed his life to becoming a rescuer for the orphan in New York City. The Children's Aid Society (CAS) was birthed in 1853 as a result.

The goal of CAS was to find homes for children throughout the country. Brace wanted to remove the children from the New York influences of abject poverty and consequences of living off the streets. These orphans were not criminals but rather young people who were robbed of their youth. Asylums and poor houses were not proper places for them because as they would have had to share living space with adults who were considered derelict or deranged. His vision was to remove the children from this impoverished living experience and move them to the open air beyond the city (O'Connor, 2001). Additionally, many of the children were not orphans; rather, they were children whose parents may have been alive but were unable to care for their children. Thus, the mission of the CAS was to find homes for children and place them in more stable conditions. The western United States was transforming into fertile agricultural land, and many farmers and ranchers needed young children to assist with chores. In 1857, 328 children were sent out to Illinois, Michigan, and Iowa. "Charles Loring Brace almost single-handedly forged the philosophical foundations of the movement, and of many other efforts on behalf of poor children and remains to this day perhaps the preeminent figure in American child welfare history" (O'Connor, 2001, loc. 138).

The needs of children became more nationalized as did orphan care by virtue of the trains that contained living advertisements for the plight of the child, both generically and specifically. Each city where the orphan train visited was canvassed with ads ahead of time, creating at least sympathy for the children's condition. The orphan train movement eventually placed over 105,000 children throughout the United States. "The main goal of the Emigration Plan was to remove children from slums, where opportunities were scant

and ‘immoral influences’ plentiful, and to place them in ‘good Christian homes’” (O’Connor, 2001, loc. 168). By the end of the 1800s, Children’s Aid Societies had expanded into other major eastern cities and moved further west by virtue of the child emissaries who had been sent.

The intent of the orphan-train movement was to provide safe places for children away from the cities whose resources mixed the indigent, the vagabond, and the children together in almshouses or sold the children into indentured servitude. There are mixed reviews regarding the overall morality and efficacy of this movement. Nonetheless, the orphan trains are often cited as the origins of the modern foster care system and Brace as foster care’s “father” (Rymph, 2017, loc 571).

Foster movement from 1875 to 1962. While there was a growing awareness and concern for child welfare at the national and governmental level, the religious community continued to assume most responsibility for the care of children. During this era, legal and protective measures for children had not taken root in the national conscience of policymakers. Orphanages and foster care movement societies in both Catholic and Protestant traditions proliferated in this time, especially in the aftermath of the War Between the States. For example, Martin Van Buren Van Arsdale created free foster homes for dependent children. By 1916 there were 36 homes located in midwestern and southern states (McGowan, 2014).

The orphan care and foster home movement spread throughout the United States, expanding the growing awareness of the need as population centers changed from rural communities to growing cities, especially in the East. Yet, the period between the turn of the century in 1900 to the beginning of the depression era in 1930 was a period of

massive growth and uncertainty on many levels. Immigration, economic fluctuations locally and globally, natural disasters resulting in medical epidemics, and aftermath of wars revealed a greater internal problem mounting against the safety and wellbeing of our future's hope—America's children.

According to Myers (2008), “It was not until 1875 that the world's first organization devoted entirely to child protection came into existence, the New York Society for the Prevention of Cruelty to Children” (p. 449) or what was then known as the NYSPCC. That organization however did not come about in a manner that one would think: How the correlation of the treatment of animals to that of children came about is both lamentable and revealing. The legal auspice provided by the American Society for the Prevention of Cruelty to Animals (ASPCA) and a child abuse case against a guardian family for a child in their custody was used as leverage to create the NYSPCC. Non-governmental agencies eventually took root in other cities, and by 1922 over 300 agencies like the NYSPCC were formed across the nation.

Perspectives varied about orphaned children. Some people castigated them as products of sin, and thus, some children were condemned with a religious ire as born “‘into sin and poverty’ and were likely to become ulcers of society or become a class from which spring mainly the great tides of wretchedness and crime, unless intervention occurred” (Charles River, 2016, p. 23). Others were swayed in a positive direction for action as the awareness of their condition increased. With awareness, at least the hinge of commitment to action swung open. Pity can also be the impetus for creating change. But the heart that moves with compassion can move mountains. From the Catholic orphanages and those sponsored by various other denominations, the commitment to

taking care of the orphan grew as a movement.

Sunrise Children's Service's beginning. The idea of Sunrise Children's Services emerged during the mid-1800s when four women who were members of the Walnut Street Baptist Church in downtown Louisville Kentucky, realized the needs of orphaned children in the aftermath of the War Between the States. In the midst of a cholera epidemic, they started the Orphan's Aid Society. In 1869, the Society of the Baptist Homes for Helpless Children was founded, and committees were appointed in the various churches to identify orphans in their local communities. In 1915, a charter and bylaws for Kentucky Baptist Children's Home (KBHC) were created. Because Glendale, Kentucky, was a stop along the railroad line, the Glendale Center received orphan placements from as far away as New York and other distant localities. It also served the needs of the local and broader community. While working on the farm, young people were taught skills and discipline by the staff. Over the years of its existence, Glendale served over 300 children.

Child welfare in transition. As time passed, the Emigration Program, which Brace had envisioned, was being questioned as many reports were mixed regarding how the children were faring. The rationale never varied, though, as the belief was strongly held that homes that provided work, shelter, and food were better than homes stricken with poverty. (O'Connor, 2001)

At the 1893 National Conference of Charities and Corrections, the Children's Aid Society reported that of the 84,318 children placed between 1853 and 1893, 85% had been placed successfully. A similar study on placement outcomes conducted at 10-year periods between 1865 and 1905 found an increase in favorable results- but the study also noted unfavorable results for 38% of the boys and 20% of the girls by 1905. (Charles River, 2016, loc. 594)

In 1929, the Orphan Train sent its last group of boys out for adoption. The Glendale

Center still received children from across the commonwealth, but no longer from the Orphan Train.

Through increasing awareness of the problem and maturing seeds of activism sown in the past, the plight of orphaned or abandoned children was taking root in the political and national conscience of the nation. “The responsibility of the state to know how its dependent children are cared for was not [however] recognized and was little discussed until the end of the nineteenth century” (McGowan, 2014, p. 19). Yet, child labor laws were beginning to emerge as the number of children with needs beyond the local societies’ ability to handle continued to grow. A shift from the nongovernmental agencies, such as the SPCC, to government management and control likewise emerged. The scope of child welfare needs, though, were greater than what nongovernmental agencies could solve. Child labor laws were beginning to legislate compulsory education for children, meaning that children were expected to be in school more than in the fields or factories. However, the government services that did exist were more a function of local government control. The first White House Conference on Children did not occur until 1909, and the Children’s Bureau was established three years later in 1912.

Each of these children represents either a potential addition to the productive capacity and the enlightened citizenship of the nation, or, if allowed to suffer from neglect, a potential addition to the destructive forces of the community. . . . The interests of the nation are involved in the welfare of this army of children no less than in our great material affairs. (Congressional Record, 60th Congress, 2nd session, February 15, 1909)

The national conscience was becoming awakened, and society began to look to protect children who were greatly disadvantaged due to no fault of their own. The White House Conference on Children planted the seed “that children should not be removed

from their own home for reasons of poverty alone” (Kadushin, 1974, p. 52). Thus, the perspective of the child began to change.

Childhood is a social construct, with a great many variations among societies in how childhood is defined. Only gradually in America did a recognition develop of childhood as a clearly differentiated life period and children as a distinct demographic group with special natures, unique needs, and capacities (Kadushin & Martin, 1988, p. 47). With this shift in view of the child came the concomitant promotion to protect children’s rights and wellbeing. Between 1911 and 1931, 45 states began to require children to stay in their own homes (Bremner, 1983). When the Social Security Act was formalized in 1935, funding was provided to help protect children who were living at a subsistence level; the Aid to Dependent Children (ADC) program was included in that legislation and provided financial assistance to needy dependent children. The United Nations General Assembly in 1954 unanimously adopted and proclaimed a Declaration of the Rights of the Child. In 1962, the ADC program was renamed Aid to Families with Dependent Children (AFDC).

Child welfare movement to present day. The legal and social status of children during the late 19th and early 20th centuries continued to shift away from their being viewed as property to being unique humans needing protection with more focused attention as he or she grew into adulthood. “American middle-class culture became more child-centered. There gradually emerged a perception as precious beings of special importance who needed particular protection and careful prolonged preparation for adulthood” (Kadushin & Martin, 1988, p. 57).

Family, or the notion of the family, was also being redefined. Shifting roles of

men and women, women entering the workforce, higher divorce rates with its impact on children, contraception and legalized abortion were germinal aspects contributing to a broadening shift about the definition of family in a society where mores were being redefined by social forces. For better or worse, the number of children placed out of home also increased. As a result, the ultimate impact for the child in relationship to the growing child welfare movement was to encircle him or her with more services and greater accountability for those who were attending to the outcomes of those services. The government was taking on a bigger role to ensure the safety and wellbeing of the child. In 1967 foster care financial support became mandatory in all states.

Child abuse was highlighted in the 1960s when Henry Kempe and Ray Helfer brought attention to the battered child syndrome.

The “discovery” of the “battered child syndrome” in the 1950s and early 1960s has long been credited with the initiation of a national movement that spurred the development of federal and state policies, programs, and clinical interventions aimed at preventing and treating the problem of child maltreatment in the U.S. During this time the nation’s child protective services system was established and institutionalized and several major policy initiatives established a legal and programmatic framework within which the problem of child maltreatment is presently addressed. (Guterman & Berg, 2014, p. 212)

With the initiation of home visitation services, it was not until the most recent three decades that child abuse prevention efforts began to emerge on a visible scale—a strategy that has reconfigured the landscape of child abuse prevention. The Child Abuse Prevention and Treatment Act (CAPTA) was passed into legislation by Congress on January 31, 1974. A new agency, the National Center on Child Abuse and Neglect, was formed to manage and assume responsibility for administering CAPTA. The legislation has undergone many revisions since that time, being amended several times over the past 18 years and as recently as 2016. “The last two laws were the Justice for Victims of

Trafficking Act of 2015 (P.L. 114-22) and on July 22, 2016, by the Comprehensive Addiction and Recovery Act of 2016 (P.L. 114-198)” (U.S. Department of Health and Human Services, 2019, p. ?).

The perspective of the child has changed since the days when they were considered “for centuries roughly in this order: father, cattle, mother, child” (Kadushin & Martin, 1988, p. 51). The continued shift in protecting and promoting children’s rights increasingly incorporated language in its policies about *what as in the best interest of the child*. In 1980, “the right to be raised in a safe and permanent family placement” was enacted in the Adoption Assistance and Child Welfare Act (P.L. 96-272). New terms arose, such as *least restrictive environment*, were added to accommodate the child, which likewise promoted their living with their biological family whenever possible. Awareness of child abuse and neglect at a national level also saw an increase in foster placement throughout the 1980s. The number of youths involved in foster care grew yearly from 301,000 to 556,000 between 1980 and 2000 (Wertheimer, 2002).

Many additional laws were passed during this time.

The policy mandate is to find permanency for youth by reunifying foster children with the biological parents and if that not possible, to find these children a new home through adoption or guardianship. However, some children do not find permanency and remain in foster care until they reach the age where they are considered legally an adult. (Jones, loc 435)

While the public policy mandate is to reunify children with their family of origin, reunification is less than a reality for the adolescent child. According to the 2018 AFCARS report, 73% of those who exited foster care were 12 years and younger with a median age of 7.5 and a mean of 8.5. The facts suggest, those who remain in the system

Table 1.1***Legislative History on Youth Leaving Care***

Date	Public Law	Intent and Description
1980	P.L. 96-272. The Adoption Assistance and Child Welfare Act	Established a program of adoption assistance, strengthened the program of foster care assistance for needy and dependent children, improved the child welfare, social services, and aid to families with dependent children programs.
1986	Title IV-E Independent Living Initiative, Pub. L. No. 99-272	Provided funding to states ensuring when foster youth are emancipated from OOHC they are prepared with the skills and experience to become self-sustaining adults.
1997	Public Law 105-89 Adoption and Safe Families Act of 1997	Continued to improve the safety of children, promoting adoption and other permanent homes for children who need them in a timelier manner, and support. Extension of IL services.
1999	H. R. 3443 (1999). Chaffee Foster Independence Program (CFCIP)	Provided more funds to states to foster youth up to 21. States had more flexibility for extension of IL services. Medicaid and other needed support were extended. Development of National Youth in Transition Database (NYTD).
2002	Promoting Safe and Stable Families Amendment) (PSSFA) (Public Law No. 107-133)	Established Educational Training Vouchers (ETV's) Funding for post-secondary education and vocational training assistance for emancipated youth.
2008	Fostering Law No. 110-35	Increased age eligibility extending to 21 years, pro-management planning for younger youth (pre-IL) and current IL youth with housing, finances, mentorship services, education and health insurance.

(Children's Bureau, 2015)

until they reach the age that is considered an adult will then be emancipated by virtue of chronological time. As legal adults they are essentially discharged to figure life out on

their own. Over time Congress passed many policies to provide funding to the states to prepare youth for the transition from foster care to emerging adulthood. These actions were a recognition that while foster care is meant to be temporary, for many youths the reality is remaining in the system until they age out. It was recognized that the state and federal governments had responsibilities for these youth that did not end with emancipation. (Jones, L, 2017, loc 449)

Table 1.1 shows the various laws enacted since the 1980s when The Adoption Assistance and Child Welfare Act was enacted.

Progression of independent living services 1990-Present. The John H. Chafee Foster Care Independence Program (CFCIP) was created in 1999 in response to the problems of youth once they transitioned out of foster care to independent living as an adult. This act, now known as Chafee, brought awareness of issues faced by children after leaving foster care arose when statistics gathered from the after-care stage were abysmally poor. *Aging-out* is the phrase used for youth who become emancipated and declared independent by state statutes. The intent of CFCIP legislation was to expand services—including the teaching of independent living skills—in addition to meeting the material needs of the emerging adult if he or she was to be able to live independently (Chafee, 1999). States were given the capacity of providing Medicaid for foster youth up to age 21. Support for housing was also a component of the allocations set aside through the combination of both federal and state funds.

Important to the success of the CFCIP were the outcome measures required by the states to report to the federal government. The National Youth in Transition Database (NYTD) tracked youth to age 21 and reported on the services provided through independent living programs, the individuals served, and the outcomes of that support. Permanency is always the goal, and the CFCIP program goals emphasized permanence

for youth and increased funding for adoption payments. “Most importantly, CFCIP enables states to expand the scope and improve the quality of educational, vocational, practical, and emotional supports in their programs for adolescents in foster care and for young adults who have recently left foster care” (Mallon & Hess, 2014, p. 39). Child and Family Services Reviews (CFSRs) were instituted as a “systematic effort to focus on the outcomes rather than the processes of the various programs” (Mallon & Hess, p. 39).

In 2002, the national Promoting Safe and Stable Families Amendment (P.L. 107-133) was passed, which focused its primary emphasis on the protection of children and strengthening of families by providing for increased availability of community-based programs for the support of the youth and their families. This amendment authorizes state grants in four primary categories: (a) family support, (b) family preservation, (c) time-limited reunification services, and (d) adoption services (Chronology of Major Federal Legislation Affecting Children, 2017).

Each year approximately 20,000 young men and women nationally age out of foster care when they reach their 18th birthday. The statistics portray a picture of young people who lose critical supports that otherwise are typically afforded to children in intact families. Because emancipation for many of these young people is a trajectory without financial, educational, and social supports, they typically “fare poorly compared to their peers across young adult domains, including mental health problems, substance abuse, and underemployment” (Fowler et al., 2017, p. 27). To help change the trajectory of youth, a federal law was passed in 2008, The Fostering Connections to Success and Increasing Adoptions Act (P.L. 110-351), which extended child welfare services to the age of 21. The intent was premised on continuance of care and support for youth who not

yet ready to assume full adulthood, thereby minimizing at-risk behaviors with better outcomes for completing their education, developing job skills, and entering the workforce.

The Fostering Connections to Success Act (FCSA) or Public Law No. 110-35 strengthened the emancipated foster youth (EFY) in three specific ways. First, the age for overall support was amended to the 21 years and more youth could receive the educational training vouchers (ETV). Second, additional funding was appropriated for housing but under the condition that the foster youth was in high school or a vocational program and would graduate before they turned 20. They also had to work at least 80 hours a month, be enrolled in a job readiness program, and have their plan in place within 90 days of their 18th birthday (Stott, 2013). The third benefit behind this law was an increased eligibility for ETVs by allowing states to receive matching funds from the federal government to ensure that EFY were secure in their housing needs up until age 21. The Patient Protection and Affordable Care Act of 2010 (Public Law No. 111-148) provided that by 2014 all EFY were eligible for Medicaid coverage until age 26, regardless of their income. However, not all states have participated in the Medicaid expansion to cover these youth (Houshyar, 2014).

Beyond this landmark legislation, other statutes have been passed legislation or regulations that shift emphasis to reunification of youth with the biological family, kinship, or relative care, and speedier terms for reaching permanence in what is called a *forever home*. In 2017, the amendment entitled The Family First Prevention Services Act, (FFPSA), which modifies and adds to parts B and E of Title IV of the Social Security Act, seeks “to invest in funding prevention and family services to help keep children safe

and supported at home, to ensure that children in foster care are placed in the least restrictive, most family-like, and appropriate settings, and for other purposes” (H.R. 253 Family First Prevention Services Act of 2017). The direct effect is to help families become healthy, stay healthy, and be a place where the notion of family can cause others to thrive. The term, *least restrictive* implies that youth in OOHC are placed in a residential care facility as a last resort, while promoting the potential of reunification with their biological family, if possible. Realizing that returning home may not be a viable option for some emancipated youth, the FFPSA provides diverse support, known as *wrap around services*, which is a model of community-based care that bundles individualized services around a specific youth and family designed to maintain a sense of home and community (Dore & DeToledo, 2011). According to its proponents, wraparound is “an individualized, family-driven and youth-guided team planning process that is underpinned by a strong value base that dictates the manner in which services for youth with complex needs should be delivered” (Bruns et al., 2011, p. 315). In summary, this major change modifies the types of services “aimed at preventing removals, and limits IV-E support for congregate care placements to two weeks (with very significant exceptions)” (Family First Prevention Services Act Update, 2018, p. 1).

Examining the Outcomes for Foster Youth

The step beyond being a foster child is the option given to all foster youth: Independent Living (IL) because they will become independent one way or another. The statutes listed in Table 1.1 related to IL show a legislative progression toward (a) providing greater support that includes wrap-around services, (b) assuring appropriate housing accommodations, (c) emphasizing educational attainment, and (d) creating close

connections with adults who become mentors and care providers. However, youth who age out of foster care to *independent living* are more likely to experience homelessness, unemployment, unplanned pregnancy, legal system involvement, substance abuse, and absence of even the most basic health care services. They also are less likely to have a high school diploma, earn enough to support themselves, or participate in post-secondary education or training. (Avery, 2010)

Emerging Adults

Many would agree that the optimum goal is for children to grow up within their biological or nuclear family. For some, individuals that is simply not an option, and thus, the government focuses on helping these individuals be successful and productive human beings once independent. Turning 18 years old is problematic for many adolescents because one's chronological age does not automatically endow adulthood on an individual. The traditional view that age 18 was the entry stage into adulthood was promulgated by psychoanalyst Erik Erikson, who organized the human lifespan into eight stages extending from birth to death. "The stage of Young Adulthood began at age 18, following the end of Adolescence" (Gallo & Gallo, 2011, p. 1). The notion of when adulthood is now conferred is around the age of 25—that is, age 25 is the new 18. Adulthood as a stage is more of a period of emergence, rather than a specific age attainment. This shift evidences many factors that require extending the time period it takes for a child to reach full adulthood. "Youth are depending on their parents and family for support until a much later age than had formerly been the custom in U.S. society" (Jones, 2018, loc. 88). Arnett and Taber (1994) identify three developmental domains in which transitions to adulthood take place:

[The] cognitive domain, which is characterized by the development of adult reasoning that includes not only logical reasoning but also subjective feelings and personal experiences, a sense of responsibility to others, and interdependence within a larger society; the emotional domain, which is characterized by the development of autonomy from one's parents (not complete separation but mutuality and reciprocity as equal adults) and the ability to establish intimacy in adult relationships; and the behavioral domain, which is characterized by the establishment of firm impulse control and complying with social conventions. (p. 400)

While emerging adulthood is the new standard, this question begs an answer to the question, how can we expect those who have been pulled out of their homes to possess those normal developmental domains cited above, much less have the internal resilience and capacity to figure out life on their own? Young people in foster care are redefining normal for themselves daily as they face circumstances prior to entering care and after they enter care. With no stability, former foster youth have never known a sense of security that comes from a stable family life. Foster youth are more than likely victims of maltreatment, due to having grown up in poverty, while encountering parental dysfunction such as substance abuse disorders, domestic violence, and mental health issues. That is their normal. By the time they reach the age of 18, expecting any person to bring coherence into their circumstance is not realistic. The issue at hand is this: If there is delayed maturation of a child to emerge gradually within the support of intact families, what are the implications for foster youth?

It needs to be recognized that foster youth are facing two transitions. The first, the FFY are now independent or emancipated—they are truly on their own. While all foster children are not the same and foster parents are often well intended,

nearly all studies of children in foster care show that they experience more developmental problems than other children while growing up. For example, children living with foster parents are more likely than children living with biological parents or stepparents to have behavioral and emotional problems,

problems in school adjustment, and to be in poor physical or mental health.
(Wertheimer, 2002, p. 8)

The second issue is that foster children no longer receive support from a system that has been their guardian. For most of these youth, permanency has not been their experience. Reaching permanency goals for young children is one thing, for older adolescents it means another. Statistics demonstrate that less than 20% of youth in care are adopted after age 14 (Foster Care Numbers Up for Fifth Straight Year, 2019). According to Jones (2018),

the cumulative research indicates that youth in foster care often do not get the assistance they need to complete high school, go on to college or other educational opportunities, obtain and keep a job, or find and retain stable and safe housing. (loc. 66)

A gap in services needs to be filled between foster youth and the obstacles they have to overcome. While the government has created significant policies, there is a greater need for creating a scaffold upon which these young people can continue to climb. Jones (2018) further asserts,

Readiness for independent living is contingent on an adolescent having tangible life skills (sometimes called hard skills) such as being able to find and maintain an apartment or a job, and intangible (soft) skills such as problem solving, stress reduction, and anger management. (Jones, 2018, loc. 697)

Gaining requisite life skills can only be effectively accomplished by adults who connect with foster youth from within and outside the program and who provide the needed tools beyond providing the soft and hard skills of learning information. Connections with adults must be made.

Outcomes for Foster Youth: Research Results

Various outcome studies have assessed whether EFY, now known as alumni, have received services prior to emancipation that truly prepare them for readiness and

continuing IL services. Those outcomes provide a fuller dimension of understanding the issues that need to be addressed for this population. The following three studies present services provided and the resulting outcomes for EFY: (a) Midwest Evaluation of the Adult Functioning of Former Foster Youth (Midwest Study), (b) Casey National Study, and (c) Northwest Foster Care Alumni study.

Midwest Study. The Midwest Study examined 732 youth and the outcomes they experienced regarding being discharged from foster care. The former foster youth were from Illinois, Wisconsin, and Iowa. The study began when the Title IV-E Independent Study Program was initiated, which was an evaluation of its effectiveness in its first phase (Courtney & Barth, 1996). Interviews began as 17 and 18-year-olds were still in foster care and were then interviewed four times every two years until the age of 26, thus providing a longitudinal picture of how foster youth were transitioning in their independence and into adulthood. Information was gathered over defined domains of wellbeing as part of the accountability expectations of FCIA such as education, employment, financial status, sexual behavior, and mental health to name a few. This study collected data as a follow up to the Foster Care Independence Act of 1999. The short summary of outcomes found that (a) EFY were experiencing mental health issues, (b) 32% of females in the sample encountered pregnancy, and only 10.5% of the 732 individuals completed 12th grade. Although 20% of study participants reported no school changes, 34% experienced five or more school changes.

Children may lose four to six months of academic progress each time they change schools, which puts most foster-care children years behind their peers. Falling behind is

Table 1.2

Impact of Foster Care on School Mobility

Responses	Total (N-732)	
	#	%
Missed at least one month of school due to foster care change	131	17.9

Number of school changes due to foster care situation		
0	149	20.4
1	102	13.9
2	87	11.9
3	92	12.6
4	51	7.0
5+	250	34.2

Source: Chapin Hall Report, Midwest Study, 2004

not the only problem with frequent school moves: School transfers also decrease the chances a foster care student will graduate from high school (Lahey, 2014). Additional data showed close to 50% of former foster youth received special education services indicating the presence of learning challenges or disabilities (Courtney, Terao, & Bost, 2004). These data have helped to create a baseline of policies and services that meet their needs.

Casey Study. The Annie E. Casey Foundation provides foster care, permanency planning, family preservation, and support services to more than 4,000 children annually. The Casey Family Program, the umbrella for the Annie E Casey Foundation is a privately endowed, long-term family foster care agency. Their services are viewed as the standard above all other service providers. One reason is their caseload ratio is the lowest in the child welfare industry, allowing them to focus on providing services for the child instead of fitting the child into the available services. Their ability to challenge the

way child welfare is being done is also driven by a value system of strong collaboration with the community (Jones, 2018).

This research evaluated 1,087 foster care alumni who had received services for at least one year from Casey programs. Respondents ranged from ages 20 to 51 years old and were asked these questions: “How are maltreated youth placed in Casey foster care faring as adults?” “Do they differ from other adults with regard to functioning status?” (Pecora et al. 2003, p. 1). Because Casey youth had less than one placement per year (average number before Casey was 2.9) high school graduation rates for Casey alumni exceeded the general population, and employment rates were slightly lower than the general population (Pecora, et al., 2003).

Alumni Study. The Northwest Foster Care Alumni Study (NFCAS) was a collaborative study between the University of Washington, Harvard Medical School, The University of Michigan’s Survey Research Center, Casey Family Programs, and the state welfare agencies of Oregon and Washington. Case record reviews were conducted for 659 alumni (479 of whom were interviewed). The sample consisted of approximately 60% women and 54% people of color who had participated either in (a) the Casey Family Programs or (b) the Oregon or Washington state child welfare agencies between 1988 and 1998. The average age of this cohort was 24 years with an average length in foster care of 6.1 years. The study examined mental health, educational attainment, and adult preparedness as well as highest degree earned, job history, and financial wellbeing. The outcomes of the study showed a repeating theme with a high rate of mental illness, varied educational attainment, and poor outcomes for employment (Pecora, et al., 2005).

As a result of the NFCAS, the following recommendations were made related to

mental health, education, and employment. First, placement stability or lack thereof was a factor that contributed to both health and educational outcomes. Reducing the number of placement transitions must be a priority. Lower placement rates would also to improve graduation rates. Second, additional support is needed to help foster youth not only complete their high school education but also pursue higher education or vocational options. Third, continued connections with adults serving as a mentor or a parent figure help the FFY through transitions.

Typologies of Adaptation to Emerging Adulthood

A significant amount of data can be accompanied with a sense of dysphoria: How to combine, correlate, and bring focus to this issue is more important than the numbers, but the numbers do tell a story. Loring Jones (2018) drew data from five major studies regarding what works and what does not for foster youth to become successful. The data from that analysis found between that 50-60% of foster youth are not connected to caring adults and are either somewhat successful in life management or failing. Drawing from various studies “to get an idea of how well foster youth adapt to emerging adulthood, and what factors contribute to successful and unsuccessful adaptations” (Jones, 2018, loc. 4128), he continues to conceptualize three topologies of adaptation for foster youth after they leave foster care: *Connected and Succeeding*, *Struggling but Connected*, and *Problematic and Not Connected* (loc. 4128). Table 1.3 outlines the three categories and the characteristics associated with each of those typologies.

Table 1.3

Typologies of Adaptation to Emerging Adulthood

Category	Percent	Characteristics of Adaptations
Connected and Making it	40-50%	Exhibits similar patterns of general population Disproportionately female. Avoidance of early marriage and pregnancy Higher rate of high school completion and higher ed pursuit
Connected and Struggling	25-35%	Avoid drugs and criminal justice system Have access to social supports and highly connected Higher rate of pregnancy Disproportionately female Lower rate of high school completion Erratic work histories and low-income wage Less likely to live independently Smaller support network
Problematic and Not Connected	20-40%	Mostly male Do not have a high school diploma or GED High drug usage and mental health problems Multiple foster placements and school transfers High rate of crime, incarceration and homelessness

(Jones, 2018, p. loc 4165)

Educational deficits, lack of financial independence due in part to limited or sporadic educational experiences, not having a permanent place to call home, and poor physical and mental health are normative for the foster youth who is now considered emancipated. To expect EFY to transform into a competent, independent adult at the age of 18—when many young people from stable homes are likewise struggling with living as independent adults—is a misplaced expectation today. The reality that adolescents today are taking longer to achieve adulthood has been established—even with the emotional and financial support of their parents. Unlike children from stable homes, foster youth face two major transitions: (a) turning 18 like other adolescents and (b) leaving foster or residential care as wards of the state without the safety net of child welfare. Some foster children have called residential care, as good as it may be, a form of

therapeutic jail. While providing comfort, support, and a place to live, foster parents are still surrogate parents at best. The reality is foster children experience multiple traumatic events during their childhood from being abused and removed from their home to having to fit into milieu setting not of their own choosing. Foster youth face herculean obstacles to overcome. Their needs are greater and more aptly met beyond the programs available.

Thus,

too many graduates of the foster care system are undertrained and underemployed. Many youth and young adults are part of a large group of marginalized youth who age out of the system without adequate skills for independent living and without a support system. (Pecora et al., 2019, p.38)

Needs of Foster Youth as They Transition into Adulthood

When being in care other than one's home has been the foster youth's norm for years, leaving care and learning to be independent becomes fraught with challenges far greater than those experienced by youth living in intact family homes. Foster children and youth are state kids whose life experiences depend upon when they were removed from their birth family. Being a foster teenager means there is a statistical mountain of challenges to overcome—especially for youth who enter the system after the age of 12 than those prior. According to Mallon and Hess (2014),

A fairly large percentage of older youth in foster care (38 percent were ages twelve to twenty years old); the long lengths of stay (9 percent had been in care three to four years and another 6 percent had been in care for five or more years); and the percentages placed in institutional (9 percent) and group care (6 percent) rather than foster homes or other settings. (p. 467).

Permanence has been elusive for the emancipating youth, and the subsequent outcomes have already been discussed by Jones (2019) and others. The state has not been the best parent—but it was never meant to be either. So why would former foster youth be motivated to return to foster care? What can Sunrise do for these young adults to help

them get the support that they really want? The dilemma is evident in the voice of a former foster child.

Statistics show disconnectedness. The statistics shown in this study provide ample evidence that foster youth lack the social and emotional supports which provide, in a normal family context, the cognitive and psychological resiliency to make decisions that are productive for oneself and beneficial for others. Metzger (2006) states, “[m]any leave care disconnected from supportive adults, services, and socioeconomic supports that would significantly increase their chances of becoming productive, self- sustaining adults” (p.399). Jones (2018) identified those who were in the Connected and Succeeding cohort (see Table 1.3) as having self-sufficiency and resiliency because there was a significant connection between the EFY and an adult.

Dale Suttles, the president of Sunrise makes this statement repeatedly, “what we would do for our own children we need to do for our kids at Sunrise.” He states, there needs to be more services and supports called wrap-around services for this population of individuals. “Wraparound is an individualized, team-based service planning and care coordination process intended to improve outcomes for youth with complex behavioral health challenges and their families” (Bruns et al., 2010). Networks of support systems offer several modalities connecting young people to their passion, which then helps them discover their purpose. The current IL clients spelled it out. What kids like them need is support, some structure, helping the individual find and pursue their purpose, and love.

Independent Living Program. The initial aim of the Independent Living Program (ILP) was to develop independent living services (ILS) or life skill training (LST) through didactic components as provided by their case worker. The delivery

varied between a classroom setting to hands-on mentoring. The assumption is that the knowledge base, known as life skill knowledge (LSK), an emancipated foster youth (EFY) has, may be an important factor impacting how successful he or she might be in their transition. The role that the government took on was significant in filling the gap by providing funds for educational economic assistance and with the adoption of Public Law No. 107–133 or the Promoting Safe and Stable Families Act (PSSFA). The educational training vouchers (ETV) provided for postsecondary education pursuits. Though funding was provided, the amount of aid was still insufficient for the youth in transition.

CHAPTER 2

ACTION RESEARCH DESIGN AND PLAN

As an agency we do not do a good job in recruiting our own residential and foster care clients to the IL program. My specific role in this MMAR study was to serve as primary investigator in selecting study participants, conducting the interviews, and analyzing data collected. There were four major groups of interviewees. The first group were the IL specialists in which I had no supervisory role over. The second group was the marketing team in which I was the direct supervisor. The third group were the IL clients themselves who granted permission to be interviewed but I had no official role in supervising or advising them. The fourth group of data was collected from child care workers from those outside of Sunrise. The desired outcome of this research is creation of a useable recruitment tool for our IL clients.

Research Setting

The context and setting for performing the research involved personnel at Sunrise including (a) members of the marketing department, (b) foster care directors, and (c) independent living coordinators who work directly with the current IL clients. These adults are one group of study participants. The clients who are 18 years and older and are currently enrolled in the Sunrise IL were vital in shaping the development of recruitment tools during the diagnosing, reconnaissance, and evaluating phases of this research. While I intended to obtain both quantitative and qualitative data from the non-IL participants, those former clients were not available.

Research and Study Plan

The purpose of this action research was to gather information to guide the

transformation of recruitment tools for potential IL clients that increase foster care youth in understanding of its benefits for their adult living. Another aspired outcome was increasing the number of adolescent foster youth choosing to participate in the IL program that provides support for (a) work or workforce development, (b) employment certificate programs, (c) completion of two-year college degree, or (d) completion of four-year college degree. Once the IL clients decide their course of action, Sunrise caseworkers continue to support them through goal achievement. In addition, the IL client is provided a living stipend, monetary vouchers for continuing education and books, and other living expenses.

One of the major hurdles a young person must overcome in choosing to participate in IL is the requirement to commit to the oversight by the state for more years of their life. This immediate hurdle from a FFY's perspective is recommitting to being kept in someone else's care and custody for additional years. During a conversation with Dr. Jay Miller, Dean of the College of Social Work at the University of Kentucky, regarding foster youth who are attending UK, he stated: "They want nothing to do with the state. They would rather get loans to pay for their college rather than get any more state funds" (personal conversation, June 10, 2019). Kenny Williams, Vice President of Community Based Services, oversees this component of Sunrise; he likewise confirmed that a young person must choose being a ward of the state for more years. During a personal conversation with a specialist who works with teenagers at Sunrise, she asserted that it is "crazy to think that these kids will choose to be a ward of the state any longer than they have to be." In essence, these young people have experienced therapeutic jail. They have lived with people who are not their parents or family members and feel guilty

about being where they are. To want to be part of that system for more years is not perceived to be a viable option. Therefore, my action research was guided by these two questions: (a) *What are the factors that influence a pre-aging out individual's thinking who reside in 24-7 institutional/foster care or has been in family-based residential/foster care about future study and work, including perceived barriers and support needed to be successful?* (b) *What preconditions need to be in place that will positively affect a pre-aging out individual's perspective on choosing independent living as a step toward developing their career or educational pathway?*

Action Research Plan

Following the pattern of diagnosing, reconnaissance, planning, acting, evaluating, and monitoring, this MMAR study was conducted to understand what was needed to redesign and implement a targeted marketing approach for Sunrise's current foster youth with the goal of increasing their understanding of its benefits. The MMAR framework is outlined above in Figure 2.1 and illustrates each phase.

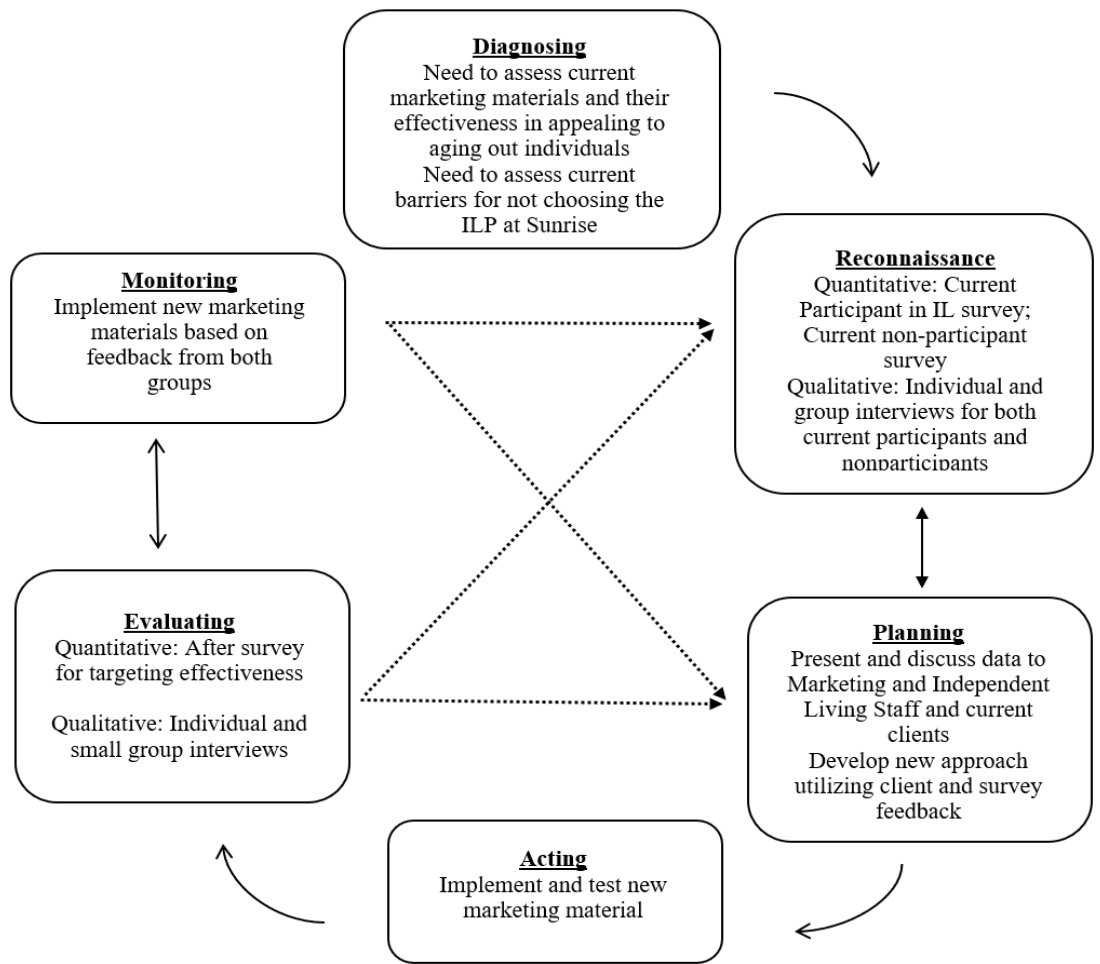


Figure 2.1 MMAR Framework. Adapted from frameworks recommended by Ivankova (2015).

Mixed-Methods in Action Research Design

Combining mixed methods and action research for this study supports a systematic process of inquiry for developing a marketing tool for the transitioning aging-out youth supported by Sunrise Children’s Agency. First, the research methods targeted a specific audience to assure that the marketing approach (a) appeals to them effectively, (b) considers their specific needs, (c) is both relevant and applicable, and (d) relates to their context in real terms. This pragmatic approach in utilizing data collected via

quantitative and qualitative strategies assures an effective plan for appealing to this population of individuals. Second, the data should reveal how effectively Sunrise connects with clients on a personal and caring level that empowers them as individuals. The relevance of this data also aided our approach in working with our clients as caregivers and mentors.

Study Design Rationale and Plan

As stated previously, the purpose of this action research study was to provide information to guide redesign of recruitment tools for potential IL clients that increase foster care youths' understanding of its benefits. A concurrent quantitative and qualitative mixed methods approach was utilized to gather diverse data, which was assessed and evaluated to develop an intervention as a solution to the problem (i.e., too few youths choosing to utilize Sunrise services).

The research design addressed the unique needs and goals for improving marketing materials intended for the aging-out Sunrise clients (i.e., 18-year-olds), improving collaboration between the marketing and foster/independent living divisions of Sunrise, and increasing interest in pursuing the ILP for Sunrise's aging-out clients. The additional feedback provided by the surveys also aided our specialists in understanding the needs of their clients in a more personal manner. Questions were asked of the IL clients about a significant adult in their lives and the impact that adult has had. That information provided further insight for Sunrise specialists as they seek ways to support their clients.

Diagnosing phase. The current number of Sunrise's clients who choose to enter the ILP is very low. Although there are other mitigating factors why these clients do not

remain engaged with the state, understanding the barriers for which Sunrise has control was important. Hence, data related to this issue were gathered through surveys and interviews. *The specific focus centered on the barriers the foster youth experienced, the appeal of the recruiting material presented in the current IL program brochures, and the amount of support received in aiding the foster youth in determining their benefits.* One key facet was learning whether there was a significant adult in their life who helped them with their questions and how connected they were with that adult. The extensive literature review in Chapter 1 justified the need for a significant adult to be *more than present* in the life of a foster youth. The typologies described by Jones (2018) indicated those foster youth who were strongly connected with an adult were more successful in terms of pursuit of education, employment, and housing security.

Reconnaissance phase. The purpose of the reconnaissance phase was to gather quantitative and qualitative data from the participants concerning their viewpoints and experiences regarding the IL program and their preparation toward understanding its benefits. Additionally, the queries gathered insights and provided guidance for improving the current content and the approach used in delivering the information. This phase provided a lens through which I could view the perspectives and experiences of both current IL clients and the foster alumni who chose not to participate in the program.

Planning and acting phase. Data gathered by surveys and interviews informed development of the intervention. The initial examination of the materials and the feedback allowed the marketing and independent living team to examine and then develop materials that are more relevant to the clients served. The ensuing intervention was then monitored through frequent feedback and discussions.

Evaluating phase. The purpose of the evaluation phase was to examine how the proposed revised marketing materials affected the IL staff and clients' perceptions either positively or negatively, with the focus and weight being given to the client's perspectives. The mixed methods data gathering via surveys, small group interviews through Zoom meeting software, and individual interviews generated rich data. By utilizing a concurrent study design, the results of the qualitative and quantitative data strands were integrated to provide corroborating evidence and well-validated conclusions (Ivankova, 2015).

Monitoring phase. This phase was an ongoing process of product improvement that served as the feedback loop between caseworkers and clients and assisting in keeping information relevant. A secondary data collection focused on how well Sunrise caseworkers were connecting with their clients.

Data Collection Phase

Action research combines empirical knowledge gained through hands-on experience while rational knowledge emerges from scientific reasoning vis-a-vis data collection procedures combining qualitative and quantitative methodologies (Ivankova, 2015). The focus of this intervention was to gain insight into understanding the decision-making process that former foster youth undergo in determining whether to choose or not choose to participate in Sunrise's IL program. An assumption by Sunrise personnel was that clients' decision is based on what information is provided, how it is presented, and what format helps them decide positively participating in the program. Following are the strategies used to gather the information needed.

Quantitative research strand. The surveys used in this MMAR study employed

Likert-scale prompts spanning a range of categories. Scaling is the branch of measurement that involves construction of an instrument that associates qualitative constructs with quantitative units (Trochim, 2006).

Data collection reconnaissance phase. The scales used in the reconnaissance phase followed a five-point or three-point range so that the current participants had freedom to choose from five response options: (1) strongly disagree, (2) disagree, (3) neither agree or disagree, (4) agree, or (5) strongly agree. Options with a three-point range were (1) somewhat agree, (2) agree, or (3) strongly agree. The information gathered through the first two surveys produced demographic information at its onset and information regarding the foster care client's preparation for and consideration of Sunrise's ILP. Quantitative collection included administration of three surveys deployed during the reconnaissance phase.

The first survey, titled Independent Living Participant Assessment (see Appendix A), was a researcher-created participant information survey informed by Farrugia's (2006) questionnaire titled, *Moving into Adulthood: Transition to Independence*. Farrugia's baseline questions provided the framework for development of participant's independent living perspectives. The questions posed were about IL client's current living situation, educational goals, and questions related to well-being. This quantitative survey was comprised of two sections. The first section gathered basic demographic information (e.g., age, gender, security of living situation, current educational status, employment status). The second section gathered their thoughts about the Sunrise Independent Living Program, how they were informed about the program, their initial thinking concerning becoming a participant, and their thoughts about why others do not

choose to participate in the ILP. Additional questions were posed to gather information about ILP and their perceptions about how information was provided (e.g., printed format, its significance, importance of involving IL specialist, perceptions about most effective information, prospects for recruitment of participants).

Appendix B contains the survey, *Non-Independent Living Participant Assessment*, that was intended to be administered to those who did not choose to participate in the ILP that Sunrise offers. The data were to help Sunrise personnel understand reasons for youth not choosing this program. Unfortunately, this survey could not be administered. When a former foster youth leaves an agency such as Sunrise, they rarely provide a forwarding address. A discussion is presented in Chapter 4 under Limitations of the Study.

Appendix C presents the quantitative survey titled *Brochure and Handbook Survey*, which contains three sections. The first section focused on the marketing brochure and its efficacy in providing the reader with information as well as its appeal in influencing the pre-IL clients in deciding to participate in the ILP program. Because some pre-IL clients may have never seen the brochure, a copy was provided with the survey. The questions regarding the brochure probed their thinking about what types of information might be effective for others looking into the ILP. The second section of the questionnaire asked respondents to review the existing IL Handbook concerning readability and helpfulness in decision making. The last section asked respondents to share their thoughts about learning from print material or a combination of print and online media and information needed to assist them in their decision making about choosing to participate in the ILP at Sunrise. The data acquired was intended to inform Sunrise about most appealing recruitment strategies. Data gathered from both groups was

critical in the reconnaissance phase of data gathering.

Data collection evaluation phase. The evaluation phase surveys followed similar Likert-scale patterns but differed from the reconnaissance phase options asking the respondent to appraise the video segment using this scale: 5=Definitely, 4= More than likely, 3=Likely, 2= A little, and 1= Not at all. Data were collected via surveys administered to Sunrise staff, childcare workers not affiliated with Sunrise, and IL clients not affiliated with Sunrise. Those scales also included a slider scale that held ratings valued from 1-5, where 1= Not at all and 5= Definitely. Additional prompts were added to the instrument allowing the respondent to provide opinions for what they liked or did not like and asked for their input to change. These data were identified as qualitative and are reported in that section later in this dissertation.

Collecting data used during the evaluation phase of this MMAR study was accomplished by assessing three groups of individuals via two surveys. *The Evaluation of IL Video- Staff* (Appendix H), which was administered to those *who work with young adults* (i.e., Sunrise staff members, those who work in the child welfare field but not at Sunrise). The second survey, *Evaluation of IL Video- Il Adults* (Appendix I), was administered to IL clients who are part of two different agencies: (a) Boys and Girls Haven, located in Louisville, KY and (b) Hope Hill Youth Services, located in Mt. Sterling Ky.

Qualitative research strand. Appendix F contains the survey that engaged the clients with four levels of questions about Sunrise' ILP. The first set of questions asked them about their experiences with acclimatization to the IL concept (e.g., degree and type of assistance about the IL program, clarity of information provided, sources of that

information). The second and third sets of questions asked the emancipated youth to think about their reasons for choosing to participate in the IL program and what specifically influenced them. The last set of questions asked for their input concerning creating a marketing strategy of their own design to help influence others to be a part of the Sunrise IL program. Appendix G contains the questionnaire prepared for those not participating in Sunrise’s ILP, which could not be administered due to lack of contact information for former clients.

Appendix H contains the questionnaire administered to the specialists gleaning their insight about their own clients who they mentor. These questions probed for understanding about why they think a young foster client will or will not participate in Sunrise’s IL program. Additional prompts probed their perceptions about their clients’ connectedness with adults. The data gathered was intended to provide insights about how best to connect with youth eligible to participate in Sunrise’s IL program.

Table 2.1

Plan for Collecting Data

Data type	Data Source	Purpose of Data Collected	Date(s) Collected
Quantitative	Appendix A	Given to current participants in IL Program. Baseline data regarding FFY experience and understanding decision making for IL program choice. Modality used- Qualtrics Survey	June-July 2020
Quantitative	Appendix B	Given to non-participating FFY Baseline data regarding FFY experience and understanding of their decision for not choosing	Not administered

Quantitative	Appendix C	IL program A copy of the brochure is given to groups of participants who will provide feedback providing insights into what appeals to the FFY client.	June-July 2020
Quantitative	Appendix D	Qualtrics Survey Solutions Data tables reporting the collection of information from IL clients determining why IL clients chose the IL program	June 2020
Qualitative	Appendix E	IL specialist interview questions understanding their needs as they serve this population	June-August 2020
Qualitative	Appendix F	Perception of information provided clients understanding of what it means to recommit. Modality used- ZOOM or phone interviews.	July-August 2020
Qualitative	Appendix G	Interview with non-participating IL clients to derive understanding of why client did not choose ILP.	Not administered
Quan/Qual	Appendix H	Evaluation phase- Sunrise IL Staff and non-Sunrise staff evaluation Assess/evaluation video/marketing project	February-March 2021
Quan/Qual	Appendix I	Evaluation phase- IL clients from other agencies. Assess/evaluation video/marketing project	February-March 2021

Plan for Data Collection

The overarching assumption concerning data collection was that those currently involved with the IL program would be the most accessible individuals for providing information. An incentive for participating in this study was award of a gift card for providing responses to the online survey and participating in the individual or group interactions.

Quality Assurance

The quality or validity of this mixed methods study involves being able to prove

the trustworthiness of the inferences that are made from the data collected. Quantitative data was collected from a modified scale titled, *Moving to Adulthood: The Transition to Independence*, adapted from Farruggia (2006). The components of that scale were appended with a researcher-created survey to fit the purpose of this research. That combined survey was reviewed and vetted by Dr. David Royse from the College of Social Work, University of Kentucky.

The subsequent quantitative scales used in assessing the production of a marketing video during the acting phase and evaluation phase were assessed for reliability using the SPSS software. The generation of an independent t-test provided an indication for reliability of those instruments.

The data collection instruments for the participant surveys used with staff and IL clients were provided to the IL staff ahead of their use for validation.

The validity of the qualitative data collection surveys were based on whether the findings accurately reflect viewpoints of the researcher and participants. Special validity concerns arise, however, in using this design that need to be anticipated by the proposal or mixed methods report developer. One concern is that the researcher may not use appropriate steps to develop a good psychometric instrument. Developing a good instrument is not easy, and adequate steps need to be put in place. (Creswell & Creswell, 2020, p. 246)

Dr. Royse also provided feedback on the formation of the qualitative questions, and his recommendations were implemented into the design of the evaluation phase collection instruments. There were no revisions suggested by the staff.

Data Analysis

Because data tells a story, the ability to link the raw data collected from the various surveys and results adds to the story. In this case, the data collected through the quantitative surveys from the IL clients during the reconnaissance and evaluation phases were analyzed to assess their connectedness to another adult, determine their primary

rationale for choosing the IL program, and the appeal of the marketing material. Qualitative data, obtained from the interviews added a level of richness and depth by providing a sense of personality to the responses.

Reconnaissance phase analysis. Having used a concurrent quantitative and qualitative approach for data collection, the quantitative surveys for the reconnaissance phase were analyzed utilizing the data analytics of UK Qualtrics. Measures of central tendency such as mean, median, mode, and standard deviation were used to create a picture of the 13 clients out of the 18 who responded to the survey. “Measures of central tendency—are statistical procedures that yield a summary score of what is standard or typical about a group of individuals in the study” (Ivankova, p.221). The key aspect of these data was to ascertain the patterns that may exist in the perceptions of the IL clients toward their acclimatization and inclination to commit to the IL program that Sunrise offered.

Interview data collected during the reconnaissance phase were also gathered through Zoom meetings and through individual interviews conducted either in person or over the phone. The qualitative data collected through interviews informed the researcher and aided the completion of marketing materials that were aligned by the contributions of both clients and staff members. An initial marketing video was created during the acting phase of the MMAR process.

Evaluation phase analysis. Once the initial marketing piece was created, the evaluation phase was used to determine the effectiveness of that video. Since Sunrise is part of a consortium of professionals in the private and state child welfare system, the marketing video was sent to Sunrise staff and those who work in the child welfare system along with the survey asking for input of its effectiveness. That same video was

sent to IL clients who are a part of two other independent living programs (i.e. not Sunrise) with a survey asking for their input.

SPSS software was used in the analysis of data during the evaluation phases to determine descriptive statistics including measures of central tendency and reliability statistics for the survey instrument used. The survey responses between the two groups of child welfare professionals were analyzed calculating the difference in means between the two scales given to the different cohorts. Also determined via SPSS analysis was the magnitude of change between surveys given to the different groups to determine Cronbach's Alpha, a measure of reliability of the instrument.

Utilizing a concurrent study methodology, evaluation was based on the analysis of data gathered through mixed methods surveys. In evaluating the results of the qualitative and quantitative strands, data were integrated providing a clear pathway for the creation of a final product. In that analysis, priority was given to the qualitative data gathered from the respondents.

Ethical Considerations

The population of study participants and Sunrise personnel were assigned pseudonyms. All data were kept under the vigilance of anonymity and stored on my personnel computer used by no other person.

Timeframe

The original timeframe for data collection was throughout the summer of 2020 with data analysis completed by the fall of 2020. The proposed timeframe had to be modified due to COVID-19 pandemic. All quantitative data collected via electronic surveys were completed by the end of July 2020. Interviews were conducted during

August 2020 via Zoom or telephone because in-person interviews were prohibited. Given the issues related to preventing COVID exposure to IL clients and staff members, multiple attempts were made to finalize development of the intervention project using electronic platforms. The last phase of data collection was established by the specialists who contacted the IL clients.

Conclusion

It was noted earlier in this dissertation that Sunrise does not do a good job in recruiting our foster and residential clients into our own IL program. Through this action research study, I sought to discover the perspectives of IL clients as well as those who work with IL adults to frame a marketing approach that would specifically appeal to the aging out young person. The data and findings of the reconnaissance and evaluation phases are presented in the next two chapters.

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CHAPTER 3

**RECONNAISSANCE PHASE FINDINGS AND
DESCRIPTION OF INTERVENTION**

The premise upon which this study was developed is that foster youth struggle to find both permanence and stability as they age out of agency care. Instability is normative for this segment of the population because the “average emancipated young adult entered care between the ages of 11 and 14 and experienced an average of 7 to 13 placements” (Scott, 2013, p. 219). Research has shown better outcomes for youth among those who participate in an independent living scenario after exiting structured residential care. However, the challenge is getting emancipated youth to *want* an independent living opportunity where they are still considered wards of the state. Kenny Williams, Vice President of Community Based Service (CBS), stated, “To think they want to re-up with the state, you’d have to be crazy” (personal conversation, November 7, 2019).

Problem of Practice

Among the foster and residential care cohort supported by Sunrise Children’s Services in 2019, approximately 40 young adults (i.e., those 18 years old) were eligible for ILP services. Only two from Sunrise’s foster care program entered the program. Within the residential care cohort (identified via referrals from the state system), 2 of the 12 youth chose Independent Living but quickly dropped out of the program. According to an IL specialist, “We need to do a better job of meeting with and helping our own clients in helping them know about and understand our IL program” (Zoom interview, June 8, 2020).

One of my assigned responsibilities as the Vice President of Marketing and

Advancement for Sunrise Children's Services was to develop an intervention that would address the challenge of having so few young adults wanting to participate in the ILP. This task also included the development of a new marketing approach and material in collaboration with the IL clients and the IL specialists. This identified problem of practice became the focus of my dissertation research. The following two questions guided this research:

- 1. What are the factors that influence a young person's thinking who reside in 24-7 institutional residential/foster care or has been in family-based residential/foster care about future study and work, including perceived barriers and support needed to be successful?*
- 2. What preconditions need to be in place that will positively affect a foster or residential care youth's perspective on choosing independent living as a step toward developing their career or educational pathway?*

This chapter begins with a report informed by the reconnaissance phase of this action-research cycle. The second part of this chapter presents the intervention created for Sunrise Children's Services.

Reconnaissance Phase Findings

During the reconnaissance phase, quantitative and qualitative data were gathered from and about our current IL clients and the IL specialists via administration of surveys, reviews of publicly available documents, and critique of other Sunrise promotional materials. The electronic surveys were administered via Qualtrics to the current IL clients and specialists. The data collected were used to guide the planning and acting phases of the action-research cycle.

Quantitative Findings

The purpose of administering the researcher-created participant information survey, *Independent Living Participant Assessment* (Appendix A), was first to analyze demographic information provided by the current IL clients. Eleven questions gathered specific information regarding their age, current educational and work status, and their thoughts about their future in terms of vocational aspirations. The survey questions were designed around four categories related the clients' perspectives and experiences, specifically

- How were the clients acclimated to the IL program and how they rated that experience?
- What were their thoughts regarding the reasons why they signed up for the IL program?
- What was their current experience like including their relationships with other peer IL clients and with their specialist?
- What were their thoughts regarding why young people like them do not choose to go into an IL experience?

The second survey, *Brochure and Handbook Survey* (Appendix C), asked respondents to reflect about the materials that were provided to them and how the information helped them understand the IL program. Another set of questions asked how they best learn and, given that, how might others their age respond to the recruiting materials. The last set of questions asked what type of recommendations they have concerning the best way to reach potential ILP clients. Those modalities listed included printed material, online or video formats, talking with an adult or a graduate of the program, or a combination of several formats.

The IL specialists informed their clients about participating in the two-part survey that would help others see the benefit of the IL program. They explained that the surveys were seeking their input to improve what and how to inform and recruit potential IL

clients. On June 23, 2020, the two-part survey link was sent to all 30 IL participants. Each survey respondent would receive \$20 gift card. The quantitative survey, *Independent Living Participant Assessment* (Appendix A), was opened on June 23, 2020 to 30 IL clients. After completing the first survey, respondents were then directed to take the second survey accessible via another web link.

Table 3.1
Demographic Information of Client Participants

Demographic Information	Response Rate (N)	Indicators
Age	18	8 age 18; 2 age 19; 5 age 20; 3 age 21
Gender	17	8 male; 8 female; 1 preferred not to indicate
Financial security	16	10 indicated they have enough to live on 4 indicated maybe they have enough to live on 2 indicated they do not have enough to live on
Job status	15	3 work less than 10 hours per week 7 work between 20-30 hours per week 3 work around 40 hours 2 work more than 40 hours
Type of work	10	6 responded they work in retail 3 work in fast food 1 works as a bank teller
Education	15	3 indicated that are currently in school 12 indicated they are not in school
Educational attainment	15	7 indicated that they have a high school diploma 8 indicated that they have taken some college classes
Desired educational	15	2 wanted to attain a certificate at a community college 12 wanted a college degree 1 wanted more than a college degree
Desired vocation	13	13 clients responded desiring the following careers: nursing, Spanish professor, dental hygienist, airline pilot, teacher, dentist, mechanic, construction worker (2x), social worker, cosmetologist, and business owner

Demographics of survey respondents. Table 3.1 shows the demographic information provided by the participants (e.g., age, gender, current job status, educational attainment, aspired career). Although 18 clients started answering the survey, only 12 completed the survey for a completion rate of 66%. In the discussion below, all responses (i.e., including those who did not complete the survey) are reported.

In thinking about their future goals, the clients were asked what they would like to do in terms of work or career path. Thirteen out of the 18 initial respondents provided their thoughts: nursing, Spanish professor, dental hygienist, airline pilot, teacher, dentist, mechanic, social worker, cosmetologist, with two young people listed owning their own business and two wanting to work in construction. The respondents provided information on how long they have been in the ILP: (a) Three respondents (21.4%) had been in the ILP from a few weeks to three months; (b) five respondents (35.7%), from three months to nine months; (c) no respondents from nine months to a year; and (d) six respondents having been in the IL program for more than a year (42.9%).

Perceptions and considerations about the program. As noted, Questions 1-11 on the survey gathered demographic information about the clients. The initial demographic data revealed that six (42.9%) of the clients have been in the ILP for more than a year and eight (57.1%) have been in the ILP less than nine months. The second part of Survey 1 presented 18 questions that generated responses to the four categories already listed. There were a variety of question formats used to gather information in part two of Survey 1. Responses to Questions 12, 13, 15, 17, and 20-26 were gathered via a Likert scale format were (a) *Strongly disagree*, (b) *Somewhat disagree*, (c) *Neither*

agree or disagree, (d) *Somewhat agree*, (e) *Strongly agree*. Corresponding values from 1 (i.e., strongly disagree) to 5 (i.e., strongly agree) were assigned for each response. A slider scale was used to rank preferences for Questions 14, 16, 18-19 and 28 while still utilizing a five-point range for data uniformity. The slider scale included five stars in a row with each one indicating a rank with One star corresponding to *Strongly disagree* and five stars corresponding to *Strongly agree*. A three-point scale was used to rate what they liked most about their IL experience in Question 29 (minimum value = 1; maximum value = 3). The three variants starting with *Somewhat agree* valued at 1, *Agree* valued at 2, and *Strongly agree* valued at 3.

The quantitative data from Survey 1 was segregated by themes into the following five tables. Table 3.2 displays the responses from the IL clients regarding their acclimatization to the program, the methods used to inform them, and what methods would they recommend to others. Table 3.3 contains the responses to questions inquiring why they joined the IL program. Table 3.4 shows the results about their perceived current experience based on responses to questions about their current safety, relationships formed, and their sense of hope for the future. Table 3.5 presents data collected about IL client's perspective on why they think other young people like them do not want to take part in an IL program. Table 3.6 contains the frequency of interaction with their specialist in present time in addition to their perception regarding their acclimatization to the IL program. Data analyzed and presented in this manner allowed me to integrate recommendations from each segment of the survey instrument addressing the problem of practice.

Table 3.2***Acclimatization of Clients to the Program***

Ratings of Clients of their Experience (n=13)	Median	Mode^a	M (SD)
Talking with my specialist was helpful in Understanding the IL program (n=15) ^b	5	4	4.43 (.76)
Talking with another person was more helpful than reading about it. n=15 ^b	5	5	4.33 (.82)
The packet of information was helpful (n=15) ^b	5	4	4.57 (.51)
Talking with a caseworker/specialist (n=13) ^c	5	4	4.38 (.74)
Something online or an interactive program such as an app (n=13) ^c	3	3	2.54 (1.33)
Talking with someone who graduated from the program (n=13) ^c	5	5	4.54 (.63)
Talk with another adult who cares about your future (n=11) ^c	4	4	4.27 (.75)

Note. ^a Multiple modes exist, largest value is shown.

Note. ^b The response *strongly agree* received a score of 5; *agree* received a score of 4; *neither agree or disagree* received a score of 3; *somewhat disagree* received a score of 2; and *disagree* received a score of 1.

Note^c A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

received about the program, noted “talking with” their specialist with an average of (M=4.43), and another person, (M=4.33). The mean rating (M=4.57) for “the packet of information was helpful” offered an indication that the information packet gave them an understanding as to what to expect. Later, the reader will see in the qualitative responses, each IL worker went over the packet with their client to help them understand the expectations of the program. A tentative conclusion is to be considered is connections are important.

Table 3.3***Client Inclination toward Joining the ILP***

Questions asked of clients (n=13)	Median	Mode^a	M (SD)
What were some of the things that helped you choose IL? ^b			
Wanting to do something with my life (n=14)	5	5	4.93(.26)
Wanting to get an education (n=15)	5	5	4.33 (.70)
Being on my own and having support along the way (n=15)	5	5	4.53 (.94)
Giving me time to decide what to do (n=14)	4	4	3.93 (.50)
I felt like I needed the extra assistance from Sunrise in helping me with my future (n=13)	4	4	3.69 (1.03)
The thought of going under state care for more years really did bother me, but given the benefits I would receive I chose the IL program anyway (n=13)	4	4	3.77(1.3)
I really did not have an option other than going into the ILP because I had nowhere else to go (n=13)	4	4	3.46 (1.39)

Note^a. Multiple modes exist, largest value is shown..

Note^b. A five-star slider scale was used. 5 star response received a score of 5; 4 star received a score of 4; 3 star response received a score of 3; 2 star response received a score of 2; and 1 start received a score of 1.

Table 3.3 lists client’s thoughts and inclinations toward joining the IL program. The strongest indicator why they joined was “wanting to do something with my life” (M=4.93). Getting an education (M=4.33) and being on their own (M=4.53) were also ranked high. Needing time to decide what to do (M=3.93) and receiving extra assistance from Sunrise was rated at (M=3.69). While being under state care was real, the benefits gained according to the clients metered a rating of (M=3.77). The consideration for going into the ILP as a last resort given that they had nowhere else to go rated at (M=3.46). A tentative conclusion to be considered is the clients, “Want[ing] to do something with their life,” which can be translated to wanting to have hope for their future.

Table 3.4***Rating of Current Experience***

Questions asked of clients (n=13)	Median	Mode ^a	M (SD)
If I had a chance, I would tell others to join ^b the IL program (n=12)	5	5	4.50 (.80)
Being in this program gives me more hope for my future (n=12)	5	5	4.58 (.67)
Being on my own gives me a strong sense of satisfaction ^a (n=12)	5	5	4.67 (.49)
I feel safe and secure in my current living arrangement ^a (n=13)	5	5	4.85 (.38)
I have a significant adult in my life I can go to and talk over things ^a (n=13)	5	5	4.00 (1.52)

Note.^a Multiple modes exist, largest value is shown.

Note.^b The response *strongly agree* received a score of 5; *agree* received a score of 4; *neither agree or disagree* received a score of 3; *somewhat disagree* received a score of 2; and *disagree* received a score of 1

Table 3.4 shows data reflecting the IL clients' thoughts and feelings with their experiences in the IL program. A key indicator for reflecting a sense of satisfaction is whether a person wants to talk about her or his experience. The converse can also be true. Yet, the ratings indicating they would tell others to join the IL program (M=4.50). Further, their having more hope for their future (M=4.58), being on their own gives them a strong sense of satisfaction (M=4.67), and having a safe and secure place to live (M=4.85) reveals a strong sense of well-being. The presence of having a significant adult in one's life revealed a positive rating of (M=4.0).

Tom, a former foster child, called the police on his mother and aunt when he was 15 years old because of their drug use in his presence. There was little food available in the motel room where they lived, and he always slept in his clothes. Tom was placed into

state custody, and he indicated his foster parents were good to him. Although he struggled about whether to recommit with the state as he was aging out, he eventually did and is proud of the apartment he now rents. The first thing he did was to set up his video gaming console because he wants to become a video gaming programmer. He now feels safe and secure. Another former foster child who completed the IL program and now a mother stated she is “thankful she has a place and will not be thrown out on the streets.” A tentative conclusion for the former foster is having a safe and secure in a place of their own was the highest rating.

Table 3.5

Why Others do Not Choose the IL Program

Questions asked of clients (n=13)	Median	Mode	<i>M (SD)</i>
Being under state care for more years (n=15)	5	5	4.60 (.71)
You're really not independent because you still have rules to follow (n=15)	4	4	3.87 (1.26)
People want to experience life on their own (n=15)	3	3	3.27 (1.08)
They don't want to be told what to do (n=15)	5	5	4.53 (.72)
They just want to go back home (n=15)	4	4	3.67 (1.25)

Note^a. Multiple modes exist, largest value is shown.

Note^b. A five-star slider scale was used. 5 star response received a score of 5; 4 star received a score of 4; 3 star response received a score of 3; 2 star response received a score of 2; 1 star response received a score of 1

Gleaning information and perspectives from Sunrise IL clients are a vital part of this study. Understanding why potential clients would not choose the IL pathway is as important as understanding why they *would* choose IL. Being under state care (M=4.60) and not being told what to do (M=4.53) have the highest rating for not wanting to be a part of an IL program. The feeling of not really being independent due to rules to follow (M=3.87), wanting to experience life independently (M=3.27) and wanting to go back

their familial home revealed a mean average ($M < 4.0$). A tentative conclusion stated from a current IL client at Sunrise, being under state care and not being told what to do are the two major reasons why young people in foster care do not extend their time through an IL experience.

The Cabinet for Community Based Services (CBS) has protocols and timelines around preparing aging out clients. The process for preparing the young adult for when they age out is initiated by the state worker as the client is turning 16. He/she informs the client of their options. If the clients are in our foster care homes or residential centers, Sunrise begins talking with the clients about a year before they are eligible at age 17. If the IL program at Sunrise is one of the options the young person wants to consider, the Sunrise staff member will then meet with the client and explain what the expectations are for being under Sunrise's custodial care.

Table 3.6 displays the frequency of time spent between the client and their specialist in the ongoing client-caseworker relationship. Additionally, data were collected covering the initial interaction between the specialist informing the client about the IL program. A tentative conclusion for the IL participant is that a young person wants independence and yet wants to know that there is someone to go to when needed.

Table 3.6

Frequency of Interaction with a Specialist

Questions asked of clients^a (n=12)	n	(x/n)%
How often do you talk with your specialist (now)?		
About 1 time per week (x=10)	14	10 (71.4%)
Sometimes two or three times (x=1)	14	1 (7.1%)
Only when I need to (x=3)	14	3 (21.4%)
In your preparation for Independent Living how much time did you spend with your specialist?		
None at all (x=1)	12	1 (8.3%)
A little (x=6)	12	6 (50%)
More than a little (x=4)	12	4 (33%)
A lot (x=1)	12	1 (8.3%)

Note. ^a The percent is derived from the client responses (N=12) in ratio to the number of potential responses(x).

The Sunrise brochure. The Sunrise IL brochure has been our marketing piece to inform young people under our care. A survey was constructed assessing its value and efficacy as an initial information tool to consider the options with the IL program. A copy of the brochure is found in Appendix C. The full survey results are found in Appendix D.

Sunrise has utilized a trifold brochure that provides cursory information about the IL program. That brochure, titled *Sunrise Children’s Services Independent Living*, starts with statistics on the inside of the flap along with this statement: “Young people transitioning out of the foster care system are more likely than their peers to drop out of high school, become parents before they are ready, experience homelessness, or end up in jail.” It further states these statistics:

< 50% will graduate from high school

40% will go homeless

< 3% will graduate from college

70% will end up pregnant

As the initial source of information that most of the clients who came into our program claimed to have read, an assessment of the brochures effectiveness as a recruiting tool was measured. Twelve clients (n=12) started the survey; eight indicated they had read the brochure and four had not read it. So that everyone could reassess or reevaluate the brochure, a photographic copy of the brochure was given at the beginning of the survey. The clients who responded to the survey indicated they had reviewed the brochure before going further into the assessment. Respondent choices were given choices included in the Likert scale were (a) *Strongly disagree*, (b) *Somewhat disagree*, (c) *Neither agree or disagree*, (d) *Somewhat agree*, (e) *Strongly agree*. Corresponding values from 1 (i.e., strongly disagree) to 5 (i.e., strongly agree) were assigned for each response. A slider scale was also used, and corresponding values were assigned in the same manner. After the third question, 11 clients finished the section on the Brochure Survey.

The Sunrise brochure provides a window for a potential client to process some aspects of what to expect before they walk through the door. As young persons in foster care, when they turn 16 every client under state care undergoes the introduction and preparation for aging out by being introduced to various key life skills. The Casey Life Skills Assessment (CLSA) “is a free tool that assesses the behaviors and competencies youth need to achieve their long-term goals. It aims to set youth on their way toward developing healthy, productive lives” (CLSA, 2017). A new online program that the Kentucky DCBS has adopted, *Life Skills Reimagined*, packages each of the life skills lessons in an online format with assessments reporting the level of mastery that a student

would achieve. Although it is assumed that every pre-IL client is familiar with the concept of independent living, information is one thing, experience is another. The intent for using this survey was to assess its viability as a tool to both inform and to provide an opportunity to process the information that might persuade a young client to choose IL at Sunrise. For the IL client, their responses are a retrospective account regarding reviewing the brochure and IL handbook.

Of the 11 clients who continued on with the survey, the remarks indicated that the brochure provided good information (M=4.33), along with providing the facts describing the program (M=4.18). If they gave the brochure to another friend, they would understand the program on the basis of what the brochure provided (M=4.00), and they would not change anything about the brochure (M=3.73). The highest indicator for their preference, however, was being able to talk with a person (M=5.0).

Independent living handbook. The handbook that is given to every potential client is titled the Independent Living Program Client Handbook and is reviewed with clients before they sign up for the IL program. Since it is part of the pre-indoctrination process, the importance of understanding its impact as a tool to influence a young person's perceptions and thus their inclination to join the Sunrise program is part of this portion of the study. Eleven questions focused on the clients' perspective concerning its readability and clarity, if an online APP would be preferable, and if a specialist was present to review the handbook with them would be preferable.

Initially, the handbook was subjected to the Flesch-Kincaid Reading Ease Test. Performing this readability test provides a statistic that assesses the reading difficulty of the printed information. A reading score for the IL handbook was rated 11.2 reading

grade level. It is suggested that public documents for the intended audience (youth nearing 18 years old) have a 7th grade reading level or a score of 80-70.

The IL clients completing the survey expressed a level of satisfaction with the handbook in terms of being able to understand reading the content (M=4.70), its organization (M=4.70), and the clarity of the expectations and services listed (M=4.30). Interestingly, there was limited desire to have it rendered into an APP (M=2.44). Most respondents admitted going over the material again to retain the information (M=3.80). In regard to helping them learn, the clients' rating (M=4.67) suggested it was valuable having someone explain the material to them. As will be seen in the qualitative data collected, a very high percentage of the specialists spent time with the clients and "walked them through the material." According to many of the IL specialists, the handbook was the entrée by which the potential IL client learned about the Sunrise program. The survey data also shows the initial connection with the IL specialist and the client interaction was more significant. A tentative conclusion from these data is that while information from materials is the first step of being informed, the pre-IL client expressed the need to interact with a person (e.g., IL specialists) to assure the pre-IL adults understood the program.

Non-participating clients. The data for this group of participants was not available. After clients leave Sunrise, in what is called a discharged status, there is very little interaction or correspondence between the individual and the agency. Data spanning the past two years of discharge (n=290) includes the client ID with a case number and only s descriptor of when and why they left care. Thus, Sunrise collects no forwarding addresses or contact information. Examples of categories listed were as

follows: (a) released from state care, (b) achieved goals, (c) defiant oppositional behavior, (d) court ordered placement change, (e) adoptive or pre-adoptive placement, (f) needs least restrictive care, (g) place with relative or kinship care, and (h) needs different or special services. The report form does not include a category for participating in independent living.

Qualitative Findings

Qualitative data were generated during the reconnaissance phase through open-ended interviews that occurred either in person, via Zoom, or over the phone with both IL staff members and the IL clients. The IL specialist questions found in Appendix F were sent to them prior to the scheduled interviews. Two meetings were conducted with the specialists: The first meeting occurred on June 4, 2020 with a follow up meeting on October 15, 2020. The IL clients' questions were also sent to them via their specialist ahead of time and then once again by me prior to the scheduled meeting (Appendix E). A Zoom meeting for gathering data from 12 participating IL clients was conducted on August 18. Individual phone interviews were held with two clients respectively on August 9 and 11. Their questions were sent to them by their IL specialists ahead of time.

Purpose of interviews. The purpose of these interviews was to gain insights into the problem of practice (i.e., low participation in the IL program for emancipated youth). The first qualitative interview engaged the IL specialists, the foster care (FC) directors, and the VP of community-based services during a Zoom meeting on June 4, 2020. A total eight IL staff members were present; one participant wrote her thoughts down in response to the questions and sent them to me out ahead of time. Subsequent one-on-one conversations occurred over the phone with the other three specialists. The purpose of

these sessions was to gather the direct care worker’s thoughts regarding the initial processes of introducing the clients to Sunrise’s IL program—including the materials reviewed and the discussions with the clients. Additional questions sought their input regarding the best way to market and inform future clients in addition to clarification of the target audience and how to reach them.

The six IL specialists who participated in this study work in seven localities in Kentucky. On January 21, 2021, they reported having 30 IL clients. Table 3.7 shows the regions where the IL programs are located, the specialist assigned to the region, and the number of clients that each specialist has.

Participant information interviews. The IL specialists and I met on June 4, 2020 via Zoom. The questions I posed to them are found in Appendix F. The primary focus of the questions was to gain understanding about the primary reasons why former foster youth would or would not recommit with the state to participate in IL, how the specialists acclimate a potential client, and what supports do they provide to their clients. The last perspective sought were their recommendations for recruiting young people to

Table 3.7

IL Regional Client Count and Assigned IL specialist

<i>Region/City</i>	<i>Clients #</i>	<i>IL Worker (initials)</i>
Bowling Green	6	JT
Danville	2	HP
Lexington	5	HP
Morehead	6	BT
Owensboro	2	RF
Paducah	5	MR
Paducah	4	DL
Total Clients:	30	

the program. Table 3.8 shows summary comments from the meeting on June 4, 2020.

Needs for priority of practice. When asked what their clients' greatest needs are, "wanting more life skill development" for their clients was typically most often mentioned. There was a strong consensus that the biggest hurdle in the life for transitioning youth is the "huge gap in their life skills and their individual perceptions and expectations they have for the independent living program" according to the specialist from Owensboro. In short, the specialists have observed that living independently for recently emancipated foster youth is fraught with very high hurdles to overcome. Getting those hurdles addressed relates to the expectations and outcomes that can be provided to each client's unique educational and career pathway. The consensus was that emancipated youth need to have a life plan.

Table 3.8

Summary of Responses from IL Specialists

Question	Response
Q1	They want to get out of their current situation. They want a stipend to get out of their current situation. Depending on the area they wanted to go to college. Some aspire for educational attainment, but most want to be away from their current situation.
Q2	They have an emotional maturity level of a fifteen, sixteen-year-old (or less). That makes for a challenge any way you go when you transition them to something that gives them more freedom. They just want to be free and exercise their freedom.
Q3	I go over the handbook with them the first time we meet. We kind of go over and hit the hardpoints. I do go over the rules thoroughly only initially because I find it is better to do it right off the bat. I think a lot of times, they are not going to sit down and read it either.
Q4	The primary reason is they want to be on their own. Being under state care where they have felt they have been in therapeutic jail ever since they were in foster care is not an option in their thinking.
Q5	We need to approach what we do for the kids as a team. Without a team these kids would be lost. Most of what we do is love on these kids. It is just teaching them to make good decisions, good decision-making skills- they need life skills. Life skills is their greatest need.
Q6	Have our clients be ambassadors to others IL kids. If we could create an ambassador program that provides kids with a sense of ownership. Having an updated brochure and other materials to give to state workers.

To accomplish that objective, there needs to be a team built around each IL client. The specialists felt that empowering our own IL clients to inform others who might be

interested in the program would be a double win. According to the specialist in Danville, another need was

to have our kids be ambassadors to other kids like them is critical. They [the youth not in the program yet] do not trust adults, but they would trust young people like them who have gone through what they have. Those ambassadors would have a way of bringing others to the IL program.

Independent living clients' voice. Questions posed to the IL clients via Zoom or telephone are found in Appendix D on August 18, 2020. The primary foci of the questions were (a) how they were informed about the IL program, (b) what their connection to their specialist and their foster parents was, and (c) what their thoughts were about committing to the state. The final question focused on their thoughts about creating a marketing piece to help others understand the program: *How specifically how would you design the marketing piece and what would they include?* Following are some of the responses by former foster children.

The Zoom interview with the IL clients was highly charged with enthusiasm. All of the clients wanted to volunteer to show a selfie as they showed off their apartments. Participating in the IL program “is a huge freaking opportunity!” according to Andrew. “But until you know someone who is in it, it’s just talk.” These two comments represent what eight others affirmed during a Zoom call in response to the question listed above. For these former foster youth, there was mixed review on their foster families and their assistance as the children were about to age out and what choices were available for them. According to Andrew, “I hated what my foster parents made me do, but looking back I appreciate that they made me do it.” The consensus of all of these young people was frankly if they had *not* participated in IL, they would not know what they would be doing now. They also reported that they know other aged-out peers that are not doing

well. The biggest problem they shared, which is the most common theme, was stated by another IL participant.

We have been dealing with the state our whole life, and we do not want to be involved with any part of being a ward of the state. For one thing, everyone has a fear that you always have someone looking over your back.

While there was consensus among the interviewed group about being a “state kid,” one client appreciated the Sunrise’s IL program.

You’re not as monitored. They give you an apartment, and the furniture is yours. That is different than other programs for sure. They are not going to show up unless there is a valid reason. They are calling you to see if you have everything you need. (Taya).

For those who turn down the opportunity to be a part of an IL program, the sentiment was strongly voiced by all of the clients during the Zoom meeting. One interviewee asserted: “They think it is all about the state, and they are in your business, but it is not even like that. You have freedom. Yes, we have rules but it’s not all that bad.”

All the IL clients indicated they would be willing to serve in an ambassador program to help other pre-IL client hear about the realities from them. In lieu of sharing their stories and assessments in person, they recommended creating a video in order to hear IL client stories and showcase their living facilities. All ten of the young people participating in the Zoom meeting and one other in a separate interview volunteered to be included in the video that would inform others. One current IL client enthusiastically stated, “We need to help others see this opportunity.”

The group then began offering their recommendations about what to include in the envisioned video. Further suggestions included

- Show an apartment of a current client and let them see the benefits of what they would receive.
- Have the current IL clients be interviewed and share what it is like and what

to expect.

- Share that IL clients are really on their own and the Sunrise people are really there to provide help—not direct the IL clients’ life.
- Explain that there are rules but IL staff do not monitor IL clients.
- Tell them what to expect, what it is like from a current client’s perspective, and what you it is possible.

The distillation of their message would be to tell why they chose the IL program, what it is like as an IL participant and share their experiences with the audience. They also indicated they needed to know what the next steps would be for the potential clients. This information would be shared via a short video made to specifically target young people like them. A summary of the meetings between the IL specialists (June 4, 2020) and the IL clients (August 18, 2020) was sent to the IL team to consider possible approaches they wanted the marketing video and other materials to take.

Further focus from independent living specialists. As a follow-up from the meeting on June 4, 2020 and the recommendations that were suggested, another meeting occurred on October 15, 2020 to help focus on what the IL specialists perceived was needed to bring awareness to potential clients and to expand the program. Below are the major ideas that were shared at a meeting with eight staff who work both directly and indirectly with the IL program. A member of the marketing team led the discussion that generated these ideas:

I really would love for us to do a video of some sort that highlights IL. The videos are directed towards the audience that it really impacts.

Create a video series that highlights the kids—specifically what IL does— and that kind of reframes them and paints a refreshed picture for the community to be able to see. I think that this video from an audience's standpoint, obviously something that we can share in the community.

I think it would be helpful to give to potential landlords, those that are resistant to work with us. But to actually be able to go back to our landlords (who have worked with us) and say, “You know what? You took a risk with us and look at

the lives that you have changed or that you have helped make a difference in the lives of these kids.

I feel like any kind of marketing for Independent Living is going to be beneficial for us. I feel like, right now when you market something, that video is the best option. It is what people watch, and it is what you can interact with.

It would be beneficial to have a video so they could see the actual clients — but to see a successful teenager who is in college, taking care of her baby, and that she is in this program and has been successful for herself. I think that is a valuable tool for social workers to see.

Reconnaissance Phase Discussion

Quantitative and qualitative data collected during the reconnaissance phase provided the rationale for this action-research project to address problems of practice in Sunrise Children’s Services Independent Living Program (i.e., need to develop marketing tools that positively affect a foster or residential care youth’s perspective on choosing independent living as a step toward developing their career or educational pathway). The information provided by the various surveys and interviews was essential for the planning and acting phases of the action-research cycle. This section presents the overall inferences and conclusions that were foundational for the creation of marketing tools. In this process, the specialists and IL clients became advisors for setting the direction of the marketing pieces for young people like them. Utilizing young people in this manner promotes a sense of leadership and mentorship (Forenza & Happonen, 2016).

COVID-19 Related Delays

With final approval from the IRB having been received in May 2020, the overall project was intended to be completed by the end of September 2020. That completion date was predicated on the gathering of data, its analysis, and then a second level of evaluation for the measure of its intended effect during the summer months of 2020. One variable that was not accounted for in the gathering of data was the effect that the

COVID-19 epidemic had on our community and our organization. The initial discussion with the IL specialists occurred on June 4 during a Zoom meeting during which preliminary recommendations for what and how to market for IL were offered. An ensuing meeting with the IL clients occurred in July. Those responses have already been presented. However, the effect on staff due to reduction in our workforce and families being affected economically and with illness, this project needed to be moved to a lower priority. The timeline became more protracted. It was decided by the VP of Community Based Services that the final portion of creating the marketing piece and its analysis would need to be tabled until a later date. October 2020 was the new date decided upon when to reengage with the IL staff.

Quantitative Discussion

After each data table was presented for the quantitative phase, tentative conclusions were listed. Those conclusions are discussed in this section. Quantitative data from the participant surveys provided insight and underscored areas that created a positive effect for the client in choosing the IL program for themselves. Data collected in Table 3.2 sought the clients' perspective about their acclimatization to the program. Two considerations were sought: (a) the readability of the material in its current format and (b) what was their interaction with their specialist. A rating of $M > 4.0$ conveyed a greater than average sense of satisfaction. A rating of ($M=4.43$) showed a high satisfactory rating of the client interacting with their specialist. A positive feeling about packet of information was expressed ($M=4.57$). Talking with a specialist ($M=4.38$), talking with another person ($M=4.33$), and talking with a person who cares about you ($M=4.27$) affirm the need for positive interaction. Speaking with a graduate of the program

(M=4.54) indicated high favorability toward someone who experienced the program. Information delivered from an online app (M=2.64) or web interactive program (M=2.64) received the lowest scores.

Why a young person wants to reengage with the state is critical to understand as it can provide information into a client's motivation and thus shape the content and format of advertising and recruiting messages that appeal to emancipated youth's inner motivation. In Table 3.3, a rating of $M > 4.0$ indicates a greater than average inclination for why they chose to go into the IL program. The highest rating was (M=4.93) for "wanting to do something with my life." "Being on my own and having support along the way" is appealing to the IL client (M=4.53). "Wanting to get an education" (M=4.33) is also a strong motivation. What this data appears to demonstrate is their need or desire to be productive in life. Loring Jones (2017) calls that "connected and making it" (loc 4150).

Table 3.4 displays the young adults' responses concerning their current experience. A rating of $M > 4.0$ indicated a greater than average positive experience. Feeling safe (M=4.85), having support (M=4.00), being in a safe place (M=4.85), and getting to be on their own (M=4.67) are points of view that could be readily shared with others thinking about joining the IL program at Sunrise. The clients rated their propensity to "tell others to join" at (M=4.50).

Examining potential hurdles to overcome getting young people to consider and act on the notion of committing to the ILP was demonstrated in the data presented in Table 3.5. A rating of $M > 4.0$ infers greater than average agreement to the reasons why young people do not want to be a part of the IL program. The obvious hurdle that was

recognized was being under state care (M=4.60) and being told what to do, (M=4.53). These are the highest obstacles.

The frequency of interaction (Table 3.6) with the specialist during the on ramping process varied. (71.4% about 1 time per week, 7.1% sometimes two to three times, and 21.4% only when needed). In being introduced to the IL program at Sunrise, the time spent with the specialist varied as well: none at all (x=1, 8.3%), a little (x=6, 50%), more than a little (x=4, 33%), a lot (x=1, 8.3%).

Implications from Quantitative Data Obtained

As a point for addressing the problem of practice, the data show being connected to an adult in the initial process is critical for the client-specialist relationship. Second, the young adults, while wanting their freedom on the one hand, if shown the potential they could gain for being in the IL program, could be more favorably inclined to ‘re-up’. Third, as a method to market and inform others in their process of decision making, having the current clients provide their testimony vis-à-vis a video format, is a strong consideration for improvement of practice.

Qualitative Discussion

Conversations from the specialists and IL clients provided rich data for addressing the priorities of practice in creating a marketing platform that positively affects future clients to consider Sunrise’s IL program more strongly. Having a place of their own that provides safety, being supported along the way so that the client can think positively about their future, and knowing what to expect both from the specialists and the information provided to them were considered positively as affectors in their decision to be a part of the Sunrise IL program.

The specialists strongly concurred that forming a team around each young adult was vital for their clients. They emphasized the importance of building a connection with their future client from the very beginning. They noted, for the most part, that these young people have not had positive experiences with their foster homes and felt they were bereft of many positive connections. To overcome the very large hurdle of getting emancipated youth reengaged with the state through participation in the IL program must be met with a higher degree of intentionality and honesty about what to expect. Multiple specialists and leaders stated many times during their interviews that they must understand that “what we would do for our own children we must do for them” (i.e., IL clients). That statement has become the heartfelt focus for bringing about change in this area, as Sunrise is the agency that has one of the broadest scopes of practice in the Commonwealth of Kentucky.

Implications from Qualitative Data Obtained

Recommendations from the IL clients centered around being able to tell their positive experiences with the IL program and convey that it is a “freaking opportunity” in addition to being on their own. Many wanted to show themselves in their apartment by taking a “selfie” there. They emoted a strong sense of pride in being able to live independently—yet with support. They recommended minor adjustments to the material that was given to them, but mostly they talked about the support they have been given and the freedom they had albeit with some accountability.

Description of Intervention

The results were shared about the perceived barriers that influence youths’ thinking regarding their future and in particular their thoughts about pursuing the IL

pathway with the IL specialists and the leaders of the Community Based Services. In working collaboratively between marketing personnel and the IL specialists, an action plan was devised to address the problem of practice—to positively affect the perspective of future clients on choosing IL as a pathway. Quantitative data that highlighted perspectives from the IL cohort fell into three areas: (a) what their perceived needs were in the acclimatization process, (b) what their desires are related to their life, and (c) what recommendations they have for attracting others like them to positively commit to an IL program. During the interviews with the specialists, qualitative data was shared about the immediate needs they viewed, such as strategically important ideas to communicate with other potential clients and state workers. Those requests were prioritized as follows: (a) create a set of videos directed towards the audience that it really impacts and (b) update the printed marketing materials that would be given to state workers. The videos would highlight actual clients and provide insight from their experience:

- Include hearing from the IL clients and what they have struggled with in addition to how the IL program has helped them.
- Include thoughts and strategies from the specialists indicating the level and type of care they give to their clients.
- Include testimonies from various people who support the IL program in an indirect manner, such as a landlord who has accepted IL clients to their apartment complex, testimonies from workers in the field such as guardian ad litem, and mentors for the young adults.

Creation of a video series to recruit IL clients as well as highlight all the ministries of Sunrise Children's Services was supported by the executive leadership team of Sunrise. A generous gift was given to Sunrise, and funding for this overall project was granted. A professional company, Courage Media, was hired to help film, edit, and create approximately seven marketing pieces, two of which dedicated to the IL program as a

recruitment tool for future IL clients and to explain the ministry aspects of the IL program. These marketing pieces will provide a library of media segments that illustrate the vast array of services that Sunrise has to offer as a PCC.

Action Plan

As part of the MMAR sequence, the IL committee members had decided to create a video highlighting two clients, one IL specialist and the VP of community-based services. Scripts or the questions to be asked were co-developed by the Sunrise Children's Services marketing team and the IL specialists. The filming of the IL videos began in January 2021. From that footage, a video was created and was sent out on March 12, 2021 for monitoring and evaluation by a combination of child welfare workers from outside of Sunrise, Sunrise team members, and IL clients from different agencies than Sunrise. Approximately 90 people would have the opportunity to provide feedback after viewing the initial marketing video. During this time, the feedback provided for this intervention will further refine the focus and ascertain its effect on the intended audience.

CHAPTER 4

EVALUATION PHASE FINDINGS, RECOMMENDATIONS, IMPLICATIONS, AND PROFESSIONAL REFLECTION

“What we would do for our own children, we need to do for Sunrise’s children.” I have used that statement as a focal point throughout this action-research project. This project was designed to address a specific problem of practice related to positively affecting the population of individuals we work with concerning choosing independent living (IL) as a step toward their career development or educational pathway. Concomitant to that issue was trying to understand an aging-out youth’s thoughts regarding willingness to step back into state care after reaching age 18. The nomenclature for that step is called *recommitting*. In this assertion, the notion of permanence is not an option; thus, an IL program is a transitional opportunity for youth in the aging-out category of foster care. Why is IL important, particularly for the population of young people with whom Sunrise works? Data have shown that having strong connections with adults positively influences youth when they enter an IL program and beyond as young adults. More importantly, when older youth extend their life-support care through participating in an IL program, “better outcomes are experienced at age 21 in employment, high school diploma/GED completion, educational aid, homelessness, and young parenthood compared to their peers not in care at age 19” (Child Trends, 2019). In short, significant relationships with accompanying support to achieve their goals is a game-changer for certain aging out youth. As one young IL client stated in an interview, “I have a place to stay and support that I can call on at any time.” In short, they have a place to live that they can call their own and an adult who cares—similar to what college

students receive.

Chapter 4 begins with an overview of the results and findings from the evaluation phase of the action-research cycle. The second major section of this chapter is presentation of recommendations, implications, and personal reflections. Two questions guided this study:

- *What are the factors that influence a young person's thinking who reside in 24-7 institutional residential/foster care or has been in family-based residential/foster care about future study and work, including perceived barriers and support needed to be successful?*
- *What preconditions need to be in place that will positively affect a foster or residential care youth's perspective on choosing independent living as a step toward developing their career or educational pathway?*

Through this action-research study, I attempted to elucidate the issues facing foster youth as they age out (i.e., reach the age of 18). There is no lack of data illustrating their outcomes. The identified problem of practice for Sunrise Children's Service was the lack of appropriate IL recruitment material. Prior to the commencement of this study, an outdated brochure with irrelevant material is all that is provided to foster youth as they begin to prepare for aging out and consider the two options available for their initial steps into early adulthood: (a) recommitting with the state to participate in an independent living program or (b) going out on their own, often without a safety net.

For these "state kids," providing information about the Sunrise IL program as an option has been dependent upon the state worker assigned as their case manager. That case manager is required to meet with their 16-year-old pre-aging out clients who must elect whether or not they wish to enroll in IL prior to turning 18 years old. While aging-out foster youths may initially decline, they still have a year during which they have the

option to change their mind and recommit. This time frame, prior to their 18th birthday if they have chosen not to recommit, is the target period to help recruit and inform them of IL program benefits. Those materials, availability and modality of their presentation, and their appeal was the focal point of improved practice this action-research project. Sunrise Children's Home, where the study was conducted, had not been doing an effective job recruiting IL participants both from within and outside our organization.

Evaluation Phase Findings

According to Ivankova (2015), developer of the mixed-methods approach used for this study, "During the acting phase, an action/intervention plan, which was informed by mixed methods inferences, is implemented. Then it is necessary to conduct a rigorous evaluation of the action/intervention to see whether it has produced the desired outcomes" (p. 62). As a result of the data collected through a mixed methods approach, the IL clients and IL staff both agreed that a message about the benefits of IL through the medium of a video format would tell the story in multiple ways. A recruiting video was agreed upon, guided by the Sunrise IL staff and their clients' input. Footage was obtained during the reconnaissance phase and used in the creation of a recruiting video. The efficacy of that intervention was tested by collecting data through surveys targeting current stakeholders at (a) Sunrise, (b) IL clients outside of Sunrise, and (c) social or child welfare workers who either work directly with an IL program in a private childcare agency (PCC) or with the state. Two different surveys, (Appendices H and I) were administered to collect quantitative and qualitative data from these three cohorts.

Quantitative Findings

Three quantitative surveys with a survey link to the initial marketing video were

Table 4.1

Survey Evaluating Marketing Video- IL Clients

Ratings of respondents (n=13)	Median	Mode^a	M (SD)
1. If you would show this video to those who are about age out, I think they would have a better perspective on IL and know what their next steps are. ^a	5	5	4.31(.99)
2. The client-specialist relationship in this video showed a positive connection that might influence others to consider more strongly joining the IL program? ^a	5	5	4.46(.75)
3. Would you be able to recommend this video to help pre IL clients understand what their next steps are? ^a	4	5	4.15(.95)
4. What do you think is the strongest message that is being conveyed in this video? (5-star slider scale) ^b			
a. Support in getting their education	4	5	3.62(1.6)
b. Time to figure out life	5	5	4.31(.56)
c. A chance to be on their own and have their own place	5	5	4.31(.56)
d. Hope to do something with their life	5	5	4.69(.14)
e. Being connected to another adult is important	4	5	4.23(.39)
5. What do you think is the most important thing for you as you consider this video (5-star slider scale) ^b			
a. Support in getting my education	4	5	4.31(1.26)
b. Time to figure out my life	5	5	4.54(.75)
c. A chance to be on my own and have my own place	5	5	4.54(.75)
d. Hope to do something with my life, like getting a job	5	5	4.83(.37)
e. Getting support from another adult that can help me with next steps.	5	5	4.62(.62)
6. Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth? ^a	3	5	3.54 (1.34)

Note.^a The response *Definitely* received a score of 5; *More than likely* received a score of 4; *Likely* received a score of 3; *A little* received a score of 2; and *Not at all* received a score of 1.

Note^b A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

sent via electronic mail to the following groups: (a) 62 social workers and youth

advocates in both state and private childcare (PCC) agencies, (b) 21 Sunrise staff who work with young people in residential care and who are also a part of the marketing and administrative team, and (c) 40 IL clients from two other private childcare agencies who manage a cohort of IL young adults. Table 4.1 displays results from those surveys.

IL clients' responses. The data in Table 4.1 were collected through a similar scale patterned after that which was given to the adult workers. The difference between the two surveys (i.e., one given to adult workers in the various agencies, the other given to the IL clients) are certain questions that shift the client to think about themselves and their needs (Q5, a-e). This third survey was sent to 40 IL clients from two agencies: Boys and Girls Haven, and Hope Hill. Similar to Sunrise Children's Services, these two agencies work with foster, residential, and IL young adults. Thirteen IL clients (33% participation) from the two other agencies contributed their thoughts through responding to both the quantitative and qualitative components of the survey.

Giving an opportunity for IL youth to give their voice about what was vital to marketing IL was essential to this study. Their ratings of the following questions (Q5.d.) "hope for doing something with my life, like getting a job," (Q5.e.) "getting support from another adult," (Q5. b and e) "time to figure out my life, and a chance to be on my own and have my own place" tells a story about authentic experiences of IL youth.

Survey for child welfare and Sunrise staff. The survey titled, *Evaluation of IL Video-Staff* (Appendix H) was sent to those who work with youth and was structured in two parts. The first part of the survey consisted of six close-ended questions modeled as a 5-point Likert scale, which was administered through Qualtrics. The second part of the survey contained three open-ended questions are discussed in the qualitative section later

in this chapter.

Out of 62 potential participants outside of Sunrise that were sent the video and corresponding survey, 27 responded for a 44% rate of completion. Of the 21 Sunrise staff who were sent the survey and the video link, 20 staff completed it with completion rate of 95%. This survey sought to gather information about thoughts and opinions regarding the video as a recruiting tool. Tantamount to seeking input regarding the marketing piece was also to solicit their perspective on what they view as important for the young adults with whom they work. The qualitative data gathered from this tool was insightful.

Data collection was segmented based on differing the distribution link to two Qualtrics surveys (i.e., one to Sunrise staff, the other to the non-Sunrise staff with the same questions). The rationale behind this data gathering for the evaluation phase was to assemble data into two databases to differentiate between those who responded within Sunrise versus those from other organizations who responded to the survey. The basis for this was to assess if there was inherent bias from those within Sunrise and if the measurement tool was reliable. The data from these two independent groups: non-Sunrise staff and Sunrise staff is reported in Appendix J. Table 4.2 reports the data from those two inquiries and presents the data in a summary format. It is this table that is discussed in this segment. The two data sets retrieved from the survey instrument from the Sunrise staff and those outside of Sunrise were analyzed for reliability. In creating the scale, ten items were inputted with a 1 to 5 response scale on each item. Therefore, the lowest score possible is 10 (10 x 1) and the highest is 50 (10 x 5). The average score should come somewhere between the lowest and highest possible score. The overall value showed a mean of 34.8.

Table 4.2***Comparison of Results from Quantitative Surveys***

	Outside of Sunrise (n=27)			Sunrise (n=20)		
	Median	Mode ^a	M (SD)	Median	Mode ^a	M (SD)
(Q1) ^b	3	4	3.37 (1.16)	3	4	3.30 (1.27)
(Q2) ^b	3	3	2.89 (1.12)	3	3	3.00 (1.18)
(Q3) ^b	3	3	3.07 (1.77)	3	2	3.00 (1.26)
(Q4a) ^c	3	1	2.67(1.54)	3	1	2.80 (1.21)
(Q4b) ^c	4	5	3.63 (1.28)	4	5	4.00 (1.10)
(Q4c) ^c	4	5	3.85 (1.41)	4	5	3.90 (1.18)
(Q4d) ^c	4	5	4.04 (1.10)	4	5	3.95 (.97)
(Q4e) ^c	4	5	4.19 (0.98)	4	5	3.75 (1.04)
(Q5) ^b	4	5	4.59 (1.45)	4	5	4.10 (1.61)
(Q6) ^b	3	3	2.89 (1.13)	3	3	3.45 (1.36)

Note. ^a Multiple modes exist, the highest is provided.

Note^b The response *Definitely* received a score of 5; *More than likely* received a score of 4; *Likely* received a score of 3; *A little* received a score of 2; and *Not at all* received a score of 1.

Note^c A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

The video survey scale was also assessed for reliability using the SPSS software.

Cronbach's alpha is most used to determine the reliability or internal consistency of an instrument with Likert questions in a survey/questionnaire. Cronbach's Alpha for reliability was (.871) for the 10-item scale indicating that the set of items consistently and dependably measured the concept with accuracy. That is, the survey items appeared to provide the same frame of reference to respondents: They did not interpret the items in different ways. An independent sample t-test was computed and there were no significant differences in video survey scores ($p > .05$) between the Sunrise staff and staff from other agencies.

Respondents from both groups *Definitely* and *More than likely* agreed that the

message they would receive if they showed this video to those aging out that being connected to another adult (Q5) is important (M=4.59; 4.10). Further, the clients (Q4.d.) would have hope to do something with their life (M=4.04; 3.95), (Q4.c) have their own place (M=3.85; 3.90), and (Q4.b.) have time to figure out their life (M=3.63; 4.00).

The tentative conclusion for moving forward with creating marketing videos based on these data is demonstrating the connection to another adult is important and being in the IL program would give them hope for their future. Having both time to figure out their life and a safe place to reside were also ranked high, as a point to include in the messaging.

Considerations from the quantitative study. According to Herr and Anderson (2015), while bias and subjectivity are natural and acceptable in action research as long as they are critically examined rather than ignored, other mechanisms may need to be put in place to ensure that they do not have a distorting effect on outcomes” (p. 75).. One effect that can happen as Sunrise appraises its own video creation is called the *hall of mirrors effect*. Looking at something that the marketing and IL team created can be laden with inherent bias. Reaching out to others in the child welfare field provided a mirror from an outside perspective. The quote from Herr and Anderson (2015) calibrates the data that has been gathered from the surveys to both identify bias and determine the reliability of the instrument and, thus, the results.

Qualitative Findings

The participant information survey had open-ended questions that allowed respondents to provide responses to three questions:

- *What do you think is the most important step in helping an aging out youth consider*

committing to an IL program?

- *Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful.*
- *What didn't you like about the video? Please explain.*

Two separate surveys were sent so that data would be bifurcated from the social workers outside of Sunrise and the Sunrise staff (See Appendix J for raw data). Thirteen IL clients also contributed their thoughts to the three questions posed on the survey.

Major themes for focus groups. Additional qualitative data were gathered through two focus groups with open-ended questions that were posed to the independent living staff and marketing personnel. An in-person meeting occurred with the M&A team and a Zoom meeting led by a marketing staff member was held with the IL team. A total of 18 staff members were interviewed in this manner to provide feedback over the current production video to create a product that would positively affect an aging-out client to consider committing to an IL program. Perspectives, perceptions, and recommendations were recorded, transcribed, and then sorted into themes that would relate and inform more revision to the current video as a marketing tool. Focus group questions that drove the group discussions were as follows:

- *If you were in charge of creating this video what would you change to help recruit those who are aging out?*
- *Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth? Please share your thoughts.*
- *What is one thing you would change or add to this video?*

A discussion of the findings for each qualitative data source is presented in the following section.

The qualitative portion or free response portion of the participant information survey was available for open-ended responses to the questions. Those outside of Sunrise generated 25 responses out of the 27 social workers for a participation rate of 89%. Of the 21 Sunrise staff who responded 14 free responses were generated for a participation rate of 67%. The major themes of the free response portions of the survey are listed in Table 4.4.

Table 4.3

Major Themes from Responses from Sunrise and Other Agencies.

Sunrise	Other Agencies
<p>What do you think is the most important step in helping an aging out youth consider committing to an IL program? Getting the point of all of the benefits that they would get.</p> <p>I think the youth need to hear from other youth. Showing them the opportunities</p>	<p>What do you think is the most important step in helping an aging out youth consider committing to an IL program? Fully understanding the benefits available to them: housing, funding for college, support, Understanding benefits of an IL program combined with a connected adult who has their best interest in mind and meets the youth where they are</p>
<p>Themes from Q8 - Based on your response to the last question, what should this recruiting video include? Walking through their fully furnished apartment. Male youth, youth who are not mothering in addition to the awesome youth you already have on the video.</p>	<p>Themes from Q8 - Based on your response to the last question, what should this recruiting video include? Show youth living in their own apartment, going to school and working I know that the two young ladies were parenting youth but I think there needs to be some attention paid to include a male</p>
<p>The adults need to be secondary (in the video)- "A lot of benefits" but no specifics that a kid aging out could relate to</p>	<p>The video should definitely include the aspect that the client has choices Figuring out what path they want to take after aging out.</p>
<p>Q9 - What didn't you like about the video? Please explain.</p> <p>I thought the video was very good!. I would add more information regarding the benefits, expectations, and how to get started. We need to remember that we are serving traumatized youth that now question religion due to the unimaginable acts of abuse that have happened to them</p>	<p>Q9 - What didn't you like about the video? Please explain.</p> <p>The time for Christ comes after being a light and establishing trust... not in the intro video You will lose the 19-year-old male who needs you most. I would replace phrase "hands and feet of Christ" with "an opportunity to serve them well in a trusted relationship." Note: I think this is a good idea but I believe the message isn't quite there yet.</p>

Major themes for IL clients. Thirteen clients started the survey and responded to all open-ended questions. There is probably one statement that captures the sentiments of the entire group: “Knowing that there's stability, and that they won't be thrown out on the street. Having hope is important.” Security of having their own place and receiving support along the way were strong themes.

Table 4.4

Major themes, IL Clients

IL Clients - Other agencies

Q7. What do you think is the most important step in helping an aging out youth consider committing to an IL program?

Knowing that there's stability, and that they won't be thrown out on the street. Having hope is important.

Probably the benefits and the support, letting them know all the benefits of recommitting.

Letting them know they aren't alone!! life can easily get overwhelming, and its very comforting to know you don't have to do everything alone. A listening and caring support structure that knows how to level with the youth.

Q8. Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful.

I think it was well-done in the video, though there weren't nearly as many details about what life is like in the program. The more details, the more someone will know how good it is.

Having the specialist and client in a scene talking together may help convey the message of not being alone.

Q9 - What didn't you like about the video? Please explain.

I thought it was vague. There's so much more they could've talked about to recruit ilp youth, but the video was kind of repetitive

I don't like that they don't explain everything that comes along with joining the program. Go into more detail.

Recommendations

What do you think is the most important step in helping an aging out youth consider committing to an IL program? Both Sunrise and non-Sunrise participants emphasized telling the clients about the benefits. One response captures the essence of all others provided by respondents: “Fully understanding the benefits available to them: housing, funding for college, support, independence but with guidance, etc. I would emphasize the tangible benefits more as well. Like getting your rent paid for, getting utilities paid for, monthly stipend, etc.”

The second question, *“Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful,”* generated responses similar to this: “Walking through their fully furnished apartment, show youth living in their own apartment, going to school and working.” Another consensus was the importance of balancing the demographic of having male representation.

The third question asked, *“What didn't you like about the video? Please explain.”*, Space was provided for respondents to include recommendations for improvement. Suggestions included changing the music and showing the steps needed to commit to an IL program since at that time there was no information included for the aging out individual. Additionally, both groups responded to the mention of faith and scripture. A non-Sunrise staff member suggested

I wouldn't lead the video with Jeremiah 29:11. You will lose the 19-year-old male who needs you most. I would replace phrase "hands and feet of Christ" with "an opportunity to serve them well in a trusted relationship." The time for Christ comes after being a light and establishing trust. . . . not in the intro video.

A Sunrise staff member wrote,

I understand Sunrise is a Christian agency; however, that is not an accurate representation of the youth served. If we claim to serve children of all religious backgrounds, then why are we advertising as though [the program is] for Christian youth? We also need to remember that we are serving traumatized youth that now question religion and God due to the unimaginable acts of abuse that have happened to them.

Staff Recommendations and Perspectives

The IL team met with a representative from the marketing team via Zoom. After the interview questions were discussed with the IL team, the initial feedback centered on showing prospective IL participants in an apartment.

The clients want to know if I can hang my posters. . . . can I make it my personal place. . . . can it truly be mine? The personal touch of the actual apartment is good for the clients. . . . A lot of clients when they get to decorate, they are pretty proud of their own place. We have some that make it their own place. . . . I think it would be good to maybe doing a shot of them cooking and them saying welcome to my home!

The consensus for showing an apartment and letting the IL client show it off was a major part of the discussion. There was unanimous consensus for having this be a part of the recruiting video.

During the Zoom discussion with the IL staff, there was unanimity in keeping the director's comments as is and to make sure that the faith-based position is clearly expressed. When asked whether we diminish or keep the statement from the director who mentioned that the IL program allows Sunrise to "be the hands and feet of Christ" in addition to the scripture verse in the beginning was also discussed one staff member responded:

I think that is imperative we do. It is mission. It is not just another program. We have clients and they are hesitant because it is faith based. Once they get it and once they see it is not just religion. It's truly relationship, and it's there for them –

we show them love without them realizing that it is Christian.

Marketing and Residential Staff Recommendations and Perspectives

The sensitivity of the religious symbols and expression were discussed in addition to what would be changed to positively affect clients toward considering the IL program. “We are using this as our first piece to bring in the IL kids. We want to bring in as many as we can and then we will have opportunities to ask who we are.” The sensitivity for having religious sentiment as a marketing piece to a secular audience was a heightened concern. Additional comments were made to let the IL adults show off their apartment and “make it super intimate and inspirational. Have them talk about their apartment and what it means to them.” Three components were definite in the recommendations:

1. Show off an apartment.
2. Include male representation and focus more on the stories of the IL clients.
3. Somehow list the benefits and include next steps.

Independent Living Client Responses and Perspectives

Respondents offered several other recommendations, such as “Knowing that there's stability, and that they won't be thrown out on the street. Having hope is important.” Also, the youth wanted to see “more details, the more someone will know how good it is.” In summary, provide support with caring adults and help the young person with their path of life that gives them hope. The video link for the IL recruiting video is located at https://www.sunrise.org/IL_video.

Implications and Reflections

The care and concern for the young people under our care is our mission: “Sunrise Children’s Services provides care and hope for hurting families and children through

Christ-centered ministries.” The difficulty as a faith-based mission that delivers social services to hurting children is balancing being faith-based in a secular culture that is also contending with First Amendment questions and highly polarized political views at the state and federal level. The comments provided by the participants from within and without our agency regarding how best to convey this caring message that is representative of Christ were both tactful and salient. Individuals from both cohorts expressed faith emblems and expressions should not be used in an introductory video that recruits young people from severely traumatic backgrounds. Also, both cohorts expressed that it would be good to use. To reiterate what one Sunrise IL specialist said,

We have clients and they are hesitant because it is faith-based. Once they get it and once they see it is not just religion. It’s truly relationship and it’s there for them – we show them love without them realizing that it is Christian.

How to market what Sunrise’s IL program has to offer is still the question given the audience we are trying to reach.

According to Goldsmith, Eimicke, and Pineda (2006), “Faith-saturated organizations hold that religion is central to their mission and to the services they provide. For this reason, they may be unwilling to compromise with secular partners for fear of compromising their principles” (p. 3). Faith-based organizations have a strong sense of ownership of their faith perspective. Most contend their belief system provides holistic services and the components of their faith are expressed through the love and care that they demonstrate to their clients. Compromise over not sharing outwardly the emblems of faith is just plain compromise to some. However, I have not met one person on our staff who would intentionally violate a young person with their faith stance. They respect who they are and where they come from too much to cross a personal boundary to

prove themselves right in a superficially religious manner. Wisdom is called for in everything we do in helping young people find hope and healing. And, of note, the clients from other agencies rated the inclusion of faith or religion *More than likely* and *Likely* to be a benefit to recruiting foster youth (M=3.54).

One other implication must be offered at this point. The voices of those who did not commit to an IL program are silent. As stated earlier in Chapter 3, the non-participating clients were not interviewed because there was no forwarding information left with Sunrise staff. In one sense, the data collected from this cohort of individuals would be of great value.

Sunrise needs to be more proactive and intentional in meeting with thier clients in both the foster and residential areas. Earlier in the collection of research vis-a-vis the interviews, the VP of Community Based Services had made note about that fact “they do not do a good job of recruiting.” The clear remediation to counter this effect is to start earlier with our own foster and residential youth with a higher level of intentionality. In the meeting with the IL staff on June 4, 2020 they were very excited about using the current IL clients to be ambassadors to the current foster and residential youth. The clients had also vocalized that as well.

Finally, I must state at the core of this research is my desire to have every independent living young person’s voice matter. I will never forget the Zoom video interview when all 12 IL clients enthusiastically held up their phones indicating they would love to send me a “selfie” of their apartment and how proud they were to have a place of their own. Then, one of them said, “I don’t know where I’d be if I wasn’t in the IL program. I know many of my friends that did not do the program that are not doing

well.” Their voices matter and we must not forget those whose voices are not heard. We must track beyond emancipation.

Lessons Learned from Doing Action Research

In the process of conducting action-research, I learned about the creation of research instruments, gathering data by doing interviews, and navigating through the delays caused by a pandemic. The latter caused me to dig more deeply into the issues related to this segment of the population. I forgot about the research and focused on the young people and heard their voices. I made friends and gained mentors from the IL world and was transformed by their commitment in helping kids.

The quantitative components allowed me to test the relationship between two disparate groups of social workers from different agencies on the matter of what they think appeals to the young people they work with regarding why former fosters commit to the state or not. These are complex issues because helping young people launch successfully into adulthood is so very important and the odds- past and present, have been so stacked against them. It is critical to intervene and change the trajectory of their future. The social workers all agreed that change must happen in caring for those under their care. They are the heroes.

The qualitative research allowed me to explore the nuances of this social problem, inductively building from the stories told to see the themes that need to be conveyed. While not perfect at interpreting the data, as we all see through our own prism of understanding, I was able to bring focus to the colors of their individual stories.

Limitations

Unfortunately, I was not able to get access to the individuals who left the agency.

While the instruments remain in Appendix B and G, the real story behind why those individuals did not recommit would have offered rich information. As I stated in Chapter three, when a client is discharged, there is little if any communication with the agency. More often, there is none. To have heard their voices and have had their thoughts and perspectives added to the other IL clients would have brought greater depth and perspective.

Conclusion

The purpose of this action-research dissertation was to generate a study on determining how to positively affect aging out youth in considering more strongly the prospect of committing to an IL program. The first analysis point, however, was finding out what the young people wanted, or thought should be a part of what truly influenced them. This study is about them. The marketing piece was secondary.

Two major themes arose in the various discussions, interviews, and surveys taken. The clients wanted to know that they would be *secure in a place of their own and then receive support from an adult when needed*. To them that equals hope. Most people assume that is a given in life. Not former fosters. Given those two simple parameters the recruitment video would be designed around showing the security and continuity of having their own place and the support needed as they navigated their own steps toward being independent and productive. Having those two basic needs met satisfies the preconditions as a starting point in helping them develop a more positive future either for their educational fulfillment, work, or both.

I close by reiterating a Sunrise IL client's quote because what has been created as a result of this study is secondary. What is primary is their voice. "Knowing that there's

stability, and that we won't be thrown out on the street. Having hope is important.” Hope.

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APPENDIX A

CURRENT IL PARTICIPANT ASSESSMENT

Part 1

Demographic Information

Thank you for choosing to answer some questions in this first part of a two-part survey. There are two sections of the survey to be completed. This first section asks questions about you and your experience in getting prepared for entering Sunrise's ILP. Upon completion of this first part the second part will be available for you to review the marketing material and provide your thoughts and comments. The total amount of time for both sections to complete will be about 20-30 minutes.

Once you are done with this two part survey you will receive a \$20 gift card and have the option to take part in an interview over ZOOM or over the phone. You will receive an additional \$20 gift card for your time involved with that interview as well. Again, thank you for your time.

1. What is your age?
18
19
20
21+
2. What is your gender?
Female
Male
Prefer not to indicate
3. Do you feel like you have enough to live on?
Yes
Maybe
No
4. Do you have a job? If so please describe what you do. You can write it out in one sentence or two. Thanks!
5. How many hours a week do you work?
Less than 10
Between 20 and 30 hours
Around 40 hours
Greater than 40 hours

6. Do you plan to stay at this job for awhile?
Yes
Maybe
I would prefer to do something else
I can see myself making this my career
 7. Do you currently go to school?
Yes
No
 8. What is the highest level of education you have achieved?
HS diploma
GED
Some technical or career development classes
Some college classes
 9. What would be the highest level of education you would like to achieve?
HS diploma
Certificate program from a community college
College degree
Higher than a four-year college
 10. In thinking about my future I would like to work or have a career in
_____ ? (Please write down what you would like to do- Thanks!)
 11. How long have you been enrolled in Sunrise's Independent Living Program?
From a few weeks to 3 months
From 3 months to 9 months
From 9 months to a year
Greater than a year
-

Part 2

What are your thoughts regarding the information you received about the IL program and how you are doing now?

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
12. Talking with my caseworker/specialist was helpful in understanding the IL program					
13. The packet of information was helpful in understanding the IL program					
14. Seeing the benefits that another person experiences or talking to another person is more helpful to me than reading about it.					
15. Talking to peers was more helpful to me than my caseworker					
16. What do you think is the main reason most people do not want to participate in the independent living program?					
Being under state care for more years					
You are really not independent because you still have rules to follow					
People want to experience life on their own					
They don't want to be told what to do					
They just want to go back home					

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
17. I have a significant adult in my life that I go to and talk over things					
18. How often do you talk with your specialist ?	About 1 time per week		Sometimes 2 or 3 times		Only when I need to
19. Rank what you think is best way to inform others about the IL program	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
Reading a pamphlet or IL booklet					
Talking with a caseworker					
Something online or an interactive program such as an app					
Talking with someone who has graduated from the program					
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
20. I feel safe and secure in my current living arrangement					
21. I really did not have an option other than going into the Independent Living program					

22. The thought of going under state care for more years really did bother me, but given the benefits I would receive, I chose the IL program anyway program because I had nowhere else to go					
---	--	--	--	--	--

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
23. I felt like I needed the extra assistance from Sunrise in helping me with my future					
24. If I had the chance, I would tell others to join the IL program					
25. Being in this program gives me more hope for my future					
26. Being on my own gives me a strong sense of satisfaction					
27. In your preparation for Independent Living how much time did you spend with your specialist?	None at all	More than a little	A lot	A little	
28. I think what would help others learn about the IL program would be to...	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
Talk with an adult who cares about your future					
Having an online app that tells me about the program					
Combination of both					
29. What I like the most about my experience with the IL Program is..	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree

The relationship that I have with my specialist as they really care for me					
I get to be on my own					
The friends that I am making within my IL group					
I have time to figure out life					

APPENDIX B

CURRENT NON-IL PARTICIPANT SURVEY

Demographic Information

What is your gender ? ___M ___ F What is your birthdate _____

What is your current living arrangement like? Please describe

Do you receive state support? Y/N

Do you live with any family ? Y/N

Do you have enough to live on? Y/N

Do you work? If so what do you do? _____

How many hours per week do you work? _____

What is your hourly rate? _____

Do you plan to stay there long? _____

Do you think this might be your career job? _____

Do you currently go to school? Y/N What is your program of study?

What is the highest level of education that you would ideally like to achieve ?

___ Finish HS or get a GED

___ Two-year college or Votech school (trade/skill development)

___ Four-year college

___ Graduate school

When you were part of the Sunrise program of services, how often did you speak with your Sunrise caseworker _____? (daily, weekly, monthly) or not at all about the IL program?

If you were to choose over again about going into the IL program, would you have changed your mind and consider joining? Please explain.

In this section give your thoughts about the Independent Living Program.

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
1. The information that I heard from my caseworker was helpful in understanding the independent living program and its benefits					
2. The packet of information was helpful to my understanding of the benefits that the independent living program would provide					
3. The information presented in the packet was clear and that was all I needed to know to make a decision					
4. Having the information explained to me by a caseworker was more helpful than reading the brochure or the packet of information					
5. Seeing the benefits that another person					

experiences or talking to another person is more helpful to me than reading about it.					
6. Talking to peers was more helpful to me than my caseworker					
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
7. I like being on my own					
8. I feel safe and secure in my current living arrangement					
9. I have a significant adult in my life that I go to and talk over things					
10. I really did not have an option other than going into the independent living program because I had nowhere else to go					
11. I felt like I needed the extra assistance from Sunrise in helping me with my future					
12. The thought of going under state care for more years really did bother me but given					

the benefits I would receive, I chose the IL program anyway					
13. If I had the chance, I would tell others to join the IL program					
14. Being in this program gives me more hope for my future					
15. Being in IL has allowed me to adjust well with supportive people around me.					

Think about a person who has helped you in your life as you answer these questions

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
16. I really haven't had anyone to look up to as I have mainly had to look after myself					
17. In thinking about this person he/she really understands me					
18. I never feel like I am a burden to this person					
19. I know that he/she will be there for me if I need them					
20. He/she seems to					

enjoy spending time with me					
21. He/she lets me know that they care through words and actions					
22. He/she is my go-to person and I know I can call them anytime					
23. I would like to have someone I could depend on but I would rather depend on myself					

APPENDIX C

**SUNRISE BROCHURE AND
HANDBOOK ASSESSMENT**

What are your thoughts regarding the information you received from the Sunrise brochure on Independent Living?

	Yes	No			
1. I have read the brochure					
2. I have seen this brochure before when I started to explore the possibility of the IL program.					
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
3. At first glance the brochure provides good information about the IL program					
4. At first glance it gives me a few facts that seem to describe what I would be interested in					
5. Given the information provided I would be able to sign up for the IL program and know what I would be doing					

6. At first glance it might be a way to start getting information but I really can't tell what I would be doing					
7. The brochure is nice but I would rather get my information from a person					
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
8. My caseworker explained the options to me but I do not remember seeing this brochure					
9. If I gave the brochure to one of my friends they would understand the IL program					
10. I don't think I would change anything about the brochure					
11. The statistics that were listed helped me think more strongly about the IL program					
12. I would rather interact with an online APP than the brochure					
13. I have read or have gone over the Sunrise Independent Living Handbook.					
14. The Sunrise IL manual is in a format I could read and understand					
15. It is well organized which allowed me to know what my next steps would be and what I need to do					

16. As I started to read through the material it became harder to retain all of the information					
17. After reading through the information, I had to go back over some of the sections many times to absorb what it was saying					
18. The expectations were laid out and the services listed were clear					
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
19. It would have helped if there were some graphic images to help break up the printed material					
20. I would rather interact with an online APP going at my own pace and use the handbook as a reference					
21. If it were divided up in smaller sections with focus questions to help guide my reading that would be helpful					
22. If I took a reading test over the material in the handbook, I think ..	I would score well		I would do OK		I would not do well at all

23. Based on your answer to the last question give us a way to improve the handbook	I would not change anything.		I would provide some feedback questions after each section to help me focus	If there is any way it could be put online with some graphics to make it more interesting, I think I would do better
24. What is the best way you learn?	Reading through text and writing down notes		Seeing short segments of an interactive video that explains a concept	Having someone explain it to me

In this section give your thoughts about the Independent Living Program.

	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
24. The information that I heard from my caseworker was helpful in understanding the independent living program and its benefits					
25. The packet of information was helpful to my understanding of the benefits that the independent living program would provide					

26. The information presented in the packet was clear and that was all I needed to know to make a decision					
27. Having the information explained to me by a caseworker was more helpful than reading the brochure or the packet of information					
28. Seeing the benefits that another person experiences or talking to another person is more helpful to me than reading about it.					
29. Talking to peers was more helpful to me than my caseworker					
	Strongly Disagree	Disagree	Neither agree or disagree	Agree	Strongly Agree
30. I like being on my own					
31. I feel safe and secure in my current living arrangement					
32. I have a significant adult in my life that I go to and talk over things					

33. I really did not have an option other than going into the independent living program because I had nowhere else to go					
34. I felt like I needed the extra assistance from Sunrise in helping me with my future					
35. The thought of going under state care for more years really did bother me but given the benefits I would receive, I chose the IL program anyway					

APPENDIX C (CONTINUED)

TESTIMONIALS

This is what Sunrise Independent Living participants have said:

"I wouldn't be the person I am right now if it wasn't for Sunrise...I see Sunrise as my parents, as my family."

-Erwin



"It was awesome to walk into a place that was furnished with food and furniture. It's an awesome feeling to have a place to call your home."

-Jessie

For more information about Sunrise's Independent Living program, please contact Sunrise toll free at (855)33-iCARE or email lcume@sunrise.org.

SUNRISE.ORG



2018 AOI Award Winner
Sunrise was the winner of the Aging Out Institute (AOI) 2018 Award in the area of "Employment Support."



300 Hope St. | PO Box 1429
Mt. Washington, KY 40047
502.538.1000 | sunrise.org




SUNRISE
Children's Services
INDEPENDENT LIVING



STATISTICS PREDICT A GRIM FUTURE:

Young people transitioning out of the foster care system are more likely than their peers to drop out of high school, become parents before they are ready, experience homelessness, or end up in jail.

<50%

will graduate high school.

40%

will go homeless.

<3%

will graduate college.

70%

will become pregnant by age 21.

You don't have to be part of these statistics. With Independent Living through Sunrise, you can achieve the future you've always dreamed of.

WHAT YOU CAN EXPECT WITH SUNRISE

Sunrise has created an innovative and life-changing Independent Living program for 18-to-21-year-olds who have aged out of the state's care. As a participant, you will be given the tools you need to build your own future as an independent adult through one of our multiple programs located across Kentucky.

Sunrise will pay for the rent and utilities on your apartment. Your fully furnished apartment will include personal and cleaning supplies as well as an initial supply of food. On a monthly basis, you will be given money for clothing, food, allowance, and personal items. Additional money can be earned for education, work support, and cell phone use.

Sunrise will work with you and your state worker to design a program around your education and employment needs. A Sunrise team member will meet with you weekly to assist you in building your independence readiness and skill level as you move through a plan that's uniquely yours. Sunrise will provide assistance with transportation and offer skills-training classes that include money management, job search skills, proper nutrition, volunteering, and more.

Upon completion of the program at age 21, you may have the opportunity to transfer the apartment lease and utilities to your name and keep the furnishings. We want to help you become the best version of yourself.

SUNRISE PROVIDES MORE...

Since 2015, Sunrise has been committed to providing young adults even more support than what has been offered through state-funded Independent Living services. You need more. You deserve more. And that's why Sunrise created VentureON.



VentureON is Sunrise's pioneering, grant-funded program that surrounds you with a care plan team and additional resources to better equip you for all that life can offer. Here's what you will receive through VentureON:

- Job training and support
- Individual and group coaching in areas such as driving, banking, grocery shopping, budgeting, and buying insurance
- A monthly work stipend (if working) to offset work expenses
- A monthly stipend for school expenses (if enrolled in school)
- A quarterly "step up to success bonus" to build your savings account
- A Christian mentor if you desire more personalized support

Your VentureON care plan team will work together to create a path of life for you to address personal, emotional, and spiritual areas, along with education and work-related goals.

APPENDIX D

CHAPTER THREE TABLES

Table 3.x

Demographic Information of Client Participants

Demographic Information	Response Rate (N)	Indicators
Age	18	8-18 yr. old; 2-19 yr. old; 5- 20 yr. old; 3-21 yr. old
Gender	17	8 male; 8 female; 1 preferred not to indicate
Financial security	16	10 indicated they have enough to live on 4 indicated maybe they have enough to live on 2 indicated they do not have enough to live on
Job status	15	3 work less than 10 hours per week 7 work between 20-30 hours per week 3 work around 40 hours 2 work more than 40 hours
Type of work	10	6 responded they work in retail 3 work in fast food 1 works as a bank teller
Education	15	3 indicated that are currently in school 12 indicated they are not in school
Educational attainment	15	7 indicated that they have a high school diploma 8 indicated that they have taken some college classes
Desired educational	15	2 wanted to attain a certificate at a community college 12 wanted a college degree 1 wanted more than a college degree
Desired vocation	13	13 clients responded with desiring the following careers: nursing, Spanish professor, dental hygienist, airline pilot, teacher, dentist, mechanic, construction worker (2), social worker, cosmetologist and business owner (2)

Table 3.x***Acclimatization of Clients to the Program***

Ratings of Clients of their Experience	Median	Mode^a	M (SD)
Talking with my specialist was helpful in understanding the IL program (n=15) ^b	5	4	4.43 (.76)
Talking with another person was more helpful than reading about it. n=15 ^b	5	5	4.33 (.82)
The packet of information was helpful (n=15) ^b	5	4	4.57 (.51)
Rank what you think is the best way to inform others about the IL program ^c			
Reading a pamphlet or IL booklet (n=13) ^c	3	3	3.08 (.92)
Talking with a caseworker/specialist (n=13) ^c	5	4	4.38 (.74)
Something online or an interactive program such as an app (n=13) ^c	3	3	2.54 (1.33)
Talking with someone who graduated from the program (n=13) ^c	5	5	4.54 (.63)
Talk with another adult who cares about your future (n=11) ^c	4	4	4.27 (.75)
Having an online app that tells about the program (n=11) ^c	3	3	2.64 (1.37)
Combination of both (a person and online app) (n=11) ^c	4	3	3.92 (1.26)

Note. ^a Multiple modes exist, largest value is shown.

Note. ^b The response *strongly agree* received a score of 5; *agree* received a score of 4; *neither agree or disagree* received a score of 3; *somewhat disagree* received a score of 2; and *disagree* received a score of 1.

Note. ^c A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

Table 3.x***Client Inclination Toward Joining the ILP***

Questions asked of clients	Median	Mode^a	<i>M (SD)</i>
What were some of the things that helped you choose IL? ^b			
Wanting to do something with my life (n=14)	5	5	4.93(.26)
Wanting to get an education (n=15)	5	5	4.33 (.70)
Being on my own and having support along the way (n=15)	5	5	4.53 (.94)
Giving me time to decide what to do (n=14)	4	4	3.93 (.50)
I felt like I needed the extra assistance from Sunrise in helping me with my future (n=13)	4	4	3.69 (1.03)
The thought of going under state care for more years really did bother me, but given the benefits I would receive I chose the IL program anyway (n=13)	4	4	3.77(1.3)
I really did not have an option other than going into the ILP because I had nowhere else to go (n=13)	4	4	3.46 (1.39)

Note^a. Multiple modes exist, largest value is shown..

Note^b. A five-star slider scale was used. 5 star response received a score of 5; 4 star received a score of 4; 3 star response received a score of 3; 2 star response received a score of 2; and 1 star received a score of 1.

Table 3.x

Rating of Current Experience

Questions asked of clients	Median	Mode ^a	<i>M (SD)</i>
If I had a chance, I would tell others to join ^b the IL program (n=12)	5	5	4.50 (.80)
Being in this program gives me more hope for my future (n=12)	5	5	4.58 (.67)
Being on my own gives me a strong sense of satisfaction ^a (n=12)	5	5	4.67 (.49)
I feel safe and secure in my current living arrangement ^a (n=13)	5	5	4.85 (.38)
I have a significant adult in my life I can go to and talk over things ^a (n=13)	5	5	4.00 (1.52)
What I like the most about my experience with the IL program is ^c			
The relationship I have with my specialist (n=12)	2	2	2.00 (.74)
I get to be on my own (n=12)	3	3	2.50 (.67)
The friends I am making with my IL group (n=12)	1	1	1.75 (.97)
I have time to figure out life (n=12)	2	2	2.25 (.75)

Note. ^a. Multiple modes exist, largest value is shown.

Note. ^b The response *strongly agree* received a score of 5; *agree* received a score of 4; *neither agree or disagree* received a score of 3; *somewhat disagree* received a score of 2; and *disagree* received a score of 1

Note. ^c A slider scale was used having a maximum value of 3 and a minimum value of 1. The response *strongly agree* has a score of 3; *agree* had a score of 2, and *somewhat agree* had a score of 1.

Table 3.x***Why Others do Not Choose the IL Program***

Questions asked of clients	Median	Mode	<i>M (SD)</i>
Being under state care for more years (n=15)	5	5	4.60 (.71)
You're really not independent because you still have rules to follow (n=15)	4	4	3.87 (1.26)
People want to experience life on their own (n=15)	3	3	3.27 (1.08)
They don't want to be told what to do (n=15)	5	5	4.53 (.72)
They just want to go back home (n=15)	4	4	3.67 (1.25)

Note^a. Multiple modes exist, largest value is shown.

Table 3.x***Frequency of Interaction with a Specialist***

Questions asked of clients^a	n	(x/n)%
How often do you talk with your specialist (now)?		
About 1 time per week (x=10)	14	10 (71.4%)
Sometimes two or three times (x=1)	14	1 (7.1%)
Only when I need to (x=3)	14	3 (21.4%)
In your preparation for Independent Living how much time did you spend with your specialist?		
None at all (x=1)	12	1 (8.3%)
A little (x=6)	12	6 (50%)
More than a little (x=4)	12	4 (33%)
A lot (x=1)	12	1 (8.3%)

Note.^a The percent is derived from the client responses (N=12) in ratio to the number of potential responses(x).

Table 3.x***Brochure Effectiveness Survey***

Survey questions	Median	Mode^a	M(SD)
At first glance the brochure provides good information about the IL (n=12) ^b	5	5	4.33 (.85)
At first glance it gives me a few facts the seem to describe what I would be interested in (n=11) ^b	4	4	4.18 (.83)
Given the information provided I would be able to sign up for the IL program and know what I would be doing. n=11 ^b	4	5	4.18 (.88)
At first glance it might be a way to start getting information but I really can't tell what I would be doing n=11 ^b	4	5	3.91 (1.0)
The brochure is nice, but I would rather get my information from a person n=11 ^b	5	5	5.00 (0)
If I gave the brochure to one of my friends they would understand the IL program n=11 ^b	4	4	4.00 (.60)
I do not think I would change anything about the brochure n=11 ^b	4	4	3.73(1.05)
My caseworker explained the options to me but I do not remember seeing this brochure n=11 ^b	3	4	2.91 (1.31)
The statistics that were listed helped me think more strongly about the IL program n=11 ^b	4	4	3.91 (.90)
I would rather interact with an online APP than the brochure n=11 ^b	2	2	2.64 (1.23)

Note.^a Multiple modes exist, largest value is shown.

Note.^b The response *strongly agree* received a score of 5; *agree* received a score of 4; *neither agree or disagree* received a score of 3; *somewhat disagree* received a score of 2; and *disagree* received a score of 1.

Table 3.x***Handbook Effectiveness Survey***

Survey Questions	Median	Mode^a	M(SD)
The Sunrise IL manual is in a format I could read and understand. (n=10)	5	5	4.70 (.46)
It is well organized which allowed me to know what my next steps would be and what I needed to do. (n=10)	5	5	4.70 (.46)
As I started to read through the material it became harder to retain all of the information. (n=10)	3	4	3.20 (.87)
After reading through the information, I had to go back over some of the sections many times to absorb what I was reading. (n=10)	4	4	3.80 (.75)
The expectations were laid out and the services listed were clear. (n=10)	4	4	4.30 (.64)
It would have helped if there were some graphic images to help break up the printed material. (n= 10)	3	3	3.50(1.12)
I would rather interact with an APP going at my own pace and use the handbook as a reference. (n=10)	3	3	2.44 (.83)
If it were divided up in smaller sections with focus questions to help guide my reading that would be helpful. (n=10)	4	4	3.70 (1.1)
What is the best way you learn ? ^b			
Reading through the text and writing down notes (n=8)	3	3	3.0 (1.58)
Seeing short segments of an interactive video that explains the concept (n=8)	3.5	3	3.75 (.83)
Having someone explain it to me (n=10)	5	5	4.50 (.67)

Note.^a Multiple modes exist, largest value is shown

Note.^b A five-star slider scale was used. 5 star response received a score of 5; 4 star received a score of 4; 3 star response received a score of 3; 2 star response received a score of 2; 1 star response received a score of 1

APPENDIX E

IL SPECIALIST INTERVIEW QUESTIONS

Thank you for attending today's dialogue about improving our marketing material as it relates to the Independent Living program. As a caseworker we would like your input in helping us assess the materials, your experience in helping young people who are aging out to consider the IL program, and to help us with how to attract more individuals to participate in the ILP.

In your role as a caseworker for Sunrise, help us understand how our clients think about the IL program.

What do you view as the primary reason a young person chooses to go into IL?

What characteristics do you see between those that choose to participate in IL and those who do not?

In your experience as a caseworker how much time do you spend in going over the material found in the Sunrise Independent Living Manual? What is your approach? And when do you start meeting with the clients?

Do you give them the material first and then ask them if they have any questions?

If you could narrow it down to two or three reasons why foster youth do not choose IL, what would those reasons be?

Describe the mentoring role that the specialist plays. In our literature it states that the client meets monthly with their specialist. What goes on during that time and do you see any need to change the frequency?

Describe the mentoring role that the specialist plays?

What would you recommend in helping more clients choose the ILP?

APPENDIX F

INDEPENDENT LIVING CLIENTS INDIVIDUAL OR GROUP INTERVIEWS

Thank you for attending today's dialogue about improving our marketing material as it relates to the Independent Living program in which you are currently enrolled. The purpose of this study is to assess the materials, to learn your experience under foster or residential care, and to help us with how to attract more individuals to participate in the ILP.

Help me understand your experience in either foster or residential care?

1. If you would, please describe your experiences in foster or group care.

Help me understand the role that your caseworker played in helping you decide for your future such as the IL program or other choices you were facing as you were aging out?

2. What were your interactions with your caseworker like?
3. What was your relationship like with your foster parent(s)? How helpful were they in helping you determine your future goals or plans? Did they influence you to go into the ILP?

Think about the time period that you considered whether to recommit with the state for IL services with Sunrise.

4. In terms of preparing for or getting information on the IL program at Sunrise, what were your initial thoughts in recommitting with the state?
5. How were you informed about the IL program? What information was given?
6. Did you talk with anyone who was currently in the IL program?

Help me understand the options that you were considering as you were turning 18.

7. What was the main reason you chose to be involved with the IL program at Sunrise?
8. If you could be involved in designing a marketing piece, a video, or online program to help others learn about the ILP what would that look like? How would you design it and what would you include?

APPENDIX G

ALUMNI SURVEY NON- ILP

Thank you for attending today's dialogue about improving our marketing material as it relates to the Independent Living program. The purpose of this study is to assess the materials, your experience under foster or residential care, and to help us with how to attract more individuals to participate in the ILP.

Help me understand your experience in either foster or residential care?

1. If you would, please describe your experiences in foster or group care.
2. How long were you in care? (Clarify if in foster or in residential care)
3. Did you have multiple foster homes?

Help me understand the role that your caseworker played in helping you decide for your future such as the IL program or other choices you were facing as you were aging out?

4. What were your interactions with your caseworker like?
5. Did you feel he or she supported you?
6. What was your relationship like with your foster parent(s)? How helpful were they in helping you determine for your future goals and plans? Did they influence you to go into the ILP?

Think about the time period that you considered whether to recommit with the state for IL services with Sunrise.

7. In terms of preparing for or getting information on the IL program at Sunrise, what were your initial thoughts in recommitting with the state?
8. Were you given a brochure or explained what the process was?
9. How were you informed about the IL program? Was the brochure helpful? If not, what would be a better way to communicate the IL program better to future IL students?
10. Did you talk with anyone who was currently in the IL program?

Help me understand the options that you were considering as you were turning 18.

11. What was the main reason you chose not to be involved with the IL program at Sunrise?
12. What are your long-term goals?

APPENDIX H

EVALUATION OF IL VIDEO-STAFF

In this section give your thoughts about the Independent Living Program.

	Not at all	A little	Likely	More than likely	Definitely
1. If I would show this video to those who are about to age out, I think they would have a better perspective on IL.					
2. Considering the portion of the video that showed the Sunrise staff, do you think what they shared would influence others to consider more strongly joining the IL program?					
3. Would you be able to recommend this video to help influence potential IL clients to join IL?					
1-5 Star Rating	1 star- not likely	2 stars	3 stars	4 stars	5 stars- definitely
4. What do you think is the strongest message that is being conveyed in this video? (1 star-not likely; 5 stars-definitely) Please					

answer all questions in this section. Thanks					
4a.	Support in getting their education				
4b.	Time to figure life out				
4c.	A chance to be on their own and have their own place				
4d.	Hope to do something with their life				
4e.	Being connected to another adult is important				
	Not at all	A little	Likely	More than likely	Definitely
5. As one who works with youth in care at some capacity at Sunrise or another agency, did this video give you a greater appreciation of the connection between adults and the young people they work with?					

	I think It would be a hindrance to recruiting foster youth	I think It might be a hindrance to recruiting foster youth	I think it would neither hinder nor help recruiting foster youth	I think it would be a benefit in recruiting foster youth	I think it would definitely benefit recruiting foster youth
6. Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth?					
Fill in the blanks for the following questions					
7. What do you think is the most important step in helping an aging out youth consider committing to an IL program?					
8. What is one thing you would change or add to this video?					
9. What didn't you like about the video. Please explain.					

APPENDIX I

EVALUATION OF IL VIDEO-IL ADULTS

In this section give your thoughts about the Independent Living Program.

	Not at all	A little	Likely	More than likely	Definitely
1. If I would show this video to those who are about to age out, I think they would have a better perspective on IL.					
2. The client-specialist relationship in this video showed a positive connection that might influence others to consider more strongly joining the IL program					
3. Would you be able to recommend this video to help influence potential IL clients to join IL?					

1-5 Star Rating	1 star- not likely	2 stars	3 stars	4 stars	5 stars- definitely
4. What do you think is the strongest message that is being conveyed in this video? (1 star-not likely; 5 stars-definitely) Please answer all questions in this section. Thanks					
4a.	Support in getting their education				
4b.	Time to figure life out				
4c.	A chance to be on their own and have their own place				
4d.	Hope to do something with their life				
4e.	Being connected to another adult is important				
1-5 Star Rating	1 star- not likely	2 stars	3 stars	4 stars	5 stars- definitely
5. What do you think is the most important thing for <i>you</i> as you consider the IL program? Thanks!					
4a.	Support in getting my education				
4b.	Time to figure out my life				
4c.	A chance to be on my own and have my own place				
4d.	Hope to do something with my life like getting a job				
4e.	Getting support from another adult is important				

	I think It would be a hindrance to recruiting foster youth	I think It might be a hindrance to recruiting foster youth	I think it would neither hinder nor help recruiting foster youth	I think it would be a benefit in recruiting foster youth	I think it would definitely benefit recruiting foster youth
6. Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth?					
Fill in the blanks for the following questions					
7. What do you think is the most important step in helping an aging out youth consider committing to an IL program?					
8. Based on your response to the last question, what type of scene or scenario would you recommend that might better communicate that step? Pretend you are the producer of this video in other words.					
9. What didn't you like about the video. Please explain.					

APPENDIX J

CHAPTER FOUR TABLES

Table 4.x

Evaluation of IL Video-Staff (those outside of Sunrise)

Ratings of respondents	Median	Mode ^a	M (SD)
1. If you would show this video to those who are about age out, I think they would have a better perspective on IL and know what their next steps are. ^b	3	4	3.37 (1.16)
2. Considering the portion of the video that showed the Sunrise staff and what they said, do you think what and how they shared would influence others to consider more strongly joining the IL program? ^b	3	3	3.11 (1.1)
3. Would you be able to recommend this video to help pre IL clients understand what their next steps are? ^b	3	3	3.07 (1.77)
4. What do you think is the strongest message that is being conveyed in this video? (5-star slider scale) ^c			
a. Support in getting their education	3	1	2.67(1.54)
b. Time to figure out life	4	5	3.63 (1.28)
c. A chance to be on their own and have their own place	4	5	3.85 (1.41)
d. Hope to do something with their life	4	5	4.04 (1.10)
e. Being connected to another adult is important	4	5	4.19 (0.98)
5. As one who works with youth in care at some capacity at Sunrise or another agency, did this video give you a greater appreciation of the connection between the adults and the young people they work with?	4	5	4.59 (1.45)
6. Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth? ^b	3	3	2.89 (1.13)

Note. ^a Multiple modes exist, the highest is provided.

Note^b The response *Definitely* received a score of 5; *More than likely* received a score of 4; *Likely* received a score of 3; *A little* received a score of 2; and *Not at all* received a score of 1.

Note^c A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

Table 4.x

Evaluation of IL video- Sunrise Staff

Ratings of respondents	Median	Mode^a	<i>M (SD)</i>
1. If you would show this video to those who are about age out, I think they would have a better perspective on IL and know what their next steps are. ^b	3	4	3.30 (1.27)
2. Considering the portion of the video that showed the Sunrise staff and what they said, do you think what and how they shared would influence others to consider more strongly joining the IL program? ^b	3	3	3.00 (1.18)
3. Would you be able to recommend this video to help pre IL clients understand what their next steps are? ^b	3	2	3.00 (1.26)
4. What do you think is the strongest message that is being conveyed in this video? (5-star slider scale) ^c			
a. Support in getting their education	3	1	2.80(1.21)
b. Time to figure out life	4	5	4.00 (1.10)
c. A chance to be on their own and have their own place	4	5	3.90 (1.18)
d. Hope to do something with their life	4	5	3.95 (.97)
e. Being connected to another adult is important	4	5	3.75 (1.04)
5. As one who works with youth in care at some capacity at Sunrise or another agency, did this video give you a greater appreciation of the connection between the adults and the young people they work with?	4	5	4.10 (1.61)
6. Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth? ^b	3	3	3.45 (1.36)

Note.^a Multiple modes exist, the highest is selected.

Note^b The response *Definitely* received a score of 5; *More than likely* received a score of 4; *Likely* received a score of 3; *A little* received a score of 2; and *Not at all* received a score of 1.

Note^c A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

Table 4.x

Survey evaluating first draft of marketing video- IL Clients

Ratings of respondents	Median	Mode^a	M (SD)
1. If you would show this video to those who are about age out, I think they would have a better perspective on IL and know what their next steps are. ^a	5	5	4.31(.99)
2. The client-specialist relationship in this video showed a positive connection that might influence others to consider more strongly joining the IL program? ^a	5	5	4.46(.75)
3. Would you be able to recommend this video to help pre IL clients understand what their next steps are? ^a	4	5	4.15(.95)
4. What do you think is the strongest message that is being conveyed in this video? (5-star slider scale) ^b			
a. Support in getting their education	4	5	3.62(1.6)
b. Time to figure out life		5	5
c. A chance to be on their own and have their own place		5	5
d. Hope to do something with their life		5	5
e. Being connected to another adult is important	4	5	4.23(.39)
5. What do you think is the most important thing for you as you consider this video (5-star slider scale) ^b			
a. Support in getting my education	4	5	4.31(1.26)
b. Time to figure out my life	5	5	4.54(.75)
c. A chance to be on my own and have my own place	5	5	4.54(.75)
d. Hope to do something with my life, like getting a job	5	5	4.83(.37)
7. Getting support from another adult that can help me with next steps.	5	5	4.62(.62)
6. Sunrise is a faith-based organization. In your opinion, would the references to faith or religion be more of a hindrance or a benefit to recruiting foster youth? ^a	3	5	3.54 (1.34)

Note. ^a The response *Definitely* received a score of 5; *More than likely* received a score of 4; *Likely* received a score of 3; *A little* received a score of 2; and *Not at all* received a score of 1.

Note^b A five-star slider scale was used. *5 star response* received a score of 5; *4 star*

response received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

Table 4.x***Comparison of Results from Quantitative Surveys***

	Outside of Sunrise (x=27)			Sunrise (x=20)		
	Median	Mode ^a	M (SD)	Median	Mode ^a	M (SD)
(Q1) ^b	3	4	3.37 (1.16)	3	4	3.30 (1.27)
(Q2) ^b	3	3	2.89 (1.12)	3	3	3.00 (1.18)
(Q3) ^b	3	3	3.07 (1.77)	3	2	3.00 (1.26)
(Q4a) ^c	3	1	2.67(1.54)	3	1	2.80 (1.21)
(Q4b) ^c	4	5	3.63 (1.28)	4	5	4.00 (1.10)
(Q4c) ^c	4	5	3.85 (1.41)	4	5	3.90 (1.18)
(Q4d) ^c	4	5	4.04 (1.10)	4	5	3.95 (.97)
(Q4e) ^c	4	5	4.19 (0.98)	4	5	3.75 (1.04)
(Q5) ^b	4	5	4.59 (1.45)	4	5	4.10 (1.61)
(Q6) ^b	3	3	2.89 (1.13)	3	3	3.45 (1.36)

Note. ^a Multiple modes exist, the highest is provided.

Note^b The response *Definitely* received a score of 5; *More than likely* received a score of 4; *Likely* received a score of 3; *A little* received a score of 2; and *Not at all* received a score of 1.

Note^c A five-star slider scale was used. *5 star response* received a score of 5; *4 star response* received a score of 4; *3 star response* received a score of 3; *2 star response* received a score of 2; and *1 star response* received a score of 1.

Table 4.x

Major Themes from Responses

Sunrise	Other agencies
<p>What do you think is the most important step in helping an aging out youth consider committing to an IL program?</p>	<p>What do you think is the most important step in helping an aging out youth consider committing to an IL program?</p>
<p>Getting the point of all of the benefits that they would get.</p>	<p>Fully understanding the benefits available to them: housing, funding for college, support, independence but with guidance, etc. I would emphasize the tangible benefits more as well. Like getting your rent paid for, getting utilities paid for, monthly stipend, etc.</p>
<p>I think the youth need to hear from other youth. Perhaps showing a 16yo asking a current IL youth questions would be more appropriate in recruiting a youth. It would give the youth a chance to relate to someone that is also considering this and the youth can ask actual questions that a prospective youth would have. Letting them know what the steps are... Showing them the opportunities</p>	<p>Understanding benefits of an IL program combined with a connected adult who has their best interest in mind and meets the youth where they are</p>
<p>Themes from Q8 - Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful</p>	<p>I believe the most important step for aging out youth is to provide them with the numerous opportunities in education and the work force. Preparing them with job readiness, budgeting, transportation, time management and how to obtain supportive services. These tools can be provided by IL specialist and other community supports including local school districts.</p>
<p>Themes from Q8 - Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful</p>	<p>Themes from Q8 - Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful</p>

Walking through their fully furnished apartment.

Show youth living in their own apartment, going to school and working

Male youth, youth who are not mothering in addition to the awesome youth you already have on the video.

I know that the two young ladies were parenting youth but I think there needs to be some attention paid to the majority which would not be parenting. Include a male

The adults need to be secondary (in the video)- have them speak with the kids.. stage the adults with them but making the story on how the IL program would benefit them. Have the adults interact with the kids.

The clients sometimes feel as though they have no choice at all. So the video should definitely include the aspect that the client has choices

It wasn't specific enough. "A lot of benefits" but no specifics that a kid aging out could relate to

Figuring out what path they want to take after aging out.

Q9 - What didn't you like about the video? Please explain.

Q9 - What didn't you like about the video? Please explain.

I thought the video was very good! However, it really didn't give information about IL or Venture On. It tugged at my heartstrings and was very sweet but it didn't really tell me the benefits of IL, what the expectations would be, or how to go about getting into IL or who to talk to for more information, speaking from a kid's perspective. I wouldn't take anything away from the video but I would add more information regarding the benefits, expectations, and how to get started.

It looks more like a young mom's service than a broader IL program. Needs a female without a child, needs a male.

Would change the music. Not a good tempo to cause a teen to lean in. Show what the steps are... .. there were no steps .. they need to know how this program will help them.

I wouldn't lead the video with Jeremiah 29:11. You will lose the 19-year-old male who needs you most. I would replace phrase "hands and feet of Christ" with "an opportunity to serve them well in a trusted relationship." The time for Christ comes after being a light and establishing trust...

The video had too many religiously affiliated aspects to it. I understand Sunrise is a Christian agency however that is not an accurate representation of the youth served. If we claim to serve children of all religious backgrounds, then why are we advertising as though for Christian youth? We also need to remember that we are serving traumatized youth that now question religion and God due to the unimaginable acts of abuse that have happened to them

not in the intro video

One staff member stated gives them opportunity to be hands and feet of Christ, but many youth may run from that...there is no statement as to how you are the hands and feet of Christ. Note: I think this is a good idea but I believe the message isn't quite there yet.

Table 4.x

Major themes, IL Clients

IL Clients - Other agencies

Q7. What do you think is the most important step in helping an aging out youth consider committing to an IL program?

Knowing that there's stability, and that they won't be thrown out on the street. Having hope is important.

Probably the benefits and the support, letting them know all the benefits of recommitting.

Letting them know they aren't alone!! life can easily get overwhelming, and its very comforting to know you don't have to do everything alone. A listening and caring support structure that knows how to level with the youth.

Q8. Based on your response to the last question, what should this recruiting video include? Please describe a scenario that you think would be helpful.

I think it was well-done in the video, though there weren't nearly as many details about what life is like in the program. The more details, the more someone will know how good it is.

Having the specialist and client in a scene talking together may help convey the message of not being alone.

Q9 - What didn't you like about the video? Please explain.

I thought it was vague. There's so much more they could've talked about to recruit ilp youth, but the video was kind of repetitive

I don't like that they don't explain everything that comes along with joining the program. Go into more detail.

APPENDIX K

IRB APPROVAL

IRB Approval
5/11/2020
IRB # 53613
Exempt

PROTOCOL TYPE

Which IRB _____
 Medical NonMedical

Protocol Process Type

Exemption
 Expedited (Must be risk level 1)
 Full

IMPORTANT NOTE: Once you have saved your choices under "Which IRB" and "Protocol Process Type", you will not be able to change your selections. If you select the wrong IRB Type and/or your application is deemed eligible for a different Protocol Process Type, it may be necessary to create a new application.

Please see below for guidance on which selections to make, and/or go to ORI's "[Getting Started](#)" web page. If you still have questions about which IRB or Protocol Process Type to choose, please contact the Office of Research Integrity (ORI) at 859-257-9428 **prior** to saving your selections.

Which IRB

The **Medical IRB** reviews research emanating from the Colleges of Dentistry; Health Sciences; Medicine; Nursing; Pharmacy and Health Sciences; and Public Health.

The **Nonmedical IRB** reviews research originating from the Colleges of Agriculture; Arts & Sciences; Business & Economics; Communications & Information; Design; Education; Engineering; Fine Arts; Law; and Social Work. The Nonmedical IRB does not review studies that involve administration of drugs, testing safety or effectiveness of medical devices, or studies that involve invasive medical procedures, regardless of from what college the application originates.

Which Protocol Process Type

Under federal regulations, an investigator's application to conduct a research project involving human subjects can be processed by the IRBs in three ways:

- by full review;
- by exemption certification;
- by expedited review.

The preliminary determination that a research project is eligible for exemption certification or expedited review is made by the investigator. For assistance in determining which review process type your IRB application is eligible for, please go to ORI's "[Getting Started](#)" web page.

The revised Common Rule expanded exemption certification category 4 for certain secondary research with identifiable information or biospecimens. The regulations no longer require the information or biospecimens to be existing. For more information see the [Exemption Categories Tool](#).

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VITA

Richard R Burslem

Education

University of West Georgia Carrollton, GA Administration and Supervision Degree	2003
University of Delaware Newark, Delaware Master of Education	1984
Vanderbilt University Nashville, Tennessee Bachelor of Science in Biology	1980

Professional Experience

Vice President of Advancement and Marketing Sunrise Children's Services Mount Washington, KY	2017-present
Headmaster Lexington Christian Academy Lexington Kentucky	2014-2017
Headmaster Hartfield Academy Jackson, Mississippi	2012-2014
Headmaster Hebron Christian Academy Dacula, Georgia	2008-2011
Headmaster The Masters School West Simsbury, Connecticut	2005-2008
Principal and Director of Technology Landmark Christian School Fairburn, Georgia	1994-2004
Teacher Sanford School Hockessin, Delaware	1984-1994