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IMPACT OF FOSTER CARE SYSTEM ON AGED OUT OF CARE CHILDREN IN BC: YOUTH PERSPECTIVE ON THE ASSOCIATION BETWEEN FOSTER CARE SYSTEM AND HOMELESSNESS.

SUBMITTED BY

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ABSTRACT

Canada and Nordic countries are few well known countries in the global north to have a universal and generous social welfare among other western developed countries. However, there has been immense debate on effectiveness of their service on the well-being of beneficiaries. This research focuses on perspective of youth aging out of foster care to examine the relationship between foster care system and youth's homelessness later in adult life. Increased psychological and behavioural change among adults was noted more among those who identified themselves as having been placed or passed through foster care system. Psychological problems and poor mental health have been attributed to parents' child separation, inadequate policy, and lack of actions to protect children who go through foster system. Existing studies have shown that participation in welfare programs such as the foster care system resulted in poor mental health well-being and a high rate of vulnerability that led to homelessness. This research aims to create awareness of the connection between foster care and homelessness as seen from the young people's perspective and with particular attention to their mental health wellbeing. Discussion includes the effects of homelessness, the stigma associated with being homeless, and recommendation for policymakers, social workers, and non-for-profit agencies to alleviate homelessness of youth who pass through foster care system.

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CHAPTER ONE

1.0.INTRODUCTION

1.1.Background

Like other developed economies, countries in Europe, Canada, and the United States have well-established and institutionalized social welfare systems that comprise effective foster care services. As a result, these countries are experiencing significant growth in the number of children under foster care. Unfortunately, studies have also identified a growing number of homeless youths in comparison to older adults (National Alliance to End Homelessness, 2015). In a United States study, researchers found that the population at risk of becoming homeless are the youths aging out of foster care when they turn 18 years old and 21 years in some states (Dworsky et al., 2013). Unlike other peers, studies have found that there is a high probability of those who age out of foster care being at significant risk of becoming homeless. Additionally, Dworsky et al. (2013) established further that youths who age out of foster care become homeless at 11% and during their transition to adulthood. Concerns have emerged on the potential links that could be the cause of a high number of those who age out of foster care being homeless at a youthful age as they transition to adulthood.

The homeless population and concerns particularly during the coronavirus pandemic have become an area of focus by policymakers, government agencies, scholars, and other non-governmental organizations. In this commitment, there is the need to generate an in-depth view on the link between foster care aging out and the possibility of being homeless. The past studies have established that youths who age out of the foster care system usually experience a challenging environment featured by challenges in self-sustaining to adulthood in comparison to their peers who are well-prepared to handle adulthood self-sufficiency and transitioning to adulthood. Due to these vulnerabilities, the youths who age out of the foster care system have to manage a complex web of needs to become self-reliant exposing them to a significant level of deviant behavior (National Alliance to End Homelessness, 2015). They have to deal with unemployment, physical and mental health problems, early parenting, poor healthcare access, homelessness, incarceration, and poor educational outcomes due to high dependence on the public assistance programs for education.

While few studies have tried to explore the potential causes for these problems, there is a disconnect on the connection between foster care and homelessness seen from the young people's perspective/world view and with particular attention to their mental health wellbeing. Despite the significant benefits in support of foster care in making more lives better and easier by providing the necessary safety net for some and changed their lives for good (Kilos, 2018), concerns are emerging on the preparedness of youths who age out of foster care system to become self-reliant in transitioning process. Foster care was developed to replace orphanages and included children without parents and those with parents, but parents were not able to look after them. However, former foster care children are still suffering from mental health issues experienced during childhood. Today, it is noted that youth aging out of care face an extreme struggle in the transition to adulthood, often without any supports or resources of any kind. These findings reveal that there is a critical need to evaluate the social, psychological, emotional, physical, and financial problems facing the youths who age out of the foster care system. There exist over 9,000 children under foster care in British Colombia (B.C) with more than 1000 living in the North Region of British Columbia (Gillen, 2004). Ministry of Children and Family Development (MCFD) is the agency that is tasked with child welfare programs for the province.

With the changes in determination to improve outcomes of the foster care system, there is a growing demand for research to identify whether there is an association between children being in foster care and the likelihood of these children becoming homeless after they age out of the foster care system. Understanding the relationship between age out of foster care systems and homelessness during the transition to adulthood could be an important research and policy area that needs to be explored further. Therefore, the current study aims at evaluating the potential relationship that exists between foster care and homelessness seen from the young people's perspective/world view and with particular attention to their mental health wellbeing. Social workers require a better understanding of the transitioning of the youths from the foster care system to adulthood and self-reliance, which could become problematic if it is not adequately evaluated (Thomas & Pollio, 2002). According to the study by Geen (2003), child welfare authorities should change their focus on after foster care services and support. However, there is limited evidence in the literature regarding whether there is a high

likelihood of those who age out of foster care becoming homeless in comparison to the general population. While the author supports kinship care, practice guidance, emotional and psychological support, support structures, social worker, and base do lag behind the implementation of effective outcomes in facilitating smooth transitioning. The evidence for this type of association can inform scholars and other policymakers on the potential outcomes of the age out of foster care and the ability of these thoughts to have a smooth transition to adulthood. This is a major problem in British Colombia, which is meant to address potential sources and causes of growing homelessness in the Canadian population.

1.2. Statement of the Problem

Like other developed countries, Canada has an effective foster care system that is meant to protect children from neglect, abuse, or homelessness. However, the child welfare society is focusing on expanding its outreach to the beneficiaries to ensure they have a sustainable and self-reliant life after transitioning to adulthood. According to Reilly (2003), transitioning foster youths experiences challenges relating to education, housing, increased risk of poverty, risky sexual behaviour, and mental health problems that are all potential sources of negative outcomes on health. When they leave foster care, previous studies have established that 36% of the transitioning youths do experience some form of homelessness that could challenge the overall spirit of the foster care system (Reilly, 2003). Similar findings were identified in the American foster care system where the Tennessee Commission of Children and Youth (2011) found that one in five youths transitioning from foster care after attainment of majority age experience homelessness. Further studies have also found 14.2% of those transitioning out of foster care do face homelessness with 39.4% of them experiencing challenges due to housing instability (Kushel et al., 2007). Housing problems were identified as a critical concern for foster age out youths. Another study by Courtney et al. (2001) identified that 12-18 months after foster care will have 22% of these youths' face problems in identifying a suitable place to live.

According to Reilly (2003), 35% of the sample tested in the foster youth transitioning had moved like five times or more after they exited the foster care. Additionally, the study identified that homelessness resulted in an increased mental health burden on youths transitioning from foster care due to chronic homelessness and barriers to access quality and safe healthcare services. Similar views were expressed in Rew et al. (2008) who identified that homelessness was a critical issue among the youths transitioning from foster care. Apart from homelessness, the authors identified the risk of engaging in risky sexual behaviour, drugs, and substance abuse as other challenges that faced these youths transitioning from foster care to adulthood. Previous studies had also identified these challenges as critical concerns for the child welfare agencies and organisations (Johnson et al., 2006; Taylor-Seehafer et al., 2007). All these studies have identified a critical challenge facing the youths transitioning after they age out of foster care. These challenges could spread the poverty lineage across ages, which could result in a chronic problem of homelessness. Therefore, there is the need to address these and many other problems. Another study by Dworsky and Courtney (2009) established that the youths who age out of foster care do experience increased cases of physical abuse, mental health problems, child maltreatment, and other social problems including poor health outcomes.

Not only do these youths who age of out foster care experience homelessness, but they also face the burden of mental health problems that could limit their attainment of a fulfilling life after foster care. Pecora et al. (2005) study attribute these challenges to a lack of emotional and social support for the group to transition. Additionally, Courtney et al. (2010) established that former foster care youths can attain high school diplomas or equivalent qualifications, they experience lower annual income earnings in comparison to youths in the general population with the same level of qualification. Mental health problems are identified by Pecora et al. (2005) who established that youths who have left foster care had higher incidences of mental health problems and reported a lower rate of recovery from mental health issues compared to the general population. Findings further revealed that these youths are twice as likely to have mental health problems and cases of substance abuse in comparison to the general population. Mental health issues hurt the independent living, transitioning,

and barriers to emotional health development (Taylor-Seehafer et al., 2007). This group of youths leaving foster care encounter problems due to poverty, homelessness, and associated vulnerabilities.

While the previous studies have identified this as a concern that requires the attention of scholars and policymakers, there has been minimal commitment to evaluate potential solutions to these problems and increase transitioning success from foster care (Ahrens et al. 2010). The negative consequences of their problems during transitioning could pose a significant burden on them in areas of mental health concerns, drugs, and substance abuse, and risky sexual behaviours. The current study aims at creating awareness on the connection between foster care and homelessness seen from the young people's perspective/world view and with particular attention to their mental health wellbeing (Courtney et al., 2010). The purpose of the study is to establish the root cause through an in-depth study to evaluate potential solutions. Previous studies have focused on problems encouraged for transitioning youths from foster care. The previous studies do not address the significance of transitioning from a foster care system to adulthood as narrated by the foster youths (Courtney et al., 2010). Therefore, it remains unknown whether these foster youth view the process of transitioning as critical. The current study is meant to address these gaps in the literature to propose the best approaches to carry out the transitioning to ensure effective departure from foster care and acknowledge the potential interventions that could improve the rate of success for these youths (Taylor-Seehafer et al., 2007). The main area of focus is the mental health approaches that are identified during the transition.

1.3. Research Objectives

This research aims to bring awareness to the connection between foster care and homelessness seen from the young people's perspective/world view and with particular attention to their mental health wellbeing. The study will help to evaluate the following objectives:

1. To examine the cause of homelessness among the youths previously under foster care before them being aged out for transition.

2. To explore the mental health burden among youths who are transitioning from foster care into adulthood

3. to explore the challenges that are faced by youths who age out of foster care programs in British Colombia

4. To evaluate ways that the Province of BC could approach the problem of homelessness and mental health problems among those who were formerly under foster care before their age out of the welfare program?

1.4.Research questions

2. What causes homelessness for youth formerly placed in foster care?

3. What are the challenges faced by the youth who aged out of care?

4. How can the Province of BC mitigate the problem using homelessness among those who were formerly under foster care before their age out of the welfare program?

1.4.Significance of the Study

The homelessness issue in Canada is fostered within the system that is overrepresented by a certain demographic. When the foster care system was established was meant for orphans' children and later included children with parents. The issues started when the orphanage system was turned into a form of what is infamously known today as a residential school for the first nation. The last residential school was closed not long time ago in Winnipeg Canada. Research showed that the majority of Aboriginals represent the foster care system end up homeless after aging out of the care at the age of 19 years old (Kilos 2018). The residential school itself has a dark history that Canada is ashamed of. Fast forward, the foster care system is overrepresented by a marginalized group of people such as immigrants, refugees, people of colour, and other ethnic minorities. However, the focus in this study is on the public. The whole problems start while in the system or/and before and later out of the system. According to Hebert more than 100 000 children and youth in Canada are under child welfare family protection. Some of those arrive with psychological and physical trauma caused by previous guardians (Herbert, 2009). It is estimated that in 2010/2012 49.9% of youth in

government care exhibited physical disability and mental health issues and 68% were of the first nation population group with 20-30% of those who age out of foster care experiencing homeliness problem (Campbell, 2014). Hence, homelessness has been a prevalent problem for youth who aged out of care (McCreary Society, 2006).

1.5 *Motivation of the study*

Drawing from my lived experience, I thought that it would be interesting to revisit and take in consideration my childhood to adulthood life learn how it influenced my desire to become a social worker.

From the beginning, I was never considered to become a social a worker. Where I original come from social worker is one of those informal unregulated unknown professionals. Adults has habits to ask children what they what to be when they grow up. Most of the children aspire to become medical doctors, lawyers, engineers. These are common recognizable professionals that we value in our society and children are consistently being pushed to become one of those to make their parents and community proud. Like most of the children when I was being asked my answer always has been that I wanted to become a doctor when I grow up. This answer went on up to high school and influenced my high school subjects as I was preparing to one day enter university as a medical doctor. I performed well in all sciences subjects that are prerequisite for medical school, but I was very weak in one of the subjects which was chemistry. My hope to become a doctor diminished everyday I was getting worse and worse in chemistry subjects.

However, series of chain of events happened in my life that changed the outlook of my life from my perspective of view.

During 1994 Rwandan genocide I lost people I loved the most and I witnessed the most mass killing the world has never known since the Jews Holocaust.

After 1994, I endured traumatic experience and I was never received any kind of support whatever could be emotional or psychological. However, I was one of the luckiest people still alive. Due to my traumatic injury, I was taken to Republic of South Africa for medical attention.

While in the hospital I was looked after by doctors and nurses from all over south Africa. One day I had a visitor who was not a nurse or doctor that I was customed too. The visitor introduced themselves as a Social Worker. It was the first time I have met someone who is professional was other than doctor or nurse in medical settings. This social worker visited me twice a week or when I asked them for a visit.

I came to realization that I was lonely, but things dramatically changed when the social worker continue to regularly visit me in the hospital. Every time the social worker showed up I felt not alone I was happy to see them. The social worker role wasn't to administer any type of medication to me but the role the social worker played kept my hope alive.

Ever since, I came to realization that most people who helped me along the way were playing informal social worker role. Medication can heal wounds and diseases but there is no medication to restore someone's hope.

I stayed in the hospital for 2 years because I had nowhere else to go and hospital needed to get paid by my home embassy. I was a hostage and a patient at the same time, but I had no idea about the politics that was involved at the time.

My encounter with the social worker at the hospital and my lived experience as a homeless who spent two years in the hospital with nowhere to go till I could find a home to go to motivated to become a social worker and studying lived experience of homeless youth that mirror my experiences. When I enrolled in Noswel program I always thought about the social worker at the hospital. I was inspired. I came to realize that you do not need to become a doctor to help people. Undertaking my study in youth homeless community was the only way appeared to me that I could contribute to population that needs any support they could get. Plus, this is one of the populations I could relate and see myself in.

I believe that recommended policy in my study if applied could help hundreds of youths come out of homelessness and find home that they rightful deserve.

CHAPTER TWO

2.0.LITERATURE REVIEW

2.1.Introduction

The literature review chapter focused on evaluation and review of existing s studies on challenges and concerns emerging in transition from foster care after aging out. Existing literature provided a framework and foundation for theory integration in the identification of theoretical findings regarding the process of transitioning from foster care to independent living. The theoretical framework provides an important foundation to the study for the identification of gaps in the literature.

2.2.A Profile of Foster Care Children

Many reasons can make authorities decide to take away a child from rightful custodians. Commonly, children are taken away when the condition of their home not child friendly or the parents are not in a position to take care of or provide for the child (Foster Care, 2021). Being in a position where one cannot provide or take care of a child may be a result of negative behaviours such as drug or child abuse. Other reasons may be circumstantial such as death, mental illness, homelessness, or poverty. Besides parental inability, a child may end up in foster care as a result of their negative behaviour which a parent can finds fit to be handled by government agencies such as substance abuse or shoplifting (White et al., 2011). Children in foster care lack true connection with their environment and as a result experience difficulty in behavioural adjustment, achieving academic milestones,

During their stay in foster care, children suffer from many difficulties including poor academic achievement, health problems, behavioural and emotional problems, low self-esteem, and they tend to discourse. In some cases, children may be subjected to the reason that led to their removal from home; neglect and abuse (White et al., 2011). Although foster homes cater to the essential needs of children and provide them with an alternative environment for developing, they fail to address the trauma they went

through at the hands of parents and guardians and some cases end up compounding the problem. Failure of foster homes to heal emotional wounds results in foster youths with aggravated trauma which explains the difficulties they experience in their adult lives.

The vulnerability of children placed in the foster care system is higher than that of children in normal families, but the most vulnerable are youths aging out of the system. One factor which aggravates their vulnerability is the fact that they are experiencing an abrupt and unguided transition into adulthood (Ferguson, 2012). About 700 youths age out of foster care each year in British Columbia (Fostering Change, 2021). Compared to their peers in the rest of BC, this cohort is more likely to be involved in crime, early parenthood, incarceration, or ending up homeless (Patterson, Moniruzzaman, & Somers,2015). Health care in BC is not affordable to everyone, which places foster youths at a higher risk of suffering in the event of falling sick.

According to previous studies conducted by (White et.al, 2011), 50% of youths who age out of care are suffering or in need of mental care as they exhibit signs of mental disturbance. Based on the current status inside and outside of foster care, most children are unlikely to enrol in college or even graduate from high school (Hudson, 2013). Lack of proper education or qualification marks the beginning of foster youth's troubles as they try to settle in independent lives. Finding a job in BC with an education deficit is hard and the youths end up taking meagre jobs which cannot finance basic humanitarian needs. With the high cost of housing in BC, and the youths living between paychecks, a gap ensues and they eventually end up being homeless.

2.3. Aging Out

After the attainment of majority age (18 years), children under foster care are required to age out of the foster care system by living independently. Cusick et al. (2010) carried out a study on youths aging out of foster care and used social bond theory to explain their behaviour. In general, the authors concluded that the theory had a deficiency in explaining the criminal nature of foster youths. However, they did report that

youths from foster care were more vulnerable to criminal activities than the general population. Interestingly, the authors observed that the tendency to commit crime decreased as they grew older. Another observation they made was that foster youths were more likely to be arrested and incarcerated than the general population (Yoshioka-Maxwell & Rice, 2020). Male foster youths were at higher risks of being arrested than their female colleagues. Additionally, the research found a pattern that showed that youths who had been placed in multiple homes were likely to be involved in criminal activities and be arrested. Although the research focused on the criminal outcome, no indication was found to suggest social bond theory can be used to predict crime. However, the researchers concluded it can prevent other deviant behaviours including homelessness.

2.4. Theoretical Explanations

Different theoretical frameworks can explain the aspects of the transition from foster care to independent living after aging out and potential challenges that the youths transitioning could experience. To evaluate the theoretical understanding of the process of transition from the foster care system to independent living, there is a need to focus on several theoretical frameworks. These theoretical frameworks for exploring transition challenges from foster care to independent living include the Attachment theory, symbolic interactionism, social bonds theory, and Meleis Theory of Transitions.

2.4.1. *Attachment Theory*

One of the critical theories in understanding the transition challenges faced by youths from foster care who are aging out of the foster care system is the attachment theory (Whiteman et al., 2011). Attachment theory focuses on the bond between a child under the foster program and the caseworker or fosters parent, which states that the type of bond built determines the type of relationships that exist between a child and a foster parent or caseworker. When this bond is broken abruptly, it could present challenges to the individual child during the transition resulting in stress, anxiety, and depression (Whiteman et al., 2011). Additionally, the theory explains that a child's early attachment during foster care could influence the ability of the child to

maintain relationships in the future. According to Washington (2007), attachment theory creates emphasis on understanding the family dynamics and formation of the bond between the foster care caseworkers or foster parents and the overall separation and disruption that arises during the formation of the bond. This explanation is critical to the current study since it involves the consideration of the attack that is broken when the foster children leave the foster care system after they age out (Whelan, 2003). Breaking of the attachment can affect the mental health of these youths resulting in increased difficulties in transitioning.

The bond between caseworkers and foster parents. When this attachment is broken, the youths who age out could develop feelings of loneliness and mental health problems due to increased stress burden (Whelan, 2003). Therefore, the youths aging out of foster care arrangement may experience adjustment challenges due to the broken attachments. Children who are integrated into the foster care arrangement from birth will have developed a strong relationship with caseworkers or foster parents, which can have detrimental consequences on their health and wellbeing after they age out and the attachment is broken abruptly (Whelan, 2003). If that child is removed after aging out and the relationship is broken, then the youths may likely experience significant stress that could affect their mental health outcomes. Dyer (2004) believes that youths aging out of foster care should be provided with an environment that they can adjust gradually and be able to maintain the relationship with case managers or a responsible adult after aging out

2.4.2. *Symbolic Interactionism*

Symbolic interactionism is a sociological theory that draws from the works of a theorist like Russell (1980), which explains the idea of human behaviour that is formed by situations or symbols. Children under foster care arrangement could have encountered abuse and neglect, which pose a significant burden on their emotional health (Charon, 2007). As a result, these symbols or their meanings could influence the level of interactions they experience after foster care. For instance, children from the foster care arrangements might demonstrate an inability to sustain effective relationships and interactions with children (Charon, 2007). This could explain why some children under foster could have difficulties relating with adults outside of

their foster care setting. Symbolic interactionism can explain the experiences of the youths aging out of foster care after aging out.

One of the aspects to consider in symbolic interactionism is the concept of self that relates to self-image and the formation of ideas. The concept of self tends to form through comparison with other ideas that we interact with the capacity (Charon, 2007). Children under foster care demonstrate the ability to interact based on their understanding of self. Most foster children have an experience of abuse or neglect that determines how they interact with adults. When leaving the foster care setting, these children must be helped to have the ability to interact with adults and learn from them by building a level of trust. Therefore, the foster children are likely to experience problems forming and interacting with other adults when they exit the foster care setting. Therefore, engaging the community to accept and be able to provide the required support to the youths leaving foster care could help to build their ability to interact and form effective relationships with the community. Therefore, the involvement of the community members to embrace and provide support to youths leaving the foster care system could help to reduce anxiety and stress associated with transition (Charon, 2007). Coping skills and interpersonal skills are also essential to help the youths leaving the foster care system to be able to interact with community members in commitment to improving the outcomes. Through these skills, the youths can form stronger bonds and relationships with the community meant to improve their ability to transition out of the foster care system when they age out.

2.4.3. *Social Bonds Theory*

In its explanation, the social bond theory states that individuals with no or lose connections with the society exhibit deviant behaviours (Schroeder, 2015). According to the definition from the encyclopedia of social theory, deviance is an individual's behaviour or actions that are different from what is normally accepted among the community of residence. Deviance may include crime, religious acts, early parenthood, and homelessness (Schroeder, 2015). Morality, according to social bond theory, is etched in an individual's mind as a result of the social bond. Hence, how one behaves is dictated by the acceptable norms of the

society s/he is bound to. Compliance with accepted norms in a society gives an individual a sense of belonging and acceptance.

The social bond theory has four aspects namely belief, commitment, involvement, and attachment (Pritchett & Moeller 2021). These four aspects address the core relationships that create bonds in society. In research conducted by (Cummings, 2017). The aspects of the social bond theory are realized when they are operationalized. According to the author, the attachments aspect was operationalized as the relationship between a child and other people. Cummings further reported that attachment can be quantified using closeness to others in the environment as a measuring unit. Hirschi's social bond theory argues that a child who lacked attachment to parents, foster parents, peers, or society as a whole will disregard other people's expectations and will lack the commitment to meet their norms and standards.

The aspect of commitment was operationalized as the desire of an individual or child to attain a specified goal. An individual's level of commitment is quantified through the evaluation of an individual's goal. In the case of a child what they want to become short or long term and be used to measure their level of commitment. The goals of a child are highly influenced by the society, family, and home s/he grows in. A child who grew up in a coastal town will desire to be a captain of a ship when they grow up. Another child growing up in slums where most people have no college education may set a goal based on what is popular there such as basketball or boxing. The reason for making such a choice is based on popular individual's involvement.

The aspect of involvement can be quantified by evaluating the level to which an individual participates in accepted activities that are in line with society's expectations like weddings, football, or attending school. However, accepted activities vary in weight from one community or family to the other. One family may value sports more than education while another may consider having a house as a priority to attending school. A child's involvement will lean to accepted norms which the family or society holds in high regard. The final aspect is a belief that can be operationalized as the acceptance of what society has normalized.

Belief is quantified by evaluating an individual's tendency to veer off from societal norms. To measure the aspect of belief in an individual, we can evaluate how often s/he tells the truth. Lying is not an accepted norm and an individual's tendency to lie indicates a lack of belief in societal norms. When an individual is attached to a society s/he will be committed and get involved in accepted norms because s/he believes it's right and s/he is unlikely to deviate.

When children are taken away from their nuclear families and placed in foster care, they lose the attachment they had with their first guardians or parents. Foster care can involve movement from one foster parent to another and experiencing different caregivers. Foster children end up lacking a sense of belonging and in the process fail to value or appreciate societal norms. Breaking attachments leads to erosion of dreams which are the basis of setting goals. Uncertainty creeps into the young minds and they lose hope of tomorrow which leads to disinterest in communal involvement. Lack of involvement culminates in the child's disregard for societal expectations and stops believing in what has been in defined norms. Eventually, the child feels detached and the result is deviance.

2.4.4. _Meleis Theory of Transitions_

The transition process refers to passage from one stage to another. The theory of transition developed by Meleis identified that adolescence to be an age of developmental transition that is faced with numerous changes (Kralik et al., 2006). The process of transition that takes place over time could be challenging depending on preparedness and conditions after transitioning. (Meleis et al., 2000). For transitioning to occur, five properties are meaningful, which comprises awareness, engagement, change and difference, period, and critical points and events (Meleis et al., 2000). These five properties are the building blocks of the transition theory. Awareness is attained if an individual has recognition or perception of the transition experience. For youths aging out of foster care, awareness exists since they do recognize that upon attaining the age of majority, they shall be required to exit the foster care and transition to independent living (Kralik et al., 2006). The engagement property arises when a youth transitions from foster care to independent

living, which could involve the use of the resources available to influence the behaviour suitable for independent living.

Normally, the transition process is time-conscious and unpredictable, hence it can be difficult to estimate the time it ends (Meleis et al., 2000). A successful process of transitioning is featured by elements of subjective wellbeing (mental health) and the ability to get into useful relationships. Subjective wellbeing helps the youths leaving foster care after aging out to manage their emotions, mastery, and coping mechanisms to reduce the risk of mental health problems or emotional suffering during the transition process. The mastery aspect captures the ability to live independently and experience comfort featured by the independence of thoughts (Arnett, 2007). Engagement arises when the foster youths commit to the transitioning process. Negative outcomes of the transition process could have a significant impact on self-image or esteem, mental health outcomes, and ability to build and sustain interpersonal relationships. According to Kralik et al. (2006), human experiences during the transition process can be best understood in a qualitative approach. Therefore, the negative transition could be responsible for increased cases of homelessness and mental health problems associated with youths transitioning to independent living after aging out of the foster care systems.

2.5.Transitioning from Foster Care System to Independent Living

During the aging out process (when the foster care youths attain the age of 18 years), there are common risks that are associated with the negative transition process. The process of transition after aging out of foster care could be challenging due to the abrupt changes that arise and the lack of an effective support system for these youths to rely upon (Yen et al., 2009; Rosenberg & Kim, 2018). The study by Dworsky and Courtney (2009) identified that the rate of homelessness and mental health problems is significantly higher among the youths transitioning from foster care. Strong and effective support relationships are essential to maintain a successful transitioning from the foster care system to independent living (Avery, 2010). The type of relationship could be familial, peer-to-peer, and with adults (caseworkers and community

members) who form an important portion of the transition process. According to Courtney et al. (2005), relations with significant others, friends, and family could be perceived as a supportive one that can help in meeting the needs of youths aging out of the foster care system (Avery, 2010; Courtney et 17 al., 2005). In aging out the transition from the foster care systems, youths require strong pillars of support and encouragement to start independent living.

Positive youth development is influenced by the nature and type of relationship built with adults as role modeling, coaching, and mentoring become important elements of this transition since they shape the appropriate communication and social competence (Arnett, 2000, 2007). Families, foster parents, and caseworkers can form an important support structure for youths aging out to ensure effective transitioning by building their self-esteem important in independent adulthood. On the other hand, lack of the required support from families, foster parents or caseworkers, or other relational connections could impair the process of transition, which is linked to increased stress burden (Courtney et al., 2011; Zlotnick et al., 2012). Youths transitioning from foster care may not have strong familial support or relational connections, hence are at high risk of experiencing loneliness and lack the required support. These youths are likely to suffer emotionally leading to an increased risk of mental health problems and could expose them to other potential risks such as homelessness.

Peer relationships are a critical source of support for youths in their developmental stages (Luthar & Becker, 2002). Former foster care youths are at risk of getting into the wrong peer relationships that could lead to poor outcomes on health due to indulgence in drugs and substances abuse, mental health problems, homelessness, loss of focus in education, and career commitments. Therefore, responsible adults could play an important role in defining the type and structure of relationships with these youths who have aged out of foster care (Courtney et al., 2001; Connell-Carrick, & Painter, 2007; Hudson & Nandy, 2012). Support structure from non-familial adults like mentors, foster parents, caseworkers could have a positive outcome on the social and emotional development of youths who age out of the foster care arrangement (Dubois et al., 2006; Rhodes & Lowe, 2008; Samuels, 2008; Zimmerman et al., 2002; Farineau, 2015). Therefore, lack

of an effective relationship with adult mentors or coaches like foster parents, caseworkers, and other adults who were aged out of the foster care arrangements could provide the needed support to promote the effective process of transitioning to adulthood and independent living after aging out.

2.6.Homelessness and Mental Health Problems among Former Foster Care Youths

Homelessness is a common challenge facing adults who are aging out of foster care systems due to a lack of financial, social, and emotional support. According to Yen et al. (2009), health implications associated with homelessness are dire and require evaluation to determine the best approaches to reduce the risk of becoming homeless and developing mental health problems. Using a qualitative study, Yen et al. (2009) found that housing and healthcare access among the youths leaving foster care was problematic due to higher risk in comparison to the general population. The results revealed further that youths transitioning from foster care settings are likely to suffer significant burdens that could lead to an increased rate of homelessness. Another study conducted by Fowler et al. (2009) conducted a study to investigate the relationship between psychosocial outcomes and homelessness in a representative sample drawn from foster youths. Findings from this study revealed that emotional wellbeing and mental health were the issues of concern to psychosocial aspects of the interactions. From the findings, the research identified that inadequate or unstable housing significantly affected the psychosocial outcomes for youths, which could result in increased cases of school dropout, victimization, and behavioural problems that are linked to emotional instability.

Homelessness was also found to be linked to other associated problems that are a negative consequence of poor transitioning from the foster care system (Kushel et al., 2007; Yang et al., 2020). Kushel et al. (2007) further evaluated the experience of homelessness with 39.4% of the individuals from foster care experiencing housing instability. Homelessness was also linked to homelessness due to unmet healthcare needs since homelessness was linked to negative health outcomes. Since most of the youths transitioning to independent adulthood from the foster care system being at risk of homelessness, there are evident

overlapping consequences that could live to deterioration in the quality of life by youths aged out of foster care. Rew et al. (2008) identified some of these consequences to included time the youths spent with the homeless people since it influences the cognitive and perceptual factors, personal and social resources, and sexual behaviours. Therefore, the evidence indicated transitioning consequences among the youths aging out of foster care setting resulted in homelessness and psychosocial problems that have other negative consequences (Hill & Pollock, 2015). Based on these findings, providing social support could help to buffer depression and anxiety for youths aging out of the foster care systems.

2.7.Summary and Gaps in the Literature

From the theory and review of literature, there is increased concern on the outcomes of negative transitioning among youths aging out of foster care systems. The key risks identified from the theory and literature are mental health problems and the risk of being homeless for this population group that was found to be higher than in the general population (Courtney et al., 2010). The main problems that the researchers from previous studies have identified are the negative consequences of transitioning encountered by the group such as homelessness and poverty (Bender et al., 2015). Out of these consequences, there is a growing burden of mental illnesses and risky behaviour to these aspects. While most of the studies have focused on generalized outcomes of the transitioning process in a negative perspective, the current study aims at evaluating the main problems of poor mental health problems and risk of homelessness among the youths aging out of foster care systems (Cummings, 2017). This study presents an opportunity to evaluate the best interventions that could reduce mental health problems and the risk of homelessness among the youths who age out of the foster care arrangement.

CHAPTER THREE

3.0.RESEARCH METHODOLOGY

3.1.Background

The third chapter evaluates the methodology of the study that involves research methodology, design of the study, data collection tools, sample and sampling method, and data analysis. Additionally, the chapter explored the ethical context of research and the inclusion of informed consent, privacy and confidentiality, and management of data after the study. These attributes are important to ensure that the study has high reliability, relevance, and credibility (Harper, 2011). The purpose of the study is to explore the lived experiences of youths who have aged out of foster care who provided with relevant information regarding the foster care experiences and after foster care outcomes including their risk of homelessness. Additionally, the study also explores the outcomes of mental health after being aged out of foster care. The section offers important insights regarding the type of data, research philosophies, and target population of interest. This chapter is critical in influencing the type of data collected to enhance the quality, reliability, and current nature of the collected data for a holistic review of the thoughts, experiences, and perspectives of youths who have left foster care after aging out of the child welfare program.

3.2.Research Method

The purpose of the study is to investigate the perspectives, thoughts, and experiences of youths who are aged out of foster care regarding their experiences after leaving the child welfare programs in transitioning. The past studies have indicated growing concern about the increasing number of youths who were previously in the foster care programs turning homeless after the transitioning and significant burden of mental health issues after this transition process in comparison to the general population of youths. These youths enter a new environment where they have to indicate resilience and other coping skills to manage the independent life with minimal support structures. Since the research involves the identification of featured healthcare outcomes and social experiences of young people aged out of foster care, there is a need to conduct an in-depth study

involving understanding of thoughts, perceptions, and feelings of these youths regarding the burden of mental health problems and risk of homelessness. These youths are at high risk of becoming mentally ill and experience emotional and social isolation that could expose them to homelessness. Additionally, the mental health problems and homelessness could also expose them to other risks including risky sexual behaviours and the risk of abuse of drugs and other substances.

As a result, the current study focuses on perceptions, emotions, and thoughts that are all psychological aspects of their experiences in transitioning from foster care to adulthood where they experience independence and self-reliance (Harper, 2011). This means that a qualitative research method is most appropriate to use in this research to understand their experiences and potential outcomes. A qualitative research method is mostly applicable in social sciences particularly in sociology and psychology to investigate aspects of thoughts, feelings, and perceptions of a target population. In the current study, the focus is on the thoughts, emotions, and perceptions of youths who have aged out of foster care to explore their perceptions about the risk of being homeless and the mental health problems they face during transitioning to adulthood. The quantitative method is mostly applicable in research areas where factual data is required to answer a research question. However, studies that involve the evaluation of feelings, perceptions, attitudes, views, beliefs, and thoughts mostly prefer an in-depth inquiry, which is achieved through the qualitative research method. The use of the quantitative method is effectively suited to address research questions on data that require expression in numerical values to evaluate relationships, correlation, and interactions. In contrast, researchers prefer the qualitative study method in answering research questions regarding the experiences, meaning, and perspectives from the standpoint of the participants.

The type of data collected is non-numerical and cannot be quantified. The type of data targeted for the qualitative study is not countable or measurable hence qualitative research method adopts non-numerical or non-statistical tools to collect and analyse the data (Jamshed, 2014). Small group discussions are preferred to support in-depth focus adopted for qualitative studies to investigate and answer a research question on beliefs, attitudes, and concepts of normative behaviour through semi-structured interviews to explore the topic in-

depth (Khan, 2014). Therefore, the current study is suited best to be conducted from the qualitative research method approach to evaluate the experiences of youths who have aged out of foster care regarding their lived experiences about mental health problems and risk of homelessness after leaving the foster care system. In-depth interviews are the most applicable type of approach in the conduction of qualitative studies (Qu & Dumay, 2011). The research intends to reveal the in-depth problems facing youths who are aging out of foster care and identification of potential risks associated with homelessness and mental health problems. This is a fewer studies research area that requires an in-depth angle to explore a potential problem that faces transitioning from foster care. This research will utilize the qualitative research design. Qualitative study is essential in cases where the researcher intends to capture an in-depth analysis of the topic being explored (Williams & Moser, 2019). The qualitative study allows the research to collect data from the natural setting of the phenomenon being investigated in the research activity.

3.3.Research Design Adopted

Having identified that the study is qualitative, it is important also to identify a suitable research design for integration into the study. The research involved the use of a focus group comprising of 9 participants drawn from the population of youths who have aged out of foster care and began their transition to independence and adulthood. These young people are at a high risk of becoming homeless and experiencing a significant burden of mental health problems. The research design involving the focus group design is important to collect vital and in-depth information regarding the lived experiences and perspectives of the youths aged out of foster care regarding the problems of mental health and homelessness (Williams & Moser, 2019). The research can collect in-depth data that offer deep insights regarding the problems of mental health and homelessness among the youths who are aged out of the foster care systems after attainment of the age of 18 years and in some states after the attainment of the age of 21 years. This arrangement could present a shock in transitioning that could contribute to a high rate of homelessness among the former foster children who have transitioned to adulthood after leaving the foster care setting. There are different reasons why focus group design was adopted for the current study (Williams & Moser, 2019). First, a focus group is effective in

encouraging interactive interviews and engagements with participants, which create an environment of creating an in-depth review of the problem from the thoughts, perspectives, and attitudes of the participants. In this case, the participants are youths aged out of foster care. The interactive engagements result in an improved level of trust with the researcher generating a session of openness and honesty in responding being sought to answer the research question.

First, qualitative research allows the interactive engagement with the participants allowing them to give their views openly without any direction hence revealing the actual occurrences that relate to the research since the participants are relaxed and also candid (Williams & Moser, 2019). Secondly, qualitative studies provide data that is credible and valid considering that the participants are encouraged to provide data that is intuitive. When the participant's explanation regarding the topic is not well-understood, the researcher can inquire for in-depth data to clarify the issues that are not increasing the accuracy of the data collected. Focus groups do encourage the participation of all subjects under the study to ensure that there is adequate identification of themes common in all participants to evaluate the in-depth interactions that arise in the process of data collection (Guest et al., 2020). Secondly, focus groups allow the conduction of in-depth interviews that are fundamental insufficient data to support assertions and themes that emerge from the study. In-depth interviews involved in the focus group design helps to ensure that individual interviews are engaging and the researcher can seek clarity in areas of the questions that require clarification and further details. By doing so, the research can collect in-depth information that relates to interactions between foster care transitioning and increased risk of mental health problems and homelessness among the youths leaving foster care programs. The research is also able to integrate experiences, feelings, perceptions, and knowledge of the participants in a focus group, which helps to evaluate the interaction between questions asked to understand the emotions of the participants (Williams & Moser, 2019). Additionally, focus group design offers an environment that encourages a high response rate due to the level of trust created between the interviewer and interviewee.

The focus group was the epistemology framework is used in this study to guide the research process from data collection to data analysis. According to Smith O'Reilly and Parker (2013), a focus group does not take its

questions or problem from the standardized sociology discourse. It investigates people's lived experiences and takes inquiries from their everyday life. It investigates every day and nightly people's experiences locally and seeks to discover the unknown from that lived experience particularly in social relation and interaction. According to Williams and Moser (2019), people's individual experiences are all connected to larger power relations, theoretically speaking, any individual experiences, or "work activities" has power relation in focus group research (Guest et al., 2020). However, a focus group is better suited to research marginalized population groups. Various marginalized groups of peoples such as the homeless, refugees, gay men, people with disabilities (Alase, 2017). This method can serve as a tool to identify negative issues from their day-to-day life. Also, a focus group is a tool to study for studies meant to promote social justice.

The focus group design is also critical in the collection of depth aspects of the research to provide the researcher with sufficient details, information, or data that can help to draw a holistic view (Blaxter et al., 1996). The study involving focus groups creates an environment of expressing human experiences in the natural setting regarding a phenomenon. In this study, the focus was the understanding of lived experiences and perspectives of youths aged out of foster care regarding the risk of homelessness and mental health problems after their transition (O'Reilly & Parker, 2013). A qualitative approach using the focus groups allows the researcher to interact with participants and acknowledge their feelings of happiness or pain illustrated in their interaction and mood of the interview (Guest et al., 2020). This could be an important approach to understand the well-being of the participants and evaluate the potential outcomes of their interactions. Research studies regarding social issues require some form of the subjection of human beings to ensure an interactive research process is achieved for a holistic understanding of the problem (Hughes, 2006). The use of focus group design helped in ensuring that the researcher collected critical information on the interaction of youths aged out of foster care with the external environment and how this influences their susceptibility to homelessness and mental health problems. The focus group helped in the collection of vital data for use in identifying the valuable outcomes associated with perception and lived experiences of youths who are aged

out of foster care regarding their experiences, perceptions, and thoughts on risks of homelessness and mental health problems after transitioning from foster care (Guest et al., 2020).

3.4. Data Collection Tool: In-depth Interviews

To investigate the lived experiences of youths aged out of foster care on their risk of homelessness and mental health problems, the research focused on in-depth interviews to collect data. The in-depth interviews were collected over the phone and recording to aid in transcription (Guest et al., 2020). Participants were informed of their purpose with the email attachment of the informed consent form done before the day of the interviews. Each interview was allocated 45 minutes to provide sufficient time to evaluate the interactions of youths who have left foster care after aging out encountered the risk of homelessness and mental health problems. Interview questions were designed as semi-structured and in-depth to allow the researcher ability to collect all important aspects of the research for a holistic view of the entire proves of transitioning from foster care. Semi-structured interviews involve the use of the basic questions that are created before the interview data ads guiding framework for more in-depth questions (O'Reilly & Parker, 2013). The interviews targeted youths who were specifically transitioning from foster care and those who were experienced in post-foster care experiences. These individuals were all supposed to be over 18 years old to ensure other risks involving the younger population were eliminated.

3.5. Sampling and Measurement methods

Because of Covid-19, snowballing recruitment methods simply known as chain reference sample was used. This is a most unique method quite used in research, it is not probability a random sampling method used to find characteristics to participate in the study is rare and random to find. The sampling method involves primary data sources refereeing another potential primary data source to be is in the study in any other word snowballing sampling method is based on a referral from first contact subject to the general secondary subject for primary data source purpose. For the current research, implying qualitative research allowed us to get a too deep understanding of the problem. But the emphasis was on building relationships with the researcher to

avoid mistrust and to feel comfortable when following applying research ethics and observation. It is worth noting that there were familiar faces with created relationships before the study taking into consideration that there was mutual background story between the researcher and participant. Mutual trust is one of the important measurement methods after creating open-ended questions that will capture the youths lived experiences in depth (Macías & Contreras, 2019). Willig (2017) said a man is always a teller of stories, he lives surrounded by his own stories and those of others, he sees everything that happens to him in terms of these stories and he tries to live his life as if he were recounting it.

3.6.Data Collection

The Focus group interview method was chosen as the main data collection method for the following reasons: As the majority were known to each other from YAC (Youth Action Committee) employees, the location where they hang out was known to them and made it easy for referrals meeting for the zoom meeting altogether. Employing a focus group interview helped participants feel comfortable since they were all known to each other "feel comfortable with each other and engage in discussion (Willig, 2017), also it helps research feel comfortable as well and provide the flexibility to dive into the field and observe during the meeting and throughout the interview process. Furthermore, time to select participants was minimizes since samples are from the same group but have a natural focus group that meets the requirement that group members share similar characteristics: gender group, age range, ethnic and social class background (Castleberry & Nolen, 2018). Focus groups can be used "to generate conversation with shared experiences", which is helpful to study standardized institutional processes.

 After settling down for the interview schedule with the main participant that known to me, I sent our prepared interview questions to the participants ahead of time to prepare in hope that they can help me facilitate the interview process and more importantly, that they can evaluate if these questions are appropriate to them. The interview questions for the current study are a semi-structured question to ensure that data collected are specific to main themes, also allows more flexibility for participants to address the issues in their interpretation

as they intend (Castleberry & Nolen, 2018). The interview questions were divided into different parts, to be able to establish question research themes relations. In the first part, are basic information-related questions serve as an icebreaker to the created welcoming atmosphere. In the rest parts, the questions asked generated interesting conversations among participants and they were able to get into depth as desired.

3.7. Previous research and Gaps in knowledge

The homelessness issues among former foster care children are a well-researched subject, researchers have concluded that there is an association between homelessness and growing up in the foster care system. Foster care changed people's lives, especially for younger people who were placed in a good caring home. However, multiple types of research done demonstrated that there is a correlation of mental health issues with exposure to the foster care system. It has shown that youth who aged out of the welfare system tend to live in poverty and continues to struggle with finding employment, are jailed, homelessness and elevated levels of unwanted pregnancies and drug abuse (Campbell, 2014). Canada in the same position as Norway is one of the richest countries on the planet with the same indigenous background history. But Norway's social system is universal and generous than Canadian's because they have what Canada does not have (Campbell, 2014). There is minimal to no homelessness in Norway, they have medical care for all including dentist health care, physiotherapy, and all other medical necessity paid for. In Canada, you must pay for dental health and other health care necessity doomed not a necessity by the government while in Norway everything is free for all. Norway has free education, free childcare from 0 to 18 years of age. Even though they pay high taxes; they get all the benefits; citizens are still happy to do it and the country still has wealthier citizens. Even though the Norwegian model has some gaps, the Norwegian social welfare model is more universal and generous than the Canadian model.

3.8. Demographic characteristics

Demographics of the participants will be determined by getting the data from the Ministry of Family and Child Development. It was important to collect all background information on the participants, such as, ethnic

background, the number of people in the household at the time they were taken into foster care, parents' income and education level, how many parents at the time, including intersectionality (gender, SES, area code, and education level). During Focus group sessions some of the many questions were asked. Questions were designed to understand the unique experience of young people aging out of care. To reflect on their own experiences and see if they can think of something that could have been done differently to change their circumstances for the better (O'Reilly & Parker, 2013). The questions asked in the study related to the perception of youths aged out of the foster care system as they transition to adulthood on the issues of risk associated with homelessness and mental health problems.

3.9. Ethical Dilemma Consideration

An ethical concern in this study includes the confidentiality of the participants. Since I am dealing with sensitive information, data collected from the participants should be kept with high confidentiality to ensure that no one outside has access to it other than me or anyone else helped collect data. The results from this study provide a foundation to establish and enforce policies to enact policy measures to ensure effective transitioning from foster care when the individual's age out of the foster care system to reduce the possibility of these youths becoming homeless and associated mental health problems. The study examined how Canada can reduce the number of youths becoming homeless after they age out of the foster care programs. Furthermore, the results provide insight into what the youths wished the government would have done instead of being taken away. There are always some ethical issues in social research which the researcher should keep in mind in which the main issue being informed consent. Most of the time it is argued in mass that individuals being research must consent inflexible way, to facilitate their decision with accurate and informed information about the research and they can withdraw at any given time. Individuals' personal information must be kept confidential and it must be communicated with participants. However, keeping privacy control of collected data from the field is a significant issue that should be addressed and not be used in the death analysis for the deferment well I wanted the office sending agreement of information instead. From this study, the problems

facing the youths transitioning from the foster care system must be addressed to ensure that the risks of developing mental health problems and becoming homeless are mitigated.

3.10. Data Analysis

During our interview open-ended questions were asked, no question that required yes or no for an answer. A lot of theories and concepts on homelessness and stigma were used to provide solid analysis to our study. A theory on world view and things we take for granted. Data analysis conducted based on our theoretical framework, looking at current research data with different theoretical lens from the perspectives drawn from the youths aged out of foster care to explore the problems they face and potential causes that led to most of them becoming homeless and experience mental health problems. During the data analysis process getting familiar with the data and being explorative to identify problematic under the guideline of institutional ethnography; using intersectionality to investigate factors that contribute to the research question; going deeper with the glass of social welfare system theories (Richards & Morse, 2013). The participants are in the central position of the analysis throughout the analysis to identify factors related to their position and their identity and trace power relations behind their position. Applying the institutional ethnography philosophy, no concepts and theories were imported into the data, but aligned with the focus being youths who have aged out of foster care programs who are the experts of their own experiences (Richards & Morse, 2013). These youths have lived experiences that could help to understand their susceptibility to mental health problems and homelessness after they age out of the foster care programs. Therefore, the current study was meant to investigate the potential measures that could help to enhance smooth transition when children under foster care age out of the child welfare program. These interventions may require institutional measures or policy measures to enhance the quality of life for youths aging out of foster care to reduce their risk of homelessness and susceptibility to mental health problems.

The data collected was transcribed in word document to help in the analysis and thematic evaluations to identify the potential problems facing the transition of the youths from foster care systems when they age out

resulting in an increased risk of homelessness and development of mental health problems. Understanding these challenges required the transcribed content to be explored further for themes development based on the responses to extract findings related to the outcomes desired (Rabionet, 2011). The in-depth interviews were conducted individually to allow sufficient to answer all the questions and seek to clarify areas that needed elaborative responses by the interviewees. All the transcribed interviews were evaluated for themes development based on responses. After transcription, the recordings were then destroyed to protect the confidentiality of the responses. The participants were then assigned pseudonyms to their names mentioned during the interviews to ensure privacy and confidentiality was enhanced.

After the interview responses were transcribed, all the transcriptions were read to identify common themes based on the responses. Coding was conducted for all the themes identified to enhance the analysis of the themes based on individual responses (Kitto et al., 2008). The transcripts were then re-read again to ascertain that all themes present in the responses were identified (Rabionet, 2011). The focus of the research was on the topic of foster care system transitioning by the youths aged out of the welfare programs in respect to their risk of developing mental health problems and becoming homeless after they were aged out. 15The non-verbal cues that were noticed were an emphasis on certain words and pauses in speech. These were included in the typed transcripts as field notes. I used them for recollection purposes, thematic development, and to provide greater contextual linkage to the interview excerpts.

CHAPTER FOUR

4.0.RESULTS AND ANALYSIS

4.1.Introduction

The section presented results of the findings from the qualitative study of the 9 participants who were involved in the study concerning the experience and perspectives of youths aging out of the foster care programs on the potential risks associated with homelessness and the development of mental health problems. The chapter presents the findings and themes identified from the study. The findings involved a sample size of 9 participants who were requested to participate in the study. In this case, the approach presented involved thematic analysis of the findings to detail the key themes identified from the investigation on risks of homelessness and mental health problems due to aging out of foster care. The sections presented the outcomes of the interviews conducted involving youths who were aged out of the foster care programs. These youths faced numerous problems that formed the foundation of the study to explore the susceptibility to mental health problems and homelessness. Additionally, the research focused on the summation of the findings to evaluate the main findings from the study.

4.2.Demographic Data

The interviews targeted a total of 9 participants who were to undertake the study in evaluating the problems faced by youths when they age out of foster care, particularly problems associated with mental health and homelessness. Out of these targeted youths, only 9 decided to participate since they were comfortable having voluntary participation in the research. The sample comprised of 9 youths who had attained the majority age (18 years) and who were all aged out of foster care. Individual characteristics of the participants were presented as shown in table 4.1 below. The sample was collected from youths who have aged out of foster care facilities in the British Colombia province of Canada. These participants were culturally diverse, which could enhance in general overview of the youths aging out of foster care and challenges they encounter in transitioning. The main problems evaluated were linked to emotional health

and homelessness. The age of the sample was between 20-25 years of age with each participant having completed at least a high school diploma or college diploma during the time of the interviews. Additionally, 3 participants had completed 1-2 years after leaving the foster care facility while the other 6 participants had completed 2-5 years after aging out of the foster care system in British Colombia. 6 participants were female while the rest 3 participants were male. Therefore, there were more female participants interviewed than male.

Figure 4.1: Participants Demographic Characteristics

Characteristics	Number of Participants (n = 9)
Gender	
Male	3
Female	6
Age	
19–21	3
22–25	6
Years after aging out of foster care	
1-2 years	3
2-5 years	6
Highest level of education	
High school	1
Some college	7
College degree	1
Employment status	
Unemployed	2
Unemployed, full-time student	1

Employed part-time	2
Employed full time	4
Annual personal income	
- None	1
- Less than $10,000	2
- 10,001–20,000	2
- $20,001–$30.000	2
- $30,000+	2
Current living status	
- Alone	3
- With husband and children	1
- With friends and children	1
- With friends or significant other	3
- With children	1

From the demographic characteristics of the sample, it is clear that those who participated in the research had been aged out of foster care 1-5 years ago. These youths were partially or fully employed apart from two participants who had recently lost their jobs and were committed to getting another employment opportunity to sustain their needs. These participants were included in this research because they did meet the criteria required having been aged out of foster care and being able to demonstrate knowledge and experience out of the foster care system. In the current study, the researcher explored the completion of the high school education or any other higher education, being able to live independently, and successful avoidance of being incarcerated after being aged out of the foster care system. The further interviews identified a number of these that were central to the current study.

4.3.Themes from the Interviews

From the study, several themes were identified after the review of the various responses given by the participants during the interview. The focus of the study was to address problems of homelessness and mental health problems associated with the current transition to independent living. From the transcripts, the research identified that progression from foster care can be challenging and can as well provide an environment of personal growth and accomplishment of one's goals in life. The participants identified that they encountered challenges in transitioning out of foster care environment due to the initial emancipation. In this theme, the researcher identified that several subthemes were identified from the study. These subthemes were *abrupt transition, uneven transition*, and *smooth transition*. Through the process of transition, the participants also identified a second theme which was depending upon adults. In the second theme, the research identified that two subthemes were comprising of *receiving support* and *asking for support*.

Adults who cared about them and in return enhanced their participant in personal growth and independence was experienced through either receiving support as they requested and some would ask for support from adults. Those who were helped were also able to help others who were aging out of the facility to have a sustainable independent life after the foster care. After they reached out to adults for support and guidance, a third theme was identified, which comprised of making a difference. Commitment to helping others was also identified as a key aspect of the provision of support that was found to improve the lives of the participants. The fourth theme identified from the data collected via interviews was that aspect of moving forward. The last theme identified helped to evaluate the aged out of foster care to visualise their success and have a focus for their future. This was an important milestone for the participants that encouraged their pathway to success.

Themes and Quotes	
Theme/Subtheme	Interview excerpt

1. Facing a transition	M1: "*I just found myself alone and felt lost suddenly, just on my own*"
1a: Abrupt transition	M1: "*Since I emancipated myself, I did not receive any form of assistance or support. "I just found myself alone and felt lost suddenly, just on my own. I no longer have any support available*" M3: *"Ah! It was so abrupt, I found myself alone and in a lonely life. When I signed out of the foster care, I was all alone".* M2: *"I was used to receiving guidance and support, but after signing out, I experienced the shock of myself, it was just me alone in the wild of uncertainties"* M4: *"in that period of transitioning, I do get emotional of the experiences I faced, it was all about myself and myself.* M6: "*Honestly, my experience was smooth since I had a lot of kinship support after aging out of foster care*" M9: "*Seriously I must say I got shocked, one day my bills and expenses were catered for and the following day I am all alone to make my own decisions and commit to everything I needed without support*"
1b: Uneven transition	M5: *"At times, I was forced to do things on my own that I wouldn't have to if I had family support"* M7: *"Now the caseworker is like my real family.*"
1c: Smooth transition	M6*: "I'm a different experience because aging out was featured by family support*

	M6: *"Since my auntie was my foster parent, we were able to stay at my aunt's house. This means I did not have to be lonely or homeless"*
2. Depending upon adults 2a: Receiving support 2b: Asking for support	M8: "*I've was fortunate to have supportive foster parents. They were so good to me and gradually reduced their level of support to help me adapt to the changes.* M3: *"Some I encountered in my neighborhood established an effective relationship with me, which provided the much-needed support to overcome the difficulties"* M2: *"After searching for supporting, I met a friend from the community whom we established a close friendship that was good"*
3. Making a difference	M5: *"I help. I am always ready to help others who may find similar circumstances like I did to give support and encouragement to overcome difficulties of transition for former foster youth."* M3: *"I do training to youths leaving the foster care to ensure they are resilient and have required coping abilities to overcome the difficulties and conquer."*
4. Moving forward	M7: "*I am moving forward with my life to have a better future*" M1: *"I am moving ahead with life. I always had it in my head, you know, no matter what happened."*

	M9: *"It motivated me to move forward with my life and be what I have always desired to be in terms of personal achievement, family, and have a sustainable career."* M8: *"I am motivated to move forward to a successful life and shape my future positively."*

4.3.1. *Theme 1: Facing a Transition*

Experiences of the transition were identified as the most critical theme among the participants in the study. All participants believed that experiences of the transition could expose them to a significant level of stress to seek independence and living a purposeful life. Facing the transition was not an easy thing because most of them expressed being under so much stress that affected the mental health problems. At some point, two of the participants experienced significant homelessness problems due to the inability to have proper Housing. Facing the transition was a major challenge for former foster care youths for the period they encountered significant burden due to their new status of independence. All the participants expressed experienced one or more challenges during their transition. First, the participants narrated that they did encounter loneliness due to abrupt disruption. The abruptness of their status of leaving the foster care system induced adaption problems during the process of transition.

Each of the participants in the study acknowledged that there were moments of loneliness due to abrupt departure from the foster care system, which introduced some difficulties to the youths in their transition. Another set of transitions that were experienced by the youths leaving foster care was some uneven transition. The other type of transition experienced by these was a smooth transition that was associated with those who acknowledged having adult support or had someone to ask for support including kinship care from biological relatives. Two participants had experienced the support of blood relatives who extended their care after they left the foster care system. The support was responsible for their smooth

transitioning to independence due to the increased support they received. The level of support given was also commensurate with the type of transition the participants experienced. Those who received high support were more likely to have a smooth transitioning after leaving the foster care facilities. Six of the participants interviewed expressed an abrupt transition. These participants associated the transition process as one featured by a high level of loneliness due to their abrupt disruption in their lives. They demonstrated that there did not expect such a transition that was the harsh reality of life and increased burden due to the commitment to succeed and provide for themselves.

The youths leaving foster care demonstrated problems due to their unpreparedness in meeting the sudden requirement for independence. Fear and confusion indicated a common reaction during the entire period. Some of them felt disturbed with some expressing to have undergone mental health issues like depression and anxiety due to the abrupt disruption of their lives after aging out of foster care. Most of the participants believed that they felt abandoned and at some point expressed some feelings of being lost and uncared for, which destroyed the personal awareness and confidence during the process of transitioning. In return, the participants faced the increased level of stress and anxiety that affected their mental health and wellbeing during the process of transitioning. Sudden emancipation was common among the participants due to lack of parental support or lack of an adult for support and guidance. Some of the participants expressed that they felt being pulled out all at once due to aging out of the foster care system, which increased mental pressure and anxieties. These participants expressed that those who had no one to look for in seeking support and guidance experienced joblessness, homelessness, and in others, there was a high burden of living independently.

Some of the participants could even shed tears when they get to remember their process of transitioning by recalling these painful memories of what they encountered including homelessness and mental health problems. Most of the mental health problems included increased stress, depression, and anxiety as the commonly cited problems. Some of the participants expressed being paralyzed by the lack of support or parental care that they desired most. One of the participants mentioned that she only needed someone to

reassure her that all was well. She mentioned that *"I am moving forward well now, but I experienced serious problems challenges in all spheres of life with no form of support."* This observation was a common feeling for all the participants in explaining their feelings and perception about the lack of support, which exposed them to a significant level of stress. Additionally, the participants expressed determination to moving forward with their life. One of the participants noted that "*I am moving forward since I have overcome the most critical phase of transition to have a better future."* Another participant noted that *"I am moving on with my life now to achieve the best I can for me and my family to be."* These assertions indicated that the youths aged out of the foster care facility demonstrated resilience, which helped them to cope with the challenges of readjustment. These statements indicated the need for resilience training before leaving foster care to help them overcome the hurdles of readjustment.

The goals to personal growth and development were key among those who received support from adults or those who had people to request for support such as family members and friends. The determination to attain high achievements was common among those who received support as compared to those who had no form of support. Additionally, those who were having support from adults were more likely to have a better transition in terms of low level of mental health stress and homelessness since they got the guidance they much needed. Therefore, individuals who aged out of foster care and experienced some level of support from families or other adults were more likely to live a successful life and experienced fewer challenges in comparison to those who had no form of structure for support. One of the participants noted that:

> *"Because I did emancipate myself, I did not receive any assistance during transitioning. I found myself on my island where I had no one to look for support or just encouragement. When you turn 18, just from foster care, one does not have any form of support system. One does not have anyone whom one can call for guidance or just emotional support and encouragement. You get to imagine and find yourself on your own* (M2).

The participants all together asserted that they had to encounter periods of loneliness and suffering with no form of support structure after the transition. They expressed a significant risk of being homeless. A male participant M4 identified that he lived homeless for two months unable to have sufficient income to sustain a good housing facility. The participants were identified with suffering and loneliness that could be associated with poor mental health status and a high risk of being homeless. One of the participants noted that he lived homeless for two months before he got someone who helped him seek a better life and that marked the beginning of a desirable life afterward. The participants who did not have any form of support or assistance from adults or relatives were struggling to survive since all forms of support were withdrawn. These difficulties affected the quality of life and mental health, which was attributed to negative outcomes on emotional and mental health. A female participant identified that the struggle was significant among the female participants due to their risk of abuse and risky sexual behaviors as they seek a better life and address the problem of homelessness. Another female participant M1 revealed that she encountered significant challenges both emotionally and financially to meet her needs due to sudden difficulties she experienced during the process of care. She mentioned that:

> *"It (aging out of foster care) presented me with an abrupt change as you know I had to experience a high level of stress and depression not knowing where to start or do to meet all my needs. I was forced to stay out of school for an employment opportunity to have some bucks to cater to my needs. It was not an easy experience I can confirm to you"* (M1).

She did cry most of the session we had during the interview, which explains the level of the burden she experienced during transitioning. These challenges could hinder education attainment in search of employment opportunities to sustain their life and meet their financial needs. Another participant M9 revealed that she felt unprepared to handle sudden changes in her life after leaving foster care. Just like M1, she was forced to drop out of her studies after she left foster care to ensure she could search for an employment opportunity to support her financial needs. Another male participant also had to drop out of school for some five months until he was able to receive support from the family members. Therefore,

youths leaving the foster care system when they age out were experiencing challenges due to abrupt changes in their lives that led to increased mental health problems and risk of homelessness. The inability of these individuals to have a smooth transition is an area of interest from the studies.

The period immediately before and after aging out of foster care was an emotionally challenging and stressful time for 67 of the study participants. Although the participating former foster youth were selected for this study because they were successful in this transition, many described heart-breaking details of the struggle to survive. They viewed the transition as abrupt and intensely painful. The pain was reflected in tears, tense facial expressions, and laboured voice tones as these adults reflected upon this life transition. Although successful, the majority of these individuals felt generally isolated from others and alone at a time when they needed support. Six of the participants felt the agony and pain of this sense of isolation, as well as a sense of despair during the abrupt transition from aging out of foster care. They were uncertain about their survival, as well as other aspects of their futures. The instant change to independent living presented a challenge many years later when the experience was recalled. One of the participants in this study had an uneven transition due to the support of his foster parents. When he was a teenager, he sought foster parents on his own. He stayed connected with them and felt they were his family throughout the transition period from foster care into independent adulthood. Thus, he had support, so although he experienced struggles similar to the other study participants, he had a family he could always "fall back on." Therefore, his transition was uneven and not as smooth as participants who experienced kinship care. The two participants who aged out of kinship care did not feel alone and isolated during the initial period of this transition. Kinship care provided "a haven" during childhood and a smoother transition into adulthood for these participants.

4.3.2. Theme 2: Depending Upon Adults

The second theme related to the dependence on adults to offer guidance and support to youths transitioning from foster care system to adult independent living where needed. From the study, the participants

established that support from the former caseworkers, foster parents and other relatives could be an effective source of support and guidance to allow them to live an independent living after age out of the foster care system. Adults who previously worked with these youths interviewed were critical sources of support due to the high level of trust they built while under the foster care programs. The adults working with foster children should continue the follow-up support even after transitioning after age out of the foster care system. Kinship care is an important source of adult support that can enhance outcomes for the youths aging out of foster care. The kinship could comprise of the guardians or foster parents and other biological relatives who can play an important role in their development and growth during the transitioning to adulthood. From the study, the theme of depending upon adults had two main subthemes. First, there was the subtheme of receiving support from the adults, which encompassed adult intervention meant to support the former foster youths to transition to adulthood.

The youths involved had passive aspects, hence receiving the support either directly or indirectly could enhance their ability to overcome the challenges. Adults providing the support to the youths could also be former foster support like caseworkers who can enhance follow-up on the youths aged out of the foster care program. Secondly, there was the subtheme of asking for help from responsible adults. From the study, participants who requested support from adults were likely to have a less troublesome transition process featured by a reduced risk of homelessness and mental health problems. M6 narrated that: *"I remember I once asked a neighbour for support who became helpful and could check my progress from time to time. This formed an important source of support for me. I loved the experience."* These were some of the skills that the participants adopted to improve on their experience during the process of transitioning from foster care to independent living. The approach involved either neighbours or former caseworkers or foster parents who provided effective support to enhance their adjustment after aging out of the foster care system.

The other subtheme identified was receiving support which involves only two participants through kinship situations to offer needed support and guidance after aging out. One of the participants noted that *"oh yes, my relatives provided an effective environment for me to transition. That is why I can't complain about the*

transition process" (M3). The other participants also believed that kinship support was "*a shoulder to lean on*" that explains the value of adult support and guidance during the process of transitioning. From the interviews, it was identified that adult support that was received by the participants determined how smooth the transition process was and potential outcomes associated with management of mental health and risk of homelessness. These two participants believed that the kind of support they received from adults they requested for support or from family members whom they received support from provided an effective environment for transitioning reducing the level of stress and risk of mental health problems and homelessness.

M8 was a female participant who was receiving support from a caseworker revealed that *"But I can attest that the caseworker provided the help and encouragement that I needed. Any time I felt weary, I would contact her for encouragement and support through anything due to an effective relationship we had established for years."* she explained that her caseworker was a pillar of support that she required and could count on her any time she faced a problem even after aging out. She explained to have involved her in most of her decision for coaching and mentoring forms of support during the entire process of transition from foster care. Maintaining close contact with the caseworker helped to promote a safe environment of care and the relationship we established helped them throughout the entire transitioning. The transition process was identified as one critical process involving significant challenges and difficulties, which was not easy to manage without an effective support system. From their perspective, the involvement of adult support acted as a support structure, which prevented them from experiencing significant disruption and abrupt changes that they encountered, which attributed to significant emotional burden to the 6 participants who had no form of support.

The participants found that without the needed support from an adult, there were challenges that exposed them to significant emotional and psychological strain to overcome and adapt to the new life out of the foster care setting. After aging out of foster care, M7 believed that she received a family-like relationship after she was homeless and disillusioned who restored her hope and aspiration. She narrated having constant

headaches and symptoms of anxiety and depression that affected the quality of life. The support and encouragement she established with her newly found 'family' gave her an environment of care and encouragement that helped her toe back to recovery and restored her mental health. These potential types of support were essential in maintaining a strong support structure and system that helped them overcome loneliness and feelings of being lost.

Depending on adults during the transitioning from foster care was a strong factor that influenced the ability to overcome difficulties associated with aging out for the participants. From the interviews, the main types of support structures they received from the adults included telephone calls, financial support, college, and housing support that contributed to better refocus and attainment of their goals with new aspirations and commitment to moving on with life. These support systems helped in overcoming the challenges faced by participants during the transition process as an important source of continuous relationships with the youths.

4.3.3. *Theme 3: Making a Difference*

The third theme identified from the study was making a difference. This theme was linked to helping others to have a meaningful life after exiting the foster care system. From the participants, they narrated their commitment to helping others freshly aging out of the foster care system. The participants narrated that helping others to reach adulthood transition from foster care setting was one of their determination to ensuring that others did not experience mental health struggles and homeliness they underwent during their transition. Participants believed that they had a responsibility to help others leaving the foster care system. The theme of helping others from the perspective of the youths interviewed was attainable through ensuring that others who age out of foster care did not encounter the difficulties themselves they faced. All participants agreed that they depended upon adults to offer them the support and encouragement needed to overcome these challenges after their age out of the foster care system.

Eight of the nine participants believed that they felt to have an obligation of helping others who are freshly aged out of foster care to enhance their ability to transition effectively with minimal difficulties. These

participants indicated that they were committed to ensuring that others who undergo the foster care system should not undergo similar challenges they encountered. For instance, M8 noted that "*I have to help others who are freshly aging out of foster care to ensure they have a smoother transition than I did.*" Similarly, M2 believed that there was the need for her active participation in helping those in need to have a friendlier transition unlike their own experiences featured by difficulties. She believed that there was a need for her to ensure that others undergo a smooth transition that could improve overall outcomes in health and wellbeing to prevent the emergence of mental health problems and homelessness.

Additionally, M6 believed that "*I have to provide others with a shoulder to lean on as they transition, I must say, it is not an easy process. My experience taught me so.*" from these findings, the participants believed that they have a responsibility of mentoring and coaching those who are freshly leaving the foster care facilities to ensure they have a better transition experience free of the huddles of loneliness, homelessness and mental health problems as they transition. M9 believed that speaking to different statewide groups could help in advocacy for the involvement of those who have passed through the transition successfully to provide coaching and mentorship services to the freshly aged out persons to ensure that their transition is not as challenging as the participants did after aging out. The participants believed that they should serve as role models and sources of needed strength and support for those who age out of foster care. 6 out of the 9 participants who experienced the worst experiences believe that they were highly motivated to see others go through the transition smoothly.

M1 believed that she had to do something to others to help in the process of transition. She mentioned that "*I think the real meaning of empowering others is helping them in their hour of need and to me, the transition process is the hour of need for youths leaving the foster care*" (M1). She added that by providing that needed support, she could offer the support as a way of giving back to the community of youths leaving the foster care systems in British Colombia. M3 narrated being involved in the provision of the services to the foster youths and those leaving the foster care services to ensure that they are properly prepared and equipped with coping skills that will help in building resilience required in the transition. Most of the

participants who took part in the interviews believe that there is a need to increase their efforts towards helping the new group transitioning from foster care to ensure that British Colombia ensures the rate of homeless youths and those with mental health problems is decreased by ensuring a smooth transition from foster care. The participants wanted to provide the support required by the foster care beneficiaries leaving the system after aging out. The new experiences have expanded their scope and ability to help others to overcome the problems they did including being homeless and suffering significant mental health problems due to depression and anxiety. To have a positive influence in society, most of the participants mentioned a desire to commit to helping others overcome the difficulties as a way of building a strong relationship with those aging out of foster care to ensure a smooth transition is encouraged. The commitment to helping others was the vital concern that was emanating from their inner desires to help others who may have a risk of being exposed to the same or more severe difficulties in transitioning process. Foster youths require an improved level of support and guidance to ensure that the ability to transition from the foster care system to independent living is smooth in the British Colombia province.

4.3.4. _Theme 4: Moving Forward_

The last theme identified in the study was moving forward. This theme addressed the participants' commitment to moving forward to a successful life after overcoming the challenges of transition from the foster care system when they aged out. Moving forward focused on how the former foster care children were able to transition to adulthood with an envisioned and brighter future determination. From the participants, the theme was highly applicable after they were able to overcome the difficulties of transition to have a desire to succeed and live a better life out of foster care services. The theme was common among all the nine participants who acknowledged that they had the determination to experience a better life with more effective outcomes in terms of success and life achievement. This aspect concerned recovery from mental health problems and taking a different perspective of commitment to succeed. At this level, most of the participants (7 out 9) believed they had overcome most of the challenges they faced during the transition, which allowed them to make meaningful life expectations and determinations. These prospects

were providing them with determination to improve future outcomes. For instance, M1 had to set new goals in life after she began stabilizing to ensure a meaningful life and a promising future as attainable.

Additionally, M7 also believed that *"I am now focused to have a successful life and be able to help those in need. I believe I am ready to give back to the community that has been my pillar of support."* These youths demonstrated that resilience and commitment to coping skills to be important in enhancing commitment to improving life commitments including descent housing facilities and improved health outcomes after moments that exposed them to the significant burden of developing mental health problems. For instance, M8 was found to have undergone significant stress and depression in seeking a meaningful life after aging out of the foster care facilities. M8 mentioned that "*I am now moving forward with increased determination and commitment to overcome the challenges I faced during the period of transition."* another participant noted that, "*I am now moving on with my life and no longer looking back, I have to succeed."* These sentiments indicated participants who have overcome the most difficult challenges including mental health problems and homelessness to experience an improved quality of life. Most of these participants involved in the interviews identified that challenging situations arising from the foster care transition to independent adult life require resilience and coping strategies to enhance recovery.

CHAPTER FIVE

5.0.DISCUSSION, CONCLUSION, AND RECOMMENDATIONS

5.1.Introduction

The main aim of the study was to explore the lived experiences of youths who age out of the foster care system and assessment of the challenges they encounter during the transition process. The perspective was from adult youths who were previously under foster care and had readjusted to independent living. The study identified a total of nine participants who were provided with interviews to ascertain the aspect of mental health and homelessness risks associated with those transitioning from foster care facilities. The focus groups were conducted to investigate the approaches of these adults concerning understanding the depth of the problems the age out youths from foster care experience. Data collected was analysed via coding and themes to identify the main themes identified. From the study, there were four themes identified in areas of homelessness and mental health problems associated with age out of foster care transitioning. Out of the four themes were five subthemes identified from the interviews.

5.2.Discussion and Conclusion

The first theme identified was facing a transition that the participants experienced out of the foster care setting. In the subthemes, the research identified that subthemes of abrupt, uneven, or smooth transitioning. In their transition to adulthood and independence, the research identified that all participants faced challenges with those who have support from adults (accepting support and asking for support) was identified as the most critical support system that was available to them during the transitioning process. The two subthemes identified in this category were receiving the support and asking for the support. Scholars in previous studies also identify the process of transitioning to comprise a significant burden on the youths leaving foster care. For instance, previous studies have identified that experience of a sudden disruption in the lives of those leaving foster care, increased emotional or psychological burden, and

financial problems do lead these youths to homeliness risk and mental health problems (Arnett 2000; Marcum, & Bode, 2009; Courtney et al., 2011).

The third theme identified from the study was the desire to help others aging out of foster care, which could provide some form of relief to these youths. Mentoring and coaching those leaving foster care was identified as a strategic option that could eliminate the significant emotional burden of the transitioning process. Previous studies have also identified that similar findings revealing the need for increased adult support for the youths leaving out of the foster care system after they age out due to the difficult transition process and determination to gain resilience through support by adults on the transition process (Schwartz et al., 2009; Lietz, 2011). Helping others was found to have important support to those leaving foster care since it enriched their level and ability to overcome the transitioning mitigating the risk of homelessness and risk of mental health problems. The last theme identified from the study was related to the ability of the youths aging out of foster care to moving forward with their life meaningfully and in a determined approach. Previous studies regarding problems and difficulties of aging out were identified as a critical concern that could help to visualize their success and commitment to have a desirable life to have a meaningful future free of homelessness and risk of mental health problems (Arnett, 2000, 2007). Data retrieved from the experiences of youths with lived experiences of the foster care aging out revealed the significant burden of readjustment and challenges of homelessness and mental health problem.

5.2.1. What lived experiences of youths aging out of foster care associated with a successful transition from foster care into adult living?

The study participants who had progressed from foster care arrangement to independent leaving after aging out foster care system, particularly on areas of homelessness and mental health problems to enhance outcomes. In the current study, the aging out of foster care youths is experiencing significant burden and readjustment crisis that expose to their burden of health outcomes. The availability of adults to offer support to these youths could provide an effective process of transition needed by the youths aging out of foster care

(Courtney & Dworsky, 2006). The study found meaning in their experiences that could have been enhanced by gradual transitioning and supportive environment by adults to help them cope with the risk of mental health problems through skills for readjustment and mental health problems meaning that the integration of these forms of support could reduce the rate of mental health problems and homelessness. In theme 1, the study identified that facing the process of transition requires support since 6 of the respondents reporting encountering abrupt transition.

The findings are consistent findings with the previous studies that explored lived experiences and problems of youths aging out of foster care (Courtney et al., 2001; Courtney et al., 2011). The findings from the six participants revealed that abrupt transition is the main cause of the problems of mental health issues and homelessness that face the youths aging out of foster care. The second theme identified by the participants was the existence of adults to help the youths leaving out of the foster care system after aging out. In most of the circumstances from the findings, former foster parents offered the required involvement of adults or relatives who are available to offer to support the youths readjusting from the foster care system. These considerations could enhance the effective transition process to ensure that youths aging out of the foster care system have reduced burden of readjustment and abrupt challenges for homelessness and mental health problems that are problematic to this population.

5.2.2. What factors were helpful in the process of the aging out youths from foster care and identify the factors that are critical determinants?

Having identified that youths aging out of the foster care system are at a high risk of developing mental health problems and associated challenges of homelessness can be attributed to several factors. The presence and existence of adult support were found to be an important factor that influenced the outcomes of foster care aging out youth's ability to transition to independent living. Similarly, a previous study revealed that former foster parents' relationship and caseworkers could be an important determinant of the ability of the youths to transition effectively (Koh et al., 2014). The previous study also cited that kinship

care after aging out of foster care could provide an effective environment for support in readjustment and coping with the challenges of homelessness and mental health problems. Additionally, kinship offered stability to the youths aging out of foster care as seen from the two participants in the study who received kinship support in the process of transitioning to adulthood from the foster care system (Koh et al., 2014). The participants who received adult support or had adults they could rely on for guidance and support were likely to have a low risk of mental health problems and homelessness in comparison to those who had no form of adult support.

This was common among the 6 participants who experienced abrupt transitioning after they aged out of foster care who asserted that provision of an effective transition process featuring gradual changes could have helped in the readjustment. These changes were meaningful and could be more successful when they were guided by an increased level of support from adults or kinships ties that could help to smoothen the process of transition. Previous studies evaluated also revealed similar findings on the amount of support that was needed for discussion regarding the process of transitioning from the foster care system. Most of the previous studies have identified that lack of support for the population aging out of the foster care system could be a contributing factor for a high number of homeless youths who have transitioned from foster care.

Provision of the right form of support and discussion on the transition before aging out could help provide an environment that can improve outcomes of the transitioning process reducing mental health burden and homelessness risk to improve outcomes for this population of interest (Courtney et al., 2001; Courtney et al., 2011). Stott (2013) established that poor outcomes after the foster care system could be attributed to abrupt changes that create a shock to youths and potential cause of homelessness prevalence among this population. Similarly, the recommendations in the Courtney et al. (2013) study could imply that aging out the plan could involve the deployment of resources to provide support mechanisms to youths leaving foster care systems to improve on outcomes by reducing the risk of mental health issues and homelessness prevalence among the population aging out of foster care.

5.2.3. What were the levels of stability encountered during and after the transition process out of foster care with work, relationships, and education?

Relationships, work, and education was considered stable for most of the youths in the study in the period of transitioning from foster care after aging out. These findings were consistent with the prior studies that found the level of education, relationship with families and relatives, and level of education being the important factors that influenced the ability to have a sustainable transitioning (Courtney, et al, 2001; Courtney et al., 2011). From the study, work was found to be an important factor that influenced the risk of homelessness and mental health problems in the population aging out of foster care. Similarly, Stott (2013) established that youths with higher education levels, supporting relationships with family, and ability to have a job were critical determinants on the risk of the youths aging out of foster care to experience homelessness and experience mental health problems.

Supportive relationship from families and other adults is viewed as an important determinant of the transitioning outcomes for youths aging out of foster care system. Studies identified that the most common support structures comprised of the former foster parents, biological relatives, and caseworkers who could help these youths to overcome the challenges and difficulties of transition (Courtney, et al, 2001; Courtney et al., 2011). Therefore, there is a need to ensure that youths aging out of foster care have a significant level of support from the former foster parents, biological relatives, and caseworkers to improve outcomes in terms of prevention of mental health problems among these youths and reducing the risk of being homeless. Education was another variable that was identified from the study to determine outcomes of youths aging out of foster care systems' ability to have a smooth transition that is free of homelessness and mental health problems. Most of the participants were forced to drop out of school to work and provide for themselves, which resulted in low education attainment and hence increased risk of mental health issues and homelessness possibility.

Several past studies have associated poor educational attainment as a common problem for youths transitioning from the foster care system (Courtney, et al, 2001; Courtney et al., 2011). 6 participants from the study were found to face challenges associated with relationships that limited their ability to transition smoothly. For this group of participants, the transition process was problematically featured by a high risk of homelessness and mental health problems. Three of the participants experienced homelessness since they did not have access to any level of support after their aging out of the foster care system. The six interviews who had no form of support to overcome the difficulties of transitioning from foster care could rely on the support from the foster parents or caseworkers after they age out to enhance positive outcomes in the process of transitioning (Courtney, et al, 2001; Courtney et al., 2011). Two of the participants who have access to kinship support were identified to experience a stable transition process that was supportive, hence had limited possibilities of becoming homeless or experiencing severe mental health problems.

5.2.4. What personal relationships did influence the type of transition from the foster care system to independent adult living?

The type of relationship that is established with foster parents and the former caseworkers could be an important determinant of successful transitioning by the youths who age out of foster care. The two participants who received the support of relatives were likely to have a more fulfilling life, which is an illustration of the significant contribution that support from caseworkers and relatives could have on outcomes of transitioning and type of experiences. Previous studies have also recommended the use of foster care support to ensure that the youths who age out of foster care have structured support to enhance their readjustment in independent living (Courtney, et al, 2001; Courtney et al., 2011). In the current study, 6 youths who had no form of support were more exposed to homelessness with three of them experiencing homelessness before they received a supportive structure or better jobs that could help them to get employment opportunities and independent living.

5.2.5. <u>Do most of the youths aging out of foster care become successful in the transition into independent adult living and why?</u>

From the study, it was identified that though successful transitioning was not an easy experience, most of these youths became successful after a period of structure and commitment to earn a decent living. Most of these youths felt that they had attained some form of improvement in their living status including better outcomes in terms of education and career prospects. Additionally, the level of support provided to the two youths who had experienced kinship facilitation and support were the most successful indication of the critical role that adult support provided to the youths who age out of the foster care facilities. The presence of the support structure meant that the two youths received moral support and encouragement that helped them to pursue and remain resilient. Additionally, the other 6 participants with no form of support were found to have relied upon resilience to foster an environment of personal growth and determination to improve outcomes. From the findings, it is clear that factors like education, relationships, and support could be required to implement strategic approaches for the prevention of homelessness among youths who age out of the foster care programs (Courtney, et al, 2001; Courtney et al., 2011; Stott, 2013). These lived experiences could also focus on using those who have succeeded in transition to mentor and coach the youths freshly leaving the foster care system.

5.3. Recommendations for Practice

The objective of the study was to explore the lived experiences of youths who age out of the foster care system and assessment of the challenges they encounter during the transition process. From the findings and discussion of the results, it is clear that youths aging out of foster care are at high risk of becoming homeless or developing mental health problems if they do not have any form of support. From these findings, several actions can be recommended to ensure a smooth transition process from foster care to adulthood and independent living.

1. There is a need to deploy more resources towards strengthening the interaction of foster care children with adults and caseworkers to ensure they are better equipped to handle the difficulties that arise during the process of transitioning. Some of the support should include the aspects of foster parents and biological relatives to provide the required level of support. Therefore, there is also the need to promote an effective environment for foster care children to ensure that they can receive adult support and guidance to enhance the experience of transitioning after they age out.

2. Youths who have managed to transition successfully should guide mentoring and coaching of those who are freshly leaving the foster care system. A Peer-peer support system could help in improving outcomes and experiences by ensuring those who are freshly leaving the foster care system after they age out can be able to live an independent living and be able to access required support and care.

3. Youths should be taught the need to seek help or ask for support from responsible adults to enhance the process of transitioning to independent living after aging out of foster care. Caseworkers and foster parents should encourage the youths aging out of foster care to remain open and be encouraged to ask for support and guidance in case they experience difficulties during the process of transitioning.

4. There is the need to strengthen the skills and abilities of youths transitioning from foster care to independent living to help them cope with the challenges of this process of transitioning to prevent them from becoming homeless or developing mental health problems. Financial support when they age out could be an important approach to help them begin the new life and transition smoothly. Financial support is essential to ensure they have proper housing, food and electricity until they are through with studies and able to sustain themselves. Follow-up attempts should also be practiced by ensuring that the foster care system has a sufficient number of staff to ensure adequate follow-up to those who leave foster care after they age out.

5. Increasing resource deployment should be identified to ensure that youths aging out of the foster care facilities have access to quality education, affordable health coverage, and enrolment in social support programs to improve their experiences and reduce their susceptibility to homelessness.

6. There is a need to focus on increased commitment to further studies regarding the problems faced by youths who are out of foster care. Additionally, studies are required to increase the level of knowledge and develop effective evidence-based practice guidelines that can be useful in reducing the risk of homelessness and mental health problems for youths leaving foster care. More in-depth studies involving diverse participation and more participants are required to get a generalized view whose findings can be integrated into the entire support system with British Colombia's foster care system.

7. Factors that should be of concern to future studies should comprise stable housing, depending on the presence of adult support and guidance, and enriching the youths with coping and resilience skills to ensure that despite the challenges, they can succeed and experience positive outcomes on health and wellbeing. The integration of these elements in the programs for youths departing the foster care system can help to improve outcomes and their ability to transition. These youths could be helped to ensure that a smooth transition is achieved that is less disruptive and one that does not lead to most of them dropping out of schools to sustain their needs.

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Appendex

Interview questions

1. What is your name? Briefly do you mind telling me who are you?

2. How is life after aging out of care?

3. I f you do not mind would you like to share key event led to you being taken away?

4. What led to you becoming homeless?

5. How often do you wish you were never placed into foster care?

6. what are some of the reasons you think that you would rather be with your biological parents?

7.   What do you think that would have been better alternative solution against measure to place you into the foster care?

8.   Any insight you can give about foster care either positive or positive?

9.   Any public policy change or recommendation to revolutionize foster care system?

10. Some people are in favor of foster care system abolition. Which system would you like to see replacing foster care system we have in place today?

Participants M in her Own words

1.   My name is M. I'm a former foster child who aged out at 19.

2.   Neither of my parents were fit to look after me. They both suffer from mental illness, with my father also suffering from addiction. My mother was ruled out as a caregiver before I turned 2. It took the ministry until I was 9 years old to decide my father was also unfit to look after me.

3.   I will always wish I had never been placed in foster care.

B

1.　　If I could only choose between foster care and living with my parents, I would choose my parents but I still would have had a poor quality of life. I still would have been exposed to violence and trauma.

2.　　I should have been put up for adoption at an early age. but there was a better option.

When I was 11 years old, there was an

amazing lady who had worked at the group home I was in at the time. I loved her, and she worked incredibly hard to convince the ministry to allow her to foster me. In the end, not only did they refuse to let me live with her, they forbade contact between the two

of us, severing the only healthy parental connection I had ever made. They should have allowed her to take me in. I guarantee you, I would be a completely different person if they did.

3.　　I do not have a single positive thing to say about foster care. I can tell you that after spending my life growing up in foster care, I have never come across a person who has had a good experience with it. Each and every home that I lived in was toxic and abusive. If you place a child into foster care, you are almost guaranteeing their exposure to violence, neglect, and other traumatic events.

better advocacy and legal support for youth both in AND out of care. Youth

shouldn't be required to first advocate on their own behalf in order to get supports. These supports should be able to approach them when they express even the slightest need/desire for them.

Accountability for damage caused due to living in care (financial compensation, betterquality and quantity of post-care supports with longer access [age cap])

Change aging out of care at 19 to 25.

Accountability for foster parents. Claims of abuse need to be taken seriously. Home checks should not be announced to fosterparents before being done as this gives them time to prepare and present a falselyhealthy environment.

Foster parents with cases of abuse shouldbe banned from ever fostering again.

The selection process for foster parentsneeds to be far more investigative and careful

Group homes need to be staffed with only

highly trained individuals, and the pay for theworkers needs to be higher to compensate their level of training. As it is now, group homes are the "testing grounds" for collegestudents and people who want experience on their resume for a higher paying job. It is a stepping stone, and the youth in those places are often treated like lab rats.

4.   I'm not sure whether abolition would be beneficial or not. Every system is prone to abuse and mismanagement; I think if therecontinues to be a strong resistance to the acknowledgement of these issues and a lack of accountability for them, it won't matter which system is put in place