The conceptualization of career development success among young people who aged-out of out-of-home care in Canada

by

Ashlee V. Kitchenham

B.A., Mount Royal University

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Supervisor: José F. Domene, PhD, Faculty of Education

Examining Board: Ellen Rose, PhD, Faculty of Education, Chair
Jeff Landine, PhD, Faculty of Education
Denise Larsen, PhD, Faculty of Education

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ABSTRACT

This qualitative study explored how young people who had formerly aged-out of an out-of-home care setting conceptualize career development success. Guided by Elliott’s (2005) narrative approach for social research, this study addressed the question: How do young people who were formerly in out-of-home care and who self-identify experiencing career development success conceptualize their career success? Data were collected using open-ended individual interviews and analyzed using Braun and Clarke’s (2006; 2012) thematic analysis. Three primary themes (i.e., economic security, supportive work environment, suitable career fit) and seven subthemes embodying participants’ conceptualizations of career development success were revealed. These findings challenge the negative discourse about career development in young people in care that dominates the existing research literature. The findings also suggest specific directions for practice in the context of counselling and related fields.
ACKNOWLEDGEMENTS

This research study was inspired by the young people I had the privilege to work with as a residential youth care worker and my thesis supervisor Dr. José Domene. During my time with Wood’s Homes as a residential youth care worker, my main career objective was to encourage the young people I worked with to be the best versions of themselves. However, it turned out that through the lessons these young people taught me, the values they instilled in me, and the incredible sense of purpose, passion, and fulfillment they blessed me with, they too encouraged me to be the best version of myself. The young people I had the opportunity to work with at Wood’s Homes deeply impacted my life. Their stories, our experiences together, and my curiosity about what life would hold for these young people after they left care, motivated me to continue pursuing my passion to make a difference in these young people’s lives – in any capacity I could.

Early into my master’s program, my thesis supervisor Dr. Domene began to share his knowledge and expertise in the field of career development with me. His dedication and passion to make a difference in people’s lives through career was an inspiration. Observing his passion in this field encouraged me to immerse myself further into the world of career development and explore what this area of research and practice might hold for me. Before long, I too was passionate about career development – and the plan for my thesis study came to fruition. My experiences working with young people in residential care and working with Dr. Domene came together to shape a thesis study that has been incredibly meaningful to me. Thank you to all the young people involved in being the inspiration behind this thesis study and thank you Dr. Domene.
I would further like to express my gratitude to Dr. Domene. Not only did you help pave the path for my interest in career development research, you also provided me with unwavering support, invaluable guidance, and remarkable opportunities over the time we worked together. Your voice of confidence was a driving force behind making this thesis study come together. I am incredibly grateful to have had the privilege of working with you. You have made a lasting impression on my life.

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Chapter 1: Introduction and Literature Review

Introduction

The first chapter of this thesis will include an introduction to the research topic of the current study, a comprehensive review of the existing literature on this research topic, a discussion of the significance of the current study, and references. The introduction of this first chapter will situate this study in its research context and define the key concepts important to understanding this research. The literature review section of this chapter has been framed within Bronfenbrenner’s (1979) Ecological System’s Theory (EST). The literature review includes an overview of EST, which will then be followed by a review of the existing literature on the career development experiences of young people in care, and a review of the existing literature on the career development experiences of young people once they have aged-out of care.

The second chapter of this thesis has been written according to UNB’s manuscript style thesis format. This second chapter will begin with an abstract summarizing the current study and will then be followed by the body of the manuscript. The body of the manuscript will include an introduction to the research topic, an overview of the current study, and references. The introduction in this second chapter will provider readers with a brief introduction to the research topic of the current study and a concise review of the existing literature on this topic. The overview of the current study will describe the methods, research findings, limitations, and future research directions of the research completed as part of this thesis. The third chapter of this thesis will review the implications the findings from the current study have for counselling and its related fields, and provide conclusions to the thesis.
Research Context

Over the past few decades, the transition from adolescence to adulthood has become a longer and more difficult process for many young people in industrialized countries (Arnett, 2000; Osgood, Foster, Flanagan, & Ruth, 2005). It has become increasingly important for young people to obtain higher levels of education and more extensive and specific career-related experience to enter into the workforce and secure gainful employment (Domene, Landine, & Stewart, 2014; Osgood et al., 2005). Given such circumstances, young people in the 21st century are spending more time pursuing postsecondary education, taking longer to enter the workforce, spending more years in their familial home, delaying marriage, and postponing parenthood (Arnett, 2000).

Career development is a primary focus during this transition toward adulthood. Although some degree of stress is normative, for many young people career development is an exploratory process that occurs over a prolonged period of time. As a result, most young people require substantial emotional, practical, and financial support during this time, and the majority of these young people look to their families to provide this support (Osgood et al., 2005). However, this is not the reality for all populations of young people.

Research indicates that young people who are involved in out-of-home care experience distinct developmental challenges in comparison to their non-care peers, both during their time in care and after they have aged-out of care, particularly when it comes to their career development. These young people often have limited or no family support and frequently must navigate career development on their own, and at an accelerated pace. The vast majority of the existing literature on young people who have aged-out of care describes an abundance of career-related challenges and negative career-related
outcomes among this population (Barth, 1990; Blome, 1997; Courtney et al., 2011; Kitchenham & Domene, in press; Pecora et al., 2006). Despite the fact that much of this literature illustrates a fairly dismal picture of these young people’s career development, there is a sub-group among this population who identify experiencing career development success. This raises the possibility that there are substantial differences in how career development is being conceptualized in previously published literature and how it is conceptualized by the young people themselves.

Reflecting on the existing literature on this topic, it becomes evident these young people’s career-related outcomes have usually been conceptualized as a function of objective measures, typically evaluating these young people against their non-care peers on items such as educational attainment, occupational status, and annual income. Though such objective measures of career outcomes have historically dominated the field, contemporary research indicates that career outcomes in the 21st century transcend the boundaries of such objective measures (Arthur, Khapova, & Wilderom, 2005; Baruch, 2004). Although previous literature has given us an abundance of information on how young people who have aged-out of care perform in the context of historical conceptualizations of career outcomes, we know very little about how these young people perform in the context of contemporary conceptualizations of career outcomes. This raises an important question for researchers: How is ‘career development success’ actually defined among the population of young people who have aged-out of care?

Propelled by this question, the purpose of this thesis study was to gain an in-depth understanding of how young people who aged-out of care and self-identified as achieving career development success conceptualized their experience of career success.
Definitions of Key Concepts

Before describing the existing literature on the topic of career development among young people who have been involved in care, definitions of the key concepts that structured this study must be presented. These key concepts include: out-of-home care, aging-out of care, and career development success.

**Out-of-home care.** Out-of-home care includes settings such as foster care and residential care (Canadian Child Welfare Research Portal, 2011). Children and adolescents are often placed in an out-of-home care setting when it is legally determined they need to be removed from their family home and placed under the legal guardianship of the government to protect them from neglect or abuse (Courtney & Heuring, 2005). A foster care setting is a private home that a young person is placed to live in and that has been approved by the child welfare system (Canadian Child Welfare Research Portal, 2011). In contrast, residential care settings include treatment facilities and group homes where young people are placed to live because they have difficulty functioning in a family environment, often due to behavioral or adjustment issues (Canadian Child Welfare Research Portal, 2011). According to the Canadian Child Welfare Research Portal (2011), most young people in foster care and residential care settings are financially supported by the government through child welfare, until the young person reaches the age of majority in their jurisdiction.

**Aging-out of care.** Aging-out of care refers to being legally emancipated from the care system (Courtney & Heuring, 2005). Typically, this occurs when a young person in an out-of-home care setting reaches the age of majority in their jurisdiction. At this time, the support they previously received through the child welfare system is terminated.
and they legally transition into adult independence (Courtney & Heuring, 2005). In many cases, in both Canada and the United States, this occurs when the young person turns eighteen (Courtney & Heuring, 2005).

**Career development success.** Career development success is a multidimensional construct and no single definition of this construct can accurately capture what career development success means to different individuals. Historically, objective measures of career outcomes such as occupational status and income have been hallmarks of career success and have dominated career development success literature (Arthur et al., 2005; Heslin, 2005). However, in recent decades subjective measures of career success, such as job satisfaction and work-life balance, have gained greater attention (Heslin, 2005). Following this shift in the literature, in this thesis study career development success was operationally defined as “the individual’s internal apprehension and evaluation of his or her career across any dimensions that are important to that individual” (Van Maanen, 1977 as cited in Arthur et al., 2005, p. 179). Although this definition captures career development success as a predominantly subjective phenomenon, it also allowed the opportunity for objective measures of career success to be included, if that was what is important to the individual. As Arthur and colleagues (2005) explain, people have unique career aspirations and place idiosyncratic values on aspects of work such as employment stability, opportunity for promotion, earnings, location of work, entrepreneurship, opportunity for positive impact, work-life balance, career competence, and career meaning-making. Simply put, career development success may be identified and uniquely constructed by each individual as a function of the career-related values they hold.
Therefore, it is beneficial to assess and understand what participants’ own understandings of career success are in any study exploring career success.

**Literature Review**

The following literature review will discuss many of the experiences that shape the career development of young people who age-out of the care system. This includes experiences occurring during these young people’s time in care and after their emancipation from care. Grounded in Bronfenbrenner’s (1979) Ecological Systems Theory (EST), these experiences are organized thematically as they apply to a young person’s micro-, meso-, exo-, and macro- system levels.

**Theoretical Framework: Ecological Systems Theory**

EST suggests that a young person’s development is substantially influenced by their immediate and broader environmental system (Bronfenbrenner, 1979). Bronfenbrenner (1979) defined five levels of the environment that can influence a young person’s development. First, the most immediate environmental influences exist within the microsystem level. The microsystem encompasses the young person’s immediate surroundings and the relationships that occur within these surroundings (Bronfenbrenner, 1979). This may include such things as a young person’s family, school, daycare, and peers. It is important to note that relationships are bidirectional within this system. For example, a parent’s mood affects a young person’s behavior, while the young person’s behavior also affects their parent’s mood. The next level of the environment is the mesosystem. The mesosystem consists of connections between microsystems (Bronfenbrenner, 1979). For example, a child’s academic performance in school is not
only shaped by the activities and relationships that exist within their classroom, but also by the educational support they receive from their parents. The third level of the environment is the exosystem. The exosystem is comprised of broader aspects of the young person’s environment that influence his or her development, but in ways that are outside of the direct involvement of the young person (Bronfenbrenner, 1979). For example, when a parent’s place of work implements a pay decrease for their employees, the parent’s children are affected in various ways by this experience, even though the children had no active role in the workplace. The fourth level of the environment is the macrosystem. The macrosystem consists of the larger cultural context in which a young person exists, including cultural values, societal customs, political systems, and the global economy (Bronfenbrenner, 1979). Lastly, the final level of the environment is the chronosystem. The chronosystem encompasses the temporal dimension of a young person’s development including events and changes that occur over a young person’s lifespan (Bronfenbrenner, 1979). Chronosystem influences will be excluded from this literature review because no distinct event can solely be conceptualized by the chronosystem and because this thesis addresses only a single developmental period in young people’s lives.

As the following literature review will demonstrate, there are multiple levels of contextual influences that affect the career development experiences and outcomes of young people who age-out of the care system. Appropriately, EST provides a conceptual and operational framework to explore, organize, and understand these various influences.

The Existing Literature: Relevant Care Experiences

In 2013, there were an estimated 62,000 young people in out-of-home care in
Canada and 400,000 young people in out-of-home care in the United States (Jones, Sinha, & Trocmé, 2015; U. S. Department of Health and Human Services, 2015). As these young people mature, many experience pervasive difficulties related to the circumstances that originally brought them to care. Unfortunately, these difficulties are often exacerbated by additional adverse experiences while in care. Research demonstrates that such pre-care and in care difficulties have negative long-term effects on young people's career development (Buys, Tilbury, Creed, & Crawford, 2011; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Lee & Berrick, 2014; McMillen, Auslander, Elze, White, & Thompson, 2003; Pecora et al., 2006). Although it is assumed that young people who are removed from the care of a neglectful or abusive family environment will have a better life, young people in out-of-home care remain among society’s most vulnerable populations, particularly in terms of their career development. In the following section, a comprehensive overview of typical pre-care and in care experiences are presented as they relate to a young person’s micro-, meso-, exo-, and macro- systems in the context of career development.

**Microsystem influences and mesosystem connections.** Researchers have identified numerous microsystem and mesosystem connections that can influence the career development of young people who have been in care. These factors include the effects of trauma, family of origin, professional caregivers, caseworkers, school-based relationships, peer relationships, academic achievement, participation in education, educational aspirations, career aspirations and barriers, and work experience while in care.
The effects of trauma. The majority of young people in out-of-home care enter the care system as a result of maltreatment such as abandonment, neglect, and abuse (Courtney & Heuring, 2005; Courtney et al., 2001; Pecora et al., 2006). In the Northwest Foster Care Alumni Study, a study of young people formerly in care, Pecora and colleagues (2006) found that 93% of their participants had experienced maltreatment in childhood, and 64% were placed into the care system as a result. In another study that looked at the experiences of young people formerly in care, the Midwest Study, Courtney and colleagues (2001) found that 76% of their sample had experienced maltreatment in childhood, and 53% were placed into care as a result. Even in care settings, these vulnerable young people endure neglect and abuse. Within their sample of 141 young people formerly in care, Courtney and colleagues (2001) found that, during their time in care, over one-third experienced neglect, 13% experienced physical abuse, and 2% experienced sexual abuse, all by their caregiver. Another 17% experienced sexual abuse by someone other than their caregiver.

The experience of neglect and abuse have overwhelming negative effects on young people’s career development (Buys et al., 2011; Courtney et al., 2001; Hildyard & Wolfe, 2002; Hudson, 2013; Lee & Berrick, 2014; McMillen et al., 2003; Pecora et al., 2006). More specifically, traumatic experiences have been found to influence a young person’s academic performance and vocational outcomes. Hildyard and Wolfe (2002) found that childhood maltreatment negatively affects young people’s later academic achievement, and McMillen and colleagues (2003) demonstrated a relationship between childhood maltreatment and school grade repetition. Additionally, Buys and colleagues (2011) found that the experience of abuse and neglect contributed to problems in
communicating, socializing, and concentrating, which affected the academic and career opportunities of young people in care.

Family of origin. There is a clear connection between resources and support provided by young people’s families of origin and their subsequent career outcomes (Duck et al., 2013; Whiston & Keller, 2004). Family members often serve as employment role models, encourage education and career exploration, monitor educational performance, assist in career planning, and foster feelings of career confidence in their children (Duck et al., 2013; Whiston & Keller, 2004). However, young people in care usually have limited or no contact with their family of origin, which means they have a very different experience of receiving such career development support.

Only 65% of Barth’s (1990) sample of young people formerly in care reported having contact with their birth parents or non-sibling relatives while in care. For those who had familial contact, the average frequency of contact was ten times per year, demonstrating a substantial deficit in the opportunity to receive family support. Additionally, young people in care have been found to perceive only non-parental relatives such as siblings, aunts, uncles, and grandparents as possible sources of career development support (Crawford, Tilbury, Creed, & Buys, 2011). In contrast, their birth-parents were identified as role models for what to avoid, illustrating that even when familial contact is available, it may not be beneficial for career development in this population.

Professional caregivers. The primary caregiver for a young person in care is often a professional caregiver, such as a foster parent or group home worker, who looks after the young person day-to-day for the time they are in care. Tilbury, Creed, Buys, and
Crawford (2011) found that young people in care often identified their professional
caregivers as their primary source of career development support. The support provided
by these caregivers included providing positive role modelling, assisting with school and
career planning, monitoring school performance, attending school meetings, and
facilitating opportunities to obtain work experience. However, career development
support provided by professional caregivers may not be equivalent to that of natural
parents. Blome (1997) found that caregivers were less likely to monitor homework and
participate in school functions than natural parents. Specifically, Blome (1997) reported
that 65% of caregivers had never attended a parent-teacher conference and 73% had
never visited their young person’s classroom. Blome (1997) also found that caregivers
provided significantly less financial support for the educations of young people in their
care than natural parents provided for their children.

**Caseworkers.** A caseworker is typically a social worker who manages the young
person’s child welfare case for the time they are in care. Distinct from the professional
caregivers who are responsible for the daily life of a young person in care, caseworkers
generally take an administrative role focused on tasks related to placements, finances, and
emancipation. Many young people do not view their caseworkers as a source of support
in career development (Tilbury et al., 2011). Furthermore, many caseworkers perceive
career development support as being beyond their mandate. For example, in Tilbury and
colleagues (2011), caseworkers expressed that they were more focused on here-and-now
problems such as placement setting coordination, rather than future-oriented tasks such as
career development. These participants also suggested career development was not their
responsibility and expressed a pessimistic outlook regarding future career outcomes for
young people in care.

**School-based relationships.** Young people in care have also reported their relationships with adults in school settings, such as teachers and guidance counsellors, as a source of positive career development support. For example, young people in care have reported that school-based adults provided them with career development information, guidance, and support (Crawford et al., 2011). However, other research indicates these relationships may not always be positive. Powers and Stotland (2002) suggested that some teachers might be less inclined to commit to the academic achievement of young people in care. This suggestion stems from the idea that some teachers may believe that, since a young person in care may not be in their classroom for a long period of time (because there is a high rate of school movement among this population), there is little point in investing in their education. Powers and Stotland (2002) further suggested other teachers may feel this way because they hold the belief that young people in care are less academically adept than their non-care peers. This negative career development outlook is not only a concern among teachers. Tilbury and colleagues (2011) also found that, although guidance counsellors expressed that they felt positive about young people in care on a personal level, these counsellors were more negative about their prospective career outcomes.

**Peer relationships.** Young people in care described friendships with peers who are focused on education and career as a positive influence on their career development (Crawford et al., 2011; Strolin-Goltzman, Woodhouse, Suter, & Werrbach, 2016). Crawford and colleagues (2011) found that young people in care who were friends with peers who were focused on education and career reported feeling encouraged in their own
career development. Furthermore, in Strolin-Goltzman and colleagues’ (2016) study, young people in care stated observing other peers who were engaged in career development related activities encouraged them to want to do the same.

It is less clear how often young people in care have the opportunity to form friendships with peers who are focused on their school and future work. For example, almost half of the participants in Courtney and colleagues’ (2011) study reported that very few of their friends studied hard in high school. Further, Shook, Vaughn, Litchge, Kolivoski, and Schelbe (2009) suggested that young people in out-of-home care settings may be at higher risk to engage in deviant peer affiliations. They proposed this may be due to circumstances related to care system involvement, such as having a history of relationship disruption, mental health and substance abuse concerns, criminal justice involvement, lower levels of educational attainment, and higher rates of underemployment and unemployment. Shook and colleagues found that deviant peer affiliations among this population increased the likelihood that a young person in care would be fired from their job and decreased the likelihood they would be enrolled in college.

**Academic achievement.** School provides an opportunity for many young people to build relationships, construct competencies, and cultivate academic and career success. Unfortunately, for many young people in care, their school environment is stressful and challenging, and characterized by experiences of failure. Berridge (2007), Blome (1997), and Farruggia, Greenberger, Chen, and Heckhausen (2006) have all found young people in care were more likely to experience lower academic achievement than their non-care peers. Further, Burley and Halpern (2001) found that young people in care repeated
grades at twice the rate of their non-care peers.

Comparably, Courtney and colleagues (2001) reported that 30% of their participants, who were formerly in care, had failed at least one grade, while McMillen and colleagues (2003) found that 25% of their participants in care reported failing a grade and 58% reported failing at least one class. In a study following young people who had aged-out of care in Sweden, Berlin, Vinnerljung, and Hjern (2011) found that lower academic achievement during participants’ time in care was related to poorer psychosocial outcomes in young adulthood, including increased risk of suicidality, criminality, substance use, and social welfare dependency. Additionally, multiple studies have demonstrated a strong connection between academic achievement and occupational outcomes among this population (Courtney & Hook, 2016; Dixon, 2007; Leone & Weinberg, 2010; Pecora et al., 2006).

**Participation in education.** Many young people in care struggle with learning and behavioral difficulties, which are often related to their traumatic childhood experiences, complex mental health challenges, and the disruption of being involved in the care system (Buys et al., 2011; Tilbury et al., 2011). These learning and behavioral difficulties have been found to greatly affect their ability to actively engage in career development (Blome, 1997; Buys et al., 2011; McMillen et al., 2003; Tilbury et al., 2011). For example, McMillen and colleagues (2003) found that young people in care with greater behavioral challenges were more likely to fail an academic grade, while Leventhal, Graber, and Brooks-Gunn (2001) reported an association between higher rates of school behavioral difficulties and lower rates of adolescent employment.

Related to these learning and behavioral difficulties, young people in care are
often placed in special education classes (Morton, 2015). Although it has been argued that special education classes serve to better accommodate some young people’s learning needs, Morton’s (2015) study found that young people from care who had been placed in special education classes during their grade-school years cited this type of accommodation as a barrier to their subsequent academic achievement and well-being. Specifically, participants expressed that being placed in special education classes put them behind their peers academically and exacerbated their issues around feeling different from their peers.

Young people in care also experience high rates of school suspension and expulsion. Blome (1997), as well as Courtney, Terao, and Bost (2004), found young people in care were more likely than non-care peers to be suspended or expelled from school. Further, in McMillen and colleagues’ study (2003), 73% of participants in care reported receiving a school suspension and 16% reported being expelled on at least one occasion. As Emerson and Lovitt (2003) explain, suspensions and expulsions only further challenge the educational experiences of young people in care by decreasing the number of days they are in school.

**Educational aspirations.** Despite the abundance of education-related difficulties young people in care may experience, many among this population retain optimistic aspirations for their futures. Although, on average, young people in care aspire to somewhat lower levels of educational attainment than their non-care peers (Blome, 1997; Creed, Tilbury, Buys, & Crawford, 2011; Farruggia et al., 2006), most still hope to complete some form of postsecondary education. In Courtney and colleagues’ (2001) study, 79% of participants aspired to attend college. Similarly, McMillen and colleagues
(2003) found that only 5% of their participants in care planned to end their education at the high school level. Another 23% planned to attend vocational or military training, 24% planned to attend community college, 27% planned to attend university, and 19% planned to continue their education to the post-graduate level.

Even though such personal optimism toward the educational aspects of these young people’s career development is positive, their situation is more complex. Many young people in care have disclosed that they do not know how to make these aspirations a reality (Hudson, 2013). In addition, some studies have found that caregivers, caseworkers, teachers, and guidance counsellors in the lives of young people in care may have more pessimistic expectations toward their ability to attain their educational and career aspirations (Blome, 1997; Powers & Stotland, 2002; Tilbury et al., 2011). This latter finding is particularly concerning as Strolin-Goltzman and colleagues (2016) found the presence of positive adult relationships to be the most influential variable on the educational outcomes of young people in care.

**Career aspirations and barriers.** Research suggests that young people in care spend a great amount of time thinking about their future careers and aspire to be successful when they enter the world of work (Creed et al., 2011). These young people report being motivated to succeed in their future work because they perceive it as a viable way to avoid negative outcomes in adulthood. A future career is viewed as their opportunity to achieve wealth, stability, success, and provide for a future family (Buys et al., 2011; Crawford et al., 2011; Hudson, 2013; Tilbury et al., 2011). Nonetheless, Creed and colleagues (2011) also found that young people in care aspired to less complex occupations, engaged in less career planning, and had higher levels of perceived career
barriers, in comparison to non-care peers. However, no differences were found on measures of career goals, career outcome expectations, career exploration, and career self-efficacy. Similarly, Tilbury and colleagues (2011) reported that, even though young people in care engaged in planning for their future careers, this planning was often interrupted by concerns about where they would live and how they would support themselves upon leaving care.

Although young people in care have aspirations and goals for their future careers that are often similar to their non-care peers, many express confusion around how to achieve their aspirations and articulate the desire for occupational guidance or mentoring (Buys et al., 2011; Hudson, 2013). This desire for guidance is particularly important to note in light of research that indicates that the adults in the lives of young people in care often have pessimistic views about their career-related outcomes (Buys et al., 2011). Moreover, Crawford and colleagues (2011) found that nearly 20% of participants in care reported they did not have anyone whom they could identify as a source of support for their career development. This lack of support is especially problematic because it reinforces the negative self-image many young people in care struggle with (Buys et al., 2011). Not receiving adequate career guidance and not having adults who believe in their ability to succeed in the workforce are substantial barriers to the positive career development of young people in care (Buys et al., 2011; Hudson, 2013).

**Work experience while in care.** Research suggests early employment experiences provide young people in care with opportunities to develop vocational skills, expand their social networks, and cultivate their identity in positive ways (Arnau-Sabatés & Gilligan, 2015). As it follows, young people in care who obtain work experience during
adolescence have been found to experience better career development outcomes in adulthood (Arnau-Sabatés & Gilligan, 2015; Courtney & Hook, 2016; Reilly, 2003; Stewart, Kum, Barth, & Duncan 2014).

Specifically, Dworsky and Courtney (2000) found that the best predictor of a young person obtaining employment after their emancipation from care was if they had work experience during their time in care. Comparably, Reilly (2003) reported that participants who had worked during their time in care were more likely to experience stable employment after they aged-out of the care system. Likewise, Stewart and colleagues (2014) also found that young people formerly in care who had obtained work experience prior to turning 18 were more likely to have positive employment outcomes in adulthood. Further, Arnau-Sabatés and Gilligan (2015) explored the experiences of young people formerly in care who had obtained long-term, full-time employment as adults and found that having work experience during adolescence was a contributing factor to their subsequent employment success.

Despite the well-documented positive effects of early work experience, the rate at which adolescents in care actually participate in the workforce is problematic. Hook and Courtney (2011) reported that only 35% of their sample of young people in care were employed at 17 or 18 years of age. Additionally, young people formerly in care have cited the absence of work experience as one of the barriers they struggled with in obtaining employment in adulthood (Rutman, Hubberstey, Feduniw, & Brown, 2007). Therefore, it appears as if the majority of individuals who were formerly in care are not obtaining the kinds of early employment experiences that have been shown to be beneficial for their career development.
Exosystem influences. Two important aspects of the exosystem of youth in care that have been found to have a substantial influence on their career development are placement instability and school disruption.

Placement instability. Placement instability is one of the most prevalent concerns facing young people in care. In Pecora and colleagues’ (2006) study, participants formerly in care reported changing placement settings 1.4 times per year on average. When young people move from one placement to another, it often not only results in a change of residence, which in itself can be difficult, but it also typically involves moving to a new community, receiving new caregivers, adjusting to a new school, making new friends, learning new rules and expectations, and leaving behind previously established supports. All these changes occur rapidly, leaving the young person with little to no time to acclimate to their new environment.

Not surprisingly, placement instability has been linked to poorer psychological, emotional, social, academic, and occupational outcomes among young people who have been in care (Buys et al., 2011; Courtney & Heuring, 2005; Courtney et al., 2001; Hudson, 2013; Kufeldt, 2003; Merdinger, Hines, Osterling, & Wyatt, 2005; Pecora et al., 2006). In Reilly’s (2003) study, young people who had experienced greater placement instability during their time in care were more likely to have experienced dating violence, been involved in criminal activity, spent time in jail, and experienced homelessness when they aged-out of care.

Placement instability also has consequences for educational attainment and occupational experiences. Buys and colleagues (2011) found that placement instability was linked to several career development issues, including problems settling into school,
lower educational attainment, difficulty in day-to-day planning, and trouble with future-oriented planning. Furthermore, placement instability during young people’s time in care has been linked to lower employment stability, fewer employability skills, and reduced earnings in adulthood (Hook & Courtney, 2011; Pecora et al., 2006; Scannapieco, Smith, & Blakeney-Strong, 2016).

Pecora (2012) found that optimizing placement stability resulted in almost an 18% decrease in negative educational outcomes, concluding that fewer placement moves would result in better educational outcomes for young people in care. The link between placement stability and educational attainment is further supported by Merdinger and colleagues (2005), who explored the experiences of a sample of young people from care who went on to attend university. Their participants reported that having a stable placement was a contributing factor to their educational success.

**School disruption.** Many young people in care also experience school disruption, which adds to their career development challenges. Blome (1997) and Tilbury and colleagues (2011) found that young people in care reported more educational disruptions than their non-care peers. Additionally, almost half of the participants formerly in care in Courtney and colleagues’ (2001) study reported having to change schools at least four times during their grade-school education. Comparably, among Pecora and colleagues’ (2006) sample of young people formerly in care, 65% of participants reported having to change schools at least seven times during their formal education.

Changing schools can result in the disruption of academic learning, extracurricular activity involvement, relationships with teachers and peers, and, potentially, the loss of educational credits when it is necessary to move in the midst of an
academic term (Morton, 2015). Calvin (2001) reported that it takes a young person between four to six months to recover academically from the disruption of changing schools, which is troubling in light of the previously described research revealing that young people in care experience an average of 1.4 placement changes per year (Pecora et al., 2006). Not surprisingly then, the existing research points to a connection between school disruption and educational attainment among this population (Kufeldt, 2003; Merdinger et al., 2005; Rios & Rocco, 2014, Stewart et al., 2014). Kufeldt (2003) found an inverse relationship between the educational attainment of young people formerly in care and the number of school changes they experienced during childhood and adolescence. Comparably, Merdinger and colleagues (2005) and Rios and Rocco (2014) found that having a history of fewer school disruptions was associated with greater academic success among postsecondary students who had formerly been in care.

**Macrosystem influences.** In addition to the previously described experiences and contextual factors, the literature has identified one important aspect of the macrosystem of youth in care that can have a profound influence on their career development, the culture of being in care.

**The culture of being in care.** Young people formerly in care generally believe that being placed into out-of-home care was necessary. In Courtney and colleagues (2001), 90% of participants formerly in care agreed out-of-home care was an appropriate decision for them, and 69% of Barth’s (1990) participants from care stated their lives would have been worse if they had not entered care. However, even though these young people acknowledge the necessity of being placed in care, many express being disheartened by their experiences in care. In one study, 32% of participants reported they
felt lonely during their time in care and 37% felt they were different from their peers growing up (Courtney et al., 2001). Additionally, in Hudson (2013), young people in care articulated an awareness of the disadvantages they experienced in comparison to their non-care peers.

Furthermore, many young people in care are ashamed of their in-care status. This shame manifests through negative self-perceptions and the negative perception of others. Buys and colleagues (2011) found that young people in care believed they were treated inequitably in academic and work situations because teachers and employers viewed them as “trouble-makers.” Moreover, these participants also reported experiencing bullying in schools by both peers and teachers related to their in-care status. For these young people, the stigma and treatment they received around being in care exacerbated issues related to school concentration and grades. This, in turn, had an adverse effect on their self-esteem, self-confidence, anxiety, and depression (Buys et al., 2011).

In summary, the existing literature on in-care experiences reveals that the career development of young people in care can be far more complicated than their non-care peers in many ways. These young people are disadvantaged from the start, often coping with the effects of childhood maltreatment and loss of being removed from their families, only to be cast into care systems that are frequently flawed. During their time in care, many experience multiple distressing changes in their placements, caregivers, and schools. These young people struggle academically and occupationally and have few, if any, positive adult relationships in their lives to turn to for support. For many of these young people loss, abandonment, failure, hopelessness, and even abuse are pervasive themes in their lives that overshadow career development. Despite these circumstances,
they resiliently express a profound hope for their future with aspirations to attend postsecondary and obtain meaningful employment after leaving care.

The Existing Literature: Relevant Experiences After Care

During late adolescence and early adulthood, most young people are gradually exploring a transition toward independence and engaging in career development related tasks with emotional, practical, and financial support from their families (Domene et al., 2014). In contrast, when young people in care reach the age of majority, the child welfare system often severs their relationships with their caregivers and caseworkers and cuts off their financial support. As a result, young people from care must rapidly adjust to independence with fewer internal and external resources and supports than their non-care peers. Consequently, their career development can become compromised.

Microsystem influences and mesosystem connections. Several important microsystem influences and mesosystem connections have been found to affect the career development of young people who age-out of care. This includes aspects such as the impact of mental health, early parenthood, justice system involvement, relational support, participation in education, barriers to education, unemployment / underemployment, and career development barriers.

Mental health. Given the extraordinary challenges young people in care endure through childhood and adolescence, it is not surprising that many of these young people experience mental health concerns through their journey into adulthood. Among participants in the Northwest Foster Care Alumni Study, Pecora and colleagues (2005) found that just under 55% had one or more psychological diagnoses. Of those who reported at least one psychological diagnosis, 25% had been diagnosed with
posttraumatic stress disorder (PTSD), 20% had been diagnosed with major depression, and another 17% had been diagnosed with a social phobia. Similarly, seven of the eight 16 to 18-year-old participants in Arsenault and Domene’s (2018) qualitative exploration of mental health promotion in young people residing in care reported receiving at least one psychological diagnosis. These diagnoses included attention deficit hyperactivity disorder (50%), depressive disorders (37.5%), oppositional defiant disorder (25%), attention deficit disorder (25%), and anxiety disorders (25%).

Further, in Rutman and colleagues’ (2007) study, 57% of participants reported having mental health concerns two and a half years after they had been emancipated from care. These participants also reported higher rates of alcohol and substance use in comparison to the non-care population. Additionally, in Courtney and colleagues (2011), 25% of young people formerly emancipated from care reported substance use (not including alcohol) within the previous year. Of those who reported substance use, 23% met the DSM-IV criteria for substance abuse, and another 20% met the DSM-IV criteria for substance dependence (Courtney et al., 2011).

These higher rates of mental health issues among young people formerly in care can have adverse effects on their career development. Gewurtz, Kirsh, Jacobson, and Rappolt (2006) found that mental illness disrupts career development by perpetuating negative thoughts and feelings around self-doubt and work competency. Further, Baron and Salzer (2002) found that people who experience mental illness are significantly less likely to be employed in comparison to those among the general population without mental health concerns. Specifically, among young people emancipated from care, Dixon (2007) found that those who experienced mental health concerns or higher rates of
substance use also experienced poorer career outcomes in adulthood.

*Early parenthood.* Research indicates that young people involved in out-of-home care are at a higher risk of early parenthood (Courtney et al., 2011; Dworsky & Courtney, 2010; Singer, 2004). Among a sample of young people who had been involved in out-of-home care, Dworsky and Courtney (2010) found that 33% had been pregnant prior to 18 years of age, compared to only 13.5% of similar-age, non-care peers. Further, Courtney and colleagues (2011) found that 67% of males 25 to 26 years of age who had formerly been in out-of-home care had fathered a child, compared to only 39% of similar-age, non-care peers.

Early parenthood has been found to have a negative impact on multiple work-related outcomes (Dworsky & Gitlow, 2017). Dworksy and Gitlow (2017) analyzed administrative data for 1,943 young people who were a parent of at least one child when they aged-out of care and found that only 50% had been employed at any point during their first year of independence. Among those who had been employed, the majority had not experienced stable employment and earned an income below the federal poverty line. Dworksy and Gitlow (2017) also found that the age at which a young person had their first child was related to their income: the younger a person had been at the time of their first childbirth, the lower their earnings. Additionally, as the number of children increased among young parents when they aged-out of care, the likelihood to be employed and amount of earnings decreased. However, Dworksy and Gitlow (2017) also found that young parents who had worked the year before aging-out of care were four times more likely to be employed after their emancipation and more likely to earn a higher income than those parents without such work experience.
**Justice system involvement.** Often related to their experiences of childhood maltreatment, lack of social connection, placement instability, and low rates of participation in education and employment, research suggests that young people with a history of out-of-home care are at an elevated risk of being involved with the justice system (Barn & Tan, 2015; Barth, 1990; Courtney et al., 2001; Cusick, Courtney, Havlicek, & Hess, 2011; Lee, Courtney, Harachi, & Tajima, 2015; Reilly, 2003; Rutman et al., 2007). Barth (1990) found that, among a sample of young people emancipated from out-of-home care, 33% admit they had engaged in a criminal activity to obtain money, 31% had been arrested, and 26% had been incarcerated. Further, among another sample of young people who had aged-out of care, Reilly (2003) found that after their emancipation, 45% had been in trouble with the law, 26% had criminal charges against them, 41% had been in jail, and 7% were currently incarcerated.

Similarly, comparing a sample of young people involved in out-of-home care and a sample of non-care peers, Cusick and colleagues (2011) found that young people from out-of-home care aged 17 and 18 years old reported engaging in criminal activity within the last year at nearly twice the rate of their non-care peers. When interviewed again at age 19, both groups reported lower rates of criminal involvement, but young people from care continued to report engaging in more criminal activity than their non-care peers. At the time of the third interview when participants were then 21 years old, both groups again reported lower rates of criminal involvement in comparison to the previous interview. However, it was found that young people from care were still more likely than their non-care peers to report damaging property, home burglary, and pulling a knife or gun on someone.
Justice system involvement is connected in complex ways to many aspects of career development. Pager (2003) found a causal relationship between having a criminal record and employment outcomes. Specifically, having a criminal record limited employment opportunities and decreased the likelihood an employer would consider a job candidate by almost half (Pager, 2003). Additionally, Western (2002) demonstrated that a history of incarceration reduced wages by 10% to 20%, and reduced wage growth by 30%.

Among a sample of young people who had been emancipated from care, Lee and colleagues (2015) found that criminal involvement in adolescence decreased the likelihood the young person would graduate high school by age 19. This, in turn, both decreased the likelihood the young person would be employed and increased the likelihood they would be involved in further criminal activities at age 21. Additionally, Barn and Tan (2012) explored the factors that influenced 16 to 23-year old’s who were formerly in care in the United Kingdom to engage in criminal activity. The authors found that placement instability, lack of participation in education, and unemployment increased the likelihood of criminal involvement in their sample. Reflecting on these studies, it appears there is a bidirectional relationship between employment and criminal activity among young people formerly in care: a history of criminal involvement creates greater challenges in securing employment, while unemployment leads to a greater risk of engaging in crime.

Relational support. Research suggests that, in general, young people’s journey into early adulthood is facilitated by the supportive relationships in their lives (Nesmith & Christophersen, 2014; Rutman & Hubberstey, 2016). However, many young people
from care have a history of problematic relationships and report an absence of supportive relationships in their lives (Rutman et al., 2007). Indeed, it is not surprising that many young adults who were formerly in care have few dependable social connections and compromised relationship building skills (Nesmith & Christophersen, 2014).

Supporting this claim, Rutman and colleagues’ (2007) longitudinal study of young people leaving care demonstrated an overall decrease in participants’ experience of support over the two and a half years of the study. At the time of their final interview, 50% of participants stated they felt disconnected from their mother, 60% felt disconnected from their father, 35% stated they had no close or trustworthy friends, and less than 50% were involved in community activities or support groups. Further, more than 50% reported they had either no one or only one person they could identify as a source of practical and emotional support.

This lack of social connection and support has been found to have an adverse effect on the career development of people who were formerly in care. In Rutman and Hubberstey's (2016) exploration of the role of social support in young people’s journey in early adulthood, several participants pursuing postsecondary education or employment goals stated their experiences were facilitated by the support they received from family or the community groups they belonged to. Comparably, Mendis, Gardner, and Lehmann (2015), found that young people from care who graduated university reported that a substantial contributor to their academic success was having someone who encouraged their academic potential by believing in them and keeping them focused on their education. Similarly, in Merdinger and colleagues’ (2005) exploration of the experiences of young people from care attending university, 87% of participants reported having
family or friends they could rely on for support. Although these latter findings
demonstrate benefits to career development when young people from care are able to
obtain social support, it also underscores the problem with the fact that the majority of
this population lacks such support.

**Participation in education.** An abundance of literature demonstrates low rates of
high school graduation and postsecondary participation among young people from care
(Barth, 1990; Courtney et al., 2011; Dixon, 2007; Kufeldt, 2003; Pecora et al., 2006;
Rutman et al., 2007). Furthermore, even when young people from care successfully begin
postsecondary education, they are more likely than their non-care peers to drop out
(Courtney et al., 2011; Day, Dworsky, Fogarty, & Damashek, 2011).

In a sample of young people between the ages of 20 to 22 years old who had been
out of care for two and a half years, 52% reported they had not completed high school
and only 25% were pursuing a postsecondary education (Rutman et al., 2007). In
Courtney and colleagues’ (2011) study, 20% of participants between the ages of 25 to 26
reported they still had not completed high school and only 8% had completed a
postsecondary education. To put these results into perspective, among those the same age
without a care history, only 6% had not completed high school and 46% had completed a
postsecondary degree.

Pecora and colleagues (2006) also found a striking difference in the rate at which
young people from care completed high school with a GED: 84% of participants in their
study reported completing high school, but only 56% did so with a high school diploma,
whereas 28% finished with a GED. This rate of high school completion via a GED is
nearly six times that of the non-care population (Pecora et al., 2006). Pecora and
colleagues further noted that those with a GED are 50% less likely to attend postsecondary and more likely to earn a lower income in adulthood.

In terms of postsecondary education, Day and colleagues (2011) found that over 30% of university students formerly in care dropped out of their programs in comparison to non-care, low-income, first generation university students, whose drop-out rate was less than 20%. Likewise, Courtney and colleagues (2011) reported that over 30% of their participants from care had dropped out of a postsecondary program.

The various educational deficits experienced by young people formerly in care have a negative effect on their career development. Leone and Weinberg (2010) reported that lower levels of educational attainment are associated with an increased likelihood of homelessness, incarceration, and unemployment in young people who had left care. Similarly, Dixon (2007) found that lower academic achievement was associated with poorer career outcomes among this population.

**Barriers to education.** Despite low rates of participation in education and lower academic achievement, many young adults from care express a desire for engagement in education. For example, Courtney and colleagues (2011) reported that 91% of their participants who were not in a postsecondary education program stated they had put at least some thought into it, and of those who were thinking about returning to school, 45% had started to take steps toward returning. However, many of these young people are confronted with barriers in pursuing an education, which are often closely related to their abrupt transition out of care and the lack of support surrounding this transition.

Among young people from care in Rutman and colleagues’ (2007) study, many reported having to drop out of high school due to needing to work, pregnancy, school
being too difficult, feeling out of place, or being kicked out. When asked later about returning to school, many cited parallel barriers such as needing to work, not being able to afford school, or childcare responsibilities. Courtney and colleagues (2011) found similar barriers to education in their interviews with young people formerly in care, with the need to work and not being able to afford tuition being the most frequently cited reasons for having to drop out of their postsecondary education programs.

Reflecting on these documented barriers, financial difficulties are frequently reported as one of the dominant challenges this population experiences in pursuing their education. However, Wolanin (2005) suggests that some of the challenges this populations faces in pursuing education transcend finances and relate directly to growing up in the care system. Wolanin (2005) explains that successfully pursuing education in young adulthood, particularly when it comes to postsecondary education, is largely dependent on a young person’s ability to be autonomous and self-responsible. Postsecondary education environments require students to be able to make decisions for themselves, advocate for themselves, get themselves to and from class, to be prepared for classes, etc. However, these competencies are often underdeveloped among young people from care. During their time in care, young people are often dependent on others to make decisions for them, leaving these young people with little opportunity to exercise independence and self-responsibility until their emancipation (Arsenault & Domene, 2018). After leaving care, when these young people are confronted with the challenges involved in pursuing education responsibly, many find they are unprepared (Wolanin, 2005). This lack of developed autonomy and self-responsibility has a negative effect on these young people’s ability to successfully participate in education, and, in turn,
negatively impacts their career development.

**Unemployment and underemployment.** The benefits of employment extend beyond generating an income; employment has also been found to reduce psychological distress (Marchand, Drapeau, & Beaulieu-Prévost, 2012) and provide a sense of meaning and purpose (Blustein, Olle, Connors-Kellgren & Diamonti, 2016). However, young people from care experience lower rates of employment than their non-care peers. Stewart and colleagues (2014) found that young people from care demonstrated lower rates of employment in comparison to their non-care peers from low-income families through age 24. Similarly, in Courtney and colleagues’ (2011) interviews with young people from care aged 25 and 26 years old, only 45.8% were employed. In contrast, they found that 79.6% of similar-age young people without a care history were employed. Additionally, among those from care who were unemployed, 66.8% reported actively seeking employment over the last month and more than 20% had been seeking employment for at least 12 months.

Notably, even young people from care who have higher levels of education or who have secured employment experience occupational difficulties. Salazar (2013) found that young people formerly in care who had graduated from college were less likely to experience job security and financial satisfaction than their non-care peers with college educations. Building on Salazar’s (2013) study, Okpych and Courtney (2014) investigated employment rates and annual earnings based on educational attainment, comparing a sample of young people who aged-out of care and their similar-age, non-care peers. The authors found that, although higher levels of educational attainment resulted in higher employment rates and annual earnings among both populations, young
people without a care history still repeatedly outperformed those from care on both outcomes.

Furthermore, among participants from care in a study by Kufeldt (2003), 32% reported full-time employment and another 22% reported part-time employment. However, the nature of that employment tended to be low-paying labour or service jobs. Similarly, Rutman and colleagues (2007) found low rates of employment in their sample of young people from care and reported that those who were employed were also often working low-paying service jobs. Comparably, young people from care in Pryce and colleagues’ (2016) study experienced difficulty in finding employment that was satisfying and provided an adequate income. When they did obtain employment, many reported they were overqualified and underpaid for their work.

As a result of their unemployment and underemployment, many young people from care earn less than their non-care peers, live on an income at or below the poverty level, and greatly depend on financial assistance (Courtney et al., 2011; Pecora et al., 2006). Indeed, in Rutman and colleagues’ (2007) Canadian study, 40% of participants from care reported social welfare income assistance as their primary source of revenue, and all participants were found to be living in poverty, as defined by Statistics Canada’s indicators of poverty.

**Barriers to career development.** Career barriers are one of the most significant challenges young people face when they leave care (Pryce et al., 2016). Although many young adults who were formerly in care are not employed in their ideal career, many retain their original career aspirations (Barth, 1990). For some, the lack of relational connections makes it very difficult to secure work in their aspired field, because they do
not have the opportunity to secure references for employment or to network as a way of becoming aware of employment opportunities (Pryce et al., 2016). For others, their deficits in education prevent them from pursuing their aspired careers (Barth, 1990; Courtney et al., 2011). Yet others are held back from pursuing the careers they aspire to because they are confronted with the challenges of securing housing and paying bills almost immediately upon leaving care. As a result, they feel pressured to accept any work they can acquire, rather than taking the time to find and obtain employment that can build towards their longer-term career goals (Pryce et al., 2016).

**Exosystem influences.** The literature revealed only one important aspect of the exosystem of young people who-age out of care that has a considerable influence on their career development. This aspect is experiencing instability in finances and housing.

**Financial and housing instability.** Many young people leave care without the knowledge, skills, resources, or supports needed to successfully navigate independent living. Furthermore, they are quickly confronted with the tasks of finding a new home, completing their education, securing employment, and building social connections. Overwhelmed, many of these young people find themselves in financial hardship or even homeless.

Research has repeatedly documented the financial struggles experienced by young people after leaving care (Barth, 1990; Courtney et al., 2001; Pecora et al., 2005; Pryce et al., 2016; Stewart et al., 2014). Indeed, Pecora and colleagues (2005) reported that the poverty rate among young adults from care in the United States was nearly three times higher than the national poverty rate. Further, in both Courtney and colleagues’ (2001) and Reilly’s (2003) studies, more than half of the participants left care with less than
$250 in savings. Additionally, 64% of Barth’s (1990) participants reported experiencing concerns around having an adequate amount of food or money after leaving care.

Many of these young people are also challenged with securing affordable housing after leaving care. There is a high prevalence of accommodation breakdown and homelessness among this population. Dixon (2007) reported that, within the first 12 to 15 months after leaving care, one-third of participants had moved three times, 20% moved at least five times, and 35% had experienced homelessness. Comparably, among young people formerly in care in Rutman and colleagues’ (2007) study, 29% of participants had moved four or more times within the first year and a half of emancipation. Multiple studies have also revealed that 30 to 45% of young people who were formerly in care experience periods of homelessness in adulthood (Barth, 1990; Daining & DePanfilis, 2007; Dixon, 2007; Reilly, 2003; Rutman et al., 2007).

The financial and housing instability many young people from care experience during young adulthood often undermines their career development. This is particularly true for those who experience homelessness. Hagan and McCarthy (2005) reported that young people who experienced homelessness have poorer psychological, social, academic, and occupational outcomes. Further, among young people formerly in care, those who experienced greater housing instability were found to be more likely to be unemployed (Dixon, 2007).

**Macrosystem influences.** The literature indicated community integration to be an important aspect of the macrosystem of young people who age-out of care that had an impact on these young people’s career development. No other systematic macrosystem influences have been identified by previous researchers.
Community integration. Many young people who reach adulthood within the care system struggle to reintegrate with the wider community after they are emancipated from care. The world outside of care can seem foreign and integrating with non-care peers can be a daunting task (Geenen & Powers, 2007; Gomez, Ryan, Norton, Jones, & Galán-Cisneros, 2015; Pryce et al., 2016). Additionally, many young people who were formerly in care feel ostracized in their local community and perceive that the negative stigma of care follows them through young adulthood (Pryce et al., 2016). In a world where many aspects of career development require social connections and community networking, young people from care find themselves to be at a disadvantage.

In Gomez and colleagues (2015) study of homeless young people 18 to 25 who had aged-out of care, participants stated that being socially isolated, interpersonally challenged, and unprepared for the world outside of care made it more difficult for them to meet the developmental milestones of adulthood. In another study, young adults who had aged-out of care described their experiences of isolation and disconnection, and the challenges this created for them in their career development. Many felt that, due to their care experience, they lacked basic life skills such as time management, household upkeep, and financial budgeting (Pryce et al., 2016). Comparably, young people with a care history in Geenen and Powers’ (2007) study reflected feeling they lacked basic self-determination skills. These deficits in practical life skills, combined with an abrupt rather than gradual transition into independent living, can make daily life a more difficult experience for young people from care and results in greater challenges in these young people’s career development.

In summary, the existing literature on the career development experiences of
young people formerly in care demonstrates a continuation of the various issues these young people faced during their time in care as adolescents. Further, it also reveals a new set of challenges related to their abrupt transition into adult independence as they age-out of care. Compared to many of their non-care peers, young people who reach the age of emancipation in care are a highly vulnerable population. However, instead of providing these young people with a gradual transition into adult independence with additional resources and support, government care systems often leave these individuals to navigate their new independence with less time, resources, and support than their non-care peers. The population of young people who age-out of care struggle in areas of mental health, early parenthood, justice system involvement, financial instability, and homelessness, to only name a few. Given the immediacy of these issues, compounded with the fact that these young people have few, if any, dependable relationships in their lives to turn to for support, it is not surprising that these young adults appear to be challenged when it comes to pursuing career.

**Significance of the Current Study**

Reflecting on the existing body of literature, it becomes evident there are a variety of influences on career development that can occur both during young people’s time in care and after their emancipation from care. Most of these documented influences are challenging in nature and have adverse effects on these young people’s career development. This, in turn, has created a generally dismal outlook toward these young people’s potential career outcomes in the literature (Kitchenham & Domene, in press). Exacerbating this negatively-focused narrative, a majority of this previous literature conceptualizes career development as a function of objective measures, particularly,
occupation and income outcomes measured by employment rates and annual earnings. The underlying assumption appears to be that if these young people are not engaged in stable employment and earning an average income defined by federal statistics, they have simply failed in their career development.

However, contemporary research suggests that the labour market has become more dynamic in recent decades, and with this shift in the labour market has come a shift in how career may be conceptualized (Baruch, 2004). According to Baruch (2004), this shift in how we view career propels a shift in how we perceive career success. Although career success has historically been conceptualized as a linear and static outcome based on employment, earnings, and social status, career success in the modern world may be better viewed as a self-defined life journey (Baruch, 2004). This presents a significant gap in our knowledge: there is information about how this population of young people is performing in career development through historical conceptualizations of career outcomes, but we know very little about how they are performing in contemporary conceptualizations of career success, such as pursing self-defined and constructed career journeys. Therefore, the objective of this thesis was to explore how career development success is defined among the population of young people who aged-out of care who self-identify as having achieved success in this domain. In pursuit of this objective, this study was guided by the research question: How do young people who were formerly in out-of-home care and self-identify as experiencing career development success conceptualize their career success?

The first chapter of this thesis has provided readers with an introduction to the research topic of the career development experiences of young people involved in out-of-
home care, an in-depth review of the previously published literature relevant to the career development experiences of young people both during their time in care and after they have aged-out of care, and discussed the significance of the current study. The second chapter of this thesis has been written in manuscript form. It will begin with an abstract summarizing the research study completed as part of this thesis. This will then be followed with another, albeit brief, introduction to the research topic and review of the existing literature of the career development experiences of young people involved in out-of-home care and then provide readers with an overview of the current study.
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Chapter 2: The Conceptualization of Career Development Success Among Young People Who Aged-Out of Out-of-Home Care in Canada

Consistent with the School of Graduate Studies’ regulations and guidelines for manuscript style theses, Chapter 2 has been written in the form of a journal article manuscript. Specifically, it has been written to conform to the submission requirements for the *Journal of Career Development*, which can be found at: https://us.sagepub.com/en-us/nam/journal-of-career-development/journal201758#submission-guidelines

Abstract

This qualitative study explored the conceptualizations of career development success among young people who had formerly aged-out of an out-of-home care setting in Canada, addressing the central question: How do young people who were formerly in out-of-home care and self-identify as experiencing career development success conceptualize their career success? Data were collected using open-ended individual interviews and analyzed using Braun and Clarke’s (2006; 2012) thematic analysis. Three primary themes and seven subthemes embodying participants’ conceptualizations of career development success were revealed. Specifically, participants defined success in terms of economic security (subthemes: financial stability, employment stability), a supportive work environment (subthemes: feeling positive about oneself, feeling supported by/connected to coworkers) and suitable career fit (subthemes: having idiosyncratic needs met, pursuing meaningful work, experiencing personal and professional growth).

Key Words: Out-of-home care, aged-out, career development success.
The Conceptualization of Career Development Success Among Young People Who Aged-Out of Out-of-Home Care in Canada

Introduction and Background

In Canada, young people involved in out-of-home care are among society’s most vulnerable populations. As these young people enter the out-of-home care system and mature, many experience pervasive difficulties related to the reasons that originally brought them to care, which are often then compounded by additional adverse experiences endured during their time in care. It has been found that throughout childhood and adolescence young people in care experience trauma, abuse, and neglect (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Pecora et al., 2006), relationship difficulty with family-of-origin, caregivers, educational administrators, teachers, and peers (Barth, 1990; Blome, 1997; Crawford, Tilbury, Creed, & Buys, 2011; Powers & Stotland, 2002; Shook, Vaughn, Litchge, Kolivoski, & Schelbe, 2009; Tilbury, Creed, Buys, & Crawford, 2011), educational concerns (Berlin, Vinnerljung, & Hjern, 2011; Berridge, 2007; Blome, 1997; Burley & Halpern, 2001; Courtney et al., 2001; Courtney, Terao, & Bost, 2004; Emerson & Lovitt, 2003; Farruggia, Greenberger, Chen & Heckhausen, 2006; McMillen, Auslander, Elze, White, & Thompson, 2003; Morton, 2015; Pecora et al., 2006; Tilbury et al., 2011) and occupational-related issues (Buys, Tilbury, Creed, & Crawford, 2011; Creed, Tilbury, Buys, & Crawford, 2011; Hook & Courtney, 2011; Hudson, 2013), at often incommensurate rates compared to their non-care peers. Research further indicates that experiencing such difficulties during childhood and adolescence can have a substantial impact on young people’s subsequent career development (Blome, 1997; Buys et al., 2011; Courtney et al., 2001; Crawford et
As these vulnerable young people proceed through the out-of-home care system and eventually age-out of care, many experience an abrupt and inadequately supported transition into adulthood. While their non-care peers often pursue a gradual, exploratory transition toward independence and engage in career development related tasks with emotional, practical, and financial support from their families (Domene, Landine, & Stewart, 2014), young people who grew up in care are tasked with pursuing the normative career development related responsibilities of young adulthood, and are further burdened with rapidly adjusting to finical sovereignty, independent housing, an absence of practical assistance, and a lack of emotional support. Unsurprisingly, young people who age-out of out-of-home care have been found to experience considerable career development challenges in young adulthood.

In comparison to their non-care peers, young people who age-out of care are more likely to experience greater mental health concerns (Arsenault & Domene, 2018; Courtney et al., 2011; Pecora et al., 2005; Rutman, Hubberstey, Feduniw, & Brown, 2007), early parenthood (Courtney et al., 2011; Dworsky & Courtney, 2010; Singer, 2004), criminal justice system involvement (Barn & Tan, 2015; Barth, 1990; Courtney et al., 2001; Cusick, Courtney, Havlicek, & Hess, 2011; Lee, Courtney, Harachi, & Tajima, 2015; Reilly, 2003; Rutman et al., 2007), financial instability (Barth, 1990; Courtney et al., 2001; Pecora et al., 2005; Pryce et al., 2016; Reilly, 2003; Stewart, Kum, Barth, &
Duncan, 2014) and homelessness (Barth, 1990; Daining & DePanfilis, 2007; Dixon, 2007; Hagan & McCarthy, 2005; Reilly, 2003; Rutman et al., 2007). These young people have also been found to experience less support in their relationships with family-of-origin, prior caregivers, and friends (Nesmith & Christophersen, 2014; Rutman et al., 2007), and more difficulty integrating into the non-care community after their emancipation from care (Geenen & Powers, 2007; Gomez, Ryan, Norton, Jones, & Galán-Cisneros, 2015; Pryce et al., 2016).

Young people who age-out of out-of-home care have also been found to be at a lower likelihood to graduate high school and/or pursue a postsecondary education than their non-care peers (Barth, 1990; Courtney et al., 2011; Dixon, 2007; Kufeldt, 2003; Pecora et al., 2006; Rutman et al., 2007). Studies have further indicated that even those who graduate high school are more likely than their non-care peers to have done so through a General Education Development Certificate (GED) instead of a high school diploma (Pecora et al., 2005). Additionally, young people who aged-out of out-of-home care who are able to pursue a postsecondary education are more likely to drop-out before completion of their studies, in comparison to their non-care peers (Courtney et al., 2011; Day, Dworsky, Fogarty, and Damashek, 2011).

Young people who age-out of out-of-home care are also more likely to be unemployed and/or underemployed than their non-care peers (Courtney et al., 2011; Kufeldt, 2003; Pryce et al., 2016 Rutman et al., 2007; Stewart et al., 2014). Even those among this population who complete a postsecondary education are less likely than their similarly educated non-care peers to experience employment security and job satisfaction (Okpych & Courtney, 2014; Salazar, 2013). Predictably, all of these challenges that
young people who age-out of care experience can negatively influence their career development by undermining their employment stability, opportunity for occupational promotion, annual earnings, and income growth (Barn & Tan, 2012; Baron & Salzer, 2002; Dixon, 2007; Dworksy & Gitlow, 2016; Gewurtz, Kirsh, Jacobson, & Rappolt, 2006; Lee et al., 2015; Pager, 2003; Western, 2002).

The Current Study

In their review of the existing body of literature on the career development of young people involved in out-of-home care, Kitchenham and Domene (in press) identified a multitude of challenges, both during these young people’s time in care and after they have aged-out of care, which have the potential to impact these young people’s future life. Many of these challenges have been found to negatively impact various aspects of these young people’s career development outcomes, including deficiencies in academic achievement, level of professional development, employment rates, and annual earnings. Even though this literature reveals a fairly dismal outlook for these young people and implies that they are inherently struggling to succeed in their career development, there are individuals among this population who experience career development success. This brings into question how career development success is being conceptualized in the literature, and, perhaps more importantly, how it is being conceptualized by young people who formerly aged-out of care that are participating in the workforce.

Historically, in the more static and linear labour markets of the 20th century, objectively-focused career development indicators such as academic achievement, level of professional development, employment rates, and annual earnings traditionally
dominated conceptualizations of career success (Arthur, Khapova, & Wilderom, 2005; Baruch, 2004; Heslin, 2005). During that time, career success may have been conceptualized as an individual’s capacity to metaphorically climb a hierarchical ladder of professional status through the means of achieving higher levels of education, receiving promotions, and increasing annual earnings (Baruch, 2004; Savickas, 2015). However, as the contemporary labour market of the 21st century has become more dynamic and multidirectional, more subjectively-oriented career development concepts such as work-life balance, employment autonomy, meaningful work, and career satisfaction have gained greater attention (Arthur et al., 2005; Baruch, 2004; Blustein, Olle, Connors-Kellgren, & Diamonti, 2016; Heslin, 2005). Therefore, a better metaphor for contemporary career success may be the idea of an individual’s self-defined and self-constructed life journey (Baruch, 2004; Savickas, 2015). Conversely, very little is known about how young people involved in out-of-home care construct and experience career development success by this definition.

To address this gap in knowledge, the present study was designed to explore the ways that career development success is self-defined by young people who aged-out of out-of-home care. Specifically, a narrative research approach was used to answer the guiding research question: How do young people who were formerly in out-of-home care and self-identify as experiencing career development success conceptualize their career success?

**Method**

**Research Design**

This question was addressed using Elliott’s (2005) narrative approach for social
research, which involves inviting participants with relevant experience, related to the purpose of a study, to share their experiences through interviewing. The study was grounded in a constructivist paradigm with an emphasis on how meaningful narratives can be co-created through the interactions between the participant and researcher. This narrative approach grounded within a constructivist paradigm allowed participants in the present study to share their personal conceptualizations of career development success in an open, exploratory, and comprehensive way.

Participants and Recruitment

Participants were recruited after the study received institutional ethics review. The final sample consisted of five women who had aged-out of out-of-home care in Canada and self-identified experiencing career development success. A sample size of five is consistent with the narrative approach that was used (Elliot, 2005).

Participant 01 was 27 years old. She reported experiencing a history of both foster care and group home care. She had spent six years in out-of-home care and was emancipated when she was 17 years old. Participant 01 had completed a bachelor’s degree and was applying to pursue graduate studies at the time of her interview. She was employed as a youth care worker at the time of her interview. Participant 03 was 22 years old. She reported both foster care and group home care history. She had spent 10 years in out-of-home care and was emancipated when she was 18 years old. Participant 03 had partially completed a bachelor’s degree and was currently enrolled in an education program to work toward completing her degree at the time of her interview. She was employed as both a family support worker and group home care worker at the time of her interview. Participant 04 was 28 years old. She reported foster care history. She had spent
11 years in out-of-home care and was emancipated when she was 18 years old. Participant 04 had completed a bachelor’s degree. She was employed as a residential youth care worker at the time of her interview. Participant 05 was 26 years old. She reported foster care history. She had spent four years in out-of-home care and was emancipated when she was 15 years old. Participant 05 had partially completed a bachelor’s degree and was not currently enrolled in an education program at the time of her interview. She was actively seeking employment at the time of her interview. Her most recent occupation had been as a youth care worker. Participant 06 was 27 years old. She reported foster care and kinship care history. She had spent 12 years in out-of-home care and was emancipated when she was 21 years old. Participant 06 had completed both a college diploma and bachelor’s degree. She was employed as both a public speaker and waitress at the time of her interview.

Participants were recruited using purposive and snowball sampling, similar to the techniques used by Arnau-Sabatés and Gilligan (2015). Specifically, the first author provided letters of invitation to colleagues and other professionals who were working in or otherwise connected to the out-of-home care system in the province of New Brunswick. These individuals were asked to pass the letters of invitation on to potential participants who had aged out of care. When potential participants indicated they were interested in participating in the study and consented to have their contact information released to the first author, the first author contacted the participants via email to schedule the interview.

**Data Collection**

Data collection involved audio-recorded individual, semi-structured, open-ended
interviews. Interviews began by having participants complete a written consent form and demographic information form, which was then followed by inviting participants to verbally share a short introduction of themselves. Participants were then asked to identify how they conceptualized career development success. Participants’ initial descriptions of career development success were further explored through individualized follow-up probing questions such as “What is important about that aspect of career development in the context of your success?” and “Why is that aspect of career development success important to you personally?” These questions were asked within the context of the natural flow of the conversation between the first author and participants, rather than in a structured way. Audio-recorded interview lengths were as follows: 35.10 minutes (Participant 01), 11.11 minutes (Participant 03), 27.29 minutes (Participant 04), 12.03 minutes (Participant 05), and 28.47 minutes (Participant 06).

**Data Analysis**

Interviews were transcribed verbatim and analyzed using Braun and Clarke’s (2006; 2012) six-phase approach to thematic analysis (see Table 1). This method of analysis is consistent with the exploratory nature of this study’s research question and well-suited to the narrative and constructivist approach of this study. As Braun and Clarke (2006) describe, “Through its theoretical freedom, thematic analysis provides a flexible and useful research tool, which can potentially provide a rich and detailed, yet complex, account of data … [and] is compatible with both essentialist and constructionist paradigms within psychology” (p. 78). The analysis was conducted by the first author.
Trustworthiness and Authenticity

In relation to conceptualizing the quality of narrative research conducted within a constructivist paradigm, “verifying the facts is less important than understanding their meanings for individuals and groups” (Riessman, 2008, p. 187). Therefore, ensuring the quality of narrative research conducted within a constructivist paradigm has more to do with confirming the interpretation of the narrative rather than fact-checking the content. Based on Riessman’s (2008) suggestions to support this process, interviews were audio-recorded, verbatim quotations were presented as descriptive evidence within the thematic analysis report, and an audit-trail was created and maintained to enhance the trustworthiness and authenticity of this study.

Member-checking was also employed to further increase the trustworthiness and authenticity of this study. This entailed connecting with all interviewed participants via email to provide them with a copy of the thematic analysis report and asking participants whether the reported themes and subthemes adequately reflected their own experiences and whether they found the overall account to be plausible. The purpose of this member-checking process was to determine the degree to which participants agreed the data was appropriately and accurately interpreted, as well as described in a way that made sense to them. Three of the five interviewed participants in this study provided member-checking feedback. All of the responding participants agreed with the interpretation and presentation of the data and none of the participants requested to have any changes made.

Research Findings

Participants all expressed individual ideas that comprised their conceptualizations of career development success and provided varied reasoning for the importance they
placed on those ideas. Nonetheless, common themes became evident among their conceptualizations. Indeed, the thematic analysis revealed three primary themes and seven subthemes among participants’ conceptualizations of career development success.

**Theme 1: Economic Security**

To varying degrees, all participants discussed concepts related to achieving economic security as indicators of success in their career development. Economic security included both financial stability and employment stability. Specifically, participants expressed that being able to manage their finances and live comfortably as a result of their financial stability and being able to experience a sense of personal security as a result of their employment stability, were hallmarks of their experience of career development success.

**Financial stability.** When asked for their definition of career development success, concepts related to financial stability were among the first items discussed by four of the five participants. For these participants, being able to support themselves financially meant they were able to manage their expenses and live comfortably. As one participant explained, “I guess on the, you know, baseline of it all is, you know, I can pay my bills” (Participant 01).

These participants acknowledged that after they aged-out of care they received little to no external financial support and, in turn, they had to rapidly adjust to financial sovereignty. Frequently, participants reflected on the difficulties they had experienced related to affording housing, food, clothes, and transportation, and drew an important connection between their career, financial stability, and quality of life. As indicated by two participants in their definitions of career development success, “Um, having a, like, a
A decent paying job is also good because then you are able to pay your finances and you're able to, you know, live comfortably.” (Participant 06). Similarly, Participant 04 stated,

Like, definitely stability, like, financial stability. I feel like my life has substantially increased for the better because I have a steady income coming in … And then, with that income, like, then you can do better things to improve your personal life. Like, eating better and going to the gym, you know, and taking time for yourself to buy the things that you need. Like, I'm always ... I'm pretty good with my money, but it's, like, it's expensive to live. If you want a nice pair of boots for winter, that's like $250. If you want a nice jacket, there's another $400. Like, it's just so much money to live, like, normally, you know? And so now that I am getting, like, a good income, it's like I feel good about myself because I can go to the gym and I can buy things that I need without having to worry, like, “Oh, do I really ... like, can I afford that this time?”

**Employment stability.** Four participants included employment stability in their conceptualizations of success. As one participant described in her definition of career development success, “It would just be, like, not having to worry about, like, if you're going to lose your job. Like, feeling stable.” (Participant 05). While another participant shared, “You know, like being able to have, uh, a stable, long-term job is obviously important.” (Participant 06).

Indeed, participants acknowledged the importance they placed on obtaining stable employment and described the role employment security played in their experience of feeling stable in both their career and personal lives. As Participant 03 shared her
perspective on experiencing both instability and stability in the context of her career,
“Um, not having a constant stable [work] environment can mess with you sometimes and you're like … crap! But, I think having a stable environment helps greatly ... Just knowing I have my place.”

**Theme 2: Supportive Work Environment**

Four of the five participants discussed the impact the climate of their work environment had on their understanding of career development success. Their work climate was discussed in the context of both how they felt about themselves as an individual at work, and how they felt about their interactions with colleagues at work. Specifically, participants expressed being able to feel positive about themselves at work and positive about their interactions with coworkers as indicators of career development success.

**Feeling positive about oneself at work.** Two of the five participants spoke about the importance they placed on being able to feel confident, competent, trusted, valued, and/or appreciated as both an individual and employee in their work environment. As one participant shared, "Being successful in my career is, like, knowing I’m valued and I’m needed.” (Participant 04). This participant then elaborated on her initial conceptualization:

To be put into a position where I'm trusted, you know, to become a full-time employee or to spend more and more time ... Like, they call me all the time to come in and work. And so, yeah. Just like, wanting to use me. Being like, she has qualities and skills that we need here, you know. And asking me about my opinion and asking me about my advice and ... Like, listening to when I
have concerns or problems or observations that I'm thinking and feeling about a situation. Like, just ... Like, the value. You know, the valuing of what I can give. And so, they do that every day by just being like, “Thank you for being here,” or like, “We really appreciate you coming in,” or like, “You're doing a really good job.” (Participant 04).

As these participants described the importance they placed on being able to feel positive about themselves at work, they contrasted this indicator of career development success to their previous care experiences. Indeed, these participants shared their reflections of experiencing low self-esteem and low self-worth in childhood and adolescence, and even into young adulthood, as a result of being a young person in care. Two of the five participants described their workplace as being the first social environment that they had experienced feeling candidly positive about themselves. Thus, these participants spoke passionately about their experience of feeling confident, competent, valued, and appreciated in their workplace, and intently expressed that experiencing these positive emotions was a strong indicator of their career development success. For example:

I think the other big thing is confidence, right? To be able to go into a meeting with people ... After feeling like you're not good enough most of your life. You feel ... you’ve got this whole terrifying feeling of “Oh my gosh, like, these are limitations in a way”. Because, you know, there's a lot of damage, a lot of scar tissue. But, it's like, “No, I got this.” (Participant 01).

**Feeling supported by and connected to coworkers.** Related to feeling positive about their interactions with others in the workplace, three of the five participants
discussed the importance they placed on feeling supported by and connected to their coworkers. Specifically, they identified aspects in their workplace such as coworker support, team cohesion, approachable leadership, and friendship with colleagues as indicators of career success. These participants interpreted receiving coworker support as an indication their coworkers trusted and valued them, and they, in turn, trusted and valued their coworkers. This reciprocal trust and value then translated into a sense of team cohesion, or as one participant described it as “having a good work family”:

Having a good work family is important because … No matter what job you're working in, you're going to be spending a lot of time with people, so it's a really good idea to surround yourself with people that are going to be positive in your life ... Because if you're constantly surrounded with people who are going to bring you down ... It's going to impact your life and you're going to have more struggles ... Having a good work family is the best feeling in the world because I can walk into a shift and I can know that the person that I have next to me is supporting me as much as I'm supporting them.

(Participant 01).

Related to working in an environment where leadership was approachable, participants expressed that this meant they had supervisors or managers who were open to accepting their opinions and feedback, and that such opinions would be taken under genuine consideration and feedback would be constructively received. Participants shared that it was important to them that they had a voice in workplace matters and that their voice actually had the opportunity to be heard. For example, one participant shared in her
definition of career development success, “It’s having a leader who can appreciate, like, some positive criticism and work with a team to better everything” (Participant 05).

Participants also contrasted their current workplace relationships with the lifelong challenges they had experienced in developing relationships and connecting with others due to their history of being in care. Participants described feeling socially disconnected from others growing up and socially awkward as adults trying to navigate life outside of the care system. For these participants, their workplace gave them a platform to develop new and healthy relationships and connect in a meaningful way with others. Specifically, two participants described their work environment as being one of the first places they have been able to make healthy and supportive relationships. They further shared the positive impact such experiences have had on their self-esteem and personal well-being.

As one participant shared while describing an experience of feeling connected to her colleagues in a way that transcended the boundaries of work:

It doesn't just end at the workplace when you close the door and go home. It's people that you can still have a connection with even after work. That connection is very important ... Especially when being connected to people is really hard, you know? I struggle with making connections. I don't make friends very well - I tend to talk a lot, I tend to overshare, I tend to get really anxious, and I tend to just ... I'm just a very strange, socially awkward person. So, to come into a situation where the people know that, and they accept me, it's pretty great (Participant 01).

Another participant explained that having coworkers recognize positive qualities about her at work has had a positive effect on her self-esteem:
I've lived on my own for a really long time. Like, I ran away from home when I was like 14, and then I was gone until I was 18. And then, I went to a drug treatment center until I was, like, 19. And then, I went to university. So, you know, it's kind of like always being on my own and never ... like, for me, it's always about putting one foot in front of the other. Like, I'm always continuously moving because I think there's a fear that if I stop moving then, like, all of that stuff kind of catches up to me again. And I'm learning, in my adult life, that that's not true. And, um, you know, so to have someone, like, recognize those things, like, helps me with my self-esteem because you know what? At the end of the day, like, you know, on the outside, everyone sees something else. But, on the inside, you relive those experiences and those moments, and it's so hard sometimes to see past those things (Participant 04).

Theme 3: Suitable Career Fit

Although everyone conceptualized career fit in ways that were unique, all participants described experiencing a sense of fitting in their work and career path as an indicator of success within their career development. Three subthemes emerged within this theme of suitable career fit: (a) being able to have their idiosyncratic work needs met, (b) being able to pursue meaningful work, and (c) experiencing a sense of personal and professional growth in their career development.

**Being able to have idiosyncratic work needs met.** Four participants expressed how important it was to them that their employment met particular personal, interpersonal, and environmental needs. These needs included employment that would not negatively impact their mental health and being among similar-minded people in their
work settings. Another aspect of success within this subtheme was reaching a place of self-awareness and acceptance related to their own strengths and limitations in relation to work.

Specifically, during the interviews participants discussed their experiences with trauma, pervasive stress, posttraumatic stress disorder, depression, anxiety, substance abuse, and personality disorders and shared the impact these experiences have had on their career development. Within the context of this subtheme, participants indicated that achieving career development success included being self-aware of their mental health needs and willing to be honest with themselves about how these needs may impact their careers. They reported that based on this honest self-awareness, they had secured employment that did not recurrently or severely challenge their mental health. As one participant shared in her conceptualization of experiencing career development success, “I do have PTSD but I don't let it impact my job, you know. So, like, that's another aspect of doing well in my career, is, um, being self-aware.” (Participant 01).

As participants described their idiosyncratic work needs, many attributed these needs to their previous care experiences. They described certain circumstances, dynamics, and environments that could negatively impact their personal and professional well-being, which they attributed to experiences of trauma and related experiences occurring before, during, and/or after their time in care. One participant elaborated on the importance of reaching a place of acute self-awareness in her career development in relation to her trauma history:

With the care experiences, you know, we all have our traumas, right? And so, self-awareness is really important because you need to understand that some
days you can't do it. You have to understand, you have - I was one of those people who never wanted to accept my limitations. But, you need to respect yourself and respect your coworkers in the sense of being able to step back when things get too hard. But, it's also, you know, understanding that as much you have limitations, it's also knowing that you're capable of more too ... So, it's both ends of the spectrum of understanding both your limitations but also your strengths (Participant 01).

Similarly, another participant also made the connection to trauma history as she explained the importance of experiencing a suitable career fit in her conceptualization of career development success:

   There's certainly, like, lots of trauma baggage that can come from being in care. So, like, it's really important that I work somewhere that can sort of adjust with all of that ... It's about finding the balance of what's not going to set you back and what you can work with (Participant 05).

Further, Participant 04 described why being around people with similar life experiences to her was important to her career development success, due to the distinct way of thinking that can develop for people who have experienced out-of-home care:

   Being around like-minded people ... You know, I have a different mindset. I look at the world differently because of what I've been through. And, so, when you get into a place where people haven't experienced anything like that or don't care to or don't have a passion to help, like, you know ... It's really, the dynamic is off!
Pursuing meaningful work. In describing their conceptualizations of career development success, all participants discussed the importance they placed on being able to pursue a career that they found personally meaningful. Participants articulated the importance they placed on pursuing meaningful work through their discussions related to following their career passion, finding work they authentically cared about, and experiencing a sense of fulfillment on the job. As one participant explained, “I 100% believe that doing-well in your career development is doing something that you care about, that you're passionate about.” (Participant 06). Another participant, who plans to run homeless shelters for youth and young adults shared a similar understanding:

Um, finding a job that I'm passionate about. So, like, working in the group home right now is something I'm really passionate about. Um, being able to do my own research study and like, really get the layout of my future homeless shelters is, uh, really a big thing for my career development ... Like, that's doing-well to me, is doing that (Participant 03).

Participants also placed greater value on pursuing work they found personally meaningful over work with greater financial reward. For example:

Like, I would prefer getting a lower paying job doing something that I love, versus, doing something that I'm not a fan of and making money out of it. Because, I feel like a big part of doing-well in your career, and your life in general, is being able to do the things that you enjoy doing. (Participant 06).

Further, many participants related their motivation to find and follow career paths they were passionate about to their previous care experiences. Participants shared that, during their time in care, they often felt they had little to no control over their futures.
They conveyed how powerful it is for them to now be in a position where they are able to experience some control over their future by developing their own career aspirations and crafting their careers in such a way to bring these aspirations to fruition. For these participants, being able to follow a career path they were authentically passionate about meant that they (a) had developed particular career goals they genuinely cared about, (b) they had plans for how to achieve these goals, and (c) they were working toward achieving these goals. Many participants who were working in career environments they found personally meaningful expressed the personal satisfaction and fulfillment this created for them, and conveyed the experience of this satisfaction and fulfillment as a marker of their career development success. As one participant shared:

It's important to do something that means something to you. Because, otherwise, what's the point? You know, why are you going to just be this empty box just kind of filling with these experiences that mean absolutely nothing to you. You should fill your life experiences with something that's going to make you happy. And, so, why not have that in a job? If you can find a job that, you know, meets your passion and fulfills your needs, and makes you happy. Then go for it. Um, I think, a lot of the times, like, just bouncing back and forth in homes, you know, I was happy but I never really felt like me. So, I wanted something that was both me and that made me happy. Uh, so, I found that now in my work and it just kind of made me feel more like home. And, that I was building and creating the foundation for my own permanency.
Experiencing personal and professional growth. Four of the five participants conceptualized the opportunity to experience personal and professional growth in their careers as an indication of their career development success. Within this subtheme, many participants articulated that it is important for them to work in jobs where they feel they are able to learn and grow as an individual and an employee, and to continue cultivating their career plans and goals. These participants indicated that being in employment positions where they could learn from mistakes, be given new challenges, and experience the capacity for growth was important to them. These opportunities and experiences were not described in terms of occupational status promotions, but rather in the context of being given new tasks in their current job or experiencing varying degrees of change in their current job, which kept them from feeling things had become stagnant. As Participant 06 shared about her current career experience:

I enjoy what I do. I enjoy the interaction. Um, I make a lot of mistakes. There's things that cause me stress on the job. Um, but I feel like those are all opportunities to learn and grow. And, I feel that having those types of things within your career development is also important, in terms of, you know, doing-well in your career development. Because, if you just do the same thing, day in and day out, you're not growing as a person and you're not growing in your career.

As participants described taking on new challenges and experiencing growth in their career development, they shared that this stimulated thought toward what else they might be able to take on, learn, or do, both within their workplace and beyond. Indeed, experiencing growth in career translated into experiencing growth in participant’s
personal lives, which was identified by multiple participants as a marker of their career development success. Participant 04 shared:

Where I'm at in my career right now has given me insights and sparked thoughts of, um, you know, like, what else can I do or where can I volunteer or what other kinds of people could I be hanging out with or being around that are all kind of doing the same thing? So ... I guess it's just kind of given me, like, just an array of opportunity, you know? And, uh, yeah. And, so that means a lot to me. That means that things aren't stagnant and that I'm going to continue to grow ... Like, you can only go up. You know, like, there is no going back, like, it's only up from here.

Further, as participants shared the importance they placed on experiencing this growth in their careers, many communicated the importance they placed on being able to continue cultivating their career plans and goals. That is, even if participants were not currently employed in their dream job, it was important to them that they were still able to continue working toward their ideal career and not lose sight of their goals.

Participants shared how their current employment positions contributed toward them reaching their dream job, through means such as enhancing their work ethics, increasing their employment skillsets, and providing the opportunity increase their work experiences. Many participants shared that retaining their original career aspirations and taking steps toward achieving those aspirations by ensuring they were continuing to develop themselves in their current employment positions meant that they were doing well in their career development. In the context of describing the success she was experiencing in her current career journey, one participant stated:
I'm not being slowed down by just being a bartender. I'm still learning … I'm still learning work skills, and, you know, enhancing my work ethics. I’m doing what I do and not losing sight of like what it is that I want to do, and not, you know, being tunnel visioned. (Participant 06).

Similarly, another participant included in her definition of succeeding in her career development the idea that “I’m following through and actually doing the things that I planned to do and not just being like ‘I'm going to do this’ and then doing jack.” (Participant 03).

Many participants related the importance they placed on this experience of growth and cultivating career plans to their previous care experiences. Participants shared that, during their time in care, they were often made to feel or explicitly told by authority figures (such as family, social workers, teachers, and guidance counsellors) that they would never amount to anything special and / or that their aspirations for their future were unrealistic. These participants also revealed that, although hearing such negative comments were difficult, it created a drive within them to rise above the pessimistic outcomes authority figures expected for them. Indeed, one of the ways participants shared being able to do that is by finding career paths they are passionate about, experiencing growth in their career development to continue working toward that passion, and not losing sight of their career ambitions along the way. Participants spoke about how the drive this created for them allowed them to not only be resilient in their careers, but to succeed, and show that they can follow their aspirations and meet their goals. As Participant 01 shared while reflecting on how some of her past negative care experiences turned into a drive that she uses as positive motivation in her present career journey:
I think that at the end of the day, I survived some pretty horrible stuff … I think that wanting to prove that I can do this is what has driven me to where I'm at today. So, even if I didn't have the confidence, I'd be fighting for it. If I didn't have the self-awareness, I'd be learning to get it. Um, so I guess it comes down to where it starts with that drive, and that drive … I manage to turn my experiences into a drive to try and thrive, and I succeed.

**Discussion**

The findings of this qualitative study provide insight into how young people who aged-out of out-of-home care and self-identify as experiencing success in their career development conceptualize their success. Drawing on information from narrative-based interviews completed with the five Canadian young adults formerly in out-of-home care who participated in this study, the thematic analysis revealed three primary themes and seven subthemes embodying these young people’s conceptualizations of career development success (see Table 2).

The themes that emerged from this study can be broadly organized into objective and subjective career development concepts. Objective career development concepts included the theme of economic security, which consisted of two subthemes: (a) financial stability and (b) employment stability. Within the boundaries of this theme, participants placed importance on being able to provide for themselves financially and to secure stable work. Subjective career development concepts included the theme of supportive work environment and suitable career fit. The theme of supportive work environment included two subthemes: (a) feeling positive about oneself at work and (b) feeling support by and connected to coworkers. Within the boundaries of this theme, participants
discussed the roles that feeling confident, competent, and valued at work, as well as feeling a sense of trust, support, and cohesion among their team of coworkers, played in their conceptualization of career development success. The theme of suitable career fit included three subthemes: (a) being able to have idiosyncratic work needs met, (b) pursuing meaningful work, and (c) experiencing personal and professional growth. Within the boundaries of this theme, participants shared how being able to have unique work needs met, being able to pursue a career path that was candidly important to them, and being able to learn and grow in their career journey had impacted their experience of career development success.

Existing literature in the area of career development among young people involved in care has typically approached investigating these young people’s career development experiences through an objective lens. Many of these studies explore and evaluate career development indicators such as academic achievement, employment status, occupational status, and / or income among this population, and then compare how these young people perform on such indicators against the non-care population (e.g. Barth, 1990; Berridge, 2007; Blome, 1997; Courtney et al., 2011; Courtney et al., 2001, Day et al., 2011; Farrugia et al., 2006; Okpych & Courtney, 2014; Pecora et al., 2006; Stewart et al., 2014). The findings from this study support the idea that some objective-based indicators of career development, specifically, financial and employment stability, are important to consider in understanding career development success among this population. However, these objective-based indicators of career success were not conceptualized by participants in this study in the same way they have been in previous literature. Additionally, the findings from the current study also suggest that such
objective measures of career development only capture a portion of the ways that young people who have experienced care conceptualize their own career development success.

Consistent with existing, objective-focused career development literature among this population, participants in this study described being able to provide for themselves financially and to experience a degree of employment stability as being part of the way they conceptualized success in their career development. This finding highlights that income and employment security are important objective-based concepts to consider when understanding career development success among this population. However, when participants described the meaning they placed on financial and employment stability, they did not indicate that it was important to achieve a specific level of income or that they had been employed in any job for a specific amount of time, which is how such indicators of career development are typically defined (e.g. Courtney et al., 2001). Rather, participants were more concerned that their income was sufficient enough to allow them to live comfortably and that their employment was stable enough to allow them to feel they had achieved a degree of permanency in their personal lives. This finding suggests that even these “objective” indicators of career development success may have subjective underpinnings among this population.

Further, although some participants described these two objective-based measures of career development to be meaningful, all participants seemed to place greater importance on subjective career development concepts. That is, participants spent more time discussing, shared greater detail in, and spoke more passionately about the importance they placed on being immersed in a supportive work environment and experiencing a suitable career fit than when they described their economic security. This
finding brings to a light an incongruence between the emphasis that the previous literature has placed on objective measures of career development and the greater importance that young people from care themselves place on subjective measures of career development success. This incongruence further illuminates the fact that previous literature has only captured some aspects of what career development means and how career development success is conceptualized by young people who were formerly in care.

Although is it clear the findings from this study are not entirely congruent with previous career development research among this population, the results of the current study are seemingly congruent with contemporary career development research among the general literature. That is, contemporary career development literature suggests that, in general, young people in the 21st century world of work place great value on being able to craft their career development in a way that best suits them (Baruch, 2004; Blustein et al., 2006; Heslin, 2005, Savickas, 2015). Indeed, all participants in this study described a multitude of subjective-based career concepts that came together to form their definition of career development success.

Conclusions

It is important to acknowledge that this study only offers a glimpse of how young people who age-out of care conceptualize career development success. However, as indicated above, one of the most striking conclusions that emerged is the contrast between the importance that previously published literature (e.g. Barth, 1990; Blome, 1997; Courtney et al., 2011; Courtney et al., 2001; Pecora et al., 2006) places on objective indicators of career development success, and the importance young people
from care in this study placed on subjective markers of career development success. Indeed, relative to other indicators of career development success, participants placed less emphasis on objective indicators of career development success, and instead described their career development success through self-defined markers and values, the majority of which were subjective in nature.

The findings also reveal the apparent inappropriateness of applying comparison-based research approaches to conceptualizing these young people’s career development outcomes. That is, previously published literature (i.e. Courtney et al., 2001; Pecora et al., 2006) has often ranked young people with a care history against members of the non-care population on items such as employment status and annual earnings as a method to understand how these young people perform in their career development. However, young people from care in this study mentioned no interest or concern with how they performed in their career development compared to members of the non-care population. Their success was not a function of how they perceived themselves to perform in comparison to a non-care member of the population, rather their success was a function of their individual and subjective conceptualization of success.

A final conclusion that can be made from the pattern of results that emerged from the current study is the far-reaching impact care experiences have on these young people’s career development into young adulthood. The particular themes and subthemes embodying how young people from care conceptualize their experience of career development success described in this study may not be unique to young people from care. However, participants consistently made connections between their specific career success understandings and their previous care experiences. That is, as participants
shared their definitions of career development success and described in detail why such aspects of career were important to them, they consistently included a reflection of how their past care experiences impacted the present importance they placed on particular aspects of career development success. Indeed, this study raises important questions about how care experiences impact the lives of young people both during their time in care and after they age-out of care, in both the world of career development and beyond.

**Limitations**

There are several limitations that should be considered in understanding the findings of this study. First, with most voluntary participation studies, the themes that emerged are only reflective of the experiences of those young adults who were formerly in care and who chose to participate. There may be additional conceptualizations of career success held by other individuals who were formerly in care.

Similarly, all the participants were residing in a single Atlantic Canadian province at the time of their interviews. Therefore, this research may, to some degree, reflect specific aspects of the care system and labour market of that setting. Young people who were formerly in care residing in other parts of Canada and from other countries may have different experiences and conceptualizations of career development success. In addition, only women volunteered to participate in this study. Conducting future research with young males who were formerly in care and self-identify experiencing career development success may bring to light different career development success experiences and conceptualizations.

Nonetheless, consistent with Elliott’s (2005) narrative approach to social research, the purpose of this study was not to create exhaustive or fully generalizable results.
Instead, it was to use individuals’ narratives of their experiences to illuminate a topic. In this case, it was revealed that at least some young people in care conceptualize career success much more broadly than what has typically been used in the literature, and in ways that are closely connected to their experiences of being in care.

**Future Research Directions**

Due to the substantial deficit in research focused on successful career development experiences among young people who were formerly in care, potential future research directions from this study are widespread. The intriguing themes that were found suggests that it is important to conduct additional research to build a more comprehensive and broader picture of how young people who were formerly in care actually conceptualize their experiences of success. Specifically, future studies could investigate this phenomenon among young people outside of Atlantic Canada, and among young males. Further, this study was exploratory in nature and, consequently, focused on the career success in a broad way. Following up from this study, each of the themes and subthemes that were revealed has the potential to become the focus of a future qualitative study, to add greater depth to the understanding of that theme or subtheme. Lastly, future research attending to how young people among this population actually come to experience their career development success would also prove beneficial. Specifically, investigating what experiences, circumstances, and events are identified by young people who aged-out of out-of-home care and experience career development success as promoting their career development success, to better understand how the experience of career development success may be encouraged among other members of this population.
In conclusion, although there are important limitations to the study that must be considered and many additional directions for future research that must be pursued, this study provided an initial understanding of what career success means from the perspective of young people who were formerly in care themselves. It became evident that their definitions are more comprehensive than the definitions that have previously been used in the literature and connected in inseparable ways from these people’s experiences of being in out-of-home care. Therefore, it may be beneficial for future researchers, as well as career practitioners and policy makers, to more fully recognize the various ways that this population conceptualizes success for themselves.
References


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Table 1.

*Braun and Clarke’s (2006; 2012) Six-Phase Approach to Thematic Analysis*

<table>
<thead>
<tr>
<th>Phase Description</th>
<th>Description of Analysis Tasks</th>
</tr>
</thead>
</table>
| 1. Become familiar with the data   | - Listen to and transcribe audio-recordings  
- Read and reread transcriptions  
- Note items of potential interest while listening to audio-recordings / reading transcriptions |
| 2. Create initial codes            | - Read through the dataset  
- Code all items of relevant interest to the research question by labelling excerpts of relevant text to capture what the item may mean |
| 3. Search for themes               | - Analyze the codes generated in phase two by reviewing the coded data and identifying codes which are similar to or overlap one another to group together as a candidate theme  
- Once codes have been grouped into candidate themes, create a visual thematic map or table to outline the tentatively identified candidate themes and their corresponding data extracts |
| 4. Review candidate themes         | - Consider whether each theme accurately captures all the collated excerpts of the coded data.  
- Consider whether the themes capture the entire dataset in a meaningful and comprehensive way |
| 5. Name and define themes          | - Identify what each theme is really about  
- Concisely and informatively name themes  
- Define themes with a clear purpose and scope |
| 6. Create a thematic report        | - Conduct a detailed analysis of each theme and write each analysis into a report |
Table 2.

*Key Results of the Thematic Analysis.*

<table>
<thead>
<tr>
<th>Primary Theme</th>
<th>Subtheme</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Economic security</td>
<td>a. Financial stability</td>
</tr>
<tr>
<td></td>
<td>b. Employment stability</td>
</tr>
<tr>
<td>2. Supportive work environment</td>
<td>a. Feeling positive about oneself at work</td>
</tr>
<tr>
<td></td>
<td>b. Feeling supported by and connected to coworkers</td>
</tr>
<tr>
<td>3. Suitable career fit</td>
<td>a. Being able to have idiosyncratic work environment needs met</td>
</tr>
<tr>
<td></td>
<td>b. Pursuing meaningful work</td>
</tr>
<tr>
<td></td>
<td>c. Experiencing personal and professional growth</td>
</tr>
</tbody>
</table>
Chapter 3

The second chapter of this thesis provided readers with a description of the research study completed as part of this thesis. This description consisted of the methods, findings, limitations, and future research directions of the current study. The following, third, chapter of this thesis will extend from the study description to discuss the implications the findings have for counselling and its related fields such as social work and youth care work, provide conclusions to this thesis, and end with appropriate references.

Implications for Counselling and Related Fields

This research is particularly relevant to the discipline of counselling. The core objective of this thesis was to better understand the career development experiences of young people who aged-out of care in Canada, with a particular focus on understanding how they conceptualize career success. The Canadian Counselling and Psychotherapy Association (CCPA, 2017) states that the primary goal of counselling is to “provide an opportunity for people to work towards living more satisfyingly and resourcefully.” The findings of this research support this goal. Specifically, career development success may be considered to be a part of CCPA’s goal of “living more satisfyingly and resourcefully.” In order for counsellors to provide young people who were formerly in care with ways to achieve this goal first requires an understanding of what career development success actually means to them. By providing such an understanding, this study opens the opportunity to encourage these young people in maintaining career development success and the opportunity to support others among this population who
may not identify experiencing such success to work toward career development success.

There is also the potential for the findings of this study to promote additional research, enhance counselling practices, and improve career related practices among counselling-related fields pertinent to young people involved in out-of-home care. The themes and subthemes that were found may all be examined from a counselling practice perspective, as well as from the viewpoint of counselling-related fields that are important in the lives of young people involved in care, such as social work and/or youth care work. Doing so may help to promote the experience of such aspects of career development success among this population.

**Economic Security**

In the present study, economic security was an important aspect of young people’s conceptualizations of career development success. Being able to find employment which provided them with financial and employment stability was considered to be a marker of these young people’s career development success. However, financial stability was described in the context of allowing one to live comfortably, and employment stability was described in the context of allowing one to experience a sense of permanency. This suggests that it may be beneficial for counsellors and other professionals working with this population to explore with their clients what living comfortably and experiencing permanency may look like for them, rather than making assumptions based on the previous literature. For example, the ideas, strategies, and resources that may be shared with a client would be very different for a client who indicated living comfortably meant being able to afford to live independently and pay their basic bills without financial stress, than for a client who indicated living
comfortably to them meant being able to obtain a mortgage for their own home and being able to go on self-funded Habitat for Humanity home building trip at least once a year. Consequently, being able to provide clients with appropriate ideas, strategies, and resources to best suit their definition of living comfortably has the potential to impact their experience of financial stability, which, as indicated in this study, has the potential to impact their experience of career development success.

**Supportive Work Environment**

The experience of a supportive work environment was identified as an important aspect of participants career development success. Specifically, working in an employment setting where participants felt positive about themselves and positive about their interpersonal relationships with others in the workplace was considered to be a hallmark of their career success. Feeling positive about oneself at work was described in the context of experiencing feelings of confidence, competence, value, and appreciation in the workplace, while feeling positive about interpersonal relationships with others in the workplace was described in the context of experiencing coworker support, team cohesion, approachable leadership, and friendship with colleagues.

This indicates that it may be beneficial for practitioners working with young people within this population to explore what qualities are uniquely important to be present in their place of work and consider appropriate strategies and resources to increase their sense of support in the workplace. Based on the findings from this study, doing so may increase their sense of career development success. For example, if a client indicated it is important to them to feel competent in their employment role, strategies and resources particular to their job position could be recommended in career counselling.
to increase their experience of competence.

**Suitable Career Fit**

Experiencing a sense of suitable career fit was indicated as being an important part of participant’s career development success. Specifically, being employed in a work environment that met their idiosyncratic needs, being able to pursue meaningful work, and experiencing personal and professional growth were discussed as aspects that contributed to participants career development success. Being employed in a environment that met their idiosyncratic needs was described in the context of their place of work and position of employment being sensitive to their mental health, pursuing meaningful work was described in the context of being able to pursue employment that participants were passionate about and genuinely interested in, and being able to experience personal and professional growth was described in the context of feeling that things were not stagnant, that there was an opportunity to learn and grow in their employment position, and that they could work toward personal goals.

These findings suggest it may be beneficial for practitioners to explore with their clients what their ideal work environment may look like and what personal values it may need to uphold and suggest ways in which their experience of suitable career fit may be promoted based on the client’s need. For example, if a client indicated their mental health difficulties were being triggered in their work place with high frequency and intensity, it would be helpful to initially explore with the client what personal, interpersonal, and environmental influences may be impacting their experience at work. This assessment would be followed up with working together to determine whether coping strategies could be suggested to effectively mitigate their mental health being triggered in their
workplace or whether new work duties or even a new position may be better recommended to decrease the stress their employment put on their mental health. Indeed, lowering a client’s experience of mental health stress in their workplace itself may increase their experience of suitable career fit, which, in turn, may increase their experience of career development success.

**Conclusions**

Research widely demonstrates that young people who age-out of out-of-home care in Canada experience a multitude of challenges in their career development, both during their time in-care and after they age-out of care. While these challenges have the potential to negatively impact their career development outcomes, there are individuals among this population who nevertheless self-identify as experiencing success in their career development.

Although it may be true that young people who age-out of care may not make as much money, be employed in jobs for as long, or receive promotions at the same rate as their non-care peers, the findings from this study suggest that these objective indicators actually have little bearing on their self-perceived experience of career development success. Instead, it appears that if these young people can obtain employment where they experience a degree of economic security, are immersed in a supportive work environment, and experience a sense of suitable career fit, they feel they are successful in their career development. This has important implications for practitioners working with this population, both in the context of career development and in the context of enhancing these young people’s well-being. Indeed, the findings of this study suggest less attention should be put on comparing these young people to the non-care population, and more
attention should be placed on how we can better set these young people up for success through their own individually defined markers of success – which requires first asking what those markers may be.
References


APPENDIX A

LETTER OF INVITATION TO PARTICIPATE IN RESEARCH

Exploring Stories of Career Development Success Among Young People Who Aged-Out of Out-of-Home Care in Canada

Dear Potential Participant,

If you are currently between the ages of 25 to 30, aged-out of an out-of-home care setting (i.e. foster care, residential care, group home care) in Canada, and spent at least two years prior to your emancipation in out-of-home care, you are invited to participate in this research study.

The purpose of this study is to explore how people who have aged-out of an out-of-home care setting in Canada self-define “doing-well” in their career development, and what circumstances and considerations influenced this experience.

I am a master’s student in the Faculty of Education at the University of New Brunswick and for my thesis study, I hope to gain an understanding of what doing-well in career development means to people who were formerly in care, and to explore what kinds of things contributed to them doing-well. In doing so, I hope to provide ideas to professionals who work with young people in-care and who have aged-out of care, which may allow them to better understand what doing-well in career development means among this population and suggest strategies which may help such professionals better set their clients up for success.

Participation in this study will involve taking part in two interviews and an activity in between. The first interview will take approximately 30 minutes. In this first interview
you will be asked to fill out a basic demographic form and consent form and be asked to answer the question: How do you define doing-well in your career development?

At the end of this first interview you will be asked to create a Career Lifeline to share when you return to your second interview. Creating a Career Lifeline will require you to consider circumstances, events, and experiences which you believe influenced your career development, and chart these considerations across a chronological timeline.

Detailed instructions and all the necessarily materials to create your Career Lifeline will be provided to you at the end of the first interview.

The second interview will take approximately 60 to 90 minutes. In this second interview you will be asked to share and discuss the story of your Career Lifeline with me so that I may better understand the experiences which shaped your career development, bringing you to where you are today.

When I have completed all the required data collection and analysis for this study you will be invited to participate in a process called member-checking. What this means is I will email you a detailed report of my research findings and invite your feedback. This is an opportunity for you to review the general findings of the information I interpreted and provide me with feedback on whether you agree I accurately captured and interpreted the phenomenon described in the report. In the event that you see anything inaccurate in the report, we can figure out a solution. At the end of this research study, I will provide all research participants with a copy of the finished document via email.

Your participation in this study is voluntary. You can decline to answer any questions you choose. You may withdraw from this study at any time without penalty, and you may
request that any information you previously provided be withdrawn from the study without penalty.

Your identity will be anonymized through the use of participant coding (e.g. Participant 01). Any information you provide will be kept confidential. Interviews will be audi-taped and transcribed by me. Career Lifelines will be photographed and you may keep your original. These audio-files, transcriptions, and photographs will be securely stored. No-one except for myself as the researcher, and my supervisor José Domene, will have access to any of this information you provide.

If you have any questions or would like clarification regarding this research and/or your participation – or if you would like to participate in this study please contact Ashlee Kitchenham (see contact information below).

Thank you for your consideration in participating in this important study,

Ashlee Kitchenham

Ashlee Kitchenham: Graduate Student, Faculty of Education, University of New Brunswick. Email: ashlee.kitchenham@unb.ca

This research has been reviewed by the University of New Brunswick Research Ethics Board and is on file as #2018-043.
APPENDIX B

PARTICIPANT INFORMED CONSENT FORM

Exploring Stories of Career Development Success Among Young People Who Aged-Out of Out-of-Home Care in Canada

Researcher:
Ashlee Kitchenham: Graduate Student, Faculty of Education, University of New Brunswick. Email: ashlee.kitchenham@unb.ca

Supervisor:
José Domene: Professor, Faculty of Education, University of New Brunswick.
Email: jfdomene@unb.ca, Phone: (506) 453-5174

If you have any questions or require clarification regarding this research and/or your participation, please contact Ashlee Kitchenham (see contact information above).
If you wish to contact or speak with someone not directly involved with this research project, please contact, at UNB, Dr. Ellen Rose, Acting Dean of Graduate Studies, Faculty of Education, erose@unb.ca, (506) 452-6125.

You are invited to participate in a research study. The purpose of this study is to explore how young people who have aged-out of an out-of-home care setting in Canada self-define “doing-well” in their career development, and what circumstances and considerations influenced this experience. In doing so, I hope to provide insight to professionals who work with young people in-care and who have aged-out of care, which may allow them to better understand what doing-well in career development means among this population and suggest strategies which may help such professionals better set their clients up for success.
Participation in this study will involve taking part in two interviews and an activity in between. The first interview will take approximately 30 minutes. In this first interview you will be asked to fill out a basic demographic form and consent form and be asked to answer the question: How do you define doing-well in your career development? At the end of this first interview you will be asked to create a Career Lifeline to share when you return to your second interview. Creating a Career Lifeline will require you to consider circumstances, events, and experiences which you believe influenced your career development, and chart these considerations across a chronological timeline. Detailed instructions and all the necessarily materials to create your Career Lifeline will be provided to you at the end of the first interview.

The second interview will take approximately 60 to 90 minutes. In this second interview you will be asked to share the story of your Career Lifeline with me so that I may better understand the experiences which shaped your career development, bringing you to where you are today.

When I have completed all the required data collection and analysis for this study you will be invited to participate in a process called member-checking. What this means is I will email you a detailed report of my research findings and invite your feedback. This is an opportunity for you to review the general findings of the information I interpreted and provide me with feedback on whether you agree I accurately captured and interpreted the phenomenon described in the report. In the event that you see anything inaccurate in the report, we can figure out a solution.

At the end of this research study I will provide all research participants with a copy of the finished document via email.
There is a risk you may feel a range of emotions as you participate in this study. This includes both positive feelings, such as happiness, and negative feelings, such as sadness. These reactions are normal and should only be temporary. If at any time during the study you feel overwhelmed you may always request to take a break from the interview or withdraw from the study.

It is important to understand that your participation in this study is voluntary. You can decline to answer any questions you choose, at any stage in the research process. You may withdraw from this study at any time without penalty, and you may request that any information you previously provided be withdrawn from the study without penalty.

Your identity will be anonymized through the use of participant coding (e.g. Participant 01). Any information you provide will be kept confidential. Interviews will be audio-taped and transcribed by me. Career Lifelines will be photographed and you may keep your original. These audio-files, transcriptions, and photographs will be securely stored. No-one except for myself as the researcher, and my supervisor José Domene, will have access to any of this information you provide. The information you provide may be used in an anonymous form as part of my thesis work and potentially in conference presentations or published in a research journal. Your name and any identifying information will not be revealed under any of these circumstances.

Your signature on this form indicates that you (a) understand the information provided to you about your participation in this research study, (b) agree to participate in this research study, and (c) grant permission to be audio-recorded and for your Career Lifeline to be photographed.
Participant Name (please print): _____________________________________________

Participant Number: _______________________________________________________

Participant Email Address: _________________________________________________

Participant Signature: ________________________________ Date: _____________

Interviewer Name (please print): _____________________________________________

Interviewer Signature: ________________________________ Date: _____________

This research has been reviewed by the University of New Brunswick Research Ethics Board and is on file as #2018-043.
APPENDIX C

PARTICIPANT DEMOGRAPHIC FORM

Exploring Stories of Career Development Success Among Young People Who Aged-Out of Out-of-Home Care in Canada

Participant Number:

Gender: Female / Male / Other (specify): _____________________

Current Age:

Duration of Time Spent in Out-of-Home Care in Canada:

Age of Emancipation from Out-of-Home Care:

Type of care setting (i.e. foster care, group home care, residential care):

Are you currently enrolled in an education program: Y / N

Highest Level of Education Achieved:

Are you currently employed: Y / N

Current or Most Recent Occupation:
APPENDIX D

INTERVIEW PROTOCOL

Exploring Stories of Career Development Success Among Young People Who Aged-Out of Out-of-Home Care in Canada

Interview 1

1) Tell me a little bit about yourself.

2) How do you define doing-well in your career development?

3) What does doing-well in your career development mean to you?
Curriculum Vitae

Candidate’s full name: Ashlee V. Kitchenham

Universities attended:

- University of New Brunswick
  September 2016 – August 2018
  Master of Education, Counselling (Candidate)

- Mount Royal University
  September 2013 – May 2015
  Diploma, Child and Youth Care

- Mount Royal University
  September 2008 – May 2013
  Bachelor of Arts, Psychology

Publications:


Conference Presentations:


