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A Qualitative Study of Non-Relational Foster Families Experiences Navigating the Education System

Emma Grace Topf
University of Denver

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A Qualitative Study of Non-Relational Foster Families Experiences Navigating the Education System

Abstract

This qualitative study used a phenomenological approach to capture the lived experience of non-relational foster families navigating the Colorado public education system. While most research on children in foster care looks at all sub-populations of foster care combined, this is the first known study to focus solely on non-relational foster families navigating the education system. I explored non-relational foster parents experience navigating the education system for the school-age children in their care through a semi-structured two-interview approach. Four levels of data analysis were completed (descriptive coding, emergent coding of themes, a priori coding of research questions, and a priori coding grounded in ecological systems theory). The purpose of this study was to create a better understanding of how school psychologists can support non-relational foster families in the public school setting. I sought to gain a better understanding of the supports and challenges this population experiences, to identify what needs non-relational foster parents perceive as being met or not met in the school setting for the children in their care, and create a better understanding of how those needs being met or not impacts the dyadic relationships in the home setting. Study findings revealed that a non-relational foster child's needs being met or not in the school setting does have an impact that extends beyond educational success or outcomes, by having a significant impact on the dyadic relationship between non-relational foster parent and non-relational foster child. An additional unexpected finding was that non-relational foster parents see this role as a significant part of their identity and hold a deep level of meaning related to their role. Unlike other subpopulations of foster care, non-relational foster parents seek out this role as a vocation and this level of meaning may be an uncategorized feature of being a non-relational foster parent and taking on this identity. The outcome of this study includes specific recommendations for school psychologists supporting non-relational foster families in the public school setting and encourages a shift in perspective for school staff to appreciate that non-relational foster parents are eager to be active partners in supporting the children in their care.

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Nicholas Cutforth

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by

Emma Topf

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Advisor: Dr. Cynthia Hazel

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Chapter I: Introduction

According to the most recent Adoption and Foster Care Analysis and Reporting

System (AFCARS), there are approximately 437,283 children in the foster care system in

the United States (2019). Forty-six percent (190,454) of these children are placed in non-

relative homes where the foster parents may receive little, if any, background information

on the child (AFCARS, 2015). A non-relative foster placement is when a child is

removed from his or her biological home and placed with a licensed foster care provider

that is unrelated to the child, and the child resides in the provider's home. Unfortunately,

types of foster care placements, definitions of foster care placements, and terms used to

describe foster care placements, are not universal in the research. For the purposes of this

dissertation, two overarching types of placements are discussed: kinship care and non-

kinship care. Kinship care is when a child is placed with a relative, and in some

jurisdictions a close family friend, and resides in that person's home, also known as a

kinship placement. Non-kinship care refers to any placement that is not with a relative or

close family friend.

On average, children and youth in non-kinship care face one to two placement and

school transitions per year (National Working Group on Foster Care Education, n.d.).

During this transition, children and youth face significant educational challenges

including adjusting to a new school, curricula, expectations, friends, teachers, and family

placement. Vera (2013), stated that these transitions can have an adverse effect on

educational outcomes for children. Compared to non-foster peers, foster children have poorer attendance rates, are less likely to perform at grade level or graduate from high school, and more likely to have behavior and discipline problems or to be placed in special education (Vera, 2013).

Another problem is that the majority of the research and even best practices for working with children in foster care address children in foster care as a whole, instead of identifying specific supports for children in different types of foster care placements. These sub-populations of children receive different services and supports; therefore, school-based supports for children in different sub-populations of foster care will likely vary, and need to be individualized, depending on the type of foster care placement the child resides in and the direct and indirect factors impacting them.

Ecological Systems Theory

Research has shown that placement into foster care, experiencing trauma, and adverse childhood experiences (ACE) directly and indirectly affect a child's development (Perry, 2009). Each child placed in foster care has a different lived experience and it is a complex process of trying to understand the individual. An insight into the direct and indirect influences on a child's life is necessary for mental health practitioners to properly understand and support the child.

Ecological systems theory was applied as an overarching theory for this study. This theory is used as part of a complex process of understanding an individual, as well as the interrelations between an individual and his or her environment. Bronfenbrenner (1979) applied the term "ecological systems theory" to describe human development as

occurring within interrelated systems. In order to understand the child, the child's environments (home, school, community, culture, etc.) must be fully examined (Bronfenbrenner, 1986). Bronfenbrenner's theory defines five layers characterized by the proximity to the individual that impact a child's development: microsystem (immediate setting or environment), mesosystem (link between at least two microsystems), exosystem (settings that indirectly affect the individual by influencing the microsystem), macrosystem (broader society and culture), and chronosystem (consistency or change over time). It is important to note that these systems work in a bi-directional manner both between, or within, a layer and across different layers. Children in foster care typically have significantly more complex interrelations between themselves and their environments than a child not in foster care due to the high rate of mobility they often face transitioning from their biological home to a series of foster care placements (Pears, 2015). With each transition to a new placement, a child must adjust to new factors in every layer of his or her environment.

Microsystem

The microsystem is the layer closest to the child and includes all of the structures a child has direct contact with (Bronfenbrenner, 1977). The structures in this layer include relationships and interactions a child has with his or her immediate environment (Berk, 2000). For a child in a non-relational foster home this may include his or her foster family, biological family, case worker, additional social workers, therapists, school staff, neighborhood friends, child care staff, and peer group. When a child is placed into foster care, the foster parent – foster child dyad becomes one of the most significant

relationships in a child's microsystem (Cooley, Wojciak, Farineau, & Mullis, 2015). The microsystem typically has the largest and strongest impact on the child, yet the outer layers can still have significant impacts on the inner structures (Bronfenbrenner, 1990). When larger systems decide a child should be removed from his or her biological home or transitioned to a new foster home, new structures are added into the child's microsystem. When children are removed from their biological family, even if they were experiencing abuse or neglect, they often grieve from being removed from the home (Jantz, Geen, Bess, Andrews, & Russell, 2002). Transitioning out of their biological family home or transitioning to a new foster home is typically a difficult time for foster children and often has a negative impact on their educational achievement (Emerson & Lovitt, 2003).

Mesosystem

According to Bronfenbrenner (1994), the mesosystem "comprises the linkages and processes taking place between two or more settings containing the developing person" (p. 40). This layer is comprised of all of the interconnections between microsystems (Bronfenbrenner, 1977). A child in the foster care system has many interactions constantly taking place at this level; there are interactions between foster parents, biological parents, case workers, social workers, and school staff that all impact the child. The lack of interaction taking place between school systems and the child welfare system can have a negative impact on the foster child and his or her education (Altshuler, 2007). Understanding the mesosystem allows the researcher to better

understand the interactions in the child's microsystem and determine how to best support the child in the school system.

Exosystem

The exosystem is an extension of the mesosystem that is comprised of the larger social systems that indirectly affect the child or the child's environment (Bronfenbrenner, 1977). For a foster child, this layer may include foster parent(s) work schedule(s), school policies, community-based family resources, mass media, and foster parent(s) resources. These factors may impact the child indirectly in several ways including, his or her ability to engage in extracurricular activities, transportation issues, understanding of what it means to be in foster care, the neighborhood they live in, the people they are surrounded by, the level of community violence or supports around them, involvement in the juvenile or family court system, and level of supervision outside of school.

Macrosystem

The macrosystem is typically considered the outermost layer of a child's environment and is comprised of the overarching characteristics of a given culture or subculture (Bronfenbrenner, 1994). This layer is described by Bronfenbrenner as the "cultural blueprint" which encompasses the large powerful social influences that indirectly affect the child, including belief systems within a culture, race and ethnicity, bodies of knowledge, the economy, material resources, customs, life-styles, laws, government regulations, politics, and cultural norms and rules (Berk, 2000; Bronfenbrenner,1977). The cultural components of a child's environment have the power to exacerbate or alleviate problems for children in foster care.

Chronosystem

The chronosystem consists of the passage of time for the individual, as well as for the surrounding environment (Bronfenbrenner, 1994). This layer includes the change or consistency of a person and his or her environment over time. This can include change or consistency in personality, biology, cognition, socioeconomic status (SES), place of residence, family structure, support systems, schools, and peer groups. This layer is comprised of two types of transition: normative (e.g. entering school, puberty, entering the workforce, marriage, retirement) and nonnormative (e.g. school changes other than typical transitions to the next level of education, death in the family, being removed from biological family, transitioning to a new foster care placement, divorce) (Bronfenbrenner,1986). These transitions have a major impact on a child's development, and unfortunately foster children experience significantly more nonnormative transitions than non-foster children (Bronfenbrenner, 1986). Examining this layer allows the researcher to evaluate the influence of changes and continuities of the child's environment and the impact it has on his or her development.

Dyads

Bronfenbrenner's defined a dyad as "a two-person system" (p. 5). A dyad is characterized by reciprocal relations: when one person undergoes a process of development, the other person does too (Bronfenbrenner, 1979). This term serves to better understand developmental changes in children, as well as their primary caregivers. When an adult becomes a caregiver to a child he or she goes through an ecological transition, or a shift in their role or setting (Bronfenbrenner, 1979). In foster care, when a

child is placed in a non-relational placement, he or she also goes through an ecological transition. In this situation, both individuals' roles have changed. When someone goes through an ecological transition, the expectations of him or her also evolve (Bronfenbrenner, 1979). With a new role, a person is often treated differently and acts differently, as well as thinks and feels differently (Bronfenbrenner, 1979). When a foster child is placed in a non-relational home, his or her setting is also changed. Both the caregiver and child will be affected by environmental events or experiences that they are engaged in or that are occurring in their presence (Bronfenbrenner, 1979). Exposure to, or active engagement, in events or experiences in a new setting often influences individuals to undertake similar activities on his or her own (Bronfenbrenner, 1979).

Foster Parent – Foster Child Dyad

Once a child is placed into foster care, one of the most significant relationships in his or her microsystem becomes his or her non-relational foster parent (Cooley et al., 2015). The foster parent-foster child dyad, or the bi-directional interactions between foster parent and foster child, can have a substantial impact on a child's stay in foster care. According to ecological systems theory, children and their caregivers experience a transactional relationship, meaning that children and caregivers affect and are affected by each other (Hong, Algood, Chiu, & Lee, 2011). Children with more significant mental health or behavioral issues often act in ways that put a strain on the caregiver-child relationship. Over time, this leads to a break-down in the caregiver-child relationship and placement instability for the child. On the other hand, a positive caregiver-child relationship is correlated with a decrease in youth's externalizing behaviors and an

increase in self-esteem (Cooley et al., 2015). How the caregiver responds to and interacts with the child has an impact on how the child responds and interacts with the foster parent.

Many factors influence a dyadic relationship between a caregiver and a child including role demands, supports from other systems (school, work, extended family etc.), and stresses (Bronfenbrenner, 1979). Each layer of the ecological system impacts the dyadic relationship. Several aspects of a non-relational foster parent's life have the potential to impact the foster children in his or her care; this includes the many direct influences that enter a child's microsystem when he or she is placed in foster care such as foster parent personality, biological children in the home, other foster children in the home, spouse of foster parent, the neighborhood he or she lives in, the child care chosen, and the school chosen. Additionally, there are many foster parent interactions that indirectly affect a foster child. Interactions in the mesosystem include foster parent relationship with the caseworker, foster parent relationship with the school staff, foster parent relationship with biological parents, and foster parent relationship with spouse and other children. Interactions in the exosystem include foster parent work schedule, community-based family resources, and foster parent resources. Factors in a foster parents macrosystem that influence a foster child might include religious beliefs, cultural beliefs and practices, lifestyle, and political beliefs. Further, the passage of time, or the chronosystem, has the potential to greatly impact the caregiver-child relationship positively or negatively. The bi-directional caregiver-child relationship has the ability to significantly alter the outcome of the foster child's life.

Dyads of Family of Origin

        In addition to the foster parent-foster child dyad, the biological sibling dyads and the biological parent-child dyad remain important relationships in a foster child's world. When multiple children are removed from a home, they are not always placed together; two thirds of siblings are separated (Sen & Broadhurst, 2011). When siblings are separated, they are at a greater risk for placement disruption and are less likely to exit foster care to adoption as compared to siblings placed together (Leathers, 2005). When a child is separated from his or her siblings, it takes him or her longer to adjust to and feel comfortable in a foster care placement, which leads to the child feeling emotionally detached from their foster families and puts the child at risk for mental health issues (Leathers, 2005). The biological parent -child dyad was likely the first significant dyadic relationship the child experienced. Being removed from the home of one's biological family leaves the child with a sense of uncertainty of when he or she will get to have contact with his or her biological parent in the future (Sen & Broadhurst, 2011). Research has shown that children in foster care spend a large amount of time worrying about their biological families, even when they do not want to be reunited with their birth parents (Sen & Broadhurst, 2011). About 40-50% of youth in non-relational, kinship, and residential placements get to have contact with a biological parent one time per week (Sen & Broadhurst, 2011). Contact between biological parents and children may be direct, getting to see each other face to face, or indirect, through letters, phone calls, or photographs (Sen & Broadhurst, 2011). Good quality contact with biological family members, in addition to other positive interventions, has shown to promote positive

outcomes such as placement stability or a child's successful return to his or her biological home (Sen & Broadhurst, 2011). However, if children in foster care have poor quality or problematic contact with their biological parents, they are at a higher risk for placement and school disruption (Sen & Broadhurst, 2011).

Family – School Partnerships

In the past two decades, there has been an increase in research around the importance of school personnel partnering with families to create better educational outcomes for youth. Through the lens of the ecological systems theory, families and school personnel impact student outcomes (Jones, 2013).

Currently there are many barriers to open communication between systems, such as distrust, lack of recognizing differences as strengths, and varied expectations for instructional style and child behavior (Jones, 2013). However, when school psychologists view a child through the lens of the ecological systems theory and are able to identify barriers to equity, as well as advocate for needs of families, communication between systems can begin to bridge the gap between school personnel and families by creating a sense of shared responsibility for youth (Jones, 2013). The term "family-school partnering" refers to this sense of shared responsibility for student success (Lines, Miller, & Arthur-Stanley, 2011).

Family-school partnerships have been found to have many long-lasting positive outcomes. When school personnel and families have a shared responsibility for a student, students have higher academic achievement, increased homework completion, better school attendance, and are more likely to graduate on time (Lines, Miller, & Arthur-

Stanley, 2011). With open lines of communication between families and school personnel, families better understand what their child needs and how to best support him or her and school personnel gain a better understanding of how to support the child and family (Lines, Miller, & Arthur-Stanley, 2011). Schools as a whole that have adopted the practice of family-school partnerships have higher morale, inclusive school climate, higher teacher and administration ratings, higher performance ratings, and more community support (Lines, Miller, & Arthur-Stanley, 2011). Caregiver involvement in education is a significant predictor of student outcomes (Lines, Miller, & Arthur-Stanley, 2011).

In a non-relational foster care setting, it is important for family-school partnerships to take place as the students is often new to the caregiver and the school. Youth in non-relative foster placements are at risk for many negative outcomes and educational challenges (Vera, 2013). Family school partnerships have the ability to help students be more successful in the educational setting, which, through the lens of the ecological systems theory, has the potential to positively impact the dyadic relationships in the home setting (Jones, 2013). Positive dyadic relationships decrease a non-relational foster child's likelihood of placement mobility (Cooley et al., 2015).

Mobility

Children in non-kinship care placements transition to an average of three new foster care placements a year (Day et al., 2014). Each new home placement typically results in a new school placement, as well as new mental health service providers. Decades of research has shown that multiple changes in placement have great negative

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effects on children in foster care (Day et al., 2014; Pears et al., 2015; Leve et al., 2012; Scozzaro & Janikowski, 2011). In fact, some research has shown that it is not the type of placement that lead to maladaptive internalizing and externalizing behaviors, but the number of placements (Barth, 2002). With each new placement, the child is faced with all new factors in his or her microsystem, meaning all of the structures a child has direct contact with, such as new caregiver, caregiving experiences, home environment, rules and expectations, school placement, teachers, and peers (Leve et al., 2012). These nonnormative transitions can be difficult for children in foster care, with multiple transitions recognized as promoting negative psychological outcomes (Leve et al., 2012). Multiple placement changes have been correlated with increased externalizing behaviors, and therefore even more placement changes (Leve et al., 2012). Unfortunately, this can quickly become a negative cyclical pattern.

Placement Mobility

There are several reasons why a foster child might be moved to a new placement. Placement changes can rarely occur due to administrative or policy changes, but placement instability often stems from a change in a child's custody status or a break-down of the caregiver-child relationship (Leve et al., 2012). Children with significant mental health or behavioral problems are likely to face more placement changes due to the strain these issues often put on the caregiver-child relationship (Cooley et al., 2015; Leve et al., 2012). The caregiver-child relationship has the ability to significantly alter the outcome of the foster child's life.

A positive caregiver-child relationship is associated with a decrease in externalizing behaviors and an increase in self-esteem for the child (Cooley et al., 2015). A meta-analysis by Orme and Buehler (2001) identified several caregiver characteristics associated with the healthy social and emotional adjustment of children, such as caregiver acceptance, caregiving style, and love for children. Caregivers with these qualities are often more consistent in meeting the social and emotional needs of children and provide more stable placements. Additional foster family characteristics that can lead to healthy adjustment or behavioral and emotional problems for foster children include foster home environment, foster family functioning, foster family demographics, child temperament, foster parent's mental health, and foster family social support (Orme & Buehler, 2001; Hong et al., 2011). Providing a stable and consistent environment for a child in foster care has the potential to significantly decrease the number of placements the child will face, consequently reducing mental health and behavioral issues (Scozzaro & Janikowski, 2011).

School Mobility

Placement mobility typically leads to school mobility, which has been shown to have many detrimental effects on educational outcomes. About 56-75% of children change schools when they enter the foster care system (Foulk & Esposito, 2016). One-third of children in foster care experience at least 5 non-normative school transitions by the time they are 18-years-old (Foulk & Esposito, 2016).

Each time a child transitions to a new school he or she must go through a period of adjustment. During this adjustment period, children may miss out on instruction

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causing them to fall behind their peers academically (Pears et al., 2015). On average, school-age foster children are around 4 months behind their same-age peers in both math and reading (Pears et al., 2015). Part of the reason school mobility results in children falling behind in math and reading is due to the time it takes for teachers to establish the correct placement for the student, leading to more time without appropriate instruction (Pears et al., 2015). Additionally, each school follows a different timeline of academic instruction, so when a child transitions mid-year he or she may miss out on critical academic instruction (Pears et al., 2015). Many children fail to receive appropriate instruction due to school mobility, consequently increasing the chances that they will drop out of high school (Day et al., 2014).

Pears et al. (2015) found that multiple early school moves are associated with disruption of social relationships and poorer social-emotional competence. Additionally, the long-lasting effects of childhood maltreatment were linked to poorer overall school functioning (Pears et al., 2015). Research by Pears et al. (2015), indicates that multiple early moves and childhood maltreatment lead to deficits in self-regulation skills that often result in learning and social-emotional skills deficits, which may lead to behavior problems). The presence or lack of behavior problems has a large influence on the outcome of school transitions. Children with fewer behavioral problems may be less affected by school mobility as compared to students with significant internalizing or externalizing behaviors (Pears et al., 2015).

Lack of student records not only makes it difficult for teachers to decide appropriate placement, but also for school mental health professionals to determine any

necessary social-emotional supports (Pears et al., 2015; Foulk & Esposito, 2016). This is

especially true when students transfer to a new school district (Pears et al., 2015).

Although there are policies in place to facilitate sharing student records, data sharing

continues to be a significant issue as valuable health and educational information is often

missing (Foulk & Esposito, 2016). Although best practices suggest collaboration across

public systems, such as child welfare and school authorities, this has not been achieved

due to the lack of a shared view of the needs of children in foster care (Day et al., 2014).

Typically, the school personnel, child welfare staff, and mental health providers view the

child from differing perspectives, which results in compartmentalized and disjointed

treatment (Day et al., 2014). Confusion around the laws for data sharing for children in

foster care often prevents appropriate disclosure of information about a child between

stakeholders (Child Welfare Agency, 2014).

School mobility negatively affects academic progress and often disrupts

relationships and support systems with peers and school professionals (Day et al., 2014).

It is imperative to understand the characteristics and consequences of school mobility for

this vulnerable population in order to best support them and better inform efforts to

prevent school difficulties.

Statement of the Problem

There is no known research that provides current information about how school

psychologists can best support school-age non-relational foster children and their foster

parents. The continuing trend of foster children having negative educational and personal

life outcomes establishes a dire need for a better understanding of the needs non-

relational foster parents perceive as being met and not met in the school setting for the school-age children in their care, as well as how their interaction with the school setting impacts the foster parent-child dyad.

Purpose of Study

For this study, non-relational foster parents in the Colorado area were invited to share their perceptions of what needs are and are not being met in the educational setting for youth in a non-relational foster care placement, as well as how non-relational foster parents perceive the needs of the children in their care being met or not met to impact the foster parent-foster child dyadic relationship in the home settings. Interviews were conducted with non-relational foster parents, as they are a significant structure in a child's microsystem when they are placed into foster care. With the data collected, interpretations were made to form a broader understanding of the needs of non-relational foster children that are and are not being met in the educational setting and how their needs being met or not met impacts relationships in the home setting. By collaborating with non-relational foster parents, as experts in the field of foster care, this study leads to a greater understanding of the needs of non-relational foster children in the educational setting and the impact that supporting, or not supporting, those needs has on the foster child's experience in foster care. Two semi-structured interviews with non-relational foster parents about what it is like navigating the educational system, what needs of non-relational foster children are being met and not met in the educational setting, and the impact that has on their relationships in the home settings, allowed me to create a better understanding for school psychologists working with this population. This may be the

first study to parse out needs specific to the non-relational sub-population of school-age foster children.

Research Questions

There were three primary research questions for this study:

1. What is the experience of non-relational foster parents navigating the education system?

2. What needs do non-relational foster parents perceive are being met and not met in the educational setting for the school-age children in their care?

3. How do non-relational foster parents perceive the needs of the children in their care being met or not met in the school setting to impact the foster parent-foster child dyadic relationship in the home setting?

Definition of Terms

Following is a list of terms and the definitions used throughout this dissertation:

Abuse

The term "abuse" refers to treating a person with cruelty or violence, especially regularly or repeatedly. Abuse can take many forms including: physical, verbal, emotional, or sexual.

Adverse Childhood Experiences (ACE)

Adverse Childhood Experiences (ACE) refers to 11 categories of trauma including psychological abuse, physical abuse, sexual abuse, substance abuse, mental illness, mother treated violently, criminal behavior in household, neglect, abandonment, death of caregiver, and witnessing community violence. The first seven categories were

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identified by Felitti et al. (1998) and the last four categories were later added by Jamora et al. (2009).

Child in Foster Care

Every child that is removed from the home of his or her biological parents, or primary caregiver, by child protective services and placed into a foster home was considered a child in foster care. "Child in foster care" and "foster child" were used interchangeably throughout this paper.

Dyad

The term "dyad" refers to the bi-directional, or transactional, relationship between two individuals. Therefore, the foster parent-foster child dyad refers to the bi-directional interactions between a foster parent and foster child.

Ecological Systems Theory

The term "ecological systems theory" was coined by Urie Bronfenbrenner in 1979 to describe human development. This theory describes human development as occurring within five layers of interrelated systems: microsystem, mesosystem, exosystem, macrosystem, and chronosystem.

Educational Setting

The term "educational setting", refers to any public school an individual would go to receive an educational experience.

Educational System

The term "educational system" refers to the public schooling structures that typically span kindergarten through twelfth grade.

Foster Care

Foster care is a system that is typically governed by the child welfare system. This system was designed to create a temporary safe haven for children who have experienced maltreatment and are not able to safely remain with their families. Foster care provides children who are removed from the home of their biological parents, or other primary caregiver, a safe place to live and additional services depending on the type of foster care placement, as well as the needs of the child and family.

Non-Kinship Care

Non-kinship care is any type of foster care placement where the child is placed with someone he or she is not related to. In this study, the term "non-kinship care" included several different types of foster care placements; it included non-relative foster placements, group homes, treatment foster homes, temporary placements, and residential treatment centers. Although in other research additional sub-populations of foster care (e.g. homeless foster children, runaway foster children, and foster children living independently) are included in non-kinship care groupings, they are not included in this study.

Kinship Foster Care Placement

A kinship foster care placement is when a child is placed with a someone that is related to the child or close family friend. There may or may not be other people living in the home. The terms "kinship foster care placement" and "kinship placement" are used interchangeably thought this paper.

Maltreatment

For the purposes of this paper, "maltreatment" was used as an umbrella term to include all forms of abuse in addition to neglect and exploitation.

Non-Relative Foster Care

A non-relative foster care placement is when a child is placed with a licensed foster care provider that is unrelated to the child, in the provider's home. Several other foster children unrelated to the provider may be placed in the same home. The term "non-relative" was used interchangeably with "non-relational" throughout this paper.

Non-Relative Foster Parent

A non-relational foster parent is a licensed and paid foster care provider that provides appropriate relationships, role models, and oversight by a responsible adult to the unrelated foster children placed in their care and has training in the basic physical, emotional, and behavioral needs of children removed from their home.

School-Age Student

For the purposes of this paper, the term "school-age student" referred to any person who is attending school from preschool through twelfth grade.

Supports

For the purposes of this paper, the term "support(s)" referred to any strategy, intervention, or resource, that could be implemented or provided in the school setting. This included both direct and indirect "supports."

Trauma

The term "trauma" refers to what is experienced by an individual when he or she has been subjected to physical, emotional, relational, or verbal maltreatment. Trauma typically has long-lasting effects on an individual's overall physical, social, emotional, and spiritual wellbeing.

<div align="center">

Conclusion

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Previous research has made it clear that children in foster care are at risk for many negative outcomes. Over 45% of children in foster care are placed in non-relational foster care placements, yet no known research has specifically addressed how to support children in this sub-population of foster care in the school setting or by school psychologists. The ecological systems theory is used as an overarching paradigm for this study as it is critical to understand how the many direct and indirect influences in a foster child's life impact his or her interactions with his or her foster family and school personnel. When a child is placed into foster care, he or she often is forced to change schools and most children in foster care face an average of five non-normative school transitions by the time they age out of foster care. School mobility typically has a negative impact on a student's educational outcomes. Academic gaps and unmet social emotional needs often present as behavioral issues. When the underlying causes of the behavioral issues, academic gaps and unmet social emotional needs, are not properly treated, mental health issues can arise and placement mobility increases. When behavioral or mental health issues are not supported, it affects the child's life in both the home and school setting. Proper supports could not only benefit children in this type of

foster care placement, but may also reduce the stress levels and strengthen relationships with non-familial adults in these children's lives. When foster children's relationships with their foster parent are strengthened, the likelihood of placement mobility is reduced.

Since the non-relational foster parent – foster child dyad becomes one of the most significant factors in a foster child's microsystem when he or she is placed in foster care, non-relational foster parents were the participants in this study. The purpose of this study was to understand how non-relational foster parents perceive the educational needs of the school-age children in their care being met and not met, as well as how that impacts the dyadic relationship between the caregiver and foster child in the home setting. By identifying the needs of this population, I created a better understanding for school psychologists supporting non-relational foster families, as well as added to the research in the area of supporting the sub-population on non-relational foster children in the school setting.

Chapter II: Literature Review

The United States foster care system was designed to create a temporary safe haven for children who have been maltreated and are not able to safely remain with their families. There are over 400,000 children residing in a foster care placement at any given time (AFCARS, 2015; Scozzaro & Janikowski, 2015). Many of the families that require child welfare services, including foster care services, are struggling with multiple complex and interrelated life challenges (Scozzaro & Janikowski, 2015). Children are placed in foster care because they have experienced some form of physical, sexual, emotional, psychological abuse, or general neglect (Leve et al., 2012). Research has shown that child maltreatment is correlated with domestic violence, poverty, homelessness, substance abuse, psychiatric disorders, and other illegal behaviors (Jamora et al., 2009).

This chapter is divided into four sections. The first section describes the phenomenon of Adverse Childhood Experiences (ACE) and highlights the neurodevelopmental impact of trauma, trauma for foster children, and the impact of trauma on mental health. The second section of this chapter focuses on how children are placed into foster care and a brief discussion of the different types of foster care placements. The third section describes the educational and mental health needs of children in foster care, as well as common challenges faced by metal health practitioners

when providing educational and mental health services to children in foster care. The fourth and final section of this chapter highlights the limited availability of research focusing on non-relational foster families and the need for continued scholarship in this area.

Adverse Childhood Experiences

Children placed in foster care have experienced some sort of traumatic experience that led them to be removed from their home and many have long and complex histories of trauma (Pynoos, Fairbank, & James-Brown, n.d). Examples of maltreatment and potentially traumatic experiences that that may be underlying factors that lead to a child being placed in foster care are abuse, neglect, dysfunctional home environment, destructive and inconsistent parenting practices, poverty, emotional and behavioral disorders, poor mental and physical health care, exposure to deviant peers, community violence, and societal problems (Neely-Barnes & Whitted, 2011). Felitti et al. (1998) undertook the first ACE study to determine the long-term impact of adverse childhood experiences on physical and mental health outcomes of adults. The outcomes measured included disease risk factors and incidence, quality of life, health care utilization, and mortality (Felitti et al., 1998). This study used seven ACE categories under the overarching themes of abuse (psychological, physical, and sexual) and household dysfunction (substance abuse, mental illness, mother treated violently, and criminal behavior in household) (Felitti et al., 1998). Each of the seven ACE categories are forms of trauma.

Results of the ACE study suggest there is a strong and cumulative impact of ACE on adult health status (Felitti et al., 1998). Exposure to abuse or household dysfunction was correlated with heart disease, cancer, chronic lung disease, skeletal fractures, liver disease, stroke, diabetes, depression, attempted suicide, alcoholism, drug use, sexual promiscuity, and sexually transmitted diseases, (Felitti et al., 1998).

The ACE most foster children have faced places them at risk for long term negative health and emotional outcomes (Jee et al., 2010). Jamora et al. (2009), studied the relationship between ACE of children in foster care and psychiatric diagnoses later in life. For this study, the original seven categories of ACE used in the Felitti et al. study were increased to include neglect, abandonment, death of caregiver, and witnessing community violence (Jamora et al., 2009). Neglect was added because it is the most frequent form of childhood maltreatment; research has found that childhood neglect is associated with insecure attachment, poor intellectual and academic functioning, and social problems (Jamora et al., 2009). Abandonment, death of a caregiver, and witnessing community violence were added because these are common traumas experienced by children in foster care (Jamora et al., 2009). Findings suggested that multiple ACE place children at risk for many negative outcomes including psychiatric, social relationship, addiction, and physical health disorders in adulthood (Jamora et al., 2009). Jamora et al. (2009), found a positive correlation between ACE exposure and developing physical and mental health disorders as an adult, meaning that the more ACE a child has the more at risk he or she is for developing health issues as an adult.

Anda et al. (2006) found that individuals that experienced four or more ACE were up to 17 times more likely to develop psychiatric disorders in adulthood compared to those with no ACE exposure. The 144 foster children in the Jamora et al. study had an average of four to five ACE (2009). Having more than four ACE not only increased the child's risk for physical and mental health issues later in life, but also required more intensive mental health services in childhood (Jamora et al., 2009). Common psychiatric disorders related to ACE exposure in childhood included attention deficit/hyperactivity disorder (ADHD), oppositional defiant disorder (ODD), post-traumatic stress disorder (PTSD), adjustment disorder, depressive disorder, bipolar disorder, mood disorder, and anxiety (Jamora et al., 2009). Additionally, these often-co-occurring psychiatric disorders led to multiple placement changes or placement in a more restricted environment, such as residential care, which can lead to even more negative outcomes (Jamora et al., 2009). Environmental exposures, such as violence in the home, violence in the community, death of a caregiver, or abandonment, were also found to have a long-term impact on future relationships, emotional wellbeing, and development (Jamora et al., 2009). Being placed in foster care may be an indicator that a child has had environmental, genetic, prenatal, or postnatal exposure to ACE and consequently would benefit from mental health services. Without appropriate and intensive mental health services individualized for the child based on his or her ACE background, he or she will be at a much higher risk for negative physical and mental health outcomes.

Neurodevelopmental Impact of Trauma

The brain is organized in a hierarchical fashion and develops sequentially from the least to most complex (Perry, 2009). Each area of the brain mediates specific functions, with the simpler structures mediating basic regulatory functions (e.g. heart rate, blood pressure, body temperature) and the complex structures mediating more sophisticated functions (e.g. language, abstract thinking) (Perry, 2009; Perry, 2001). There are four main regions in the brain that each develop, organize, and become fully functional at different times across childhood, with 90% of the brain being physically developed by age 4 (Perry, 2009; Kelly, 2009).

The brain of an infant or young child is extremely sensitive and vulnerable to adverse experiences (Perry, 2009). If impairment occurs in utero (through exposure to drugs and alcohol for example), or in early childhood through traumatic experiences, it will alter the way the lower parts of the brain develop (Perry, 2009). If the lower parts of the brain develop abnormally, the higher more complex areas will also reflect these abnormal patterns (Perry, 2009). Thus, the same traumatic experience would affect the brain development of an 18-month-old child differently than a 6-year-old child (Perry, 2009).

Rifts in early interpersonal relationships and the chronic stress associated with being placed into foster care affects the underlying structure and function of the developing brain (Day, Somers, Darden, & Yoon, 2015). When a child experiences repeated trauma, it takes a devastating toll on the child and his or her growing brain

(Kelly, 2009). His or her neurodevelopment may be disrupted, which results in compromised functioning (Perry, 2009).

When a child feels threatened, his or her stress response is activated (Perry, 2009). If a child is exposed to prolonged or repetitive stress response activation, the brain may undergo a "use-dependent" alteration where the brain will begin to act as if the child is under continuous threat (Perry, 2009). This results in poor regulation of the stress-response neural systems and all the functions it mediates, such as mood, attention, and sleep (Perry, 2001). A child adapts to trauma by establishing behaviors that essentially save his or her life while experiencing the trauma, but can lead to detrimental life problems into adulthood, such as school failure, substance use, externalizing behavior, and deviant peer association (Kelly, 2009; Pears, Kim, Fisher, & Yoerger, 2013). In a violent or chaotic environment, it is highly adaptive for a child to develop hypersensitive reactions to external stimuli, which results from a persistent stress-response state (Perry, 2001). In children exposed to chronic trauma hypersensitive reactions might look like behavioral impulsivity, profound sleep disturbances, affect regulation issues, anxiety, regressed or delayed development, or an increased startle response (Perry, 2001).

When a child presents with maladaptive behaviors in a school setting, it is critical to determine if the child has experienced childhood trauma in order to provide appropriate supports. If trauma is overlooked, behaviors may appear as defiant or atypical when in fact, the child's brain has not fully developed in certain areas due to childhood trauma and those deficits are presenting behaviorally. Understanding how trauma affects

a child's developing brain is critical for mental health practitioners, and other supportive

adults, working with children in the foster care system.

Trauma and Potential Risk Factors of Children in Foster Care

In addition to the trauma previously experienced by children placed into foster

care, additional stress and adversity is experienced from being removed from their home,

as well as adjusting to a new home and often a new school and peer group (Pynoos et al.,

n.d.). A child's world drastically changes when he or she is placed into foster care;

children are often faced with feelings of guilt, loss, grief, and worry after being removed

from their home (Cooley, Wojciak, Farineau, & Mullis, 2015). The transition into foster

care often leaves children feeling confused as to why they are in foster care or what their

immediate future may look like (Cooley et al., 2015).

Multiple factors determine the level of trauma experienced by the child, as well as

his or her reaction to being placed in foster care. Children who enter foster care as

infants, the most common age in care, may have a less complex trauma history than older

children placed in foster care (Jee, Conn, Szilagyi, Blumkin, Balldwin, & Szilagyi, 2010).

Additionally, an infant's transition into foster care is typically less traumatic as long as he

or she is placed with a stable and responsive caregiver (Jee et al., 2010). Older children,

including toddlers, typically have much more complex trauma histories and take longer to

adjust to new living situations (Jee et al., 2010). Toddlers and preschool-aged children

have limited language to express how they feel, as well as limited coping skills to handle

the grief they often feel as a result of losing their parents and all that is familiar to them

(Jee et al., 2010). School-age children experiencing their first placement have the greatest

difficulty adjusting to the transition into foster care due to their typically extensive

complex trauma histories and lack of trust for adult caregivers (Gabrielli, Jackson, &

Brown, 2014).

It is important to note that just because a child has been removed from his or her

home, the trauma he or she experiences does not cease. Adjusting to multiple new

environments, losing everything he or she has ever known, and not knowing what to

expect in the future, can cause significant stress and difficulty adjusting. The older the

child is, the more likely it is that that he or she has experienced chronic or ongoing

trauma, which often makes it more difficult for the child to adjust once he or she has been

placed into foster care. If school-based mental health practitioners were aware a child was

in foster care upon enrollment, they may be able to take more proactive steps to support

the child rather than waiting for problems to arise and making reactive decisions.

Children in foster care have experienced a variety of maltreatment and potentially

traumatic experiences, with the potential to result in different negative outcomes if not

properly treated. Some forms of maltreatment or experiences have potential risk factors

that are age-dependent. The following sections discuss potential risk factors for infants

and toddlers (0- to 4-years-old), elementary school-age (5- to 11-years-old), and

secondary school age youth (12- to 18-years-old).

All ages. Experiencing childhood trauma puts children at risk for poor

psychosocial outcomes including school failure, substance use, maladaptive externalizing

behaviors, deviant peer associations, and lower affective and cognitive school

engagement (Pears, Kim, Fisher, & Yoerger, 2013). For children in foster care, being

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removed from their home often leads to experiencing multiple losses (i.e., family, friends, school, neighborhood, favorite possessions) that can be detrimental to social-emotional development and mental health (Neely-Barnes & Whitted, 2011). In addition, if children in foster care have poor quality or problematic contact with their biological parents, they are at a higher risk for placement and school disruption (Sen & Broadhurst, 2011). The loss of biological parents, extended family members, and a familiar community puts children in foster care at risk for depression, which is associated with substance use, academic underachievement, employment difficulties, risky sexual behavior, and teenage pregnancy (Stoner, Leon, & Fuller, 2015). Children of any age who have experienced physical, sexual, or emotional abuse are at risk for future school failure, poor mental health outcomes, poor behavioral outcomes, and deficits in typical development and psychological health (Gabrielli et al., 2014). However, younger children tend to exhibit more externalizing behaviors than youth whose abuse began in later childhood, with older children being more likely to experience emotional distress and display maladaptive externalizing behaviors (Gabrielli et al., 2014).

Infants and toddlers. In infants and toddlers, experiencing trauma is associated with decreased visuospatial skills, language, and general cognitive functioning (Stacks & Partridge, 2011). Placement type is critical for infants and toddlers. Those who were placed with non-relative foster parents, as compared to kinship placement, are more likely to be at risk for motor and cognitive delays, poorer adaptive skills, and developing difficult temperaments (Stacks & Partridge, 2011). Regardless of placement type, if the child is placed in a home environment where his or her basic physical, social-emotional,

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or environmental needs are not being consistently met he or she may be at risk for behavior, academic, cognitive, and language difficulties (Stacks & Partridge, 2011). Infants and toddlers that have experienced abuse and neglect often have had many unmet developmental and psychological needs (Stacks & Partridge, 2011). With unmet needs, they are at a higher risk for deficits in social and emotional development, which is associated with later aggressive and oppositional behavior, depression, and anxiety (Stacks & Partridge, 2011).

Elementary school-age. Children of elementary school age that experience trauma are at risk for developing significant externalizing behaviors, conduct disorder, hyperactivity, and emotional difficulties (Pears et al., 2013). Early life adversity such as maltreatment, harsh parenting, and living in poverty—all common experiences among foster children—has been linked to poorer school functioning in the first several years of school (Kim et al, 2015). These children are more likely to experience a host of negative outcomes including PTSD and emotional distress than youth maltreated as infants or toddlers (Gabrielli et al., 2014). In addition, the altered stress response system impedes the ability of a child to regulate their emotions in the context of realistic or perceived environmental stress (Leve et al., 2012). This combination can affect the quality of relationships with foster caregivers, school staff, and peer relationships. In particular, girls have a more difficult time establishing and maintaining positive peer relationships than boys (Leve et al., 2012).

Secondary school-age. Children of middle and high school age that experience trauma are at risk for developing PTSD, attention challenges, and academic

underachievement (Gabrielli et al., 2014). Further, being placed into foster care at a later age is associated with greater placement disruptions, difficulty with transitions, and significant externalizing and internalizing problem behaviors (Gabrielli et al., 2014). Externalizing behaviors are a major concern due to the potential long-term effects of delinquent behaviors, risky sexual behaviors, and substance use. When these behaviors are present in adolescence, there is a significantly higher risk of being involved in the adult criminal system if proper interventions are not put in place (Cooley et al., 2015). Internalizing behaviors may stem from underlying feelings of fear, guilt, or distress that can manifest into anxiety and depression (Cooley et al., 2015). If not treated, these internalizing symptoms can develop into mood disorders, anxiety disorders, substance use, or suicidal ideation or attempts (Cooley et al., 2015).

Placement into Foster Care

Child Protective Services (CPS) determines if removal of a child from his or her home is necessary on an emergency basis and the court will decides whether or not a child is placed into foster care. CPS processes differ state-by-state, but the basic premise is the same nationwide. First, at least one person in the community needs to report an allegation of child maltreatment to CPS (Child Welfare Information Gateway, 2013). The interaction between a reporter and CPS would fall in a child's mesosystem because the report of maltreatment indirectly affects the child. CPS then has to determine if the reported allegation warrants a CPS investigation versus law enforcement involvement (Child Welfare Information Gateway, 2013). CPS can only intervene if a child was maltreated by the person responsible for the child's welfare (i.e., biological parents, legal

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guardians, foster parents, employees at a residential facility or group home, teachers, coaches, relatives, childcare providers). If CPS becomes involved, a caseworker will respond within a specific time period to begin an investigation (Child Welfare Information Gateway, 2013). Once the investigation is complete, the caseworker will typically make one of two findings, either unfounded or founded (Child Welfare Information Gateway, 2013). The agency will then start a court action which will determine placement for the child and court order services for the parent in an attempt to alleviate the maltreatment (Child Welfare Information Gateway, 2013). If the investigation is founded, each family is assigned one caseworker who will be the main point of contact for a family working with CPS. This caseworker would directly work with the child, becoming a new structure in the child's microsystem. When a child is removed from the home, the child becomes a ward of the state or county, meaning that parental rights and responsibility for the well-being of the child are assumed by child welfare agencies until the parents are allowed to reassume parental custody, the child is adopted, or the child ages-out of the system between 18 and 21 years of age (Child Welfare Information Gateway, 2013).

Placement Types

Types of foster care placement include kin placement (placement with relatives) or non-kinship care, which includes non-relative placement (placement with non-kin registered foster parent or family), therapeutic or treatment foster care home, temporary placement, residential treatment facility, or a group home (Scozzaro & Janikowski, 2015). The basic precept of the foster care system is to offer respite in a stable, functional

home environment after removing the child from a dysfunctional or dangerous family system (Scozzaro & Janikowski, 2015). Foster care is intended to provide the child with appropriate relationships, role models, and oversight by a responsible adult with training in the basic physical, emotional, and behavioral needs of children removed from their home (Scozzaro & Janikowski, 2015). After a child is removed from his or her home, he or she is typically placed for a brief time in an emergency foster home prior to long term placement decisions and if an emergency foster home is not available children may be placed in a receiving center or children's shelter as a last resort (Barth, 2002). However, much of the current research regarding placement type focuses on other subgroups of children in foster care. There is a large body of research that looks at kinship care, group homes, residential care, and therapeutic care, but there is limited research that specifically looks at non-relational foster care as a subgroup. The issue arising is different types of placement offer different levels of supports and resources and therefore the results of research specific to subgroups of foster care may not be generalizable to other subgroups. Parsing out the types of foster placement in future research may provide insight into the amount or type of services a child may be receiving, as well as potential differences in needs or outcomes for each sub-population.

Placement Descriptions

A receiving center is a temporary environment where a child can be help up to 23 hours (Barth, 2002). Since receiving center staff are not required to obtain a foster care license a child must be moved to another setting after 23 hours, such as a children's shelter, an emergency foster home, or a longer-term placement (Barth, 2002). A child

may be fed, sleep, be comforted, and bathed as necessary before going to his or her next setting (Barth, 2002).

A children's shelter is an emergency center where a child can be taken for 1 to 30 days while a decision is made about the child's future placement (Barth, 2002). Children's shelters are often large buildings housing hundreds of children (Barth, 2002). The shelters have a 24-hour staff, strict rules, and are kept relatively sterile even though they are often overcrowded (Barth, 2002). However, due to class action lawsuits, children's shelters are typically used as a last resort.

An emergency foster home is designed to care for only a few children at a time, typically younger children and sometimes adolescents (Barth, 2002). A child may go to an emergency foster home directly after the child is removed from the home or following a stay at a receiving center or children's shelter (Barth, 2002). Children can stay at an emergency foster home for a few days, weeks, or months until it is determined the child is not returning to his or her biological home (Barth, 2002). At this point, a long-term placement would be identified that would be part of the reunification or permanency planning efforts (Barth, 2002).

A kinship placement is when foster care is provided by a relative other than the mother or father, or a close family friend (Barth, 2002). The adult does not need to be licensed to be a foster parent, but does need to pass a criminal background check (Barth, 2002). Kinship caregivers, often in the midst of a crisis, quickly decide to step into the role of foster parent, leaving them little time to become familiar with the child welfare system (Swanke, Yampolskaya, Strozier, & Armstrong, 2016). Consequently, children in

kinship care are less likely to receive mental health services because kinship caregivers

are less aware of the services available to them through child welfare (Swanke et al.,

2016).

A treatment foster home is an "adult mediated treatment model in which

community families are recruited and trained to provide placement and treatment to youth

who might otherwise have difficulty in maintaining placement in [non-relative] foster

care" (Barth, 2002, pp. 32). Treatment foster homes normally have a maximum of two

children at a time (Barth, 2002). The average length a child remains in a treatment foster

home is 25 months, which is longer than other foster care placements (Barth, 2002).

However, having a small household size is beneficial for the children and like kinship

care, children in treatment foster homes typically have lower placement disruption rates

(Barth, 2002).

Group homes typically house six to eight adolescents and may serve as

emergency shelter, or a last resort, for older children (Barth, 2002). Group care is

provided in shifts 24 hours a day by a team of unrelated adults (Barth, 2002). Typically,

children in group homes are older and may have significant behavior, mental health, or

developmental problems that may be difficult to manage in other foster care settings

(Barth, 2002). One major positive of group care is that it has been found to be a helpful

stepping stone in transitioning children from a more restrictive environment, such as a

residential treatment center, to less restrictive settings (Barth, 2002).

A residential treatment center is designed to offer individually planned mental

health treatment for children ages 17 and younger (Barth, 2002). The youth that typically

reside in this type of placement have significant mental health or behavioral problems. Due to the needs of the population served in residential treatment centers, many intensive services are often provided to the youth including therapeutic services for youth and their families, educational services, and medical services.

A non-relational foster placement is when a child is removed from his or her home and placed with a licensed foster care provider that is unrelated to the child. Several studies have indicated that non-relational foster placements, and treatment foster homes, are more desirable and efficient placements than group homes and residential treatment centers (Barth, 2002). Children in non-relational placements are more likely to be reunified with their biological parents than those in kinship care, as non-relational foster parents typically have a better attitude toward reunification with biological parents than kinship foster parents (Vanschoonlandt et al., 2012; Barth, 2002). Although over 80% of children placed in a non-relational foster care placement are forced to move to a different neighborhood and attend a different school, 91% of children report that they like who they are living with and feel like a part of the family (Barth, 2002). Non-relative foster parents tend to be more aware of behavioral challenges of a child as they view the child differently than someone related to them, but not all children in non-relational placements are receiving outside services, even when they need them.

It is clear that children in different placement types receive different levels of support and resources. Supporting a child in the school setting who is living in a treatment home and receiving individualized treatment on a daily basis would look very different than supporting a child who is in a non-relational placement and may or may not

be receiving consistent outside services. Knowing the type of foster care placement a child is living in can provide insight into the amount and type of services and resources the child may or may not be receiving.

<div align="center">**Needs and Services**</div>

Due to the many non-normative transitions and trauma history of children in foster care, they often have additional educational and mental health needs and require more intensive services. There are many challenges and barriers to meeting the needs of this population and providing them with appropriate services, which can lead to gaps in services and needs not being met in a timely matter.

Educational Needs

It takes a student an average of 4 to 6 months to adjust to a new educational setting (Emerson & Lovitt, 2003). A child has to adjust to new teachers, new peers, new expectations, new rules, new schedules, new school climate, and a new curriculum. During this adjustment period, foster children may miss out on instruction causing them to fall farther behind their peers academically, when on average school-age foster children are typically 4 months behind their same-age peers in both math and reading (Pears et al., 2015).

Educational needs and mobility. School mobility, or transitioning to a new school, is not uncommon for children in foster care. In fact, 56-75% of children in foster care must transition to a new school when they enter the system and by the time these children have aged out of the system at 18-years-old they have had an average of at least five non-normative school transitions (Foulk & Esposito, 2016). Each transition brings

with it multiple new people and places in a child's microsystem, all of which the child will have to learn and adjust. Frequent school moves can make it difficult to obtain educational records, especially records that are up-to-date and accurate, from students' previous schools. This can be a problematic situation for foster parents attempting to provide the school with records and for school staff who need to appropriately place and support the child. When records do not get transferred from one school to another, the lack of communication negatively impacts the child. Although the child never directly had interaction with the people responsible for transferring or seeking out his or her records, it does impact the child. This lack of interaction would fall in a child's mesosystem.

It is not uncommon for students who experience nonnormative school transitions to fall behind in math and literacy because the content builds on itself; when a student misses large chunks of instruction it is more difficult for him or her to catch-up. Further, each school follows a different timeline of academic instruction, so when a child transitions mid-year he or she may miss out on critical academic instruction (Pears et al., 2015).

Underlying needs related to academic challenges. In addition to academic supports that are necessary to close the academic gap faced by foster children due to multiple school and placement transitions, social-emotional supports may also be necessary due to challenges faced by their initial trauma, as well as the effects of multiple transitions (Foulk & Esposito, 2016). Ai, Foster, Pecora, Delaney, and Rodriguez (2013), found that children in foster care had similar rates of PTSD to military personnel that

served in the Vietnam or Iraqi War. In the educational setting, students with PTSD might display a lack of ability to plan, monitor, and regulate their behaviors and emotions (Foulk & Esposito, 2016). PTSD could also present as developmental and attachment difficulties (Ai et al., 2013). It is important to note that the symptoms of PTSD are additive and may begin to appear in adolescence (Ai et al., 2013). It is essential that school-based mental health professionals are knowledgeable about the effects of trauma and how they may present in the classroom to ensure students are not being mislabeled with a learning disability and receive the appropriate supports.

Educational Services

Evidence-based services and trauma-informed practice for children in foster care continue to be lacking in the education system (Day et al., 2014). It is important for teachers and mental health practitioners in the school setting (school psychologists, school counselors, and school social workers) to understand typical child development to determine how to identify and support a child who may be developmentally delayed due to being impacted by trauma. Research has shown that early identification of the underlying mechanisms that stem from early adversity is important in selecting appropriate intervention and prevention strategies aimed at increasing positive educational outcomes (Pears et al., 2015).

Under the Colorado Department of Education's Every Student Succeeds Act (ESSA), students in foster care are entitled to immediate enrollment in school, regardless of the ability to produce school records. According to the law, if records are incomplete, the school must immediately contact the school of origin. However, research has shown

that many school districts are failing to allow a child to start school until his or her records have been received and if the school does allow the child to start without educational records, the child is often placed incorrectly or not receiving necessary academic and mental health services (Pears, Kim, Fisher, & Yoerger, 2013). This delay of information sharing can result in students missing out on appropriate instruction, which consequently leads to them falling further behind academically and social-emotionally with each school transition (Pears et al., 2013). Under the federal ESSA, students in foster care are also categorically eligible to receive free lunch and transportation must be provided to the school of origin if it has been determined to be in the child's best interest (Myers, 2017). Colorado specific statutes under ESSA also state that children in foster care should have all school related fees waived (Myers, 2017). One barrier to youth in foster care receiving these services is that caregivers are not required to identify that a child is in foster care upon enrollment and therefore the services are not always provided (Foulk & Esposito, 2016).

Frequent school moves and lack of appropriate services or instruction in a timely matter, often leads to achievement gaps between children in foster care and their same-age peers (Pears et al., 2013). Academic gaps and social-emotional needs that underlie behavior problems need to be identified and necessary supports put in place as quickly as possible (Foulk & Esposito, 2016). Academic gaps put this population at great risk for school failure and often result in placement into special education (Foulk & Esposito, 2016). Between 30% and 50% of children in foster care are placed in special education, as compared to about 12% of children not in foster care (Cox, 2012). This

overrepresentation of foster children in special education could be due to many of these students being labeled with specific learning disabilities, due to the lack of consideration of the effects of trauma on language, attention, memory, emotional regulation, and executive functioning (Day et al., 2014; Pears et al., 2015). When children in foster care are misdiagnosed, it is less likely that they overcome their challenges because they do not receive the supports they need (Day et al., 2014).

Mental Health Needs

Many children in foster care exhibit great mental health needs due to the large number of risk factors they experience. The majority of children in foster care (50-80%) meet criteria for a mental health disorder (Hambrick, Oppenheim-Weller, N'zi, & Tasussig, 2016; Scozzaro & Janikowski, 2015). Almost a quarter of children in foster care meet criteria for two or more mental health disorders and one-third meet criteria for three or more disorders (Hambrick et al., 2016; Scozzaro & Janikowski, 2015). Research has shown that being placed into foster care is associated with a high probability of having depression and lower self-esteem (Cooley et al., 2015).

Mental health needs and mobility. Transitioning to a new living arrangement and a new school can be difficult for children in foster care. For many children in foster care, these transitions are even harder due to the mental health issues they face. Between 50% and 80% of children in foster care suffer from moderate to severe mental health problems and almost a quarter of these youth meet criteria for two or more mental health disorders (Neely-Barnes & Whitted, 2013; Scozzaro & Janikowski, 2015). Unfortunately, these statistics have remained stable for the past 20 years (Scozzaro & Janikowski, 2015).

The social disruption experienced due to frequent school moves has a significant impact on a child's overall social functioning (Pears et al., 2015). Learning and socioemotional skill deficits often lead to behavior problems, which in turn often results in further placement and school transitions (Pears et al., 2015). Additionally, it is not common for a child to be identified as being in foster care upon school enrollment; it is up to the foster parent to disclose that information. This can be problematic because mental health services will not be delivered to an unidentified foster child which results in more reactive supports, and often behavior issues, instead of proactive and preventative supports (Jee et al., 2010).

Pears et al. (2015) found that foster children with fewer behavioral problems may be less affected by school mobility as compared to students with less developed behavior skills (Pears et al., 2015). When a child in foster care develops a positive foster parent-foster child relationship he or she has a decreased risk of displaying externalizing behaviors in the school setting (Cooley et al., 2015). The more placement mobility, and therefore severed attachments to caregivers, the more severe the behavioral concerns of the child (Cooley et al., 2015).

Underlying needs related to mental health disorders. It is typically academic gaps and unmet social-emotional needs that underlie behavioral issues (Foulk & Esposito, 2016). The behavioral issues that most often arise are a combination of internalizing and externalizing behaviors (Gabrielli, Jackson, & Brown, 2014). Internalizing behaviors are passive behaviors such as withdrawal or somatic complaints that often manifest into depression and anxiety (Cooley et al., 2015). Externalizing behaviors are disruptive and

delinquent behaviors such as risky sexual behaviors, aggression (physical, relational, or verbal), defiance, or substance use (Cooley et al., 2015). If not treated, internalizing behaviors can manifest into much more severe mental health issues and externalizing behaviors put youth at a much higher risk of negative long-term outcomes (Cooley et al., 2015).

Mental Health Services

Although children in foster care access mental health services more than children in the general population, it is estimated that as many as 50% of those identified as needing mental health services fail to receive treatment (Scozzaro & Janikowski, 2015). Unfortunately, some research has shown that a large proportion of children in care who do receive mental health services do not show improvement (Hambrick et al., 2016; Bellamy, Gopalan, & Traube, 2010; McCrae, Barth, & Guo, 2010). McCrae et al. (2010) conducted a study using a sample of foster children in a national data base, National Survey of Child and Adolescent Well-Being, and compared behavioral and emotional symptoms of those who had received mental health services and those who had not. Results showed that the overall sample had decreased behavioral and emotional problems over time, but when looking only at the children who had received services, behavioral and emotional problems increased over time (McCrae et al., 2010). Bellamy et al. (2010) used the same national data base and found that children who had been in foster care at least one year often did not benefit from the provided mental health services.

It is not that children in foster care cannot benefit from mental health services, but that the complexity and severity of the mental health concerns of this population are

challenging to treat. One challenging factor is that many foster parents are overburdened caring for multiple children, which can make it difficult to not only engage in the treatment but also to transport the children to and from treatment each week (Hambrick et al., 2016). In fact, two-thirds of children receiving outpatient mental health services complete seven or fewer sessions (Hambrick et al., 2016). Another issue that arises, especially with kin caregivers, is that mental health services are avoided due to the perceived stigma (Hambrick et al., 2016). Additionally, interventions that were originally developed for parent-child dyads may not be a good fit with the child's living situation (Hambrick et al., 2016). However, the biggest issue in receiving quality and uninterrupted mental health services is the foster child's placement situation. High rates of placement instability make it especially difficult for a child to receive continuous service by the same mental health provider (Hambrick et al., 2016). These outside factors often result in gaps in mental health services (Jee et al., 2010). Having a mental health disorder at a young age not only affects a child's developmental trajectory but can also compromise his or her academic trajectory if not properly treated (Day et al., 2014).

Best Practices for Supporting Children in Foster Care

The first step for school psychologists in supporting children in foster care is to understand the basic demographic of children in the foster care system and why they require comprehensive and consistent support at all tiers, as well as additional supports systemically (Scherr, 2014). Utilizing a problem-solving approach that implements interventions at all three tiers is the best way to meet the needs of this population in the school setting (Scherr, 2014). School psychologists must also consider the educational,

mental health, and behavior challenges that are commonly experienced by children in foster care, which were discussed in the previous section (Scherr, 2014). School psychologists must also be aware of age-dependent risk factors and use that information to inform interventions.

Although children in foster care often come from traumatic backgrounds and the expected outcomes for these children are often bleak, there is hope that with proper supports these children have the ability to be successful and live fulfilling lives (Foulk & Esposito, 2016). Fortunately, the effects of trauma can be buffered by having one consistent, caring, and committed individual (Foulk & Esposito, 2016; Cooley et al., 2015). In the school setting teachers, school mental health professionals, and administration play a vital role in helping children in foster care succeed. Foster youth reported feeling more support, warmth, and acceptance from non-familial adults (i.e. school staff, foster parents, mentors etc.) than biological parents (Cooley et al., 2015). However, the quality and length of the relationship are critical (Scherr, 2014). Foster children fare better with these relationships when the adult provides developmentally appropriate and biologically sensitive activities or interventions and meets with the child on a weekly basis (Scherr, 2014). When a child in foster care receives less frequent, inconsistent, or short-term (less than 6 months) contact from an adult, it can actually be detrimental to the child due to their traumatic background and broken relationships in the past (Scherr, 2014). Foster youth who have a consistent and caring adult in their lives for at least 12 months can improve their relationships with their family and peers, behavior at

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school, academic achievement, school attendance, involvement in extracurricular activities, and trauma symptoms (Scherr, 2014).

Preschool Students

When working with preschool students in foster care, the goal is to ensure the child is enrolled in early childhood programming and receiving relevant interventions in order to offset psychoeducational challenges that stem from trauma (Scherr, 2014). Preschool children in foster care benefit from frequent, high quality cognitive stimulation and healthy social-emotional relationships with same-age peers and adults (Scherr, 2014). Through early childhood programming, these students are able to create consistent and positive attachments with staff (Scherr, 2014). It also gives foster parents a much-needed break from the demands of caring for a young child (Scherr, 2014) By providing foster parents with respite while the children they care for are in early childhood programming, it can increase the retention of foster parents, increase placement stability for the child, and allow foster parents to seek out additional income (Scherr, 2014).

Elementary School-Age Students

For elementary age students in foster care it is important that they receive academic and behavioral interventions within a problem-solving multi-tiered framework (Scherr, 2014). Interventions need to be individualized, but commonly focus around trauma, grief, social skills, problem solving, conflict resolution, physiological regulation, emotion regulation, and targeting the root cause of other externalizing and internalizing behaviors that are expressed by the child (Scherr, 2014). Although it does not always happen, it is beneficial for school psychologists to include foster parents on the school-

based consultation team to help foster children generalize the skills they learn across settings (Scherr, 2014). Additionally, connecting youth with extracurricular activities can have many benefits. It helps promote positive social interactions and increase school engagement, as well as decrease the time and motivation for the child to engage in delinquent behaviors (Scherr, 2014). When foster children are engaged in extracurricular activities it also gives the foster parent some respite time (Scherr, 2014). School psychologists can further support the family by setting up transportation, guiding them on how to get fees waived, and how to obtain any additional supplies (Scherr, 2014).

School engagement is another protective factor in the lives of non-relational foster children (Pears et al., 2013). High levels of school engagement were measured by pro-social behaviors, enjoyment of school, and feelings of closeness to teachers and peers (Pears et al., 2013). These factors significantly lowered the odds of a child in foster care engaging in health-risk behaviors (Pears et al., 2013). Pears et al. (2013) found that early engagement in school appeared to mediate the effects of early childhood maltreatment and being placed in foster care.

Secondary School-Age Students

When working with secondary school-age youth school psychologists should continue to identify, monitor, and intervene with academic, behavioral, and mental health concerns (Scherr, 2014). It is also critical to begin helping the youth plan for their potential emancipation (Scherr, 2014). School psychologists can help youth learn how to locate and secure a place to live, how to find a job, how to budget their resources, how to shop and prepare food, how to use public transportation, and how to obtain a driver's

license (Scherr, 2014). Research has found that hands-on real-world experiences help foster children become more independent than learning about independent life skills through a classroom curriculum (Scherr, 2014). If the student is on an individualized education plan (IEP) they are required by law to participate in developing an active transition plan by the age of 16-years-old (Scherr, 2014). This plan must include their education, job training, employment, or independent living goals as appropriate (Scherr, 2014). Their IEP goals should be written to help them achieve these goals (Scherr, 2014).

Trauma Informed Care

When childhood trauma is not addressed, severe emotional, behavioral, and academic challenges arise (Beyerlein & Bloch, 2014). Prolonged, chronic activation of a child's stress response due to repeated stressful events negatively effects his or her development (Martin et al., 2017). Even when in a safe environment, children who have experienced repeated trauma may be triggered by sights, sounds, smells, touches, taste, or thoughts linked to a traumatic event (Martin et al., 2017). When a child is triggered by a traumatic memory, he or she reexperiences the intense and distressing feelings of the original traumatic event (Martin et al., 2017). Although these triggers often evoke a trauma response such as withdrawal, aggression, or emotional outbursts, the child is often not aware of the link between the trigger and the reaction often leaving them with a feeling of being "out-of-control" (Martin et al., 2017). Children in the foster care system have experienced trauma, often chronic and complex trauma, and would greatly benefit from trauma informed practices (Beyerlein & Bloch, 2014).

Trauma informed care is described by The National Child Traumatic Stress Network (NCTSN) as when everyone involved in an agency or system is aware of the impact of trauma on children, caregivers, and service providers so that appropriate responses, training, practices, and policies are implemented. School personnel must be trained in trauma informed care (TIC) to begin recognizing the impacts of trauma in children, how it might affect student's behavior, and how to intervene (Martin et al., 2017). In recent years, research has focused around trauma-informed practices, but unfortunately the implementation of those practices is just starting (Beyerlein & Bloch, 2014). Some schools have used state funds to introduce trauma informed practices, with a variety of activities occurring across sites (Martin et al., 2017). These activities have included classes on trauma awareness and impact of trauma on learning for school staff, meetings to discuss implementing trauma informed practices, creating trauma committees that identify children who have been traumatized to determine how each child's strengths could be used to engage them in school, and altering approaches to student discipline (Martin et al., 2017). Schools can also be screening for trauma exposure or trauma related symptoms, making available or providing resources to children, families, and providers on trauma symptoms, impact, and treatment, addressing caregiver trauma and its impact on the family system, working as a team to facilitate continuity of care and collaboration across systems, and creating an environment for staff that minimizes and treats secondary trauma (Beyerlein & Bloch, 2014). When utilizing trauma informed practices, it is critical that school personnel shift their thinking to understand that children's behaviors may be a

coping skill in reaction to trauma they have experienced rather than viewing them as problem behaviors (Beyerlein & Bloch, 2014).

However, there are several barriers to implementing trauma informed practices in the school setting. Some of the barriers include lack of support from teachers or administration, lack of engagement from parents, competing teacher schedules and responsibilities, and societal stigma around mental health concerns (Martin et al., 2017). When schools are able to successfully implement trauma informed practices there are many positive outcomes including decrease in children's trauma symptoms, PTSD, anxiety, avoidant coping strategies, and suspensions, as well as an increase in emotional regulation, academic competence, test scores, grades, and graduation rates (Martin et al., 2017).

Literature Gap and Conclusion

There is a limited amount research on needs for sub-populations of foster children; therefore, further study is greatly needed to broaden understanding of the needs of non-relational foster children that non-relational foster parents perceive as being met and not met in the school setting and how that impacts children's relationships with caregivers in the home setting. No known studies focus on supporting students specifically placed in non-relative foster care, although 45% of children placed in foster care are placed into this type of setting (AFCARS, 2015). Each type of non-kinship care is unique and brings with it different potential risk and resilience factors. Thus, the differences in the groupings of non-kinship care used in research can make it difficult to understand the factors specific to each placement type, as well as how to best support a

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child in each type of placement. With the many noted differences between non-kinship placements, a gap in the literature exists regarding how to best support children placed in non-relational foster homes in the educational setting.

Ideally, each child that is placed in foster care should receive a comprehensive mental health evaluation by a trained professional to determine the extent of his or her needs. In reality, a comprehensive mental health evaluation is expensive and time consuming and therefore is often overlooked (Jee et al., 2010). To complicate things further, background information on a child in foster care may not be shared between stakeholders (Child Welfare Agency, 2014). Effective collaboration between school psychologists and non-relational foster parents entails working together to maintain placement stability, sharing important information, and ensuring the child is receiving the appropriate and necessary supports in order to increase the likelihood of educational success. Proper supports and use of trauma informed care will not only benefit children in this type of foster care placement but may also reduce stress levels and strengthen dyadic relationships between non-familial adults and non-relational foster children.

Despite the growth in research around supporting children in foster care in the school setting, evidence-based practices are not routinely being used (Scozzaro & Janikowski, 2011). There is a significant amount of research on the benefits of trauma-informed care with children, such as foster children who have experienced trauma, yet it is extremely underutilized in the educational setting. The result is that foster children are overrepresented in the special education system as the effects of trauma are often overlooked or attributed to a specific learning disability or serious emotional disability. In

addition, policies and regulations in place to promote the welfare of these youth are not being used to guide practices in the school setting (Day et al, 2014). By addressing this gap in the research, school-based mental health practitioners may be able to better understand the participants' experience navigating the education system, the needs of non-relational foster children they perceive as being met and not met at school, and the impact that has on dyadic foster parent-foster child relationships in the home setting.

Chapter III: Methodology

This chapter presents the purpose of my study, rationale for using a phenomenological approach, research design, strategies used for data analysis, and data validation.

Purpose of Study

The purpose of this study was to describe how non-relational foster parents view the extent to which the educational needs of school-age children in their care are being met, as well as how the child's needs being met or not met impacts the dyadic relationship between the non-relational foster parent and non-relational foster child in the home setting. This study contributed to school psychologists' and other school personnel understanding of the supports necessary for non-relational foster families. A systematic literature review indicated that as of January 26, 2020, no research existed describing how school-based mental health professionals can support non-relational foster families and the school-age children in their care. A qualitative approach was utilized, rather than a quantitative approach, since this topic has yet to be researched in-depth. The research questions for this study were:

1. What is the experience of non-relational foster parents navigating the education system?

2. What needs do non-relational foster parents perceive are being met and not met in the educational setting for the school-age children in their care?

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3. How do non-relational foster parents perceive the needs of the children in their care being met or not met in the school setting to impact the foster parent-foster child dyadic relationship in the home setting?

Phenomenological Approach

The phenomenological approach. allows the researcher to understand the meanings of events and human interactions in a systematic way. From a phenomenological lens the researcher is less concerned about the factual implications of an event; rather the emphasis is to uncover the essence of participants' lived experience to understand the significance of a phenomenon in a deeper and fuller manner (Van Manen, 2016).

Creswell (2013) outlined several defining features of a phenomenological study. First is the emphasis on a phenomenon being explored for the purpose of gaining a deeper understanding of the meanings derived from our everyday experiences (Creswell, 2013; Van Manen, 2016). Second, the phenomenon must be explored with a group of individuals who have each experienced the phenomenon and data collection typically involves a form of interviewing individuals who have experienced the defined phenomenon (Creswell, 2013). Third, data analysis procedures are systematic and progress from analyzing narrow data, such as significant statements, to more broad data, such as meaning units, and finally providing a detailed description of "what" the individuals experienced the phenomenon and "how" individuals experienced it (Creswell, 2013). Phenomenology offers researchers the insight into an experience rather than a theory to explain a phenomenon (Van Manen, 2016).

My study aligns with the features of a phenomenological approach outlined by Creswell (2013). A phenomenon was identified (i.e., being a non-relative foster parent navigating Colorado public school systems), data were collected through interviews with non-relative foster parents of school-age foster children who had experienced the phenomenon, and a common description of the essence of the experience was developed (i.e., what the participants had experienced as non-relational foster parents navigating the education system and how they experienced it). In addition to the interview audiotapes and transcripts, data collection also included field notes which contained my thoughts and reflections recorded during and after each interview, as well as observations of participants' vocalizations (sigh, grunt, change in tone etc.), facial expressions (smile, gritting teeth etc.), and other behaviors of participants (tapping on table, hand gestures etc.). With these data, interpretations were made to create a broader understanding of the perceived needs of non-relational foster families in the educational setting and how these needs impact relationships in the home setting.

Using a qualitative phenomenological approach allowed non-relational foster parents to not only voice their experiences in a meaningful way, but also to be heard in a direct manner. This approach allowed me to hear their wisdom and knowledge and to utilize this information to create an understanding of how they navigate the education system for school-age non-relational foster children and to make recommendations for how school psychologists can better support and advocate for non-relational foster families. The phenomenological approach also provided participants with an opportunity

to express their experiences in a way that was meaningful to them. Each individual

shared their approach and interpretation of their history navigating the education system.

Study Design

The study design entailed: a) a pilot study, b) defining inclusionary and

exclusionary factors, c) participant recruitment, d) understanding the sample, e) data

collection, and f) data analysis.

Pilot Study

A pilot study was conducted in order to ensure that my design was appropriate

and to determine whether the interview protocol was aligned with the objectives of the

study.

The participants were four experts in the field of foster care: the state coordinator

for foster care education at the Colorado Department of Education, a licensed non-

relational foster parent of school-aged children, a clinical psychologist, and a social

worker. A school psychologist had agreed to participate but was unable to due to

unexpected time constraints. These experts were selected because each had experience

with the foster care system, but differing perspectives based on their role. The state

coordinator was involved at the systems level, the clinical psychologist and social worker

were community supports for foster families, and the non-relational foster parent was

most similar to a prospective participant.

The state coordinator for foster care in Colorado provided two suggestions for

improvement: adding to my literature review the educational services that should legally

be provided to all school-age foster children at both the national and state level and

asking participants if they had experienced receiving these services for the children in their care upon enrollment in a school setting (K. Myers, personal communication, December 20, 2017). She also made several suggestions regarding the wording of interview questions to provide clarity as to what topics the questions were attempting to target (K. Myers, personal communication, December 20, 2017).

The second expert, a licensed non-relation foster parent of school age children, provided feedback on the intelligibility of each question and shared how she would answer each question (N. Koetter, personal communication, December 24, 2017). This allowed me to refine the wording of several questions and add additional bulleted topics that, from a non-relational foster parent lens, were relevant to specific questions.

A clinical psychologist who has worked with foster families for over 25 years provided feedback on the interview protocol and her perception of how foster parents might interpret the questions (C. Topf, personal communication, December 26th, 2018). This allowed me to further refine my questions and re-word one question that might have been interpreted as a leading question by non-relational foster parents.

The fourth expert was a social worker who had worked directly with foster families in the child welfare system for the past three years. She also shared how she thought a foster parent might interpret a question differently than intended and suggested several additional topics that she believed to be relevant to many foster parents (M. Plybon, personal communication, December 28th, 2017). I modified the protocol and added additional questions. After completing the pilot study, I revised my literature

review and interview protocol based on what I had learned from these four experts in the field.

Inclusionary and Exclusionary Criteria

Once the pilot study was complete, inclusionary and exclusionary criteria were defined (Table 1). The inclusionary criteria required that (1) all participants be licensed foster parents in Colorado, (2) they had cared for at least one school-age child attending public school in Colorado within one year of the initial interview, (3) they agreed to participate in two interviews, and (4) they spoke English fluently. The first two criteria were chosen to ensure that the foster parents had recent experience navigating the educational system for school-aged foster children and that the school-age children were being educated in Colorado public schools, as they follow the same state and educational regulations. The inclusionary criteria of completing two interviews was included so that I could follow up and expand on the first interview, which resulted in more in-depth data collection. Since I am a monolingual English speaker, it was required that participants were able to speak English fluently.

In order to be included in this study participants must have met all of the following inclusionary criteria and none of the exclusionary criteria (Table 1):

Table 1

Inclusionary and Exclusionary Criteria

<u>Inclusionary Criteria</u>	<u>Exclusionary Criteria</u>
Participant must be a licensed non-relational foster parent in Colorado.	Participant is not a licensed non-relational foster parent in Colorado.
Participant must have been the primary caregiver for at least one school-age foster child in the past year at the time of the initial interview.	Participant has not been the primary caregiver for at least one school-age foster child in the past year.
Participant must agree to participate in two interviews.	Participant does not agree to participate in two interviews.

Recruitment

To recruit participants, the Foster, Kin, and Adoption Training Manager at the

Colorado Child Welfare Training System (CWTS) was contacted directly via email to

request participation from group members. The CWTS training manager provided a flyer

with a description of this study, the purpose of this study, the list of inclusionary and

exclusionary criteria, and my contact information (Appendix D). Non-relational foster

parents were asked via email to participate in my study by the training manager from the

CWTS training group that they attended previously. If they wished to participate in my

study, they replied to the CWTS training manager who provided me with their contact

information, and then I contacted each potential participant directly. Participants were

informed of the nature of the phenomenological approach and that they would participate

in two interviews. A copy of the recruitment letter for the Foster, Kin, Adoption Training

Manager at the Colorado CWTS is provided in Appendix A and a recruitment letter for

participants is included in Appendix B. Each person who agreed to be interviewed was

asked to read and sign an informed consent form (see Appendix C) prior to participating.

I also provided, via email, each participant with definitions of terms critical to this study,

the list of inclusionary and exclusionary criteria, the informed consent form, and the

purpose of this study, and asked for their preferred method of contact (Appendix D). In

the email I also informed them I would contact them within one week via their preferred

method of contact to ensure they met all inclusionary criteria and none of the

exclusionary criteria and to set up a time and location for the initial interview. I

conducted interviews in a public, but enclosed space of the participants' choice, such as a

reserved room at a public library. If participants were unable to meet in person, I offered

interviews via telephone as a secondary option. Incentives were not offered.

In an effort to ensure that the interviews were uninterrupted, I asked my

participants to schedule interviews at times when there were no children present, when

possible. All but one participant, who participated via telephone, were uninterrupted by

their children and that interruption was minimal. Once six participants had agreed to

participate, recruitment ceased as it proved to be more challenging than expected to

recruit participants.

Sample

A purposive sample of six non-relative foster parents with school-age foster

children was obtained through the recruitment process described above. All participants

resided in Colorado at the time of the interviews and identified as female. One participant

had a bachelor's degree, four participants had a master's, and one participant had a

doctorate. Four participants had been licensed as a foster parent for zero to one year, one

participant had been licensed for eight years, and one participant had been licensed for 20

years. Three participants had cared for one non-relational foster child, one participant had

cared for two non-relational foster children, one participant had cared for eight non-relational foster children, and one participant had cared for 29 non-relational foster children. Demographic data were only collected for variables related to the inclusionary factors and educational background of participants. The demographic data were collected on the inclusionary factors to determine if a participant qualified to participate in this study and on the educational background of participants to gain perspective on participants' educational experience. Other demographic data unrelated to the study were not collected.

Data Collection

Before collecting any data, approval from the University of Denver IRB board was obtained. Over the course of nine months, six participants were identified and each engaged in two semi-structured interviews which lasted between 11 and 77-minutes (Table 2). The average time between the first and second interview was six days, with a range from three to eight days. This two-interview approach is a more condensed interview approach of Irving Seidman's three interview model (Seidman, 2006). In Seidman's (2006), approach the first interview is used to establish the context of the participant's experience, the second interview allows the participant to reconstruct the details of his or her experience, and the third interview encourages participants to reflect on the meaning of the experience. In my condensed approach I was able to structure the interviews in a way that was intended to collect the same information as the three-interview approach. In my first interview participants were asked semi-structured questions that allowed them to share their experiences and the context of their

experiences, which aligns with the intentions of Seidman's (2006) first interview. My second interview aligned with Seidman's intentions for the third interview by asking participants to reflect on the meaning of their experience of being a non-relational foster parent and what led them to take on this role. Throughout both interviews, follow up questions were asked to allow them to provide more details of their experience, which is the intention of Seidman's (2006) second interview. Semi-structured interviews are included as the National Association of School Psychology's (NASP) best practices for school psychologists interviewing parents about their child's educational experiences, especially when discussing their student's needs (McConaughy & Ritter, 2014). The purpose of conducting two interviews was to enhance the validity of the study. With two interviews both myself and the participants were able to follow up and extend on information from the first interview, resulting in better quality data. Also, with the two-interview approach I was still able to account for idiosyncratic days which increased internal consistency of what the participants were sharing. Further, all participants agreed that I could follow-up with them for any questions that arose after the second interview. This allowed me to clarify any lingering questions I had or ask for additional details on an experience that was presented in the second interview.

Many interview questions were open-ended, as Seidman (2006) suggested, with bulleted topics listed that I expected many participants to discuss. Follow-up questions addressed topics that the participant did not address in their answer to the original question (Appendix E). As Cohen and Crabtree (2006) advised, the protocol served as a guide, but also allowed me to follow topical trajectories of participants that strayed from

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the protocol. The semi-structured interview approach resulted in reliable and comparable qualitative data, as well as novel perspectives and understanding of the topics.

The majority of interviews occurred between June,2018 and February,2019, with three of the interviews taking place in June, 2018 (Table 2). In line with IRB requirements, participants were informed that their participation was voluntary and that they could refuse to answer any questions or terminate the interview at any time. All interviews were tape-recorded and transcribed (Table 2) to provide participants with an accurate record of what they had said. I wrote field notes in conjunction with the interviews and observations during and immediately after each interview. Also, I wrote analytical memos while listening to taped interviews, typing transcripts, and reflecting upon interviews, as suggested by Seidman (2006). All audio recordings of interviews, transcripts, and signed informed consent forms were entered into password protected computer files. The data were transcribed by myself in order to transform the words of the participants into a written text for me to study, as Seidman (2006) suggested. By transcribing the interviews myself, I was able to immerse myself in the data and begin to make connections within and across interviews.

The first interview was comprised of four opening questions regarding the participants' experience as a non-relational foster parent in order to ensure, for a second time, they met criteria to participate in the study, as well as to gain a better understanding of the non-relational foster parent-non-relational foster child dyad, and to begin building rapport (Appendix E). Additionally, I asked 13 questions related to the three primary research questions (Appendix E). The interview questions asked participants about their

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overall experience navigating the education system for the children in their care, who influenced their experience navigating the education system, what information was provided to them when a child was placed in their care, what challenges they experienced navigating the education system for the child in their care, what interactions typically took place between participants and school personnel, and how participants felt supported or not supported. Participants were also asked about the perceived impact of children in their care receiving services or not in the school setting on their relationship with the children in the home setting, factors they believed to impact the foster parent-foster child relationship, what foster child demographics were perceived to impact the child's time in foster care, what community services were typically provided for non-relational foster children, and how participants perceived their relationship with the children in their care to impact the children's stability or mobility in a foster care placement.

The second interview (Appendix E) allowed me to follow up on and extend information from the first interview. Participants were asked about their experience of becoming a foster parent and their personal experiences navigating the educational system, and to reflect on the meaning of their experiences by addressing the intellectual and emotional connections between their work as non-relational foster parents and the lives of the school-age children they care for. Questions about the participants' personal education experiences were asked to understand the lens of the participant in regards to education and rule out any bias towards the educational system.

Data Analysis

As per the objectives of a phenomenological study, the data analysis served to provide a detailed description of "what" and "how" participants experienced the phenomenon of navigating the Colorado public education system for the children in their care. Data analysis included transcribing the interviews, checking the transcriptions for accuracy, four separate levels of coding and analysis, and reviewing and refining the data as a whole.

First, I read the printed transcripts while listening to taped interviews to confirm accuracy. Then I completed manual coding on each of the 12 paper transcripts (two transcripts for each participant) for each of the four levels of analysis separately and sequentially (descriptive coding, emergent coding of themes, a priori coding of research questions, and a priori coding grounded in EST). Seidman (2006) suggested that coding begin on paper transcripts and then transition to computer-based coding because viewers often retrieve different information across the mediums of paper and screen. Therefore, I completed all manual coding prior to beginning coding in Atlas.ti. Manual coding was accomplished by bracketing passages that appeared interesting or were related to an a priori code. Bracketing allows researchers to be able to respond to meaningful chunks of data by coding each bracket through the process of noting what is interesting, labeling it, and categorizing the labels (Seidman, 2006). Once manual coding was completed, I coded the documents in Atlas.ti in the same sequential order by reading line-by-line through each transcript and identifying the manual codes as well as adding in additional codes that appeared significant. Then I completed at least one more round of coding

specific to each level of analysis (Table 3). In order to identify the original context of a

code, I labeled each code in Atlas.ti with the participants' document number and the

sequential quotation number within the transcript. Once coding was complete, I exported

the codes to individual excel files and wrote the initial draft of that section (Table 3). I

wrote up my findings from May 2019 to May 2020.

Table 2
Interview, Transcription, and Coding Timeline

Participant	June 18	July 18	Aug. 18	Sept. 18	Oct. 18	Nov. 18	Dec 18	Jan. 19	Feb. 19	Mar 19	Apr. 19
Susan	PI 71; 37	T	T							MC	AC
Julie	PI 58; 28		T	T						MC	AC
Katherine	PI 59; 18			T	T					MC	AC
Andrea				PI 58; 11				T	T	MC	AC
Diana								FI 77; 24		T; MC	AC
Michelle									FI 50; 14	T; MC	AC

Notes. The date headings include the abbreviated month, followed by the last two digits of the year. The codes used in the table are defined followed: FI= interviews one and two face-to-face; PI= interviews one and two via phone; T= transcription; MC= manual coding; AC= Atlas.ti coding; Below each interview code (FI or PI) the length of each interview is provided in minutes with the first number representing the length of interview one and the second number representing the length of interview two.

Four levels of analysis were completed: (1) descriptive analysis of each participant, (2) emergent analysis of themes across participants, (3) a priori analysis based on the three research questions, and (4) a priori analysis grounded in ecological system theory. Initial analysis of each level was completed in sequential order from April 2019 to October 2019 (Table 3). Continuous editing of all writing occurred from May2019 to April 2020.

Table 3

Data Analysis Timeline

Participant	Apr. 19	May 19	June 19	July 19	Aug. 19	Sept. 19	Oct. 19
Susan	1	2	2; 3	3	3	3; 4	4
Julie	1	2	2; 3	3	3	3; 4	4
Katherine	1	2	2; 3	3	3	3; 4	4
Andrea	1	2	2; 3	3	3	3; 4	4
Diana	1	2	2; 3	3	3	3; 4	4
Michelle	1	2	2; 3	3	3	3; 4	4

Notes. 1= descriptive analysis and writing; 2 = emergent theme analysis and writing; 3= a priori analysis of research questions and writing; 4= a priori analysis grounded in ecological systems theory and writing. Continuous editing of all writing occurred from May 2019 to May 2020.

The first level of analysis involved descriptive coding of each participant to gain an essence of their experiences and characteristics. This level of coding identified descriptive codes, including geographic location, gender, highest level of education, number of years licensed as a non-relational foster parent, and the number of non-relational foster children a participant had been the primary caregiver for (Table 4). This initial level of coding provided insight into participants' educational and professional backgrounds, history or perception of child welfare before and after becoming a non-relational foster parent, and meaning derived from experiencing the role of non-relational foster parent. This information provided me with historical context and general understanding of each participant prior to starting emergent thematic coding.

Table 4
Participant Data Frequency

Variable	Number of participants (n=6)
Reside in Colorado	6
Gender	
Male	0
Female	6
Highest Level of Education	
Bachelor's degree	1
Master's degree	4
Doctorate degree	1
Licensed Foster Parent in Colorado	
0-1 Year	4
8 Years	1
20 Years	1
Primary Caregiver for	
1 NRFC	3
2 NRFC	1
8 NRFC	1
29 NRFC	1

NRFC = Non-Relational Foster Child(ren)

The second level of analysis was emergent coding and resulted in the development of themes and related subthemes (Table 5). This coding was conducted prior to a priori coding in an attempt to reduce bias in emergent theme development. This level of data analysis required five cycles of coding using lumping and splitting to refine the data, with the three cycles of coding on paper transcripts and two cycles of coding in Atlas.ti. Emergent data analysis resulted in 3 themes and 10 subthemes.

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Table 5

Emergent Themes and Subthemes

Theme	Subtheme
Lack of Understanding of the Impact of Trauma	1a. School staff having unrealistic expectations of non-relational foster children
	1b. Non-relational foster children receiving inappropriate supports
	1c. Non-relational foster parent advocating for non-relational foster child's needs
Stigma around Foster Care	2a. Non-relational foster parent stigma
	2b. Non-relational foster child stigma
	2c. Normalizing the educational experience for children in foster care
Relationships and Communication	3a. Lack of communication between stakeholders (non-relational foster parent & child welfare and non-relational foster parent & school)
	3b. Consistent communication between stakeholders (non-relational foster parent & child welfare, non-relational foster parent & school, and non-relational foster parent & non-relational foster child)
	3c. Importance of relationships
	3d. Non-relational foster parent wanting to instill values in non-relational foster child

The third level of analysis was a priori coding related to the three research questions (Table 6) which were used as a guiding structure for this study. This level of data analysis required four cycles of coding, including one cycle specific to each research question on the paper transcripts and a final cycle of coding in Atlas.ti. Within this level of coding I focused on the challenges participants experienced navigating the education system, what they found supportive in this navigation, the needs they perceived to be met and not met for the children in their care in the education setting, and how the met and unmet needs impacted the dyadic relationship in the home setting.

Table 6

A Priori Coding Related to Research Questions

Research Question (RQ)	**Theme**/Subtheme
RQ 1: What is the experience of non-relational foster parents navigating the education system?	**(A)Challenges identified:** 　(A1) New student enrollment and orientation process 　(A2) Non-relational foster parents balancing advocating and positive home-school relationships 　(A3) Learning how to navigate the education system as a non-relational foster parent 　(A4) Delays in enrollment 　(A5*)* Non-relational foster parent not being included in decision making *(***B) Supports identified:** 　(B1) Trauma-informed school structures such as consistent routines and expectations 　(B2) Normalizing the experience for the non-relational foster parent and child 　(B3) Consistent and timely communication
RQ 2: What needs do non-relational foster parents perceive are being met and not met in the educational setting for the school-age children in their care?	**(C) Needs met in the educational setting:** 　(C1) Academic and social emotional needs met due to staff having an understanding of the impact of trauma 　(C2) Communication to generalize academic and social-emotional supports between home and school 　(C3) Building relationships to meet academic and social-emotional needs **(D)Needs not met in the educational setting**: 　(D1) System wide focus on academic performance rather than social-emotional development resulting in academic and social-emotional needs not being met 　(D2) School mobility due to school personnel's lack of understanding of the impact of trauma resulting in academic and social-emotional needs not being met 　(D3) Unrealistic expectations of student and contentious communication between stakeholders resulting in academic and social-emotional needs not being met 　(D4) Limited relationship building resulting in academic and social-emotional needs not being met
RQ 3: How do non-relational foster parents perceive the needs of the children in their care being met or	**(E)Needs met that impacted the dyadic relationship:** 　(E1) Addressing splinter skills through additional targeted academic supports 　(E2) Open lines of communication between special education providers and non-relational foster parents

not met in the school setting to impact the foster parent-foster child dyadic relationship in the home setting?	(E3) Consistent routines, expectations, and structures in the school setting **(F)Needs not met that impacted the dyadic relationship:** (F1) Inappropriate services provided resulting in academic and social-emotional needs not being met (F2) Delayed enrollment resulting in academic and social-emotional needs not being met (F3) Lack of special education resources resulting in language, occupational therapy, academic, and social-emotional needs not being met

The thematic analysis revealed the emergent and a priori outcomes of this study in relation to the five layers of the ecological systems theory (Table 7). Additionally, this level of analysis included analyzing how my findings supported, contradicted, or extended existing research. The first four levels of analysis are discussed in chapter four and the fifth level of analysis, thematic analysis related to the ecological system theory, is discussed in chapter five.

Table 7

A Priori Coding Related to Ecological Systems Theory

Layers of the Ecological Systems Theory	**Themes**/Subthemes
Microsystem	**(A) Weaknesses in Microsystem** (A1) Negative interactions with students due to not understanding how to interact with a child who has been impacted by trauma (A2) Breakdown in relationships between non-relational foster children and school staff (A3) School staff trying to overly normalize a student who has been impacted by trauma (A4) Inappropriate interventions or supports being used to target academic, behavioral, and language needs (A5) Breakdown in the caregiver – child relationship due to the child's needs not being met in the school setting (A6) Negative interactions with biological family members **(B) Strengths in Microsystem** (B1) Adults building strong and consistent relationships with non-relational foster children (B2) Targeted and appropriate special education services (B3) A child's needs being met in the school setting positively impacting the caregiver – child relationship
Mesosystem	**(C) Weaknesses in the Mesosystem** (C1) Participants having to advocate for the needs of the children in their care due to school staff not understanding how to support students who have been impacted by trauma (C2) Delays in communication between child welfare and other stakeholders **(D) Strengths in the Mesosystem** (D1) Participants having strong relationships and open lines of communication with school or child welfare personnel (D2) Having a high level of communication between systems
Exosystem	**(E) Weaknesses in the Exosystem** (E1) The widespread lack of understanding of how to support a child impacted by trauma across the education system (E2) Poor quality contact between a child and biological parent due to child welfare policy that aims for reunification with biological parents

	(E3) Limited funding and resources in the public education system	
	(F) Strengths in the Exosystem	
	(F1) Participants history including professions and college education related to child welfare or special education	
	(F2) School staff having consistent communication system in place with parents and guardians	
Macrosystem	**(G) Weaknesses in the Macrosystem**	
	(G1) Societal stigma around child welfare	
	(G2) Limited societal understanding of the role of school psychologist	
	(G3) Difference in lifestyle between adult stakeholders and non-relational foster children	
	(H) Strengths in the Macrosystem	
	(H1) A shift in societies acceptance and discussion of non-traditional families and mental health	
	(H2) Stakeholder's beliefs about supporting non-relational foster children	
Chronosystem	**(I) Weaknesses in the Chronosystem**	
	(I1) Limited information being provided to non-relational foster parents between the time they accept taking the child into their home	
	(I2) Children's challenges being exacerbated over time due to inappropriate services or supports being provided	
	(I3) Lack of, ingenuine, or judgmental communication breaking down relationships over time	
	(J) Strengths in the Chronosystem	
	(J1) A child's needs being met over time leading to positive outcomes	
	(J2) Non-relational foster children strengthening relationships with stakeholders over time	

Data within each level of analysis were analyzed separately and a first draft of the analysis was written (Table 3). After a first draft of all levels were completed, they were reviewed as a whole and the data were further refined. Continuous editing of my writing occurred throughout the analysis process. Connections between all levels of data analysis were used to further the understanding of non-relative foster parents experience

navigating the education system and how school psychologists can support non-relative foster parents and their school-age foster child(ren) in the Colorado school systems.

Data Validation

In an attempt to ensure that I have presented high quality data that is both accurate and useful, I will describe my personal biases related to this study and the study's limitations. This description includes the ethical considerations I set forth, the lens of my writing, and the forms of member checking that were used.

Positionality

My personal experiences and biases impacted this study. In regard to personal experiences, my background includes conducting research on children in foster care with a vertical research team, being the daughter of a clinical psychologist who often works with children in foster care and having a sister-in-law and several friends who are non-relational foster parents. As a doctoral student in Child, Family, and School Psychology I have a large knowledge base in typical and atypical child development. These personal ties and experiences have allowed me to hear about the benefits and injustices in the child welfare system first-hand, as well as gain a comprehensive knowledge of school-based mental health professionals, which may have impacted how I interpreted the data. I believe that foster families are not receiving enough support and that the lack of communication between major systems is greatly hindering the short- and long-term outcomes of children in foster care. To recognize the possible impact on how the data were collected and interpreted, I engaged in bracketing (Seidman, 2006) to limit researcher bias by exploring and identifying my preconceptions about the child welfare

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system and child development. Bracketing my biases supported my attempts to suspend my judgment on these topics and focus on analyzing the participants' experience.

Overall, my cumulative knowledge and links to stakeholders in the foster care community supported the research design as I was able to collaborate with other experts in the field. This bias may be an asset as I was able to network within this community to ask questions and gain more information on topics from stakeholders that have personal experience within the child welfare system. My cumulative background knowledge on typical and atypical development, as well as the child welfare system, may also be an asset as it sets a strong foundation for interpreting the phenomenon of non-relational foster parents navigating the education system.

Limitations

Given the small sample size, the study's findings only directly apply to those foster families involved in the study. However, like all qualitative research, this study has the potential for transferability to other non-participating non-relative foster parents who are experiencing similar circumstances.

My choice of a two-interview approach, rather than a three-interview approach suggested by Seidman (2006) was made to reduce the time demands of participation and ensure the necessary number of participants, but also meant I was only able to reflect on what was expressed in the first interview. It is possible that the participants would have shared more experiences in a third interview and I would have been able to follow more topical trajectories of participants. However, I do believe I was able to match the

intentions of Seidman's (2006) three interview approach with the condensed approach I used.

Four of the six participants had cared for one school-age non-relational foster child at the time of the first interview, thus limiting their experience navigating the public education system. Non-relational foster children react differently to transitioning to a non-relational foster home and a new school setting, so it was limiting that over half of the participants only had experience with one non-relational foster child.

Another limitation was that I did not collect additional relevant demographic data that may have had substantial impact on this population navigating the education system such race or ethnicity of the parent and child(ren), the degree types of the parents, social economic status of the parents, the age range of the children, grade levels of the children, the school district the children attend, resource levels of the school, or racial or ethnic demographics of the school. All of these issues play a role in the disparities that we know exist in the lives of these children, in school performance, discipline, opportunities, services, the foster parent's ability to advocate for the child's needs as well as their own. Collecting data on race or ethnicity of the parent and child may have also led to more discussion of the impact of race and ethnicity in non-relational foster family's daily lives and the impact it may have on their experience navigating the education system, as it is not uncommon for a non-relational foster parents to care for a child of a different race or ethnicity than their own. One participant did organically address some challenges that arose from her identifying as White and the child in her care identifying as Latinx. The child faced many questions and some teasing from peers about the difference in her and

her caregivers' ethnicity. Another participant mentioned the race of one of the children in her care, but I did not follow up on it.

Finally, all six participants were female and had college degrees, while three worked in special education, which meant that they had training in typical and atypical child development. This specific lens, along with being female and college educated, may have influenced the data. The U.S. Department of Human Services (2009) states that 70% of foster parents have education beyond high school, but no data on graduate school education, area of education, or profession are available. However, the participants' educational background may have enhanced the data as they had the dual experience of working in a public school setting and caring for school-age non-relational foster children. Their experience may have contributed to better understanding of what is and is not feasible in the school setting and insights into other school staff's knowledge of the impact of trauma on child development.

Ethical Considerations

Close attention was given to following the University of Denver's Institutional Review Board (IRB) guidelines. In order to protect participants' privacy, several steps were taken. First, a protocol of informed consent was followed in order to protect all participants. Secondly, I obtained permission from the IRB to work with human subjects prior to collecting any data. Participants were also notified orally and in writing about the goals of the study, confidentiality, data collection and analysis procedures, and data storage methods. Further, I asked participants to sign a consent form indicating their desire to participate in the study and acknowledging their right to withdraw at any time.

All participants were informed that they were allowed to review the written transcripts of their interview and judge the credibility of the results. All transcripts, notes, and audiotapes were stored as password protected documents or in a locked file cabinet in my home.

Writing

In addition to considering the biases, limitations, and ethical considerations previously discussed, I was mindful of describing the collective experiences of participants, as opposed to interpreting them when writing up the findings. My writing focused on the phenomenon that was being explored, i.e., being a non-relational foster parent navigating the public educational system. The goal in this writing, as Creswell (2013) suggests, was to provide a detailed description of "what" and "how" individuals experienced the phenomenon. This approach ended with a description of the essence of the experience that combines both "what" participants have experienced and "how" they have experienced it.

Member Checking

I provided accurate and authentic descriptions of each participant's experiences through two forms of member checking. First, after all interviews were transcribed, participants were emailed copies and asked to review them and report any inconsistencies or inaccuracies. Four of the six participants responded and noted that the transcripts were accurate with no changes needing to be made. Two participants did not respond. The second member check occurred after the majority of the writing had been completed. All participants were provided with a copy of their participant narrative and sections of the

study where their direct quotes were used. They were asked to review, reflect on, and revise to ensure their voice and the information they shared was interpreted and presented accurately. Three of the six participants responded and noted that all information pertaining to them was accurate and interpreted as intended. Three participants did not respond.

Data Dissemination

This study aims to create a broader understanding of the experience of non-relational foster parents navigating the educational system, the needs of non-relational foster children they perceive as being met and not met at school, and how that impacts the dyadic foster parent-foster child relationship in the home setting. While the primary purpose of this study was to fulfil the requirements for my dissertation another outcome will include disseminating the findings in a school-based mental health or child welfare journal, to school psychologists and other school-based mental health professionals in order to increase understanding regarding supporting non-relational foster families in school settings. The publication would be intended for use by school-based professionals and could identify areas for future research specific to supporting sub-populations of foster children in the school setting.

I offered to share the results of this study, once completed, with participants and the CWTS training manager. Five of the six participants and the CWTS training manager stated they wanted a final copy of this study. The final draft will be sent to the five participants and the CWTS training manager via email upon completion of my dissertation. Non-relational foster parents and the CWTS training manager may benefit

from this information by learning about the extent to which the needs of non-relational foster children non-relational foster parents are being met by the educational system and the implications for their relationship with the children in their care in the home setting. Additionally, this knowledge may decrease a sense of isolation for non-relational foster parents by helping them to understand what it is like for other non-relational foster parents navigating the school system.

Chapter IV: Results

This study explored non-relational foster parents' perceptions of the educational needs of the school-age children in their care and whether those needs were being met or not met, as well as how the needs being met or not met impacts the non-relational foster parent - foster child dyadic relationship. The lived experiences of these non-relational foster parents navigating the education system held meaningful commonalities that facilitated the identification of themes. Chapter four presents findings that evolved through the process of collecting and analyzing data from a total sample of six non-relational foster parents of school-age non-relational foster children in the state of Colorado. Pseudonyms were used throughout to protect participants confidentiality.

Summary of Participants

The results of this phenomenological study developed through data collected from 12 face-to-face or telephone interviews with six non-relational foster parents of school-age non-relational foster children in Colorado. The characteristics of the participants are summarized in Table 4. Demographic data were only collected around variables related specifically to the study. Other demographic data unrelated to the study were not collected. All six participants were female and resided in Colorado at the time of the interview. The highest level of education of the sample ranged between a Bachelor's degree and a Doctorate degree, with the majority of the sample having obtained a

Master's degree. The amount of time participants had held an active license to be a non-relational foster parent in the state of Colorado ranged between 1 month and 20 years. Participants had been the primary caregiver for between 1 and 29 school-age non-relational foster children at the time of the interviews.

Participant Narratives

Compared to the first interview, the second interview was more focused on the experience of the participant rather than that of the non-relational foster child. This allowed me to engage with participants about their experience of becoming a foster parent, their personal experiences navigating the educational system, and to reflect on the meaning of their experiences by addressing the intellectual and emotional connections between their work and the lives of the school-age children they care for. The following summaries of the participants' educational experiences and meaning associated with the role of non-relational foster parent are offered to support the reader in feeling the essence of these participants' stories.

Susan

Susan had experienced being the primary caregiver for one school-age non-relational foster child and had obtained her foster care license 4 months prior to our first interview. As a child, Susan easily navigated the education system and reported being motivated and always trying hard. She did not experience any issues or challenges in school personally and remembers her teachers reporting things such as "goes above and beyond, is really conscientious, is self-motivated, is easy to work with on her own, works independently." If a teacher gave her a task, she would do it because "that's what you are

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supposed to do." She grew up in a military family and her father would be away for four

to five months, then be home for two months. When her father was home, he would drink

excessive amounts of alcohol, which at one point resulted in an arrest and restraining

order between him and his immediate family. In college, Susan came to the realization

that she could have potentially been involved in the child welfare system as a child due to

the experiences with her father. She also began to learn more about the foster care

system and significant need for foster parents which touched her deeply, noting that

children do not get to choose the circumstances they are born into. Susan graduated with

her doctorate degree, met her partner, and got married. They both knew they wanted to

adopt a child at some point and decided they would like to pursue being foster parents of

a school-age child. When asked what feelings were generated for her from being a foster

parent, she asserted:

> Just joy. I would say not like the frivolous happiness joy, but like the biblical joy.
>
> You know, [what] it talks about in James, consider all joys when you encounter
>
> various trials knowing that the testing of your faith produces endurance. So, I
>
> mean joy not happiness. I get to be a part of this person's life that didn't even
>
> know me for 12 years and I didn't know her for 12 years and all [of] the sudden
>
> she's our daughter. That's just so amazing. Some of the other feelings that I feel—
>
> gratitude of course. I feel able to be in this position, to be this mentor parent for
>
> this child, that's awesome. Also, frustration because [my foster child] has gone her
>
> whole life not really thinking about herself . . . At the same time, she's also been
>
> in survival mode and just figuring out her life by herself without having someone

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ask her, "Hey, how are you feeling?" She doesn't know how to pinpoint how she

feels and that's been really frustrating because we're trying to help and she doesn't

know how to [accept it]. She's really either super happy or really attitude and just

shuts down. She doesn't really show sadness or anger, she just shuts down. So

that's really frustrating because we don't really know how to help the situation. So

those are the main three: joy, gratitude, and frustration.

Susan discussed the ebb and flow of emotions that come along with being a non-

relational foster parent. In discussing the emotions she experienced in this role, she

clarified that being a non-relational foster parent is part of her identity as "a parent

mentor" with the goal of helping the child in her care live a healthy and successful life.

Part of this calling for Susan was the realization that as a child, she could have been

involved in child welfare herself. As she mentioned, this role gives her life meaning and

being able to observe the positive impact she is able to have on another person's life is

tremendously impactful, but it is not without significant challenges.

Julie

Julie has also experienced being the primary caregiver for one school-age non-

relational foster child and had only been licensed as a foster parent for about a month at

the time of the initial interview. She reported her experience in school being "super

simple" as there were not choices and all children went to their neighborhood school. Her

early school years were spent in an urban school in a culturally diverse area. She then

moved to the suburbs to a predominately Caucasian school, which she described as

closed minded and phobic of "everybody that's not White middle class," which was

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challenging for Julie. She noted feeling like an outsider from third grade until she graduated because she did not understand the mindset of those around her. She had personal experience with child welfare in her teen years when her best friend told her she was being abused by her step-dad. Julie called the department of human services (DHS) and made a report, which ended up being a very negative experience for her due to the approach of DHS and the outcome of her report. She had another experience in her later teen years when she was working as a camp counselor and a child reported abuse. When she reported the abuse to child welfare it ended up being another extremely negative experience. Due to these experiences, Julie had no desire to be a foster parent until the child currently in her care enrolled at the school where she works. The child's parental rights had been terminated and he could no longer live with his aging grandparent. Julie discussed the idea of fostering the student with her biological family and together they decided it would be good for their family and for him, so they moved forward with the process. When Julie was asked about the feelings that are generated for her by being a foster parent, she said:

> Right now, we're in the beginning stages of transition. He wants permanency and he was looking for that in this super touchy-feely way. So, I said, "You know what, I have a bunch of books I bought on foster families in transition." And last night we read a book called *Families Change*. We're learning who each other is and I told him "you know when I gave birth to the other boys, even though they grew inside of me, you don't know them right away, you don't know what they like or you don't know how they like to be held. You go through a period where

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you kind of learn each other and that's normal" and I said, "so we're kind of

learning each other. It's okay if we're not like super super close yet because it

takes a minute." Just to let him know I'm not there yet and you don't have to be

there yet and that's okay. We're figuring it out.

Julie expressed the feeling of uncertainty that may arise for both the non-relational foster

parent and the non-relational foster child as the child is transitioning into the home. She

described the impact and emotions tied to the adult and school-aged child coming

together with different backgrounds attempting to figure out how to co-exist together and

build a relationship. She described it as a process comprised of stages and in the

beginning transition stage there are many emotions present while the child begins to

discover his or her place within the non-relational foster home.

Katherine

Katherine has experienced being the primary caregiver for eight school-age non-

relational foster children and had been licensed as a foster parent for about eight years at

the time of the initial interview. She reported her school experience to be easy, remarking

that she was typically isolated and independent in school. Katherine described growing

up in a small community and never feeling like she had to "navigate the school system at

all." She continued her education through graduate school and obtained a Master's

degree. It was a very distinct moment that Katherine decided to pursue being a foster

parent; she ran a foster care program and could not get a 13-year-old boy appropriately

placed—he was going to be placed in what she described as "an institution" in southern

Colorado. Katherine went home told her husband they had to become foster parents to

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help this kid. She stated that if it wasn't for that incident, she never would have become a

foster parent. Katherine mentioned that she feels as if she has an advantage navigating the

school system for the children due to having a degree in a mental health field and an

understanding of the nuances of individualized education plans (IEP's) and mental health.

When Katherine was asked about the feelings being a foster parent generates for her, she

stated:

> The whole gamut; compassion and love and frustration . . . I think everything is
>
> heightened . . . It's an amazing purpose, I feel responsible for the development of
>
> another person's story in life. So, it's pretty serious, I think.

Katherine's expression of what it means to her to be a foster parent is consistent with

Susan's beliefs in that both participants perceive being a non-relational foster parent as

part of their identity. Therefore, the emotions that come along with this role are

heightened because of the sense of purpose and responsibility of impacting the outcome

of another person's life.

Andrea

Andrea has experienced being the primary caregiver for two school-age non-

relational foster children and had been licensed as a foster parent for about 10 months at

the time of the initial interview. Andrea noted that school came easily to her throughout

all of her education, which included traditional public school and a 4-year college degree.

While she was growing up, her family valued education and as long as she had good

grades she could "get away with anything." Andrea became a foster parent because she

had worked as a court appointed special advocate (CASA) in the past. She also had a

close friend who worked for the Department of Social Services and reached out to ask if Andrea and her spouse would be interested in fostering due to the high need for foster parents. Once licensed, Andrea received a phone call regarding placement for two children and they arrived at her home the same day. When asked about the feelings being a foster parent generates for her, she said:

> I think that it's just being able, you know at the end of the day that you're
>
> providing a safe, loving, and educational environment for these kids and they
>
> likely would not have had that otherwise.

Similar to Susan and Katherine, Andrea depicts her role as a non-relational foster parent to be an impactful role on another person's life. She knows she has the opportunity to use her knowledge and resources to provide for children in need in the role of non-relational foster parent.

Diana

Diana has experienced being the primary caregiver for 29 school-age non-relational foster children and had been licensed as a foster parent for about 20 years at the time of the initial interview. Diana reported that the first six years of her education were difficult. She felt like the school had experimented with her; she started first grade at age 5, was socially immature, and did not do well. Diana remembered having challenges socially, academically, and cognitively. She discussed her memories of not being able to remember the number six when counting to ten and struggling to read at an early age. At about sixth grade she started doing well, graduated valedictorian of her class in high school, and then with honors from undergraduate and graduate school. Education in the

rural farming culture she grew up in was an anomaly, but within her family higher education was expected. Similar to other participants, becoming a foster parent was not something Diana had planned on for her future. She remarked that she had never wanted or intended to have children because she grew up in an abusive home. Her turning point was seeing a two-year-old boy who had been badly burned and the compassion that it stirred in her. Diana was working in juvenile corrections when she became involved in the foster care system; she and her spouse took in three boys who are now adults. Diana and her spouse had foster children first; then, about midway through, had biological children and continued to have foster kids. Most recently they had foster children without biological children in the home. Diana continues to work full time supporting post-adoptive families. When she was asked what feelings were generated for her in being a foster parent, she remarked:

> Well when you ask that question, the words that come to my lips and my heart are that it is a joy. Sometimes I think it's also a bridge . . . I mean whoever you are involved with, involvement in somebody's life is really sacred ground . . . I am not the same person.

Diana illustrates the role of the non-relational foster parent as life altering for both the adult and the child due to the bi-directional impact of having that person in your life. It is a process of learning about one another and in this process each person grows and changes. Diana describes the experience for her to be so grandiose that it is "sacred."

Michelle

Michelle has experienced being the primary caregiver for one school-age non-relational foster child and had been licensed as a foster parent for about 1 year at the time of the initial interview. She explained that her experience in elementary, middle school, and high school was "fine," but in high school she didn't know there were counselors or that mental health resources existed. She experienced challenges trying to get into college because while her family valued education, they themselves never went any further than high school. She did note that school came pretty easy to her and she didn't have many academic, behavioral, or mental health struggles in the education setting. She played sports and felt like that kept her out of trouble and motivated her to do well. In addition, she remembered having strong teachers who were supportive, encouraging, and motivating. Michelle described herself as a person who has always wanted to help people, but never really having the desire to be a parent. After getting married, Michelle's spouse wanted children and together they decided to become foster parents. When asked what feelings are generated for her in being a foster parent, she said:

> It's definitely been a roller coaster of emotions and every time I think we are
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> doing okay something else will come up and it triggers you to be frustrated or at
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> our wits end, so to speak. We go to therapy once a month just to talk things
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> through and it's the only time that we can really allocate to that but, it's been
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> crazy. I mean there's very stressful, sleepless nights sometimes wondering,
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> because you don't know. It's the unknown all the time.

Michelle described the ebb and flow of emotions that several other participants described that is often associated with the uncertainty of the child welfare system. Beyond the uncertainty that stems from bringing a child into the home and having little to no information on the child, there is also the uncertainty systematically within child welfare of not always knowing what is going to happen next in regards to placement, court dates, and parent visitation.

<div align="center">**Themes**</div>

The data revealed three emergent themes that embody non-relational foster parents' experience navigating the public education system for the school-age non-relational foster children in their care. The following is a discussion of the emergent themes and subthemes (Table 5) that reveal the patterns found among participants' expressions of their lived experience of being a non-relational foster parent navigating the education system, including direct quotes from interview transcriptions to highlight, in their own words, how they experience, perceive, and make meaning of the phenomenon. It is critical to note that the following themes are not presented in a hierarchical order nor are they ordered by importance. Results related to the three a priori research questions will be presented after discussion of the emergent themes.

Theme One: Lack of Understanding of the Impact of Trauma

All participants described or eluded to the idea of school staff, including mental health professionals, not understanding the impact of trauma and how to support the children in their care negatively influenced participants' experience and the non-relational foster children's experience navigating the education system. Participants

shared experiences regarding schools attempting to support non-relational foster children. These experiences revealed that most school staff were perceived by participants to be well intentioned, but behaved and made decisions in a way that revealed a clear lack of understanding of the impact of trauma on child development and consequently how to appropriately support non-relational foster children in an educational setting. Diana added value to this theme by describing her experience over time with a child recently in her care being moved to multiple schools due to school staff not knowing how to best support him:

> He lost a lot of school in his first 12 years, so he came pretty unprepared to learn and was fairly resistant and unengaged in the learning process because not only was the trauma previous, he is currently traumatized with [his biological] family, being with us, and the whole foster care situation. It has made it very difficult for him in the school arena. He is very bright and he has tested about 110 IQ, so he's capable. He is currently in his third school in the last three semesters . . . We keep having to downgrade in schools . . . It was just a formula for failure for him in school.

Diana makes an important point that is often overlooked by school staff: the process of being placed in foster care and mobility within foster care is traumatic. Moving a child to another school setting because the child is not getting his or her needs met is also traumatic and further detrimental to the child. Unfortunately, it was not uncommon for participants to have experienced a child in their care being asked to move to another

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school setting, rather than the staff being educated on how to support a child with a traumatic background.

Participants' expressed that school staff they have encountered are often well-intentioned individuals who want to support the children in their care, but participants did not feel it was common for school staff to understand the impact of trauma on child development and consequently not know how to support non-relational foster children in the school setting, proactively or reactively. Several of the participants educational and work history allowed them to be well versed in child development. Thus, multiple participants expressed feeling frustrated with school staff when decisions or comments were made that did not align with their understanding of the current research around the impact of trauma on child development. Julie expressed an example of the frustration that coincided with her trying to support a non-relational foster child in her care and her perception of the lack of understanding of the impact of trauma in the education system:

> He's been having more behavior since he's been with us and it was the first week he lived with us, yeah he acted out more at school. We had a team decision meeting and I said "Is anyone surprised that we've had an increase in behavior? My husband and I are parents 8 and 9. He's been around this block a time or two". He's going to act out and see if we're going to stick around. Why waste your time to become attached if we are going to flake and not be here for him? . . . So, I said "I'm not at all surprised that we're seeing an increase in behavior. I don't think that makes me a horrible mother. I don't think that means he's unhappy in my home. I think he's testing."

Julie had a similar experience to Diana, in which the school staff demonstrated a distinct

lack of understanding of mobility within the foster care system being traumatic for the

child and therefore expecting the child to be able to quickly integrate in a new school

setting. Similarly, Michelle gave an example of her frustration that stemmed from a lack

of understanding or consideration by a school staff member for her child's needs based

on his history of neglect:

> We would pick him up and she [classroom teacher] would be like, "Oh my God
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> he's over there in that other room because he was just running circles around me
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> and I just needed, I just needed a break." And I was [looking around], so I go to
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> the next room and our little guy was just sitting at a table all by himself while the
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> adult in the classroom was cleaning and I was like "what's up man what
>
> happened" and he was like "I just had a very sad day." And I was just like "tell
>
> me more" and he doesn't really get that. He will soon, but it just rubbed me the
>
> wrong way and I was like you're isolating my child, if you need a break, come on
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> you're the adults. It happened a couple of times in one week and I was like no we
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> can't do this. That's when I felt uncomfortable . . . His needs were not being met
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> for those couple of weeks for sure.

Michelle's frustration stemmed from the fact that she had provided the school with some

information of her child's history in an attempt for them to understand how to better

support him and meet his needs, but it felt to her and her spouse as if the information they

provided was not being considered or was not helpful in supporting the child because the

staff were not knowledgeable in how to support children that come from a neglectful

background. The school staff was unsure of how to support this child and unintentionally disciplined him a way that was negatively impacting him. Diana had similar experiences and voiced:

> It depends on who's working at the school and what is their background knowledge on trauma and on foster children and of mental health disorders and if they're not as familiar than they likely won't be very helpful, so it just depends.

Diana has been a non-relational foster parent of school-age children for 20 years and in her experience, the lack of understanding extends beyond understanding the impact of trauma on child development, but also lack of understanding of children in foster care and of mental health disorders. She believes that a school-age child getting his or her needs met in the school setting is dependent on the background and knowledge of the school staff working with that child.

This first theme frames the participants perceptions of school staff, including school psychologists, as having a lack of understanding of typical and atypical child development that stems from childhood trauma. Along with the feelings of frustration that aligned with this theme, three subthemes were uncovered (1a) school staff having unrealistic expectations for non-relational foster children, (1b) school staff implementing inappropriate supports, and (1c) non-relational foster parents having to advocate. Participants discussed these subthemes in a negative way: They perceived the subthemes as consequences that stem from school staff being uneducated in the impact of trauma because it often results in uncertainty of how to support a child that has a history of trauma. Each of these subthemes will be discussed in further detail.

Unrealistic expectations of non-relational foster children. While describing the challenges they have had navigating the education system for the children in their care, several participants described situations of school staff holding unrealistic expectations for children in their care that participants believed stem from a lack of understanding of the impact of trauma. A common misunderstanding is that when a child is placed in a stable home, he or she should be appreciative and be able to be successful because they are in a stable environment. Diana discussed her experience with this misconception:

> So many people look at our son and say he's so lucky to be with us and put the
>
> expectation on him that he consequently should succeed, because clearly we are
>
> capable, caring, loving, providing people compared to what he came from. People
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> have expectations that kids should just respond gratefully and appreciatively and
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> should put aside all those other things and just do their school work and just
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> perform. He just couldn't do that and I think there was a certain level of
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> frustration from the school. I think they did honestly attempt, teacher by teacher,
>
> to provide for his needs but it wasn't successful for him and he wasn't successful.

Diana makes the point that, in her experience, school staff not understanding that the impact of trauma is brain-altering and does not dissipate when the child placed in a stable environment, which results in school staff making assumptions about the child's abilities and placing unrealistic expectations on them. This was perceived as hindering to the child and frustrating for all stakeholders involved.

Unrealistic expectations may stem from a lack of understanding of the difference between a child's developmental age, or functional age, and chronological age, or years

since a person's birth. Diana discussed the idea that school staff she had interacted with tended to focus on the chronological age and the persona a school-age foster child may give off, without understanding the unseen neurodevelopmental impact of the trauma the child has experienced:

> I think that one component that a lot of teachers have not recognized is that our son is biracial, he's strong, he appears to not need anybody, and he's articulate. So, they think he's getting it cognitively because he's articulate and he doesn't.

I did not clarify how Diana perceived that her son's race contributed to teachers being insensitive to his needs. She did express having observed school staff to be looking through the lens of chronological age and persona of a non-relational foster child, rather than the lens of developmental age. When this occurs, school staff are then holding the child to the same expectations as the child's same-age peers which is unrealistic due to deficits that stem from the trauma he or she has experienced resulting in a gap between chronological and developmental age.

Developmental age includes the level of cognitive, social, emotional, and physical functional abilities, which impact many skills used in an academic setting. Many children in foster care have splintered academic skills due to mobility and altered brain development from the trauma they have experienced. One common result of altered brain development due to childhood trauma is deficits in executive functioning skills which impact the ability for a child to sustain attention, organize their thoughts, initiate work, and plan. When a child is not able to access the academic content, it is not uncommon for the child to display internalizing or externalizing behaviors. This was the case for a child

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in Julie's care and the school chose to support him by putting him on behavior point sheet. Julie explained how the academic expectations the school was trying to hold him to were unrealistic due to being chronologically appropriate, but not developmentally appropriate:

> On his behavior sheet that he had at school, when he first came to live with us my husband was talking to him, because it was either 'yes' that he was well-behaved or 'not today'; those were the two choices. And his 'not todays' were always, they would give him a grade level packet and expect him to work independently for half an hour and every single day it said "talking to neighbor." I would look at it and say, "If that's the worst you're getting, you're not giving him work at his instructional level, but giving him a packet at grade level. He can't read it and you're expecting him to read, answer comprehension questions, and write. If the worst behavior you're getting is he's talking to his neighbor, you're lucky."

Julie experienced the challenges that arise when school staff are not meeting the child where he or she is at developmentally. The child in her care was being asked to independently complete the same grade level work as his peers with no additional supports to help him in accessing the work, although developmentally he did not have the foundational skills to do so due to the impact of trauma on his developing brain.

When unrealistic behavioral or academic expectations were posed on school-age non-relational foster children in the school setting, it appeared to increase stress on the teacher, foster child, and foster parent. In each of the examples provided, the unrealistic

expectations were perceived to stem from a lack of understanding of the impact of trauma on a child's brain development.

Receiving inappropriate supports. A second consequence of school staff lacking understanding of the impact of trauma on child development that participants identified was the children in their care receiving inappropriate supports in the school setting. When school staff are considering placement in or updating a student's special education eligibility, the school special education team is required to evaluate the student. Participants recounted noticing that the non-relational foster children in their care often experience a large amount of testing, both for special and general education, in an attempt to support the student. If school staff are not well educated in the impact of trauma it can be challenging to use the evaluation data to support the child's mental health, academic, and behavioral needs in an appropriate way. Katherine noted in her interview that in addition to over testing, she felt that an understanding of the impact of trauma on a child's mental health and the associated interventions were lacking in the education system, even more than the understanding of the impact of trauma on academics. Further, she was completing her interview via phone and one of her children walked in and confirmed her opinion of over testing with a lack of follow-up or implementation of appropriate services, stating:

> What is really frustrating is that there's a lot of resources that go into testing. All these kids are going to be tested, but there's no follow-up with the support. It's like let's test them, they're just really big on testing. My son just walked in by the way, he's 13 years old. We adopted him when he was eight, but he's been on IEP's

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forever. He just said "uh-huh." All he does is test, test, test. Not even just

academics, but like psychological tests and speech tests and this test and that. Yet,

so what are you going to do about it?

Katherine expressed her frustration around school district resources going toward

evaluating students for special education, without increasing staff's knowledge around

how to appropriately support the students by using the data collected to identify

developmentally appropriate interventions or supports. As a non-relational foster parent,

her perception is that special education staff, including mental health professionals such

as school psychologists, are not well-equipped to support students that have a history of

trauma.

Participants identified negative emotions and spoke with frustration in their voice

as they described the challenging experiences they faced when children in their care were

not receiving appropriate services in the school setting and the negative impact it had on

the child. One negative impact identified was that with the amount of testing that takes

place the child is removed from class and may miss a large portion of content being

taught. This is perceived by participants to make it more challenging for the child to

make the needed progress to reach grade-level standards, especially when the testing does

not result in specific targeted interventions or supports being provided through a trauma-

informed lens. Additionally, Diana spoke to the challenge of getting schools to change

supports when a child is not making progress over an extended period of time, which may

also stem from not understanding the supports a child who has experienced trauma would

benefit from:

If your IEP is the same for 3 years in a row and there is no progress or this little

girl has one sight word after 2 years in your school, well those strategies are not

working and we need to find some other strategies. . .and the schools, by and

large, are pretty resistant.

Diana makes the point that when the school staff, including the special education staff,

does not have the knowledge of how to support a child in a different way, they often meet

the foster parent's advocacy efforts with resistance. This is not only detrimental in

supporting the child, but also creates a barrier between home and school.

It is important to note that Katherine also mentioned an additional point. She

perceived that implementation of inappropriate services was not only due to lack of

understanding of the impact of trauma on a child's developing brain, but may also have

stemmed from a lack of resources. Some children in foster care have significant needs

that require substantial supports that are not always readily available. Katherine voiced:

Oftentimes kids in foster care, the ones I've worked with, have a lot of needs and

the school is not prepared; they're not set up to give those needs. For example, an

IEP may ask for 2 hours a week of speech therapy or maybe one-on-one attention

with a paraprofessional during class, but schools don't have the staff or funding to

get the staff needed. So, there's often times a gross delay.

Katherine's point stresses the importance that there are many factors at play on all of the

ecological systems in a non-relational child's life. As discussed in chapter one, the

ecological systems theory describes human development as occurring within five

interrelated systems. Although Katherine had discussed the observation of school staff

not being knowledgeable of the impact of trauma on the developing brain and struggling to implement appropriate supports, she also identified systematic factors, such as lack of funding, that influence a child receiving the supports they need to access general education.

When school staff hold unrealistic expectations for non-relational foster children and in turn, provide them with inappropriate services to meet their needs, non-relational foster parents often end up having to advocate, or find someone to advocate, for the children in their care.

Non-relational foster parent as advocate. Four participants discussed multiple times how they have had to take on the role of "advocate" for a child in their care due to the school's lack of understanding of the impact of trauma on child development resulting in the child receiving inappropriate services or being held to unrealistic expectations. Katherine reflected on her interview noting that she repeatedly discussed having to be an advocate for non-relational foster children in her care. She made an intriguing comment regarding the variation in difficulty for non-relational foster parents having to advocate based on the foster parents' personality and background, as well as made a suggestion for foster parents that are not as comfortable advocating:

> I think our interview goes back to, what I said a lot was just having to advocate
> and it depends on the foster parent's personality because it's uncomfortable for a
> lot of people to be pushy . . . I have the benefit of being a licensed clinical social
> worker so I understand IEPs and I have a strong personality, but knowing other
> foster parents, they get bulldozed because they don't advocate for the kids needs

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and they don't feel comfortable. They just listen to the school and say, "okay,

okay, okay" . . . Parents need to involve the GALs [guardian ad litem] because

GALs are pushy and they get things done. If they're sitting at the table, there's a

lot more obedience [laughing].

Katherine noted that a large part of her role as a non-relational foster parent is to be an

advocate for the children in her care. She has a strong understanding of special education

and mental health, combined with a strong personality. Katherine recognized that not all

foster parents have the same background knowledge or personality as she does and may

not be as comfortable advocating. The overarching point is that children in foster care

need someone to advocate for them, especially when the child's needs are not being met

in the school setting. She encourages those that need support in advocating to reach out to

the guardian ad litem on the child's case and have them attend meetings with the foster

parent and support advocating for the school to meet the child's needs.

     The level of advocacy required, for some participants, was dependent on the

geographic location and consequently, school resources. Katherine has resided in both

rural and urban areas as a non-relational foster parent of school-age children and she

noted a difference in how she personally felt having to advocate in the different types of

communities:

Actually, the town I live in now, perhaps there's more understanding as a foster

parent because it's a rural community. I feel like the school makes more effort

than the Front Range [urban community], because of the small nature of the

community. There's also a mutual understanding that the resources are limited just

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because of demographics. Whereas in the Front Range, I felt more impatient and I had to advocate up the gazoo because I know there's resources there and I want the school to tap into it pronto…So no, I haven't felt frustrated here because I know that the school is making every effort possible.

Katherine acknowledged the difference in her feelings toward having to advocate in a rural versus an urban school setting. In the rural areas, she described a community-wide understanding that there were limited resources and people were doing the best they could with what they had. However, in the urban districts that have access to more resources, as a foster parent she felt more negatively about having to advocate because the resources were there, but were not being used to support the children in her care.

In Diana's experience she was well aware that having to advocate for a child's needs can create a barrier between the family and the school depending on how one approaches the other. She recognized that although the school may not always understand the impact of trauma on child development or know how to determine what services will appropriately support the child, the school is typically well-intentioned. She discussed the approach that has worked best for her to reduce conflict between home and school, while still being a strong advocate for the child:

I appreciate the school, I advocate. I look at us as a team, it's not us versus them. . .I think that makes a difference and they don't feel threatened by me that I will advocate for our son, but I look at it as everybody has his best interest at heart.

Diana makes a strong point regarding the impact of the foster parent's approach with the school staff when attempting to get their child the necessary support in school—

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depending upon the approach, the school staff could be receptive or defensive. She suggests approaching the school staff in a way that does not make them feel threatened. This includes reaching out to the school staff in a calm and non-judgmental way with the objective being to work in conjunction with the school to support the child, not against them.

Unlike the other subthemes concerning the lack of understanding of the impact of trauma, participants expressed a variety of emotional responses and reactions to being an advocate for the non-relational foster children in their care. They expressed feelings of understanding and appreciation, as well as needing to maintain a strong advocacy role and being 'pushy' as needed due to frustration with the lack of supports in place or previous interactions with school staff.

Summary of Theme 1: Lack of understanding of the impact of trauma. The first theme, lack of understanding of the impact of trauma, described the participants' perceptions of school staff lacking the necessary understanding of typical and atypical child development that stems from childhood trauma. Theme one established that participants perceive that, although school staff tend to be well intentioned, the negative consequences of not understanding the impact of trauma on child development is widespread. Frustration was common throughout the participants' quotes underlying this theme. Even with the frustration involved, participants appeared to hold value in advocating for having the needs met for the children in their care. Participants also described feelings of understanding and appreciation when working with the school as a part of a team.

Theme Two: Stigma

       Theme two, stigma, emerged as participants described their lived experience of

being a non-relational foster parent navigating the education system and how they

understand themselves, as well as the school-age foster children they care for, to be

perceived by other people. Every participant discussed feeling as if she or a non-

relational foster child in her care had been personally stigmatized due to their

involvement with child welfare. Participants discussed feeling that when "foster care" is

mentioned people tend to jump to conclusions about the child. Because of this,

participants expressed fear of disclosing involvement with child welfare due to

experiencing a spectrum of negative or judgmental reactions in the past. There was an

undertone of anxiety as Diana shared her considerations to disclose that a child in her

care is in foster care:

> Do you share and then stigmatize? Identify your child? Do you not share and hope
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> that you can navigate it? Nobody wants to identify, they can't identify, they don't
>
> identify. They don't want to identify their child. . .A lot of time, extended family
>
> doesn't really know what to do with a foster child; sometimes they are hostile,
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> sometimes they are accommodating, sometimes they are "oh poor child," not
>
> really understanding, but trying to be empathetic.

Diana's account highlights the extent of the impact of labeling in today's society. Labels

can unconsciously impact how one person views another person and ultimately how those

two people interact with one another. Diana's quote validates the magnitude of the

societal stigma around foster care. The reaction that Diana describes her extended family

having after learning a child is in foster care spreads well-beyond the family and into many other parts of society, including the school setting. For both the foster parent and the foster child, this stigma often looks and feels like being treated differently.

Susan expressed feeling as if she was treated differently than parents with biological children when interacting with teachers one-on-one. In her experience, teachers appear to feel uncomfortable when she discusses anything related to foster care. Outside of individual interactions with teachers, she articulated feeling like she has been treated similar to biological parents, which has been positive for her:

> I feel like the teachers may feel scared. They don't know what kind of questions to ask me because they might feel like they are going to offend us or something by asking or probing about the "foster thing." It's not taboo, but kind of. It's like a weird thing that's not an every-day common thing. The teachers don't really know what to ask or what to say. It's like they don't want to offend anyone because there are so many issues these days with offending people . . . When we have our parent-teacher conferences they'll tell us, "You're really cool for doing this" and "Wow! I could never do this, but you guys are so strong" and blah blah blah. You kind of get like that lip service from them. Then at the same time I feel like when it's the day-to-day, I feel like I'm treated like everybody else which is good.

Susan describes the difference in experience with school personnel in a more intimate setting, such as parent conferences, compared to more daily routine school interactions. For Susan, one-on-one interactions with school staff felt different after they understood the child was in foster care and the guardian was a non-relational foster parent. Susan

describes recognizing feeling the stigma around child welfare from teachers as they interacted with her about her child in an insincere way, or in her words, giving her "lip service."

This second theme frames the participants' experiences with other stakeholders and feeling as if they or the children they care for are stigmatized due to being involved with child welfare as a non-relational foster parent or school-age non-relational foster child. Participants also discussed moments where they or a child in their care felt "normalized" which helped them to combat the negativity associated with feeling stigmatized. Three subthemes were uncovered (2a) non-relational foster parent stigma, (2b) non-relational foster child stigma, and (2c) normalizing the educational experience for children in foster care. Each of these subthemes will be discussed in further detail.

Non-relational foster parent stigma. Each participant's expression of her experience navigating the education system for the school-age non-relational foster children in her care was littered with stories of being made to feel insignificant or judged by other stakeholders, including by school staff and child welfare staff. When sharing these experiences, participants conveyed frustration, disappointment, and anger. All participants associate value with being a non-relational foster parent and believe it to be a piece of their identity. Thus, participants were negatively impacted by others devaluing this role. Julie shared a negative encounter she had with a certification caseworker:

> One of the certification caseworkers cornered me and she said "I don't know why you even want to get certified, it's not like you're going to take any other kids and you're only going to take him!" I felt, "I'm not opposed if you have an emergency

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situation to helping." But she said, "Do you just want the money?" And I said,

"Yes, I do want the money! His reading tutoring alone is costing me $600 a

month. Plus, I've done soccer camps and swim lessons and I had to buy a bike and

I had to buy a bedroom set! This isn't cheap! It's not like I'm taking this money

and buying a new wardrobe for myself. It's going to him." I feel like as parents

we're not going to use this money in an irresponsible way and the government set

up the hoops. If we're jumping through them then kudos to us.

Julie was accused of having ill-intentions as a non-relational foster parent due to the

societal stigma that "foster parents are in it for the money." She was also judged for

wanting to limit the number of children in her care. Her beliefs and intentions do not

align with the stigma and she feels that she has worked hard to be able to provide the best

she can for the child in her care. Julie's quote establishes how stigma can interfere with

relationships and alter interactions.

Several participants voiced feeling like they were stepping into a parent-like role

for the foster children in their care and wanted to be treated as such. However, in their

experience they felt as if they were not always treated the same as other parents in the

school and child welfare settings. Michelle disclosed:

I understand that, we are given somebody's child to take care of. So, I get all of

the logistics to that, but I feel sometimes there's so many limits for us that we are

just a bed and a place to sleep, eat, and shower.

The value Michelle places on her role as a non-relational foster parent does not always

match what others in society think of her role. Participants all described a strong positive

association with being a non-relational foster parent. When they are faced with a negative association with their role, it is highly impactful as this role is a part of their identity.

Julie discussed an undesirable interaction she had with school staff in a special education meeting for a child in her care. During the meeting, questions were deferred to the guardian ad litem rather than her as the primary caregiver who spends more time with the child. Similar to other participants, she felt as though she was being treated differently than other parents would have been treated in the same situation due to a stigma that exists. Her story echoes feelings of anger, dismissiveness, and frustration other participants also voiced:

> The biggest issue I have is with the school not really being supportive of parental decisions, totally negating because I didn't have custody of our first meeting, but it was coming. The guardian ad litem that did have custody was there and was supportive of the decisions that I had been making. They were totally dismissive of us and saying, "[GAL] this is your call, you don't need to talk to them. You're responsible not them." Then telling me things like, "You know you need to take off your speech pathology hat and just be a mother." I thought, you can't do that you're not two separate people. The reason I became a speech pathologist was because it teaches child development and language development. I thought it would be a good supplemental skill to have as a mother. That was why I chose that career; separate seems silly to me. So that's been a frustration.

Julie was being treated as insignificant by school staff because of her role as a non-relational foster parent. The school staff approached her with disapproval and

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discrimination by attempting to exclude her from decision making about the child in her care. They also insulted her as a mother and a professional. Experiencing reactions such as this were not uncommon among participants when others were aware of their role.

The non-relational foster parents interviewed told stories of feeling misunderstood and stigmatized by others due to their role. Due to the value that many participants place on this role, it can feel like a personal attack when they are not considered as the primary caregiver for the child in their care or treated the same as caregivers of children not in foster care. This sense of being stigmatized by others seems to stem from personal experiences that have left them feeling criticized, undervalued, frustrated, judged, and invisible. Diana attributes the stigma, in part, to a lack of understanding of trauma and the child welfare system. She summed up what other participants eluded to: "It's a whole different world. I work with my child way differently and the thing that you get is a lot of criticism and judgement." Further, participants tended to agree that a stigma exists not only for non-relational foster parents, but also for non-relational foster children.

Non-relational foster child stigma. In the participants' experiences, non-relational foster children tend to be stigmatized based on the label of "foster child" and the stigma surrounding that label. For older children in foster care, the stigma seems to be emphasized. This stigma exists across settings and even within child welfare. Susan describes her perception of this stigma:

> In terms of being foster parents, a lot of people just want babies. They just want younger kids because you know school-age kids are "scary" and they have a lot of baggage and they have quote-unquote "issues." This one specific person really

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irks me the way they said something like, "Oh they have lots of problems." It's

really heartbreaking that people have this thought or this image of a school-age

foster kid.

Susan expressed anger and disappointment about the way that other people sometimes

view children in foster care, especially older children. She described people she has

encountered who see foster children through the lens of the societal stigma that believes

this population of children is scary, difficult, or troubled. She continued on to discuss

how many of the people holding this stigma against foster children are distanced from the

child welfare world.

Participants shared the perception that there is a stigma that non-relational foster

children have challenging behaviors, that they will be difficult to work with, and that they

will negatively impact the people around them. Due to this stigma, participants felt that

the older non-relational foster children were not always supported appropriately and

possibly overlooked as needing support. One participant discussed how with the school

staff struggling to find a balance between trying to support a child in her care and not

wanting to make the child feel different, the child may not receive services "because of

this kind of taboo, she's in foster care issue." Michelle described similar stigma she

experienced between school staff and a child in her care:

Based on my experience working in the school, I feel like sometimes I worry

about assumptions being made about our kid and so I'm very protective when it

comes to that. We've already had a moment of addressing our concerns of what is

being said about him within daycare and at school. I told my wife, "We have to

stop sharing stuff with the staff here because I feel like they are like targeting

him" . . . They have a perception of, "he's a foster kid."

At first, Michelle thought sharing the history of the child in her care would help staff

better understand him and therefore better support him. However, because of the

perception of "foster child" that some of the staff had, Michelle felt as if the information

she provided ended up being detrimental to the child because they were viewing him

through the societal stigma. Michelle expressed regret for sharing information with the

school staff based on their subsequent treatment of the child in her care.

Similar to the lack of understanding of the impact of trauma on the developing

brain, participants described the stigma associated with being a child in the foster care

system resulting in children not receiving the services they need. Katherine has had

experience with children transitioning from residential treatment centers that typically

have more academic, behavioral, and emotional needs than typically developing children.

She feels that the stigma of a "foster child" is often exacerbated for this specific

subpopulation and the stigma is met with low tolerance rather than understanding:

I found that even though all these children had IEPs, there was low tolerance for

children with behavioral issues. I understand both sides of the story. You have to

keep everyone safe. So, I feel like children with emotional or mental health needs

. . . are often rejected. From the public school's point of view, they're trying to

protect the larger population. So, kids were often asked to go to smaller schools

where there is a higher ratio. Of course, those schools have huge waiting lists so

the kids will be out of school for like a month or so at a time.

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Katherine described the consequences that stem from a child being viewed through the societal stigma and met with low frustration tolerance, rather than compassion and understanding. Similar to Diana's experience described in theme one, Katherine has also encountered school staff not knowing how to support school-age non-relational foster children, often resulting in moving the child to another setting. As discussed in theme one, participants believed that many school staff do not have a good grasp of the impact of negative early life experiences on brain development and how that impacts a child over time. This lack of understanding further feeds into the societal stigma because when children are not supported with biologically sensitive and developmentally appropriate interventions, but instead with punitive discipline and anger, the behavioral and social emotional challenges are exacerbated.

Normalizing the educational experience for children in foster care. Although all participants have experienced others viewing the children in their care through the lens of a "troubled foster child," there were also contradictory experiences of people involved in the foster child's life actively recognizing and trying to combat the stigma that exists for non-relational foster parents and children by attempting to normalize the educational experience. Normalizing the experience for children includes treating the non-relational foster parent as any other guardian. Susan expressed positive sentiment when describing a time she felt included and treated equally in the school setting:

> I feel like I'm treated like everybody else which is good. They did a human body unit and I am an optometrist. They actually invited us to come to the school and do cow eye dissection, so that was cool and I got to meet all her classmates. So,

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that was good that the teacher asked me to be a part of that and come to the school. I was introduced as [non-relational foster child's] mom and everyone went, "oh." So, that's kind of cool because she gets kind of annoyed when anyone asks her, "How come you joined in the middle of the year?" [or] "Why are your parents White and you're Hispanic?" People will ask her and she gets annoyed, so if everyone knows that her mom's White then each person doesn't have to ask her.

Susan had experienced teachers treating her differently in the past because she was a foster parent, but this instance stood out to her because she felt as if she had been treated like any other parent. Not only was Susan positively impacted, but the non-relational foster child in her care was as well. All participants interviewed expressed being a foster parent as part of their identity. They feel as if they are the "parent" in the situation and yearn to be treated this way. Diana voiced similar sentiment to being treated by the school as the parental figure for the school-age foster children currently in her care:

I think they look at me as his mom, which I think is helpful. It's tricky being a foster mom, I don't know what "foster" is, what is that? [pause] I don't really know, I don't think I'll ever know, but they have treated me as a family member for our child.

Diana feels strongly about being treated as any other parent would be treated. She discusses the challenge of separating the idea of "foster parent" and "parent" because to her it feels one in the same. When being viewed through the societal stigma of foster parent, others easily see the separation in roles. Foster parents never know how they are going to be treated after they disclose their role and the inconsistency in responses can

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make disclosure anxiety provoking. It also makes moments where they are treated as any other parent hold meaning, because that is how they view themselves.

In addition to attempting to normalize the experience for the non-relational foster parent, participants articulated a want for the child to have the opportunity to experience childhood in a way that does not make them stand out or feel different. There is a longing for normalcy for the child which may be fueled by the fear of stigmatization. Andrea noted:

> We just want her treated like everybody else because she doesn't have many
>
> additional needs and she's super smart. It would be nice for her, just being able to
>
> be a kid. She already knows she is in foster care.

Andrea makes the point that foster children already know they are different from the other children in their classes and they don't need people to remind them or treat them differently. She feels that the best thing others can do is treat foster children as they would treat any other child. Andrea noted that these children have already lost part of their childhood and believes that normalizing the school experience can allow them to be kids.

Diana recognized that although there is a yearning for children in foster care to be treated similar to other children, due to the traumatic backgrounds of many children in foster care when well-intentioned people attempt to normalize the child's experience by acting in a way they think is positive or encouraging to the child, the child may have an adverse reaction that stems from his or her background. For example, a child raised in an environment where no adult encouraged or believed in him or her before, the child might

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feel uncomfortable when this occurs, resulting in a maladaptive response. When children are removed from their homes, they are exposed to many new adults, including some who are telling the children that they have potential, trying to normalize the experience. Contrary to popular belief, it can be difficult for children to believe in themselves if they have not had someone believe in them before. It is not uncommon for children who have been impacted by trauma to not have had the opportunity to associate this typically positive experience of being encouraged with positive emotions and the encouragement may not align with the child's core beliefs. Diana expressed, "People do want to speak life into these kids and it becomes overwhelming for them so it's kind of a hard balance to have people believe because [the non-relational foster child] has told me that that's hard for him." One of the children in Diana's care has brought it to her attention that having other people believe in him and telling him he has potential has been very challenging. Most of his life no one had told him that, but people did focus on his negative behaviors. This resulted in a conflict for the child because he didn't see or believe in the potential that these new people in his life were expressing to him. These adults were likely well-intentioned and wanted to help the child see what they saw in him, but the positivity needed to be presented in smaller doses so it did not overwhelm and conflict him.

Conclusively, participants noted that there is not a clear answer; they do want the children in their care to be treated similarly to other same-age children, yet they recognize that non-relational foster children may need additional supports.

Summary of Theme 2: Stigma. The second theme, stigma, described the participants perceptions of their personal experiences and observations of the experiences

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of the children in their care feeling stigmatized. Discussion of theme two outlined participants desire for themselves and the children in their care to feel as "normal" as possible. It established once again that participants perceive that although some people tend to be well intentioned, the negative consequences of feeling stigmatized is widespread. There were mixed feelings including frustration, anger, resentment, emotional pain, and helplessness related to feeling stigmatized, as well as joy and understanding related to school staff attempting to normalize the school experience for non-relational foster parents and children. As discussed previously, participants place significant value on their role, which contributes to the strong and passionate feelings toward them or the children in their care feeling stigmatized and not valued or seen as individuals. Additionally, some participants believed that one reason the stigma that exists toward non-relational foster parents and children is the lack of understanding of the impact of trauma on child development. This theme demonstrates the challenge of wanting to give non-relational foster children a typical childhood and educational experience, while meeting the children's additional needs in a way that does not make them feel different or treated differently from their peers.

Theme Three: Communication and Relationships

The third theme, communication and relationships, establishes the impact of bi-directional communication, or lack thereof, between stakeholders in a non-relational foster child's life (i.e. non-relational foster parent, public school personnel, child welfare personnel, and non-relational foster child), and the perceived association between communication and relationship. This combined theme of communication and

relationships emerged as participants described their relationships with child welfare staff, school staff, and the school-age non-relational foster children in their care to be partially dependent on the perceived level of communication between stakeholders. Participants also perceived the level of communication between stakeholders to be dependent on the perception of the relationship as positive or negative. Participants described building positive relationships through consistent and genuine bi-directional communication, as well as relationships being negatively impacted by lack of or judgmental communication. If the participants felt they did not have a positive relationship or were not supported by another stakeholder, they were less likely to communicate information. Susan shared her reaction to not feeling heard or supported by school staff after she was vulnerable and communicated information about the child with them:

> They [school personnel] didn't really seem to care when I told them a few things, which is why I didn't keep on going because it didn't seem like it was going to affect how they treated her [non-relational foster child] or how they handled her case. So, I felt like I didn't really need to tell them because it looked like when I was telling some people it was going in one ear and out the other. I didn't really feel like telling them any other personal things because they didn't seem to care.

Susan shared information about the history of the child in her care with school staff, hoping the information would be used to support the child. A barrier was created between Susan and the school because she reached out in an attempt to build a relationship by opening lines of communication and did not feel it was reciprocated. The school staff's

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reaction to the information Susan shared was not what she expected, which resulted in her feeling as if she should no longer share the child's personal information with school staff.

On the contrary, if participants felt like they were supported and had a good relationship they were more likely to communicate respectfully and consistently. Michelle described her experience of having consistent bi-directional communication with school personnel:

I think because we communicate so much with them [school personnel] and we are so involved that they are more supportive, and you know they have said, "Thank you so much for always communicating stuff with us."

Not only did Michelle feel heard by school personnel, she also felt that her sharing the information about her child's history positively impacted the level of support her family received from the school. The differences between Michelle's and Susan's stories were the way school staff reacted to the information shared and whether or not the participant perceived that school staff used the information to better support the child.

Participants also described the impact and perceived importance of the way stakeholders communicate in regard to the tone of voice, the vocabulary used, and the meaning derived. Katherine stressed the importance of *how* she communicates with the children in her care over *what* she is communicating:

I think it depends on how you do it. If the foster parents like "You're going to therapy because you're a brat." or "You have to go to therapy because your anger issues are really affecting our life and you need to be fixed," that's not going to be

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very good. But if it's like, "I love you so much let's go to therapy. Did you want

me to come with you? This is your special time to talk and this is your time. So

just focus on you and your needs." That's two different things. So, I think it's

more about how you connect vs. what you connect.

Katherine makes the point that many other participants described when talking about

positive or negative relationships. Participants often noted the way other stakeholders

talked to them or their child, rather than what the content of the communication was.

Katherine provided examples that demonstrated that the way someone approaches

another person can hinder or help a relationship.

Further, participants expressed the desire to instill values in the children in their

care and perceived this as a critical component of their identity as a non-relational foster

parent. Participants expressed that communicating and instilling values contributes to

building a positive relationship with non-relational foster children. One common

relationship building value that participants noted was communicating and treating

people with respect. Michelle voiced her perception:

I mean we value respect and treating people with dignity. I don't care how old you

are, everyone deserves that. So, we are very strong on that and try to teach him

[non-relational foster child] those things. So, yeah just love. Just love kids. They

drive us crazy but, we love them right?

Michelle discussed that being a non-relational foster parent can be challenging at times,

but despite that she feels part of her role is to instill values in the child in her care.

Participants, including Michelle, felt that teaching the children in their care how to be better humans was a significant part of their identity as a non-relational foster parent.

This third theme frames the participants interactions, or lack thereof, with child welfare personnel, school staff, and the non-relational children in their care, as well as the perceived connection between relationships and communication. Participants stressed the importance of building relationships to positively impact the children in their care and the personal desire for non-relational foster parents to interact with the children in their care in a way that feels supportive and instills values. Four subthemes were uncovered: (3a) lack of communication between stakeholders (non-relational foster parent and child welfare and non-relational foster parent and school), (3b) consistent communication between stakeholders (non-relational foster parent and child welfare, non-relational foster parent and school, and non-relational foster parent and non-relational foster child), (3c) importance of relationships, and (3d) non-relational foster parent wanting to instill values in non-relational foster child.

Lack of communication between stakeholders. Through the lens of the ecological systems theory, there are a plethora of direct and indirect stakeholders in a non-relational foster child's life. Several participants discussed the lack of communication between themselves and two main stakeholders, school personnel and child welfare personnel, as they perceived it to have a negative impact on the participants relationship with the stakeholder, as well as an indirect negative impact on the non-relational foster children in their care. Participants expressed a yearning for open and consistent communication with school personnel and child welfare personnel regarding

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the non-relational foster children in their care and when this communication did not occur or the participant perceived it to be a negative interaction, participants expressed resentment and frustration that negatively impacted these relationships. Susan expressed frustration around the lack of communication between her and the teachers of the child in her care eluding to the idea that because there was no communication regarding missing assignments, Susan was not able to support the child in her care the way she had expected to support her academically:

> She's [non-relational foster child] a people pleaser. She just kind of fell through the cracks in terms of like when she didn't hand things in. They [teachers] didn't really go out of their way to tell me about it.

Susan had expectations that teachers would have open lines of communication with her to allow her to support the child in her care academically. She had voiced to school staff that she was not sure how to navigate the education system and would need support because her only other experience was her own personal education experience. Similar to other participants, Susan was vulnerable and shared information with school staff, expecting that in return they would share information with her as well. Consequently, the perception of one-sided communication negatively impacted Susan's relationship with school personnel because she perceived the lack of communication to negatively impact the child in her care in an indirect way.

One often overlooked factor is that some non-relational foster parents have not had the experience of being a parent of a school-aged child in the past and therefore they may not know who to contact at the school to obtain information about a child or know

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what questions to ask school personnel. Several participants discussed wanting to have open communication with school personnel, but feeling like a burden because they have many questions and unknowns about how to support a non-relational foster child in the school setting. When one side of a relationship feels like a burden to the other, a barrier is created in building a positive relationship. Susan shared her experience:

> I feel like because I haven't had a child this whole time, I don't know what questions to ask. I don't even know what is out there; what to say, what to ask, and I don't know. I feel like I'm bothering [them] every time I talk. I feel like I'm bothering them and so, I don't know at what point am I being that annoying parent. At some point the teachers just kind of tune them out.

In Susan's quote, she expressed the anxiety and fear that arose for her when she was unsure of how to navigate the education system for the child in her care, which was a commonly voiced challenge by the participants. Participants wanted to be involved, but did not want to be asking so many questions that school personnel would feel burdened. There is a fine line of balanced communication, because once one side feels burdened a barrier begins to develop.

It was a common occurrence that teachers would attempt to open lines of communication and build a relationship with participants through the use of online platforms, but it was not always well received by parents. When participants expected to be communicated with in a timely manner and with accurate information, but their expectations were not met, it hindered the relationship between the participants and school personnel. Katherine noted that although many times teachers say they will

communicate through an online platform with parents, that this is not always a functional way to do so. She expressed, "Access to parent portals are usually pretty delayed. Teachers like to think that they are pretty up-to-date on their, on their educational plan, but yeah, I always use the parent portal, but it's a little outdated." Katherine identified two major challenges that can arise with communication only through an online platform. She noted that in her experience teachers are not consistent in updating these platforms and secondly, that non-relational foster parents are not always provided immediate access to the online platform. Participants expressed feelings of frustration and annoyance, because the lack of communication indirectly impacts the non-relational foster child.

Participants had a similar expectation or desire to have accurate information shared with them from child welfare personnel in a timely manner in order for them to support the child in their care in being successful. When the communication is limited or delayed, participants again expressed feelings of frustration when their expectations around communicating with another stakeholder were not met. One participant expressed having to consistently advocate for and persistently seek out information on children placed with her in order to begin meeting the child's needs. Katherine shared her history with trying to obtain information from case workers:

> It's difficult getting information from case workers. Sometimes it's even
> impossible. The thing is that if a foster child is being placed in your home,
> caseworkers can help the family be proactive with the school by giving the IEP
> directly to the school and in saying this child is going to be moved in a week or
> two and a lot of times the child is placed and you're still waiting three weeks for

an IEP. You can't enroll a student without immunization records or IEP. So, case

workers are their own delay . . . you have to really advocate for this stuff. I've

only dealt with 8 case workers. I ran a foster care program though, so I think as a

professional I have dealt with hundreds and hundreds of caseworkers. It's always

a different story. It's like you have to beg and plead and sometimes show up at

their office. It's just incredible.

Katherine makes the point that not only is it frustrating that the non-relational foster

parent is not able to support the children in their care as they expected due to lack of

information, but the non-relational foster parent also has to make time to seek out the

information because it is not being shared. Lack of information sharing negatively

impacts both the non-relational foster child and foster parent.

Experiences like Katherine's were not uncommon among participants. When

communication is lacking between non-relational foster parents and child welfare

personnel, it increases the burden on the non-relational foster parent because they have to

take time and energy to seek out necessary information on the children placed in their

care. When the burden is placed on the non-relational foster parent it puts a strain on their

relationship with child welfare personnel. For Andrea, the lack of communication was not

only frustrating, but also resulted in increased anxiety as decisions were made that were

not communicated to her in a timely matter to be able to prepare herself and the children

in her care for the next transition:

We have one [case worker] that is not that great, in my opinion. It's been

challenging because she doesn't return calls. We are kind of in a unique situation

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where we filed a motion with the court to intervene in the case because all the

sudden, because 10 months we've had the kids, all the sudden last week they came

and said, "Hey, just so you know we're going to move the kids."

Andrea's example highlights the impact of delayed information sharing. Foster children

transition to new foster homes often, but if this information could have been shared

earlier all stakeholders involved would have had more time to prepare themselves for the

transition, reducing the negative impact on both the foster family and the foster child.

Without timely communication, there is often a larger negative impact to all who are

impacted by what is being communicated.

Undoubtably, there are many factors that may impede a stakeholder's ability to

have consistent and open communication with non-relational foster parents, including

teachers and caseworkers being overworked, which makes it challenging to build

relationships with all of the guardians and children they work with. Yet, this does not

negate the fact that not having a relationship may negatively impact non-relational foster

children and their foster families. Lack of communication between stakeholders was

reportedly a common experience among participants, but there were also several

contradictory reports of consistent communication between stakeholders that contributed

to positive and supportive relationships.

Consistent communication between stakeholders. Contrary to the findings that

lack of consistent communication negatively impacted relationships between

stakeholders, consistent bi-directional communication was perceived by participants to

have a positive impact on relationships between the following stakeholders: non-

relational foster parent and child welfare personnel, non-relational foster parent and school personnel, and non-relational foster parent and non-relational foster child.

Child welfare personnel provided most participants with a limited amount of information on a child being placed in their care with varied latency between providing the information and the child being placed in the participants' care. The sharing of information ranged from within hours to days of a child being placed. The amount of information provided on a child and when it was shared was inconsistent across participants. Diana discussed that in her 20 years of experience she has found that the frequency and depth of communication coming from child welfare personnel depends on the county that she is working with, "Well, we come out of [Colorado] County so we're very fortunate. [Colorado] County does a really good job of disseminating information." Michelle also felt that, contradictory to others experience having to seek out information on a child being placed with them, child welfare personnel communicated as much information as they had on the non-relational foster child coming into her care:

> They [child welfare personnel] shared with us his [non-relational foster child] experience as far as social interactions and then any kind of education that he has had. So, they share those things and [are] just kind of vague like, "He's experiencing trauma," because it was neglect, severe neglect. Not any abuse or anything that we were aware of as far as the bio parents, but it was neglect.

Michelle perceived that child welfare personnel shared all of the information they had on the child before placing the child in her care. This perception of having honest and open

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communication met participants expectation and resulted in them feeling more inclined to share information with that stakeholder.

Some participants correlated the sharing of information with the competency of a child welfare employee, as well as with having a positive relationship with that person. Andrea expressed, "So from our perspective we had a really good case worker. She left in May. I mean she was exceptional, any question we had, just right on it." When the communication happened in a timely manner, participants viewed their relationship with that stakeholder in a positive light and also attributed it to the person's competency in his or her position. Diana and Andrea had similar experiences with school communication systems and school personnel. These participants expressed feeling supported in the role of non-relational foster parent due to feeling heard or understood and the consistent home-school communication, which has helped them to better support the children in their care. Diana articulated:

> I have felt supported by the administration at the first and third schools. They
> have been open to input and communication . . . we have been given, I could tell
> you from my phone right now if he [non-relational foster child] went to school
> today and did he do his class work.

Diana appreciated the online communication from school staff as it was updated in a timely manner. The difference is that in addition to the online portal, school staff opened lines of communication in other avenues including face-to face communication, email, and via phone. Diana felt that school staff responded to her in a respectful way and were

open to considering her opinion. This again highlights the importance of the manner in which school staff listen to and respond to parents.

Andrea had a similar experience with school personnel taking time to come to her house and connect with the family to get a better understanding of the family. The school staff used the information they obtained to provide the family with individualized supports. This bi-directional information sharing between stakeholders not only formed the foundation for a positive relationship between caregiver and school personnel, but also lessened the stress on the non-relational foster family trying to navigate the education system for the first time:

> I think the school here was really good about, I mean they came to our home and had parent-teacher conferences at our home. They [school personnel] really helped us with like, we didn't know about the bus right, so they reached out and said, "Just so you know, here's what the other kids do. They take the bus from daycare" or you know those things about starting school because we have an 18-month-old and a 5-year-old so, we haven't been through this before. So, I think they have provided us some guidance there.

School staff doing a home visit, not only took the burden off Andrea and her family to determine how to navigate the education system, but also created a strong relational foundation which further opened lines of communication between the home and school settings. Although home visits are not common practice in new student orientation policies, it can have a positive impact on the amount of information shared and the perception of the relationship.

Susan also experienced and placed value on the support and communication between stakeholders to help her child be successful across settings. She had access to a parent portal as an open line of communication between her and the school which allowed her to support the child in her care academically by having open, honest, non-judgmental dialogue around academic tasks. Consistent bi-directional communication between Susan and school staff allowed Susan to have consistent and non-judgmental communication around academic tasks with the child in her care. This led to the child beginning to self-advocate because trust was built between the non-relational foster parent and child. As the lines of communication remained open and non-judgmental, the non-relational foster child began opening up and sharing more vulnerable information, she also began to build trust with her foster parents and seeing them as a resource. The communication system between home and school is one factor that led to the non-relational foster child strengthening the relationship with her caregiver. Susan shared:

> Every day we would ask her, "What's this project? what's that project?" saying
> something along the lines of "How are you coming along with studying for your
> test?" or "Hey, let me help you with your homework" and we would help her. I
> think that helps her integrate her two lives, not two lives, but her school life and
> her home life. We really integrated it and have her realize that we're on her team
> in everything, the wholistic child . . . I think that she's okay with leaning on other
> people for help now and before it was just all about herself and it was all about
> survival and just her own. It all fell on her . . . I think she's actually starting to

believe that now and so she's asking for help and she knows that we are a

resource, I guess.

Susan's story supports the idea that consistent communication between her and school

staff had a positive impact on fostering and growing a relationship between her and a

child in her care. School staff communicated information around academics to Susan and

she was able to use that information to begin to build a trusting relationship between her

and the child in her care. Her story demonstrates the ripple effect open communication

between multiple stakeholders can have and the positive impact of consistent bi-

directional communication between non-relational foster parents and school personnel, as

well as between non-relational foster parents and non-relational foster children.

In addition to consistency, the way that the communication is perceived by each

person is also important. The way that something is communicated can impact the

relationship in a positive or negative way regardless of how consistent the

communication is, including the vocabulary used, tone of voice, and meaning derived.

When the child in Julie's care was struggling to understand the difference between her

relationship with him and her relationship with her biological children, she

communicated with the non-relational foster child at his developmental level by reading a

book with him:

I have a bunch of books I bought on foster families in transition and so last night

we read a book called *Families Change,* so you know we're learning who each

other is. I said, "You know when I gave birth to the other boys, even though they

grew inside of me, you don't know them right away, you don't know what they

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like or you don't know how they like to be held. You go through where you kind

of learn each other and that's normal." And I said, "So, we're kind of learning

each other. It's okay if we're not like super, super, close yet because it takes a

minute." Just to let him know I'm not there yet and you don't have to be there yet

and that's okay. We're figuring it out.

Julie communicated to the child in her care in a purposeful and developmentally

appropriate way. She used vocabulary that was supportive and explained the non-

traditional relationship to him in a way that normalized it in a non-judgmental way. By

approaching the non-relational foster child in a way that meets them where they are and

without criticism, the child is better able to understand the other person's perspective.

Communicating to children in this way is beneficial for both non-relational foster parents

and school staff, as it also contributes to building a positive relationship.

Consistent and genuine communication builds trust, which is part of the

foundation of a healthy relationship. Further, communication between stakeholders can

directly and indirectly impact a non-relational foster child. This stresses the importance

of building relationships between stakeholders to best support the child. All participants

shared a common belief that having trusting and positive relationships was an important

component on their journeys of navigating the education system for the children in their

care.

Importance of relationships for non-relational foster children. Children in

foster care often have a history of broken relationships and inconsistent attachment to

caregivers. Every participant understood and expressed the importance of the children in

their care having positive and healthy relationships with others due to understanding that strong and positive relationships can build resiliency in a child and counteract the negative impact of some of the trauma the child has experienced. Others that do not have an understanding of the impact of trauma on the brain do not always understand the importance of relationships. It is not uncommon for a child who have been impacted by trauma to have delayed skills or maladaptive behaviors, which can make working with children in the child welfare system challenging at times. Susan shared an example of a child in her care with delayed social-emotional skills and how she hopes that meeting the child at her developmental level now will help her increase her skills and have healthy relational foundation for the future:

> She's [non-relational foster child] in that phase right now where it's like "Dad, look what I can do!" or "Mom, look what I can do!" for even the dumbest little thing like "Watch me do my somersault." She's going through that phase where she never really had that when she was like six, seven, eight years old and now she's going through that phase. It's been cool to see her go through some of those developmental phases. We would read through the foster thing at age seven she seemed to do this or this is what her thing was. She's actually kind of going backwards and redoing some of those steps. In a way that's kind of sad that she is reversing or reverting, but on the other hand it's positive because she's going to be able to go through the steps in a positive way so now, she can create that foundation for when she graduates and lives away; she already has that.

Susan described the importance of allowing the child in her care to progress through developmental relational stages, even though she is far behind what is expected for her chronological age. This understanding of how a child's previous trauma has impacted him or her developmentally and the adult meeting the child where he or she is will help the child to progress. Most participants expressed a common understanding of this due to their educational or professional backgrounds, but this is not common practice with most stakeholders.

In addition to the challenges of meeting a child where they are developmentally, societal stigmas around the foster care system can impede a relationship before it even has a chance to begin. Participants have experienced other stakeholders not understanding the importance of building a relationship with children in their care due to not being able to look past the facade of the child or the label of "foster child." Diana shared one of her recent experiences:

> I think it's evidence-based that the more moves a child has the less attachment, the harder attachment is and attachment effects cognitive learning and relationships and behavior. Expectations change from house to house and school to school and when those relationships are consistently, regularly broken a child doesn't really have that grounding or anchor . . . and I think the one thing with our son that I think is typical with a lot of these kids is that he's actually [a] very relationally based kid and teachers don't see that. They see a hard veneer and he responds best to the teachers who could see underneath and build a relationship with him. I think that's true for almost probably every child, but especially a teen

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that comes from the trauma that some have experienced and he puts off one

persona and then underneath [he has another persona], and its way underneath I'll

give you that [laughing].

Diana makes the point that often school staff are viewing the child through a

chronological lens and expect the child to have the same social and relational skills as

their same-age peers. Further, when a child is delayed due to a history of broken

relationships and rejection, they may cope by pushing others away when in fact they do

want and need the relationship. She stresses the importance of stakeholders being able to

look past the façade and get to truly know the child, so they can begin to build a

relationship. If not, the relationship may be negative for both parties.

Julie had a similar perception of the importance of relationships in the life of the

non-relational foster children in her care, especially in the school setting. She discussed

her experience of enrolling the most recent child in her care in school and her thought

process of choosing a teacher that would be a good fit. For Julie, one of the most

important aspects of navigating the education system was finding a relational teacher due

to the trauma background the non-relational foster child had:

Just because of his [non-relational foster child] past he needs a very relational

teacher that will hold him accountable to academic standards, but will also

interact with him and engage with him and play with him and develop a

relationship. Because of the three teachers that are at his grade level, there's one

teacher that, I mean she's not a bad person but she would be a horrible fit for him.

She's just way too rigid. Then there's one teacher who a lot of people think is a

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bad teacher, but I think he would be perfect for [non-relational foster child]

because he's the only teacher who goes out to the playground for the last 10

minutes of recess and plays with kids.

Julie stresses the importance of teachers building a positive relationship with a non-relational foster child to help the child grow socially and academically. She notes that the most important part of pairing the child with a teacher is having an understanding of how the teacher relates to the child, in addition to how they structure the class or teach academic content. No matter how structured a class is or how well the content is taught, if the teacher is not able to build a relationship with the child, none of that matters.

Not only did participants voice a strong opinion on the importance of a non-relational foster child having relationships with others, but several participants discussed the meaning and long-term impact they believed their relationship to have on a non-relational foster child's life. Diana described her perception of a bi-directional relational experience and the impact it has on both people, "I mean whoever you are involved with, involvement in somebody's life is really sacred ground . . . I think it's something that shapes them and yourself. I am not the same person." Diana expressed the significance of having a relationship with a non-relational foster child; it is not only her impacting the children in her care positively, but that the children also positively impact her. Katherine also expressed a strong philosophy regarding the importance of relationships and how she perceives it to impact a foster child's future:

If I believe relationships count for everything, then if I as a parent do my best to

try and create a relationship based on trust and security then there's less mobility.

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Whereas, if I'm a parent who looks at it, who isn't invested, then there's a

likelihood that there would be a 30-day notice. If a kid can sense that there's not

an investment then they're going to act out.

Katherine shared her belief that relationships between caregiver and non-relational foster

child have the ability to alter the outcome of a non-relational foster child. As discussed

previously, communication and relationships with other stakeholders, including school

and child welfare personnel, can also impact the caregiver-child relationship. Participants

have the desire to positively impact the outcome of the children they cared for and

believe a major component is building a positive relationship with them.

As Katherine mentioned, children who have a history of abuse are often

hypersensitive to the reactions of people around them and may behave according to what

they perceive. A negative perception can put the child in a state of fear or terror that can

result in maladaptive behaviors. On the other hand, when the child has a positive

perception and can begin to build trust with another person the child is more willing to

accept help and begin to make growth. Susan experienced this recently with a child in her

care:

When I'm helping her with homework, she said she had never had homework

help ever in her life so, that was the first time and I feel like she was just kind of

behind because she has never had someone make her do homework . . . I think she

notices that we are on her team and that we care about her whole self.

Susan provided an example of the child in her care forming a positive perception of her

relationship with Susan and her spouse and how that impacted the outcome of the child.

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She shared her experience of the child in her care building a positive relationship with her and her spouse because they took the time to get to know the child and support her with her needs. Over time, this has helped the child begin to trust Susan and her spouse and this relationship helped the child in her care to be more successful.

Although it is important for non-relational foster children to have positive relationships, including between the foster parent and foster child, it does not come without fears or challenges. Children are placed in foster care because they have experienced adverse childhood experiences (ACEs). With ACE, comes a gamut of potential triggers, behaviors, emotional responses, and delays; which the non-relational foster parent will have to attempt to learn about and support. Relationships impact both parties and not-knowing or having limited information on what the other person is bringing to the table can be anxiety provoking for some. Julie described her initial fears around not being able to create a relationship with the child in her care based on the information she had regarding his ACE history:

> My relationship with him, I was worried because he had had a good relationship with his past fathers but he never had a good mother relationship. I mean his biological mother was abusive, the next mom was going to adopt him and he had one behavior she didn't like and she didn't ask for help dealing with the behavior, but kicked him out of her home. So, he's had good teacher relationships and he kind of saw me as a teacher. So, I was hesitant for how it was going to transition from teacher to mom, but it's been super smooth. It's been really good and it's been really positive.

Although Julie was able to develop a positive relationship with the child in her care, the initial fear and anxiety she described around not being able to form a positive relationship with the child in her care was common among participants. The emotions were heightened as all participants expressed the importance of building a positive relationship with the child, hoping to positively alter the outcome for that child. Participants viewed relationship building as part of their role and identity as a non-relational foster parent and therefore placed significant value on being able to build a relationship with the children in their care.

Many of the participants expressed this yearning to make a difference in the lives of the non-relational foster children they care for, while also understanding that they come from difficult backgrounds and will have to build a relationship with the child to do so. In addition to building a relationship, one common factor participants encompassed with making a difference in the lives of the children they care for was to instill values in the children, regardless of length of time the child was in their care.

Instilling values in non-relational foster children. Participants all seemed to place significance on feeling as if they have instilled values in the children in their care, as well as viewing it as a part of their role as a non-relational foster parent. Participants touched on different values they felt were important to teach, but the overarching meaning for the participants was universal. These non-relational foster parents voiced aspirations of helping the children in their care find and reach their potential through instilling values in them. The non-relational foster children were perceived to be impressionable beings and the non-relational foster parents seemed to view making a

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positive impression on the lives of the children in their care as part of their identity.

Katherine said, "I feel responsible for the development of another person's story in life.

So, it's pretty serious, I think . . . I think it's important to me to meet a child where they

are but then help them strive for their potential." Participants did not typically know

much about the history of the children in their care, which means there was a steep

learning curve for getting to know each other and for the participant to figure out what

values or beliefs the child holds. The process of instilling values included identifying the

child's current beliefs and using both organic teaching moments and planned

conversations to begin to make an impression on the child. Julie shared one of her

experiences of an in-the-moment coaching or challenging of beliefs a child may hold:

> I said, "At some point I hope you feel safe enough to tell me. Because when
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> adults ask kids to keep secrets like that, it's not because she cares about you. It's
>
> not safe." It's hard to know, what do you say? I told him multiple times, because
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> he said a lot of things like "This is secret" and "That is secret," and I said, "The
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> only secrets that we ever keep, is if it's somebody's birthday and we bought a
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> present then we should be quiet until they open it so they can be surprised. But
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> that's it." He's only 7 so he's still young enough that we can like really make an
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> impact.

Julie understood the child's current belief about keeping secrets, recognized this was a

maladaptive belief for the child, and worked on challenging his current belief by teaching

him when it would be appropriate to keep a secret. It is critical to note that she mentioned

having similar conversations multiple times with this child. The beliefs a child holds are

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often deeply engrained, meaning it will require repetition of and exposure to an opposing concept for a child to begin to grasp it or start to believe that it is true. It takes patience for non-relational foster parents to instill values in a child in their care, as it may take a considerable amount of time for a child to behave in a way that demonstrates a change in beliefs. Susan described trying to bridge the gap between the current beliefs of a child in her care and the values that Susan and her spouse are trying to instill in the child:

> I think we're trying to instill things like setting goals and reaching your goals and thinking ahead and delaying gratification. All sorts of different things like taking responsibility. Even if it's not technically your job of the project, it affects your grade and you still have to keep on it. I think a lot of it, because she's new and she hasn't had these friends since they were in elementary school, she doesn't want to like put her foot down and make her teammate or her classmate do their work because she wants to still be friends with them. We just don't ever think that she had that drive or that support behind her. So, that's one of the main things of me wanting to instill all those good habits and stuff, because she wants to be a vet, but I don't think she really understands how much work it's going to be.

Similar to Julie, Susan identified the current beliefs and values of the child in her care and took on the responsibility of shifting some of the child's beliefs and values. Susan takes on the role of instilling values in the child in her care in an attempt to help the child be able to reach her long-term goals and be a productive citizen.

The emotions participants expressed in relation to seeing a child in their care behave in a way that makes the non-relational foster parent feel as if they have instilled

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values in the child were insurmountable. As stated in the participant narratives, when asked what feelings were generated for Susan from being a foster parent, she described it as, "Just joy. I would say not like the frivolous happiness joy, but like the biblical joy . . . I feel like able to be in this position to be this mentor parent for this child, that's awesome." Susan, along with other participants, found it challenging to put into words just how meaningful being in the role of non-relational foster parent and helping to alter the outcomes of a child's life truly is.

Participants hoped that they could instill values in the children in their care, but they didn't always know when or if a child was taking in the teachable moments or discussions they had with them. If the child expressed himself or herself in a way that aligned with a value the non-relational foster parent was trying to instill, it was emotionally overwhelming. Michelle gave an example of her emotions being so intense that she cried when hearing the child in her care start to apply some of the values she had taught him to real life situations:

It's always funny when he's like, "Okay, stop and breathe Mama, stop and breathe." Don't use my line. [laughing] "It's not a big deal," that's his new one, "It's not a big deal mama." I had a crying moment yesterday when he was like, "It's going to be okay, it's not a big deal you can always get another one" like [pause] I cried. At least we know that we planted a couple of seeds and we have been able to see them grow just a little.

Michelle described being overwhelmed with emotion on several occasions when she overheard the child in her care expressing himself in a way that aligned with the values

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she had been trying to instill in him. She gave the example of the child telling her spouse to use coping strategies and being able to express that making a mistake is okay. Michelle's story represents what all participants expressed as wanting to be the outcome for children in their care, the desire for the children to begin to alter their responses to situations in a healthier and more adaptive way because of the values the participant instilled in the child.

Although all participants feel it is their role to instill values in the children they care for, it can be a delicate balance. A child's life experiences prior to being in foster care may have led him or her to hold negative beliefs toward himself or herself or the world around him or her. It may feel uncomfortable for some children to hear others tell them they will be great or can do great things because it contradicts their past experiences. As mentioned in theme two, Diana voiced, "People do want to speak life into these kids and it becomes overwhelming for them so it's kind of a hard balance to have people believe, because he [non-relational foster child] has told me that that's hard for him." When considering this prospective, taking the time to build a relationship with a non-relational foster child and communicating in a way that makes them feel safe is another vital component for beginning to instill values in a non-relational foster child.

Summary of Theme 3: Communication and Relationships. The third theme, communication and relationships, described the participants perceptions of the impact of bi-directional communication, or lack thereof, between stakeholders in a non-relational foster child's life (i.e. non-relational foster parent, public school personnel, child welfare personnel, and non-relational foster child), and the perceived association between

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communication and relationships. All participants expressed a yearning for open and consistent communication with school and child welfare personnel regarding the non-relational foster children in their care, but not all participants had that experience. This theme established that it is not only the frequency of the communication that impacts the relationship, but also the way something is communicated in regards to tone of voice, vocabulary used, and meaning derived. Within the communication and relationship data cyclical patterns were identified: consistent and genuine communication builds trust; as the level of trust in a relationship continues to grow, so does the depth and vulnerability of the communication, which continues to strengthen a relationship and maintains the consistency of the communication. In contrast, lack of or judgmental communication breaches trust, which negatively impacts the relationship or perception of the other person, which continues to lead to limited or judgmental communication, further hindering the relationship. All participants stressed the importance of the children in their care building healthy, trusting, positive, relationships. These non-relational foster parents placed significant value on developing a positive relationship with the children they care for and helping them build positive relationships in the community as well. In addition to the perceived importance of building positive relationships, participants viewed communicating and instilling values in the children in their care as another piece of their identity in the role of non-relational foster parent due to their understanding of the impact of trauma. Similar to theme two, the level of understanding of the impact of trauma on child development was one factor that was perceived to impact both communication and relationships across stakeholders.

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Connection to Research Questions

Whereas non-relational foster children are one of the central beneficiaries of public education, non-relational foster parents are charged with supporting the child to navigate the education system. this research project investigated the phenomenon of non-relational foster parents navigating the Colorado public school systems, as well as to fill a void in the scholarly literature. To achieve this, three research questions were designed as a procedural map for data collection and to search for meaning through the lived experiences of non-relational foster parents in a structured way. Although the emergent themes touched on aspects of the a priori research questions, the following recounts the patterns found among participants' experiences of being a non-relational foster parent navigating the education system organized by the three research questions.

Research Question 1

The first research question posed was: What is the experience of non-relational foster parents navigating the education system? Responses to this question were mixed in nature both across and between participants. All participants shared positive and negative experiences of navigating the education system for the children in their care.

Challenges non-relational foster parents encounter navigating the education system. There can be challenging experiences for any parental figure trying to navigate the public education system and most are doing so in an attempt to support the child or children in their care in being successful. Non-relational foster parents are no different in this way, but they do have several unique challenges they have to face that most

traditional families do not. Specific challenges (Table 6) that participants described were: (A1) new student enrollment and orientation process, (A2) non-relational foster parents balancing advocating and positive home-school relationships, (A3) learning how to navigate the education system as a non-relational foster parent, (A4) delays in enrollment, and (A5) non-relational foster parent not being included in decision making.

New student enrollment and orientation process. School staff typically interact with a variety of types of families, but most commonly they interact with two-parent or single-parent families. Unfortunately, school staff and educational systems are not always well equipped to support or gather information from non-traditional families such as same-sex parents, relatives acting as guardians, parents of children who have been adopted, or foster families. Often the paperwork that needs to be completed and the enrollment process is set up to support traditional families. The paper work often asks about all of the child's history including dates, documents, and various records. This can be challenging for non-relational foster families, as they do not always have knowledge or access to the information they are being asked to provide. Andrea discussed her experience with school personnel while trying to enroll the child in her care in school:

> You get kids right? And you don't know anything about [them], you don't know a
> ton about their history and I mean I think the school does this every day. So, I
> think they tend to forget you've never done this. So, I think in general, they forget
> that you just got kids yesterday and now they have to come to school.

Andrea makes the point that new student enrollment processes are often geared toward traditional families and the school staff are so fluid in collecting enrollment information

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from traditional families that they do not realize that the enrollment process can be challenging for non-relational foster parents. Participants noted that although school staff are often well-intentioned, they are not always keen to or aware of the challenges that non-relational families may face. In their experience, the paperwork is typically generic and therefore not geared toward gathering information that would specifically support non-relational foster children. There is no additional paperwork that asks questions specific to foster families that may provide the school more information to better support the family, such as the legal rights of other stakeholders, how to refer to the non-relational foster parent (ex. by name, as "parent" etc.), what information can be shared with specific stakeholders, or how long the child has been living in the household. School personnel not having this information can be detrimental to the child, as school enrollment systems are not set up to be trauma-informed or to support school staff in interacting with the child and sharing information about the child. One example of this that highlights lack of trauma-informed practices in the enrollment process is that by not asking questions specific to this population, such as how to refer to the non-relational foster parent when speaking to the child, staff tend to automatically refer to all direct caregivers as "parents" or "mom/dad" which could be triggering for the child. This puts the child in a position to have to explain his or her situation to school staff, which can be further traumatizing and also avoidable if the enrollment process were differentiated for specific populations or asked additional, optional, questions presented to all families. Asking additional optional questions in the enrollment process specific to family

dynamics and information sharing would support many subpopulations of families beyond non-relational foster families.

Since children in foster care often transition mid-year, the non-relational foster parents and children are left to inform school staff of this critical information on their own. Many times, the questions were never asked and the children were thrown into an entirely new setting, which can be a traumatizing experience as the child is expected to adapt to a new environment, new expectations, and new people. Expecting that a non-relational foster child will adapt to a new school setting similar to a typical peer is an unrealistic expectation that stems from a lack of understanding of the impact of trauma, as does having a generic enrollment process geared toward traditional families. Katherine discussed how challenging it has been for children in her care to transition to a new school at the same time they are transitioning into her home. In her interview she noted that she has tried to advocate for more supportive enrollment and orientation processes. She shared:

> It would be really great to have assigned peer support. I've suggested that to many schools, just have a buddy program. Then nothing ever happens. It seems like such a simple solution to so many problems. I feel like the administrators are very focused on academics especially with all the pressure on them for academics and standardized tests and benchmarks. I feel the more pressure from the state and federal governments to perform, the more and more removed they are getting from the emotional needs of all of these kids, regardless of foster care.

One of her main points was that small systematic changes in the way school districts support new students can be beneficial for all students, not just those in foster care. Unfortunately, in her experience schools are not typically willing to make changes because administration tends to be more focused on academics and standardized testing rather than social-emotional supports of students.

Non-relational foster parents balancing advocating and maintaining positive home-school relationships. Due to the trauma non-relational foster children have experienced, they can have more needs than a typically developing child. This can also cause more challenges for not only the non-relational foster parent navigating the education system, but also for the child in his or her care, and school personnel if they do not have an understanding of the impact of trauma on child development. As discussed previously, relationships and the way the child is communicated to are key components in helping children who have been impacted by trauma to become resilient. Unfortunately, participants expressed that sometimes school personnel see the child for his or her behavior and not the underlying issue, which may stem from unconscious bias related to the stigma of being involved in child welfare. Katherine stated that in her experience "the administrators are often not very compassionate with these children" and when she has a child in her care in special education, she and other participants found it challenging to get some of the accommodations in place to support the academic, behavioral, or social-emotional challenges that stem from the child's trauma history, especially "getting the one-on-one that they need if it's in their IEP." Participants described the challenge of balancing advocating to get appropriate supports in place for the children in their care,

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but also maintaining a positive relationship with school personnel. As Katherine noted, sometimes administrators or other school stakeholders did not have compassion for children with high behavioral or social-emotional needs, and for participants this made advocating and trying to maintain a positive relationship with them very difficult due to the strong emotions evoked. Similar challenges were discussed in theme one: lack of understanding of trauma-informed care. Although some schools and districts in Colorado are beginning to work toward becoming trauma-informed, this is not typically the case and without this knowledge it can be challenging for schools to select appropriate supports for a child who have been impacted by trauma, regardless of how well-intentioned they are. This often left the participant having to advocate to get the proper supports in place, or to get supports already outlined in an IEP. Diana shared about her experience in the role of an advocate for the children in her care and how she tries to approach the situation in a way that will get the children's needs met without putting a barrier between home and school:

> Whatever the need is, and typically the number one thing that comes up are IEP's and getting the services that are mandated by the law for these kids in schools . . . to say to a school, we need to engage you, we are team for this kid, we are a team.
> I understand you're in a difficult position, but the law mandates that you x, y, z.

Diana described trying to approach the school personnel in a way that validates the challenges they encounter with the child and that it is a team approach to supporting the child, but also acknowledging that the school personnel must figure out a way to get the appropriate supports in place, especially when the supports are outlined in an IEP. As

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mentioned in theme one, having to advocate takes up time and resources for a non-relational foster parent, but it also takes an emotional toll. As discussed in theme three, participants want to have a positive relationship with open communication with the school personnel, but they also want the needs to be met for the children in their care. This can put the non-relational foster parent in a challenging position to try to balance advocating and maintaining a positive relationship between home and school.

Learning how to navigate the education system as a new non-relational foster parent. Half of the participants interviewed had only cared for one school-aged non-relational foster child at the time of the interview, so the only experience they had navigating the education system in the past was their own personal school experiences. Thus, multiple participants found it challenging to know what questions to ask and described feeling unsure of how to best support the school-aged children in their care. Since the majority of these children were not starting school in kindergarten, which is typically when the parents or guardians are provided with extra support to learn how to navigate the education system, participants felt as if they did not have enough communication or guidance on how to navigate the education system. In theme two participants discussed feeling as if they were treated differently, or stigmatized, when interacting with school staff as child welfare is often a taboo subject. This hindered some participants' communication with school staff to obtain more support navigating the education system. This stigma, or perception of stigma, created a barrier between home and school, making it challenging for some participants to understand their role in

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navigating the education system for the children in their care. Susan shared her experience:

> This is our first child. She is 12 and I have never been a parent before so, I never really had from kindergarten when all the parents are super helicopter moms who want to know every little thing about everything. By the time they get to be 12 and in 7th grade I feel like the parents already kind of have a groove and they kind of know how the system works and I have just never dealt with it before from this side of it. I have only been an actual student . . . It's really hard to know, when she has a test should I be studying here at home? Should I be doing a lot of work with her? Should I make-up extra problems, like math problems? So, I don't know what she needs. At least in the beginning I didn't know what she needed. So, how am I supposed to expect her to know what she needs and her to advocate for herself, when I don't know how to advocate for her?

Susan describes feelings of anxiety and uneasiness in not knowing how to navigate the education system for the child in her care and having many questions about how to do so. Since she is a non-relational foster parent of a child in middle school, she feels as if she would be stigmatized in asking school staff questions because she feels it is expected of parents to already know these things. This resulted in lack of communication between participants and school staff in fear of being stigmatized or judged. Susan also made the point that if she is feeling as if she is not able to communicate with school staff to understand how to navigate the education system due to concerns of being stigmatized, that the child in her care may be experiencing the same challenges.

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Delays in enrollment. Another common challenge among participants was a significant delay in enrollment due to various factors. The delay for enrollment was more common for children on individual education plans (IEP's) due to the school policies in place requiring all paperwork to be provided to school personnel and to ensure the school can provide the services and accommodations listed in the IEP. This delay often stemmed from a lack of communication between the previous school or child welfare staff and the new school. When the child is not able to start school, it can exacerbate negative emotions and feel stigmatizing for a child who is already experiencing transition in many areas of his or her life. This can also start to cause challenges in the home setting that will be further discussed in relation to the third research question. Katherine shared her experience:

> Expediting enrollment for youth was often challenging, especially for children with disabilities, physical disabilities. Sometimes kids weren't enrolled in school for 3 weeks for one reason or the other. In my opinion that's not excusable. A delay in services and a delay in enrollment which just exacerbates the child feeling left out and ostracized.

Katherine discussed how the lack of communication between other stakeholders indirectly impacts non-relational foster children as they await to be enrolled in school. As quoted in theme three, Katherine also stated that the lack of communication often stems from caseworkers not providing information to school staff prior to the child transitioning to a new home. She said, "It's like you have to beg and plead and sometimes show up at their office" to get the paperwork needed to enroll the child in school. When the

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enrollment in school is delayed due to lack of communication, the non-relational foster child feels further stigmatized.

 Non-relational foster parent not being included in decision making. A non-relational foster child typically has many stakeholders involved in educational decision making that may include the non-relational foster parent, guardian ad litem, caseworker, court appointed special advocate, attorney, biological parents, and special education team. Although the child is living with the non-relational foster parent, they were not always included in educational decision making or discussions of the child's educational performance. This lack of communication not only hinders the relationship between the non-relational foster parent and other stakeholders, but also feels stigmatizing. Participants expressed anger and frustration when they were left out of meetings. They feel responsible for the children in their care and participants described supporting the children in their care as part of their identity in the role of non-relational foster parent. Julie described an experience she had that demonstrates the number of people that can be involved in a child's educational experience and her anger with the lack of communication:

> I came out and there was a text from the attorney that said, "Are you coming to the meeting?" and I texted back and I said, "Well if you mean court, I'm coming to court but I don't know about another meeting." So, then I went to my email and there was an email from the caseworker and it said "Please call me." So, I called her. She said "Oh [the attorney], who's the attorney, and I have been on the phone with [district personnel] from district for the last 15 minutes." And I thought

"What?" because I specifically emailed and asked when that school meeting was

going to happen and got no response.

Several participants described experiences similar to Julie where stakeholders did not

communicate to the non-relational foster parent about meetings or discussions being held

about the non-relational foster child. To participants, the lack of communication felt

personal and due to the stigma around non-relational foster parents not being "real

parents" and therefore not important enough to be included in the decision making. Since

all participants felt it was their responsibility in the role of non-relational foster parent to

ensure the children in their care were being appropriately supported, being left out of

decision making or other meetings was a significant challenge.

Participants identified challenges related to navigating the education system for

the school-aged non-relational foster children in their care that led to feelings of

uncertainty, anger, anxiety, frustration, and isolation that stemmed from school personnel

and systems not engaging in a trauma-informed way and lack of communication that felt

stigmatizing to both the non-relational foster parent and non-relational foster child.

Although these challenges were from the prospective of the non-relational foster parent,

the children were also directly or indirectly impacted. The challenges identified align

with all five layers of the ecological systems theory, as well as the three themes of this

study.

Supports non-relational foster parents encounter navigating the education

system. Although participants described many challenges they experienced navigating

the education system, they also shared many positive experiences where they felt

supported by other stakeholders and in turn were able to better support the children in their care. Once again, these supportive experiences were mixed among participants and contradict some of the challenges expressed. Supports (Table 6) participants identified were: (B1) trauma-informed school structures such as consistent routines and expectations, (B2) normalizing the experience for the non-relational foster parent and child, and (B3) consistent and timely communication.

Trauma-informed school structures, such as consistent routines and expectations. Participants discussed several school structures being helpful for the children in their care to navigate the education system, including having consistent routines in place, clear and consistent expectations, and one participant had experience with a hexter, or six week rotation of classes, rather than semester. Andrea felt as if one of the most supportive school-wide systems was having universal structures noting, "having all the structures in place and knowing what to expect at school has really helped her [non-relational foster child]." Andrea stressed this point because the lives on non-relational foster children are often unpredictable. When children know exactly what is expected of them and the expectations are appropriate, as well as knowing exactly how their day will go schedule-wise in the school setting, it is supportive to helping them adapt to the new environment.

In addition to having clear and understood expectations, Diana discussed a trauma-informed school model that felt supportive to both her and the child in her care. She was the only participant to have had experience navigating a public school in Colorado that claimed to be "trauma-informed," or supporting students by attempting to

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understanding academic achievement and behavior through a developmentally appropriate lens that accounts for past trauma and altered brain development. She explained that the school functions on a unique schedule that is supposed to support children who have been impacted by trauma, "They [the school] do hexters. They do six weeks because if you're going to succeed it will help you succeed quicker and if you're going to fail then you can reset quicker." She discussed that the school was set up to allow children to experience success more quickly, or if failing to be able to reset quicker, in an attempt to engage students and keep them in school. Diana discussed that the schedule may be supportive, but she continues to believe relationships are more powerful and although she was told staff were trained in the power of relationships too, she observed or was informed of several interactions that were not positive or therapeutic for her child. Having supportive structures in place will only be supportive if the stakeholders involved are also building genuine relationships with the children.

Normalizing the experience for non-relational foster parent and non-relational foster child. Half of the participants discussed the supportive structures they were aware of at the systematic level in education, but all participants identified how a specific stakeholder supported them. The stakeholders identified were caseworkers, school counselors, other foster parents, teachers, special education team members, participant's spouse, guardian ad litem, and community mental health providers. However, there was no mention of school psychologists. When another stakeholder supported the participant, the participant was more likely to perceive themselves to have open lines of communication with that stakeholder, to have a positive relationship with that

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stakeholder, and to perceive the stakeholder to be competent in his or her position. Participants explained how specific stakeholders supported them by normalizing their experience or the experience of the children in their care.

Susan expressed the role the school counselor played in supporting both her and the child in her care navigating the education system through normalizing both of their experiences. The counselor took the time to communicate, answer questions, and provide the child with necessary supplies. Susan shared:

> The guidance counselor was actually the most helpful. She got me set up with the parent portal and explained how to navigate the school website and everything. It probably took about two hours, or a good hour or so, when I was in on the very first day. She explained how to get the free lunch and how to sign in online and how to do all of those different things. So, the first day was really good, I felt like it was very helpful and they were really supportive . . . they gave us a list of like things to get and the guidance counselor gave her a calculator so that was really nice.

This quote is important because it signifies how one stakeholder took the time to normalize the non-relational foster parent's experience by educating her on all of the things she needed to do to get the child in her care ready for school and how she could access school information. This stakeholder also normalized the experience for the child by providing a calculator so the child would be prepared for her first day at a new school. As mentioned previously, one of the challenges Susan faced was feeling overwhelmed and concerned of being stigmatized due to not knowing what questions to ask, how to

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best support the child in her care in the education setting, and how to access educational information, as this was the first time she was navigating the education system for someone other than herself. This stakeholder opened lines of communication with Susan and took the time to provide her with information to allow her to better support the child in her care. Susan expressed that the supports she received "helped to build that connection between home and school." As discussed in more detail in theme three, the open and genuine communication helped to build a relationship between stakeholders, which participants viewed in a positive and supportive light.

It was not only school or child welfare personnel that participants found to be supportive in navigating the education system and normalizing the experience. Michelle mentioned in her description of having the child in her care evaluated for special education that her spouse was very supportive and helped her to normalize the experiences she had navigating the education system. Further, when Andrea was asked about what supports had been helpful, she responded, "Honestly other foster parents . . . I just found that relationship really helpful because we could relate and kind of bounce off ideas and talk through challenges." Participants mentioned meaningful relationships where they felt as if they could communicate openly and honestly about navigating the education system, as well as their personal life, helped them normalize what they were experiencing. It is important for school staff to understand that in addition to supporting non-relational foster families in the school setting, connecting non-relational foster parents with stakeholders outside of this setting is also impactful in normalizing the experience.

Consistent and timely communication. When participants perceived there to be open and timely communication between stakeholders, they reported feeling supported. This included communication between stakeholders within the school district, communication between child welfare personnel and the school staff, and communication between child welfare or the school staff and the non-relational foster parent. In addition to the communication described in theme three, subtheme two—consistent communication between stakeholders—participants also mentioned more specifically that consistent and timely communication between special education and general education staff, and having child welfare staff communicate to school staff to ensure the child was enrolled in a timely manner, were highly supportive.

Michelle described her experience of having the child in her care evaluated through Child Find prior to enrolling him in school. She expressed feeling supported by the special education team and related that support to the team members being competent in their positions. Furthermore, she felt supported by the general education staff as they communicated consistently with the special education staff to ensure they would be able to provide the necessary supports for the non-relational foster child. Michelle expressed:

> Child Find, so they did the assessment just because he [non-relational foster child] hadn't been in any type of learning environment [before] and due to his experience we had some concerns. So, that was completed and we have been fortunate enough to have a really great team that has been really supportive and on top of things and plus, my wife is really a go-getter and ambitious I should say. So that actually went pretty smoothly . . . and they [school personnel] provide the

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space [for itinerant special education providers] if need be. So, he does speech

therapy [with an itinerant speech language pathologist (SLP)] there as well and

when she comes on Tuesday mornings they [school personnel] provide her with

the space that they [SLP and child] need.

Michelle's story shows the impact of the special education team communicating with the

general education team in a timely and consistent manner. The general education teachers

knew what was needed to support the child from the special education evaluation and

willingly provided the itinerant special education providers a space in the building to

provide services to the child based on the evaluation findings. This level of

communication also allowed the general education team to be able to communicate with

the non-relational foster parent about what they have in place to support the child.

Additionally, because other stakeholders were communicating, the non-relational foster

parent did not have to make time to advocate for the child's needs to be met.

Another example of consistent and timely communication that felt supportive to

participants was child welfare stakeholders communicating and sharing paperwork with

the child's new school to ensure the child could be enrolled in a timely manner. Contrary

to other participants' experiences of sometimes waiting weeks for a child to be enrolled

due to not having the appropriate paperwork to provide the school district, Susan

described having a caseworker who was proactive and took it upon himself or herself to

ensure the child would have her educational needs met in a timely manner, "Our

caseworker actually registered her for school and kind of took care of all the paperwork

stuff so all I had to do was bring her to the first day of school." Supportive actions like

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this were not common among participants, but did reduce the stress of the participant in a time where he or she is trying to adjust to taking care of and meeting the needs of a child newly placed in their care. It also allows more time for participants to focus on getting to know and meeting the other needs of the child placed in their care. Michelle had a similar experience with a guardian ad litem. When asked to identify supports in navigating the education system for the child in her care, Michelle shared, "Definitely would be his GAL having educational rights so things are not as prolonged because there were some other things that have been prolonged and kind of put on the back burner trying to get consent from parents." Michelle described that the GAL having educational rights allowed for quicker communication and timely enrollment for the child that may have been prolonged if the non-relational foster parent had to navigate the enrollment process. Again, the participants that described having a stakeholder support them or take-on the enrollment process felt as if they had a positive relationship with that stakeholder, which led to more frequent communication.

Positive emotions were commonly associated to feeling supported in navigating the education system, including gratitude, relief, and connection to others. Similar to the challenges participants described, the supports also align with all five layers of ecological systems theory, as well as the three themes of this study. The majority of the identified supports align with the mesosystem layer of ecological systems theory, or the linkages between stakeholders that indirectly impact the non-relational foster child.

Research Question 2

The second research question posed was: What needs do non-relational foster parents perceive are being met and not met in the educational setting for the school-age children in their care? While it was more challenging for participants to identify what needs were being met in the education setting for the children in their care, they were quick to identify what needs were not being met. It can be more challenging to identify the needs being met because when a need is met problems are less likely to arise and therefore the non-relation foster parent is less likely to be involved. When a need is not being met, multiple problems can arise that often require the non-relational foster parent to be involved. Similar to research question one, the analysis of the themes above described some of the needs that participants felt were being met or not met in the education system for the children in their care in relation to lack of understanding of trauma informed care and the societal stigma that exists around child welfare, as well as relationships and communication. More specifically, there were two areas of need participants viewed as being met or not met, academic needs and social-emotional needs. Academic needs are what a child requires to be able to access the educational content and apply it. Social-emotional needs are what a child requires to establish positive and rewarding relationships, as well as express and manage their emotions in a healthy way.

Needs perceived to be met in the education setting. When participants were asked directly what needs they perceived had been met in the school setting, many participants requested more information on what the question meant and had trouble identifying more abstract needs being met such as academic or social-emotional. Many of

the responses to the questions were concrete or tangible items that were provided to the child. For example, Susan said "free lunch" and "every kid gets their own iPad issued to them." Similarly, Andrea identified, "lunches and enrollment fees . . . She gets free breakfast and lunch and like so she takes a bus from daycare to school and it's no cost associated with that." Almost all participants had to be prompted to identify other needs being met and some were still unsure of how to identify the exact need being met. Many of the needs discussed in this section were drawn from stories the participants shared throughout their interviews. The supports (Table 6) that were perceived to meet the needs of non-relational foster children in the education setting were: (C1) academic and social emotional needs met due to staff having an understanding the impact of trauma, (C2) communication to generalize academic and social-emotional supports between home and school, and (C3) building relationships to meet academic and social-emotional needs.

   Academic and social-emotional needs met due to staff having an understanding the impact of trauma. Intertwined within discussion of the themes and research question one, participants described needs being met for the children in their care in the stories they told of their experience navigating the education system. Needs that were identified as being met in relation to staff understanding the impact of trauma included the special education team having an understanding of the impact of trauma on the brain and moving forward with individualized education plan (IEP) evaluations to identify specific needs and targeted supports, as well as providing space and flexibility for the services to be provided. Some participants felt that if a special education team had an understanding of the impact of trauma on brain development, they were able to target

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supports at the students' developmental levels and create a plan on how to best support

the student in making progress to close or minimize the academic, behavioral, or social-

emotional gaps. Additionally, having structure and clear routines in the school setting, as

well as clear and consistent expectations, met the needs of non-relational foster children

in the school setting because it allowed them to have some predictability in their often

unpredictable lives. Predictability supports emotional and behavioral regulation which is

the foundation of accessing academics.

Michelle gave an example of how the child in her care was not having his needs

met in one classroom due to the staff not having an understanding of the impact of trauma

on development and after switching to a new classroom where staff did have an

understanding of the impact of trauma, he was beginning to get his academic, behavioral,

and social-emotional needs met. A quote from Michelle that outlined the experience of

the child in her care being in the classroom where the staff lacked the understanding of

the impact of trauma on development was included in the discussion of theme one: lack

of understanding of trauma informed care. Michelle had shared some of the child's

trauma history with the staff in hopes it would help the staff have a better understanding

of and ability to support the child. In the first classroom the impact of his previous

neglect was not being considered and when the teacher would feel as if she could not

handle his behavior, he would be isolated, further impacting him negatively. When

placed in another classroom with teachers who had more understanding of a trauma-

informed approach, his needs were being met and the family started to see him make

progress. Michelle described the second classroom where the staff had an understanding

of the impact of trauma:

> Everything is very age appropriate and developmentally appropriate for him . . .
>
> we've seen progress for sure in the last couple of weeks now that he's in this new
>
> classroom so I think they are very age-appropriate and where he is now and that
>
> they are supporting him.

Michelle knew the needs of the child in her care were being met because they were

starting to see him make progress in his academics, behavior, and social-emotional skills.

This goes to show that even within the same school, a child can have his or her needs met

or not met depending on the background, understanding, and approach of the adults. A

child's needs being met and not met within the same school when working with different

adults is another reason it can be challenging to identify if the need is being met, because

the needs of the children are not always met consistently even within the same setting.

    Communication between school staff and non-relational foster parent to

support meeting the child's academic and social-emotional needs across settings. When

Michelle was asked what supports she perceived to be in place that meet the needs of the

child in her care, she discussed that he received direct specialized instruction through

"speech therapy and then play therapy" which targets both the child's academic and

social-emotional needs. She also went on to discuss the indirect support he received when

the special education providers communicated with the non-relational foster parents to

help meet the child's needs across settings:

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I mean he'll probably be exhausted tonight and I noticed that he is sometimes after

his play therapy sessions, that he is pretty exhausted, but it is helpful as well

because like I said we all communicate and all use the same language both at

home and at school. The teachers will say, "Try using this with him because this

can be helpful."

Michelle described the consistent communication between herself and school staff to be

highly supportive in meeting the needs of the child in her care across settings. She was

able to express what she was struggling with in the home setting and school personnel

told her what they were struggling with in the school setting. Together they were able to

share ideas that have worked to support the identified challenges and meet the child's

needs. Children's needs and how their needs are best supported, changes over time. The

consistent communication between school staff and caregivers allows for a variety of the

child's needs to be met across settings including academic and social emotional needs.

The benefit of consistent communication across settings is that as supports are identified

to meet specific needs, they can be shared to allow that need to be met at both home and

school.

Building relationships to meet non-relational foster children's academic and

social-emotional needs. Non-relational foster children spend a significant amount of time

in the school setting and having strong relationships can make a big difference in meeting

a child's academic and social-emotional needs. If a child has a positive relationship with

an adult, they will likely feel safer in that setting which may reduce maladaptive behavior

or allow the child to be able to engage in coping or self-regulation skills, which will

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positively impact the child's ability to access academics or feel comfortable in asking for academic support. Further, having a safe and trusted adult is a protective factor and can support meeting the child's social-emotional needs. In describing the social-emotional needs being met for a child in her care through relationship building with an adult in the school setting, Diana made the point that this relationship building met the child's needs for a period of time, but it is hard to say if the support truly met the child's needs because of the many factors that play in a foster child's life:

> There was a dean or a principal, I don't remember the title, at the school he was at for two and a half years [who] was also his basketball coach who really reached out… and they [he] took a personal interest and our son felt positive toward him up until the very end [laughing]. It was a school that had a very good football team and our son was a very decent, is a very decent athlete, but these things are always so layered, Emma.

Diana also stated that supports in place may meet a child's needs for a period of time, but supports need to be continuously adjusted to continue meeting the child's needs. There are many factors in a non-relational foster child's life that may impact supports continuing to meet a child's needs or not including trauma triggers, relationships with biological family members, underlying mental health issues, and low self-esteem. These are only a few of the many layered factors that may impact a need continuing to be met or not.

Overall, answering the direct question regarding identifying needs being met in the education system was difficult for participants, but through the stories they told

throughout the interview, academic and social-emotional needs being met were identified. Many of the needs being met were described in participants' own words to support the development of the three themes, as well as in answering the first research question. It is critical to note that although these needs were perceived by some participants to be met in the education setting, other of the participants' perceptions were contradictory and will be discussed in the following section. Participants felt that the needs of the children in their care being met or not met were dependent on a multitude of factors including level of understanding of trauma-informed care, knowledge of how to identify appropriate supports for a child who have been impacted by trauma, resources available, time and willingness stakeholders have to invest in supporting the child, systems and structures within the public school setting, and the individual child characteristics.

Needs perceived to be not met in the education setting. Participants were quick to provide examples of when they perceived the child in their care was not having their needs met in the education setting. When problems arose from non-relational foster children not getting their needs met in the education setting, the participants often became involved. Some participants stressed that public schools often have a low tolerance and understanding of how to support the often high academic and social-emotional needs that can be present in children who have been impacted by trauma. Further, participants felt that public schools have transitioned to being very academically data driven, which negatively impacts the amount of time and support provided to behavioral and social-emotional learning. Children need to have their basic social-emotional needs met in order

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to be able to learn academic content. The challenges (Table 6) that were perceived to result in the non-relational foster children's academic, behavioral and social-emotional needs to not be met in the education setting were: (D1) system wide focus on academic performance rather than social-emotional development, (D2) school mobility due to school personnel's lack of understanding of the impact of trauma resulting in academic and social-emotional needs not being met, (D3) unrealistic expectations of student and contentious communication between stakeholders resulting in academic and social-emotional needs not being met, and (D4) limited relationship building resulting in academic and social-emotional needs not being met.

   Academic and social-emotional needs not being met due to system wide focus on academic performance rather than social-emotional development. Social-emotional skills are the foundation of academic success because students need to be able to regulate their emotions in order to access the parts of the brain responsible for learning. Participants felt that the American public education system is focused around academic performance, which leaves little time to work on building social-emotional skills. However, Katherine perceived there to be a difference between rural and urban public schools. Katherine shared the difference between her experience in a large urban school district compared to a smaller rural school district:

> I feel like the administrators are very focused on academics especially with all the pressure on them for academics and standardized tests and benchmarks and I feel the more pressure from the state and federal governments, the more and more removed they are getting from the emotional needs of all of these kids regardless

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of foster care. I think that's why now that I am in a rural community where everyone is more familiar, you see everyone everywhere. You can't get away from their life and their family and their emotional needs and it feels better to me. But I feel like kids in the [school district] and then larger public schools are just sort of these, they're becoming more and more of just numbers.

Katherine made the point that the pressure on school personnel around academic performance and standardized test data makes it challenging to structure the school day to include social-emotional learning in addition to academic learning. She believed that in the urban public schools in Colorado, the students were becoming numbers based on academic performance, rather than being viewed as who they are as people. In a rural town people are more familiar with each other and their lives, which makes it harder for school personnel to distance themselves from the child's lived experience. With the strong focus on academic performance, Katherine and other participants felt as if the social-emotional needs of students are often overlooked or pushed aside. For children who have been impacted by trauma that often have higher social emotional needs, the strong focus on academic performance can have a negative impact and result in both social-emotional needs and academic needs not being met. School personnel are not typically well-equipped to manage the social-emotional demands and behavioral dysregulation that often arises in the classroom because their training and professional development is also typically structured around academic supports and performance, rather than understanding the impact of trauma or social-emotional supports.

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School mobility due to school personnel's lack of understanding of the impact
of trauma resulting in academic and social-emotional needs not being met. In addition
to the shift toward being academically data-driven, theme one outlined the negative
impact the lack of understanding of trauma-informed care can have on a non-relational
foster child, including leading to school mobility. Participants perceived that the majority
of school personnel they encountered were not well equipped to support the children in
their care in a trauma-informed way. Although, these stakeholders were thought to be
well intentioned, the lack of understanding in this area was thought to exacerbate the
academic and social-emotional challenges a child may be experiencing because their
academic or social-emotional needs are not being met. The lack of understanding the
impact of trauma combined with the focus on academic achievement can lead to a child's
needs not getting met and consequently, the child may get moved to another school. A
non-relational foster child in this situation, is then faced with getting to know many new
people, structures, rules, expectations, and environments in their microsystem and the
challenges that come along with that. As discussed previously another consequence of
school mobility is that, due to district systems and policies, the child may experience a
delay in enrollment where their needs are again not being met for a period of time.
Katherine has had experience caring for multiple non-relational foster children with
behavioral dysregulation and shared her experience:

> I found that even though all these children had IEPs, there was low tolerance for
> children with behavioral issues and I understand both sides of the story. You have
> to keep everyone safe. So, I feel like children with emotional or mental health

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needs, that the public schools, that the kids are often rejected. From the public

school's point of view, they're trying to protect the larger population. So, kids

were often, you know asked to go to smaller, smaller schools where there is a

higher ratio [of staff to students]. Of course, those schools have huge waiting list

so the kids will be out of school for like a month or so at a time.

Not all participants experienced school mobility due to their foster child's needs not

being met or having a delay in enrollment, but it was common. Katherine and other

participants perceived that school mobility for the higher needs non-relational foster

children they have cared for stemmed from school personnel having low tolerance for

behavior or social emotional challenges combined with a lack of understanding of how to

appropriately support a child who have been impacted by trauma. Even if the children

had IEPs and specific supports outlined, participants perceived school personnel to tend

to lean toward supporting the academic and social-emotional needs of the majority,

typically developing students, then the needs of the children with significant behavioral

or social-emotional needs. This was perceived to result in the non-relational foster

children not getting their academic or social-emotional needs met in the education setting

and instead being asked to go to another school. This cycle was perceived to exacerbate

the needs of the non-relational foster children in the participants' care.

Katherine noticed that in her experience, "Teachers kind of look at the IEP, but

since not all of the teachers go to all of these meetings, they are not entirely in touch." So,

even when a specific targeted support plan is put in place in an IEP, teachers may not

understand the ins-and-outs of the plan which further hinders their ability to support the

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child appropriately. Even if members of the special education team, including the school psychologist, are well-versed in understanding the impact of trauma and write in appropriate supports on the IEP, if the teachers do not understand the impact of trauma or how to implement the supports then the child's needs are not being met. Katherine's story is similar to the story Diana shared in theme one of the cycle of a child in her care not getting his needs met at one school and being moved to another school. She expressed feeling as if the services and supports for the child in her care were diminishing with each move to another school and feeling as if the education for the child in her care was being downgraded. Along with the sense of frustration and defeat that came along with children in their care having to move schools due to behavioral and social-emotional challenges, both of these participants expressed an understanding from the school's perspective as well. Katherine expressed understanding of school personnel attempting to keep the larger population safe and Diana expressed an understanding of the limited freedom for staff in the public education setting stating, "and in their defense when does a teacher feel like they have that time to do what our youngin' needs?" She expressed understanding that, in her experience, school staff often have a lack of understanding of the impact of trauma on the developing brain and therefore do not always react in a way that is supportive to the child or meets the child's needs. When asked to share an example, she shared the following story:

> There was a teacher this last fall and he [non-relational foster child] hadn't attended from Thanksgiving through Christmas and I finally got him to go one day [tapping on table]. The teacher asked for volunteers for snacks on Thursday,

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this was a Tuesday, and he volunteered and the teacher said "No, because you

won't show up." He was making an effort. I can see it from her perspective that he

had not been in school for 10 days but for him, and this is a school that is geared

toward all high needs kids and is 95% high needs kids and it's a relational,

trauma-based school, but that response, and I won't repeat what he said to me or

what he said to her, but his friend said that humiliated him in front of the whole

class and he didn't go back. It was so embarrassing. There is so much shame in his

life that people don't see.

Diana's story represents the impact that a teacher's lack of understanding of the impact of

trauma can have on a non-relational foster child. The child in Diana's care was making an

attempt to engage in the school setting and make an effort to be involved. His teacher's

response to him had a wide spread impact that resulted in the child not wanting to go

back to school. Diana's story goes to show that even in settings where staff have been

educated in the impact of trauma and how to respond relationally, a child's needs may

still not be met if the staff do not have a good understanding of what supporting the needs

of a child who have been impacted by trauma looks like in practice. For the non-

relational foster child, this interaction was so embarrassing and shameful for him that it

resulted in school mobility and his academic and social-emotional needs continuing to be

unmet.

Unrealistic expectations of students and contentious communication between

stakeholders resulting in academic and social-emotional needs not being met. As

discussed earlier in the chapter, the way that information is communicated to someone

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has an impact on how someone responds. One of the common challenges outlined in theme one—lack of understanding of trauma— was school staff having unrealistic expectations of non-relational foster children due to expecting them to be academically, socially, and emotionally able to perform at their chronological age rather than their developmental level. This is a common challenge, but how the unrealistic expectations are discussed and communicated also impacts if the child's needs will eventually be met or not. If the concern is communicated in a respectful and nonjudgmental way, stakeholders may be more likely to adjust their expectations. If the challenge is expressed in a contentious and judgmental way then the child's needs were perceived by participants to be less likely to be met. Julie shared a story where a lack of understanding of the impact of trauma, combined with limited and contentious communication between school and the non-relational foster parent let to a child's needs not getting met:

> The only thing that the school ever sent home was spelling and he doesn't like to do homework and throws this fit. . . I said, "Tell me what homework looks like" and they said, "It's like a list of 20 spelling words" and I thought, "he can't read at grade level, but we are expecting him to memorize 20 words at grade level?" I mean he can't read, that's the dumbest thing. Spelling is the least of my concerns right now, just don't do it. Read him books for 20 minutes and see if he can point to words. But they wouldn't do it because this [what they were currently doing] is what the previous school said they should do. So, they were dealing with all kinds of behaviors.

As a result of the way the discussion and communication went between the non-relational foster parent and school staff, the school staff were resistant to make a change to the expectations they had of the child. The school staff being resistant was also upsetting to the participant and created a barrier between stakeholders. The child's academic needs were not being met due to unrealistic expectations and adjustments to expectations were not made due to contentious communication. This resulted in the child's social-emotional needs also being not met because he was struggling to access academics and engaging in maladaptive behaviors in the education setting. Not only was the child not getting his academic or social-emotional needs met due to instruction being above his developmental level, but the school personnel appeared to be approaching the situation in a reactive rather than proactive way.

Limited relationship building resulting in academic and social-emotional needs not being met. School staff being reactive was not an uncommon experience for participants navigating the public school setting as there are often hundreds of children in a school and it can be challenging for school staff to identify a problem before it arises, making the response reactive; this is especially true when students are displaying externalized behaviors or maladaptive behaviors directed outward toward the environment. With limited time to be proactive, it also makes building relationships between school staff and students challenging. Building relationships is a protective factor for students who have a history of trauma, but participants perceived relationship building as limited in the school setting and one of the reasons that students' academic and social-emotional needs were not being met. Susan described her experience with

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teachers being reactive to the behavior of the child in her care at school and her yearning

for more relationship building in the beginning before problems arose:

> About a month after she moved in, the teachers—the two main teachers—asked
> us to come in for like a little parent teacher conference thing, um, because she was
> struggling and she was very chatty, um, and kind of not really trying really hard.
> We are her sixth foster home so you know she has been bouncing around so she is
> like "Why would I try hard in school when I am just going to move schools again
> in a couple of weeks or a couple of months or a year or whatever." So, I feel like
> having that, I wish there was more interaction in the very beginning.

Susan, having an understanding of the impact of trauma on child development, was keen

to the potential of these challenges arising due to the known history she had of the child

in her care. Susan went into detail about wishing the teachers would have been able to

take more time to sit down with the child and the caregivers before the child started

school to help her to understand both the teachers and non-relational foster parents are

there to support the child and want to help her to be successful. Susan expressed, "I wish

we had more interactions right up front so that she [the non-relational foster child] knew

right up front that she is cared for," prior to issues arising which may hinder the

relationship building between school personnel and the non-relational foster child. All

participants expressed an understanding of the importance of relationships in a non-

relational foster child's life, which was discussed in detail in theme three, and multiple

participants expressed the challenges that occurred when school personnel were not

proactive in taking the time to build a relationship with the child, therefore not meeting

the child's social-emotional needs. Diana experienced a lack of relationships being built between the child in her care and his teachers, combined with lack of understanding of how to best support the child. This resulted in a blatant lack of appropriate services. Diana mentioned, "they modify to get him through and he's now adjusted to doing nothing." She felt as if school personnel could have tried to meet his needs by implementing "some simple or some smaller supports to help, but something like that might get overlooked because of his age" and as a result of that, "by the time we got to where he is behind he was so close to where he could drop out that they would not provide services." This is a glaring example of one participant's experience of the academic and social-emotional needs not being met for a child in her care. School staff did not take the time to get to know the child in her care, build a relationship with him, or understand his needs.

Overall, when a child's needs are not met in the school setting, participants expressed significant frustration, anger, and helplessness. Many of these situations required participants to take time, energy, and resources to either advocate for the child in the school setting or to problem-solve on their own. It is believed that the negative feelings may be related to the participants expressed belief that part of their identity as a non-relational foster parent is to provide a safe and supportive setting to the children in their care, as well as to help them be successful. So, when a child is not getting their needs met in the education setting it can personally impact the non-relational foster parent as well, which will be further discussed in regards to research question three.

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Research Question 3

The third research question posed was "How do non-relational foster parents perceive the needs of the children in their care being met or not met in the school setting to impact the foster parent-foster child dyadic relationship in the home setting?" Four of the six participants agreed that the appropriateness of services provided to non-relational foster children in the school setting directly impacted the foster parent-foster child relationship in the home setting. Julie and Diana did not agree with this statement. Diana had a long history of caring for non-relational foster children and expressed that the school psychologist she has had experience with did not have a good understanding of how to support children who have been impacted by trauma, which has led her to continue to seek outside community services. She does not disagree with the idea that a child getting his or her needs met or not met at school impacts the foster parent-foster child relationship in the home setting, but in her experience school personnel are not typically trained to meet the needs of the child and professionals that provide community services have been better able to meet the child's needs. Her response to the questions was, "Not really, because we have an opportunity for services in so many places that, I don't think that to be honest the school psychologist was equipped enough."

Julie is a professional in the special education system in the public school setting. She has a similar perception to Diana and believes that there is an impact on the foster parent-foster child relationship in the home setting when the child's needs are met or not met in the academic setting, but due to her education background she feels as if she can meet his needs outside of the school setting when needed. However, she did express the

belief that other non-relational foster parents who did not have the education background she does, as well as teachers, may have a different perception and experience of how a child's needs being met or not met impact the adult's relationship with the child. The following discusses the four other participants perceptions of how a child's needs getting met or not met in the education setting does impact the foster parent-foster child relationship in the home setting.

Impact of Needs Met in School Setting on Foster Parent-Foster Child Relationship. When participants were asked the third research question, most participants offered an example of an experience they had had to frame their belief. Three participants identified positive impacts on the relationship in the home setting when a child in her care was receiving appropriate services resulting in the child's academic, social-emotional, or behavioral needs being met in the school setting. The needs that participants identified to be met in the school setting that positively impacted the non-relational foster parent – non-relational foster child relationship (Table 6) were: (E1) addressing splinter skills through additional targeted academic supports, (E2) open lines of communication between special education providers and non-relational foster parents, and (E3) consistent routines, expectations, and structures in the school setting.

Addressing splinter skills through additional targeted academic supports. In many households, a child completing nightly homework can be a daunting task for both the caregiver and the child, especially when a child has splintered skills academically or social-emotionally. Splinter skills refer to having specific areas of competence or understanding and lacking skills in a related area. For example, a child may be able to

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read fluently, but not be able to comprehend what they just read. It is not uncommon for children who have been impacted by trauma to have splintered skills. Susan described her perception of the impact of a child in her care receiving additional math support had on her relationship with the child, as well as on the child as an individual:

> Because of the math interventions, because she's a little bit behind in math, getting those connections has been really nice. To get that confidence that when she gets home she doesn't have hours and hours of homework she just has a little bit of homework because she did most of it at school so that has been a really big confidence-booster.

Throughout Susan's interview she shared that the child had experienced gaps in her education from frequent mobility. Frequent mobility and the impact of trauma on brain development are two factors that impact how a child learns and can result in the child having splintered academic and social-emotional skills. School staff providing additional academic support met the child's academic and social-emotional needs, as the academic support helped close the child's academic gap and also helped build the child's personal and academic confidence. Susan described how the child in her care was positively impacted, but she also eluded to the idea that she and her spouse were now able to spend more time building a relationship with the child in their care because she didn't have as much homework. As discussed in theme three, multiple participants, including Susan, expressed the importance of building a relationship with the non-relational foster children in their care to increase the chances of stability in the child's current placement.

Open lines of communication between special education providers and non-relational foster parents. Michelle shared her experience of working closely with the special education providers for the child in her care. She noted there was open and genuine bi-directional communication between herself or her spouse and the child in her care's special education providers that allowed for his needs to be met more globally. She discussed the positive impact that open communication had. She felt supported and noted that she felt the communication between her and the school staff was no different than the staff's communication with other biological parents, which indirectly had a positive impact on her and her spouse's relationship with the child in her care:

> As much as the play therapist can share with us, she gives us ideas of what they are working on and there's even been times she's like "Okay Mama," that's me, "needs to tone it down a little bit with the rough play." Because you know we wrestle and I'm a kid at heart so we just have a good time or whatever, so I never take offense and I trust her that she knows what she's talking about and whatever. That she's seeing there's a reason why she's maybe suggesting that. And the speech therapist is very supportive as well, she will check in with us the day before to remind us that she's coming and then gives us an update the following night just saying this is what we worked on and we openly talk about it with him. Like, this might be something you want to talk with Miss [play therapist] about, like the play therapist, Miss [speech therapist], speech therapist said you did really great, what words did you work on and stuff? And we just practice it at home so we just kind of do it like that.

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In Michelle's experience, the special education providers were meeting the needs of the child in the school setting directly and also providing her and her spouse with strategies to further get the child's needs met in the home setting. The child's needs were then being met across settings which positively impacted her and her spouse's relationship with the child. For Michelle, the feeling of support was related to the frequency and quality of bi-directional communication. She conveyed that this has helped her build a trusting relationship with the providers because they are treating her and her spouse as she expects more traditional parents to be treated. The normalization of the communication experience has allowed the family to build a relationship and communicate with not only school personnel, but also the non-relational foster child in their care and it has helped him to be successful across the home and school settings.

Consistent routines, expectations, and structures in the school setting. As discussed in the supports section of research question one, consistent routines, expectations, and structures in the school setting were perceived by participants to help the children in their care be more successful academically, behaviorally, and social-emotionally. Michelle and Susan both described experiences where the children in their care required specialized services to meet their needs, but that is not always the case. Some non-relational foster children can get their needs met through universal school structures including clear and consistent routines and expectations, without needing individualized supports. Andrea shared how these universal supports combined with open lines of communication between home and school have met the needs of the child in her

care and significantly reduced the externalizing behaviors of the child in both the home and the school setting:

> We couldn't wait for her to start school because when she was going just to daycare all day it seemed like she wasn't being challenged and so we were seeing more behavioral challenges over the summer . . . For us it feels like she almost, back to that normalcy thing she is expected to attend and behave and all those things just like any other kid and she doesn't get a free pass because she's in foster and so I just think from an expectation standpoint they hold her accountable and then anything that I've asked, if I have a question or whatever, they will help me out or direct me to her teacher.

Andrea made the connection between universal supports and holding the non-relational foster child to the same expectations as any other child in the class, if developmentally appropriate. This helps to normalize the experience for the child. It was not uncommon for participants to experience or perceive the child in their care to be treated differently or have different expectations due to school staff knowing the child was in foster care and treating them differently, or stigmatizing them, due to this knowledge. Andrea's point is important and calls for school psychologists to support staff in self-reflection to begin to become aware of implicit bias staff may have toward foster children or foster families.

Overall, half of the participants expressed that when a child in their care was being supported in the school setting in a way that met their academic, social-emotional, or behavioral needs, the positive impact of receiving appropriate supports helped the child to be more successful across the home and school settings. This allowed for more

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positive communication and experiences between the non-relational foster parent and non-relational foster child, ultimately strengthening the dyadic relationship. Research shows that one critical protective factor in a foster child's life is that they have a consistent and caring adult in their lives for at least 12 months. This can improve their relationships with their family and peers, behavior at school, academic achievement, school attendance, involvement in extracurricular activities, and trauma symptoms (Scherr, 2014).

Impact of Needs Not Met in the School Setting and Affecting Foster Parent-Foster Child Relationship. Once again, participants shared through story telling ways in which they perceive a child's needs not being met in the school setting to impact their relationship with the child in the home setting. Two participants identified impacts on the relationship in the home setting when a child in their care was not receiving appropriate services, resulting in the child's academic, social-emotional, or behavioral needs being met in the school setting. Participants identified how the needs of the children not being met was perceived to be related to a breakdown in the caregiver-child relationship, which is highly impactful to non-relational foster parents due to the emphasis put on the importance of relationships and the desire to instill values in the children in their care, which is further discussed in theme three. The needs that participants identified not to be met in the school setting that negatively impacted the non-relational foster parent – non-relational foster child relationship (Table 6) were: (F1) non-relational foster child's skill gaps not being addressed, (F2) limited district resources resulting in a non-relational

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foster child's needs not being met, and (F3) non-relational foster child feeling stigmatized due to delay in enrollment.

Non-relational foster child's skill gaps not being addressed. Susan did not directly identify skill deficits that the child in her care had, but provided stories and examples that described the child in her care to need support with study skills, organization, and self-advocacy, as well as having large academic gaps. It is not uncommon for children in foster care to have deficits in executive functioning and to need supports to address these skill gaps by learning strategies to manage areas of need. This child's deficits were likely due to the high rate of mobility and history of trauma she had experienced, yet Susan identified that the child was not receiving any services or supports for this in the school setting other than the universal supports offered to all students. She shared her frustrations:

> She will just tell me "Oh, I did my math homework during that class," and then she doesn't bring it home or "Oh, I finished that English thing" or "I studied for my vocabulary test during that class so I don't have to study at home." So, it's really hard to know exactly what she needs to do and what she doesn't need to do when she said she doesn't need to do it, so she doesn't bring it home. So, that has been a little challenging. I'll email the teachers, but they don't get back to me until the next day, which is fine because they are off work, but I just feel like it was really hard to know how much [homework she has]. Then they wouldn't even grade the tests or quizzes until like two weeks later and then it's too late to like make it up or to know exactly what is going on.

Susan described the frustration of receiving contradictory information from the school and the child in her care regarding homework, which caused tension between Susan and the child in her care. There was a break-down in communication between the non-relational foster parent and the teachers which resulted in Susan not knowing how to support her child academically and increasing the tension in her relationship with her child in her care in the home setting. Susan was working on building trust with the child in her care, so she expressed not wanting to question the child in her care when she says she has already completed an assignment. As the child continued to have work avoidant behavior and Susan received contradictory information, conversations around homework between Susan and the child in her care continued to have tension, which negatively impacted the relationship and trust between them. Susan reported getting multiple automated calls from the school each week regarding missing assignments, likely due to the child's skill deficits and academic gaps. However, there was no preventative communication in place between the home and school setting that would allow for her academic needs to be met across settings. Additionally, it was clear in Susan's stories that this child was consistently struggling to meet the academic expectations placed on her, yet the school staff were not providing her any additional supports to meet her needs and allow her to better access her education.

Limited district resources resulting in a non-relational foster child's needs not being met. In Susan's experience, the school staff were not attempting to identify additional supports to help meet the needs of the child in her care, but another experience

that Katherine shared was the student's needs being identified, but the district not having

the resources to meet the child's needs, especially in rural districts:

> So, if the school is not going to support it then I have to go out and figure out how
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> the children can get their services, for example speech therapy or occupational
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> therapy. So that's really time-consuming, plus they are missing more school
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> because I have to pull them out for these appointments. That does happen in a lot
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> of schools because they don't have those resources and they have to outsource
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> them.

Not only were the child's needs not being met in the school setting, but the non-relational

foster parent was having to take the time to find how to get the child's needs met. The

school staff did not communicate information about any community providers that may

be able to meet the child's needs and instead the participants were left to problem-solve

themselves. This negatively impacted the relationship between the foster parent and

foster child. The foster parent had to use their own time and resources to figure out how

to meet the child's needs, rather than being able to spend that time fostering a relationship

with the child. Additionally, the child's needs were having to be met outside of the school

setting, resulting in more missed access to instruction as the services had to occur during

the hours of the school day. This study has shown that the needs of non-relational foster

children are individualized and need to be assessed in order to target them. In this case

the child's language, occupational therapy, and academic needs were not being met in the

school setting, which resulted in increased frustration for the non-relational foster parent

and less time to be able to spend time to relationship build with the child in her care due to having to outsource services to meet the child's needs.

Non-relational foster child feeling stigmatized due to delay in enrollment.

Katherine identified that her relationship with a child in her care had become most negatively impacted when a child's academic and social-emotional needs were not being met in the school setting due to his or her enrollment in school being delayed. When a child's enrollment is delayed, especially when they are placed in a non-relational foster home with other children, they are often aware of the fact that the other children get to go to school and have a homework routine, but they have a different routine and different expectations due to not being in school. Katherine essentially described that the children felt stigmatized due to lack of normalization of the transition experience that is caused by a delay in enrollment. The delay in enrollment is usually impacted by lack of communication between child welfare and school stakeholders. Katherine expressed:

I think it causes difficulties in the relationship with the foster child and the foster parent if the child is not enrolled in a timely manner. I think children screw up, children know when they're being treated differently so that's going to come out in the home environment if a child is home and all the other siblings are going to school and making friends and coming home with homework. I think, and so a child acts out which can create a negative exchange between a foster parent and a foster child. I mean ideally a foster parent will take this opportunity to create this wonderful relationship and be like "Oh we have a long time and it could be a beautiful thing" but unfortunately that's not reality because now the foster parent

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has to take that time off of work and they have their own things to do which is

very, very stressful on both parties.

Katherine described the widespread impact that a child having delayed enrollment has on

everyone in the household. She noted that the child's academic needs do not get met

because they are not in school, the social-emotional needs do not get met because they

have trouble relating to the other children in the home who do get to go to school, they do

not have access to peers as they would in the school setting, and the needs not being met

result in an increase in maladaptive behavior in the home setting. All of this, combined

with the extra stress and responsibility placed on the non-relational foster parent due to a

delay in enrollment, results in strain on the non-relational foster parent and non-relational

foster child relationship in the home setting.

Overall, these participants' experiences outline how a child not receiving

appropriate services in the school setting can cause tension, stress, or conflict in the foster

parent-foster child relationship. Additionally, when a child was not getting his or her

needs met in the school setting, participants had to use their own resources to get the

needs met or manage the consequences of the child not getting their needs met. Both

scenarios negatively impacted the relationship between the non-relational foster child and

non-relational foster parent. Tension or conflict over time can lead to a break-down in the

caregiver-child relationship, which is the most common cause of placement instability.

This demonstrates the importance of non-relational foster children getting their needs met

because the caregiver-child relationship has the ability to significantly alter the outcome

of the foster child's life.

Summary

Chapter four began with a detailed introduction to participants in an attempt to

support readers in feeling the essence of participants' stories and to understand each

participant's lens around public education and child welfare. All participants had some

college education and the majority of participants held a job in public education. This is

critical for readers to keep in mind when interpreting the results of this study. Through

the second level of data analysis three themes emerged: (1) lack of understanding of the

impact of trauma, (2) stigma around foster care, and (3) relationships and

communication. The first theme, lack of understanding of the impact of trauma,

established that participants perceived that, although school staff tended to be well-

intentioned, the negative consequences of not understanding the impact of trauma on

child development was widespread. Participants expressed negative emotions related to

experiencing school staff being unsure of how to best support the children in their care,

but took pride in advocating for the child's needs. The second theme, stigma, discussed

participants desire for the themselves and the children in their care to feel as "normal" as

possible. It established once again that, although most people tended to be well-

intentioned, they unconsciously behaved in ways that were perceived as stigmatizing,

which resulted in frustration, anger, resentment, emotional pain, and feeling helplessness

for both the non-relational foster parents and children. The second theme demonstrated

the challenge of wanting to give non-relational foster children a typical childhood and

educational experience, while meeting the children's unique needs in a way that did not

make them feel they were being treated differently. The third theme, communication and

relationships, established that it is not only the frequency of the communication that impacts the relationship, but also the way something is communicated (such as tone of voice, vocabulary used, and meaning derived). Within the communication and relationship data, cyclical patterns were identified that indirectly impacted the non-relational foster child's education experience. All participants placed significant value on developing a positive relationship with the children they care for and viewed communicating and instilling values in the children in their care as another piece of their identity as a non-relational foster parent. A connection between theme one to themes two and three that was identified was the perception that one reason the stigma that exists toward non-relational foster parents and children, and one factor that was perceived to impact both communication and relationships across stakeholders, was the lack of understanding of the impact of trauma on child development.

The third level of data analysis analyzed participant responses in relation to the three a priori research questions. Responses to research questions were mixed in nature with participants having both positive and negative experiences when navigating the education system in general, getting the needs of the non-relational foster children in their care met, and reflecting on the impact of having the needs met or not had on their relationships with the children in their care in the home setting. In regards to the first research questions around participants experience navigating the education system, participants voiced more challenges than supports. The challenges identified were often a lack of the supports that were identified by other participants. This highlights the idea that the participants experiences were not only highly varied between schools and

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districts in Colorado, but participants also had a variety of experiences within the same school depending on the school staff they interacted with. In response to the second research questions around identifying the needs of the children being met or not met at school, participants felt that the needs were dependent on a multitude of factors including level of understanding of the impact of trauma on the brain, knowledge of how to identify appropriate supports for a child who have been impacted by trauma, resources available, time and the willingness stakeholders had to invest in supporting the child, systems and structures within the public school setting, and the individual child's characteristics. Research question three asked about a child's needs being met or not met in the school setting and the impact on the dyadic relationship in the home setting. Participants identified examples of their foster child's needs being met in the school setting having a positive impact on their relationship with the child in the home setting, as well as the needs of a child not being met in the school setting having a negative impact on their relationship with the child in the home setting. The findings demonstrated the ebb and flow of strong emotions that comes along with navigating the public education system for non-relational foster families. Additionally, school psychologists were only identified one time throughout the interviews and were not perceived as being well-informed or able to support children or families who have been impacted by trauma.

There was significant overlap between the three identified themes in the second level of analysis and the responses to the three a priori research questions in the third level of analysis. Theme one, the lack of understanding the impact of trauma, was paramount throughout the discussion on challenges navigating the education system and

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children's needs not being met in the school setting. Participants were keen on drawing

the conclusion that lack of understanding of how to support the children in their care who

have been impacted by trauma was perceived to be widespread in the education setting,

even within special education. Participants noted that they perceived the lack of

education for school staff in this area was a major component in the children in their care

not getting their needs met at school and the carryover of those needs not being met at

school negatively impacting the dyadic relationship in the home setting. Overall,

participants felt that school staff were typically unprepared to support foster families in

many aspects of navigating the education system including enrollment and orientation,

student academic engagement and progress, social-emotional supports, and behavioral

supports. Theme two, stigma, was also present throughout discussion of the research

questions. Participants identified one of the challenges of navigating the education system

to be that they and the children in their care had experienced being stigmatized due to

being involved with child welfare. People interacted with them in a way that made them

feel different, that was at times perceived as conscious stigmatization and other times

unconscious. It was identified as supportive and meeting the needs of both participants

and the children in their care when stakeholders intentionally tried to normalize the

experience of navigating the education system. Feeling stigmatized or as if the experience

was normalized was highly depended on the perception of communication and

relationships. Communication and relationships were paramount throughout participant

narratives in relation to all three research questions. Positive relationships were identified

by participants as one of the key factors in supporting a child navigating the education

system and negative relationships made it more challenging for participants and the children in their care. This included relationships between school personnel and non-relational foster children, school personnel and non-relational foster parents, child welfare and non-relational foster parents, non-relational foster parent and non-relational foster child, peers and non-relational foster children, and biological family and non-relational foster children and parents. A key component of the relationships was the level and type of communication. When communication was consistent, genuine, and timely, participants perceived it to be a supportive relationship and to meet their needs or the needs of the children in their care. Positive communication was perceived to help children generalize academic and social-emotional supports across settings and to support in building positive relationships. On the other hand, it was perceived as a challenge to navigate the education system when communication was delayed, lacking, or perceived as judgmental. This resulted in non-relational foster children's needs not being met due to delays in enrollment, non-relational foster parents not being included in decision making, relationships being negatively impacted, and inappropriate services being provided to the child. Overall, there was significant intersection between the emergent themes and a priori research questions.

Chapter V: Discussion

This phenomenological study explored (1) the experience of non-relational foster parents navigating the education system, (2) the non-relational foster parents' perception of the educational needs of the school-age children in their care and if those needs are being met or not met, and (3) the impact of a school-age foster child's needs being met or not met on the non-relational foster parent - foster child dyadic relationship. This study was aimed at understanding "what" and "how" non-relational foster parents experience navigating the education system for the children in their care and if participants did or did not perceive there to be a relationship between a child's needs being met or not met in the school setting on the dyadic relationship in the home setting. The intent of this research was to expand the body of knowledge surrounding non-relational foster children and families.

Summary of Analysis

A brief summary of the first three levels of analysis are included to support the following discussion of the findings in relation to the ecological system theory. The four levels of analysis were: (a) descriptive analysis, (b) emergent theme analysis, and (c) a priori analysis related to the three research questions.

Descriptive Analysis

The descriptive analysis used descriptive codes to identify participants characteristics (Table 4). All participants resided in Colorado at the time of the interviews, per inclusionary criteria (Table 1) and all participants identified as female.

This first level of coding uncovered that all participants also had a high level of education ranging from a bachelors to doctoral degrees, with the majority of the degrees being related to education. Additionally, four of the six participants were in their first year of being licensed as a non-relational foster parent, which is a stark contrast to the other two participants who had been licensed for eight years and 20 years. This difference was also seen in the number of foster children that each participant had cared for. The four participants that were in their first year of licensing had only cared for one or two children each, whereas the participant that was licensed eight years had cared for eight children and the participant that was licensed 20 years had cared for 29 children. The difference in time licensed and number of children each participant had cared for at the time of the interviews was a strength of the study as it provided me with data from different viewpoints due to the varied level of experience of the participants.

This level of coding also provided insight to some participants history or perception of child welfare before and after becoming a non-relational foster parent, as well as the meaning derived from experiencing the role of non-relational foster parent. The majority of participants had expressed having a negative experience with child welfare as a child or young adult with either themselves or someone close to them. Participants held mixed views of child welfare as a non-relational foster parent. However,

one of the most compelling findings within this level of analysis was the meaning all

participants associated with the role of non-relational foster parent. All participants not

only viewed this role as a large part of their identity, but also voiced wanting to instill

values in the children they cared for and feeling responsible for them.

Emergent Coding

The second level of was analysis was emergent coding where three themes and 10

subthemes were identified (Table 5). The first theme, lack of understanding of the impact

of trauma, described the participants' perceptions of school staff lacking the necessary

understanding of typical and atypical child development that stems from childhood

trauma. Theme one established that participants perceive that, although school staff tend

to be well intentioned, the negative consequences of not understanding the impact of

trauma on child development and how to support the associated behaviors is widespread.

Frustration was common throughout the participants' quotes underlying this theme. Even

with the frustration involved, participants appeared to hold value in advocating for having

the needs met for the children in their care. Participants also described feelings of

understanding and appreciation when working with the school as a part of a team.

The second theme, stigma, described the participants perceptions of their personal

experiences and observations of the experiences of the children in their care feeling

stigmatized. Discussion of theme two outlined participants desire for themselves and the

children in their care to feel as "normal" as possible. There were mixed feelings including

frustration, anger, resentment, emotional pain, and helplessness related to feeling

stigmatized, as well as joy and understanding related to school staff attempting to

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normalize the school experience for non-relational foster parents and children. As discussed in the first level of descriptive coding, participants place significant value on their role, which contributes to the strong and passionate feelings toward them or the children in their care feeling stigmatized and not valued or seen as individuals. This theme demonstrates the challenge of wanting to give non-relational foster children a typical childhood and educational experience, while meeting the children's additional needs in a way that does not make them feel different or treated differently from their peers.

The third theme, communication and relationships, described the participants perceptions of the impact of bi-directional communication, or lack thereof, between stakeholders in a non-relational foster child's life (i.e. non-relational foster parent, public school personnel, child welfare personnel, and non-relational foster child), and the perceived association between communication and relationships. All participants expressed a yearning for open and consistent communication with school and child welfare personnel regarding the non-relational foster children in their care, but not all participants had that experience. This theme established that it is not only the frequency of the communication that impacts the relationship, but also the way something is communicated in regards to tone of voice, vocabulary used, and meaning derived. Within the communication and relationship data cyclical patterns were identified: consistent and genuine communication builds trust; as the level of trust in a relationship continues to grow, so does the depth and vulnerability of the communication, which continues to strengthen a relationship and maintains the consistency of the communication. In

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contrast, lack of or judgmental communication breaches trust, which negatively impacts the relationship or perception of the other person, which continues to lead to limited or judgmental communication, further hindering the relationship. All participants stressed the importance of the children in their care building healthy, trusting, positive, relationships. These non-relational foster parents placed significant value on developing a positive relationship with the children they care for and helping them build these positive relationships in the community as well. In addition to the perceived importance of building positive relationships, participants viewed communicating and instilling values in the children in their care as another piece of their identity in the role of non-relational foster parent due to their understanding of the impact of trauma. Similar to theme two, the level of understanding of the impact of trauma on child development was one factor that was perceived to impact both communication and relationships across stakeholders.

A Priori Coding of Research Questions

The third level of data analysis analyzed participant responses in relation to the three a priori research questions. Responses to research questions were mixed in nature with participants having both positive and negative experiences. In regards to the first research questions around participants experience navigating the education system, participants voiced more challenges than supports. The challenges identified were often a lack of the supports that were identified by other participants. This highlights the idea that the participants experiences were not only highly varied between schools and districts in Colorado, but participants also had a variety of experiences within the same school depending on the school staff they interacted with. In response to the second

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research questions around identifying the needs of the children being met or not met at school, participants felt that the needs were dependent on a multitude of factors including level of understanding of the impact of trauma on the brain, knowledge of how to identify appropriate supports for a child who have been impacted by trauma, resources available, time and the willingness stakeholders had to invest in supporting the child, systems and structures within the public school setting, and the individual child's characteristics. Research question three asked about a child's needs being met or not met in the school setting and the impact on the dyadic relationship in the home setting. Participants identified examples of their foster child's needs being met in the school setting having a positive impact on their relationship with the child in the home setting, as well as the needs of a child not being met in the school setting having a negative impact on their relationship with the child in the home setting. Additionally, school psychologists were only identified one time throughout the interviews and were not perceived as being well-informed or able to support children or families who have been impacted by trauma.

Implications of the Study from an Ecological Perspective

In the following section the findings of the fourth level of analysis, a priori coding grounded in ecological systems theory, are discussed in relation to the literature through the lens of the five layers of the ecological systems theory: microsystem, mesosystem, exosystem, macrosystem, and chronosystem. This level of analysis included analyzing how my findings supported, contradicted, or extended existing research. Strengths and weaknesses will be discussed for each ecological layer.

Microsystem

At the microsystem level, participants discussed many stakeholders having direct impacts on the children in their care, both positive and negative. This included, but was not limited to, teachers, caseworkers, counselors, special education providers, community service providers, peers, and members of the child's family of origin.

Weaknesses in the Microsystem. Weaknesses (Table 7) were (A1) negative interactions with students due to not understanding how to interact with a child who has been impacted by trauma, (A2) breakdown in relationships between non-relational foster children and school staff, (A3) school staff trying to overly normalize a student who has been impacted by trauma, (A4) inappropriate interventions or supports being used to target academic, behavioral, and language needs, (A5) breakdown in the caregiver – child relationship due to the child's needs not being met in the school setting, and (A6) negative interactions with biological family members. Each weakness will be discussed in turn.

Negative interactions with students due to not understanding how to interact with a child who has been impacted by trauma. One of the most common points brought up by participants was the interaction between teachers or other school staff with the child in a way that is not trauma informed. Some research has proven that rifts in early interpersonal relationships and the chronic stress associated with being placed into foster care affects the underlying structure and function of the developing brain and that when neurodevelopment is disrupted, it typically results in compromised functioning (Day et al., 2015; Perry, 2009). It was a common occurrence that school staff were holding non-

relational foster children to unrealistic expectations and that often inappropriate services were provided to the non-relational foster child due to the lack of understanding of how to support a child who has been impacted by trauma, which negatively impacts the foster child – adult relationship. According to Scherr (2014), the first step for school personnel in supporting children in foster care is to understand the basic demographic of children in the foster care system and why they require comprehensive and consistent support at all tiers, as well as additional supports systemically. This best practice is not a common occurrence within the education setting. School psychologists are in a unique position to support school staff in understanding the importance of understanding the demographics of this population and how to support and respond to students who have been impacted by trauma at all three tiers. The findings of this study established that although school staff tended to be well-intentioned, the negative consequences of not understanding the impact of trauma on child development, and therefore how to respond and support a child who has been impacted by trauma, was widespread. One participant, who had interactions with multiple school psychologists, perceived that even within the profession, some school psychologists took a significantly more trauma-informed approach than others. When school staff were interacting with, or trying to intervene with, a non-relational foster child in a traditional discipline focused way, rather than from a lens that was biologically sensitive and developmentally appropriate, the child's challenges were exacerbated.

Breakdown in relationships between non-relational foster children and school staff. Due to the high mobility rate and underlying, often unmet, needs among this

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population, a couple participants described a breakdown in the once strong relationship with a child as another weakness within this layer. Research by Scherr (2014), shows that short-term, meaning less than 6-months, of a relationship with an adult can actually be more detrimental than beneficial to the child because of their traumatic background and past broken relationships. There were also teachers who interacted with non-relational foster children in a way that exacerbated their needs by making assumptions about the child and blaming them for behaviors or lack of engagement that is out of the child's control. This ties to all three emergent themes, as this type of interaction with a non-relational foster child from teachers or other staff likely stems from a lack of understanding of the impact of trauma combined with an unconscious bias toward those involved in child welfare due to the associated societal stigma and externalizing behaviors which are highly disruptive in a classroom. This type of assuming and blaming interaction often impedes communication and breaks down the relationship between the teacher and student.

    School staff trying to overly normalize a student who has been impacted by trauma. Within the microsystem, another weakness was that participants felt as if the stigma around being in foster care led teachers to try to overly normalize the student, which has similar consequences to lack of understanding of how to support a student who has been impacted by trauma, as the students' needs are being ignored. This approach exacerbates the societal stigma that exists toward non-relational foster parents and children because it is not supportive to the needs of the children who have been impacted by trauma due to the lack of understanding among educators of how to support

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this population. This is consistent with the literature around common barriers to implementing trauma informed practices in the school setting with one of the common barriers being the societal stigma around mental health concerns, including trauma (Martin et al., 2017). Further, the stigma around child welfare can impact how teachers and other school staff communicate and build relationships with a non-relational foster child. If teachers or school staff are worried about how they communicate with or interact with a non-relational foster child, they are likely not interacting in a genuine way, which negatively impacts the relationship. If an adult is interacting with a foster child less frequently or inconsistently, it can actually be detrimental to the child due to their traumatic background and broken relationships in the past (Scherr, 2014).

Inappropriate interventions or supports being used to target academic, behavioral, and language needs. A fourth weakness that was perceived in a non-relational foster child's microsystem was around the direct interventions being used to support students academically, behaviorally, and with language. Pears et al. (2015),has shown that early identification of the underlying mechanisms that stem from early adversity is important in selecting appropriate intervention and prevention strategies aimed at increasing positive educational outcomes. However, with the limited information typically provided on a foster child and the high rate of mobility, it is more common for reactive supports to be put in place rather than preventative. Additionally, participants did not experience and were not aware of school psychologists being consulted when challenges arose. Externalizing behaviors were common for non-relational foster children, and participants expressed challenges with getting the

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underlying needs met in the school setting to reduce the behaviors, which is one of the areas of expertise of school psychologists. Research by Folk and Esposito (2016), states that academic gaps and social-emotional needs that underlie behavior problems need to be identified and necessary supports put in place as quickly as possible or this population will have a greater risk for school failure or placement into special education. Yet, rather than experiencing school personnel trying to target the underlying cause of a student's behavior, several participants experienced teachers expecting the children in their care to be able to produce grade level work and behave similar to same age peers with no additional supports in place. When the child was not able to meet the teacher's expectations, the child was often punished rather than having interventions put in place to support the underlying cause of the behavior. Other participants experienced the child in their care not having his or her needs met even with tier three supports in special education. This was evidenced by the child having the same IEP goal over multiple years and the child making minimal progress, which was perceived to be related to the providers lack of understanding of the impact of trauma on the developing brain and how to support children who have been impacted by trauma. This is consistent with research by Day et al. (2015) that noted that research has continued to grow around trauma-informed practices, but evidence-based services and trauma-informed practice for children in foster care continue to be lacking in the education system.

Breakdown in the caregiver – child relationship due to the child's needs not being met in the school setting. In the microsystem, the key direct relationship and interaction is between the non-relational foster parent and non-relational foster child. According to

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ecological systems theory, children and their caregivers experience a transactional relationship, meaning that children and caregivers affect and are affected by each other (Hong, Algood, Chiu, & Lee, 2011). All of the participants voiced wanting to instill values in the children they cared for and feeling responsible for them. Participants discussed caring for non-relational foster children as part of their identity. It is critical to note that this level of personal meaning may not be universal across foster parents, as these beliefs may be dependent on a foster parent's reasoning for taking on the role. However, a literature review on April 30, 2020 revealed that there is no research to date that discusses the personal meaning derived from being a non-relational foster parent. Unlike most other subpopulations of foster care, non-relational foster parents seek out this role as a vocation and this level of meaning may be an uncategorized feature of being a non-relational foster parent and taking on this identity.

On the child's side, when he or she is placed into foster care, the foster parent – foster child dyad becomes one of the most significant relationships in the child's microsystem (Cooley, Wojciak, Farineau, & Mullis, 2015). However, many non-relational foster children have academic, behavioral, or social emotional challenges that present across settings. Some research has shown that children with significant mental health or behavioral problems are likely to face more placement changes due to the strain these issues often put on the caregiver-child relationship (Cooley et al., 2015; Leve et al., 2012). Participants described experiences that occurred within all layers of the ecological systems theory that put strain on the dyadic relationship. This included the fact that a child's needs not being met in the school setting carried over into the home setting. All of

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these participants reported becoming a foster parent for moral reasons and wanted to do the best they could to advocate and support the children in their care to be successful. Even with the best intentions, a child's needs not being met in the school setting often put strain on the foster parent- foster child relationship. It is critical for education systems to begin to work on training all staff in how to support and respond to students who have been impacted by trauma to begin to better meet the needs of this population because placement instability often stems from a break-down of the caregiver-child relationship (Leve et al., 2012).

Negative interactions with biological family members. Another weakness in the microsystem that, more often than not, negatively impacted the foster parent-foster child relationship was the biological family members' interactions with the child around how they feel about the foster parent or the relationship between the foster parent and foster child. Over half of the participants discussed the impact that interactions between the child in their care with his or her biological family had on the child. One story did include positive interactions regarding the foster parent and the dyadic relationship with the child, but the majority of participants experienced negative interactions. Research by Sen and Broadhurst (2011), identified that good quality contact with biological family members, in addition to other positive interventions, has shown to promote positive outcomes such as placement stability or a child's successful return to his or her biological home, but if children in foster care have poor quality or problematic contact with their biological parents, they are at a higher risk for placement and school disruption. This is critical to note, because although the school system and personnel meeting the child's needs may

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positively impact the foster parent-foster child relationship, other factors are at play that can undermine the relationship and ultimately the child's stability within that placement.

Strengths in the Microsystem. Strengths (Table 7) were (B1) adults building strong and consistent relationships with non-relational foster children, (B2) targeted and appropriate special education services, and (B3) a child's needs being met in the school setting positively impacting the caregiver – child relationship.

Adults building strong and consistent relationships with non-relational foster children. One of the most impactful strengths of the education system was that the stigma associated with child welfare is not universal across school staff and some participants described stakeholders in the school setting who did take the time to build a strong and genuine relationship with the child in their care, none of which were school psychologists or other school-based mental health professionals. Participants described the strong relationships as highly supportive to the child, which is also consistent with the research. Foster youth who have a consistent and caring adult in their lives for at least 12 months can improve their relationships with their family and peers, behavior at school, academic achievement, school attendance, involvement in extracurricular activities, and trauma symptoms (Scherr, 2014). Participants described experiences where a school staff member seemed to take a special interest in their child and worked diligently to build a relationship with the child, which seemed to meet the child's needs at the time. Within the microsystem, participants described these relationships as one of the most supportive pieces of navigating the education system for the children in their care because when there were strong relationships in the school setting, the non-relational foster children

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were more likely to engage in school, seek support at school, and have less behavioral challenges. A common point made among participants was that communication played a major role in adult-foster child relationships. Participants gave examples of how conversations can be framed in a way that can help the child understand the point the adult wants to get across in a way that can hinder or positively impact the dyadic relationship. Included in these discussions was how critical the tone, cadence, rhythm, body language, and vocabulary chosen by the foster parent or other stakeholder were and how these aspects of communication can have positive or negative impacts on the child. Part of this insight is believed to have stemmed from participants having an understanding of the impact of trauma on child development due to their educational and employment histories. Participants also noted that if adults in the school setting were observed to communicate in a supportive way and they were more apt at building relationships with the children, they perceived this to meet children's relational needs.

Targeted and appropriate special education services. Some participants experienced a positive impact of getting the child's need met by having the child evaluated for special education that allowed for special education providers to work directly with the child to identify specific underlying needs and targeted supports. The discussion around special education revealed that it depended on the special education providers level of understanding of the impact of trauma on the developing brain and understanding of how to identify appropriate supports. Some participants felt that the child in their care was able to receive more support in special education and that more

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needs were being met for the student, as compared to receiving tier one or two supports within a multi-tiered system of support framework.

A child's needs being met in the school setting positively impacting the caregiver – child relationship. It was more challenging for participants to identify the positive impact of a child's needs being met in the school setting and the impact that had on the dyadic relationship. Several participants did identify the connection and expressed that when the child in her care had his or her needs met in the school setting, the foster parent-foster child relationship was ultimately strengthened because it allowed for more positive communication and experiences between the non-relational foster parent and non-relational foster child. Research by Cooley et al. (2015), demonstrates an association between a positive foster parent- foster child relationship, a decrease in the youth's externalized behaviors across settings and an increase in self-esteem.

Summary of the Microsystem. Within the microsystem the weaknesses identified mainly focused around the breakdown of relationships due to negative interactions, regardless of intention. Many stakeholders were perceived as well intentioned, but the lack of understanding of how to support a child impacted by trauma was perceived to undermine many interactions between school personnel and non-relational foster children. The negative interactions extended to also include biological family members at times. All negative interactions at the microsystem level with a non-relational foster child and another stakeholder were perceived to carry over to negatively impact the dyadic relationship in the foster home. Scherr (2014) noted that best practices for school personnel in supporting foster children is to understand the basic demographics

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of this population and why they may require comprehensive and consistent support at multiple tiers, but my study demonstrates that this is not common practice within the Colorado public school systems. My findings did support the research by Day et al. (2015) that noted that research has continued to grow around trauma-informed practices, but evidence-based services and trauma-informed practice for children in foster care continue to be lacking in the education system. Discussion of the supports in the microsystem reveal that although many interactions were perceived as having a negative impact due to lack of understanding of how to support a child impacted by trauma, there were also pockets of stakeholders who were informed or responded to children in a way that met their needs.

Mesosystem

The layer that was discussed most frequently by participants was the mesosystem, or the linkages between stakeholders that indirectly impact the non-relational foster child, which is consistent with the literature by Altshuler (2007). A child in the foster care system has many interactions constantly taking place at this level due to the number of stakeholders involved in a non-relational foster child's life, and the lack of interactions between stakeholders is impactful on the non-relational foster child's life (Altshuler, 2007). In the mesosystem, the partnership between three of the main systems is crucial, including the foster parent, school personnel, and child welfare personnel. If biological parents are supportive and encouraging, they can be highly impactful in supporting the child to have successful outcomes and often reunification. In this case, biological parents may also be a part of the partnership. Other relationships participants identified between

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the foster parent and other stakeholders in this layer that may indirectly impact the foster parent-foster child relationship include the relationship between the foster parent and the caseworker, guardian ad litem, teachers, school counselors, athletic coaches, spouse, and other children. The relationship between foster parents and school psychologists was not identified. Stakeholder partnerships have the ability to help students be more successful in the educational setting, which, through the lens of ecological systems theory, has the potential to positively impact the dyadic relationships in the home setting.

Within the mesosystem, the central factor in a child's needs being met or not met was perceived to be correlated with the type and level of communication between stakeholders within the systems to either be working together to support the child with coordinated care or systems working in isolation with fragmented care. Non-relational foster children's needs were more likely to be perceived to be met when there was consistent communication between stakeholders, especially when at least one had an understanding of how to support a child who has been impacted by trauma. When school personnel and families have a shared responsibility for a student, students have higher academic achievement, increased homework completion, better school attendance, and are more likely to graduate on time (Lines, Miller, & Arthur-Stanley, 2011). On the other hand, when communication was perceived to be judgmental or limited, or the services were fragmented, the child's needs were less likely to be perceived as met. One common barrier in communication, consistent with research, was that when stakeholders have varied expectations for instructional style and child behavior, they are less likely to communicate across or within systems (Jones, 2013).

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Participants most frequently identified challenges and supports within this layer of ecological systems theory in their interviews, which may be due to the participants being involved or left out of many interactions in the mesosystem regarding the children they care for, so this layer is personally impactful to them as well.

Weaknesses in the Mesosystem. Weaknesses (Table 7) were (C1) participants having to advocate for the needs of the children in their care due to school staff not understanding how to support students who have been impacted by trauma and (C2) delays in communication between child welfare and other stakeholders.

Participants having to advocate for the needs of the children in their care due to school staff not understanding how to support students who have been impacted by trauma. One of the most discussed topics within this layer was foster parents having to advocate for the children in their care. Sixty six percent of participants discussed multiple times how they have had to take on the role of "advocate" for a child in their care due to the schools' lack of understanding of how to support a child who has been impacted by trauma resulting in the child receiving inappropriate services or being held to unrealistic expectations. It was not uncommon for other stakeholders to be brought into the discussion when a participant was advocating, such as a caseworker, guardian ad litem, biological parents, court appointed special advocate, school administrators, special education staff, and general education staff. There is no comparable research discussing how frequently foster parents take on the role of advocate for the children in their care in the school setting, so it is unclear if this is a common role that foster parents take on. As much as participants also found pride in being an advocate for the children in their care, it

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also indirectly negatively impacted the children at times. When some participants were having to advocate, they experienced stigma from school staff by being left out of meetings about a child, being told or eluded to that they were not the "parent," and teachers feeling uncomfortable to share information with them. For the participants that felt stigmatized, often the relationships and communication between caregivers and school personnel was negative, ingenuine, or broken. This impacted how much the participant felt comfortable to share with school personnel, which indirectly impacts the child and how he or she is supported in the school setting. Further, when participants had to take on the role of advocate it was highly time consuming. This indirectly impacts the child due to the participant having less time and energy to devote to relationship building and caring for the child.

Delays in communication between child welfare and other stakeholders. Another common weakness within this layer was that there was a significant delay of communication or very limited information communicated from child welfare to other stakeholders, which negatively impacted the child. With the delay of information sharing, comes delays in enrollment and services. Under the Colorado Department of Education's Every Student Succeeds Act (ESSA), students in foster care are entitled to immediate enrollment in school, regardless of the ability to produce school records. According to the law, if records are incomplete, the school must immediately contact the school of origin. The majority of participants said this was not their experience and that they were told the child could not be enrolled until the appropriate paperwork was received, which was consistent with the research by Pears et al. (2013), that stated many school districts fail to

allow a child to start school until his or her records have been received and if the school does allow the child to start without educational records, the child is often placed incorrectly or does not receive necessary academic and mental health services. The findings of this study related to delays in information sharing around children in foster care are consistent with the research by Pears et al. (2013). This is largely problematic for foster families and school psychologists should use their position to advocate for non-relational foster families by educating other school staff on the special education laws, including allowing students to be enrolled while waiting on previous school records.

Strengths in the Mesosystem. Strengths (Table 7) were (D1) participants having strong relationships and open lines of communication with school or child welfare personnel and (D2) having a high level of communication between systems.

Participants having strong relationships and open lines of communication with school or child welfare personnel. Participants expressed one of the greatest strengths within this layer to be when they felt they had strong relationships and open lines of communication with school or child welfare personnel. This resulted in the participant feeling supported navigating the education system as they were more comfortable asking questions and sharing information with school personnel, which indirectly impacted the child in a positive way. Some school staff had systems in place to communicate with parents and guardians consistently, which was also perceived as a support in navigating the education system for participants, as half of participants had only navigated the education system for themselves and therefore did not know what questions to ask or who to talk to when needs or concerns arose. Once again, school psychologists were not

included in discussion of participants' experiences, but school psychologists can use this information to increase the frequency of communication with parents they work with and become an entry point to facilitate communication and information sharing across the home and school settings. Home-school communication systems are critical, as the research by Jones (2013), denotes that communication between systems can begin to bridge the gap between school personnel and families by creating a sense of shared responsibility for youth. However, caregivers and school personnel are not the only stakeholders that need to communicate to support children in foster care.

Having a high level of communication between systems. Although it was uncommon, another strength that one participant described was a time that child welfare personnel were highly supportive in a timely manner; a caseworker ensured all enrollment paperwork was provided to school personnel while the child was transitioning to the participants home. This high level of communication between systems was not only supportive to the child, but also for the school and participant. Further, it formed a relational foundation between the caseworker and participant, which allowed the stakeholders to work together to better support the child. It was never expressed that school psychologists or other mental health professionals were consulted when a non-relational foster child was enrolled in school. One participant sought out a school counselor on her own, but no participants were directed to a school-based mental health professional.

Summary of the Mesosystem. The layer that was discussed most frequently by participants was the mesosystem, or the linkages between stakeholders that indirectly

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impact the non-relational foster child, which is consistent with the literature by Altshuler (2007). Within the mesosystem, the central factor in a child's needs being met or not met was perceived to be correlated with the type and level of communication between stakeholders within the systems to either be working together to support the child with coordinated care or systems working in isolation with fragmented care. Participants all discussed taking on the role of advocate for the children in their care, which led to discussion of many interactions between participants and other stakeholders within the mesosystem. There is no comparable research discussing how frequently foster parents take on the role of advocate for the children in their care in the school setting, so it is unclear if this is a common role that foster parents take on. However, when participants felt they had a strong relationship and open lines of communication with stakeholders, they were less likely to have to take on the role of advocate because they felt that they could work together to support the child.

Exosystem

The exosystem, as Bronfenbrenner (1977) defines it, an extension of the mesosystem that is comprised of the larger social systems, such as policies, role demands, other systems (school, work, extended family etc.), that indirectly affect the child or the child's environment, including influencing the dyadic relationship between a caregiver and a child.

Weaknesses in the Exosystem. Weaknesses within this layer (Table 7) were (E1) the widespread lack of understanding of how to support a child impacted by trauma across the education system, (E2) poor quality contact between a child and biological

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parent due to child welfare policy that aims for reunification with biological parents, and (E3) limited funding and resources in the public education system.

The widespread lack of understanding of how to support a child impacted by trauma across the education system. The widespread lack of understanding of how to support students who have been impacted by trauma in the public education system has a significant impact on school-age non-relational foster children, which made navigating the education system more challenging for participants. Within the exosystem, the lack of understanding also means the school environment is not typically conducive to supporting diverse learners, including children who have been impacted by trauma, through having highly structured routine and other developmentally appropriate supports such as flexible seating or calming corners. When educational settings are lacking structures that support diverse learners, students are less engaged and more academic and behavioral challenges often arise. This is especially impacting to children in foster care, as according to Pears et al., (2013) school engagement is a protective factor in their lives and significantly lowers engagement in health-risk behaviors. This is also a critical challenge of non-relational foster parents navigating the education system for the children in their care, as they are having to take time to advocate to get the needs met for the children in their care in other ways. This further impacts the child, as their guardian has less time to build a relationship with the child or support the child in other ways.

Poor quality contact between a child and biological parent due to child welfare policy that aims for reunification with biological parents. Another commonly discussed and highly impactful structure within the exosystem is the child welfare policy that aims

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for reunification with biological parents. This policy often results in foster children having contact with their biological parents while living in a foster home. Multiple participants described a significant change in behavior of the child in their care after contact with his or her biological parents that sometimes also carried over into the school setting. This is consistent with the research by Sen and Broadhurst (2011), that states, if children in foster care have poor quality or problematic contact with their biological parents, they are at a higher risk for disruption in both foster home and school placement. Some participants felt that the foster care system itself was set up in a way that does not always give much notice to the foster parent or child surrounding when an interaction with biological family members or a transition may occur. This was perceived to be detrimental to the child by participants as it does not allow proper time for the foster child or foster parent to prepare for the interaction or transition mentally. Getting the news that a child is transitioning to another home, regardless of type of placement, can cause significant strain on the dyadic relationship in the home setting as well as on relationships in the school setting. Often children cope with the loss by breaking the relationship with the foster parent or other stakeholders. Discussing the impact of the foster care reunification system, once again demonstrates that there may be times that the school meeting or not meeting the child's needs does not impact the placement stability, but it still has the power to increase the positive outcomes for the child. School psychologists have training to support this transition and collaborate with teachers and non-relational foster parents, but no participants noted awareness of a school psychologist being involved in their experience.

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Limited funding and resources in the public education system. Funding and resources available were two components in the exosystem that were perceived to impact a child's needs being met or not met in the school setting. The less funding and resources available, the less likely it was that a school district could provide the appropriate supports to meet a child's needs. Education funding often limits the ability for school districts to provide the resources or supports that have been identified to meet the needs a non-relational foster child, especially if it requires an additional staff hire such as a one-on-one paraprofessional. School districts also have limited funding to train staff to understand the impacts of trauma on the developing brain and how to support students that have been impacted by trauma. Unfortunately, most educators are not taught about the impact of trauma on the brain or how to support a child who has been impacted by trauma in their teacher education programs. Yet, even if teachers or other school staff do have some understanding of atypical brain development and how to identify appropriate supports in the classroom, because of a lack of funding and resources teachers are often so overworked and pressured to increase standardized test scores that there is limited time to implement appropriate interventions for students. Research by Day et al. (2014), shows that when children in foster care are misdiagnosed or not supported appropriately, they often do not overcome their challenges.

Strengths in the Exosystem. Strengths (Table 7) were: (F1) participants history including professions and college education related to child welfare or special education and (F2) school staff having consistent communication system in place with caregivers.

Participants history including professions and college education related to child welfare or special education. The biggest support within the exosystem in navigating the education system was participants past education and work history. All participants had a history that allowed them to be highly educated around typical and atypical child development or child welfare and almost all participants had an understanding of the impact of trauma on brain development and how to support children who have been impacted by trauma. Although participants often had to advocate for the children in their care, they were also able to educate other stakeholders working with the children they care for and indirectly attempt to get the children's needs met. As stated before, Scherr (2014) alleged the first step in supporting children in foster care is to understand the basic demographic of children in the foster care system and why they require comprehensive and consistent support at all tiers of a multitiered system of support (MTSS), as well as additional supports systemically, which almost all participants had. Even the participants with a special education background did not think that special education staff, including school psychologists, were well-versed in understanding how to respond to and support children that have been impacted by trauma.

School staff having consistent communication system in place with caregivers. Schools having a concrete system in place to routinely communicate between the home and school settings was another significant strength within the exosystem. The factors discussed in relation to the microsystem demonstrated how critical open and consistent communication is between stakeholders. Having a home-school communication system between caregivers and school staff was found to be highly supportive and relational,

which led to more information being shared across stakeholders to better support the child. However, all systems that participants reported were not consistent even within the same school or across the same grade. Specific teachers used specific apps or online programs to share information with parents, but participants reported that it was not always updated in a timely manner and it was a challenge for some caregivers having to navigate multiple platforms. The research outlines the importance of communication across settings, but this is an area that school staff did not consistently follow through on. It is typically teacher or staff dependent and not consistent throughout the school building, so this can make it challenging for parents to know where to look for communication or know how to best communicate with school staff.

Summary of the Exosystem. Within the exosystem, the broader societal systems that were perceived as most impactful were the lack of understanding of how to support a child impacted by trauma among educators, the reunification policy in child welfare, education funding, participant education, and home-school communication systems. The widespread lack of understanding among educators is impactful at the systems level because it results in school environments not typically being conducive to supporting diverse learners, but limited education funding also plays into this challenge. Outside of the school setting, the child welfare policy around reunification with biological parents was perceived to negatively impact non-relational foster parents and the dyadic relationship in the foster home due to the lack of systematic communication and preparation for interactions between non-relational foster children and biological family members. Participants educational and work history was a strength that counteracted

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some of the challenges within this system because almost all participants had an understanding of the impact of trauma on brain development and how to support children who have been impacted by trauma. This allowed participants to be strong advocates for the children in their care and to educate other stakeholders on why shifting or adding specific supports for a child would be beneficial. This also speaks to the potential positive impact that school districts training school personnel could have on supporting all students who have been impacted by trauma. Another shift that school personnel can consider within this layer is a shift toward a consistent communication platform school-wide with guidelines on how often it will be updated or what will be included in the communication. Consistent with my findings, Lines, Miller, and Arthur-Stanley, (2011) outlined the importance of communication across settings, but this is an area that school staff did not consistently follow through on because participants found that communication systems were typically teacher or staff dependent and not consistent throughout the school building.

Macrosystem

The macrosystem is comprised of the overarching characteristics of a given culture or subculture (Bronfenbrenner, 1994). Factors in a the macrosystem that can influence a foster child might include stakeholder beliefs and customs (religious beliefs, cultural beliefs and practices, lifestyle), societal beliefs and ideas, and politics. These factors are not static over time, but evolve over time.

Weaknesses in the Macrosystem. Weaknesses within the macrosystem (Table 7) were (G1) societal stigma around child welfare, (G2) limited societal understanding of

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the role of school psychologist, and (G3) difference in lifestyle between adult

stakeholders and non-relational foster children.

Societal stigma around child welfare. The main social influence within the

macrosystem that impacted participants navigating the education system was the societal

stigma associated with child welfare. Some research has shown that the stigma of being

in foster care can pose significant barriers to educational success for many foster

children, especially impacting peer relationships (Finkelstein, Wamsley, & Miranda,

2002). The non-relational foster children the participants care for were faced with

questions from peers and treated differently by school personnel. Participants also

experienced being stigmatized by being told they were fostering for the wrong reasons,

were treated as if they were not impactful in the child's life, and were intentionally left

out of important decision making. When the societal stigma was perceived by

participants, communication and relationships changed dramatically. Consistent with the

research by Jones (2013), distrust and lack of recognizing differences as strengths can be

a barrier to open communication between systems. Societal stigma around child welfare

has also been a contributing factor in the limited amount of research around supporting

foster parents and children in past decades.

Limited societal understanding of the role of school psychologist. Additionally,

the societal understanding of the role of a school psychologist continues to be limited and

may have also impacted participant responses. Participants may not have been aware of a

school psychologist being involved in supporting the needs of the children in their care.

School psychologists should continue to spread awareness of their role to educators,

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caregivers, and community members to increase societal understanding of what the role entails and how school psychologist can be utilized to support students, families, and teachers.

Difference in lifestyle between adult stakeholders and non-relational foster children. Another common challenge among participants was a significant difference in regards to beliefs (religious, social, cultural views etc.) and lifestyle (exercise, eating habits, type of social interaction etc.) of the participants compared to the lifestyle of the children in their care. This is believed to be true for many adult stakeholders that come into contact with a non-relational foster child, including teachers, coaches, caseworkers, and school psychologists. The adult stakeholders and foster children typically live very different lifestyles as many children are removed from their biological parents due to the parents' lifestyle. Participants described many instances where a child expressed knowing things that participants felt the child should not have been exposed to for his or her age and of children holding views and ideas that were very different from the foster parent due to the exposure they had in other environments. How the foster parent or school staff approach the child regarding the difference in beliefs or lifestyle, can impact the relationships positively or negatively.

Strengths in the Macrosystem. Strengths (Table 7) were (H1) a shift in societies acceptance and discussion of non-traditional families and mental health, as well as (H2) stakeholder's beliefs about supporting non-relational foster children.

A shift in societies acceptance and discussion of non-traditional families and mental health. The main strength of the macrosystem was society's growing

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understanding of both non-traditional families and discussing mental health. This understanding allowed for the stigma around child welfare to begin to diminish resulting in more research on child welfare. Since more research has been published, there has been more discussion around the idea that outcomes are often poor educationally for this population. As research has been disseminated to the education field, there has been a more significant push in schools to educate staff on trauma-informed approaches as school systems begin to recognize that the current system is often not meeting, or exacerbating, the needs of foster children and other children who have been impacted by trauma. It is optimistic that these changes are occurring in society because if the externalizing behaviors arising from a history of trauma continue into a child's adolescence—because his or her needs are not being met—there is a significantly higher risk of the child being involved in the adult criminal system if proper interventions are not put in place (Cooley et al., 2015). Due to the increase in research and discussion of child welfare and mental health, society has become more accepting of non-traditional families in recent generations. Some participants described it to be easier for the children in their care to be accepted in peer groups and not feel stigmatized, because non-traditional families are much more common than they have been in the past.

   Stakeholder's beliefs about supporting non-relational foster children. Another strength within the macrosystem is the belief that stakeholders (foster parents, school staff, school psychologists, child welfare personnel etc.) hold around why they chose to be in the role of caring for someone else's children. Similar to all participants in this study, stakeholders who believed they could have a positive impact on a non-relational

foster child's life and chose this role to support a child in need, view this relationship

through a lens that can have a positive impact on the dyadic relationship with the non-

relational foster child. If the stakeholder chose this role for other reasons, including for

income, the lens they have could negatively impact the dyadic relationship with the non-

relational foster child.

Summary of the Macrosystem. Discussion of the macrosystem demonstrated the

impact of overarching differences on relationships and communication. Societal stigma

around child welfare significantly impacted how others interacted with participants and

the children in their care. Consistent with research by Finkelstein et.al. (2002),

participants expressed that experiencing being stigmatized posed a significant barrier to

educational success for the children in their care. When the societal stigma was perceived

by participants, communication and relationships changed dramatically. Consistent with

the findings of Jones (2013), distrust and lack of recognizing differences as strengths can

be a barrier to open communication between systems. However, participants also

acknowledged a societal shift in recent decades that has resulted in a growing

understanding of non-traditional families and discussing mental health. Another

challenge in this layer was differences between the adult stakeholders and non-relational

foster children. The adult stakeholders and foster children typically live very different

lifestyles as many children are removed from their biological parents due to the parents'

lifestyle. The impact of differences extended to include lack of understanding of the role

of school psychologist as a society, which results in school psychologists being

underutilized to support families and students. Despite the many differences between

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stakeholders and non-relational foster children, participants expressed that when

stakeholders believed they could have a positive impact on a child and choose to take on

that role, the child would be positively impacted.

Chronosystem

The chronosystem represents the passage of time for the non-relational foster

child and non-relational foster parent, as well as for the surrounding environment. The

chronosystem, or passage of time, has the power to reduce or exacerbate a child's needs

depending on whether or not the child's needs are being met.

Weaknesses in the Chronosystem. Weaknesses within the chronosystem (Table

7) were (I1) limited information being provided to non-relational foster parents and (I2)

children's challenges being exacerbated over time due to inappropriate services or

supports being provided, and (I3) lack of, ingenuine, or judgmental communication

breaking down relationships over time.

Limited information being provided to non-relational foster parents. One of the

biggest weaknesses of this layer, in regards to navigating the education system, was that

participants often had limited information communicated to them from child welfare

about the child being placed with them. The research states that 46% of children are

placed in nonrelative homes where the foster parents may receive little, if any,

background information on the child (AFCARS, 2015). This makes it challenging for

non-relational foster parents to complete paperwork to enroll the child in school and to

work with teachers to understand how to best support the child. Since limited information

is typically known, supports become reactive rather than proactive until enough time has

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passed that foster parents or school personnel have a better understanding of the child and

his or her needs.

Children's challenges being exacerbated over time due to inappropriate services or supports being provided. When there is a lack of understanding of how to support a child who has been impacted by trauma, it often results in inappropriate supports being put in place for the child; the passage of time often exacerbates the child's challenges. When the child's challenges are exacerbated, relationships are often strained in the child's life.

Lack of, ingenuine, or judgmental communication breaking down relationships over time. Another weakness of the chronosystem is that the passage of time allows for relationships to dwindle or barriers to be built between school staff, non-relational foster parents, non-relational foster children, and child welfare personnel. Continued strain on the relationship leads to a breakdown in the relationship and when this relationship is between a non-relational foster parent and non-relational foster child, it can result in placement instability for the non-relational foster child (Leve et al., 2012). If a child's needs are not being met over time, it is likely that strain on the relationship will increase negatively impacting the dyadic relationship

Strengths in the Chronosystem. Strengths within the chronosystem (Table 7) were (J1) a child's needs being met over time leading to positive outcomes and (J2) non-relational foster children strengthening relationships with stakeholders over time.

A child's needs being met over time leading to positive outcomes. When a student's needs were being met, the passage of time allowed the child to begin to feel

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successful and have more positive outcomes over time. A child's needs being met typically results in a decrease in internalizing and externalizing behaviors, which positively impacts dyadic relationships over time. Further, academic engagement increases and relationships with peers are strengthened, all of which are protective factors for non-relational foster children. However, a common misconception among participants was that significant change would be seen more quickly than some of the research denotes. Emerson and Lovitt (2003), noted that it takes a foster child an average of 4 to 6 months to adjust to the new educational setting because the child has to adjust to new teachers, new peers, new expectations, new rules, new schedules, new school climate, and a new curriculum. Over time, it would be expected that if the child's needs were being met that consistent improvement would be seen, so it can be defeating to stakeholders if the child is not making progress over a period of several weeks to months. During this adjustment period, children may miss out on instruction causing them to fall further behind their peers academically (Pears et al., 2015). This does not mean that improvement will not be seen if the child's needs are being met, the improvement just may not be as expected. This emphasizes the importance of stakeholders in a non-relational foster child's life understanding the impact of trauma on the brain, how to properly support the child over time, and how to monitor the child's progress appropriately.

Non-relational foster children strengthening relationships with stakeholders over time. The passage of time, or the chronosystem, also has the potential to strengthen the caregiver-child relationship, as well as other stakeholder relationships. Participants noted

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that when a child's need were being met in the educational setting that it positively impacted the dyadic relationship between the non-relational foster parent and the non-relational foster child in the home setting. It is also believed that the relationship between other adult stakeholders and non-relational foster children would be strengthened when a child's needs were being met, including relationships with school staff, peers, and child welfare personnel. However, the foster parent – foster child relationship is one of the most critical because if the foster parent and foster child build a strong relationship over an extended period of time, this relationship can decrease the likelihood of placement mobility for a child in non-relational foster care. (Cooley et al., 2015). If a child's needs are being met over time, it is likely that the dyadic relationship will strengthen over time.

    Summary of the Chronosystem. Discussion of the chronosystem focused on change that occurs over time, both positively and negatively. Participants saw positive change occur over time when a child's needs were being consistently met across settings and negative changes when a child's needs were not being met across settings. Needs being met or not met were perceived to be dependent on the level of communication between stakeholders about the child, as well as the services and supports being provided or not provided. When a child's needs were being met over time it was perceived to positively impact the dyadic relationship in the home and when a child's needs were not met over time it was perceived to negatively impact the dyadic relationship. Consistent with research by Leve et al., (2012), continued strain on a relationship led to breakdown in relationships. On the other hand, consistent and genuine communication over time strengthened relationships.

Novel Findings

There were two novel findings that came out of my study that prior research has not stated. The first is that a non-relational foster child's needs being met or not in the school setting has an impact that extends beyond educational success or outcomes. A child's needs being met or not met has significant impact on a child's relationships with caregivers in the home setting, which is critical for this, often mobile, population. Meaningful interaction occurs between non-relational foster parents and non-relational foster children and that the relationship can be positively impacted by the child's needs being met in the school setting or negatively impacted by the child's needs not being met in the school setting. The second novel finding is that non-relational foster parents see this role as a significant part of their identity and hold a deep level of meaning related to their role. Unlike some other subpopulations of foster care, non-relational foster parents seek out this role as a vocation and this level of meaning may be an uncategorized feature of being a non-relational foster parent and taking on this identity. School psychologists and other school staff should shift their perspective to appreciate that non-relational foster parents are eager to be an active partner in supporting the children in their care. Non-relational foster parents are similar to new parents in that they want to be highly involved and collaborate. Assuming this perspective from the start, rather than the common assumption that a foster child does not have involved parent figures, may positively shift how school staff interact with them.

This positive shift in thinking may increase communication and build stronger home-school partnerships, which will likely lead to the child being supported more

appropriately and consistently across settings. It may also result in reducing the stigma around non-relational foster parents.

<center>**Recommendations for School Psychologists**</center>

Out of this research, five recommendations were identified specific to the role of school psychologists in the Colorado public school setting. These recommendations were derived directly from participants expression of their experience of the phenomenon of navigating the education system for the children in their care. The recommendations for school psychologists include (a) school psychologists educating parents and school staff of what the role of school psychologist entails to increase frequency of collaboration and consultation, (b) school psychologists supporting school staff in understanding the impact of trauma on brain development and responding to student behavior in a supportive way, (c) school psychologists supporting school staff in engaging in self-reflection to identify or become aware of implicit bias related to working with families in child welfare, (d) school psychologists advocating for more inclusive new student enrollment and orientation practices, and (e) school psychologists advocating for home-school communication systems.

School Psychologists Educating Others About Their Role.

One of the main findings of this research was that school psychologists were not perceived to play an instrumental role or be involved in meeting the needs of non-relational foster children in the school setting. This may be due to a lack of understanding of the role and competencies of a school psychologist. Additionally, some of the impact a school psychologist may have on a child who have been impacted by trauma may be

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indirect through consultation or collaboration with school staff or through advocating for behavioral, disciplinary, or social-emotional shifts in thinking. It is recommended that school psychologists support all parents, including non-relational foster parents, in understanding the school psychologist's role in the school setting. This could be done in a variety of ways including by sending out the National Association of School Psychologists (NASP) informational handout to parents or by hosting a parent education night to support parents in understanding the role of school psychologist and how parents can access and utilize a school psychologist or other school-based mental health professional's skill set. It is also recommended that school psychologists support administration and other school staff on understanding their role in the school setting to increase the frequency of collaboration and consultation with school psychologists to implement preventative measures and when academic, behavioral, or social-emotional concerns arise with students, especially if there is a known history of trauma or known child welfare involvement. The recommendation for school psychologists to make parents and school staff aware of their role and expertise is suggested to increase school psychologists direct and indirect involvement in meeting the needs of non-relational foster children in the public school setting.

School Psychologists Supporting School Staff in Understanding the Impact of Trauma on Brain Development and Responding to Student Behavior in a Supportive Way.

The first theme of this study was the perception that school staff often lacked an understanding of the impact of trauma on brain development and therefore held

unrealistic expectations of children in foster care or provided inappropriate services or supports to the child due to their lack of knowledge around trauma. Therefore, the next recommendation is for school psychologists to support staff in understanding the impact of trauma on the brain, how that relates to a student's behavior, and how staff can support this population. This may require school psychologists to continue educating themselves in the impact of trauma on brain development and the associated supports. The intended outcome of this recommendation would be for school staff to have a better understanding of why a child may be performing or behaving in a certain way due to a history of trauma and know how to react or support the child in an appropriate way. This recommendation would require a large commitment from school psychologists and may be difficult to complete independently. One idea would be to have a team of school psychologists and other mental health professionals within a district compile resources to support them in educating other staff members on the impact of trauma on brain development and encouraging self-reflection for staff members to better meet the needs of children who have been impacted by trauma. Another option would be to advocate for a trauma-informed training program to be introduced at the district level. A training program based on the literature regarding adverse childhood experiences discussed in the literature review that could be considered would be Dr. Bruce Perry's neurosequential model of education (NME), as it is designed to support educators in understanding student behavior and performance in a neurodevelopmentally-informed, biologically respectful perspective on human development and functioning. This program is currently being piloted in one Colorado public school district and had shown success in school districts

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across the nation, as it applies to supporting all children. School psychologists advocating for a training program or educating staff themselves would support educators in understanding how to set up the educational environment in a supportive way for children who have been impacted by trauma and support adults in responding to behavior of all children in a neurodevelopmentally appropriate way in an attempt to better meet children's academic, behavioral, and social-emotional needs.

School Psychologists Supporting School Staff in Engaging in Self-Reflection.

The second theme, stigma, discussed both participants and the children in their care feeling stigmatized due to their involvement with child welfare. Therefore, similar to the previous recommendation, it is recommended that school psychologists support staff in understanding how to engage in self-reflection to identify or become aware of implicit bias related to working with families in child welfare. This may require school psychologists to have courageous conversations with their coworkers. This would ideally result in the staff members to be aware of their own implicit biases and what dysregulates them, so they are able to respond in a biologically sensitive and developmentally appropriate way to the child. Additionally, this work should focus on reflecting on how school staff have interacted with foster-parents. Non-relational foster parents take on their role as part of their identity and when the interactions with stakeholders was perceived as stigmatizing, a barrier arose and resulted in limited communication. Once again, this recommendation would require a large commitment from school psychologists and may be difficult to complete independently. School psychologists could also advocate training

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on implicit bias to be offered to teachers districtwide. Such training would support school psychologists in collaborating with teachers around implicit bias.

School Psychologists Advocating for More Inclusive New Student Enrollment and Orientation Practices.

Another recommendation for school psychologists is to advocate for more inclusive new student enrollment and orientation processes to be established and sustainable throughout the school year, regardless of when a child is enrolled. As discussed in response to research question one, the common challenges non-relational foster parents encountered were with the enrollment and orientation processes as both the paperwork that typically needs to be completed and the orientation process were set up to support traditional families. Therefore, it is recommended that school psychologists advocate to change enrollment and orientation policies to better meet the needs of all incoming students, including non-relational foster children. Often the paperwork for enrollment is typically generic and therefore not geared toward gathering information that would specifically support non-relational foster children. School psychologists can advocate for districts creating separate, optional, information gathering once a student is identified as being involved in child welfare. This would allow the school to have access to more information about the child and hopefully be able to use this information to better meet the needs of the child. Information that may be considered to be gathered would include questions about the legal rights of other stakeholders, how to refer to the foster parent (ex. by name, as "parent" etc.), what information can be shared with specific stakeholders, or how long the child has been living in the household. School

psychologists advocating for additional information to be collected for non-traditional families may take some of the burden off the child to have to explain his or her situation to school staff, which can be further traumatizing. This recommendation may better support the transition to a new school setting for non-relational foster children.

Another suggestion for school psychologists advocating for more inclusive enrollment and orientation processes would be for school psychologists to advocate for orientation systems that allow for children to build relationships with both adults and peers in the school setting. One idea for relationship building would be having a "buddy program" in place for students where they are paired with a specific student and a specific adult they can go to with questions, to check-in, and for support in navigating the school setting. This recommendation would support all students and may help to reduce the stigma around a child being in foster care, as all students could receive this support. It would be recommended that the "buddy system" remain in place for every incoming student for at least one year as the research notes that it takes four to six months for a student to adjust to a new educational setting (Emerson & Lovitt, 2003). It would also be beneficial for school psychologists to advocate for a parent and guardian orientation process that would provide parents new to the school with all of the information needed for them to understand how to navigate the school in order to allow the parent or guardian to have a better understanding of how to support the child and obtain information as needed. The goal of this recommendation would be for school psychologists to advocate to better meet the needs of all incoming students and families, including non-relational

foster families, to support stakeholders in meeting the needs of the child and supporting

the child across settings.

School Psychologists Advocating for Home-School Communication Systems.

As uncovered in the third theme of this study, the lack of communication between

stakeholders can result in barriers across settings to getting the child's needs met in an

appropriate way. Many stakeholders are well-intentioned, but if they do not understand

the impact of trauma on the developing brain or if there is a divide between how a child is

supported across settings it can negatively impact the child. Therefore, it is recommended

that school psychologists advocate for a communication system to be developed to

support stakeholders in sharing information across the school setting, with child welfare

personnel, and with non-relational foster parents. It is critical that educators communicate

with the many stakeholders in a foster child's life to ensure that a comprehensive

approach is taken to support the child and best meet the child's needs. Currently, many

stakeholders, including school psychologists, work in isolation. This can be detrimental

to the child as information is not being shared consistently which may impact how

stakeholders work to support the child. School psychologists are in a position to use their

knowledge around the positive impacts of home-school communication to advocate for

school-wide systems to be put in place or to advocate for differentiated home-school

communication for specific students, such as non-relational foster children.

Communicating across settings can have a positive impact for all students, but it is even

more important when a child has many stakeholders involved in decision making. School

psychologists can take the lead on ensuring a home-school communication system is in

place and being used with fidelity. The goal of this recommendation would be for school psychologists to use their knowledge and expertise to increase the amount of communication and information sharing that is occurring across stakeholders involved in a non-relational foster child's life in an attempt to better meet the child's needs across the home and school settings.

<div align="center">**Recommendations for Future Research**</div>

The findings of this study offer a foundation from which future research can build upon to continue to explore non-relational foster parents' perception of the relationship between non-relational children's needs being met or not met in the school setting and their relationship with non-relational foster parents. Taking into account the limitations of the study, further research is needed with larger and more diverse sample sizes to investigate the transferability of the themes identified. Future research is needed to continue to identify the breakdown between best practices for supporting children who have been impacted by trauma in the education system and the current state of supporting these children. Moreover, additional research will assist in exploring the importance of meeting foster children's needs in the school setting as a potential factor that may positively influence their outcomes by increasing stability in foster care placements, as this research only explored the perceived relationship between a child's needs being met or not met in the school setting and the impact of the needs being met or not met on the foster parent-foster child relationship. Future research specific to school psychologists is recommended due to school psychologists not being identified by

participants as being instrumental stakeholders in meeting or not meeting the needs of the children in their care. Recommendations for future research include (a) continue to investigate the impact of a child's needs being met or not in the education setting on the dyadic relationship in the home setting, (b) continue to investigate the self-identity related to being a non-relational foster parent, (c) investigate the impact of race and ethnicity for non-relational foster families navigating the public education system, (d) investigate the level of training around the impact of trauma on the developing brain and trauma-informed practices in school psychology graduate programs, (e) investigate a potential gap in school psychologist training and practice in supporting children and families who have been impacted by trauma, and (f) evaluate if school districts in Colorado are providing professional development around trauma informed practices to school-based mental health professionals.

Continue to Investigate the Impact of a Child's Needs Being Met or Not in Education Setting on the Dyadic Relationship in the Home Setting

The findings of this study offer a foundation from which future research can build upon to continue to explore the relationship between a non-relational foster child's needs being met or not in the school setting and the impact of the needs being met or not on the dyadic relationship between caregiver and child in the home setting. Taking into account the limitations of the study outlined in chapter three, further research is needed with larger and more diverse sample sizes to investigate the transferability of this finding. It may be beneficial to consider engaging non-

relational foster children as participants as it may provide a different lens through which student experience and needs would be identified and discussed. Additional research to investigate this finding will assist in exploring the importance of meeting non-relational foster children's needs in the school setting as a potential factor that may positively influence their outcomes across significant contexts. Future research may consider examining the impact of the needs being met or not met for the child in the school setting on the child's placement stability or mobility in his or her foster care placement, as this research only explored the perceived relationship between a child's needs being met or not met in the school setting and the impact of the needs being met or not met on the foster parent-foster child relationship.

Continue to Investigate the Self-Identity Related to the Role of Non-Relational Foster Parent.

The second novel finding of this study was that non-relational foster parents see this role as a significant part of their identity and hold a deep level of meaning related to their role. Unlike some other subpopulations of foster care, non-relational foster parents seek out this role as a vocation. Future research should include larger and more diverse sample sizes to determine the if this finding is generalizable to other non-relational foster parents, and also other subpopulations of foster caregivers. Future research could also examine the impact of school psychologists and other school staff increasing their appreciate that non-relational foster parents are eager to be an active partner in supporting the children in their care to determine its impact on outcomes for the student or family. Future research could examine the level of communication between school staff and non-

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relational foster parents, the perceived relationship between school staff and non-relational foster parents, the perception of a child's needs being met or not in the education setting, or the non-relational foster families perception of being stigmatized by school staff.

Investigate the Impact of Race and Ethnicity for Non-Relational Foster Families Navigating the Public Education System.

It is recommended that future research investigate the impact of race and ethnicity for non-relational foster families navigating the public education system. This variable was not investigated in my study, but was identified by two participants. It is not uncommon for a non-relational foster parent and non-relational foster child to have a difference in race or ethnicity. Future research could investigate the impact of race and ethnicity when there are similarities and when there are differences between the identities of the non-relational foster parent and child. Additionally, future research could investigate how foster families perceive race and ethnicity to impact how the non-relational foster parent or child are treated by school staff.

Training for School Psychologists Around Trauma

Future research may target the typical level and intensity of training for school psychologists around the impact of trauma on the developing brain and how to support children that have been impacted by trauma in the educational setting that is addressed in graduate school programs. This research could evaluate practicing school psychologists' perceptions of how well their graduate programs prepared them to support children in the school setting who have been impacted by trauma

through evaluation, consultation, collaboration, and intervention. This research may also evaluate what experiences in graduate school or after school psychologists feel have best prepared them for working with this population.

Gap Between School Psychologist Training and Practice

Additional research is warranted to determine if there is a gap between school psychologist training and practice in regard to working with students and families that have been impacted by trauma. This research is necessary to begin to identify the breakdown between best practices for supporting this population in the education system and the current state of supporting these children. Researchers may want to consider outlining the ideal state of practice for school psychologists supporting people who have been impacted by trauma and the aligned training that would be required to prepare school psychologists to effectively support this population, as well as other stakeholders supporting this population.

This could be compared to the current state of practice and training in school psychology graduate school programs to begin to identify where the breakdown may be occurring. This research should also investigate the factors contributing to the breakdown between best practices and the current state of practice to begin to understand where systematic changes may occur within school psychology graduate programs.

Evaluating Current Psychoeducation on Trauma for School-Based Mental Health Professionals in Colorado

As the research around the impact of trauma on the brain and supporting students who have been impacted by trauma in the educational setting continues to grow, future research could also evaluate if and how school districts across Colorado are providing professional development to school psychologists and other school-based mental health professionals around supporting students who have been impacted by trauma. This research may also serve to identify potential gaps in systematic dissemination of information around understanding how to best support students and families who have been impacted by trauma. This could be done by evaluating if trauma informed practices are provided in professional development and if so, are practitioners disseminating the information gained to other staff members through consultation, collaboration, or psychoeducation.

Conclusion

Previous research had not investigated the connection between a non-relational foster child's needs being met or not met in the school setting to the foster parent-foster child relationship in the home setting. To address the void in scholarly literature, my study explored how non-relational foster parents experienced navigating the education system for the non-relational foster children in their care. I interviewed six non-relational foster parents who have cared for at least one school-aged non-relational foster child enrolled in the Colorado public school system. The in-depth face-to-face and telephone interviews with participants provided rich data on the phenomenon being studied. Through this investigation I was able to answer three research questions:

1. What is the experience of non-relational foster parents navigating the education system?

2. What needs do non-relational foster parents perceive are being met and not met in the educational setting for the school-age children in their care?

3. How do non-relational foster parents perceive the needs of the children in their care being met or not met in the school setting to impact the foster parent-foster child dyadic relationship in the home setting?

My investigation utilized phenomenological methodology and four levels data analysis to (a) understand participant perspectives and history through descriptive analysis, (b) form three themes and 10 subthemes through emergent analysis, (c) answer the three research questions through a priori analysis and (d) thematic analysis to discuss the findings of the first three levels of analysis in relation to the literature through the lens of the five layers of the ecological systems theory.

The purposeful design focused in on the voice of the participants. Each non-relational foster parent interviewed shared valuable perspectives into the phenomenon. This research project has provided a deep and personal account of how non-relational foster parents experience navigating the education system for the children in their care.

Two novel findings came out of this study. Study findings revealed that a non-relational foster child's needs being met or not in the school setting does have an impact that extends beyond educational success or outcomes, by having a significant impact on the dyadic relationship between non-relational foster parent

and non-relational foster child. An additional unexpected finding was that non-relational foster parents see this role as a significant part of their identity and hold a deep level of meaning related to their role. Unlike other subpopulations of foster care, non-relational foster parents seek out this role as a vocation and this level of meaning may be an uncategorized feature of being a non-relational foster parent and taking on this identity. This study is a first step to better understanding of how school psychologists can better meet the needs of both non-relational foster parents and children, directly and indirectly.

Recommendations for school psychologists include (a) school psychologists educating parents and school staff of what their role entails to increase frequency of collaboration and consultation, (b) school psychologists supporting school staff in understanding the impact of trauma on brain development and engaging in self-reflection to identify or become aware of implicit bias related to working with families in child welfare, (c) school psychologists advocating for more inclusive new student enrollment and orientation practices, and (d) school psychologists advocating for home-school communication systems.

Recommendations for future research specific to school psychologists include: (a) expand on the impact of a child's needs being met or not in the education setting on the dyadic relationship in the home setting, (b) expand on the self-identity related to being a non-relational foster parent, (c) investigate the impact of race and ethnicity for non-relational foster families navigating the public education system, (d) investigate the level of training around the impact of trauma

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on the developing brain and trauma-informed practices in school psychology

graduate programs, (e) investigate a potential gap in school psychologist training

and practice in supporting children and families who have been impacted by trauma,

and (f) evaluate if school districts in Colorado are providing professional

development around trauma informed practices to school-based mental health

professionals.

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Appendix A

CWTS Training Manager Recruitment Email

Dear Michelle Mares,

I am a doctoral student in the Child, Family, and School Psychology program at the University of Denver and am currently conducting my dissertation research on how non-relational foster parents experience navigating the educational system, what needs they see being met or not met for the children in their care within the school setting, and how that impacts the foster parent- foster child relationship in the home setting. I am reaching out to you because I have identified you as an expert in this field. I would like to request the participation of the non-relational foster parents in your training group to participate in my study.

The purpose of this research is to create a better understanding of how school psychologists can support non-relational foster families. To date, there are no known resources regarding how to specifically support non-relational foster families and students within the school setting. Through your expertise and the joint effort of other experts, I hope to identify what needs non-relational foster parents perceive as being met or not met in the school setting and create a better understanding of how those needs being met or not met impacts the dyadic relationships in the home setting. Additionally, I hope to understand what it is like for a non-relational foster parent navigating the educational system and how school psychologists can support this sub-population of families.

The experts in this study include non-relational foster parents licensed in the Colorado area. For the purposes of this research, participants must have been the primary caregiver for at least one non-relational school-age foster child in the past year, agree to participate in two interviews, and speak English fluently.

I would like to learn from the non-relational foster parents in your group about their experiences surrounding navigating the education system for the non-relational children in their care. Their opinion is valuable to developing guidelines for an important, but under-researched area of foster care. Study participation involves two 45 to 120 minute interviews that take place within 10 days of each other, if possible. Their answers will be anonymous throughout the life of the study. To thank you for your time and wiliness to allow me to recruit participants from your group, you will be provided with the final outcomes of the study upon request. If non-relational foster parents in your group are interested in participating, please provide me with their contact information and I will contact them directly.

Regards,
Emma Topf, MA

Appendix B

Respondent Recruitment Email

Dear _____,

I am a doctoral student in the Child, Family, and School Psychology program at the University of Denver and am currently conducting my dissertation research on how non-relational foster parents experience navigating the educational system, what needs they see being met or not met for the children in their care within the school setting, and how that impacts the foster parent- foster child relationship in the home setting. I am reaching out to you because I have identified you as an expert in this field. I would like to request your participation as a non-relational foster parent to participate in my study.

The purpose of this research is to create a better understanding of how school psychologists can support non-relational foster families. To date, there are no known resources regarding how to specifically support non-relational foster families and students within the school setting. Through your expertise and the joint effort of other experts, I hope to identify what needs non-relational foster parents perceive as being met or not met in the school setting and create a better understanding of how those needs being met or not met impacts the dyadic relationships in the home setting. Additionally, I hope to understand what it is like for a non-relational foster parent navigating the educational system and how school psychologists can support families like yours.

The experts in this study include non-relational foster parents licensed in the Colorado area. For the purposes of this research, participants must have been the primary caregiver for at least one non-relational school-age foster child in the past year, agree to participate in two interviews, and speak English fluently.

I would like to learn from you about your experiences surrounding navigating the education system for the non-relational children in your care. Your opinion is valuable to developing guidelines for an important, but under-researched area of foster care. Study participation two 45 to 120 minute interviews that take place within 10 days of each other, if possible. Your answers will be anonymous throughout the life of the study. To thank you for your participation, you will be provided with the final outcomes of the study upon request. If you are interested in participating, please read over the informed consent and reply to me with dates and times you would be available for the initial interview. Thank you, and I look forward to your participation.

Regards,

Emma Topf, MA

Appendix C

Informed Consent

Title: In Their Own Words: A Qualitative Study of Non-Relational Foster Families Navigating the Education System.
Principal Investigator: Emma Topf, MA

You are being asked to be in a research study. This form provides you with information about the study. Please read the information below before deciding whether or not to take part.

You are invited to participate in a research study exploring non-relational foster parents experience navigating the educational system, non-relational foster parent perception of the needs being met or not met in the school setting for the children in their care, and the impact that their needs being met or not met has on the foster parent- foster child relationship in the home setting. In addition, this study is being conducted to fulfill the dissertation requirements of the primary investigator. The goal of this study is to understand your experience and opinions of navigating the public education system and foster a better understanding of how school psychologists can support non-relational foster parents and the children in their care in the school setting. Your participation is completely voluntary, but it is very important. Your participation will help me foster a better understanding for school psychologists supporting families like yours in the educational setting.

If you agree to be a part of this research study, you will be asked to participate in two interviews. As a researcher, I will be contacting you via email or phone to ensure you meet criteria to participate in this study (see attached flyer), to set up a time to interview you, to send you your interview transcript to review, and to schedule the follow-up interview. You may choose not to participate in the study and are free to withdraw from the study at any time. Refusal to participate or withdrawal from participation involves no penalty. This study will take approximately 4-5 months, with each interview lasting 45 to 120 minutes.

As the researcher, I will treat all information gathered for this study as confidential. This means that only I will have access to the information you provide. Your name or any identifiable information will not be included in any publications generated from this research.

There are two exceptions to the promise of confidentiality. Any information you reveal concerning suicide, homicide, or child abuse and neglect is required by law to be reported to the proper authorities. In addition, should any information contained in this study be the subject of a court order, the University of Denver might not be able to avoid compliance with the order or subpoena.

Your participation as an expert in this study will provide me with key insights as to what it is like to be a non-relational foster parent navigating the educational system, the needs you perceive being met or not met in the school setting for the school-age children in your care, and how that impacts your relationship with them in the home setting. The benefits of being involved in this study include being able to contribute to the body of research surrounding supporting non-relational foster families in the school setting. You might also enjoy the opportunity to share your expertise in an area of interest. If you would like a copy of the findings of this study, I will be happy to provide one for you. Potential risks of being involved include the possibility of discussing certain issues about topics that may be upsetting. If this occurs, I will provide a list of appropriate professional resources in your area that can provide you with supportive care. You will not receive any payment for being in the study.

If you have any questions at all about this study on supporting non-relational foster families in the school setting, please feel free to contact me, Emma Topf, at emma.topf@du.edu or my faculty sponsor, Dr. Cynthia Hazel at Cynthia.Hazel@du.edu. If you have any concerns or complaints about how you were treated during the research participation, you may contact the Chair of the Institutional Review Board for the Protection of Human Subjects, at 303-871-4015 or by emailing IRBChair@du.edu, or you may contact the Office of Research Compliance by emailing IRBAdmin@du.edu, calling 303-871-4050 or write to the University of Denver, Office of Research and Sponsored Programs, 2199 S. University Blvd., Denver, CO 80208-2121. You may print a copy of this form for your records.

The University of Denver Institutional Review Board has determined that this study qualifies as exempt from full IRB oversight.

Please type your name in the space provided if you understand and agree to the above. If you do not understand any part of the above statement, please ask the researcher any questions you have.

"I have read this paper about the study or it was read to me. I understand the possible risks and benefits of this study. I know that being in this study is voluntary. If I choose to be in this study, I may print a copy of this consent form."

_____   _____
Signature   Date

By continuing with this research, you are consenting to participate in this study.

Appendix D

In Their Own Words: A Qualitative Study of Non-Relational Foster Families Navigating

the Education System.

Purpose of this study: The purpose of this study is to better understand how non-relational foster parents see the educational needs of the school-age children in their care being met and not met and impact that has on dyadic relationships in the home setting. With this data, interpretations will be made to create a broader understanding of the needs of non-relational foster families in the educational setting and how the needs of the foster children in your care are being met or not met in the school setting impacts relationships in the home setting.

Inclusionary and exclusionary criteria:

In order to be included in this study participants must identify with ALL of the following inclusionary criteria and none of the exclusionary criteria:

Inclusionary Criteria	Exclusionary Criteria
Participant must be a licensed non-relational foster parent in Colorado.	Participant is not a licensed non-relational foster parent in Colorado.
Participant must have been the primary caregiver for at least one school-age foster child in the past year.	Participant has not been the primary caregiver for at least one school-age foster child in the past year.

Participant must agree to participate in two interviews.	Participant does not agree to participate in two interviews.
Participant must speak English fluently.	Participant does not speak English fluently.

Definitions of terms critical to this study:

Abuse

The term "abuse" refers to treating a person with cruelty or violence, especially regularly or repeatedly. Abuse can take many forms including: physical, verbal, emotional, or sexual.

Adverse Childhood Experiences (ACE)

Adverse Childhood Experiences (ACE) refers to 11 categories of trauma including psychological abuse, physical abuse, sexual abuse, substance abuse, mental illness, mother treated violently, criminal behavior in household, neglect, abandonment, death of caregiver, and witnessing community violence. The first seven categories were identified by Felitti et al. (1998) and the last four categories were later added by Jamora et al. (2009).

Child in Foster Care

Every child that is removed from the home of his or her biological parents, or primary caregiver, by child protective services and placed into a foster home is considered a child in foster care. "Child in foster care" and "foster child" are used interchangeably throughout this paper.

Dyad

The term "dyad" refers to the bi-directional, or transactional, relationship between two individuals. Therefore, the foster parent-foster child dyad refers to the bi-directional interactions between a foster parent and foster child.

Ecological Systems Theory

The term "ecological systems theory" was coined by Urie Bronfenbrenner in 1979 to describe human development. This theory describes human development as occurring within five layers of interrelated systems: microsystem, mesosystem, exosystem, macrosystem, and chronosystem.

Educational Setting

The term "educational setting", refers to any public school an individual would go to receive an educational experience.

Educational System

The term "educational system" refers to the public schooling structures that typically span kindergarten through twelfth grade.

Foster Care

Foster care is a system that is typically governed by the child welfare system. This system was designed to create a temporary safe haven for children who have experienced maltreatment and are not able to safely remain with their families. Foster care provides children who are removed from the home of their biological parents, or other primary caregiver, a safe place to live and additional services depending on the type of foster care placement, as well as the needs of the child and family.

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Non-Kinship Care

Non-kinship care is any type of foster care placement where the child is placed with someone he or she is not related to. In this study, the term "non-kinship care" includes several different types of foster care placements; it includes non-relative foster placements, group homes, treatment foster homes, temporary placements, and residential treatment centers. Although in other research additional sub-populations foster care (e.g. homeless foster children, runaway foster children, and foster children living independently) are included in non-kinship care groupings, they are not included in this study.

Kinship Foster Care Placement

A kinship foster care placement is when a child is placed with a someone that is related to the child or close family friend. There may or may not be other people living in the home. The terms "kinship foster care placement" and "kinship placement" are used interchangeably thought this paper.

Maltreatment

For the purposes of this paper, "maltreatment" is used as an umbrella term to include all forms of abuse in addition to neglect and exploitation.

Non-Relative Foster Care

A non-relative foster care placement is when a child is placed with a licensed foster care provider that is unrelated to the child, in the provider's home. Several other foster children unrelated to the provider may be placed in the same home. The term "non-relative" is used interchangeably with "non-relational" throughout this paper.

Non-Relative Foster Parent

A non-relational foster parent is a licensed and paid foster care provider that provides appropriate relationships, role models, and oversight by a responsible adult to the unrelated foster children placed in their care and has training in the basic physical, emotional, and behavioral needs of children removed from their home.

School-Age Student

For the purposes of this paper, the term "school-age student" refers to any person who is attending school from preschool through twelfth grade.

Supports

For the purposes of this paper, the term "support(s)" refers to any strategy, intervention, or resource, that could be implemented or provided in the school setting. This includes both direct and indirect "supports."

Trauma

The term "trauma" refers to what is experienced by an individual when he or she has been subjected to physical, emotional, relational, or verbal maltreatment. Trauma typically has long-lasting effects on an individual's overall physical, social, emotional, and spiritual wellbeing.

Interview 1

Opening Questions

Are you a licensed foster parent in the Colorado area?

How many years you have been a licensed foster parent in the state of Colorado?

In the past five years, how many school age, and nonrelative foster children have you been the
primary caregiver for?

In the past year, how many school age and nonrelative foster children have you been the primary
caregiver for?

Items regarding research question 1: What is the experience of non-relational foster parents navigating the education system?

What has been your experience navigating the school system for the school-age children in your care, including special education if applicable?
- o   When you take the child to enroll in school, do you inform the school that the child is in foster care?
- o   Do the children typically receive any support services in the school setting upon enrollment?
    Re: the special education process:
- o   Please describe your experience.
- o   What were the challenges in this process?
- o   What was helpful to you in navigating this process?
- o   How could you have been better supported in this process?

How have people or situations influenced your experience of navigating the educational system for children in your care?

Typically, what information is provided to you regarding newly placed foster children?
- o   School records? Physical health information? Mental health information? Child(rens) background/trauma history? Medicaid cards? Behaviors/triggers?
- o   Do you typically share this information with the school?
- o   How does the amount of background information you are given on the foster child effect interactions with the school?

What issues or challenges regarding education have you experienced with the foster children in your care?

What interactions take place between you and the school?
- Note- How does the participant describe interactions with school personnel?
- Teachers?
- Administration?
- School psychologists and other support staff?
- Are you given access to the student information system at the school?
- Are you invited to special education meetings?

Items regarding research question 2: What needs do non-relation foster parents perceive are being met and not met in the educational setting for the school-age children in their care?

How do you as a foster parent feel supported or not supported by the school?
- What supports have been helpful to you?
- What supports do you wish you had?

How do you feel the school age-children in your care are being supported or not supported by the school?
- Mental health
- Academics
- Behavior
- Needs being met
- Needs not being met

Items regarding research question 3: How do non-relational foster parents perceive the needs of the children in their care being met or not met in the school setting to impact the foster parent-foster child dyadic relationship in the home setting?

When a child in your care is or is not receiving services in the school setting, how does it impact your relationship with them in the home setting?

What factors in a school-age foster child's life do you understand to impact the foster parent-foster child relationship in the home setting?
- Trauma history?
- Interactions or lack of interactions with the school?
- Child's relationship with biological family?
- Your relationship with biological parents?

      o   Your relationship with child welfare workers (GAL, caseworker, social worker, service providers)?

      o   Multiple placements?

      o   Relationships with others in the foster home?

      o   Relationships with school personnel?

      o   Relationships with peers?

      o   Medication management?

How does the child's demographics impact his or her time in your care and in the school setting?

      o   Age

      o   Race

      o   Cultural beliefs

      o   Special needs (physical or cognitive)?

What other factors do you believe to impact the school-age children's experiences at home and in the school setting?

      o   Your/spouses work schedule?

      o   Foster child(ren)'s schedule?

      o   Your relationship with the child?

      o   State and federal policies around foster care?

      o   Mobility/multiple school or home placements?

      o   Utilizing community mental health services?

      o   Your personal customs and values?

      o   Passage of time?

      o   Other children in the home?

What types of community mental health services are offered to the children in your care?

      o   How often do you utilize these services?

How does your relationship with a child in your care impact his or her placement stability or mobility?

Is there anything I have not asked you about that you perceive to impact the outcomes of non-relational foster children in your home or the school setting?

Interview 2

Tell me your story of becoming a non-relational foster parent, going back as far as you can remember.

      o   Early experiences in school, at home, in the workforce, with foster care, taking care of children?

What has been your personal experience navigating the educational system?
- o   What issues or challenges did you face in school?
- o   What people or situations have influenced your experience navigating the educational system?
- o   What is the highest degree you have obtained?

What feelings are generated by the experience of being a non-relational foster parent of school-aged children?

What meaning do you ascribe to being a non-relational foster parent of school-age children?

What relationships have you found most meaningful in your experience?

What would you change about your experience in becoming a non-relational foster parent, if anything?

What else might be significant to share about your experience of being a non-relational foster parent of school-aged children?

Would you like a final copy of the study results?
- o   Confirm phone number, email, preferred method of contact

Is there anything else you would like to share with me?