

Descriptive Analysis of Emancipated Foster Youth Seeking Mental Health Treatment

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Current and former foster youth experience increased risk for behavioral, cognitive, and emotional problems due to maltreatment and experiences in foster care. Nonetheless, research indicates a gap between the need for mental health services and service use. The current study describes a sample of self-referring, emancipated foster youth seeking long-term psychotherapy to understand reasons youth seek psychotherapy. This study further compares a subset of youths' data with reports collected from respective therapists to examine differences in perceptions of symptoms.

The majority of participating youth ($n = 108$) were female (82.2%), adults ($M = 23.96$; $SD = 7.20$) from various ethnic backgrounds (33.6% White, 33.6% African American, or 18.7% Hispanic). Common reasons for placement into foster care included neglect (29.0%), physical abuse (23.7%), and/or parent inability to care take (20.6%). Treating therapists ($n = 12$) who participated in this study were predominately female (83.3%), White (75%), middle aged ($M = 47.12$; $SD = 10.63$), and the majority held a masters (66.7%) or doctoral-level (33.3%) degree.

Intake forms from foster youth examined youths' perceptions of current mental health, prior mental health treatment/diagnosis, maltreatment history, and involvement in foster care. Descriptive analysis revealed emotional issues (90.7%), family issues (76.9%), issues with relationships (67.6%), and/or trauma (61.7%) as reasons for self-referral. The majority of youth indicated moderate, high or extreme issues with depression, anxiety, sleep problems, and problems with family of origin. The vast majority (92.6%) received prior mental health treatment.

Semi-structure telephone interviews were conducted with youths' respective therapists examined patients' current mental health and maltreatment history. Comparative analysis between youth and therapist reports did not reveal statistically significant differences. Trends were observed; youth indicated higher dissociative symptoms ($t(11) = 1.89, p = .08$) and psychotic thoughts/behaviors ($t(11) = 2.00, p = .071$). Therapists reported greater problems in relationship with patients' family of origin ($t(11) = -2.02, p = .07$).

Limitations of the current study include the small sample size and lack of a comparison group. Nonetheless, this study captures youth perspective that is otherwise lacking in research. Future research should include foster youth's perspectives on their experiences with mental health services.