Outcomes From A Natural Mentoring Program For Adolescent Girls In Foster Care Using A Hope And Strengths Perspective

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OUTCOMES FROM A NATURAL MENTORING PROGRAM FOR ADOLESCENT GIRLS IN FOSTER CARE USING A HOPE AND STRENGTHS PERSPECTIVE

By

Erin Dufour

A Thesis
Submitted to the Faculty of Graduate Studies through the Department of Kinesiology in Partial Fulfillment of the Requirements for the Degree of Master of Human Kinetics at the University of Windsor

Windsor, Ontario, Canada

2019

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September 11th, 2019
DECLARATION OF ORIGINALITY

I hereby certify that I am the sole author of this thesis and that no part of this thesis has been published or submitted for publication.

I certify that, to the best of my knowledge, my thesis does not infringe upon anyone’s copyright nor violate any proprietary rights and that any ideas, techniques, quotations, or any other material from the work of other people included in my thesis, published or otherwise, are fully acknowledged in accordance with the standard referencing practices. Furthermore, to the extent that I have included copyrighted material that surpasses the bounds of fair dealing within the meaning of the Canada Copyright Act, I certify that I have obtained a written permission from the copyright owner(s) to include such material(s) in my thesis and have included copies of such copyright clearances to my appendix.

I declare that this is a true copy of my thesis, including any final revisions, as approved by my thesis committee and the Graduate Studies office, and that this thesis has not been submitted for a higher degree to any other University or Institution.
ABSTRACT

The purpose of this thesis was to investigate how a natural female mentoring program can be enhanced through a Hope and Strengths perspective (Paraschak, 2013) to reach a common goal for the Windsor Essex Children’s Aid Society (WECAS) Girls Program. Adolescent girls from the WECAS Girls Program, foster parents whose foster daughters have attended the WECAS Girls Program, one program administrator and one mentor of the program participated in semi-structured one-on-one interviews. The interview guide was separated into three pre-determined categories: (1) strengths, (2) resources, and (3) hope; whereby several themes emerged using a thematic analysis with an inductive approach. From the thematic analysis, three themes emerged from the strengths category including organizational characteristics, diversity and exposure, and leadership. Themes from the resource category emerged including female mentors, other participants in the WECAS Girls Program, emotional support, safe space, and opportunities for physical activity. Themes emerged from the hope category including engagement, empowerment, friendship, and life skills. The results of this program evaluation revealed that a natural mentoring program for adolescent girls in foster care may be fostering friendship and support networks between the mentors and the participants, offering empowerment and a safe space through the exposure and diversity of the WECAS Girls Program, as well as teaching life skills for adolescent girls currently involved in and aging out of foster care.
DEDICATION

To the participants of the WECAS Girls Program, “never doubt that you are valuable, and powerful, and deserving of every chance in the world”.
ACKNOWLEDGEMENTS

I would first like to thank my advisor, Dr. Sarah Woodruff, for her continued support, guidance, and for always believing in me. Thank you for seeing the potential in me when at times did not see it in myself. Second, I would like to thank my committee members Drs Paraschak and Barrett for all of their time and efforts in making this project such a special one. Vicky, thank you for making me realize my own strengths and potential throughout this journey. Betty, thank you for your continued commitment to support your WGST graduates in their endeavours.

To the participants of the WECAS Girls Program, you are resilient, inspiring, and have given me more than I could have imagined. I thank you for your participation in this project and for your commitment to the program. I am forever thankful for your presence.

To my Community Health, Environment, and Wellness (CHEW) lab members, thank you for your patience and support during our weekly lab meetings. To my “blondetourage”, thank you for your unwavering support, encouragement, and coffee dates – I couldn’t have gotten through these last two years without you.

Lastly, I would like to thank my friends and family for putting up with me over the last seven years of my university career – I love and appreciate each and every one of you.
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CHAPTER 1
RESEARCH ARTICLE

Introduction

Female mentoring programs have increased in popularity and can be impactful for both the mentor and the mentee (Ruff, 2013). Mentoring research has primarily focused on formal intervention-based mentoring relationships as a way to create caring relationships between at-risk children/adolescents and non-parental adults (Greeson & Bowen, 2008; Mech, Pryde, & Rycraft, 1995). Dubois, Holloway, Valentine, and Cooper (2002) suggested that there has been an increase in mentoring programs to assist children and adolescents at risk of negative lifestyle behaviours. At risk children and adolescents usually include those that come from low socioeconomic backgrounds, have less family guidance and/or lack positive role models in their lives, and are impacted by a variety of physiologic, interpersonal, family, and environmental factors (Denby, Gomez, & Alford, 2016; Dubois et al., 2002; Keating, Tomishima, Foster, & Alessandri, 2002; Meyer & Bouchevy, 2010; Moody, Childs, & Sepples, 2003). Natural mentoring (i.e., mentoring in an informal way) is thought of as a better fit for children/adolescents, especially those at risk of developing poor lifestyle behaviours (e.g., smoking cigarettes, high levels of alcohol consumption, and risky sexual behaviours) due to its informality (Greeson, Usher, & Grinstein-Weiss, 2010). For many, parents have been identified by children/adolescents as a caring mentor or role model, however, children and adolescents may benefit from relationships with other adults in their communities (Munson, Smalling, Spencer, Scott Jr, & Tracy, 2010). Natural mentoring between a non-caregiver and child can have lifelong effects on the mentee (Hurd & Zimmerman, 2014). In
addition, Dubois and Silverthorne (2005) identified that the natural mentor’s role in a child or adolescent’s life can be from an informal social network or from a more formal network such as an educator or a helping professional. In a variety of studies, researchers have identified that children and adolescents who have a natural mentor present in their lives have more positive psychosocial outcomes than peers without a natural mentor in their lives (DuBois & Silverthorne, 2005; Hurd & Zimmeran, 2014; Zimmerman, Bingenheimer, & Notaro, 2002). Further, gender specific programs seem to be critical in adolescent years due to the biological, psychological, and physical changes that take place in an adolescent’s life (Deutsch, Wiggins, Henneberger, & Lawrence, 2013; LeCroy, 2005). Adolescent girls today are presented with multiple issues such as alcohol and drug use (Gray, Montgomery, & Rodriguez, 2008), high levels of body dissatisfaction and body image disorders (Rodgers, Paxton, & McLean, 2014), academic struggles (Deutsch et al., 2013), and high rates of mental health issues (Deutsch et al., 2013; LeCroy, 2005). Researchers exploring the effects of same sex mentoring programs suggested that adolescent girls experienced authentic and enhanced emotional support, development of confidence and new skills, and a camaraderie that provided a relief from the stresses of daily life (Spencer & Liang, 2009). Research has also shown that female mentoring programs are effective for decreasing problematic behaviours (Keating et al., 2002), increasing self-esteem levels (Bruening, Dover, & Clark, 2009; Karcher, 2008; King, Vidourek, Davis, & McClellan, 2002; Kuperminc, Thomason, DiMeo, & Broomfield-Massey, 2011; Moody et al., 2003; Westhues, Clarke, Watton, & St. Claire-Smith, 2001), and improving social skills (Karcher, 2008; Kuperminc et al., 2011; Moody et al., 2003) among adolescent girls in foster care. More specifically, the emotional
disturbances and maladaptive behaviours among foster children (e.g., body image disturbance and low self-esteem) can be situationally rooted (i.e., behaviours are impacted by an individual’s environment) and be potentially improved through mentoring programs (Yancey, 1998).

Research has investigated children and adolescents transitioning in and out of the systems of care, particularly the foster care system (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001). Munson and McMillen (2009) suggested that children and adolescents entering foster care may have experienced stressful life events such as prolonged abuse, neglect, and ultimately the removal from their home. The stress for at risk adolescents who are entering and exiting foster care may increase during this difficult transition with limited familial support and few resources available to them (Britner & Kramer-Rickaby, 2005; Courtney et al., 2001). Adolescents in foster care are more at risk to use drugs, tobacco, and alcohol than their same age-peers (Siegel, Benbenishty, & Avi Astor, 2016; Zimmerman et al., 2002). The negative risk behaviours may lead to several repercussions such as teenage pregnancy, mental health problems, school drop outs (Williams, 2011), engaging in high risk sexual behaviours (Barrett, 2009), and drug abuse (Ahrens, Lane Dubois, Garrison, Spencer, Richardson, & Lozano, 2011; Siegel et al., 2016; Taussig, Culbane, Raviv, Scholl Fitzpatrick, & Wertheimer Hodas; 2010 Williams, 2011).

Maltreated children and adolescents in foster care who have experienced significant trauma are not only at higher risk for negative risk behaviours, but also have a difficult time trusting adults and building positive relationships quickly (Taussig et al., 2010). Furthermore, foster care may lead to feelings of isolation from their community which can cause disengagement with their surroundings (Mech et al., 1995). In the last several
years, the federal government has emphasized the importance of mentoring relationships with children and adolescents in foster care, and mentoring programs are being implemented at much higher rates for children and adolescents living in foster care (Ahrens et al., 2011). Moreover, adolescent girls build and form attachment to relationships differently than boys (Chodorow, 1978) and, therefore, a mentor in a girl’s life throughout her time in foster care may be a beneficial source of support (Burke, 2013). Ahrens et al., (2008) suggested that foster children with the presence of a natural mentor have a greater probability for attending post-secondary school and increased levels of positive mental health. Moreover, mentoring programs for adolescent girls in foster care may provide an avenue for the development of posttraumatic growth (Tedeschi & Calhoun, 2004) as adolescent girls are being surrounded with a support network of individuals who have faced similar traumatic events in their lives.

**WECAS Girls Program**

Adolescent girls in foster care at the Windsor-Essex Children’s Aid Society (WECAS) may have a wide variety of background experiences. In December 2017, WECAS contacted Leadership Advancement for Women and Sport (LAWS), the Bulimia Anorexia Nervosa Association (BANA), and Dr. Woodruff with the goal of creating a monthly program for adolescent girls under their care. It was thought that a WECAS Girls Program could be run by natural female mentors to try to increase body image, self-esteem, confidence, and self-worth, in an overall attempt to improve physical and mental health and well-being of the adolescent girls within their care. Several planning meetings were held shortly thereafter, in which the overall goals, strategies, and activities were
discussed with program administrators and potential girls that would attend the WECAS Girls Program. Specifically, the objectives of the WECAS Girls Program included:

1. Creating a fun, supportive, and safe skill development program where adolescent girls could build confidence in their bodies, learn leadership skills, and improve self-awareness;
2. Providing opportunities for leadership development, practicing of new skills, and relationship building; and
3. Allowing semi-structured and natural mentorship opportunities.

In June 2018, the WECAS Girls Program began to run monthly sessions throughout the summer to engage and form relationships with the adolescent girls of the program. Since the program’s inception, the program has been running once a month and sessions last approximately two hours. The adolescent girls are transported to and from the monthly sessions by the volunteer drivers’ program at the WECAS. Upon arrival to the program the adolescent girls have a period of time to socialize amongst each other, as well as enjoy a meal or snack prior to beginning the activity. The adolescent girls have engaged in various programming efforts such as physical activity sessions (e.g., Crossfit and Yoga) and self-defence, have discussed the importance and benefits of physical activity for both mental and physical well-being. Furthermore, the adolescent girls have also participated in a two-hour nutrition and cooking class and acquired knowledge on grocery shopping and cooking on a budget, as well as eating a balanced diet. Other topics such as how to establish healthy relationships (presented by the Windsor Essex Community Health Centre), body image and social media literacy (presentation by
BANA), and a financial literacy presentation (from employees at the Royal Bank of Canada) have also been enjoyed by the WECAS Girls Program.

Several studies have examined the influence of mentoring and natural mentoring among adolescent girls (Dowd, Chen, Jung, & Beauchamp, 2015; DuBois & Silverthorne, 2015; Hurd & Zimmerman, 2014; Zimmerman et al., 2002). However, fewer studies (Munson & McMillen, 2009; Rhodes, Ebert & Fischer; 1992) have examined the impact of a natural mentoring program on adolescent girls in foster care. Moreover, as the WECAS Girls Program has been running successfully for almost a year, an evaluation from different perspectives is needed to ensure that the program is continuously evolving and meeting its’ desired outcomes. Therefore, the purpose of this program evaluation was to investigate how a natural female mentoring program can be enhanced through using a Hope and Strengths perspective (Paraschak, 2013) to reach a common goal.

**Research Design**

**Theoretical Approach**

**Theoretical justification.** Within the literature, researchers have used various theories/frameworks (e.g., social exchange theory, social learning theory) when examining mentoring relationships. The current program evaluation contributes to the mentoring literature by using Saleeby’s (2009) strengths perspective, Jacobs’ (2005) concept of hope, and Bandura’s Social Learning Theory (SLT) (1977) to understand the impact of the WECAS Girls Program for adolescent girls in foster care. Saleebey’s (2009) strengths perspective focuses what is going well in a situation (i.e., reframing a problem rather than denying that it exists) rather than a deficit perspective (i.e., focusing
on existing problems while ‘experts’ in the field resolve said problems; Paraschak, 2014). Moreover, Jacobs (2005) conceptualization of hope helps to overcome obstacles, accomplish goals, and envision a positive collective future. When using Jacob’s (2005) concept of hope, in conjunction with Saleebey’s (2009) strengths perspective, Paraschak (2013) referred to the framework as a Hope and Strengths perspective. Lastly, using Bandura’s (1977) SLT will allow for the exploration and understanding of human interactions in mentoring relationships, specifically among participants and mentors in the WECAS Girls Program. The SLT represents a theory of learned behaviour that assumes that social interactions (such as role modeling) influence new behaviours among humans (Bandura, 1977).

**Practical justification.** Mentoring has historically and primarily been associated with academia and in professional career development. With a new wave of feminist and body positive movements, as well as the rise in social media usage, adolescent girls are in need of positive women role models as mentors. However, mentoring can be thought of as a privileged opportunity that is mainly available to affluent women and girls who are equipped with the resources to attend mentoring programs. Adolescent girls in foster care are a marginalized group often forgotten about in our community that could benefit from women who exude role model like characteristics in their lives, as many girls in foster care might not have a biological maternal figure in their lives. Moreover, with the recent government cuts in funding to provincial Children’s Aid Societies (White, 2019), programming for adolescents are at risk of losing funding. As an already vulnerable population, it is my hope that the findings of this WECAS Girls Program evaluation will add research evidence to the current funding crisis. Furthermore, this program evaluation
may assist other local Children Aid Societies by showcasing the impact these types of adolescent programs can have on adolescent girls in foster care. By having adolescent girls in foster care discuss their strengths and hope for their future, I feel as though the once distant connections with this marginalized population will foster a sense of need to continue these programs for the children and adolescents of Windsor-Essex County.

Methods

While all procedures followed the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*, the University of Windsor Research Ethics Board deemed this project exempt due to the nature of program evaluation. As such, upon completion of the program evaluation (e.g., interviews), a secondary use of data application was submitted and approved by the University of Windsor Research Ethics Board for the purpose of this thesis.

Participants and Recruitment

Participants were categorized as adolescent girls living in foster care, foster parents of the adolescent girls involved in the WECAS Girls Program, program administrators, and program mentors. According to the World Health Organization (WHO; 2019), the period of adolescence is any person between the ages of 10 and 19 years. Therefore, for the purpose of this program evaluation, adolescents living in foster care are referred to as adolescent girls and range in age from 11-18 years. Four (n=4) adolescent girls between the ages of 12-16 years were recruited for this program evaluation. Independent from recruiting the adolescent girls, two (n=2) foster parents of adolescent girls who have attended the program were recruited as participants. Finally, one program administrator (i.e., was actively involved in the planning process at the
inception) and one program mentor (i.e., involved in the planning process and actively involved in monthly sessions) were recruited for this program evaluation. Recruitment handouts (Appendix A) were provided to the adolescent girls by the lead researcher at the monthly WECAS Girls Program session in February 2019. The adolescent girls present at the program were also instructed to pass along the recruitment information (Appendix B) to their foster parents to participate in the program evaluation. Finally, a recruitment poster (Appendix C) was sent via email by the primary researcher to one program administrator and one mentor of the program requesting their participation in the program evaluation. The program administrator and mentor were chosen based on their comfort level with the program and availability during data collection. Interested participants were able to contact the primary investigator through email or phone, as listed on recruitment materials. Upon contact, length of involvement with the WECAS Girls Program, in addition to preferred time and place to schedule the interview, was obtained. The interviews took place in the Community Health, Environment, and Wellness Lab at the University of Windsor, as well as in the homes of the participants. Participation in this program evaluation was voluntary for all participants. Upon arrival at the interviews, each participant gave informed consent (see Appendix D). Following the completion of the interviews, each participant received a $25 gift card to the Devonshire Mall (i.e., adolescent girls), Starbucks (i.e., administrator/mentor), or gas gift cards (i.e., foster parents).

**Overall Interview Guide Design**

One interview guide was used for the semi-structured interviews yet was slightly altered to correspond to the interviewee as necessary. Semi-structured interviews
involved a one-on-one interaction where participants were asked a series of open-ended questions (Anderson, 2015). One-on-one semi-structured interviews were selected as a method for several reasons. First, it allowed the participants to be comfortable in the interview setting as sensitive topics may have aroused in discussions in the context the program was set (Kowalski et al., 2018). Since the participants in this program evaluation had prior involvement with the WECAS Girls Program and other participants of the program, semi-structured one-on-one interviews created a comfortable environment for the participant and allowed for a private discussion. Second, the one-on-one interview process allowed for the researcher to connect with each participant personally rather than in a group setting through the building of rapport. Rapport suggests that a harmonious relationship was established whereby researchers and participants were able to openly communicate with each other because they understood and identified with each other’s feelings (Kowalski et al., 2018). In this particular program evaluation, rapport started to be established when the WECAS Girls Program began (i.e., summer, 2018; see Appendix E for my Conceptual Baggage). The interviews revolved around questions pertaining to their experiences in the WECAS Girls Program and were organized into three pre-determined categories: (1) strengths, (2) resources, and (3) hope. Afterwards, participants were provided with the opportunity to ask questions about the interview and to discuss any additional issues/thoughts. Upon completion of transcribing the interviews, each participant was given a copy of their interview if requested and was asked to review their statements/answers for clarity and completeness. Participants were given the option to edit their interview transcripts as they saw fit.

**Measures**
Anderson’s (2015) interview guide from *hopes and strengths within adaptive sailing: Narratives from the Queens Quay Disabled Sailing Program* was used as the basis for the interview guide of this program evaluation (Appendix F). Anderson (2015) examined how participants’ strengths and hope for their future were transformed through their experiences with an adaptive sailing program. Anderson (2015) based the original interview guide on Saleebey’s (2009) strength-based questions and Jacob’s (2005) hope theory to examine their experiences with the sailing program, resources available to them, and their strengths they may have been able to develop or identify prior to beginning the program. Questions regarding the organizational characteristics (e.g., types of opportunities and support systems offered, as well as shared values and beliefs of the program; “What beliefs or values do you see being shared within the Queens Quay Disabled Sailing Program?”), and practices of hope (e.g., identifying a collective goal for the program; “Did you have any goals when you first got involved in the Queens Quay Disabled Sailing Program?”) were modified for the WECAS Girls Program evaluation.

**Data Analysis**

Data analysis was conducted based on an adaptive thematic analysis approach. According to Patton (2002), data analysis in qualitative research is a clearly defined process that begins with basic description and moves to more specific ordering. To code the dataset, the primary researcher became familiar with the data by listening to the interviews, transcribing the audio files, and reading the transcripts for verification and clarification. The written transcripts of all seven interviews grouped together resulted in a total of 33 single spaced pages of text. As previously mentioned, the primary researcher organized the interview guide into three pre-determined categories: (1) strengths, (2)
resources, and (3) hope, which related back to primary concepts in Saleebey’s (2009) strength perspective and Jacobs (2005) conceptualization of hope. After the initial transcription and organization process, the primary investigator began to colour code and highlight emerging and repetitive initial themes in the data set. The primary researcher then organized the colour coded themes into the pre-determined categories: (1) strengths, (2) resources, and (3) hope. Throughout the analysis, themes were created and emerged using both a deductive and inductive approach. Themes were created based on a deductive approach were based on previous theories (e.g., Bandura’s Social Learning Theory; 1994). An inductive approach allowed findings (i.e., themes) to emerge that would not have developed using a deductive approach (Braun & Clarke, 2006). Patton (2002) suggested that using both deductive and inductive techniques in qualitative research allows for more accurate results as most studies are designed based on previous theories.

Trustworthiness. Trustworthiness refers to the degree of confidence in data, the way the data was interpreted, and methods used to ensure the overall quality of the study (Connelly, 2016). Upon completion of transcribing the interviews, each participant was given a copy of their interview (if requested) and were asked to review their statements/answers for clarity and completeness. Participants were given the option to edit their interview transcripts as they saw fit. Furthermore, to ensure reliability of the analysis, 30% of the transcriptions that were coded by the primary investigator were also coded by a co-investigator to determine a percentage agreement. According to Barbour (2001), a minimum of 20% of the data should be coded by a co-investigator to account for trustworthy responses. As a result, 97% agreement of themes were found between
investigators, which is higher than the 85% agreement deemed as “good” by MacQueen, McLellan-Lemal, Bartholow, and Milstein (2008).

**Results**

**Participants**

Eight ($N = 8$) participants were recruited for this program evaluation. Participants included four adolescent girls in foster care that ranged in ages from 12-16 years ($M_{age} = 13.75, SD = 1.67$). The adolescent girls were 12, 13, 14, and 16 years of age and have been participating in the WECAS Girls Program consistently since its inception, with only one adolescent female having missed more than one program session. Out of the two foster parents that agreed to participate, only one foster parent participated in this program evaluation due to a lack of interest. However, the foster parent that did agree to participate had two foster daughters in the WECAS Girls Program. Lastly, one program administrator and one program mentor agreed to participate in this program evaluation.

Guided by a Hope and Strengths perspective (Paraschak, 2013) an adaptive thematic approach was used to analyse the seven interviews. The interview guide was separated into three pre-determined categories: (1) strengths, (2) resources, and (3) hope whereby several themes emerged.

**Strengths.** Based on the interview guide, the first pre-determined category was based on a strengths perspective (Saleebey, 2009), in which three themes emerged, including: organizational characteristics, diversity and exposure, and leadership.

**Organizational characteristics.** Organizational characteristics refer to the various qualities that enable the WECAS Girls Program to continue to run on a monthly basis such as communication between program administrators and mentors, as well as the
community connections utilized to keep the WECAS Girls Program organized. At the inception of the program, the WECAS Girls Program administrator identified that “communication was a strength for her, in being able to facilitate between a group of stakeholders who didn’t know each other to create this program”. Interestingly, the theme of communication extended from between the administrators to using communication with the adolescent girls of the WECAS Girls Program to accommodate their needs. The program mentor cited “I would love to see us, again, sit with the girls and ask them what do the girls want, and what do they need at this time when we start up the next session to make sure that we are always including the youth voice, because if you’re not, we’re missing out huge”. Keeping the adolescent girls engaged through communicating what their needs are by “listening to what the girls want and trying to provide them with what they need at the same time” was a value for the program administrator during the planning process of the group. In addition, several of the adolescent girls mentioned that communication between each other was important, as the 13-year-old identified that “talking to the girls that come to the program and listening to what they would like to do at every program” was something that she valued and found as a strength in the WECAS Girls Program.

Once the WECAS Girls Program was established, both the program administrator and program mentor mentioned that having community resources and connections with various community partners was a major strength of the WECAS Girls Program. The program administrator mentioned that “the WECAS Girls Program has drawn on a number of resources, whether that be local businesses, applying for grants, and pooling these resources fosters a sense of family as well”. Moreover, this strength translated over
into the personal life of the program mentor as she was able to use one of the community partners from the WECAS Girls Program sessions in other group programming efforts she was involved in.

**Diversity and exposure.** In regard to diversity, the WECAS Girls Program offers a range of programming and participants. Three participants mentioned that the variety of the topics at the WECAS Girls Program was a strength. For example, the foster parent suggested “if they don’t experience that, they won’t ever know it is an option for them”. It is important to note that some participants felt that some of the program topics were at times difficult to comprehend (e.g., financial literacy) and did not see the relevance of the sessions for themselves personally. Moreover, the program administrator saw the diversity of the WECAS Girls Program covering mind, body, and soul as an asset. Both the program administrator and program mentor recognized the diversity of the participants (e.g., ages, backgrounds, life experiences) as a strength as it seems to foster a sense of community for the girls. Lastly, the majority of participants reported that exposing the participants of the WECAS Girls Program to empowering women in our community and providing different opportunities and activities was a major strength and positive attribute. The 12-year-old recounted, “It’s really cool how you guys ask people to come in and teach us about things we are going to be doing in the future, I am just so thankful because it is really fun”.

**Leadership.** Leadership was a common theme that appeared within interviews, and also became an overlapping theme within the three pre-determined categories. In terms of strengths, the 16-year-old identified that she has been able to take on leadership roles since she is one of the older girls in the program. She found that she was able to
encourage the younger girls to participate and enjoy the WECAS Girls Program. Specifically, she mentioned that “when a couple of girls weren’t looking forward to doing the Crossfit workout, as soon as we got there and we got involved in doing the exercises I really stepped up and got all the other girls to really enjoy the workout and participate in it as well”. Moreover, the program mentor also recalled this experience at Crossfit as one of the more profound examples of leadership being demonstrated,

…an image that is almost always in my head is her, at Crossfit, the first time we went to Crossfit and she was kneeled over, clapping so hard, encouraging the girls, with a massive smile on her face, just encouraging everyone, even her body language and how she was so into it, how big her arms were clapping, that was like a super proud moment. I’ve known her for a long time, and she has always been a very quiet and reserved girl… she has always been an awesome kid, but I just never saw that from her… It’s just like burned in my memory. Such a great image of leadership.

Three participants identified leadership as a major strength of the WECAS Girls Program that has translated to the some of the younger participants, “we are showing our behaviour to younger girls in the program, so we need to show positivity and good behaviour” (age 13). It is evident that the participants in the WECAS Girls Program have exemplified leadership skills and have become resources for each other.

**Resources.** Following the sequence of the interview guide, the second pre-determined category was based on a strengths perspective and specifically examined resources available and offered to the WECAS Girls Program. Five themes emerged
including: female mentors, other participants in the WECAS Girls Program, emotional support, safe space, and opportunities for physical activity.

**Female mentors.** Unanimously, all participants identified the female mentors of the program as a primary resource for them in the WECAS Girls Program. The adolescent girls noted that the female mentors provided them with trust and comfort when they were at the WECAS Girls Program that “the mentors of the program take the time to understand me and talk to me” (age 12). The foster parent identified the female mentors as a large resource for her, “the people who run the program is what makes the program so good... you know, getting my foster daughters to the program every month has been such a support for the girls it’s unbelievable”. In addition, the program administrator noted that,

…the girls having access to the female mentors is probably the biggest support in my mind… It is exposing them to younger, positive women who are doing good things that the girls can aspire to, versus where they come from or maybe their foster parents aren’t supportive, maybe they are a bit older and they aren’t able to connect in the same way, so I think that is a major support.

Moreover, the program mentor highlighted how the other two mentors she collaborates with make the WECAS Girls Program feel “easy and natural compared to some of her other programming efforts I work on” and make the facilitation of this WECAS Girls Program much more enjoyable,

…the facilitation of this program is completely collaborative, working with the other mentors we take responsibility for different aspects and elements and it all comes together… we support each other, we work together, and I think the girls in
the program can sense the cohesion amongst the three of us, and how comfortable and familiar we are with each other and then it translates to the girls as well.

The program mentor also highlighted that the relationship she has formed with the other female mentors has fostered a friendship and bond that the girls can aspire to. The cohesion and support system amongst the female mentors of the WECAS Girls Program has translated to the adolescent girls and has created a sense of cohesion among them as well, “I think we are helping to develop friendship, mentorship, and role models for these girls to look up to and to become”.

Other participants in the WECAS Girls Program. All four of the adolescent girls noted that they saw the other participants in the WECAS Girls Program as a resource to them, and each other. The youngest participant in the group (age 12) noted that being surrounded with other girls in foster care has been a resource for her as “it’s good for our social life, talking with each other, other girls our age and in the same situation as us [foster care]… because they help me”. In addition, the 13-year-old noted that “the other girls in the program also helped me to stay positive cause when they knew when I was having a rough time they would stop and ask me if I was ok… it was really nice to have them”. Furthermore, the 16-year-old found that “getting to know everyone in the group and making those connections and being vulnerable with the girls really improved my strengths”. She further mentioned that a value of the group has been the support that each of the participants give each other, “I feel like we all find that important especially with a lot of us going through tough times right now it’s good for us to have that support we have with each other at the program”. Evidently, the connection and bonds the girls have
made with each other at the WECAS Girls Program also created an emotional support system for each other.

**Emotional support.** The WECAS Girls Program was identified as an emotional support network by four participants. The 16-year-old noted that “when I first came into the group I don’t remember ever being able to sit down and talk to someone about how I was feeling… but now that I have been in the group for so long I can actually go and talk to my foster parents about things that I need to get off my chest”. She continued, “just having those connections with the girls in the program helped me get to the point of opening up with more people”. Moreover, the 14-year-old identified that the “group benefits me with emotional help because I can be very unstable at times”. In addition, the program mentor also believed that the WECAS Girls Program provided the participants with an emotional support network as she made note of the 14-year-old in particular,

She used to be more withdrawn and more reserved but would use sarcasm more as a self defense as a ‘don’t get too close to me’ mechanism, her walls were high up… but I’ve seen her be more vulnerable with us, and that is a major issue a lot of our girls have an issue with… Seeing her break down at the last session, of course I don’t like seeing anyone upset, but her ability to stop being bitchy and let herself be vulnerable in that group setting, I’m glad she did because she really needed us [the group] that night.

The emotional support identified by the participants in the WECAS Girls Program and the female mentors, it is clear that the WECAS Girls Program has created a safe space for the adolescent girls in foster care to be vulnerable and put their emotions on display.
Safe space. The WECAS Girls Program has created a safe space for adolescent girls in foster care that includes positivity, judgement free zone, and acceptance. The 16-year-old valued that the WECAS Girls Program has fostered a place that the adolescent girls can be themselves, which they value the most, “being who I am, and being free, and being able to feel that support from all of the girls when I walk in the door… I am more outgoing when I am surrounded by people I can trust, like with the girls in the program, I feel like I can be who I am without being judged”. Moreover, the 14-year-old identified that the WECAS Girls Program is a space “where people accept you for who you are and nobody really cares what you come dressed in or anything… it’s nice to have that acceptance… everyone is there to listen, it’s a safe space for us”. In fact, the participants also identified that certain activities they are involved in at the WECAS Girls Program also provided them with various opportunities, such as physical activity.

Opportunities for physical activity. Physical activity was identified as an overlapping theme by several participants as providing a resource or opportunity to take on leadership roles, which also provided them with an outlet for stress relief for their mental health and emotional stability. For example, “I really liked doing Crossfit because exercise helps me get out my anger and aggression that I have in life” (14 years old). However, exposing the adolescent girls to more physical activity also provides them with the knowledge of how important physical activity is for our mind and bodies. For example, “when we were doing Crossfit it taught us to not be sitting at home [being sedentary] on our phones or computers all day every day and actually showed us how to get our 60 minutes of physical activity like we’re supposed to” (16-year-old). However, it should be noted that not all participants enjoyed Crossfit, per se, and additional forms of
physical activity should be sought out to appease the group. Both the program administrator and program mentor identified how exposing the adolescent girls to physical activity can be beneficial for their mental health and emotional stability. Interestingly, some of the participants highlighted that their goal was to engage in more physical activity sessions throughout the WECAS Girls Program.

**Hope.** The third pre-determined category included hope (Jacobs, 2005; Paraschak, 2013). Participants identified both personal goals they had coming into the WECAS Girls Program and goals they have for the WECAS Girls Program going forward. Four themes emerged including engagement, empowerment, friendship, and life skills.

**Engagement.** During the planning stages of the program, the program administrator and program mentor both identified that having the WECAS Girls Program come to fruition and be sustainable was an initial goal. For the program mentor, her main goal was to have engagement from the adolescent girls in foster care, as she mentioned that it can be difficult to get foster children to open up and participate, “I definitely had the goal that we would get youth out consistently and would have some sort of positive impact on them… it was a really basic goal, but I wanted youth engagement and have something positive come out of it”. Moreover, the program administrator wanted similar goals, “at first, the goal would be that it would actually come to fruition. A lot of things can start as great ideas but not actually happen, so that goal has been achieved”. Similarly, the foster parent also identified that she wanted to see her foster daughters engage and commit to the program. For all of the adolescent girls, engaging and participating in the program when it started was identified as a primary goal for them, “I don’t like participating in things often, but I usually have to. So, I made it a goal for me
to always participate in the program and make new friends and stay positive together”.

Since the program’s inception, all four adolescent girls have been participating in the program regularly and continue to empower each other during the monthly meeting sessions.

**Empowerment.** Not only is the WECAS Girls Program a safe space for the adolescent girls (as a resource), but also a space to empower one another to reach their goals. The program administrator noted that empowerment and role modeling was a goal of the program from the beginning,

I think the idea of role modeling as being important and this idea of empowering women with other women and building up that community instead of tearing each other down… often, the biggest obstacles for women are other women, so fostering that sense of ‘sisterhood’ for a lack of a better word… its creating a positive space for girls, with positive female role models, giving the girls examples of women they can aspire to, and giving them a sense of support for a population that at times feels very alone and isolated.

Moreover, the 16-year-old identified that the WECAS Girls Program created a sense of empowerment for them,

I feel like the goal of the WECAS Girls Program is to empower the female body, and show us that just because we are female, we can do whatever guys can do, and just because guys say we cannot do something doesn’t mean we can let them dictate who we are or what we can and cannot do.

However, the youngest participant (age 12) identified that she thought the goal of the program was that “so we could all get connected and talk amongst ourselves and our
experiences… so we can meet girls like us in foster care and get to know each other and know what they are going through so we can help each other”. The WECAS Girls Program continues to empower each other, and has also created friendships, which a few girls identified as a goal for them.

**Friendship.** Two of the participants identified that making friends at the WECAS Girls Program was a goal for them. The 12-year-old mentioned “I wanted to meet new people and get along and interact with the other girls at the program” and the 16-year-old noted that making friends became easier in other areas of her life, “[making friends] has been achieved, I can go there [to the WECAS Girls Program] and feel like everyone is my friend… me making friends has become a whole lot easier, even over the last several weeks I have made at least five new friends at school”. The participants of the WECAS Girls Program have been improving on existing interpersonal skills and learning new life skills throughout their attendance at the WECAS Girls Program.

**Life skills.** The final goal that every participant unanimously identified as being the primary focus for the WECAS Girls Program going forward was teaching the adolescent girls life skills to bring with them once they exit the foster care system. The program mentor, who once was in foster care herself, firmly believes that life skills are what the girls need,

I think what we are looking at, we know our girls in foster care are up against a lot of potential obstacles and additional barriers, so I think that we are looking at adding some more tools to the girls’ tool kits and more resources to help them deal with the adversities that might come their way.
The 16-year-old also noted, “I feel like I would like to learn more life skills, especially being one of the older girls that will be moving out in a couple years, I’ll probably need those life skills… so I feel like these are good for the younger members of the program too”. The program administrator suggested that the programming (i.e., nutrition and cooking classes, financial literacy lessons, and self-care nights) is providing the girls with “tangible life skills that they can actually use”. Moreover, the foster parent noted that she would like her girls to “learn the everyday little things… the basic things would really help them out because they are really missing these when they are coming to us [in foster homes]. Most importantly, the 14-year-old said that, “the program, they [the female mentors] are just trying to make us ready for the real world and trying to make us seem like we belong in the community”.

Discussion

The present program evaluation provides important insight into the WECAS Girls Program and mentoring programs. Guided by a Hope and Strengths perspective (Paraschak, 2013) and disconnecting from a deficit perspective, semi-structured interviews were used to explore how a natural mentoring program can be enhanced through using a Hope and Strengths perspective (Paraschak, 2013) to reach a common goal. The current evaluation of the WECAS Girls Program supports the SLT framework (Bandura, 1994) specifically in how the adolescent girls in the program have learned and are learning from the behaviours of others surrounding them. Moreover, the themes that emerged from the present study extends the breadth of research in the fields of mentoring for vulnerable populations that both supports and extends the present literature of mentoring. Specifically, the following findings such as the strengths within the WECAS
Girls program and the participants of the WECAS Girls Program, the resources offered and shared with the participants of the WECAS Girls Program, and the overall goals for the participants and the WECAS Girls Program moving forward will be expanded on throughout the discussion.

Foster children and adolescents often feel isolated and disconnected from their community (Britner & Kramer-Rickaby, 2005; Courtney et al., 2001; Mech, 1995). However, three participants uniformly agreed that the exposure and diversity the WECAS Girls Program provides to the adolescent girls through the programming is an important strength of the WECAS Girls Program as they may not otherwise receive from their community. Across participants, the various programming efforts (e.g., financial literacy presentations, opportunities for physical activity, and presentations from community partners) were valued and seen as an important aspect of the WECAS Girls Program. Specifically, three participants felt that exposing the adolescent girls to a wide range of influential women in our community who are functioning in different capacities (e.g., professionally and academically) is beneficial for the empowerment of the participants involved in the WECAS Girls Program. Moreover, a value and strength of the WECAS Girls Program the adolescent girls identified was how the program administrator and program mentors include the participants opinions and voices about what topics or activities they would like to incorporate into the monthly WECAS Girls Program. As such, the diversity (e.g., racial, sexuality, gender identities) and range of background experiences of the participants’, program mentors, and program administrator are seen as a strength of the WECAS Girls Program. The adolescent girls of the WECAS Girls Program find that their voices are respected and are being heard during planning sessions.
and, which specifically supports the feminist mentoring lens (i.e., the mentor and mentee are encouraged to work together as a cohesive team to ensure each voice is valued; Benishek, 2004) and the strengths perspective (i.e., ‘experts’ help by collaborating with them; Saleebey, 2009) which suggests valuing the mentee’s perspective reinforces that all experiences are valuable (Fassinger, 1997). Therefore, it is important that the program administrators and program mentors continue to engage the participants of the WECAS Girls Program and maintain cohesive friendships between the program mentors and the participants.

Unanimously, the participants of the WECAS Girls Program identified the program mentors as being a resource for the adolescent girls of the WECAS Girls Program. Adolescent girls of the WECAS Girls Program identified that they are able to trust and confide in the mentors of the WECAS Girls Program and feel comfortable being vulnerable while present at the monthly WECAS Girls Program. The program mentor mentioned that many of the adolescent girls in the WECAS Girls Program have been emotionally withdrawn and had difficult time trusting other adults. Adolescents in foster care identify trust and confidence in a mentor as a primary quality in a mentoring relationship (Hass, Allen, & Amoah, 2014; Munson et al., 2010). These findings align with previous research which suggests that adolescent girls involved in a mentoring relationship experienced authentic and enhanced emotional support, development of confidence and new skills, and a camaraderie that provides a relief from the stresses of daily life (Spencer & Liang, 2009). Although literature has suggested that adolescent girls in foster care have greater difficulty forming trusting relationships with other adults (Taussig et al., 2010) and have lower levels of trust and communication (Deutsch et al.,
the research findings from the current program evaluation suggested that the adolescent girls involved in the WECAS Girls Program were developing trusting relationships with each other and the mentors of the program. These findings are consistent with previous research which have revealed that trust was a foundational element for positive relationship development (Goldner & Scharf, 2014; Greeson & Bowen, 2008; Munson et al., 2010), female adolescents often feel love and cared for by their mentors (Spencer & Liang, 2009; Munson et al., 2010), and they identify their relationship with their mentor as a parent-child relationship. Therefore, the program mentors should work to maintain the foundational element of trust for further relationship development within the WECAS Girls Program.

Friends play an important role for adolescent girls during their developmental years as researchers have found that adolescents are easily influenced by their peers (Shook, Vaughn, Litchge, Kolivoski, & Shelbe, 2009). The adolescent girls of the WECAS Girls Program discussed that the WECAS Girls Program has fostered a sense of friendship and offers a support network for them. Evidence from the current program evaluation suggests that the WECAS Girls Program is offering psychosocial mentoring behaviours (Kram, 1983), such as friendship, role modeling, and support amongst other psychosocial variables. Specifically, one of the adolescent girls discussed that the connections and friendships she has made with other participants has allowed her to keep a positive attitude during tough times and feelings of isolation. This is consistent with the findings of Burke (1984) who suggested that female mentors performed and engaged in more psychosocial functions and activities than men. Furthermore, the adolescent girl’s discourse within the current program evaluation included valuing being in a program with
girls in similar situations as them (i.e., foster care). Children and adolescents in foster care often carry around negative social stigma and are singled out for being ‘different’ while in social settings (e.g., at school; Rogers, 2017). However, the findings from the current program evaluation suggested that the adolescent girls in foster care identify the WECAS Girls Program as a resource to them and offers a safe space to be themselves amongst other adolescent girls in foster care.

Moreover, friendships at the administrator/mentor level is one the adolescent girls can learn from. Vicarious learning happens by observing others being either positively or negatively reinforced for a certain behaviour (Neziroglu, Khemlani-Patel, & Veale, 2008). Social Learning Theory represents a theory of learned behaviour that assumes that social interactions such as role modeling, verbal instruction, supervised feedback and support influence new behaviours among humans (Bandura, 1977). The program mentor believes that the adolescent girls are learning about friendships through the connection, encouragement, and growth between the mentors. Previous literature has suggested that adolescent girls surrounded by positive influencers may perceive themselves as similar to them and may then be motivated to adopt habits from that individual (Hurd Clarke & Griffin, 2007; Ogle & Damhorst, 2003). The findings from the current program evaluation may suggest that exposing the adolescent girls to positive and supportive female relationships may encourage them to strive for similar qualities in their own friendships. Evidence from the current program evaluation could then suggest a need to further explore the idea of observational learning (Bandura, 1994) within mentoring relationships. Interestingly, Bandura’s (1994) concept of observational learning aligns with Tedeschi and Calhoun’s’ (2004) concept of post traumatic growth, which suggests
that individuals learn post traumatic growth through surrounding themselves with other individuals who have also faced traumatic experiences. Participants in the current program evaluation found that the WECAS Girls Program was offering a safe space where there was no stigma associated with being in foster care; it fostered friendships and support networks and was a place where they could be empowered and acquire basic life skills. Similarly, Calhoun and Tedeschi (2004) emphasized the important role of these support networks as they suggest surrounding one another following trauma can be crucial for the willingness to incorporate new perspective post traumatic event.

The majority of participants suggested that the WECAS Girls Program is a space where empowerment and role modeling takes place and creates a hope enhancing environment. From the beginning of the WECAS Girls Program, the program administrator believed that a positive space for the adolescent girls was being provided, offering positive role models and examples of women the adolescent girls can aspire to be. Although not all the program mentors faced similar life experiences as the adolescent girls in foster care, the program mentors used their community connections and resources to help empower the adolescent girls. A feminist model of mentoring suggests that the mentor recognizes the presence of power imbalances between themselves and the mentee, acknowledges them, and uses their power to empower the mentee (Fassinger, 1997). The program administrator also suggested that a primary value and goal of the program is the concept of exuding empowering behaviours amongst women and adolescent girls, as often one of the biggest obstacles’ women face is other women and girls. Interestingly, one of the adolescent girls suggested that the overarching goal of the WECAS Girls Program was to empower the female body and teach the participants of the WECAS Girls
Program what they are capable of achieving. De Wit et al. (2007) suggested that creating an empowering mentor and mentee relationship can have positive effects on the social skills and self-esteem of adolescent girls.

The findings from the current program evaluation concur with previous research that mentoring programs such as the WECAS Girls Program can improve the social skills and develop new skills for the adolescent girls. However, the participants of this program evaluation unanimously believe that the WECAS Girls Program is teaching the adolescent girls life skills to bring with them once they exit the foster care system. The concept of aging out of the foster care system was a worry discussed by several participants. Literature has reported that adolescents aging out of foster care are at risk for unemployment, less likely to receive post-secondary education (Williams, 2011), have a reliance on public assistance (Byrne, Stephen, Kim, Culhane, Moreno, Toros, & Stevens, 2014), drug and alcohol abuse (Siegel, Benbenishty, & Avi Astor, 2016; Zimmerman et al., 2002), homelessness (Dworsky, Napolitano, & Courtney, 2013), parenting difficulties (Barrett, 2009), and criminal justice involvement (Crawford, Pharris, Dorsett-Burrell, 2018). Nonetheless, the findings from the current program evaluation support previous literature that suggested mentoring programs can improve and develop life and social skills for adolescent girls aging out of the foster care system (De Wit et al., 2007; Karcher, 2008; Moody et al., 2003; Thompson, Greeson, & Brunsink, 2016).

**Limitations, Delimitations, and Future Research**

Despite the strengths of the current program evaluation (e.g., obtaining more in-depth information through interviews than what could have been gathered through
quantitative research methods), there are limitations that should be noted. Firstly, there were only seven participants in the current program evaluation and, therefore, the findings from this program evaluation cannot be generalizable across all members of the WECAS Girls Program. However, the cross-section of ages of the participants (adolescent girls) is representative of the larger group, thereby ensuring all ages were included. Moreover, this study did not explore a negative case analysis which would allow for the exploration of deviant patterns that did not support patterns or explanations emerging from the data set. Deviant cases could add value to the data analysis in the future by broadening or confirming patterns emerging from the analysis. It was unfortunate that due to a lack of interest, only one foster parent committed to participating in this program evaluation. Research has suggested that engaging foster parents is a difficult task as many are often disconnected from the lives of their foster children (Dorsey, Pullmann, Berliner, Koschmann, McKay, & Deblinger, 2014). This may be attributed to the recruitment methods and for future projects, researchers should attempt to follow up with foster parents through a second party. However, following a feminist mentoring lens and Saleebey’s (2009) strength perspective, the primary researcher felt that including the voice of one foster parent added value and contributed to the hope enhancing environment for this program evaluation. Secondly, it is acknowledged that the primary researcher had an inherent bias and dual role with the participants in this program evaluation which may have created a resistance for honesty from the participants. However, without establishing rapport and building trusting relationships with the participants prior to this program evaluation, the participants may not have participated in this project if they did not feel comfortable with the primary
researcher. In addition, it should be noted that the participants in this program evaluation were not representative of the diverse races within the foster care system in Canada. Future research should note that there is a disproportionate representation of First Nations children in the foster care system. Finally, with all qualitative research methods, there are limitations associated with data being highly subjective and only applicable to the lived experiences of the participants (Chenail, 2010) of the program evaluation and no other participants of the WECAS Girls Program.

**Conclusion**

Overall, given that there is no current literature investigating the impact of a natural mentoring program on adolescent girls in foster care using a Hope and Strengths perspective (Paraschak, 2013), findings from the present study provide an avenue for future research. Future research involving adolescent girls in foster care should continue to use a Hope and Strengths perspective (Paraschak, 2013) to allow for the exploration of an individual’s strengths while navigating through a challenging time in their lives. Similar to research by Thompson et al., (2016), the results of the current study have important implications for mentoring programs suggesting that a natural mentor (i.e., a caring, supportive, non-parental adult) may serve as a protective factor and a good fit for adolescent girls in foster care. In summary, the results of this program evaluation revealed that a natural mentoring program for adolescent girls in foster care may be fostering friendship and support networks between the mentors and the participants, offering empowerment and a safe space through the exposure and diversity of the WECAS Girls Program, as well as teaching life skills for adolescent girls currently involved in and aging out of foster care.
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CHAPTER 2 REVIEW OF LITERATURE

Theoretical and Practical Justification

Theoretical justification. Researchers who have examined mentoring programs have used a variety of theories/frameworks that focus on the ways that mentors help address the problems faced by their mentees (e.g., social exchange theory, social learning theory) when examining mentoring relationships. This program evaluation contributes to the mentoring literature by using a Hope and Strengths perspective (Paraschak, 2013) and Bandura’s (1977) Social Learning Theory (SLT), thus highlighting the strengths of the mentees rather than a deficit perspective to understand the impact of this mentoring program on adolescent girls in foster care.

Practical justification. Mentoring has historically and primarily been associated with academia and in professional career development. With a new wave of feminist and body positive movements, as well as the rise in social media usage, adolescent girls are in need of positive female role models as mentors. However, mentoring can be seen as a privileged opportunity that is available to affluent women and girls who are equipped with the resources to attend mentoring programs. Adolescent girls in foster care are a marginalized group often forgotten about in our community who are in need of strong female role models in their lives, as many may not have a biological maternal figure in their lives. Moreover, with the recent government cuts in funding to provincial Children’s Aid Societies (White, 2019), programming for children and adolescents is at risk of losing funding for their extremely valuable programs. As an already vulnerable population, it is my hope that the findings of this research with the Windsor Essex Children’s Aid Society (WECAS) Girls Program will add research-based findings that
support the continuation of this program. Furthermore, my research may assist other local Children Aid Societies by showcasing the impact these types of adolescent programs have on girls in foster care. Having adolescent girls in foster care discuss their strengths and goals for their future, I believe, documents and supports the importance of continuing these programs for the children and adolescents of Windsor-Essex County.

Theoretical Framework

The Hope and Strengths perspective.

Hope perspective. According to Snyder (2002), hope theory examines the way an individual’s thought process relates to goal achievement. Snyder (2002) believes that human actions are innately goal oriented and, therefore, a person’s goals are a key component of hope theory. Hope is defined by Snyder (2002) as “the perceived capability to derive pathways to desired goals and motivate oneself via agency thinking to use those pathways” (p. 249). Furthermore, Snyder (2002) expands on the definition of hope by stating that hope is a “a positive motivational state that is based on an interactively derived sense of successful (a) agency (goal directed energy), and (b) pathways (planning to meet said goals”; Snyder, 2002, p. 249). The agency (goal directed energy) present in hope lays the groundwork for the cognitive development of the theory, and provides mental targets (i.e., visual images in our minds; Snyder, 2002). For some people, goals may provide a type of visual image and vary in the degree to which they are specified (e.g., it is difficult to imagine or try to pursue pathways wherein the goals envisioned are vague; Snyder, 2002). Agency is also a vital part of envisioning goals and is considered to be the motivational part of hope theory to achieve desired goals (Snyder, 2002). Pathways thinking, the second component of hope theory, acknowledges a fluid and
reciprocal thinking where the past influences the future and vice versa. When individuals are faced with a blockage of some sort, self-talk is channelled to enhance the motivation to achieve a certain goal (Snyder, 2002). Each of these elements cannot be analyzed separately from one another and, therefore, a person’s goals, pathways, and agency are interconnected (Anderson, 2015). For example, an individual with high hope will have the mental capacity to envision a repetitive pathway and engage in agentic thought (Anderson, 2015). However, individuals’ different levels of hope suggest that hope is a learned trait where individuals learn hopeful, goal-oriented thinking from the surrounding environments (Snyder, 2002).

Jacobs (2005, 2008) extends Snyder’s (2002) hope theory and conceptualizes hope as being, “social in nature, rather than individual and wrapped up in the web of social relations that each of us inhibits” (p. 785), rather than individualistic. A person’s current strengths, along with support from his/her community and the use of other resources, can enhance a person’s strengths and assist them in accomplishing their goals (Parashak, 2013). Moreover, according to Parashak (2013) these goals in one form or another could contribute to a broader community of relevance. Jacobs (2005) conceptualization of hope allows us to move from an individualistic approach (hope for) to “hope in” a shared future. In order to create a hope-enhancing environment, individuals have to be aware of the different experiences and perspectives they and others have to proactively offer (Jacobs, 2008). All individuals must be accepting of the possibility of transformation and find balance between sharing their perspectives and receiving new ones (Anderson, 2015; Jacobs, 2008). Jacobs (2008) states that individuals
bring “precious gifts with them; p. 568), for example, each person brings with them their own set of strengths.

**Hope in children.** Snyder (2002) suggested that the loss of children’s hope can take two different forms: children are not receiving appropriate care and attention from the time they are a newborn, or children do learn hopeful thinking, but childhood events dampen those hopes (Snyder, 2002). Children who have been abused or neglected have never had someone who can teach them how to think hopefully. Children and adolescents learn primarily through observing (e.g., as in Social Cognitive Learning Theory). The key to neglect in a child who loses hope is that the child does not have one consistent care-giver who pays attention to them (Snyder, 2002). Similarly, Snyder (2002) describes physical abuse as an “active force in decreasing hope as that very caregiver to whom the child should be able to turn for nurturance and instruction in goal-oriented thinking becomes a primary source of fear” (p. 263). According to Snyder (2002) attachment to a care-giver and creating interpersonal bonds are vital parts of learning goal-oriented thought and, therefore, when a child is physically abused, they learn that interpersonal bonds cannot be trusted. Furthermore, the loss of a parent that causes uneasiness and uncertainty in a child’s life, as well as children who are raised in unstable environments (e.g., lacking consistency and support) are also at risk for not learning hopeful thinking (Snyder, 2002).

**Strengths perspective.** The strengths perspective was initially developed by Saleebey (2009) to counter traditional social work practices (Roney, 2015) and focuses on the possibilities evident in a situation rather than a negative, victimizing view; it builds on the assumption that transformation is possible (Paraschak & Thompson, 2014;
Roney, 2015). This perspective challenges the traditional deficit perspective, where professionals are seen as the experts (Anderson, 2015). According to Saleebey (2009), the strengths perspective looks at individuals, families, and communities through the lens of their capacities (i.e., talents, competencies, possibilities, visions, values, and hopes) even though these capacities may have been overshadowed through oppression and trauma in their lives. Saleebey’s (2009) strengths perspective is not used as a theory or a model, but instead it is a “standpoint, a way of viewing and understanding aspects of experience… a lens through which we choose to perceive… focusing on possibilities, not problems, and assumes the capacity for transformation” (p. 1). This approach does not deny that barriers exist, but rather acknowledges and reframes problems by focusing on what is going well (Paraschak & Thompson, 2014).

For example, Saleebey’s (2009) perspective refocuses attention to what a person is capable of achieving (i.e., using their strengths) instead of what they are unable to achieve due to their circumstances (e.g., being placed in foster care). The strengths perspective “is not denying the verdict but it does defy and challenge the sentence these individuals face as the only possible outcome” (Saleebey, 2009, p. 303). Under the strengths perspective, there are six key principles: (1) every individual or group under discussion has strengths, (2) their challenges are opportunities to generate strengths, (3) the upper level of their capacity to grow is unknown, (4) ‘experts’ help by collaborating with them, (5) every environment is full of resources, and (6) all relationships must include caring, caretaking, and an appreciation of context (Saleebey, 2009). In this program evaluation, working within the strengths perspective, it is assumed that the natural female mentors of the program should focus on helping to discover, develop,
explore, and exploit the program members’ strengths and resources to help guide them to achieve their goals, realize their dreams, and their full potential (Roney, 2015; Saleebey, 2009). A primary focus on the fourth principle of Saleebey’s (2009) strengths perspective (‘experts’ help by collaborating with them) will allow for researchers and the adolescent girls to highlight their strengths they have developed or enhanced through their involvement with the program. The researchers will also highlight Saleebey’s (2009) fifth perspective (every environment is full of resources) and sixth perspective (all relationships must include caring, caretaking, and an appreciation of context) to examine the support and resources the adolescent girls in foster care have within this program.

**Social learning theory.** Vicarious learning happens by observing others being either positively or negatively reinforced for a certain behaviour (Neziroglu, Khemlani-Patel, & Veale, 2008). Social Learning Theory (SLT) represents a theory of learned behaviour that assumes that social interactions such as role modeling, verbal instruction, supervised feedback and support influence new behaviours among humans (Bandura, 1977). Specifically, Bandura’s (1977) SLT focused primarily on the ways our behaviours and environment influence each other. Drawing on the SLT, Bandura advanced the theory into the Social Cognitive Theory of Learning in 1986, which views behaviour, cognitions, biological, and environmental influences as affecting and being affected by the other factors (Hendriks, 2002). The adapted version of Social Cognitive Theory of Learning recognizes that cognitions and behaviours also influence each other and states, “people are both products and producers of their environment” (Bandura, 1994, p. 61). According to Bandura (1977), individuals are able to learn new behaviours through the ability to symbolize, self-regulate (i.e., learn to control one’s behaviours), self-reflect
(i.e., the ability to distinguish accurate and faulty thinking), and learn vicariously through observational learning (i.e., learning by observing the behaviours of others; Hendriks, 2002). Individuals learn to symbolize through their environments and life events to enhance learning, and for young women, seeing thin actresses and models in the media can act as a symbol of value, success, popularity, and beauty (Hendriks, 2002). As an example, young girls are now learning that physical attractiveness has rewards when reality television shows are now showcasing how a socially deemed unattractive woman must undergo a makeover to find her prince charming (Neziroglu et al., 2008).

Moreover, observational learning is one of the main components of Social Cognitive Theory of Learning and involves how individuals learn by direct experience, but also by observing the behaviours and consequences of models with whom they identify (Bandura, 1994). One of the main components of observational learning is identification, an internalized process in which an individual perceives themselves as similar to a model figure and is then motivated to adopt habits from that individual (Ogle & Damhorst, 2003). For example, a child or adolescent may see their favourite celebrity icon or a prominent person in their lives dieting and the child/adolescent may respond in the same manners if they are faced with a similar situation (Hendriks, 2002).

However, observational learning is not an automatic behaviour wherein one watches and learns, but rather an individual must identify and form an attachment to a model (e.g., a maternal figure; Hendriks, 2002). Interestingly, in a study by Perez, Koon Van Diest, Smith, and Sladek (2018) that consisted of 151 mother-daughter dyads (daughters aged 5-7 years) the authors found that the mother’s body dissatisfaction significantly and positively predicted the daughter’s body dissatisfaction. Similarly, the
authors also suggest that the mother’s body satisfaction significantly and positively predicted the daughter’s body satisfaction. Results from this study (Perez et al., 2018) suggested that girls model their mother’s self-body talk, indicating that maternal figures have a direct impact on the observational learning of their daughters.

Mentoring

Definition of mentoring. While there is a wide array of literature surrounding mentoring, a concrete definition of the term is still lacking. After basing her work on Levinson (1978), Kram (1980, 1983, 1988) is considered to be a leader and has developed some of the most influential models in the field of mentoring research (Noe, 1988). Studies in the area of mentoring have used Kram’s (1988) conceptualizations or a reworked version of her models, which is based upon the following definition:

Mentoring is a relationship between an older, more experienced mentor, and a younger, less experienced protégé for the purpose of helping and developing the protégé’s career. Mentoring relationships are unique in the sense that the primary focus of the relationship is on career development and personal growth. (p.2)

While the definition provided by Kram (1988) lays a foundation for initial studies that focused on career development in mentoring, it lacks flexibility and inclusivity when discussing other areas of mentoring (Beres, 2010). Mentoring can also be an intervention strategy that involves a structured and trusting relationship conducive to establishing a powerful emotional bond between the mentor, the more experienced person, and the protégé, the less experienced (Larsson, Pettersson, Skoog, & Eriksson, 2016). However, Bozeman and Feeney (2008) more recently proposed the following definition for mentoring:
A process for the reciprocal, informal transmission of knowledge, social capital, and psychosocial support perceived by the recipient as relevant to work, career, or professional development; mentoring entails informal communication, usually face to face and over a sustained period of time, between a person who is perceived to have greater relevant knowledge, wisdom, or experience (the mentor), to a person who is perceived to have less (the protégé). (p. 469)

Although Kram’s (1988) definition of mentoring is concrete and has been widely used, the definition provided by Bozeman & Feeney (2008) provides more conceptual knowledge as to what mentoring encompasses as a whole, especially through the functions of mentoring. For the purpose of this program evaluation, the definition of mentoring by Bozeman & Feeney (2008) was used alongside the functions of mentoring proposed by Kram’s (1983) mentor role theory. However, Bozeman & Feeney (2008) provided two main points in regard to their definition that should be expanded upon. First and foremost, Bozeman & Feeney’s (2008) definition assumes that mentoring has varying levels of expertise; it does not provide a hierarchal dimension to mentoring (i.e., an older adult in midlife/midcareer providing mentorship to a young adult; Beres, 2010). Second, the definition by Bozeman & Feeney (2008) identifies that mentoring can be informal when it comes to knowledge translation and social exchange within the mentoring relationships. The definition by Bozeman & Feeney (2008) is important as it challenges the traditional definition that mentoring must be a formal relationship (Kram, 1988). However, whether the mentoring relationship is formal or informal, the functions of mentoring are unique to both (Rutti, Helms, Rose, 2013).
Mentoring functions. Kram (1988) presented an in-depth analysis of the various mechanisms whereby mentoring directly correlates with career development and suggested that mentors serve two types of functions for their protégés: career and psychosocial functions. The first primary function of mentoring includes career functions, which involve a range of behaviours that prepare a protégé for advancement in his/her respective careers. Some of these behaviours include coaching, sponsoring, challenging them, and increasing their exposure (Kram, 1980, 1988). The second primary function includes psychosocial (social-support), which builds on trust and interpersonal bonds, and includes behaviours that enhance the protégé’s personal growth, identity, self-worth, and identity (Kram, 1980, 1988). Some specific psychosocial mentoring behaviours identified include providing counselling, friendship, and role modeling (Dreher & Ash, 1990; Kram, 1988; Siebert, 1999).

Further, Kram (1988) and Noe (1988) suggested that the greater the number of functions provided by the mentor, the more beneficial and successful the relationship may be. Moreover, Burke (1984) developed a 15-item scale asking mentees to rate their mentors’ different roles and functions (Scandura, 1992), which resulted in a third function of role modeling (in addition to career and psychosocial functions; Scandura, 1992; Scandura & Ragins, 1993). Interestingly, the function of role modeling was more related to personal influences rather than professional successes (Scandura, 1992). However, in a meta-analysis (Allen, Eby, Poteet, Lentz, & Lima, 2004) examining career benefits received by protégés, it was found that Kram’s two primary mentoring functions (i.e., career and psychosocial) were used more frequently in regard to different types of mentoring.
**Types of mentoring.** Mentoring has generally been used within three domains: the workplace, academia, and the community or child/adolescent mentoring (Allen & Eby, 2008). Karcher, Kuperminc, Portwood, Sipe, and Taylor (2006) proposed a framework which conceptualized the various elements of mentoring programs, encompassing the context (i.e., the location of the meeting), structure (i.e., nature of the mentor/mentee relationship), and goals (i.e., the activities to shape the outcomes) of mentoring programs. Rhodes, Bogat, Roffman, Edelman, and Galasso (2002) described program contexts as either being site- or field-based, with each context having distinct characteristics for the mentoring program. Field-based mentoring seems to be the best-known manner by which mentoring occurs and offers the greatest variety of freedom as the mentor and mentee typically interact at mutually convenient times and locations (Karcher et al., 2006). Contrary to this, site-based mentoring refers to programs wherein mentors and mentees interact within a specific site, including schools, community organizations, and youth development centers (Karcher et al, 2006).

Although mentoring has been widely researched as the adult-to-young adult mentoring structure, Karcher et al. (2006) suggested that adult-with-child/adolescent mentoring programs have begun to emerge and use the resources of special population mentoring “through cross-age peer mentoring, intergenerational mentoring, e-mentoring, and group mentoring” (p. 711). The term group mentoring is widely used, referring to groups with one mentor and multiple mentees, or several mentors and mentees (Deutsch, Wiggins, Henneberger, & Lawrence, 2013; Karcher et al., 2006).

The National Mentoring Partnership defines group mentoring as a single adult with up to four children and/or adolescents but also highlights that group mentoring
covers a wide variety of types of programs and structures (Mentor, 2015). The group mentoring setting can provide a safe environment for children and adolescents to receive constructive feedback (Mentor, 2015). In a study that examined the potential for developing connections and sustaining mentor-mentee relationships, Deutsch and colleagues (2013) reported that both mentors and mentees expressed favorable levels of satisfaction with their group mentoring experiences, with the adolescent girls demonstrating a sense of group connection throughout the program.

**Natural mentoring.** Mentoring relationships, or relationships between a non-caregiver and child can have lifelong effects on the mentee (Hurd & Zimmerman, 2014). Whether the relationship is formal through a mentoring program or developed on their own, the benefits of mentoring children and/or adolescents are noted (Munson & McMillen, 2009). Natural mentoring (i.e., mentoring in an informal way) is thought of as a better fit for children/adolescents, especially those at risk of poor lifestyle behaviours due to its informality (Greeson, Usher, & Grinstein-Weiss, 2010). For many, parents have been identified as a caring mentor or role model, however, children and adolescents may benefit from relationships with other adults in their communities (Munson, Smalling, Spencer, Scott Jr, & Tracy, 2010). Greeson, Weiler, Thompson, and Taussig (2016) defined a natural mentor as “a significant nonparental, caring adult whom a child identifies in his or her existing social network; children and adolescents typically identify teachers, coaches, religious leaders, and/or adult relatives as natural mentors” (p. 587). In addition, Dubois and Silverthorne (2005) identify the natural mentor’s role in a child or adolescent’s life as an informal social network or he/she can be from a more formal network such as an educator or a helping professional. Furthermore, natural mentoring
relationships are composed of characteristics such as the mentor’s role in the child/adolescent’s life, frequency of contact between mentor and child/adolescent, emotional closeness in the relationship, and relationship duration (DuBois & Silverthorne, 2005).

In a variety of studies, researchers have identified that children and adolescents who have a natural mentor present in their lives have more positive psychosocial outcomes than their peers who did not identify having a natural mentor in their lives (DuBois & Silverthorne, 2005; Hurd et al., 2014; Zimmerman, Bingenheimer, & Notaro, 2002). As already mentioned, a person’s support from his/her community, and access to resources can enhance a person’s strengths and assist them in accomplishing their goals (Paraschak, 2013) such as improving psychosocial outcomes. More specifically, a nationally representative study in the United States which investigated the relationship between adolescents in grades 7-12 and a supportive adult (\(N = 3,187\)) reported that adolescents who have a natural mentor present in their lives were more likely to complete high school, had higher life satisfaction, improved physical health, and experienced heightened self-esteem (Dubois & Silverthorne, 2005). Kuperminc, Thomason, DiMeo, and Broomfield-Massey (2011) also reported that adolescent girls with a mentor were more likely to have higher social acceptance and body image relative to adolescent girls without a mentor. The research appears to indicate that both children and adolescents, especially adolescent girls, benefit from having a mentor in their lives, whether that be formal or not.

**Female mentoring.** Female mentoring programs have increased in popularity and can be impactful for both the mentor and the mentee (Ruff, 2013). A qualitative analysis
of the effects of women mentoring adolescent girls suggested that adolescent girls
experienced authentic and enhanced emotional support, development of confidence and
new skills, and a camaraderie that provides a relief from the stresses of daily life (Spencer
& Liang, 2009). This is consistent with the findings of Burke (1984) who suggested that
female mentors performed and engaged in more psychosocial functions and activities
than men. Women may get involved with mentoring programs/interventions for various
reasons, such as personal interest, career enhancement, knowing it will benefit the mentee
and/or believing in the program/intervention, sense of compassion, longing for
meaningful relationships, and/or a sense of identity with the mentees (Dowd, Harden, &
Beauchamp, 2015; Larsson et al., 2016). However, as Spencer, Drew, Walsh, and
Kanchewa (2018) noted, sometimes a disconnect between female mentees and mentors
can occur if the female mentors want to develop a close relationship too quickly.
Furthermore, a concern for female adolescents who have been referred to mentoring
programs is that they have lower levels of trust and communication (Deutsch, Reitz-
Krueger, Henneberger, Futch Ehrlich, & Lawrence, 2017). Other studies have revealed
that trust was a foundational element for positive relationship development (Goldner &
Scharf, 2014; Greeson & Bowen, 2008; Munson et al., 2010), female adolescents often
feel love and cared by their mentors (Spencer & Liang, 2009; Munson et al., 2010), and
they identify their relationship with their mentor as a parent-child relationship.

Formal child/adolescent mentoring programs have historically matched same sex
mentor and mentees in a relationship, and more programs designed primarily for girls
have been developed for their psychological health and wellbeing (LeCroy, 2005;
Spencer & Liang, 2009). Gender specific programs seem to be critical in adolescence due
to the biological, psychological, and physical changes that take place in an adolescent’s life (Deutsch et al., 2013; LeCroy, 2005). Adolescent girls today are presented with multiple issues such as alcohol and drug use, high levels of body dissatisfaction and body image disorders, academic struggles, and high rates of mental health (Deutsch et al., 2013; LeCroy, 2005). Interventions that target adolescent girls who may be at risk are thus recommended as a preventative measure for adulthood to decrease the chances of adapting poor lifestyle behaviours (Deutsch et al., 2013; LeCroy, 2005).

In an attempt to manage some of these public health concerns, gender specific mentoring programs for adolescent girls have been developed to target poor health behaviours (Dowd, Chen, Jung, & Beauchamp, 2015). As an example, an analysis of the psychological health enhancing cognitions and behaviours among a sample of adolescent girls in the Canadian based “Go Girls!” mentoring program suggested that leisure/physical activity time and healthy eating behaviours increased (Dowd, Chen, et al., 2015). Furthermore, outcomes of the national Canadian Big Brothers Big Sisters mentoring program was examined in a sample of 71 families (parents, children and adolescents ages 7-14 years) and 30 adult mentors, suggesting that the mentoring program had positive effects on social skills and self-esteem among adolescent girls (De Wit et al., 2007). Furthermore, gender specific mentoring programs for adolescent girls have improved body image/self-esteem (Bruening, Dover, & Clark, 2009; Karcher, 2008; King, Vidourek, Davis, McClellan, 2002; Moody, Childs, & Sepples, 2003; Westhues, Clarke, Watton, & St. Claire-Smith, 2001), social skills (Karcher, 2008; Moody et al., 2003), and decreased the chance of future drug and alcohol use (Kuperminc et al., 2011; Moody et al., 2003). Overall, mentoring seems to be effective for decreasing problematic
behaviours, increasing self-esteem levels, and improving social skills among adolescent girls, primarily those being at risk.

**Feminist mentoring.** Historically, mentoring relationships have focussed on a one size fits all hierarchal model of mentoring and assumed that all models of mentoring can be used for all populations that require mentoring (Benishek, Bieschke, Park, & Slattery, 2004). Thus, many mentoring models fail to acknowledge the power differences, as well as the variety of background experiences within the mentoring relationship. Although the literature suggests that mentoring offers a positive experience (De Wit et al., 2007; Dowd, Chen, et al., 2015; Dowd, Harden, & Beauchamp, 2015; Larsson et al., 2016), mentoring may not always be a positive experience for the mentee. Some transitions that occur during a mentoring relationship (e.g., redefining roles and shifts in power relationships; Kram, 1983) may impact the mentoring relationship. Moreover, the mentoring relationship may be at risk from the beginning when the mentoring relationship is forced rather than developing naturally (Benishek et al., 2004). Other problematic aspects of mentoring are more relevant to non-privileged groups or marginalized groups. As the literature surrounding mentoring relationships has historically been male dominated and predominantly in professional settings, it can be difficult for marginalized or vulnerable populations to access mentoring programs with which they can identify (Benishek et al., 2004).

Furthermore, traditional models of mentoring have been unidirectional and hierarchal in nature and are based on paternalistic versions of mentoring and often assume one type of mentoring fits all (Benishek et al., 2004). Evidently, marginalized and vulnerable populations, as well as women and people of colour require different
mentoring experiences; the lack of role models these groups often face, makes it even more difficult to find a mentoring program. Although the literature suggests that only women should mentor women, Fassinger’s (1997) feminist model of mentoring suggests that mentoring can be employed by both female and male mentors due to the lack of available mentors for marginalized groups and vulnerable populations (Benishek et al., 2004).

According to Benishek et al., (2004), Fassinger’s (1997) model of feminist mentoring is one of the most progressive models of mentoring as it focuses on the relationship between the mentor and the mentee as well as issues related to power and empowerment. For example, within the model, the mentor recognizes the presence of power imbalances between themselves and the mentee, acknowledges them, and uses their power to empower the mentee. The mentor should acknowledge the privilege of being in a position of power and disclose certain aspects of their personal lives with the mentees in order to counteract these power imbalances (Humble, Solomon, Allen, Blaisure, & Johnson, 2006). Interestingly, this perspective aligns with Saleebey’s (2009) strength perspective that challenges the traditional deficit perspective, where professionals are often seen as the experts (Anderson, 2015). Moreover, Fassinger’s model recognizes diversity (e.g., racial, ethnic, sexual orientation, and gender diversity) as a strength in mentoring rather than an impediment. As mentioned already, according to Saleebey (2009), the strengths perspective looks at vulnerable and marginalized individuals, families, and communities through the lens of their capacities (i.e., talents, competencies, possibilities, visions, values, and hopes) despite how these have been overshadowed through oppression and trauma in their lives.
However, Benishek et al. (2004) suggested that Fassinger’s (1997) model of mentoring is problematic because multicultural issues are not highly integrated into the mentoring relationship rather than simply being an important aspect of the model. Benishek et al. (2004) proposed a revision of the model, which combined both feminist theory and multiculturalism (i.e., multicultural feminist mentoring) and described it as an “interactive process in which differences are (a) clearly defined, (b) explored when appropriate in order to determine their relevance to the relationship and each individual’s development, and (c) ultimately result in a relational exchange that is respectful of such differences” (p. 434). Benishek et al. (2004) proposed an adapted five-dimension model of multicultural feminist mentoring following their review of Fassinger’s (1997) model including (1) rethinking of power, (2) emphasis on relational, (3) valuing collaboration, (4) integration of dichotomies, and (5) incorporation of political analysis.

Moreover, Benishek et al.’s (2004) revised model of mentoring involves eliminating power hierarchies and puts an emphasis on sharing power between the mentor and the mentee and using their power to empower the mentee and also to put their needs second to the mentee. Moreover, the model involves a thorough examination of the mentor’s privilege within the mentor/mentee relationship and their environment and respecting each other’s differences. Furthermore, the authors suggest that mentoring should be genuine, task and relationship oriented, the mentor should show authenticity (i.e., showing flaws and strengths), and feedback is not unidirectional in the relationship. Moreover, it is the role of the mentor to discuss multicultural issues with the mentee and the mentors are encouraged to seek out resources when needed. Mentors are advised to
support mentees’ relationships with other role models, mentors, and advisors in other areas of their lives.

Benishek et al. (2004) suggested that discussing multicultural issues within the mentor and mentee relationship in order to bring to light group differences might be problematic, as some mentees who are part of a hidden minority (e.g., foster care) might not discuss their concerns without encouragement. Furthermore, the mentor and the mentee work together as a cohesive team on projects and each voice is valued. From a multicultural perspective, participation is not made mandatory from the majority culture/ethnicity, and diverse perspectives are encouraged. The revision of Fassinger’s (1997) model suggests that mentees are encouraged to bring their own contributions as it is meaningful and relevant to marginalized and vulnerable populations. In a mentoring relationship, there should be a focus on developing and maintaining an authentic sense of self where experiences from the non-majority culture are valued to ensure multiculturalism. Valuing the mentee’s perspective reinforces that all experiences are valuable. Lastly, the mentor and mentee should acknowledge that education, work, and life are not value free, and that mainstream values (e.g., sexism, racism, homophobia) within the relationship and institutions must be challenged. In addition, the mentor should encourage social advocacy and social justice activities and work together to facilitate systemic change.

The adapted version of Fassinger’s (1997) model of feminist mentoring includes an evaluation of power and privilege within the mentoring relationship, and differences in the relationship are valued and explored, rather than minimized or ignored. A strengths perspective aligns with a feminist mentoring perspective as they both work to
acknowledge and reframe problems by focusing on what is going well in a situation (e.g., mentoring relationship) and seeking to empower one another (Paraschak & Thompson, 2014). For the purpose of this program evaluation, a primary focus on the fourth principle of Saleebey’s (2009) strengths perspective (‘experts’ help by collaborating with them) will allow for researchers and the adolescent girls to highlight strengths which they have developed or enhanced through their involvement with the program. Similar to a strengths perspective, in a multicultural feminist mentoring lens, the mentor and mentee are encouraged to work together as a cohesive team where each voice is valued. Benishek’s (2004) revised model of mentoring suggests that mentees are encouraged to bring their own contributions as it is meaningful and relevant to marginalized and vulnerable populations (e.g., those in foster care).

Foster Care

**Foster care in Canada.** Children services/welfare services have been longstanding in Canada. The Canadian Child Welfare Research Portal (2011) defines child welfare as “a set of government and private services designed to protect children and encourage family stability with the main aim of these services to safeguard children from abuse and neglect” (para. 1). According to the Ontario Associations of Children’s Aid Societies (2018), up until January 1st 2017, a “child” eligible for protection services was any male or female under the age of 16 years, whereas now, the age to receive child protection services is 18 years in Ontario. Under the Canadian constitution, the social and welfare services are separated into jurisdictions and the responsibility falls on each provincial and territorial governments, making up the Canadian Child Welfare system (Ontario Ministry of Children, Community, and Social Services, 2018; Canadian Child
Welfare Research Portal, 2011). In the province of Ontario, the child welfare system has been regulated under the Ontario Association of Children’s Aid Societies since 1920 and manages 49-member organizations. In 1985, the Child and Family Services Act regulated child protection services in Ontario and was proclaimed by the government to ensure that members of the Ontario Association of Children’s Aid Societies and the Ontario College of Social Work promoted the best interests, protection, and well-being of children in their jurisdictions (Ontario Associations of Children’s Aid Societies, 2018).

Children’s Aid Societies in Ontario are responsible for investigating reports of abuse and neglect and taking the necessary steps to protect children; whether that be a single protection case or looking after children who come into their care (Ontario Ministry of Children, Community, and Social Services, 2018). The Ontario Ministry of Children, Community, and Social Services (2018) reported that the top five reasons for children and family becoming involved with the Children’s Aid Society are the need for assistance, physical force and/or maltreatment (e.g., childhood sexual abuse), child exposure to intimate partner violence, caregiver with a problem (e.g., mental health, drug/alcohol), and/or inadequate supervision. When further action is required to protect the child(ren), the child(ren) may end up in foster care.

The 2018 Child and Family Services Act defines foster care as “the placement of a child or young person in the home of someone who receives compensation for the child but is not the child’s parent” (Ontario Ministry of Children, Community, and Social Services, 2018, para. 2). Foster children and adolescents enter into the care of the Children’s Aid Societies/the government for a variety of reasons, with the majority being when the biological parents of a child cannot care for them any longer and results in
neglect (Duke, Farruggia, & Germo, 2017; Gomez, Ryan, Norton, Jones, & Galan-Cisneros, 2015).

In the last several decades, research has investigated children and adolescents transitioning in and out of the systems of care, particularly the foster care system (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001). Munson and McMillen (2009) suggested that children and adolescents entering foster care may have experienced stressful life events such as prolonged abuse, neglect, and ultimately removal from their home. In the 2016-2017 fiscal year, there were an average of 12,794 children and adolescents placed in the care of Children’s Aid Societies in Ontario, and in 2014-2015 adolescents aged 16-18 years were the highest age group represented in care (Ontario Associations of Children’s Aid Societies, 2018). Annual reports from the Windsor-Essex Children’s Aid Society suggested that in the 2016-2017 fiscal year 529 children were placed in foster care by the society (Windsor-Essex Children’s Aid Society, 2017).

According to the 2016 Canadian census data, there were 28,030 children/adolescents living in foster care, with 10,545 being between the ages of 10-14 years (Statistics Canada, 2018a). More specifically, the number of girls living in foster care in Canada was ~13,445 with the largest majority (~5,045; 37%) being between the ages as 10-14 years of age (Statistics Canada, 2018a).

**Mentoring in foster care.** Mentoring programs to assist at risk children and adolescents have been growing over the last several years and have been the focus of many mentoring programs (DuBois, Holloway, Valentine, & Cooper, 2002). Mentoring has been repeatedly identified as an intervention and a way to create caring relationships between at risk children/adolescents and non-parental adults (Greeson & Bowen, 2008;
Mech, Pryde, & Rycraft, 1995). At risk children and adolescents usually include those who come from low socioeconomic (SES) backgrounds, have less family guidance and/or lack positive role models in their lives, and are impacted by a variety of physiologic, interpersonal, family, and environmental factors (Denby, Gomez, & Alford, 2016; Dubois et al., 2002; Keating, Tomishima, Foster, & Alessandri, 2002; Meyer & Bouchey, 2010; Moody et al., 2003). The stress for at risk adolescents who are entering and exiting foster care may increase during this difficult transition with limited familial support and few resources available to them (Britner & Kramer-Rickaby, 2005; Courtney et al., 2001). Adolescents in foster care are more at risk to use drugs, tobacco, and alcohol than their same age-peers (Siegel, Benbenishty, & Avi Astor, 2016; Zimmerman et al., 2002). The negative risk behaviours may lead to several negative repercussions such as adolescent pregnancy, mental health problems, school drop outs (Williams, 2011), engaging in high risk sexual behaviours (Barrett, 2009), and drug abuse (Ahrens, Lane Dubois, Garrison, Spencer, Richardson, Lozano, 2011; Siegel et al., 2016; Taussig, Culbane, Raviv, Scholl Fitzpatrick, & Wertheimer Hodas, 2010; Williams, 2011). Maltreated children and adolescents in foster care who have experienced significant trauma are not only at higher risk for negative risk behaviours, but also have a difficult time trusting adults and building positive relationships quickly (Taussig et al., 2010). Furthermore, foster care may lead to feelings of isolation from their community, which can cause disengagement with their surroundings (Mech et al., 1995).

Despite the adversities and disproportionately high levels of child maltreatment and subsequent removal from their homes that adolescents in foster care may face (Rayburn, McWey, & Cui, 2016), the possibilities of experiencing post traumatic growth
Post traumatic growth refers to “positive psychological change experienced as a result of the struggle with highly challenging life circumstances” (Tedeschi & Calhoun, 2004, p. 1). Although the main focus of post traumatic growth is on the possibilities of positive change, it is important to note that challenging life situations can also produce psychological distress. For example, individuals who experience physical trauma may experience anxiety and specific fears that persist for a prolonged period of time (Tedeschi & Calhoun, 2004). However, Tedeschi & Calhoun (2004) argue that post traumatic growth brings a change to individuals that goes beyond an ability to resist the traumatic event and has a quality of transformation unlike resiliency. Moreover, post traumatic growth (2004) may also be more applicable to adolescents (rather than children) as the concept implies an established set of schemas that are changed in the wake of trauma. Interestingly, a main concept of the process of post traumatic growth that Tedeschi & Calhoun (2004) highlight is the importance of support and disclosure following a traumatic event. For example, Tedeschi & Calhoun (2004) emphasized the important role of mutual support between individuals who have been in similar situations can be crucial for the willingness to incorporate a new perspective post traumatic event. Moreover, sharing stories related to traumatic events with others may extend Bandura’s (1994) the concept of observational learning about post traumatic growth to other survivors of trauma.

Recently, the federal government has emphasized the importance of mentoring relationships with children and adolescents in foster care, and mentoring programs are being implemented at much higher rates for children and adolescents living in foster care (Ahrens et al., 2011). In a North American study that examined the influence of natural
mentors on the psychological adjustment of 129 young mothers aged 14-22 years, Rhodes, Ebert, and Fischer (1992) reported that female adults and adolescents who have experienced profound trauma and stress, but have a mentor present in their lives, were less depressed than their peers who did not identify a mentor in their lives. Moreover, Munson and McMillen (2009) noted that out of a sample of 339 adolescents (mean age 18 years) in foster care, 85 (25%) could not identify a non-kin supportive adult in their lives at the time of the study. With respect to the children/adolescents who were able to identify a supportive adult in their lives (i.e., 75% of the sample), they were less likely to show depressive symptoms, showed a decrease in stress levels, and had greater life satisfaction 6 months following the completion of the study (Munson & McMillen, 2009). Similarly, Ahrens et al. (2011) reported that foster children with the presence of a natural mentor have greater probability for attending college or university, less negative mental health, and less physical violence. Furthermore, Yancey (1998) suggested that the emotional disturbances and maladaptive behaviours among foster children (e.g., body image disturbance and low self-esteem) are situationally rooted and can be improved through mentoring programs.

**Body Image**

Body image, a known psychosocial issue among most adolescents, is particularly of concern for adolescent girls in foster care (Byram & Wagner, 1995; Kremer, Orbach, & Rosenbloom, 2013) and was one of the primary elements of focus when initially developing the WECAS Girls Program. Body image is known to be the internal representation of one’s outer appearance and is a multi-dimensional construct (Sands, 2000) influenced by social, biological, and psychological factors (Borzekowski & Bayer,
In other words, body image is the internalization of one’s physical appearance based on self-perception and self-attitudes, including thoughts, beliefs, and feelings about one’s body through biopsychosocial models (Micheal et al., 2013; Shomaker & Furman, 2007). Since body image is a multi-dimensional construct, an individual’s experiences and evaluation of their bodies, as well as their physical characteristics, are important when it comes to understanding body image (Blyth, Simmons, & Zakin, 1985). Furthermore, body image lies on a continuum from positive body perceptions (i.e., accurate and mostly healthy) to negative body perceptions (i.e., inaccurate and mostly negative; Voelker, Reel, & Greenleaf, 2015).

Body image dissatisfaction is the negative evaluation of one’s own physical appearance and encompasses self-esteem, body size distortion, and an individual’s attitude of their own body weight, size, and appearance (Coomber & King, 2008). Body dissatisfaction increases in adolescent boys and girls throughout high school (Eisenberg, Neumark-Sztainer, Story, & Perry, 2005; Shomaker & Furman, 2007), with adolescent girls being more dissatisfied with their bodies compared to boys (Handford, Rapee, & Fardouly, 2018). Body dissatisfaction and low body image have been known to have strong associations with extreme weight loss strategies among adolescent girls, including excessive exercise (Bewell-Weiss & Carter, 2010; Di Lodovico, Dubertret, & Ameller, 2018; Holland, Brown, & Keel, 2014; Shroff et al., 2006), dieting and laxative abuse (Boutelle, Neumark-Sztainer, Story, & Resnick, 2002; Cruz-Sáez, Pascual, Salaberria, Etxebarria, & Echueburúa, 2015), can lead to eating disorders (Handford et al., 2018), and is often reinforced by parental encouragement of adolescent daughters to lose weight (Abraczinskas, Fisak Jr, & Barnes, 2012; Balantekin, Savage, Marini, & Birch, 2014).
Sociocultural influences of body image. According to Striegel-Moore, Silberstein, and Rodin (1986), the sociocultural model of body dissatisfaction identifies the internalization of thinness/the thin ideal as the driving force behind low body image among women and girls. Various media outlets (e.g., television, social media, and magazines) often portray an unrealistic or unattainable representation of what women should look like (Dye, 2016), and for women and girls, the cultural ideal has been known as a thin ideal body (Coomber & King, 2008 Lawler & Nixon, 2011). Body image has been influenced by the cultural ideal with a general consensus that mass media is a strong external factor leading to low body image in adolescent girls (McCabe & Ricciardelli, 2005). These cultural ideals of beauty and body shape are modelled through the mass media, which has been argued as being the most powerful communicator of translating the messages to women and girls (Lawler & Nixon, 2011). A negative effect of the media is that it tends to perpetuate the thin ideal through glamourizing and praising the thin bodies of celebrities and models, which are highly unrealistic and unattainable for the majority of the population (Golan & Crow, 2004; Saunders & Frazier, 2017). Furthermore, the use of airbrushing, photo shopping (e.g., altering the image), and cosmetic surgeries further increase the unrealistic standards perpetuated by mass media (Clay, Vignoles, & Dittmar, 2005).

The appearance ideal conveyed through a variety of streams including the media, friends, and family members is critical to the development of healthy body image (Saunders & Frazier, 2017). A number of studies have found that the exposure to the thin ideal through media (e.g., tabloids, magazines, television, and social media) is related to significantly higher body image dissatisfaction at various ages throughout childhood.
(Rodgers, Damiano, Wertheim, & Paxton, 2017) and adolescence (Bell & Dittmar, 2014; Knauss, Paxton, & Alsaker, 2008; Rousseau & Eggermont, 2018). Adolescent girls who are exposed to more sociocultural factors (e.g., peer and familial influences; Coomber & King, 2008; Golan & Crow, 2004) that promote thinness are more likely to adopt a thin ideal, which can lead to low body image (Rodgers, Paxton, & McLean, 2014) and can result in disordered eating patterns and eating disorders (Blodgett Salafia, Jones, Haugen, & Schaefer, 2015; Martinez-Gonzalez, Gual, Lahortiga, Alonso, Irala-Estevez, & Cervera, 2003). Sociocultural theory identifies societal ideals/standards for female beauty as an underlying factor for body dissatisfaction among women and girls; while the media is a dominant factor, it is not the only influence on body image (Shomaker & Furman, 2007).

**Peer relationships and body image.** Peer influences are a large component of transmitting sociocultural ideals of thinness and have been consistently identified as a factor associated with the development of disordered eating behaviours among adolescents (Blodgett-Salafia et al., 2015; Polivy & Herman, 2002). More specifically, girls learn these thin-ideal attitudes and behaviours from their friends through teasing, modeling, and having conversations about their body image (Blodgett-Salafia et al., 2015; Dunkley, Weirtheim, & Paxton, 2001; Lawler & Nixon, 2011; Lev-Ari, Baumgarten-Katz, & Zohar, 2014). Social comparison theory notes that individuals look to find standards to assess their personal worth and status, and when those standards cannot be found, individuals may seek to compare themselves to others (Lev-Ari et al., 2014, Lev-Ari, Baumgarten-Katz, Zohar, 2015; Tatangelo & Ricciardelli, 2017). Social comparisons are an important factor in children’s’ and adolescent’s development as they
are a way to learn social information and build positive self-esteem and mental health during school years in children ages 8-10 years (Tatangelo & Ricciardelli, 2017). Mueller, Pearson, Muller, Frank, and Turner (2010) highlighted how adolescent girls in grades 7-12 engaged in social comparisons with their peers at school and that the school setting played an important role in shaping girls’ decisions to practice weight control (e.g., the odds that an underweight girl is engaged in weight control increases when many underweight girls are engaging in weight control behaviours). Interestingly, adolescent girls not only reported engaging in social comparisons with their best girlfriends, but also with their maternal figures (Lev-Ari et al., 2014).

**Family and maternal relationships and body image.** Adolescent girls can learn behaviours, body expectations, and ideals based on more immediate sociocultural factors such as their families (Arroyo & Anderson, 2016). According to the Social Learning Theory, family and peers can significantly increase the sociocultural emphasis on thinness for adolescent girls (Byely, Bastiani Archibald, Graber, & Brooks-Gunn, 1999). Comments made by parents in regard to the adolescent girls’ body weight is associated with body dissatisfaction and disordered eating that can carry into adulthood (Blodgett Salafia et al., 2015; Saunders & Frazier, 2017). As girls approach adolescence, parents tend to become more critical of their daughter’s appearance and may offer more encouragement towards changing their diets (Sands & Wardle, 2002).

A central component to Bandura’s Social Learning Theory is the concept of reciprocal determinism, a process that explains although people are influenced by other’s actions and environment, they also act on and change the environment in which their actions take place (Ogle & Damhorst, 2003). For example, Pike and Rodin (1991)...
suggested that the perceived body image concerns of mothers regarding the weight and shape of their own bodies may serve as modeling behaviours for their adolescent daughters. Two of the main processes by which mothers can influence their daughters’ body image and eating behaviours are perceived to be direct and in direct influences (Abraczinskas et al., 2012; Coomber & King, 2008; Handford et al., 2018). Direct influence may be through verbal communication or verbal influence (e.g., commenting on the child/adolescent’s appearance; Anschutz, Kanters, Van Strien, Vermulst, & Engels, 2009), whereas indirect influence may involve behaviour modeling (i.e., the process of internalizing the behaviours of others; Abraczinskas et al., 2012; Coomber & King, 2008).

Modeling of the thin ideal can be internalized by a child/adolescent when the mother begins to display negative comments and attitudes about her appearance/weight, as well as displaying behaviours in attempts to lose weight (Coomber & King, 2008, Wertheim, 2002). For example, among a sample from the United States, it was suggested that the more a mother was preoccupied with her weight the greater the likelihood that her daughter would believe she also needed to lose weight, which in turn correlated with the daughter’s restricted eating behaviours (Francis & Birch, 2005). Moreover, in an attempt to gain understanding of the emergence of body image concerns and dieting behaviours in early adolescence in relation to familial relationships, Byely and colleagues (1999) examined the impact maternal modeling of dieting and body image concerns had on their preadolescent daughters and reported a negative correlation between body image and problematic eating behaviours among a sample of 77 white female adolescents from private high schools in the United States. Furthermore, research has also suggested that
girls who experience disturbed eating patterns and weight concerns have mothers who are more critical about their own weight and appearance than girls without their own eating problems (Handford et al., 2018; Pike & Rodin, 1991).

Social media and body image. The literature surrounding the relationship between the impact of mass media on body image in adolescent girls has primarily focused on television and movies. However, media sources now include the rapidly evolving world of social media, where girls are being exposed to information about body image ideals. Social media sites are popular forms of media (e.g., blogging sites, YouTube, social networking), and social networking sites (e.g., Instagram, Facebook, Twitter, Snapchat) are the preferred form of social interactions among adolescents and young adults (Perloff, 2014; Vaterlaus, Patten, Roche, & Young, 2015). With the increasing popularity and accessibility that cell phones have to offer, social networking sites are now available anywhere and anytime, and offer instant opportunity for communication through photographs, videos, and private messaging (Williams & Ricciardelli, 2014).

According to the 2013 Canadian General Social Survey, 96% of adolescents and young adults ages 15-24 years were using social networking sites (Statistics Canada, 2018b). Furthermore, Perloff (2014) highlighted that social networking sites were the platforms on which children/adolescents engaged with others, attitudes were formed, and body image concerns were created. Instagram, one of the most popular social networking platforms with over 800 million active users (Instagram, 2017), allows users to post personal photographs for an audience to see, comment on, and “like” (Sumter, Cingel, & Antonis, 2018). Receiving “likes” on photographs can be seen as a means of acceptance
and popularity, peer attention and validation; however, users who do not receive enough likes on their posts may feel badly about themselves (Santarossa & Woodruff, 2017). For adolescent girls, the speed and accessibility that social networking sites offer to make social comparisons with their friends and other users such as celebrities, can be a driving force to body dissatisfaction (Tiggemann & Slater, 2014).

Much like traditional mass media (television, magazines, news), social media platforms promote the thin-ideal which has been known to be harmful to adolescent girls by promoting ultra-thinness, fad diets, and excessive exercising (Sumter et al., 2018), and are associated with low body image and disordered eating (Santarossa & Woodruff, 2017). For example, a past trend on Instagram featured posts related to the hashtag #thinspiration (i.e., thin-ideal media content that purposely promotes weight loss in unhealthy manners that emulate behaviours associated with eating disorders; Ghaznavi & Laramie, 2015), highlighted images of women who were skinny to bony, and encouraged users to achieve that same thin physique (Sumter et al., 2018; Talbot, Gavin, van Steen, & Morey, 2017). The #thinspiration community has been associated with the pro-eating disorder community with hashtags such as #bonespiration (i.e., another popular hashtag that promoted the thin-ideal through photos of protruding bones; Talbot et al., 2017).

Since banning #thinspiration in 2012 (to help demote and de-glorify self-harm), users are now using #fitspiration (i.e., a combination of fitness and inspiration) to motivate users to exercise and pursue a healthy lifestyle (Tiggemann & Zaccardo, 2015). Although meant to motivate users to engage in healthy lifestyle choices, #fitspiration has also raised some concerns that it may increase body dissatisfaction among adolescent girls (Tiggemann & Zaccardo, 2015) and shows only very thin women and girls
(Tiggemann & Zaccardo, 2018). More specifically in terms of body image, Tiggemann & Zaccardo (2018) highlighted that much like #thinspiration, #fitspiration may have damaging consequences for adolescent girls by implying that only certain thin body types can be fit and healthy. Moreover, adolescent girls who use social networking platforms such as Instagram and Facebook have been shown to have higher body dissatisfaction (Stronge, Greaves, Milojev, West-Newman, Barlow, & Sibley, 2015) and lower body image (Fardouly, Diedrichs, Vartanian, & Halliwell, 2015) than their non-user counterparts. In a more detailed look at Facebook users, Meier and Gray (2014) suggested that it was not the amount of time spent on the social media site that caused low body image and higher body dissatisfaction, but rather the amount of time engaging in photo related activity (i.e., posting photos, and viewing photos of friends). In contrast, Santarossa and Woodruff (2017) investigated whether problematic social networking site usage, total social networking time/day, total social networking friends, and specific social networking site activities were correlated with body image, self-esteem, and eating disorder concerns. The findings from Santarossa and Woodruff (2017), revealed that most females and males spent 4.1±3.9 and 2.9±2.8 hours, respectively, on social networking sites, with the majority of the time spent lurking (i.e., looking at someone’s profile but not communicating directly with them; Santarossa & Woodruff, 2017).

Interestingly, Burnette, Kwitowski, and Mazzeo (2017) investigated body image and body satisfaction levels among a sample of girls aged 12-14 years with high social media usage through focus groups. One of the themes of the focus groups that discussed posting selfies evoked the most critical conversations and included harsh criticisms such as selfies representing egocentrism as well as users attempting to seek praise and

...
validation (Burnette et al., 2017). After discussing social comparison among their peers, the sample was able to identify several strategies that helped reduce the potential harmful effects of social media usage (Burnette et al., 2017). The sample reported media literacy interventions, learning to appreciate the differences between themselves and the users they follow on Instagram, displaying confidence, and demonstrating coping skills all being helpful in negotiating negative associations between social media and body image (Burnette et al., 2017). The adolescent girls also reported that these characteristics were formed primarily by positive parental role modeling and supportive environments at school (Burnette et al., 2017).

Adolescence, puberty, and body image. Body image has been discussed to be an important component throughout childhood and becomes more prominent during adolescent years (Davison & McCabe, 2006; Price, 2009; Saunders & Frazier, 2017; Usmani & Daniluk, 1996). For girls in particular, the start of puberty and menarche is critical time for psychological and physical (Davison & McCabe, 2006) change for the bodies of adolescent girls (Usmani & Daniluk, 1996). Internalization of the thin ideal and body dissatisfaction can begin to appear before adolescence (Smith, Erickson, Austin, Winn, Lash, & Amrhein, 2016). Adolescence begins with puberty, a period of rapid physical change that can include weight gain (Stice & Whitenton, 2002) and an increase in muscle mass (Kaczmarek & Trambacz-Oleszak, 2016).

Moreover, the physical changes girls go through during early adolescence, can bring them further away from the cultural ideal of thinness putting them at risk for low body image. For example, one study reported that preadolescent girls who were overweight before puberty (as compared to girls who were not overweight entering
puberty) scored higher on measures of disordered eating, low body image, drive for thinness, and perfectionism after puberty (Ackard & Peterson, 1999). Moreover, parent and adolescent relationships also undergo multiple changes during puberty, creating multiple psychological stressors for adolescent girls (Byely et al., 1999; Hill & Palin, 1997). However, not having strong parental and peer relationships can also add more psychological stressors to adolescent girls.

**Adolescent girls in foster care and body image.** Children and adolescents who end up in foster care are admitted primarily on the basis of experiencing physical abuse, sexual abuse, and neglect (Salazar, Keller, Gowen, & Courtney, 2013). In particular, the trauma adolescent girls in foster care may have experienced throughout their childhood can have a significant impact on their body image and self-esteem (Kremer, Orbach, & Rosenbloom, 2013), lead to poor mental health (Schneider, Baumrind, & Kimerling, 2007), addictive drug use (Tlapek, Auslander, Edmond, Gerke, Voth Schrag, & Threlfall, 2017), and eating disorders (Byram & Wagner, 1995; Tlapek et al., 2017).

Literature suggests that girls transition out of foster care and into society as young adults or older adolescents with little to no self-esteem (Burke, 2013). The developmental age for girls starts in early childhood, which is often the period when girls are separated from their female caregivers (Burke, 2013). Moreover, Ahrens et al. (2011) reported that girls who enter foster care have a greater stigma associated with them than those not in foster care, and are more likely to have low self-esteem (Salahu-Din & Bollman, 1994), drug problems (Siegel et al., 2016), risky sexual behaviours (e.g., teen pregnancy; Dworsky & Courtney, 2010; Leve, Kerr, & Harold, 2013), and difficulty locating employment (Dworsky & Gitlow 2017; Okpych & Courtney, 2014). Girls build and form
attachment to relationships differently than boys (Chodorow, 1978) and, therefore, a mentor in a girl’s life throughout their time in foster care may be a beneficial source of support (Burke, 2013) for multiple aspects of their lives.
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APPENDICES

APPENDIX A
Recruitment Handouts (Adolescent Girls)

ARE YOU AN ADOLESCENT GIRL WHO ATTENDS THE WECAS GIRLS PROGRAM?

WE ARE HOSTING INTERVIEWS AND WANT TO HEAR ABOUT YOUR EXPERIENCES WITH THE PROGRAM!
PARTICIPANTS WILL RECEIVE A $25 GIFT CARD TO DEVONSHIRE MALL!
INTERESTED IN LEARNING MORE?
Contact Erin Dufour
APPENDIX B
Recruitment Handouts (Foster Parents)

DOES YOUR FOSTER DAUGHTER ATTEND THE WECAS GIRLS PROGRAM?

WE ARE HOSTING INTERVIEWS AND WANT TO HEAR FEEDBACK FROM YOU!

PARTICIPANTS IN THE STUDY WILL RECEIVE A $25 GAS GIFT CARD

FOR MORE INFORMATION, PLEASE CONTACT ERIN DUFOUR AT
APPENDIX C
Recruitment Handouts (Program Administrators and Program Mentors)

WERE YOU A PART OF THE PLANNING PROCESS OR ARE CURRENTLY INVOLVED WITH RUNNING THE
WECAS GIRLS PROGRAM?

WE ARE HOSTING INTERVIEWS AND WANT TO HEAR FEEDBACK FROM YOU!

PARTICIPANTS IN THE STUDY WILL RECEIVE A $25 GAS GIFT CARD

FOR MORE INFORMATION, PLEASE CONTACT ERIN DUFOUR AT

[Logo]
Since you have been participating in the WECAS Girls’ Program over the last several months, I would like your help to make it better.

You are being asked to participate in a short interview to talk about your experience in the program to keep it running smoothly in the future.
WECAS Girls’ Program

An evaluation of a natural mentoring program among teenage girls in foster care

I am asking you to participate in a 45-minute audio-recorded interview to help enhance the monthly WECAS Girls Program. I am hoping that by participating in this interview process you will be able to become a co-producer of this program and help the program administrators identify a common goal/objective of the program.

The interview will ask you reflect on your experiences with the WECAS Girls Program and highlight personal strengths that you possess and bring to the program. After you complete the interview, you will be able to look over a transcribed (paper-based) version to add or change your answers if needed.

Your participation is completely voluntary, and you can choose to answer/not answer any questions. Your participation in the interview will not affect your participation in the WECAS Girls Program.
Lastly, as a second-year master’s student in the Department of Kinesiology, I would like to be able to use the data from your interviews as a part of my master’s thesis. Any information that is obtained in connection with your interviews will remain confidential [meaning, only I will have access to the information] and will not be used for any other purpose other than subsequent studies and communicating the results. By consenting to this, you are agreeing that your data can be used in my thesis.

If you have questions contact: ______ by phone/text message or email

Signature_________________________  Date________________
APPENDIX E

Conceptual Baggage

**Researcher positionality.** As a researcher in this program evaluation it is important to acknowledge any potential preconceptions that may influence the interpretation and/or results of this program evaluation. I am a white, able bodied, heterosexual, Canadian born female who has the privilege to access higher education and be involved in such a project. Many of the adolescent girls involved in the program are disconnected with their biological mothers and are all currently living in foster homes. Although I am not in the same position as the adolescent girls in the WECAS Girls Program I did lose my mother at a young age and grew up in a predominantly male household. This unique shared experience allows me to grow my empathetic qualities and form relationships quite easily.

**How I got involved with the WECAS Girls Program.** As an executive board member for the local organization Leadership Advancement for Women and Sport (LAWS), I (along with other community partners) were contacted by the Windsor Essex Children’s Aid Society’s Youth Programming Coordinator in December 2017. According to the Youth Programming Coordinator, adolescent girls under their care may have a variety of background experiences (e.g., traumatic events such as physical, sexual, or emotional abuse), tend to lack a positive role model, and are at higher risk for low self-esteem, body image, self-confidence, and other health outcomes. Moreover, poor eating behaviour and low levels of self-esteem and body image are observed when the adolescent girls are in a mixed gender setting. These factors are thought to contribute to issues in other parts of their lives including issues pertaining to disordered eating, negative body image, unhealthy eating behaviours, a lack of social media literacy, and a
disengagement from sport and physical activity. After our initial meeting it was evident that the adolescent girls would benefit from role models that exude positive characteristics in their lives.

A second meeting was put in place to meet with a group of the adolescent girls who would be participating in the monthly WECAS Girls Program. In the meeting it was explained to the girls that a program would run once a month similar to their current youth group, but it would be for girls only and we wanted to know what they would want out of a program. Potential topics were suggested that ranged from how to do makeup, how to identify a healthy relationship and safe sex education talks, wanting to do art and play sports, and learning how to budget their finances. I remember thinking to myself that this program sounded like it was easy enough to put into place for them as the majority were very engaged in our conversation. At the end of the meeting my entire perspective changed when we asked the girls if they had anything more to add to the program. One of the girls hadn’t spoken much and was sitting directly across from me spoke up and said,

I would really like to know how to become a leader and teach other girls what we are learning here. I have post-traumatic stress disorder, social anxiety, I have been sexually abused and sexually assaulted, but my mother didn’t nurture me for nine months and raise me for most of my life to be treated like dirt and not help others like me.

This was my defining moment for being involved with this program and I knew it could hopefully create a meaningful impact on the lives of these girls.

My personal experiences with the group. The WECAS Girls Program officially started in June of 2018 as a means to get the adolescent girls involved in something over
the summer. I vividly remember the first WECAS Girls Program, and if I am going to be honest, I felt a little defeated when only 6 girls showed up. I also remember thinking and hoping that the girls in the WECAS Girls Program didn’t feel like we were privileged women coming in to “save them” with our expertise and our knowledge in certain areas. However, there are many incidences that keep bringing me back to the meaning of the WECAS Girls Program. I would love to share them all, but some I want to hold close to my heart. Nonetheless, one that has stuck out the most since the inception of the WECAS Girls Program was the first night of the WECAS Girls Program. One of the program mentors had mentioned that there were two sisters attending that night, but one of them is very quiet and reserved and doesn’t interact much due to the traumas she’s endured as a child. Keeping this in mind, I observed her throughout the night and tried my best to interact with her as much as I could. At one point in the night, I felt a tug on my shirt and to my surprise, saw the quiet girl staring up at me and before I could say anything, she said “I just want to let you know that I’m having a lot of fun and that I feel really safe here”. Once again, I was reminded that the greatest impacts can often be made on the smallest groups and on some of the most unsuspecting people. Since the first night of the WECAS Girls Program, I’ve had the chance to see other girls grow in ways I would have never expected.

At the age of 10 I lost my mother to cancer which meant I grew up in a predominantly male household. Looking at where I am now, I can truly say that my experiences growing up have shaped me into being the leader that I am today. Although I had some women (e.g., aunts, mothers of friends, teachers) in my life I could look up to periodically, I had to navigate puberty and go through the difficulties that can be
associated with high school on my own. This meant that anything that affected my self-esteem or body image did not get shared with anyone, and I often had very patriarchal standards surrounding me. Certain statements like “I hope you marry someone rich” or “It’s a good thing you have your looks to fall back on” were common in my household growing up. I didn’t really notice how these comments can affect someone until I got to university. In my first year of university I landed in the Department of Kinesiology where I struggled to connect with the material I was learning. I constantly felt like I was failing my dad and his expectations. In my second year I made the brave decision to change my major to the Faculty of Social Work. What did Social Work have in store for me? I had no idea, but I was about to find out. Things started looking up for me when I landed a summer position two years in a row at the Sarnia Lambton Children’s Aid Society as a summer intake student. My life felt like it was falling in place and I was finally making my dad proud of the work I was doing… Except for when I didn’t get granted admission into my professional years (i.e., upper level years) of the social work program. Once again, I was devastated and struggling to find a place where I belonged. What was I even doing at university? Why was no one else having the same issues as me? It wasn’t until I joined the Women and Gender studies program that I truly felt a sense of belonging. I wasn’t just surviving anymore, I was thriving. In the final years of my undergrad, I was actively involved with student groups on campus, volunteering my time through the Connecting4Success program, and participating in research projects. I was also nominated to the position of president for Women in Leadership, a student group on campus which led me to my current role as a board member for a local organization, LAWS. My research projects on body image and social media usage in my undergraduate
degree fostered my relationships with my current master’s advisor and an entrance (back) to the Department of Kinesiology for a master’s degree. Since then, I have been actively involved in the community and engaging in leadership roles with various groups of girls and women. In the spring of 2018, I was selected as an ATHENA Scholarship recipient which made me realize that my non-linear journey through my young adult years as a university student paid off.

I am beyond proud of myself, the leader and woman I have become after shaping my own journey through my life. I have been my own role model, created my own definition of leadership, and my ultimate goal in life is to inspire other young women and girls to do the same. It is my hope that the girls of the WECAS Girls Program will take something out of the program itself as well learn from the female mentors of the program.

**Sunday, April 14th, 2019.** Tomorrow is the first day of my interviews and I am experiencing a wide array of emotions; I am excited, nervous, curious, and a little overwhelmed when looking at my schedule for the entire week. Am I going to be able to be truly present for every interview by the end of the week? My biggest fear is not getting anything out of my interviews and the girls not understanding what I am asking. I’ve spent a considerate amount of time diving into the literature surrounding this framework and immersing myself in the concepts, but there is still this overwhelming sense of doubt in myself. Maybe this is normal? Or maybe I am too hard on myself… perhaps I need to reflect on my own strengths throughout this journey of writing this thesis.

**Monday April 15th, 2019.** What. A. Feeling. My first interview was amazing and made my heart burst with pride. The answers I got from the first participant made me beam with joy knowing that this WECAS Girls Program had an impact on someone.
What a surreal feeling to sit there and listen to someone reflect on their own strengths and realize their full potential and use these skills and strengths in other areas of their lives.

**Thursday April 18th: Four interviews done.** The last several days have been quite the emotional roller coaster. I had the chance to interview the program administrator and program mentor and hear their point of view on the WECAS Girls Program. It was really interesting to me to see the connection between these two interviews and how very similar some of the responses were. It also made me sit back and reflect and think about how even those that seem like they have their lives in order might also have their own personal struggles. I was really looking forward to interviewing one of the participants on Wednesday as I thought her character has improved the most during the WECAS Girls Program. The interview was actually very emotional for her which really made me reflect on her lived experiences as a 15-year-old girl. She had a really difficult time reflecting on her strengths and verbalizing them to me. I could tell she had a lot of emotions during the interview as she would get teary eyed and have a hard time discussing her strengths and capabilities with me. From a very young age in her life this girl has always been told she is not good enough and will never be good enough by her own biological parents as well as being bounced around from foster home to foster home. The idea that she is not worthy of love, happiness, and success is engrained in her head. I cannot even begin to fathom the traumas she has lived through, and the disappointment and rejection she has experienced in her short 15 years of life. When I would ask her about her own personal strengths she often was unable to articulate them to me without being overwhelmed with emotions. I think this is something that I didn’t think about when writing this interview guide: perhaps some of these girls with these lived experiences might find it difficult to
talk about their own strengths and be vulnerable with me, as their entire lives have been centered around overcoming adversity. I have always prided myself on being a strong and resilient person but speaking with some of these girls have shown me what it means to overcome obstacles in life.

**Friday April 19th.** At this point in the week I am exhausted. I had my final three interviews (2 adolescent girls and my first foster parent) booked back to back. The final day of interviews was the day that I really got to reflect on my own personal experiences in life and the experiences of my participants. This was the day that I really got to acknowledge my privilege as a researcher, a graduate student, or as a privileged human in general. Listening to the last interviews made me reflect on how much the WECAS Girls Program has truly had an impact on the lives of these participants. The WECAS Girls Program was created with so much love and passion and I am seeing the benefits as the participants speak about their experiences. Many of them expressed that the program offers them a safe space where they can “just be themselves” or “we can talk to each other because we all are having a hard time and we know what it’s like”. With the passing privilege that I have, I have never had to think of a space where I can just “be myself” and not hide that I am a foster child and have had extremely different lives than many of the kids I went to school with. I think this was one of the biggest “themes” I had to reflect on during this process, and one of the most surprising for me. Here I thought we were creating a space where these girls can just hang out with other girls, rather I created a space where these girls don’t have to feel like they are different than the other girls at school, or that they have to hide who they are. This is a space of understanding, encouragement, love, safety, and a sense of normalcy for these girls, a space where once
a month, they aren’t reminded that they are “different” for being in foster care, and they can just be an adolescent.

I truly thought the reason that I could relate to the girls was because I lacked a biological maternal figure in my life but was I ever wrong. My lived experiences are so different from theirs and although we both might be lacking a biological maternal figure, my upbringing and my personal experiences are very different. I am finding it difficult to conceptualize and am experiencing a sense of guilt. How could I ever assume that I had the same experiences as them growing up? Other than the one day a year on Mother’s Day that I feel “different”, these girls are living this *every single day.* Unlike some of the participants in the WECAS Girls Program, personal experiences growing up do not make it difficult for me to speak about my strengths and capabilities… that is a privilege on its own. I am able to use the love and encouragement that I received growing up to do this, whereas many of these girls find this very challenging after living through so many negative experiences. Knowing that the WECAS Girls Program is so much more than just a monthly program for these girls has given me a sense of gratitude, and what I believe to be a blessing for these girls.
APPENDIX F

Interview Guide

Thank you for agreeing to participate in this interview about the experiences of the adolescent females involved in the WECAS Girls’ Program.

I would like to record our interview with your permission. Recording interviews helps me make sure I have all the information that you shared with me and decreases the chance that I miss something important. You are able to tell me at any point to stop the recording.

Do you have any questions? You are also able to ask me questions and seek clarification at any point during the interview.

Interview Guide

Background questions:

1. How old are you?
2. Can you tell me how/when you got involved in this program?
3. Do you have any role models in your life? Tell me about them (probe – in the past, currently)
   - A role model is someone that you can look up to, and that inspires you to be the best version of yourself. A role model generally shows commitment to a project, organization, or activity, and shows compassion and acceptance towards others. A role model can also show you how to overcome obstacles or hard times in your life.
   - For me, one of my role models is Sara as she shows commitment to her school work, inspires me to achieve my goals, and is incredibly supportive. I admire her dedication to her friends, her health, and her career.

Questions based on a Strengths Perspective

1. How would you describe your experience with the WECAS Girls’ Program? What activities/parts have you liked? Are there parts you haven’t liked? [gives you background on further questions]

The following questions will be about your strengths. Strengths are personal characteristics (specific to you) that allow you to work towards a goal that you may have.

For me, some of my strengths are that I am an organized and committed person so that I can show up for the Girls Program on a monthly basis.

2. What personal strengths did you have when you first started the WECAS Girls’ Program that helped you in the program?
   (e.g.: communication with the program administrators, driving, making sure the girls know of the program – parents probe)
   (e.g.: showing up to the program regularly, participating in the activities, sharing what you have learned and experience in some areas).
3. Do you have any strengths that have been developed through your involvement with the WECAS girl’s program?  
a) Has anyone in the WECAS girls program helped you develop your strengths?  
b) How did that happen?  
c) Has there been any other resources in the WECAS Girls program that helped you build upon your strengths?  
d) Can you use any of your strengths to help others?

5. Have you been able to help others do well in/enjoy the program? Can you give me an example of when that happened?

6. Now that we have identified some of your strengths, have these strengths been useful anywhere else in your life? Can you tell me how?

**Organizational Characteristics**

*Behaviours are the way people act, a belief is something you believe in, and a value is something you think is important.*

1. What behaviours do you see within the WECAS girls program?  
2. What beliefs, and/or values do you see within the WECAS girls program?

*A support or support system can be a single person, a group of people, or something who provides you with assistance to help you in different areas of your life. This could be financially (with money), emotionally, academically (a teacher at school), friendship wise, or parental. For me to succeed in my everyday life and stay on track are weekly meetings with my advisor.*

3. What kinds of supports (e.g., social, technical) do you feel are available to you as a participant/parent in the WECAS girls program to help you/them succeed in the program? Out of the program?  
   a. You told me about your strengths earlier – now, what about the group strengths?  
      What strengths do you think that this program has? [what is good about the program?]  
4. Have the mentors/foster parents/participants/program administrators in this program impacted/changed you or shaped you in any way? Do you think you’ve impacted or shaped any of them by being part of this program? Can you provide a specific example?

**Practices of Hope**

*A goal is an idea of the future or desired result that a person or group of people envisions, plans, and commits to achieve.*

1. Did you have any goals when you started attending/supporting the WECAS Girls program?  
   a) If so, why were these goals important to you?  
   b) If so, have any of your goals been achieved as you’ve been attending this program?  
   c) What do you think are the goals of the organizers (i.e., the girls who run the program) of this program?
d) Now that you’ve been associated with the program for a while, what would you like to be the goal(s) for this program? Why would you suggest those goals?

Closing Statement

Thank you very much for taking the time to participate in this interview process. Is there anything that you want me to clarify or add? Once I type up the interview, I will share a draft of with you. That way, you will be able to review it and let me know if you agree with the conversation or if you would like to clarify, change, or add anything to your interview.
VITA AUCTORIS

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