



FOSTER PROGRESS



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Foster & Adoptive Parent
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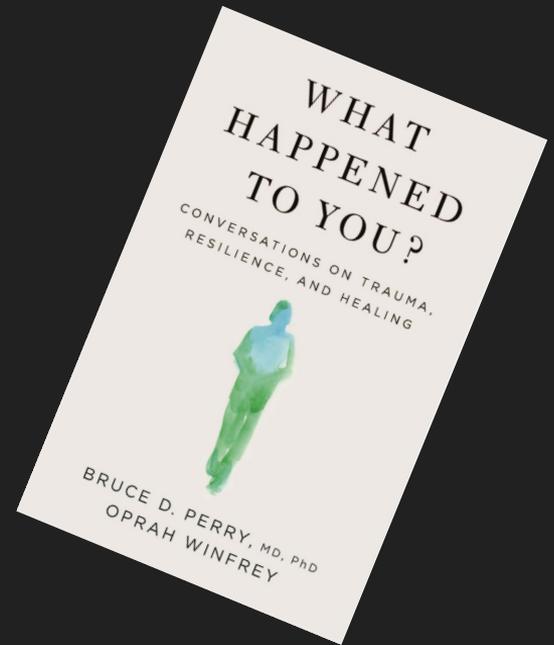
Rachel Pruess

Founder of Traverse
Foster & Adoptive Parent
LCSW

Agenda for today

1. Brief Introduction to Foster Progress
2. Intersecting identities of foster youth
3. Trauma 101
4. Risk and Protective Factors
5. Asset Based Programming

Participate to win!





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*College Mentoring
& Scholarships*



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Traverse
Adventure Therapy



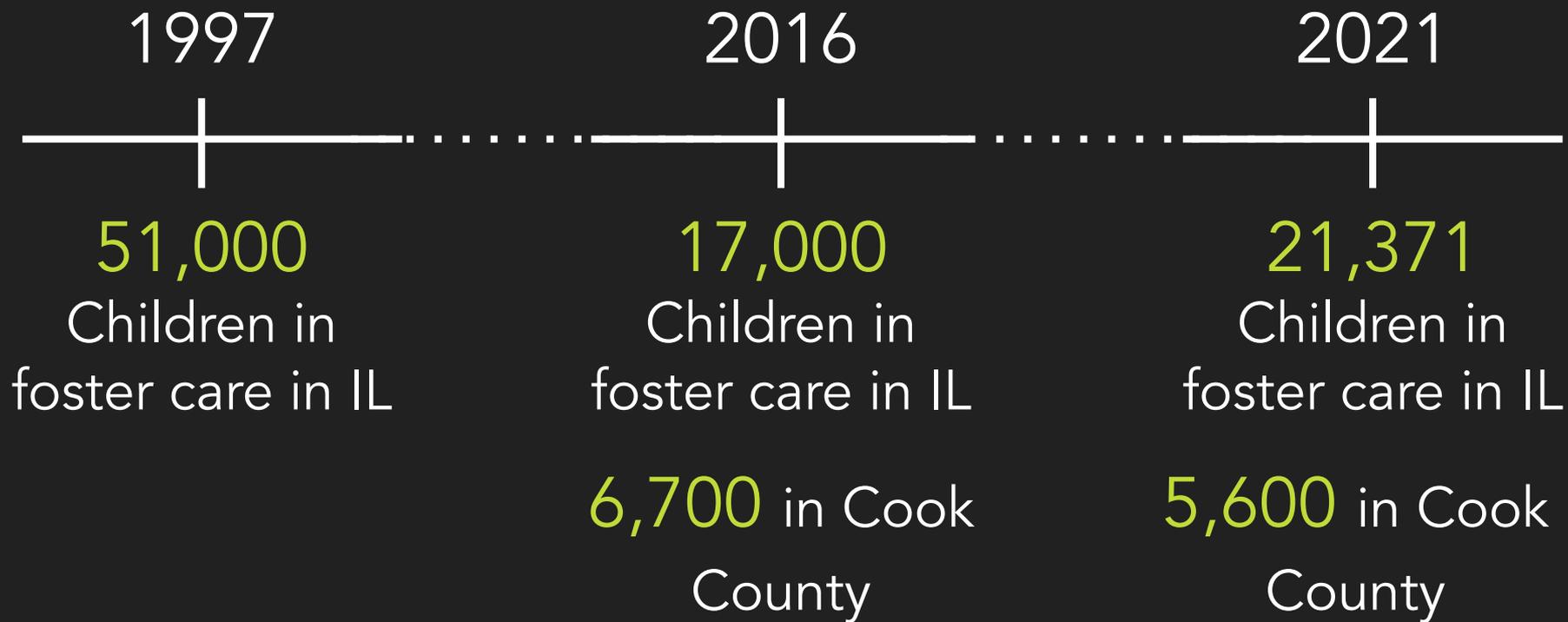
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*Workshops
& Advocacy*

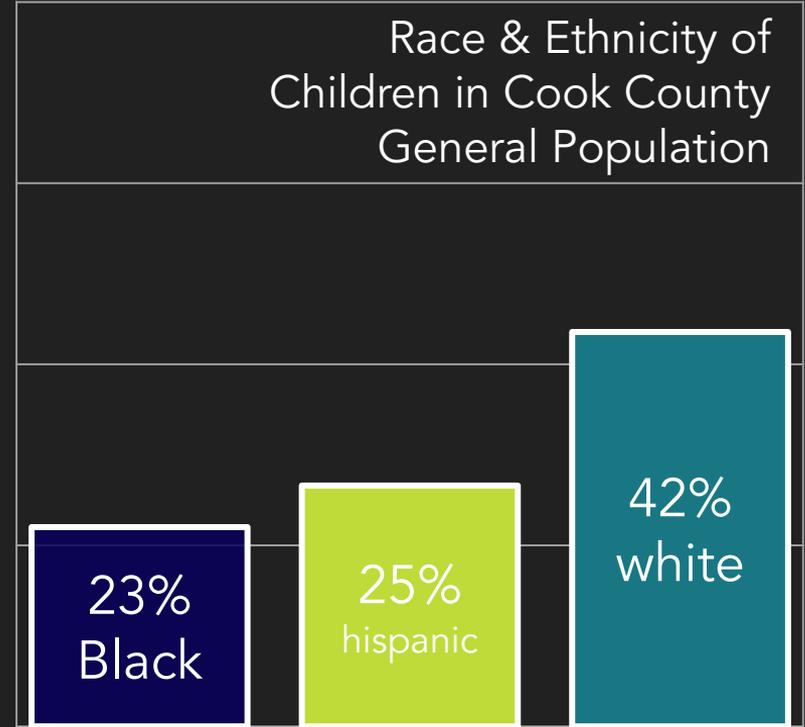
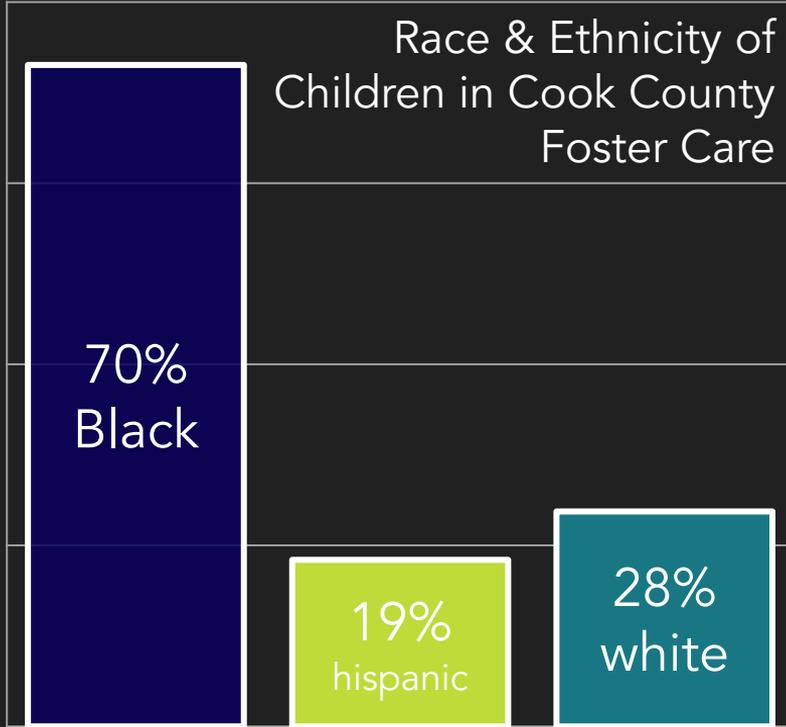


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College Coaching

Drastic Reduction



Disproportionality



Multiple axes of marginalization

These barriers will have a compounding effect for youth in foster care

- Youth may not disclose foster care status
- School changes contribute to academic deficits
- May be unaware of financial aid and other programs specific for foster youth
- Children of foster care alumni likely to experience foster care
- More likely to be first in their family to attend college

Aging Out



28,000 youth “age-out” of foster care each year in the US between the ages of 18-21.

In 2011, Illinois had the **third highest rate** in the country of youth aging out.

In 2011, around **50%** of youth in Illinois exited foster care via aging out.

Outcomes for youth aging out

Midwest Evaluation of the Adult Functioning
of Former Foster Care Youth at age 26, 2011



Outcomes for youth aging out

76.5% of young adults who age out of foster care use public assistance

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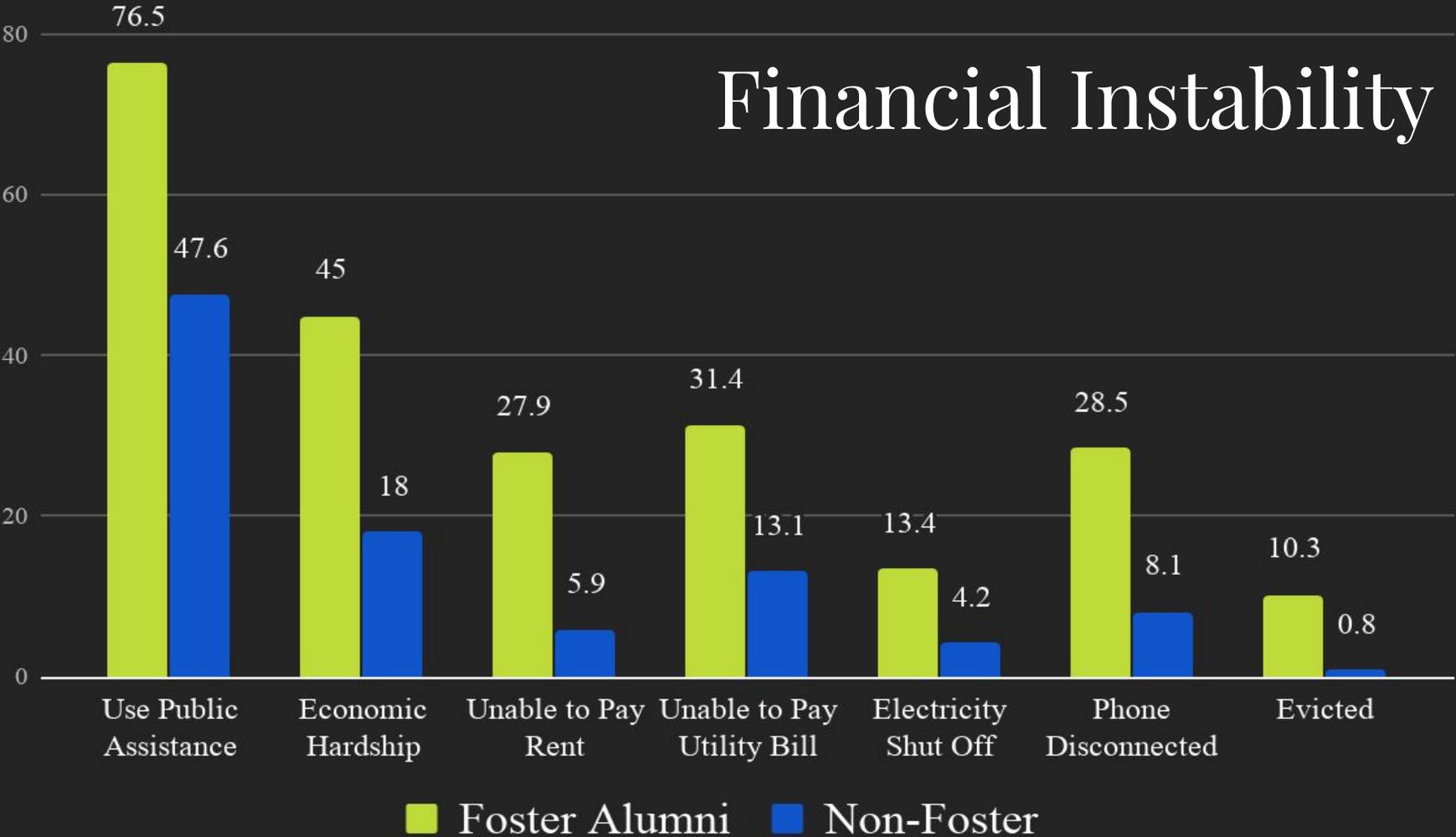
79% of young women who age out of foster care become pregnant at an early age

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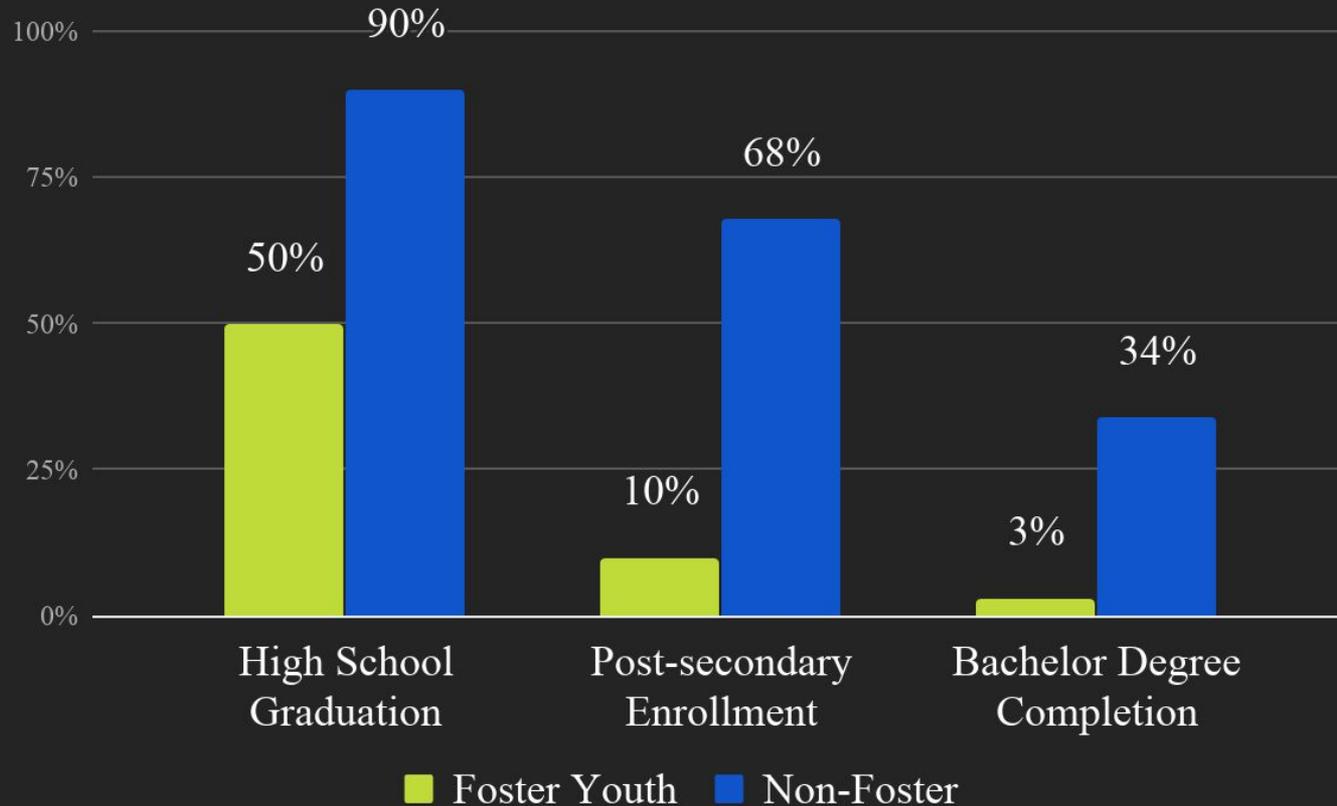
17-18 year olds in foster care have typically had 5+ school changes

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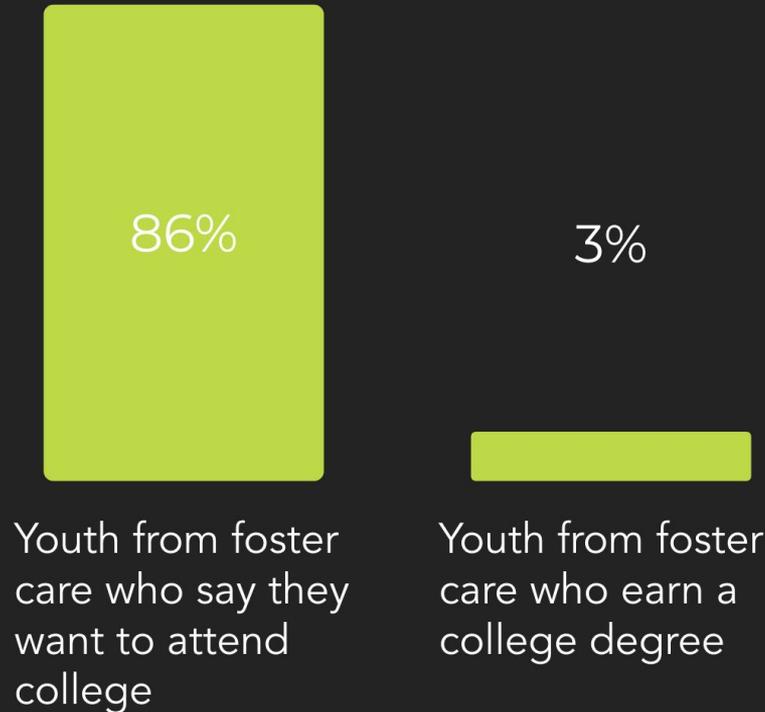
Financial Instability



Educational Attainment



Degree Attainment



Barrier Our Students Face

burdensome
documen-
tation

lack of
caring
adults and
family ties

biases

housing
insecurity

educational
deficits

early
parenthood

financial
instability

medical
issues

mental/
emotional
health

trauma

Trauma 101

“Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.”

SAMHSA - Substance Abuse and Mental Health Services Administration



Three Categories of Trauma



- **Acute:** A single incident, like a car accident



- **Chronic:** prolonged and repeated incident such as domestic violence, or childhood abuse.



- **Complex:** Combination of varied incidents of trauma.

Adverse Childhood Experiences (ACEs)

ABUSE



Physical



Emotional



Sexual

NEGLECT



Physical



Emotional

HOUSEHOLD DYSFUNCTION



Mental Illness



Incarcerated Relative



Mother treated violently



Substance Abuse



Divorce

“Are potentially traumatic events that can have negative, lasting effects on health and well-being. These experiences range from physical, emotional, or sexual abuse to parental divorce or the incarceration of a parent or guardian.”

https://www.childtrends.org/wp-content/uploads/2014/07/Brief-adverse-childhood-experiences_FINAL.pdf

Vulnerability Factors

- Sleep Issues
- Physical Illness
- Mental Health
- Work Related Stress
- Trauma
- Financial Worries
- Demands From Others



Your ACES Score

Prior to your 18th birthday:

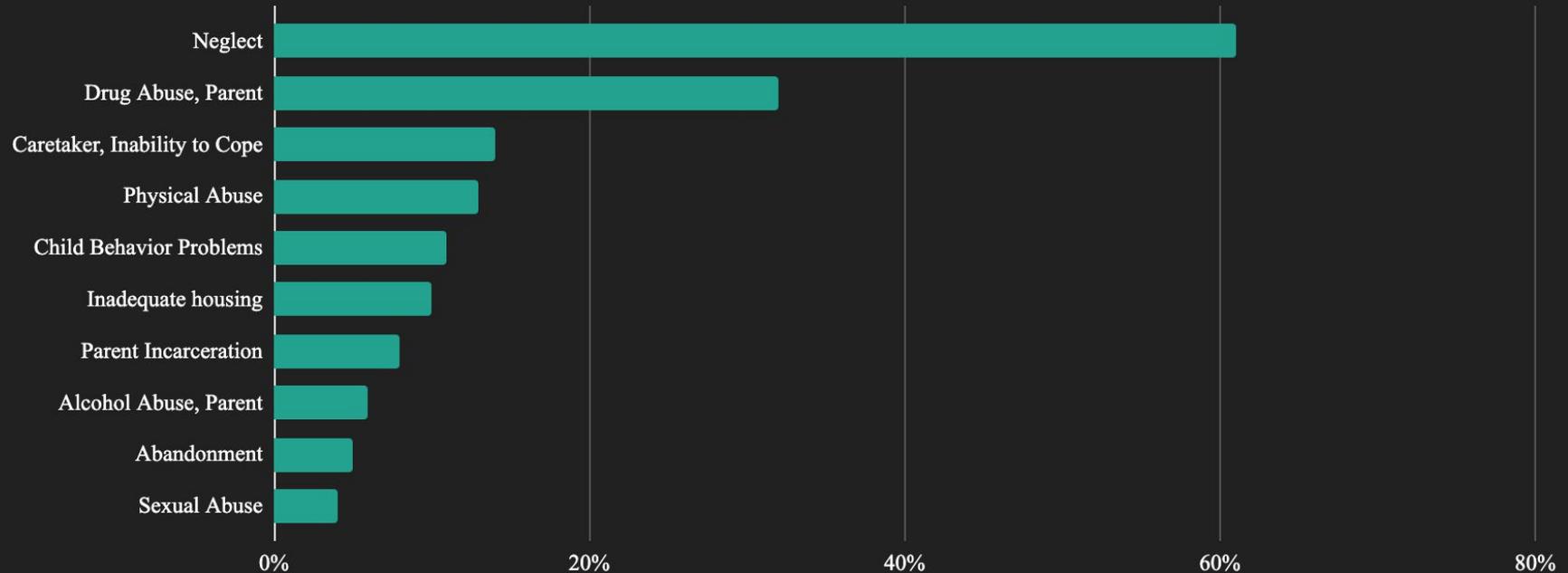
1. Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? or Act in a way that made you afraid that you might be physically hurt?
2. Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? or Ever hit you so hard that you had marks or were injured?
3. Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?
4. Did you often or very often feel that ... No one in your family loved you or thought you were important or special? or Your family didn't look out for each other, feel close to each other, or support each other?

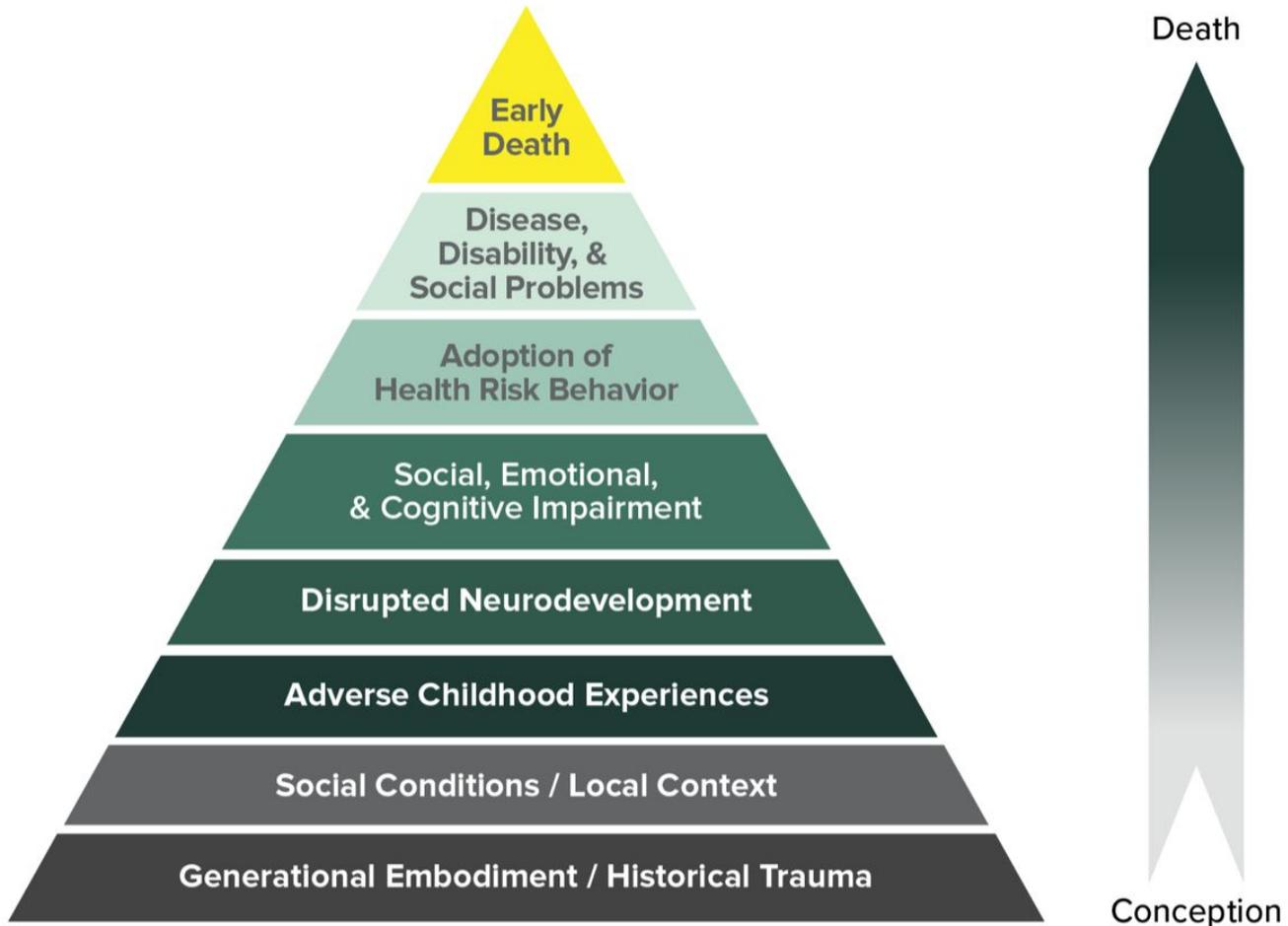
Your ACES Score, cont.

5. Did you often or very often feel that ... You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
6. Were your parents ever separated or divorced?
7. Was your mother or stepmother: Often or very often pushed, grabbed, slapped, or had something thrown at her? or Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
8. Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?
9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
10. Did a household member go to prison?

ACES that Foster Youth Experience

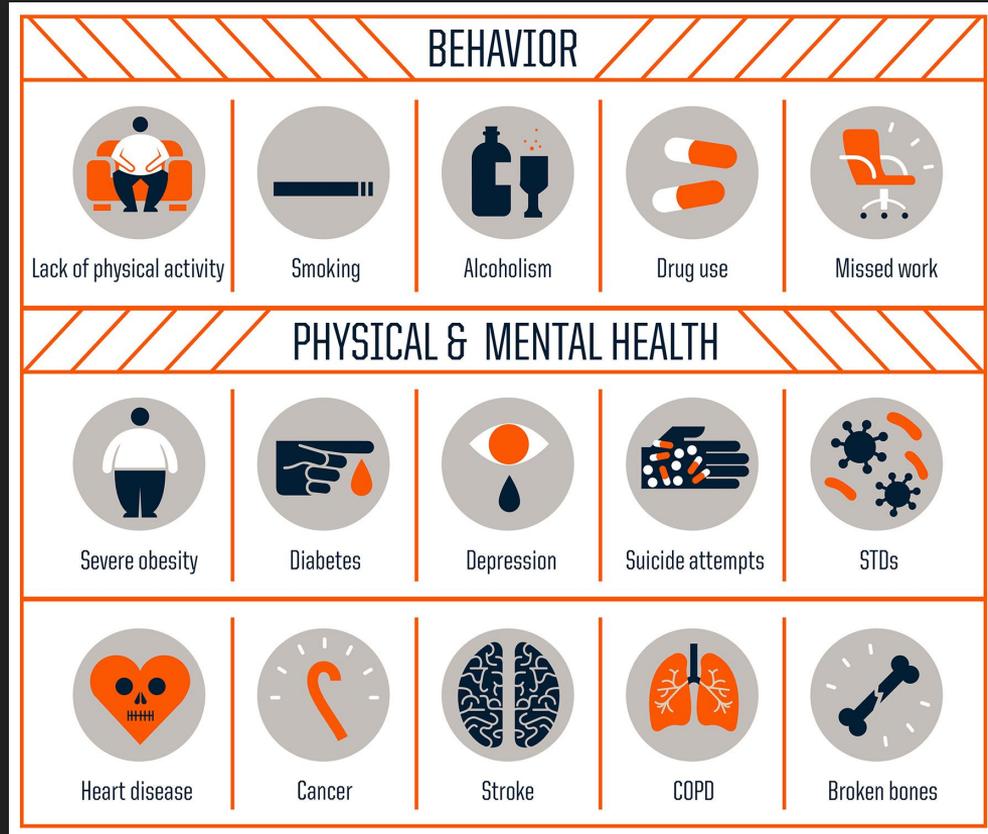
Reasons Children Come into Care



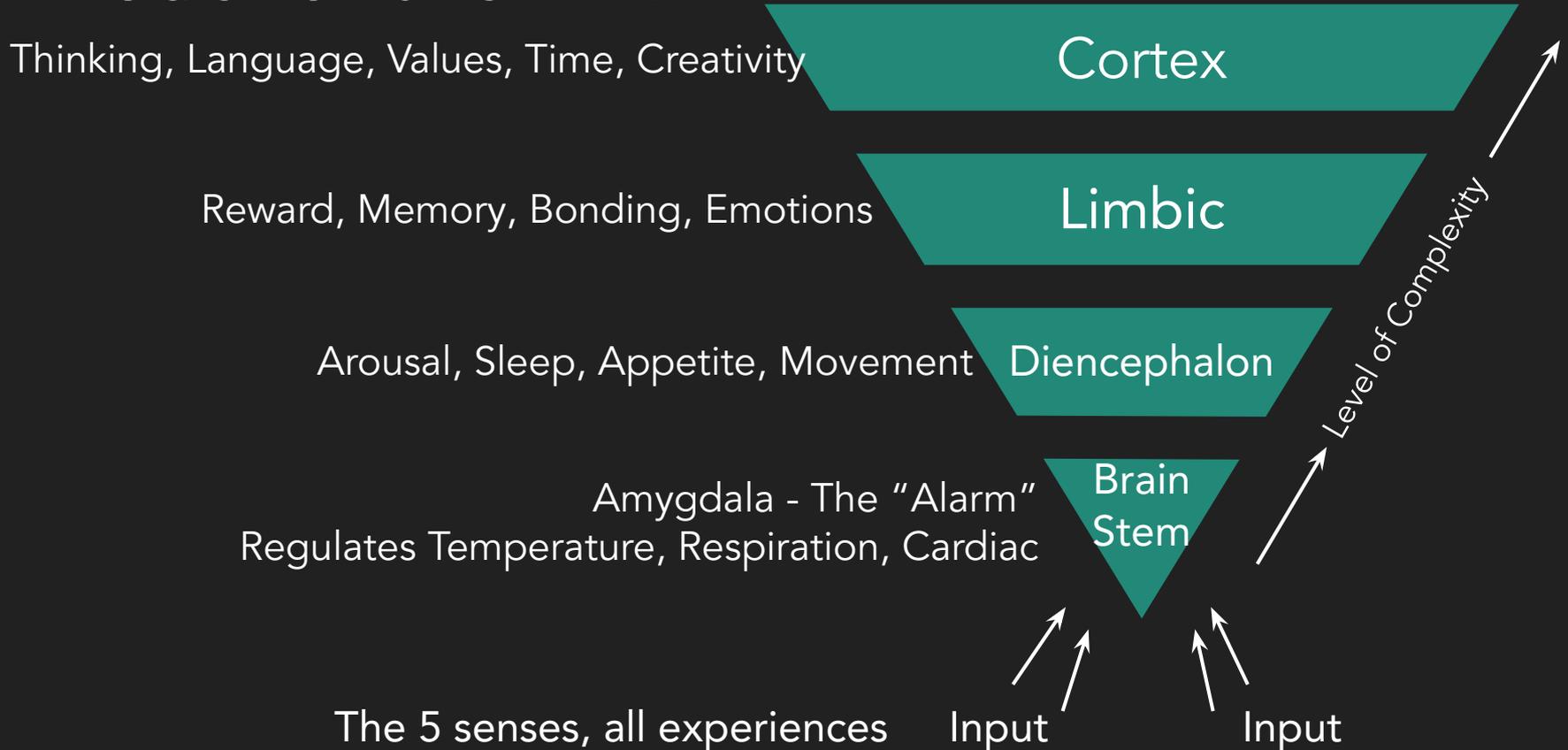


Mechanism by which Adverse Childhood Experiences Influence Health and Well-being Throughout the Lifespan

ACES Increase Health Risks

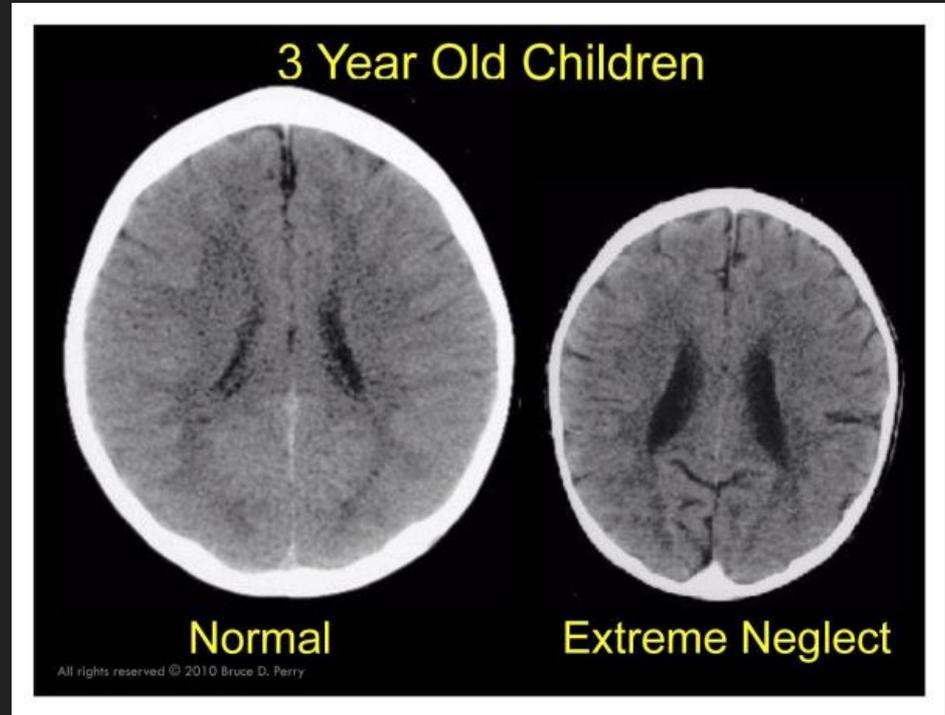


Model of the Brain



The Impact of Trauma on the Brain

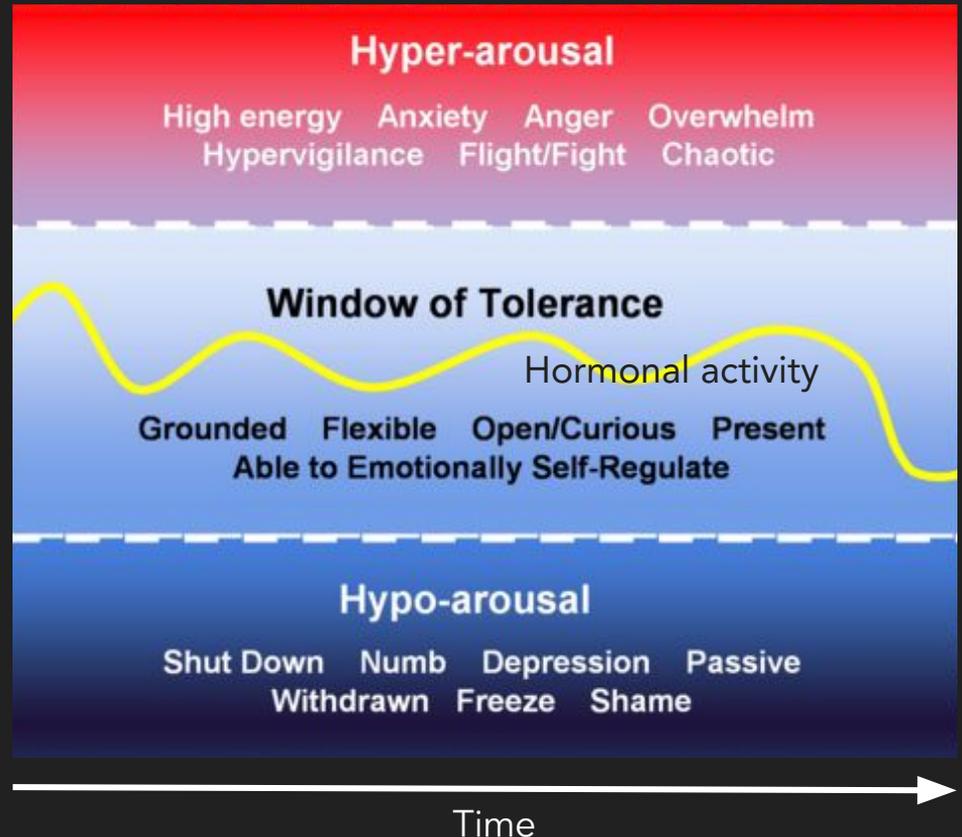
- Trauma has a physical, biological effect on our brains and bodies
- Inhibits prefrontal cortex- which is what controls impulse control and executive function
- Part of the brain and nervous system that controls fight, flight or freeze is on hyperdrive. Much higher levels of toxic stress.
- PTSD- same as veterans returning from war



The Survival Response

Occurs when the alarm is turned up and outside the Window of Tolerance

- Behaviors normally labeled oppositional, rebellious, unmotivated or antisocial are the natural byproduct of a brain that is wired for survival.
- These behaviors are all part of the fight-flight-freeze response. Nature's way of helping us survive a threatening environment.



Adaptive Abilities

What is adaptive in one scenario may become maladaptive in others. How are the following behaviors strengths? When might they become a concern?

- Strong commitment to taking care of self
- Ability to conform to expectations, manipulate situations, be what people want them to be
- Ability to protect self from losses
- Ability to rationalize behaviors and actions
- Ability to take control of a situation and do what needs to be done

Protective Factors

“Protective factors are conditions or attributes in individuals, families, communities, or the larger society that mitigate or eliminate risk, thereby increasing the health and well-being of children and families.”

What protective factors did you have in your own life?



Individual and Family Protective Factors

Children who...

- have positive friendships and peer networks
- do well in school
- have caring adults outside the family who serve as mentors/role models
- there are strong social support networks and positive relationships with the people around them
- caregivers engage in parental monitoring, supervision, and consistent enforcement of rules

Families where...

- safe, stable, and nurturing relationships are created
- caregivers can meet basic needs of food, shelter, and health services for children
- caregivers have college degrees or higher
- caregivers have steady employment
- caregivers/adults work through conflicts peacefully
- caregivers help children work through problems
- engage in fun, positive activities together
- The importance of school is encouraged for children

Community Protective Factors

Communities where families have access to....

- economic and financial help
- medical care and mental health services
- safe, stable housing
- nurturing and safe childcare
- high-quality preschool
- safe, engaging after school programs and activities

Communities where...

- adults have work opportunities with family-friendly policies
- strong partnerships exist between the community and business, health care, government, and other sectors
- residents feel connected to each other and are involved in the community
- violence is not tolerated or accepted

Resilience



Definition: the ability to mentally or emotionally cope with a crisis or to return to pre-crisis status quickly.

If despite our efforts we live in a world where youth can not be protected from life's traumas then we have a responsibility to help youth learn to live with and recover from these traumas.

Programming Goals

Ultimately, college graduation!

Mitigate risks by instilling protective factors

Extrinsic
(Support System)

- Mentors
- Community
- Financial support
- Health
- Safety

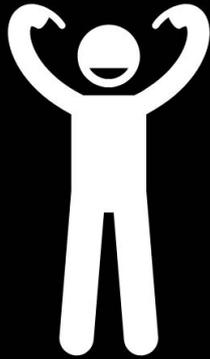
Intrinsic
(Social/Emotional
Development)

- Teaching
- Modeling
- Therapy



Asset-Based Principles

- Leveraging the strengths youth have developed through their difficult experiences
- Celebrating the successes that aren't noticed in traditional settings
- Recognizing the potential that could be unlocked
- Creating opportunities for giving back
- Merit based vs. "charity"



Asset-Based Programming

- Application process
- Acceptance letter
- Career exploration
- Strength finding
- Awards dinner
- Earned Scholarship \$
- Fundraise for their own travel
- Service Opportunities
- Careful Messaging
& Training
- Protecting them from "trauma tourists"



Stay in Touch

- Refer students to our programs
- Reach out for individual questions or coaching
- Mentoring Interest Session (July 22)
- Traverse Interest Session (July 27)
- Schedule further webinars for trauma-informed practice or supporting the academic ambitions of foster youth

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For Further Study

Trust Based Relational Intervention - [TBRI for Teachers](#)

What Happened to You? Dr Bruce Perry and Oprah Winfrey

[SAMSHA's Trauma and Violence resources](#)

[CDC's ACES resources](#)

[Childwelfare.gov's resources](#)