

2017 Kentucky Family Impact Seminars

Briefing Report



Transitioning from Foster Care to Adulthood



 University of
Kentucky
*College of Agriculture,
Food and Environment*



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The annual Kentucky Family Impact Seminars is a project of the School of Human Environmental Sciences, the Kentucky Cooperative Extension Service and the College of Agriculture, Food and Environment at the University of Kentucky.

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Welcome



On behalf of the University of Kentucky School of Human Environmental Sciences, I would like to welcome you to the fourth annual Kentucky Family Impact Seminars. Our mission is to improve the quality of life for Kentucky citizens through academic programs, innovative research, and community engagement. We host the Kentucky Family Impact Seminars each year so we can present legislators with current and unbiased research on issues that affect children and families. Our hope is that this information will later be used to help make sound policy decisions and encourage policymakers to examine the impact policies will have on children and families.

This year's seminar focuses on evidence-based approaches to understanding the challenges faced by foster youth who are transitioning into adulthood. Compared to the general population, former foster care youth have poorer outcomes in areas that serve as indicators of well-being in the transition to adulthood such as education, mental health, substance abuse, criminal justice system involvement, employment, and economic self-sufficiency. This briefing report provides relevant, evidence-based information on policy that can support a more positive future for foster care youth.

In closing, the School of Human Environmental Sciences, in partnership with the Department of Family and Consumer Sciences Extension, would like to thank all our legislative supporters. Their endorsement of the Kentucky Family Impact Seminars is a testament to the importance of evidence-based policy decision-making. We look forward to working toward improving the quality of life for individuals and families through these seminars. It is my sincere hope that these seminars will serve as an educational tool that you can use in your work for Kentucky families and that you will continue to support our efforts by attending future seminars.

Thank you,

Ann Vail, Ph.D.

University of Kentucky

Chair, Kentucky Family Impact Seminars

Director, School of Human Environmental Sciences

Assistant Director, Family and Consumer Sciences Extension

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Purpose and Presenters

Transitioning from *Foster Care to Adulthood* is the topic of the fourth annual Kentucky Family Impact Seminar, hosted by the University of Kentucky. The Kentucky Family Impact Seminars provide objective, current, and solution-oriented family issues research to state legislators and their aides, governor's office staff, legislative service agency staff, and state agency officials. The research presented at the seminars is objective and nonpartisan and does not lobby for specific policy positions. Seminar participants discuss policy options and identify common ground where it exists. These seminars connect research with state policy and bring a family perspective to policymaking.

For audio recordings and PowerPoints of speaker presentations, please visit our website at hes.uky.edu/fis.

The fourth annual Kentucky Family Impact Seminar features the following speakers:

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Acknowledgments

The Coordinating Committee for the fourth annual Kentucky Family Impact Seminar acknowledges the support of the many individuals and organizations whose work made the seminar possible.

Leadership at the University of Kentucky:

Eli Capilouto	President
Nancy Cox	Dean, College of Agriculture, Food and Environment
Gary Palmer	Interim Associate Dean for Extension and Director, Cooperative Extension Service
Ann Vail	Chair, Kentucky Family Impact Seminars Director, School of Human Environmental Sciences Assistant Director, Family and Consumer Sciences Extension Interim Dean, College of Social Work
Drew Graham	Senior Assistant Dean and Director of Advancement, College of Agriculture, Food and Environment

Members of the School of Human Environmental Sciences:
Dr. Donna Smith, Jan Childers, Donna Hancock, and Rusty Manseau.

We would also like to gratefully acknowledge the
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School of Human Environmental Sciences
Kentucky Cooperative Extension Service
College of Agriculture, Food and Environment



The Family Impact Guide for Policymakers

Viewing Policies Through the Family Impact Lens

Most policymakers would not think of passing a bill without asking, "What's the economic impact?"

*This guide encourages policymakers to ask, "What is the impact of this policy on families?"
"Would involving families result in more effective and efficient policies?"*

When economic questions arise, economists are routinely consulted for data and forecasts. When family questions arise, policymakers can turn to family scientists for data and forecasts to make evidence-informed decisions. The Family Impact Seminars developed this guide to highlight the importance of family impact and to bring the family impact lens to policy decisions.

Why Family Impact Is Important to Policymakers

Families are the most humane and economical way known for raising the next generation. Families financially support their members and care for those who cannot always care for themselves—the elderly, frail, ill, and disabled. Yet families can be harmed by stressful conditions—the inability to find a job, afford health insurance, secure quality child care, and send their kids to good schools. Innovative policymakers use research evidence to invest in family policies and programs that work and to cut those that don't. Keeping the family foundation strong today pays off tomorrow. Families are a cornerstone for raising responsible children who become caring, committed contributors in a strong democracy and competent workers in a sound economy.¹

In polls, state legislative leaders endorsed families as a sure-fire vote winner.² With the exception of a two-week period, family-oriented words appeared every week Congress was in session for more than a decade; these mentions of *family* cut across gender and political party.³ The symbol of *family* appeals to common values that rise above politics and hold the potential to provide common ground. However, family considerations are not systematically addressed in the normal routines of policymaking.



How the Family Impact Lens Has Benefited Policy Decisions

- In one Midwestern state, using the family impact lens revealed differences in program eligibility depending upon marital status. For example, seniors were less likely to be eligible for the state's prescription drug program if they were married than if they were unmarried but living together.
- In a rigorous cost-benefit analysis of 571 criminal justice programs, those that were most cost-beneficial in reducing future crime were targeted at juveniles. Of these, the five most cost-beneficial rehabilitation programs and the single-most cost-beneficial prevention program were family-focused approaches.⁴
- For substance use prevention in youth, programs that changed family dynamics were found to be, on average, more than nine times as effective as programs that focused only on youth.⁵



How Policymakers Can Examine Family Impacts of Policy Decisions

Nearly all policy decisions have some effect on family life. Some decisions affect families directly (e.g., child support or long-term care), and some indirectly (e.g., corrections or jobs). The family impact discussion starters below can help policymakers figure out what those family impacts are and how family considerations can be taken into account, particularly as policies are being developed.

Family Impact Discussion Starters

How will the policy, program, or practice:

- support rather than substitute for family members' responsibilities to one another?
- reinforce family members' commitment to each other and to the stability of the family unit?
- recognize the power and persistence of family ties, and promote healthy couple, marital, and parental relationships?
- acknowledge and respect the diversity of family life (e.g., different cultural, ethnic, racial, and religious backgrounds; various geographic locations and socioeconomic statuses; families with members who have special needs; and families at different stages of the life cycle)?
- engage and work in partnership with families?

Ask for a Full Family Impact Analysis

Some issues warrant a full family impact analysis to more deeply examine the intended and unintended consequences of policies on family well-being. To conduct an analysis, use the expertise of (1) family scientists who understand families and (2) policy analysts who understand the specifics of the issue.

- Family scientists in your state can be found at <http://www.familyimpactseminars.org>
- Policy analysts can be found on your staff, in the legislature's nonpartisan service agencies, at university policy schools, etc.

Apply the Results

Viewing issues through the family impact lens rarely results in overwhelming support for or opposition to a policy or program. Instead, it can identify how specific family types and particular family functions are affected. These results raise considerations that policymakers can use to make policy decisions that strengthen the many contributions families make for the benefit of their members and the good of society.

Additional Resources

Several family impact tools and procedures are available on the website of the Family Impact Institute at <http://www.familyimpactseminars.org>.

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This guide was adapted with permission from Karen Bogenschneider, Family Policy Specialist, WU-Extension

QUESTIONS POLICYMAKERS CAN ASK TO BRING THE FAMILY IMPACT LENS TO POLICY DECISIONS:

- How are families affected by the issue?
- In what ways, if any, do families contribute to the issue?
- Would involving families result in more effective policies and programs?



Executive Summary

The transition to adulthood presents adolescents many possible life directions as their independence approaches.¹ Choices in areas of work and education will have great bearing on a young adult's ability to be self-sufficient and economically stable, two important markers of being a successful adult. For example, individuals with higher levels of education are more likely to have higher earnings and be employed full time, year-round, according to an estimate of work-life earnings over 40 years, based on data collected from 2006-2008 by the U.S. Census Bureau.² Making responsible choices during adolescence has a positive impact into adulthood.

Social scientists have noted many changes in the transition to adulthood today compared to the path taken by youth in the 1970s.^{3,4} For today's youth, reaching adulthood is longer, harder, and requires more family support. In the 70s, the typical 21-year-old got married, became a parent, completed or almost completed their education, and prepared to enter the workforce.¹ The trajectory of a 21-year-old today looks quite different—youth are delaying marriage and parenthood and changing jobs frequently to find personal fulfillment as well as a sustainable income. Changes in labor markets over the past 30 years, such as labor-saving technological advances and the failure of the minimum wage to outpace inflation, contribute to this extended transition to adulthood.⁴ New challenges in the labor market make it more difficult for young adults to gain financial independence, which may cause delays in other markers of adulthood, such as completion of education, marriage, home ownership, and parenthood.

As the transition to adulthood becomes longer, role of parents has also been extended and the amount of family support has risen compared to past decades.⁵ In a policy brief published by the National Poverty Center, researchers found that parents provide their children with approximately \$2,200 annually in material support (i.e., housing, food, educational expenses, cash, etc.) throughout the transition to adulthood. Those living away from home received an average of 367 hours

per year in parental assistance, the equivalent to nine weeks of full-time, 40-hour-per-week help. The data suggest that family support plays a crucial role in future self-sufficiency and economic stability as today's youth transition to adulthood.⁵

Given that the broader, general population of youth face greater challenges as they move into adulthood, it is not surprising that vulnerable youth, such as those who have been in foster care, are at a higher risk to have difficulty as they transition to adulthood. Youth in foster care are less likely to graduate from high school than their peers⁶ and are less likely to earn a college degree.⁷ Former foster youth are more likely to suffer from mental health problems and have higher rates of unemployment than those in the general population.⁸ Their experiences with maltreatment and reduced family support also contribute to the disadvantages they face as they approach adulthood.

During the 2017 Kentucky Family Impact Seminars, we will focus on foster youth in transition to adulthood. The seminars will include presentations by three national experts. Our first speaker, Justin Miller, Ph.D., Assistant Professor in the University of Kentucky College of Social Work, will provide an overview of foster youth who are transitioning to adulthood in Kentucky. He will discuss current state policies that support transitioning youth and suggest future directions that will provide foster care youth with the resources they need to gain independence. Following Dr. Miller's presentation, Alexander T. Vazsonyi, Ph.D., Professor in the University of Kentucky Department of Family Sciences, will present contextual information regarding normative transition to adulthood for typical adolescents. Dr. Vazsonyi will share research about developmental and social factors that are key to a successful transition to adulthood.

During the main presentation, Mark E. Courtney, Ph.D., Professor in the University of Chicago School of Social Service Administration, will present synthesized findings from a program of research he has conducted over the past 20 years on the transition to adulthood for

young Americans in state care. The research includes (1) the Midwest Evaluation of the Adult Functioning of Former Foster Youth, which followed 732 youth who were transitioning from care in three states, (2) the Multi-Site Evaluation of Foster Youth Programs, a series of experimental evaluations of independent living programs for youth in care, and (3) the ongoing California Youth Transitions to Adulthood Study (CalYOUTH), which is following 727 youth in California who are transitioning to adulthood from foster care. The presentation will summarize what is known about outcomes for former foster youth during the transition to adulthood in the U.S.; risk and protective factors that research shows are

associated with outcomes; subgroups of youth who are in need of distinct forms of assistance; and the evidence base for policy and practice innovation.

In this briefing report, two publications from Dr. Courtney's work are shared as supplemental information. The first article, *The Difficult Transition to Adulthood for Foster Youth in the U.S.: Implications for the State as Corporate Parent*,⁹ begins with an overview of the U.S. child welfare system. It covers federal legislation and policies that provide states with funding to support foster youth who are transitioning to adulthood. The report also summarizes research on the outcomes of youth who entered foster care in late adolescence or have exited care after reaching the age of majority in the transition to adulthood. Unfavorable findings in key areas that indicate well-being in the transition to adulthood illustrate the many struggles foster youth face after they are no longer a ward of the state. Those areas include education; physical and mental health; substance abuse; involvement with the criminal justice system; employment and economic self-sufficiency; housing and homelessness; family formation; and family relations. The article concludes by examining how U.S. policy on foster youth in transition has evolved over the last few decades. New directions for overcoming existing challenges in the child welfare system, as well as suggestions for policy improvements, are outlined for U.S. legislators and policymakers.

The second publication, *When Should the State Cease Parenting? Evidence From the Midwest Study*,¹⁰ examines the role and responsibilities of the state as a corporate parent to foster youth who reach the age of majority. Child welfare policy recognizes the challenges foster youth face in the transition to adulthood and efforts to extend federal support to age 21. However, most states relinquish responsibilities of foster care youth at age 18. The Midwest Study investigated foster youth experiences in the transition to adulthood from three states with different policies that allowed youth to remain in care past age 18. At the time of the study, youth from Illinois could remain in care until age 21, while youth





from Iowa and Wisconsin were discharged from care at age 18. Three waves of interviews were collected from foster youth between age 17 and 26 who lived in Illinois, Iowa, and Wisconsin. Results of the study showed positive outcomes for youth who stayed in care beyond age 18. Youth from Illinois were more likely to have a greater level of education than youth from Iowa and Wisconsin. The effects of an additional year of care on earnings, controlling for observed differences, was an estimated \$924 annually. Being in care at age 19 was associated with a 38% reduction in risk of pregnancy. Youth who extended care beyond age 18 were also more likely to report receipt of independent living services. The implications of these findings support the efforts of those who seek to amend Title IV-E of the Social Security Act to provide federal reimbursements to states for the care and supervision of foster youth until age 21.

The 2017 Kentucky Family Impact Seminars provide research-based information through a series of presentations by national experts who study vulnerable populations. Please keep in mind the seminars do not advocate for any position. Rather, the seminars are a resource and provide policymakers with valuable information on how specified issues impact families in the Commonwealth.

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Biographical Sketches

ALEXANDER T. VAZSONYI, PH.D.

Endowed Professor,
University of Kentucky,
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Dr. Vazsonyi research focuses on adolescent development; more specifically, it examines the etiology of child and adolescent adjustment (achievement, problem behaviors, health-compromising behaviors, violence, and deviance). He is interested in socialization processes, ranging from family contextual experiences to larger cultural processes in understanding variability in adolescent development and adjustment. Following this line of research, he has published over 120 peer reviewed publications, book chapters, conference proceedings, editorials, and technical reports. He serves as the editor of the Sage Major Work title Adolescence, a five volume series on adolescent development (see <http://fam-hes.ca.uky.edu/ADL> for more details about his work).



In addition to classroom teaching, Dr. Vazsonyi identifies mentoring both undergraduate and particularly graduate students as one of the most important and rewarding things he does. Over the past decade, he has chaired eight Ph.D. students, many of which hold postdocs or tenure-tracks positions at major universities as well as over a dozen M.S. students. At the UK, he currently works with a cadre of highly talented Ph.D. students from China, the Czech Republic, Georgia (The Republic), Slovakia, Trinidad and Tobago, and the United States.

JUSTIN “JAY” MILLER, PH.D.

Assistant Professor,
University of Kentucky,
College of Social Work

Dr. Justin “Jay” Miller is an assistant professor in the College of Social Work at the University of Kentucky. Jay is dedicated to social issues and community outreach, a passion that he brings to his work as an educator and scholar. His research and academic interests focus on child welfare, particularly

outcomes related to foster and kinship care. Jay is actively involved in a host of community endeavors and has served as the cofounder/past president of the Louisville Association of Social Workers, and the founder of the Jefferson County Foster Care Peer Support Program and the Kentucky Chapter of the Foster Care Alumni of America. Jay is a past recipient of the Cabinet for Health and Family Services’ Paul Grannis Award and is a 2014 inductee to the College of Health and Human Services Hall of Fame at Western Kentucky University. Jay was a Cohort Two Doris Duke Fellow (Doris Duke Foundation and Chapin Hall at the University of Chicago) and earned his Ph.D. at the University of Louisville. Last but not least, having spent time in foster care as a youth, Jay is a proud foster care alum.



MARK E. COURTNEY, PH.D.

Professor,
The University of Chicago,
School of Social Service Administration

Dr. Courtney is a professor at the University of Chicago School of Social Service Administration and an affiliated scholar at Chapin Hall at the University of Chicago. Dr. Courtney is a national expert on child welfare issues and policies. His current research includes studies of the adult functioning of former foster children, of experimental evaluation of independent living services for foster youth, of reunification of foster children with their families, and an evaluation of Solution Based Casework as a child welfare practice model.



Previously, Dr. Courtney held the Ballmer Chair in Child Well-Being at the University of Washington School of Social Work and served as executive director of Partners for Our Children. He also served as the executive director of Chapin Hall and as the McCormick Tribune Professor at the University of Chicago School of Social Service Administration. He has a master’s degree in management and planning, and a Ph.D. from the University of California, Berkeley, School of Social Welfare.



The Difficult Transition to Adulthood for Foster Youth in the US: Implications for the State as Corporate Parent

Presenter: Mark E. Courtney, Ph.D., School of Social Work, University of Washington

Date: February 21, 2017

BY MARK E. COURTNEY

Although they make up a relatively small proportion of all children in the U.S. foster care system, foster youth approaching adulthood have over the years attracted considerable attention from policymakers. Three times in the past 25 years the Social Security Act has been amended to try to better support the transition to adulthood for foster youth. The shift over time in federal policy reflects an evolving understanding of normative transitions to adulthood, growing knowledge of the particular challenges faced by foster youth in transition, and changing views of the state's role as corporate parent of foster youth and former foster youth. In this report, I briefly describe the U.S. child welfare system, summarize research on the transition to adulthood for foster youth, and place the findings of this research in the context of knowledge of normative transitions to adulthood, arguing that the outcomes observed for foster youth are cause for concern. I then describe the evolution of U.S. policy towards foster youth making the transition to adulthood using the concept of "corporate parenting." I conclude that recent policy developments provide an excellent opportunity to improve transition outcomes for foster youth, but that lingering challenges still exist and that policy and program development must be accompanied by strategic use of research and evaluation to maximize this opportunity.

Overview of the U.S. Child Welfare System

According to estimates from the federal Adoption and Foster Care Analysis and Reporting System (AFCARS), 510,000 children lived in out-of-home care in the U.S. on September 30, 2006 (U.S. Department of Health and Human Services 2008a). Three-fifths of these children were members of an ethnic or racial minority group, fifty-two percent were male, and their median age was 10.2 years. Almost half (46 percent) of these children lived with non-relative foster parents (traditional family foster care), 24 percent lived in relative or "kinship" foster care, 17 percent lived in group homes or other children's institutions,

three percent in a pre-adoptive home, five percent were living at home during a trial home visit, two percent had run away from care but were still the legal responsibility of the child welfare agency, and one percent were living in supervised independent living settings (e.g., an apartment that is supervised by the child welfare agency). Children in formal kinship foster care remain in the day-to-day care of their extended families, but the public child welfare agency has authority over these placements under the direction of the juvenile court.

State child welfare programs are operated under the legal framework provided by Titles IV-E and IV-B of the Social Security Act, with Title IV-E providing states with federal reimbursement for a significant part of the costs of foster care for children.¹ Juvenile and family courts supervise the care of children by state and local public child welfare agencies. Children enter foster care when a public child welfare agency, with the review and supervision of the court, determines that they should be removed from their home in order to protect them from abuse, neglect, and/or dependency. Child welfare agencies are required to make "reasonable efforts" to prevent placement of children in out-of-home care; these efforts generally consist of social services provided to the child's family. When the child welfare agency and court deem these efforts unsuccessful and the child enters foster care, the court must approve a "permanency plan" for the child according to provisions provided in federal law. The most common initial plan is for the child to return to the care of parents or other family members. In these cases the court generally requires the child welfare agency to make reasonable efforts to preserve the child's family of origin by providing services intended to help reunite the child with the family. Often, however, children and youth cannot return to the care of their families, leading the child welfare agency and the court to attempt to find another permanent home for the child through adoption or legal guardianship.

The vast majority of children in out-of-home care will exit

1. States are reimbursed for a portion of their foster care maintenance payments (i.e., payments to foster care providers) and allowable administrative costs of the foster care program.

care to what are considered “permanent” placements. For example, of the estimated 289,000 children who left out-of-home care in the U.S. during FY 2006, 86 percent went to live with family, were adopted, or were placed in the home of a legal guardian (U.S. Department of Health and Human Services 2008a). A few (2 percent) were transferred to another public agency such as a probation or mental health department and a few (2 percent) ran away and were discharged from care.

In spite of state efforts to find permanent homes for children and youth in foster care, some adolescents reach the point where they are “emancipated” to “independent living,” usually due to reaching the age of majority or upon graduation from high school.² This is often referred to as aging out of the foster care system. In practice, few states allow youth to remain in care much past their eighteenth birthday since until now states have only been reimbursed for foster care maintenance and administration costs for children and youth 18 years old and younger, and in some cases through age 19 if the youth is deemed likely to graduate from high school before reaching their 20th birthday (Bussey et al 2000). However, the Fostering Connections to Success and Increasing Adoptions Act (Public Law 110-351, hereafter referred to as the “Fostering Connections Act”), passed unanimously in both houses of Congress and signed into law by President Bush in October 2008, amends Title IV-E of the Social Security Act to encourage states, beginning in 2011, to allow youth to remain in care past age 18. I discuss the provisions of this new law and its implications at the conclusion of this report.

According to data provided by the states to the federal government, 26,517 youth exited care via discharge to independent living in 2006, though the data do not distinguish the youth who chose to do so when given the opportunity from those involuntarily discharged due to their age (U.S. Department of Health and Human Services 2008a). These statistics also do not accurately account for the number of young people who leave foster care without the permission of the child welfare agency and court as they approach the age of majority. Anecdotal evidence suggests that some youth who are categorized as runaways leave care for this reason, and some young people go to live with members of their family of origin

as they approach the age of majority and end up being counted as “reunified” with their family as opposed to having aged out of care.

An important aspect of U.S. child welfare policy is that when a child enters foster care the state--via the courts and child welfare agencies--takes on the role of surrogate parent. While this role is often short-lived, in many cases the state remains the parent for many years. Indeed, in some cases the state remains parent up to the point where young people begin to make the transition to adulthood. For the purposes of this discussion it is useful to consider the concept of “corporate parenting,” which British social welfare scholars and policymakers have come to use in describing the proper role of the state in providing out-of-home care (Bullock et al 2006; Parker, 1980). In broad terms, the principle is simple: As the corporate parent of children in out-of-home care, the public child welfare agency has a legal and moral duty to provide the kind of support that any good parent would provide for their own children. Of course, while governments cannot actually parent, when they assume custody of children they assume responsibility for finding and supporting adults who can carry out the parenting role. Importantly, the British corporate parenting concept also implies that all relevant public institutions (e.g., public welfare, education, public health), and not just the public child welfare system, have responsibility for the state’s children.

Before moving on, it is important to note that relatively few young people who make the transition to adulthood from foster care spent the bulk of their childhood in care. A study of the placement trajectories of youth in care on their sixteenth birthday found that most had entered care since their fifteenth birthday and only ten percent had entered care as preteens (i.e., twelve or younger) (Wulczyn and Brunner Hislop 2001). Nearly half (47 percent) of these youth were returned to their families at discharge from the child welfare system and more youth experienced “other” exits (21 percent, mainly transfers to other child serving systems such as the juvenile justice system) or ran away from care (19 percent) than were emancipated (12 percent). In short, most older youth in out-of-home care enter care during their adolescence and relatively few remain in care until they officially “age out.”

These facts raise important issues when one examines the young adult outcomes of older youth leaving the foster care system. These youth have generally spent many years in troubled homes prior to intervention by child protection authorities. Thus, the outcomes they experience during the

2. The terms “emancipation” and “discharge to independent living” are often used interchangeably by child welfare services practitioners and should not be interpreted as equivalent to “legally emancipated minor,” which is generally used to describe a person under age 18 who has been deemed legally independent of parental and court control.



transition to adulthood may largely be a function of the problems that they brought with them to the child welfare system rather than an effect of poor care while in the system. Moreover, because they generally spent many years living with their families before entering care, it should not be surprising to find that most youth making the transition to adulthood from foster care maintain strong connections with their families, complicating the corporate parenting role of the state.

Research on the Transition to Adulthood for Foster Youth

The research review below focuses primarily on studies with samples that had “aged out” of care or who had at least left care in late adolescence. I also sought studies that reported young adult outcomes (i.e., 18-24) as opposed to later adult outcomes, though a few of the retrospective studies included some subjects who were interviewed at an older age. Although some studies compared outcomes for former foster youth to matched samples or national norms, this was rare. Fortunately, McDonald et al (1996), in their review of research on the long-term consequences of foster care, used a variety of sources to compare reported outcomes from some studies to regional and national data sources for the appropriate period. In addition, the more recent studies by Courtney et al (2005; 2007) and Pecora et al (2005) also make some comparisons to broader populations.

Several limitations of this research literature deserve attention. First, most of the studies are quite dated; much of the available research may not accurately depict the characteristics of the population that is aging out of care today and the services and supports available to them. Second, many of the studies employ rather idiosyncratic samples that may not do a good job of describing the experiences of the general population of former foster youth. Third, most of the studies suffer from high rates of sample attrition.

The review provided here summarizes research findings concerning several domains of outcomes experienced by former foster youth during the transition to adulthood: education, physical and mental health, substance abuse, criminal justice system involvement, employment and economic self-sufficiency, housing and homelessness, family formation, and family relations.

These outcomes are important indicators of the well-being of foster youth making the transition to adulthood and problems in any one of these domains can make success in another less likely. The review provides sobering evidence of

just how difficult the transition to adulthood can be for former foster youth.

Education. Human capital is clearly important for success during the transition to adulthood, but studies of former foster youth find poor levels of educational attainment and that the population fairs poorly when compared to its peers. Most studies show them to be less likely to earn a high school diploma or their GED (Blome, 1997; Zimmerman 1982; Festinger 1983; Frost and Jurich 1983; Jones and Moses 1984; Barth 1990; Cook et al 1991; Courtney et al 2001; Courtney and Dworsky 2006; Pecora et al 2005). For example, Courtney and Dworsky (2006) found that roughly 58 percent of their sample of former foster youth had a high school degree at age 19 compared to 87 percent of a national comparison group. Not surprisingly, most studies find that former foster youth have low rates of college attendance (Zimmerman 1982; Jones and Moses 1984; Barth 1990; Cook et al 1991; Courtney et al 2001; Courtney and Dworsky 2006; Pecora et al 2005). For example, Pecora et al (2005) found that participation in post-secondary education and bachelor's degree completion rates among former foster youth was much lower than among the general population. Courtney and Dworsky (2006) found the young adults in their study to be much less likely than their age peers to be enrolled in post-secondary education of any kind.

Physical and Mental Health. Former foster youth suffer from more mental health problems than the general population (Robins 1966; Festinger 1983; Jones and Moses 1984; Courtney and Dworsky 2006; McMillen et al 2005; Pecora et al 2005). Support for this conclusion comes from data on their utilization of mental health services and research assessments of their mental health. Courtney and Dworsky (2006) found that 19 year olds making the transition to adulthood from foster care were over twice as likely as their peers to receive psychological or emotional counseling. Moreover, Pecora et al (2005) found that young adults who had been in out-of-home care as adolescents were twice as likely as the general population to have a current mental health problem.

Some research finds little difference between the physical health status of former foster youth and their peers, though this may be largely a function of a lack of attention to this outcome in research to date. Festinger (1983), Jones and Moses (1984), and Cook et al (1991) found no evidence of abnormal levels of physical health problems in the population they studied, while Zimmerman (1982) found that the young adults in her sample (19-29 years old at follow-up), all of whom had spent at least a year in foster care, were more likely to report their

health as ‘fair’ or ‘poor’ than the general population. Among the former foster youth studied by Courtney et al (2001), Caucasians reported poorer health on a standardized self-report health measure than the general population, whereas African Americans in the sample reported health that was comparable to their peers. Courtney and Dworsky (2005) found that the young adults in their sample tended to describe their overall health less favorably, were more likely to report that health conditions limited their ability to engage in moderate activity, and reported more emergency room visits and more hospitalizations during the previous 5 years than their peers. Studies have found young adults who have left foster care to have difficulty obtaining affordable medical coverage, leading them to report medical problems that are left untreated (Barth 1990; Courtney et al 2001; Courtney et al 2005).

Substance Abuse. Studies report mixed findings with respect to the use and abuse of alcohol and illicit drugs by former foster youth. One in eight (13 percent) of subjects in the Fanshel et al (1990) study of young adults (mean age of 24 at follow-up) that had been in private-agency foster care in one state reported extreme difficulty with drug abuse in their lives. In contrast to studies that suggest a high level of drug and alcohol use among former foster youth, the national study by Cook et al (1991) found that they used alcohol and other drugs at rates similar or lower than those found in national surveys of young adults. Pecora et al (2005) found that the young adults in their study reported drug dependence at a much higher rate than the general population, but alcohol dependence at a rate similar to their peers.

Involvement with the Criminal Justice System. Former foster youth have a higher rate of involvement with the criminal justice system than the general population (McCord et al 1960; Zimmerman 1982; Frost and Jurich 1983; Jones and Moses 1984; Fanshel et al 1990; Barth 1990; Courtney et al 2001; Courtney and Dworsky 2006). Zimmerman (1982) found 28 percent of her male subjects and six percent of her female subjects from New Orleans had been convicted of crimes and served at least six months in prison, a much higher rate than the general population. Forty-four percent of the subjects in the Fanshel et al (1990) study had been picked up by police on charges at one time or another. The young adults in the study by Courtney et al (2005) were more likely to have engaged in several forms of delinquent and violent behavior in the past year than their peers. Moreover, 54 percent of the males and 24.5 percent of the females reported being incarcerated at least once between interviews at ages 17-18 and 21 (Courtney et al 2007).

Employment and Economic Self-Sufficiency. Nearly all studies of former foster youth, and all of those done in the past two decades, suggest that they face a very difficult time achieving financial independence. For example, data from several studies show that former foster youth have a higher rate of dependency on public assistance than the general population (Pettiford 1981; Zimmerman 1982; Barth 1990; Jones and Moses 1984; Cook et al 1991; Courtney et al 2001; Courtney and Dworsky 2006; Pecora et al 2005). Former foster youth have a higher unemployment rate than the general population (Zimmerman 1982; Jones and Moses 1984; Cook et al 1991; Goerge et al 2002; Courtney and Dworsky 2006; Courtney et al 2007; Pecora et al 2005). They also have lower wages, which frequently leave them in poverty (Zimmerman 1982; Festinger 1983; Barth 1990; Cook et al 1991; Dworsky and Courtney 2000; George et al 2002; Pecora et al 2005). For example, relatively recent studies that used unemployment insurance claims data to examine the employment patterns and earnings of former foster youth found that their mean earnings were well below the federal poverty level for from two to five years after leaving out-of-home care (Dworsky and Courtney 2000; Goerge et al 2002; Macomber et al 2008).

Not surprisingly, many former foster youth experience financial trouble during the transition to independence. Young adults in the study by Courtney and Dworsky (2006) were twice as likely as the 19 year olds in a nationally-representative comparison group to report not having enough money to pay their rent or mortgage (12 percent), twice as likely to report being unable to pay a utility bill (12 percent), and 1.5 times as likely to report having their phone service disconnected (21 percent).

Housing and Homelessness. Former foster youth experience considerable housing instability (Jones and Moses 1984; Fanshel et al 1990; Courtney et al 2001; Courtney and Dworsky 2006; Pecora et al 2005). For example, 32 percent of the youth in the national study conducted by Cook et al (1991) had lived in six or more places in the 2.5 to four years since they had exited care. Courtney et al (2001) found that 22 percent of the youth in their sample had lived in four or more places within 12 to 18 months of exiting care. Former foster youth also experience high rates of homelessness (Susser et al 1987; Sosin et al 1988; Mangine et al 1990; Sosin et al 1990; Susser et al 1991; Cook et al 1991; Courtney et al 2001; Courtney and Dworsky 2006; Pecora et al 2005). More than one-fifth of the participants (22.2 percent) in the study by Pecora et al (2005) reported having been homeless at least once within one year of leaving foster care and 13.8



percent of the youths in the study by Courtney and Dworsky (2006) reported having been homeless at least one night since leaving care.

Family Formation. Research findings are mixed with respect to the likelihood that former foster youth will marry, cohabitate, or divorce. Meier (1965) and Cook (1992) found former foster youth were more likely to remain single than their peers. In contrast, Festinger (1983) found no difference between the marital status of her subjects and those of their peers in New York. Cook et al (1991) found the marriage rate of former foster youth to be similar to that of poor young adults, though much lower than that of all young adults in the comparable age range. Meier (1965) found a higher rate of marital separation and divorce among a sample of former Minnesota foster youth than that in the general population at that time, whereas Festinger (1983) found no difference. Courtney and Dworsky (2006) found the 19 year olds in their study to be much less likely than their peers to be married or cohabiting. Cook (1992) found the former foster children represented in the National Survey of Families and Households to express less marital satisfaction than those in the overall national sample, whereas Festinger (1983) found no difference in marital satisfaction between her sample and national norms.

Studies have found that former foster youth have higher rates of out-of-wedlock parenting than their peers (Meier 1965; Festinger 1983; Cook et al 1991; Courtney and Dworsky 2006). For example, 31 percent of mothers in Festinger's (1983) sample were raising children on their own and less than one-third of the parenting females in the study by Courtney et al (2001) were married. Several studies have also shown that former foster youth have children who struggle with health, education, and behavior problems (Zimmerman 1982) and who are involved in the child welfare system (Meier 1965; Jones and Moses 1984). Forty-six percent of the parents in Zimmerman's (1982) study reported that their children had some sort of health, education or behavioral problem. Nineteen percent of former foster youth in Jones and Moses' (1984) study reported that they had a child in out-of-home care. Courtney et al (2007) found that at age 21 the young men and women in their study were more than twice as likely than their age peers to have one or more children and much more likely to have non-resident children.

Family Relations. Research findings are strikingly consistent with respect to the considerable ongoing contact former foster youth have with their families of origin (Harari 1980; Zimmerman 1982; Festinger 1983; Frost and Jurich 1983; Jones and Moses 1984; Barth 1990; Cook et al 1991; Courtney et al

2001; Courtney et al 2005; Courtney et al 2007). Taken together the studies suggest that former foster youth are in contact with their mothers and to a somewhat lesser degree their fathers well into young adulthood. For example, at least monthly contact between former foster youth and their mothers ranged from one-third to one-half of respondents (Harari 1980; Zimmerman 1982; Festinger 1983; Courtney et al 2001; Courtney et al 2005) with the same studies finding monthly contact with fathers to range from one-quarter to one-third of respondents. Those with siblings also maintain contact with their siblings over time. Courtney et al (2001) found 88 percent of former foster youth with at least one sibling to have visited with a sibling at least once since discharge from out-of-home care.

This level of family contact suggests a possible source of natural support for former foster youth. Most former foster youth who maintain contact with their family of origin report good relations with their kin. Festinger (1982) found that a majority of her New York respondents who were in contact with their biological families felt "very close" or "somewhat close" to their kin. Courtney et al (2005), using the same survey questions as Festinger, found similarly high levels of expressed closeness between former foster youth and their mothers, siblings, and grandparents, but less favorable relations with their fathers. Studies also consistently show that a majority of former foster youth maintain ongoing contact with their former foster families, another potential source of support during the transition (Harari 1980; Festinger 1983; Jones and Moses 1984; Courtney et al 2001).

Family relations are strong enough for many former foster youth that they go to live with kin after they leave care. Cook et al (1991) found that 54 percent of their respondents had lived within the home of a relative at some point within 2.5 to four years after leaving care. More recently, Courtney et al (2005) found that the 19 year olds in their study who had been discharged from out-of-home care were more likely to be living with family than in any other living arrangement; 16.8 percent were living in the home of one or both of their biological parents and another 17.8 percent in the home of another relative. It should be noted, however, that these young people were still about half as likely as youth their age to be living with kin.

As might be expected, however, given the troubled histories of most of these families, ongoing family relations were not without their problems. For example, Courtney et al (2001) found that one-quarter of the young adults in their sample reported experiencing problems with their family most or all of the time. Barth (1990) found that 15 percent of his California

subjects felt that they had no “psychological parent” or person to turn to for advice. Samuels and Pryce (in press) report that while youth often express closeness with family, they also report ongoing difficulties managing family relationships, including parental dependence on the youth for emotional and material support. Thus, while the family of origin remains a source of support for many former foster youth during the transition to adulthood, the youth are still less likely than their peers to be able to rely on this support; and they also must often weigh the benefits of family contact against the risks.

In summary, research findings regarding outcomes for former foster youth during their transition to adulthood are sobering. They generally bring to the transition very limited human capital upon which to build economic security. They often suffer from mental health problems that can negatively affect other outcome domains, and they often do not receive treatment for these problems once they leave care. They often become involved in crime and with the justice and corrections systems after aging out of foster care. Their employment history is poor and few escape poverty during the transition. Many experience homelessness and housing instability after leaving care. Interestingly, in spite of court-ordered separation from their families, often for many years, most former foster youth rely on their families to some extent during the transition to adulthood, though this is not always without risk.

The Transition to Adulthood in the US: Implications for Child Welfare Policy

If the state as corporate parent ought to act in ways that are consistent with the ways “good” parents act towards their children, then public policy directed towards assisting foster youth making the transition to adulthood should take into account the kinds of support that young people generally can count on during this period of life. Demographers have drawn attention to the fact that traditional markers of the transition to adulthood, such as living apart from one’s parents, completion of education, family formation and financial independence, are all happening later in life than was the case for much of the 20th century (Settersten, Furstenberg, and Rumbaut 2005). Most young people today will not experience these transitions until their mid to late 20s and many not until their 30s. Along with these developments has been an extension of the period during which children are dependent upon their parents for significant care and support. For example, in 2001 approximately 63 percent of men between 18 and 24 years old and 51 percent

of women in that age range were living with one or both of their parents (U.S. Census Bureau 2001). Young adults in the U.S. also rely heavily on their parents for material assistance during the transition to adulthood with parents providing roughly \$38,000 for food, housing, education, or direct cash assistance from 18–34 (Schoeni and Ross 2004). Arnett (2004) coined the term “emerging adulthood” to describe a developmental period extending from the late teens through the twenties in which young people engage in self-focused exploration as they try out different possibilities in love and work, though he acknowledges that the most disadvantaged young people are often faced with challenges during the transition to adulthood that make this experimentation difficult if not impossible.

Given the extended transition to adulthood that is normative these days, U.S. social policy directed towards assisting foster youth in transition arguably should provide states with the ability to continue to serve as a corporate parent for foster youth well into their 20s in order to provide support during the transition period. The extant research, while limited, points to both the pitfalls of cutting off support at age 18 and the potential benefits of extended support. For example, research on foster youth transitions from care indicates that discontinuities in health insurance caused when youth age out of foster care contribute to decreases in health and mental health services utilization (Courtney et al 2005; Kushel et al 2008; McMillen and Raghavan, in press). Recent research comparing outcomes between young people allowed to remain under the care and supervision of child welfare authorities past age 18 and those that left care earlier provides some evidence that extending care results in improved outcomes in the areas of educational attainment, earnings, pregnancy, and receipt of transition services (Courtney, Dworsky, and Pollack 2007; Courtney et al 2005). Similarly, a study of alumni of a private child welfare agency that compared young adult outcomes between alumni that were adopted, exited care prior to age 19, or exited care after age 19, found that extending services past age 19 was associated with better self-sufficiency and personal well-being (Kerman, Barth, & Wildfire 2002). Despite the fact that young people in the U.S. generally can expect not to be abandoned by their parents at age 18 and the growing body of research on the potential benefits of extending foster care into early adulthood, states still routinely discharge youth from care at age 18. Moreover, as I point out below, services that states provide outside of foster care to help foster youth make a successful transition to adulthood are limited in important ways.



The Evolution of U.S. Policy Regarding the Transition to Adulthood for Foster Youth

In the 1980s, partly in response to research identifying poor outcomes for youth aging out of foster care, child welfare advocates began to push for dedicated funding to help foster youth prepare for adulthood. In 1985, the Independent Living Initiative (Public Law 99- 272) provided federal funds to states under Title IV of the Social Security Act to help foster youth prepare for independent living. Funding for the Independent Living Program (ILP) was reauthorized indefinitely in 1993 (Public Law 103-66). The ILP gave states great flexibility in terms of what kinds of services they could provide to Title IV-E eligible youth who were at least 16 and no more than 21 years old, including: outreach programs to attract eligible youth, training in daily living skills, education and employment assistance, counseling, case management, and transitional independent living plans. ILP funds could not, however, be used for room and board. The federal government required very little reporting from states about the ILP beyond creation of state ILP plans (U.S. GAO 1999). A study by the General Accounting Office found that about 60 percent of all eligible youth received some type of independent living service in 1998 (U.S. GAO 1999).

The Foster Care Independence Act (FCIA) of 1999 (Public Law 106-169) amended Title IV-E to give states more funding and greater flexibility in operating independent living programs. The FCIA doubled federal independent living services funding to \$140 million per year, allowed states to use up to 30 percent of these funds for room and board, enabled states to assist young adults 18-21 years old who have left foster care, and permitted states to extend Medicaid eligibility to former foster children up to age 21. An amendment to the law allows Congress to appropriate \$60 million per year for education and training vouchers of up to \$5,000 per year for youth up to 23 years old.

State performance is a much higher priority under the FCIA than under earlier iterations of federal policy in this area. The Department of Health and Human Services (HHS) is required to develop a set of outcome measures to assess state performance in managing independent living programs, and states will be required to collect data on these outcomes; HHS issued regulations to implement these provisions of the law in 2007. The data requirements include collecting information on transition outcomes from cohorts of foster youth in each state at age 17, 19 and 21. Over time this could potentially build a nationwide longitudinal database on the transition to

adulthood, at least through age 21, for foster youth in the U.S. In addition, the FCIA requires that 1.5 percent of funding under the statute be set aside for rigorous evaluations of promising independent living programs (i.e., using random- assignment evaluation designs whenever possible). The program created by the FCIA is named the Chafee Foster Care Independence Program (the "Chafee Program") after the late Senator John Chafee.

The Independent Living Initiative and Foster Care Independence Act exhibit characteristics that exemplify the philosophy guiding U.S. policy towards foster youth making the transition to adulthood for more than two decades. First, both the names of the laws and their provisions make clear that the primary purpose of federal policy is to render foster youth "independent" or, in other words, to end their dependence on the state. Both laws emphasize what might be called soft services intended to help young people become self-sufficient but prohibit or severely limit the kinds of concrete support for basic needs often provided by families for their adult children. The 1985 law did not allow states to use program funds for room and board, and the 1999 law's provision allowing states to use up to 30 percent of funds for room and board barely scratched the surface of the need for such support (Courtney & Hughes-Heuring 2005). Second, neither of these laws fundamentally altered the fact that U.S. policy, by ending funding for the foster care program at age 18, encourages states to abdicate their corporate parenting role when young people reach the age of majority. The Title IV-E entitlement to reimbursement of foster care maintenance and administration costs is by far the greatest source of federal funding for foster care. Thus, in the absence of IV-E reimbursement beyond age 18, only a handful of child welfare jurisdictions have extended foster care past 18. Once a young person has been discharged from foster care, the state no longer has any legal responsibility to provide the young person with help of any kind.

Given this lack of accountability, it is perhaps not surprising that significant gaps remain in the safety net for foster youth making the transition to adulthood. Youth aging out of foster care continue to receive relatively little in the way of transition services despite the available research suggesting that many have needs across all of the domains of functioning targeted by independent living programs. Prior to the increase in funding provided by the 1999 law, U.S. government estimates suggested that two-fifths of eligible foster youth did not receive any independent living services (U.S. GAO 1999). Although the situation appears to have improved somewhat in the wake of

increased federal funding, a GAO survey of state independent living coordinators found that large percentages of older youth—up to 90 percent in some states—still do not receive many of the services called for in the law (U.S. GAO 2004). Several years after the new funds became available Courtney et al (2004) asked 17-18 year old foster youth in three Midwestern states to report on whether they had received support services or training in the areas of educational support, employment/vocational support, budget and financial management, housing, and health education. Depending on service domain, between one-third and one-half of youth reported that they had not received any service in a given domain. The likelihood of service receipt declined significantly after age 18 for those young people who had left care (Courtney et al 2007).

That former foster youth often lose access to health insurance at 18 is particularly problematic given their relatively high need for services, particularly mental health services. Perhaps because so few of them retain responsibility for youth over age 18, most states have not taken up the option of extending Medicaid to former foster youth through age 21 (Patel & Roherty 2007). It appears that in states where the Medicaid extension does not exist most youth exiting foster care find themselves without health insurance (Courtney et al 2001; Courtney et al 2005). Recent research has shown a relationship between exiting foster care, loss of health insurance, and reductions in health and mental health services utilization (Courtney et al 2001; Courtney et al 2005; Kushel et al 2007; McMillen and Raghavan, in press). Fortunately, recent developments in federal child welfare policy lay the groundwork for significant improvement in the state's role as corporate parent for youth making the transition to adulthood from foster care. The Fostering Connections Act allows states, at their option, to provide care and support to youth in foster care until the age of 21 provided that the youth is either 1) completing high school or an equivalency program; 2) enrolled in post-secondary or vocational school; 3) participating in a program or activity designed to promote, or remove barriers to, employment; 4) employed for at least 80 hours per month; or 5) incapable of doing any of these activities due to a medical condition. The protections and requirements currently in place for younger children in foster care would continue to apply for youth ages 18-21. Youth ages 18-21 could be placed in a supervised setting in which they are living independently, as well as in a foster family home, kinship foster home, or group care facility. States could also extend adoption assistance and/or guardianship payments on behalf of youth through age 21

if the adoption or guardianship was arranged after the youth's 16th birthday. The Fostering Connections Act also requires child welfare agencies to help youth with the transition to adulthood by requiring, during the 90-day period immediately before a youth exits from care between ages 18 and 21, that the young person's caseworker, and other representatives as appropriate, helps the young person develop a personal transition plan. The plan must be as detailed as the youth chooses and include specific options on housing, health insurance, education, local opportunities for mentoring, continuing support services, workforce supports and employment services. The new law does not alter the Chafee Program, meaning that states can still use Chafee funds for a wide range of transition services.

I now turn to an examination of the opportunities presented by the Fostering Connections Act and limitations of U.S. policy that will need to be addressed if the new policy framework is to realize its full promise.

New Opportunities and Lingering Challenges

The Fostering Connections Act is a fundamental reform of U.S. child welfare policy directed towards the transition to adulthood for foster youth. First, it marks a philosophical shift towards acknowledging continuing state responsibility for corporate parenting of foster youth into early adulthood. Title IV-E is the policy and fiscal backbone of the U.S. foster care system, and providing IV-E support to age 21 represents a fundamental shift away from the idea that state responsibility for the well-being of foster youth ends at the age of majority. The title of the law suggests a move away from an exclusive focus on encouraging youth to be *independent* towards efforts to help youth make the *connections* they will need to be successful during the transition. The law's provisions clearly convey the idea that state supervised out-of-home care for young adults ought to differ in significant ways from care provided to minors. In order to claim IV-E funding for youth over 18, states will need to engage these young adults in activities that are developmentally appropriate (e.g., higher education and employment), and HHS is required to develop regulations that will allow states to create more developmentally-appropriate care settings for young adults (e.g., supervised independent living arrangements).

Second, in giving states entitlement funding for providing transition age youth with basic necessities and case management services, the law provides a foundation upon which states can better array a range of services and supports



for these youth. While many states at least on paper have policies that call for provision of independent living services through age 21 (e.g., state independent living plans), the poor economic circumstances of youth who leave care and resulting instability of their living arrangements arguably undermine efforts to engage these young people in services. This might explain why Courtney and colleagues (2007) found that foster youth in Illinois, which allows youth to remain in care to age 21, were much more likely than their peers in Iowa and Wisconsin, who were generally discharged at 18, to have received a variety of transition services between 19 and 21. The ability to use IV-E funds to stably house foster youth between 18 and 21 may allow states to better engage youth in Chafee Program-funded services. Giving state child welfare agencies IV-E funding to continue providing case management beyond age 18 may also help these agencies play the kind of coordinating role that is necessary to help young people navigate the various public institutions that should also be engaged in the corporate parenting role (i.e., postsecondary education; workforce development; health and mental health services; housing).

While the Fostering Connections Act creates a Federal policy framework that gives state child welfare agencies the tools to fundamentally change the way that the U.S. supports foster youth in transition to adulthood, several challenges remain in the way of significant progress. These challenges include the probability that many states will not take up the option of extending foster care past age 18, the poor knowledge base regarding the effectiveness of independent living and other transition services, the lack of established and well-evaluated models of coordination between child welfare agencies and other public institutions in providing support to foster youth, the complexities of maximizing “permanency” for foster youth in transition, and the fact that the law’s eligibility requirements still exclude high-risk populations that arguably should be served. Several lines of research will be needed along the way if states are to have the knowledge base to seriously address these challenges.

Continuing Ambivalence of States Towards Parenting Young Adults. Although the Fostering Connections Act gives states the option of using Title IV-E funds to provide care and supervision to young people to age 21, it is far from clear that many states will take up the option. Continuing concern in Congress that young people allowed to remain in foster care past 18 would simply remain “dependent” on the state and not engage in the kinds of activities needed to make a successful transition from care contributed to the provisions of the Fostering Connections

Act regarding requiring youths’ participation in such activities.³ Similar concern at the state level could block efforts to pass enabling state legislation. The slow rate at which states have taken up the option to extend Medicaid to former foster youth through age 21 should temper the optimism of advocates who might hope for quick action by states to extend their foster care programs to young people over 18.

Making the case at the state level for the benefits of extending care might be easier if there was stronger empirical evidence of the benefits of extended care to young people in terms of their well-being and the benefits to taxpayers of preventing outcomes that are costly to society (e.g., early or unwanted pregnancy; crime; dependence on other forms of government assistance). While there is some evidence to support extended care as a protective factor during the transition to adulthood for foster youth (Courtney, Dworsky, and Pollack 2007; Kerman, Barth, & Wildfire 2002), this evidence is far from definitive. Moreover, it remains unclear exactly what aspects of extended support are most important in helping foster youth to experience successful transitions.

Fortunately, the implementation of the National Youth in Transition Database (NYTD) provisions requiring states to track transition outcomes for foster youth between ages 17 and 21 can provide the kind of information infrastructure necessary to assess how between-state variation in state policy and service provision, including state policy concerning when youth are discharged from care, influence transition outcomes. The American Public Human Services Association and the Chapin Hall Center for Children at the University of Chicago have formed a partnership to engage states in planning for the NYTD. A major focus of this effort is to ensure that data elements will go beyond the outcomes called for in federal law (e.g., employment, education, pregnancy, homelessness, and risk behaviors) to include data on the kinds of services and supports provided to youth regardless of whether they are still in care. Policymakers at the state level may find it easier to support extending care past age 18 if analysis of between-state differences in outcomes for foster youth in transition continues to support existing research findings regarding the benefits of extending care.

3. For an example of the tone of the discussion in Congress about the provisions of the Fostering Connections Act regarding conditions required of youth to remain in care, see the comments by Representative Gerald Weller (R-IL) (Congressional Record, 2008). Initial versions of legislation introduced to extend IV-E funding through age 21 did not include detailed requirements regarding what youth needed to do to remain eligible for assistance.

Lack of Knowledge Regarding the Effectiveness of Services.

Another challenge to improving policy and practice directed towards foster youth transitions to adulthood is the poor knowledge base supporting existing interventions. Policymakers and practitioners want to know “what works” in helping foster youth successfully transition to adulthood, but sound empirical evidence is hard to come by. The field of youth services has developed in recent years general youth development principles, but remarkably little empirical evidence exists to support particular independent living and transition services. A review of evaluation research on the effectiveness of independent living services found no experimental evaluations of independent living programs (Montgomery et al 2006). While the authors of the study reviewed eight non-randomized controlled studies and found some evidence that some programs may have protective effects, they conclude that the weak methodological quality of the evidence tempers the validity of those findings. Recently, as part of the federally-funded program of evaluation research on independent living programs called for by the FCIA, HHS has released the findings of experimental evaluations of a life skills training program and a tutoring-mentoring program in Los Angeles County, California (US. DHHS 2008a; 2008b). While the evaluations provide important insight into the continuing challenges facing foster youth and a better sense of the services provided to them, neither of the interventions demonstrated an effect on any of the outcomes the programs were intended to improve.

Because of the paucity of studies that evaluate the effectiveness of independent living programs and the numerous methodological limitations of nearly all those that do exist, no definitive statement can be made about program effectiveness. Even less is known about the effectiveness of independent living programs with respect to specific populations. Only a focused and sustained program of rigorous evaluation research will remedy this situation. This research will need to involve experimental designs, larger samples than have been employed in the past, and better measurement of both the interventions and outcomes of interest. The program of evaluation research funded through the Chafee Program is a step in the right direction, but it will not be sufficient to move policy and practice forward on its own.

Poor Coordination of the Various “Arms” of the State. Poor integration and coordination of the efforts of the child welfare system with the efforts of other public institutions continues to limit the effectiveness of corporate parenting of foster youth in

transition to adulthood. To be sure, current and former foster youth are generally eligible for whatever services exist in a given community for young adults that face challenges making the transition to adulthood (e.g., vocational rehabilitation services for persons with disabilities). In fact, in recent years federal policy has evolved to make foster youth in transition a target population for federally- and state-funded educational, employment, and housing programs (Congressional Research Service 2008). Moreover, growing out of the 2003 White House Task Force Report on Disadvantaged Youth, the U.S. Departments of Education, Health and Human Services, Justice and Labor have committed to a collaborative approach at the national, state, and local levels through an initiative called Shared Youth Vision to develop innovative programs, enhance the quality of services delivered, improve efficiencies, and improve the outcomes for the youth served by these agencies. Foster youth and former foster youth are one target of these coordination efforts at the federal level and in the states participating in the initiative, though it is too soon to assess whether these efforts have been effective at improving services or youth outcomes.

While the relatively new focus in targeting federal programs towards foster youth and better coordinating the efforts of those programs is hopeful news, it remains to be seen if goodwill can overcome organizational dynamics to deliver good outcomes for youth. In many jurisdictions, child welfare agencies attempt to reinvent the wheel by providing services that are not within their primary realms of expertise. For example, many public agencies provide employment services for foster youth directly or through contracts instead of working with existing workforce development agencies that have experienced job developers and trainers and longstanding relationships with local employers. Similarly, the influx of Chafee Program funding for transitional housing has led some public child welfare agencies to attempt to develop new housing programs on their own or with traditional residential care providers, instead of working with existing providers of services to runaway and homeless youth; historically few child welfare agencies had funding for transitional housing, leaving runaway and homeless youth service providers to pioneer the creation of transitional housing programs serving foster youth.

The desire by child welfare agencies to go it alone may be at least partly a recognition that other public institutions are not always eager to assist the child welfare system in corporate parenting of the children of the state. For example, in an age of increased public accountability for achieving improvement in



measurable outcomes related to their core missions, providers of educational and employment supports may be reluctant to engage foster youth given the many challenges they often bring with them; if one is engaged in “creaming” of an eligible population, foster youth may not rise to the top.

At any rate, ensuring that foster youth have the range of services and supports at their disposal to maximize their potential for success will require more coordination and integration of services than currently takes place and evaluation research directed towards identifying the most promising approaches to corporate parenting. State child welfare agencies that are able to provide ongoing case management past age 18 as a result of state legislative action to implement the Fostering Connection Act may be in an enhanced position to facilitate such coordination.

Making sense of “permanency” for foster youth in transition. In recent years policymakers and child advocates have called for greater efforts to ensure “permanency” for youth aging out of foster care, arguing that too often the foster care system allows young people to age out of care with no connection to a permanent family (Frey, Greenblatt, & Brown, 2007). The success of these advocacy efforts can be seen in the provisions of the Fostering Connections Act extending adoption and guardianship subsidies from 18 to 21, which reflect the concern that failing to do so would undermine the permanency of these family relationships. Advocates have also called for programmatic efforts to create and support foster youths’ relationships with nonrelated adults, drawing upon research evidence regarding the importance of permanent supportive relationships and connections to an adult for the long- and short-term wellbeing of young people generally (Beam, Chen, & Greenberger 2002), as well as research showing positive associations between informal mentoring relationships and adult outcomes for former foster youth (Ahrens et al 2008).

While the interest in creating interventions to foster the development of lasting connections between foster youth and unrelated adults is understandable, it should be done with caution for at least two reasons.

First, it is one thing to observe an association between positive youth-adult relationships and positive outcomes for youth, but quite another to go about creating such relationships through social service programs. Scholarship on youth mentoring gives reason for caution in developing mentoring programs for vulnerable youth (Spencer 2006). Moreover, these young people have generally experienced multiple failed relationships with adults who were supposed to care

for them, including their parents and adults in failed foster care placements; the last thing they need is yet another failed relationship with an adult. Research is sorely needed on how natural mentoring relationships are formed and maintained by foster youth, and emerging programs intended to create new supportive relationships for foster youth should be rigorously evaluated.

Second, recent research suggests that most foster youth making the transition to adulthood from foster care feel close to and are in regular contact with one or more members of their family of origin (Courtney et al 2005; Courtney et al 2007), though, not surprisingly, many of those relationships pose serious challenges for the young people (Courtney et al 2001; Samuels 2008; Samuels & Pryce in press). Unfortunately, the child welfare field continues to fail to take full account of the enduring relationships that the vast majority of foster youth maintain with their families. As states take up the option to continue to care for foster youth as young adults, it will be increasingly important for policymakers and practitioners to acknowledge that in most cases the state is actually co-parenting these young people. Research is needed to help child welfare authorities understand how to do this well.

Too Narrowly Defining the Population Needing Corporate Parenting. Perhaps the most important limitation of current policy, and the provisions of the new Fostering Connections Act, is the target population.

As noted above few youth actually age out of the child welfare system, yet this population remains the primary focus of federal law. By including youth that exit foster care after their 16th birthday to adoption or legal guardianship in the population eligible for continuing assistance, the Fostering Connections Act significantly expands the population that is likely to receive help from the child welfare system in making the transition to adulthood. However, a large number of young people who remain in state care late into adolescence but who exit prior to the age of majority are still left out.

Many foster youth, even those who have been in out-of-home care for some time, are discharged from care to a member of their family of origin. This group dwarfs in size the group that ages out of care (Wulczyn & Brunner Hislop 2001). Child welfare services providers seldom reach out to these youth, even those that received independent living services while they were in care, both because they are generally not funded by government to do so and because they assume that the task of helping these young people manage the transition to adulthood has passed back to the family. Yet, at some

point, generally not too far in the distant past, society forcibly separated these same families from their children. Moreover, research suggests that many of these familial relationships are tenuous at best and that many of these youth will find themselves in need of another place to live and other adults to rely on for advice before long (Cook et al 1991; Courtney et al 2001).

What of the children who run away from out-of-home care in the year or so before reaching the age of majority (Courtney et al 2005; Finkelstein et al 2004)? These youth may be the most at-risk of poor adult outcomes, and there are more of them than there are youth who age out of care. This group can be very difficult to engage in services, yet, as media reports point out, too often child welfare agencies make little or no effort to reconnect with these youth when they leave out-of-home care (Anderson 2002; Kresnak 2002).

The next round of federal child welfare reform legislation and state policy reform efforts should seriously consider the wisdom of excluding from ongoing support young people who return home to their families shortly before the age of majority and those who exit from care to runaway status. Moreover, federal rulemaking in implementing the Foster Connections Act should consider the conditions under which young people who choose to exit care after age 18 may reenter care at a later date. Since it is quite normal for young people to try to go it alone as young adults only to need to return to the nest for some period if things get rough, policy should not constrain child welfare authorities from making provision for similar opportunities for foster youth in transition. One way to address the current arbitrariness of eligibility policy regarding the transition to adulthood for foster youth would be to make any young person who spent some minimum amount of time in state care after the age of 16 eligible to return to care through age 21.

The past two decades have seen the rapid evolution of U.S. social policy directed towards supporting the transition to adulthood for youth in state care. From a policy framework that did not acknowledge youths' transitions from care at all, to one that emphasized preparing foster youth to be completely independent at the age of majority, the U.S. is now poised to make a major commitment to corporate parenting of the children of the state into early adulthood. While this latest shift makes sense in terms of what average parents do for their children these days and the limited track record of states taking on this role provides grounds for optimism, it is likely that the next several years will see the rapid development of a wide range of state and local strategies for carrying out this

new task of government. Policy and program development should actively involve the young adults who will be most affected by these experiments in state parenting. In addition, the government agencies and philanthropic entities involved in generating new ideas would be well advised to invest in the kinds of research and evaluation along the way that will be necessary for the new policy regime to be successful.

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When Should the State Cease Parenting? Evidence from the Midwest Study

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When children are removed from their homes due to parental abuse or neglect and placed in out-of-home care, the state public child welfare agency, under the supervision of the juvenile court, takes on the role of parent.¹ While a child is in out-of-home care the public agency is responsible for day-to-day care and supervision. This state responsibility continues until the child is returned home, placed with another family through adoption or guardianship, runs away from care and cannot be found, or moves to another care system through institutionalization (i.e., incarceration or psychiatric hospitalization). If youth in out-of-home care do not leave care by any of these routes, they eventually reach the age at which the public agency is allowed, under state law, to “emancipate” them to independent living, regardless of the wishes of the youth. This means that the state ceases to bear any legal parental responsibility for the youth’s care and supervision. Thus, although a public child welfare agency may voluntarily decide to provide independent living services to young adults who have been discharged from care, it is not obligated to do so and cannot be compelled to do so by the juvenile court. Put simply, when youth “age out” of the child welfare system in the U.S., the state ceases to be their parent.

For most young people, the transition to adulthood is a gradual process (Arnett 2000; Settersten, Furstenberg, & Rumbaut, 2005). Many continue to receive financial and emotional support from their parents or other family members well past age 18. Approximately 55 percent of young men and 46 percent of young women between 18 and 24 years old were living at home with one or both of their parents in 2003 (Fields, 2003). Recent estimates also suggest that parents provide their young adult children with material assistance totaling

approximately \$38,000 between the ages of 18 and 34 (Schoeni & Ross, 2004).

This is in stark contrast to the situation confronting youth in foster care (Courtney & Hughes Heuring 2005). In all but a few jurisdictions, states relinquish their parental responsibilities when youth reach age 18 (Bussiere, Pokempner & Troia, 2005), and the federal government will no longer reimburse them for the costs of providing foster care. Too old for the child welfare system, but often unprepared to live as independent young adults, the approximately 24,000 foster youth who “age out” of care each year (U.S. Department of Health and Human Services, 2006) are expected to make it on their own long before the vast majority of their peers.

Federal child welfare policy has not ignored the challenges facing foster youth making the transition to adulthood. The federal government has recognized the need to help support these youth since the 1986 amendment to Title IV-E of the Social Security Act created the Independent Living Program, which provided states with funds specifically intended to prepare their foster youth for independent living. Federal support for foster youth making the transition to adulthood was enhanced in 1999 with the creation of the John Chafee Foster Care Independence Program (CFCIP), which doubled available funding to \$140 million per year, expanded the age range of youth deemed eligible for services, allowed states to use funds for a broader range of purposes (e.g., room and board), and gave states the option of extending Medicaid coverage for youth who age out of care until age 21. Vouchers for postsecondary education and training have also been added to the range of federally funded supports and services now potentially available to foster youth and former foster youth making the transition to adulthood. However, CFCIP is not an entitlement and states are not obligated to provide the CFCIP-funded services to individual youth.

In recent years, child welfare practitioners and policymakers have begun to question the wisdom of a federal policy that ends reimbursement to states for foster care at age 18. Reflecting continuing interest by policymakers in improving prospects for foster youth making the transition to adulthood,

1. Federal law allows states to administer child welfare services directly or to supervise the county administration of such services, but in either case the state agency is ultimately responsible for the care and supervision of children in out-of-home care.

in May 2007, U.S. Senator Barbara Boxer (D-CA) introduced S. 1512, which would amend Title IV-E of the Social Security Act and extend federal reimbursement for foster care until age 21. Other federal legislation that would help states better meet the needs of transitioning foster youth is also in the works.

Unfortunately, little solid empirical evidence exists regarding the potential impacts of such a major policy change. This issue brief summarizes relevant findings from the Midwest Evaluation of the Adult Functioning of Former Foster Youth (Midwest Study). We find strong evidence that allowing foster youth to remain in care past age 18 promotes the pursuit of higher education, and more qualified evidence that extending care may increase earnings and delay pregnancy. We also find that youth who remain in care are more likely to receive the kinds of services that policymakers intended states to provide when they created CFCIP. Taken together, these findings provide support for current efforts to extend Title IV-E reimbursement for foster care until age 21.

The Midwest Study

The Midwest Study is a collaborative effort among the public child welfare agencies in Illinois, Iowa, and Wisconsin, Chapin Hall Center for Children at the University of Chicago, the University of Wisconsin Survey Center (UWSC), and Partners for Our Children (POC) at the University of Washington, Seattle. Chapin Hall Center for Children has had primary responsibility for overseeing the project, constructing the survey instruments, analyzing the data, and preparing reports for the participating states. UWSC was contracted to conduct the in-person interviews. The Principal Investigator for the study, Mark E. Courtney, is currently Executive Director of POC and a Faculty Associate of Chapin Hall.

The Midwest Study is following the progress of foster youth in the three participating states who had entered care prior to their sixteenth birthday, who had been in out-of-home care for at least one year at the time of their baseline interview, and whose primary reason for placement was abuse and/or neglect.² Baseline interviews were conducted with 732 of the 758 foster youth identified as eligible for the study, including 63 from Iowa, 474 from Illinois, and 195 from Wisconsin, between

May 2002 and March 2003. That translates into a response rate of almost 97 percent. All of the youth were 17 or 18 years old when they were interviewed.

Eighty-two percent ($n = 603$) of the 732 study participants were re-interviewed between March and December 2004. This wave 2 sample included 386 young adults from Illinois, 54 from Iowa, and 163 from Wisconsin, and nearly all of these young adults ($n = 575$) were 19 years old. A third wave of survey data was collected between March 2006 and January 2007. Eighty-one percent ($n = 591$) of the 732 study participants were re-interviewed over the course of those 11 months, including 364 from Illinois, 50 from Iowa, and 176 from Wisconsin. Nearly all these young adults were 21 years old at the time of that interview. Eighty-seven percent ($n = 513$) had been interviewed at age 19; the other 13 percent ($n = 78$) were last interviewed when the baseline data were collected.

The Midwest Study examines the experiences of these foster youth during the transition to adulthood across a variety of domains, including living arrangements, relationships with family of origin, social support, receipt of independent living services, education, employment, economic well-being, receipt of government benefits, physical and mental wellbeing, health and mental health service utilization, sexual behaviors, pregnancy, marriage and cohabitation, parenting, and criminal justice system involvement.

The three states involved in the Midwest Study have very different policies with respect to allowing foster youth to remain in care past age 18. Foster youth in Iowa and Wisconsin are generally discharged from care at age 18 and almost never after their nineteenth birthday, whereas foster youth in Illinois can remain in care until age 21. Contrary to some anecdotal reports that only a minority of foster youth would choose to remain in care past age 18 if given the opportunity, more than two-thirds of the Midwest Study's Illinois sample were still in care after their twentieth birthday, and more than half did not leave care until age 21.³ This was true despite the fact that as adults, these young people could have left care at any time once they had turned 18 years old. In fact, the Illinois youth were, on average, more than 2 years older when they exited the child welfare system than their peers in Wisconsin and Iowa (see Table 1).

2. For a more detailed description of the baseline study sample and methodology, see Courtney & Dworsky (2006).

3. At the time this study was conducted, Iowa youth could remain in care past their nineteenth birthday if the child welfare agency and juvenile court determine that this would allow them to graduate from high school. In practice, very few Iowa youth remain in care past 18. Of the sixty-three Iowa youth in the Midwest Study, only seven were still in care at age 19.



Table 1

Age at Exit from Foster Care by State

	Total <i>N</i> = 732		Wisconsin <i>n</i> = 195		Illinois <i>n</i> = 474		Iowa <i>n</i> = 63	
Age at exit	#	%	#	%	#	%	#	%
17	91	12.4	58	29.7	19	4.0	14	22.2
18	248	33.9	137	70.3	69	14.6	42	66.7
19	65	8.9			58	12.2	7	11.1
20	73	10.0			73	15.4		
21	255	34.8			255	53.8		
Mean	19.2		17.8		20.0		17.9	
Median	19.0		18.0		21.0		18.0	

Challenges in Estimating the Effects of Extending Care for Foster Youth in Transition

This difference in policy between Illinois on the one hand, and Iowa and Wisconsin on the other, provides an opportunity to examine the potential effects of amending Title IV-E to extend federal reimbursement for foster care past 18. However, establishing a definitive relationship between extended care and youth outcomes is difficult for at least two reasons. First, although youth aging out of foster care in Illinois tend to be older when they leave the child welfare system than their peers in the other two Midwest Study states, any observed differences in adult outcomes may be due, at least in part, to preexisting differences between foster youth in Iowa and Wisconsin and those in Illinois. We know, for example, that a much higher percentage of the foster youth in Illinois are African American and that, all else being equal, being African American is associated with poorer employment outcomes and higher rates of criminal justice system involvement during early adulthood (Bureau of Labor Statistics, 2007; Child Trends Data Bank, 2007; Rosich, 2007). Ideally, our examination of adult outcomes would take these between-state differences into account.

Second, any relationship we observe between remaining in care past age 18 and later outcomes could be due to differences between youth who remain in care and those who do not. In other words, remaining in care is not likely to be a completely random event, and any apparent advantage (or disadvantage) associated with doing so may reflect the fact that the youth who remained in care were also more likely to experience favorable (or unfavorable) outcomes. The findings reported below are based on analyses that attempt to account for both sources of

potential bias in estimating the impact of extending care for foster youth making the transition to adulthood.

Higher Education

Previous research suggests foster youth approach the transition to adulthood with significant educational deficits (Blome, 1997; Courtney et al., 2001; McMillan & Tucker, 1999). Our data suggest that these deficits continue into the early adult years. Nearly one-quarter of the young adults in the Midwest Study had not obtained a high school diploma or a GED by age 21 (Courtney, Dworsky, Cusick, Havlicek, Perez, & Keller, 2007).⁴ In fact, these young adults were more than twice as likely not to have a high school diploma or GED as their peers. Conversely, only 30 percent of the young adults in the Midwest Study had completed any college compared with 53 percent of 21-year-olds nationally.⁵

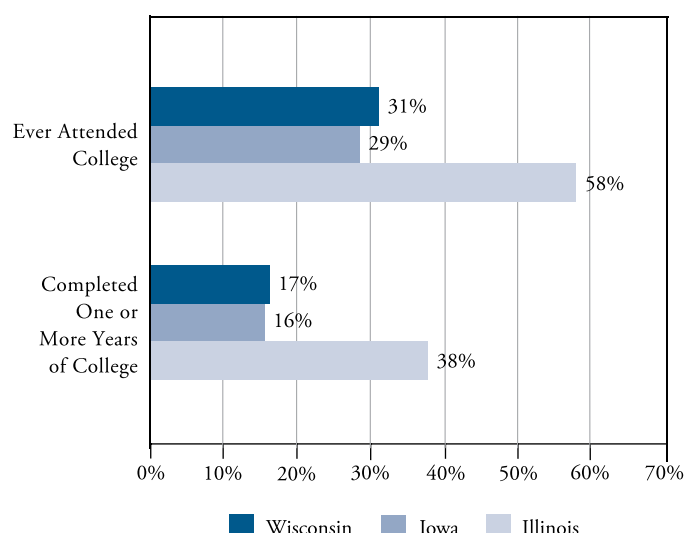
Earlier analyses of data from the Midwest Study found strong associations between foster care status at 19 and educational attainment (Courtney & Dworsky, 2006). Specifically, the 19-year-olds who were still in care (all but two of whom were from Illinois) were more than twice as likely to be enrolled in a school or training program as those who had been discharged (67% versus 31%). They were also more than three times as likely to be enrolled in a two- or four-year college (37% versus 12%).

To test whether the apparent advantages of remaining in care continue through age 21, we compared college enrollment and educational attainment across the three states. Figure 1 shows the percentage of 21-year-olds from each state who had (1) ever been enrolled in college and (2) had completed at least one year of college. The young adults from Illinois were 1.9 times more likely to have ever attended college and 2.2 times

4. Unless otherwise noted, all of the descriptive findings about the Midwest Study participants at age 21 can be found in Courtney, Dworsky, Cusick, Havlicek, Perez, & Keller, 2007.

5. Unless otherwise noted, national figures are based on an analysis of data from the third wave of the Longitudinal Study of Adolescent Health (Add Health), a federally funded study that was designed to examine how social contexts (families, friends, peers, schools, neighborhoods, and communities) influence the health-related behaviors of adolescents (Harris et al., 2003). In-home interviews were completed with a nationally representative sample of students in grades 7 through 12 in 1994 and then again, with these same adolescents, in 1996. Study participants were interviewed a third time in 2001 and 2002, when they were 18 to 26 years old. Our comparison group includes the 744 young adults in the Add Health core sample who were 21 years old.

Figure 1
College Enrollment and Educational Attainment
by Age 21



more likely to have completed at least one year of college than their peers in Iowa and Wisconsin.

We also conducted multivariate statistical analyses of both higher education outcomes, using models that controlled for the baseline characteristics of the young adults.⁶ These analyses also show strong between-state effects. After controlling for observed differences in baseline characteristics, the estimated odds of ever having attended college were approximately four times higher for the Illinois young adults than for the young adults from Iowa and Wisconsin. Similarly, the estimated odds of completing at least one year of college were approximately 3.5 times higher for the young adults from Illinois than for the young adults from the other two states. These findings cannot be attributed to state differences in the overall likelihood of college enrollment among young adults because college enrollment varies little across the three Midwest Study states

(National Center for Public Policy and Higher Education, 2006).⁷ Moreover, the relationship between state and pursuit of higher education seems to reflect the fact that the young adults from Illinois were able to remain in care. For example, 37.5 percent of Illinois young adults who were still in care at age 19 were currently enrolled in college compared to just 8.5 percent of the Illinois young adults who had already left care.

Earnings

Prior research has found that former foster youth are less likely to be employed than young adults in the general population (Zimmerman, 1982; Jones & Moses, 1984; Cook et al., 1991; Goerge et al., 2002). In addition, their wages tend to be low even if they are employed, which means that former foster youth often live in poverty (Zimmerman, 1982; Festinger, 1983; Barth, 1990; Cook et al., 1991; Dworsky, 2005; Goerge et al., 2002). Consistent with these findings, data from the Midwest Study provide a sobering view of labor market outcomes among foster youth making the transition to adulthood. Just over half of the 21-year-olds in the Midwest Study were currently working, compared with nearly two-thirds of 21-year-olds nationally. Moreover, although more than three-quarters of the young adults in the Midwest Study reported having any income from employment during the year before their interview at age 21, their earnings were very low. Median earnings over the past year among those who had been employed were just \$5,450.

Estimating the potential effect of extending foster care on earnings is complicated for two reasons. First, employment rates for young adults vary fairly significantly across states (Bureau of Labor Statistics, 2004), which might bias our estimates.⁸ Second, to the extent that there is a tradeoff between pursuing higher education and being employed, we might expect a lower rate of labor force participation among the Illinois young adults. Consistent with this hypothesis, the young adults who were still in care at age 19, nearly all of whom were from Illinois, were less likely to be working than those who were no longer in care (Courtney & Dworsky, 2006).

6. Our analyses controlled for gender, race/ethnicity, age at most recent entry into care, number of prior placements, ever ran away from care, ever placed in group care setting, ever placed in relative care, maltreatment history, any mental health diagnosis, any alcohol or other drug diagnosis, ever retained in school, very close to at least one adult family member, very close to current caregiver, any biological children, any prior work experience, aspirations to graduate from college, urbanicity of county with jurisdiction over foster care placement, score on Wide Range Achievement test of reading, and standardized delinquency score.

7. The percentage of young adults (ages 18–24) enrolled in college in 2006 was the same for all three Midwest Study states—35 percent (National Center for Public Policy and Higher Education, 2006).

8. For example, the percentage of 20- to 24-year-olds in the civilian noninstitutionalized population who were employed in 2004 was 65.8 percent for Illinois, 75.2 percent for Iowa and 79.4 percent for Wisconsin (Bureau of Labor Statistics, 2004).



Thus, rather than examining between-state differences in earnings, we estimated the effect of each additional year of remaining in care after the baseline interview on self-reported earnings during the 12 months prior to the interviews at age 21. First, we estimated a multiple regression model that predicted earnings in the year prior to the wave three interviews, controlling for the baseline characteristics of the young adults.⁹ We found that each additional year of care after the baseline interview was associated with a \$470 increase in annual earnings (see Table 2).

Although our statistical model controlled for characteristics of the young adults measured at baseline—including many of the factors that are likely to affect later earnings, e.g., work history, educational attainment, mental health problems, and criminal behavior—there may have been unmeasured differences among study participants who exited at different ages, for which we did not control. If these unmeasured differences are associated both with the likelihood of remaining in care and with earnings in the year prior to the age-21 interview, the results of our multiple regression analysis could potentially be biased.

To minimize this potential bias, we estimated an instrumental variable model that controlled both for observed and unobserved differences (Woodridge, 2001).¹⁰ Each additional year of care was associated with an estimated increase of \$924 in annual earnings (see Table 2). Once again, this suggests that, at least with respect to earnings, remaining in care may have a positive effect.

Pregnancy

Despite declining overall pregnancy rates among adolescents, teenage pregnancy and childbearing remain significant problems (Alan Guttmacher Institute, 2006), particularly among youth in foster care. Although the exact rates of teenage pregnancy and childbearing among this population are not known, there is some evidence that female

Table 2

Earnings for the Year Prior to the Interview at Age 21

Mean for total sample ($n = 556$)	\$6,894
Mean for total sample with earnings ($n = 427$)	\$8,977
Effect of remaining in care for an additional year on earnings without controlling for unobserved differences	\$470
Effect of remaining in care for an additional year on earnings controlling for unobserved differences	\$924

foster youth, including those who age out of care, are at higher risk than other teens and young adults of becoming pregnant and giving birth (Gotbaum, 2005; Pecora et al., 2003; Singer, 2006). Consistent with these findings, one-third of the young women in the Midwest Study reported that they had been pregnant prior to their baseline interview at age 17 or 18, and nearly half reported having been pregnant by their interview at age 19. By comparison, the National Campaign to End Teen Pregnancy estimates that approximately 31 percent of teenage girls in the general population become pregnant at least once before their twentieth birthday (Hoffman, 2006).

Because of the considerable costs associated with teenage parenthood, for both young women and their children, delaying pregnancy among female foster youth making the transition to adulthood is a worthwhile goal for child welfare policy and practice (Hoffman, 2006; Maynard, 1997; Maynard & Hoffman, forthcoming). Thus, we wanted to examine whether allowing young women to remain in care might reduce their risk of pregnancy. To do this, we estimated Cox-proportional hazard models predicting the timing of the first self-reported pregnancy between their baseline interviews at age 17–18 and the interviews at ages 19 and 21 (Cox, 1972). These statistical models allowed us to measure the relationship between being in state supervised out-of-home care and becoming pregnant, controlling for prior pregnancy as well as other baseline characteristics of the young women in our study.¹¹

9. Our analyses controlled for gender, race/ethnicity, age at most recent entry into care, number of prior placements, ever ran away from care, current placement type, maltreatment history, any mental health diagnosis, any alcohol or other drug diagnosis, ever retained in school, any children, any prior work experience, aspirations to graduate from college, urbanicity of county with jurisdiction over foster care placement, placed under the jurisdiction of Cook County, score on Wide Range Achievement Test of reading, and standardized delinquency score.

10. Because state was not correlated with earnings in the year prior to the age-21 interviews, but was strongly correlated with the age until which youth remained in care, we used state as an instrumental variable in our models.

11. Our analyses controlled for gender, race/ethnicity, age at most recent entry into care, number of prior placements, ever ran away from care, ever placed in group care setting, ever placed in relative care, maltreatment history, any mental health diagnosis, any alcohol or other drug diagnosis, ever retained in school, very close to at least one adult family member, very close to current caregiver, and prior pregnancy.

We found that being in care was associated with a 38 percent reduction in the risk of becoming pregnant between the baseline interview and the interview at age 19. After age 19, there was still a reduction in the risk of pregnancy, but it was not statistically significant. In other words, our analyses suggest that remaining in care delays pregnancy among female foster youth during late adolescence. However, this protective effect may diminish as they move into early adulthood. Not surprisingly, the risk of becoming pregnant over the course of the study was significantly higher among the young women who had been pregnant before their baseline interview. However, care status (i.e., still in care or discharged) was a significant predictor even after controlling for prior pregnancy.¹²

Receipt of Independent Living Services

CFCIP allocates funds that states can use to support the provision of independent living services to current as well as former foster youth through their twenty-first birthday. Young adults in the Midwest Study were asked about independent living services they might have received prior to their baseline interview (at wave 1) and since the last interview (at waves 2 and 3). The forty-eight distinct services about which the young adults were asked covered six domains, including education (8 services), vocational training or employment (12 services), budgeting and financial management (7 services), health education (9 services), housing (9 services), and youth development (3 services). We took advantage of the variation in policy across the three states in our study to examine whether allowing foster youth to remain in care past age 18 was associated with a higher rate of independent living services receipt.

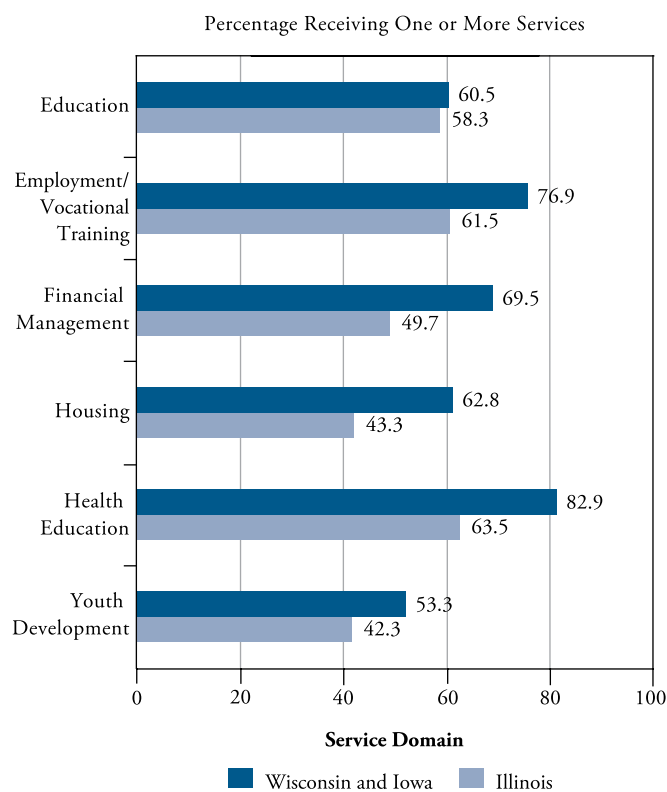
Figures 2, 3, and 4 illustrate an interesting pattern of cross-state differences in the receipt of independent living services over time. Prior to baseline, Illinois youth were less likely than their peers in the other two states to have received services in every domain except education (see Figure 2). By age 19, these differences had disappeared. Young adults from Illinois were as likely as their peers to have received services, regardless of domain, since their baseline interview (see Figure 3). And at age 21, they were more likely to report receiving services since their last interview in four of the six domains (see Figure 4). Given that the Illinois young adults were less likely than their peers in the

other two states to have received services *prior to their interview at 17 or 18*, these findings suggest a strong positive relationship between remaining in care past age 18 and independent living services receipt.

Limitations

Although our analyses suggest that allowing youth to remain in foster care past age 18 may have beneficial effects, they should be considered in the context of the Midwest Study's limitations. First, the Midwest Study involves only three states. It is possible that foster youth making the transition to adulthood in Wisconsin, Iowa, and Illinois differ from those making that transition in other states and those differences are related to the outcomes we examined. This has implications for the generalizability of our results. Moreover, Iowa and Wisconsin are just two of many states where youth are typically discharged from foster care on or shortly after their eighteenth birthday, and there is at least some anecdotal evidence that the

Figure 2
Receipt of Independent Living Services Prior to Baseline



12. Few, if any, of the other predictors in our models were statistically significant.



services and supports foster youth receive during the transition to adulthood vary widely across states. This between-state variation might contribute to differences in their outcomes. Similarly, Illinois provides but one example of how states might care for and supervise their foster youth until age 21. Outcomes might be different in states that use another approach.

Second, the strength of the evidence we present varies across outcomes. Our analysis of educational outcomes provides the strongest evidence of the potential benefit of extending care. It is difficult to make a convincing argument that the between-state differences we observed in educational outcomes are entirely a function of selection bias (i.e., that young adults who are likely to attend college are the ones who choose to stay), largely because remaining in care well past age 18 is simply not a rare event among foster youth in Illinois. Fewer than 1 percent of our Iowa and Wisconsin study participants were still in care when they were interviewed at age

19 compared with 72 percent of their Illinois counterparts.

Our analyses of earnings and delayed pregnancy also support the notion that foster youth would benefit from extending care until age 21, but that evidence is more qualified. In both cases we assume that our models controlled for other factors that are associated with both remaining in care and our outcomes.

Third, we are only able to observe our Midwest Study participants through age 21, but some benefits of extending care may not become apparent until later in adulthood. Conversely, benefits that we find at age 21 may wane over time. Only longer observation of the life trajectories of the young people in the Midwest Study will allow us to determine whether there are longer-term benefits.

Finally, our analyses focused on only three outcomes of potential concern. Although we are also examining the relationship between care status and other transition outcomes

Figure 3
Receipt of Independent Living Services between Baseline Interview and Age 19

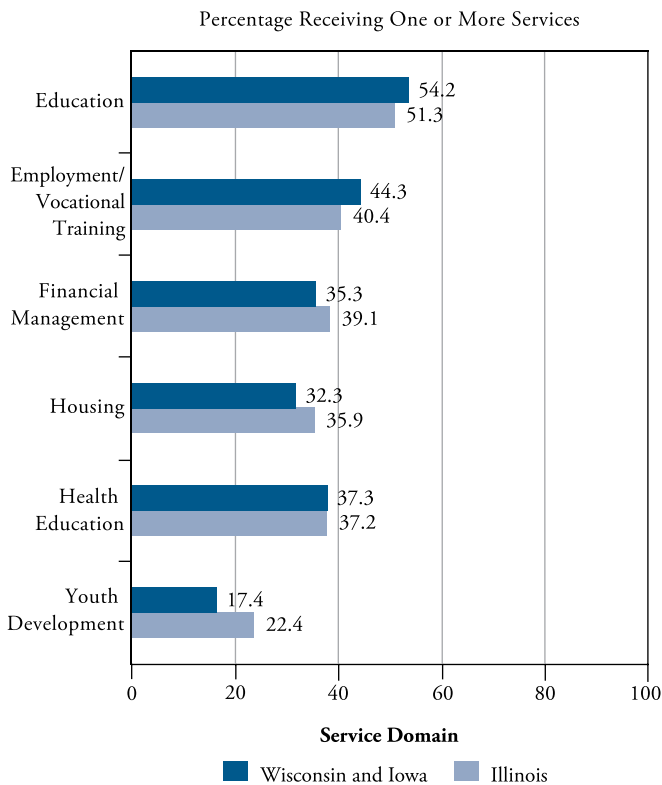
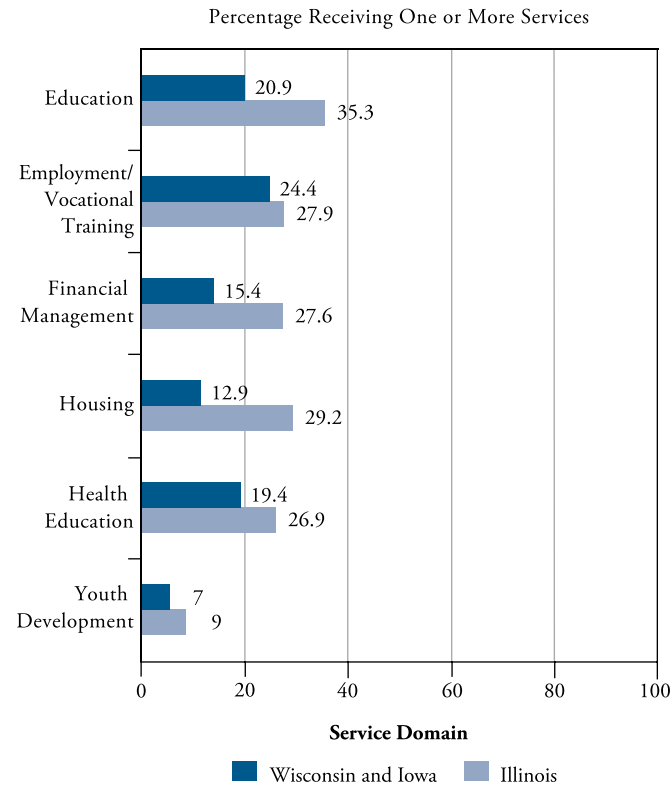


Figure 4
Receipt of Independent Living Services between Ages 19 and 21



(e.g., crime, risk behaviors, parenting, mental health, economic hardships), those analyses are not yet far enough along for us to be comfortable introducing them into policy discourse.

Implications for Child Welfare Policy

Under current federal law, states are entitled to reimbursement for the care and supervision of foster youth through age 18. If states wish to continue their parental role beyond 18 years old, they must do so largely with state and local funds. Moreover, the 30 percent of CFCIP funds that can be used for room and board after age 18 represents only a small fraction of what states would need to care for and supervise all of the young people who would likely choose to remain in care if given the opportunity (Courtney & Hughes-Heuring 2005). Although there is no way to know how many states would extend foster care until age 21 if Title IV-E were amended, it seems reasonable to assume that few will do so in the absence of a such a change in federal law.

Our findings provide support for the efforts of those who are seeking to amend Title IV-E of the Social Security Act to provide federal reimbursement to states for the care and supervision of foster youth until age 21. In Illinois, where remaining in care until age 21 is already an option, foster youth are more likely to pursue higher education. This policy also seems to be associated with higher earnings and delayed pregnancy. Moreover, despite the fact that Illinois foster youth were less likely to have received independent living services than their peers in Iowa and Wisconsin before age 18, they were more likely to have received them between ages 19 and 21. This is an age group that federal law specifically targets for of independent living services, and young people who receive services during those transition years may be more likely to acquire and put to use independent living skills.

Finally, legislation has already been introduced that would amend Title IV-E to reimburse states for the costs of extending foster care until age 21. Such legislation raises questions about how else Title IV-E might need to be amended if the unique needs of young adults in care are to be met. For example, should the juvenile court remain involved in supervising the care of young adults as it is currently required to do for wards who are under age 18, and if so, what role should it play? Do the types of care for which states are currently eligible for Title IV-E reimbursement (i.e., foster family care, kinship foster care, and group care) need to be expanded so that young adults can be placed in the most appropriate settings? Should states be

held accountable for helping foster youth achieve particular outcomes as they make the transition to adulthood? The good news here is that the 1999 legislation that established the CFCIP called for states to track a range of foster youth outcomes through age 21. Once the federal government implements that aspect of the law, an important accountability mechanism will finally be in place.

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The fourth annual Kentucky Family Impact Seminar

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Additional Resources

For additional information regarding the transition into adulthood for foster youth as well as other vulnerable populations, a list of selected articles are provided.

Please contact Nelda Moore at nmoore@uky.edu for more details about how to access to these articles.

Courtney, M. E., & Dworsky, A. (2006). Early outcomes for young adults transitioning from out-of-home care in the USA. *Child & Family Social Work, 11*(3), 209-219.

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