

**A BASSC POLICY MONOGRAPH**

**LEAVING FOSTER CARE  
IN SOLANO COUNTY:**

**How is the County Helping Youth Transition to Adulthood?**

**Sonja Lenz-Rashid, PhD, LCSW  
Assistant Professor  
School of Social Work  
San Francisco State University  
San Francisco, CA 94132**

**Research Assistants**

**Tuere Anderson, LCSW  
Ugquanda Sylvester, BASW**

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## **EMANCIPATING FROM FOSTER CARE IN SOLANO COUNTY:**

### **What Programs and Services are Available for Youth and How Effective Are These Services?**

#### **EXECUTIVE SUMMARY**

This Monograph describes the process of developing and pilot testing a county-to-county technical assistance project to improve services for emancipating foster youth in Solano County, California. Solano County Health and Social Services staff were aware that the county was not providing substantive services for transitional-aged foster youth and therefore volunteered to have an independent researcher examine its policies, services and funding. The project includes an assessment of the county's service needs related to emancipating youth and the formation of a team of expert peers from other Bay Area counties to help Solano County improve its policies and services for this population.

The monograph is divided into the following five sections:

- A literature review of recent outcomes of youth aging out of foster care;
- An examination of Solano County youth in foster care and services for these young people;
- Identification of current gaps in services and recommendations based on interviews with services providers and focus groups with former foster youth;
- A description of the Solano County Peer Team Project; and
- A plan for Solano County to make changes with services and policy

#### Major Research Findings

The major research findings (2000-2007) relate to the outcomes of older adolescents in foster care who have left care since the passage of the 1999 Foster Care Independence Act (known as the Chafee Act). Outcomes are for housing/homelessness, employment, achievement of financial self-sufficiency, receipt of public assistance, educational attainment, incarceration, mental health, substance use, and pregnancy.

All studies examined in this monograph explored the outcomes for former foster youth between the ages of 18 and 24. A significant conclusion is that youth aging out of foster care continue to struggle to survive independently and do not do as well as young people in the general population. Former foster youth still lack employment experiences and educational attainment, and therefore still have to cope with homelessness, hunger, incarceration and receipt of public assistance.

### *California Demographics*

- There are 19,329 youth in out-of-home placements between the ages of 16 and 20 (Needell et al., 2007)
- There are approximately 4,323 youth aging out of the foster care system every year
- In 2006 approximately 850 aged out of care from the eleven San Francisco Bay Area counties (Alameda, Contra Costa, Marin, Monterey, Napa, San Francisco, San Mateo, Santa Clara, Santa Cruz, Solano and Sonoma).

### *California Outcomes*

In terms of outcomes for youth in foster care in California, there has been only one seminal study examining 10,228 youth who emancipated foster care between 1992 and 1997. The study, conducted by Needell, Cuccaro-Alamin, Brookhart, Jackman and Shlonsky (2002), found that these youth experienced many difficult outcomes. Approximately 65% entered the foster care system between ages 11 and 19 and 54% had five or more placements. The following outcomes are from the Needell et al., (2002) study:

- About 1/4 received TANF/AFDC within six years of leaving the foster care system
- 1/10 received Medi-Cal for a disability within six years after leaving care
- Low rates of high school graduation/proficiency, community college attendance, and graduation from 4-year colleges
- High rates of mental health services prior to emancipation (mood disorder was most common)
- 4% entered the California State Prison System within 7 years after leaving care
- Birth records showed that 2/3 of the females had at least one birth within five years after leaving care, and 1/5 gave birth within one year after leaving care

Goerge, Bilaver, Lee, Needell, Brookhart & Jackman (2002) also conducted an outcome study of 2824 youth who aged out of the foster care system in California.

- 1/4 of these youth reported no income from employment 13 months after leaving care (yet 1/2 had employment earnings prior to their 18<sup>th</sup> birthday). Of those youth who found employment, their mean earnings were \$6235 per year

## Service Interventions: What is being done in Solano County?

Solano County Health and Social Services has made some significant changes to its staff serving current and former foster youth. In 2007 the county hired a new supervisor in its Permanency Planning Unit who has considerable experience serving transitional-aged youth. Additionally, that same year the county began established a new coordinator position to oversee its housing and independent living skills program services. The following illustrate the various practice interventions implemented by the county.

### *Housing*

The county currently has housing for youth ages 18 to 24 years, but will be adding housing support for younger foster care youth in the future.

There are currently two housing program models in the county which are scattered-site apartments and communal transitional living programs. These models are described below:

- The county has contracted with its first Transitional Housing Placement-Plus (THP-Plus) program provider for former foster youth ages 18 to 24. The county wrote its Request for Proposal (RFP) to specifically call for providers who could not only provide housing, but other supportive services as well. The THP-Plus program has been launched in the summer of 2007 and is transitional living, with the option of becoming permanent housing, for youth in scattered-site apartments. The contract also calls for a host family model of housing, which will be phased in during the first fiscal year. The contractor is First Place for Youth, an agency that currently offers housing for former foster youth in Alameda, Contra Costa, and San Francisco counties.
- There are three Transitional Living Programs for youth ages 18 to 21 in Solano County. All are run through community-based organizations and are funded through a variety of sources, but not through THP-Plus funding. These programs are: Children in Need of Hugs, The House of Joy, and the L.A.S.T. Transition House.

### *Employment Training*

Employment training in the county is mainly provided through the Workforce Investment Board Youth Program and the community-based organization that holds the Independent Living Skills Program (ILSP) contract. A new contractor, Alternative Family Services, has been awarded the most recent ILSP contract in the county and will begin offering services in September 2007.

### *Mental Health*

Mental health services for former foster youth under the age of 21 are primarily funded through State of California EPSDT monies. Some community-based organizations, such

as Youth and Family Services offer outpatient mental health services to current and former foster youth as they emancipate from the foster care system. However, there are no residential treatment programs specifically for transitional youth in Solano County.

### *Other Programs*

In FY 2006-2007 the county introduced the “Youth Action Committee” which is focused on overseeing Transitional-Aged Youth (TAY) services. This committee was developed and launched with a grant from the Stuart Foundation and will be continuing its oversight work in the future.

Foster a Dream is an agency serving former foster youth and is based in Solano County. The agency provides programs and resources that build the hopes, dreams and futures of Bay Area foster children and has a goal to be a guiding source for their successful transition into the adult world (taken from the agency website). The agency offers a variety of programs including a Technology Camp, educational scholarships, holiday events for youth, and pillows/blankets for youth to keep as they move placements.

## **Service Delivery Plan – Solano County**

### ***Service 1: Improve Transition Planning***

Youth and services providers reported that transition planning begins too late and does not always involve the youth. Transition planning should begin for each youth at age 14 or 15. Foster or kin parents, group home staff, and youth probation officers should be trained on all aspects of transitioning to adulthood. Current youth are now attending an bi-annual Emancipation Conference beginning at age 15 ½ with all providers and social workers involved in the youth’s life. Solano County Health and Social Services should develop and disseminate an Emancipation Binder to every youth aging out of care like the one now available in Contra Costa County.

### ***Service 2: Transitional Housing for 16 to 19 year olds***

Solano County currently has no Transitional Housing Placement Program (THPP) for 16 to 19 years olds and should become a THPP-eligible county with the state. The county should work with youth and young adult transitional living and group home providers to see if they are interested in becoming a THPP program.

### ***Service 3: Housing for 18 to 24 year olds***

In July 2007 Solano County county launched its first Transitional Housing Placement-Plus Program (THP-Plus) for former foster youth 18 to 24 year olds. The county had not previously applied for THP-Plus funds with the state because up until 2006 there was a 60% match required by counties and Solano County did not have the funds for the county match. The first model of housing is scattered-site apartments whereby youth will reside in shared apartments. The current THP-Plus housing provider will offer housing services under the host-home model during the first fiscal year of the contract. In the future Solano County should also utilize state THP-Plus

funding to offer congregate care models to meet the variety of needs of former foster youth.

***Service 4: Independent Living Skills Program (ILSP) and Employment Training***

There was a lack of participation in ILSP and community-based employment training, especially for youth in foster care with mental health issues, geographic concerns, or behavioral issues. In August 2007 a new ILSP service provider will take over the ILSP contract with the county. This provider will offer ILSP services in two different sites in the county, Fairfield and Vallejo. It was also found that the Solano County Workforce Investment Board's (WIB) youth and adult program staff did not always do outreach with, or serve, current and former foster youth. An examination of the referral process between the county and WIB is necessary. Also, an examination of developmentally-appropriate curriculum should be conducted.

Solano County Health and Social Services should explore a hybrid model of services whereby foster parents and group home staff are trained in a standardized ILSP and employment training curricula (that is developmentally appropriate), especially for disconnected youth who may not ever access community employment training programs or ILSP employment training. Incentives could be provided to caregivers for training youth through Chafee ILSP program funding. Lastly, employment and ILSP training curricula should be empirically tested with each provider site in Solano County.

***Service 6: Mental Health and Substance Abuse***

An emphasis should be placed on fully utilizing EPSDT monies and evaluating how funding is spent in the county. Solano County should evaluate its Transitional Youth Mental Health Team to examine its effectiveness and ensure a smooth transition for these youth from the foster care system, and perhaps into the adult mental health system. Proposition 63 monies will be utilized for housing for transitional youth leaving foster care for housing and other supportive services, such as mental health and substance use residential treatment. The Solano County Mental Health program has recently posted a Request for Proposals for a mental health housing provider to contract with the county to develop residential treatment for transitional-aged youth who might not do well in an adult setting.

***Service 7: Health Education***

Currently there is no standardized Health Education curriculum included in ILSP services for Solano County. Some community-based organizations that serve current and former foster youth offer Health Education, but not all. Health Education (e.g. safe sex decision making, pregnancy, HIV/ sexually transmitted infections, and survival sex) should be included in the ILSP curriculum and foster, kin, and group home providers should be trained in all areas of Health Education.

***Service 8: Educate Foster Youth about Their Rights and Privileges***

There is a lack of clear understanding about the rights and privileges of former foster youth among the youth and those who serve them (i.e. county child welfare and

community-based organizations). Solano County should educate child welfare and probation staff, housing, ILSP, and other supportive service programs about the rights foster youth have upon emancipation, along with the various “extras” some youth can receive (i.e Emancipated Youth Stipends, funding for education, transportation passes, laptops, emergency housing money, etc).

# **EMANCIPATING FROM FOSTER CARE IN SOLANO COUNTY**

## **INTRODUCTION**

On September 30, 2005 there were 513,000 children and youth in foster care in the United States (U.S. DHHS, 2007). There were about 104,710 older youth in placement between the ages of 16 and 20 and 31,938 of those young people had the case goal of emancipation (U.S. DHHS, 2007). In 2005 approximately 9% (24,407) of the older youth in care emancipated from foster care that year. These young people often leave the foster care system at the age of majority, when they become legally emancipated (Needell et al., 2002), or leave when they achieve their high school diploma or proficiency.

In the last decade, research has focused on how youth emancipating from foster care have fared after leaving the foster care system (see Courtney et al., 2004; Cook, 1994; Courtney, Piliavin, Krogan-Gaylor, and Newsmith, 2001). Although formal independent living services exist to help youth formerly in out-of-home care move into adulthood, these youth are largely on their own when making the transition (Courtney & Hughes, 2005). Unfortunately, most outcomes for former foster youth have been bleak (e.g. high unemployment, low educational achievement, homelessness, incarceration, high rates of public assistance, etc.). There has also been additional research related to outcomes of older foster care youth who access Independent Living Skills Program (ILSP) services in their counties of origin (see Lindsey and Ahmed, 1999; McMillen et al., 1997; Scannapieco and Shagrin, 1995; Waldinger and Furman, 1994). Research studies on ILSP outcomes have been mixed. Even though research suggests that youth who age out of foster care often report that they received some preparation for adulthood, many indicate the preparation they received was uneven and that they did not feel prepared for life on their own after exiting care (Courtney et al., 2005).

### **Purpose and Goals of this study**

In 2006 a study was completed examining services for youth aging out of foster care in the San Francisco Bay Area (see Lenz-Rashid, 2006). Following this study, Solano County Health and Social Services staff chose to more thoroughly examine its services for youth aging out of foster care, as it knew that it lacked some much needed services. This was the first time a project has been implemented in the San Francisco Bay Area whereby a county, Solano County, has agreed to have an independent research study examine its services for youth aging out of foster care.

Solano County invited other local county child welfare, community-based organizations, and individuals from foundations and policy organizations to inform the county's child welfare administrators on how they can improve services for these young people. There were two methods of data collection for this study: qualitative interviews and focus groups. Qualitative interviews were conducted with key constituents serving youth aging out of the foster care system in Solano and surrounding counties, and focus groups were also held with youth who had emancipated from foster care in Solano County.

Findings from this study will provide county social service directors, child welfare administrators, philanthropic organizations, non-profit service providers, and policy makers with important information about the services needed for older youth in foster care, and how a county-to-county peer team project can be used to improve such services.

## **LITERATURE REVIEW**

Unfortunately, many young people that exit the foster care system as adolescents ultimately receive services as adults either through the criminal justice system, the welfare system, or as residents of homeless shelters (Casey Family Programs, 2000). Their lack of self-sufficiency may be traced to limited life skills, education, employment, and social skills. The following sections describe the most recent empirical research addressing the outcomes of youth aging out of out-of-home care.

It is important to note that there are limitations to the following literature review section. First, the empirical literature related to this population of youth often does not take a strengths-based approach. There are, however, a few studies that have examined best practices with this population. These studies are mentioned in the following sections. Secondly, there are only few studies that have compared outcomes of former foster youth to those of the general population of transitional youth. Third, this report does not include information from birth/biological families or foster families.

### *Housing and Homelessness*

One of the most important changes youth will make in the transition to independent living and self-sufficiency is assuming the responsibility for housing (Sheehy et al., 2000). Yet, homelessness is another serious outcome for many youth aging out of care. A number of studies have shown that either temporary or permanent homelessness can result after emancipation; homelessness is defined by all studies as at least one night living on the streets or in a shelter.

Homeless young people, who have been cast out, abandoned, or rejected by their families, frequently experience multiple placements in group homes or treatment centers as permanent wards of the state (Morrissette & McIntyre, 1989 p. 603). Often, they were taken into state custody and placed in unsuitable or inappropriate placements, and when the placements became intolerable, some youth ran to the streets (Kurtz et al., 1991). Other youth become homeless after leaving care. There are estimates that between 20 and 50% of youth accessing homeless agencies have a history of foster care or have run directly from care (Kurtz et al., 1991; NASW, 1993, Larkin Street Youth Services, 2001).

A seminal study was recently conducted by Chapin Hall Center for Children through the University of Chicago. The researchers, Courtney, Dworsky, Ruth, Keller, Havlicek, and Bost (2005) followed approximately 750 youth two years after leaving foster care from Illinois, Iowa and Wisconsin. Follow-up data was collected on 603 youth (of the 736 that

participated in baseline interviews 1-2 years earlier). The median age of the 603 youth was 19. Of those youth no longer in care (n=321) only 1% were currently homeless at the time of the interview. However, 14% reported being homeless at least once since leaving foster care.

Pecora et al., (2003) examined the outcomes from the Northwest Foster Care Alumni Study of former foster youth who were in care in Oregon and Washington between 1988 and 1998. The study found that of 659 alumni (average age at interview was 24.2 years), 22% reported being homeless for one day or more after the age of 18.

### *Housing Service Outcomes*

At present there is a dearth of research examining the outcomes of former foster youth that access transitional living programs that are developed to assist them with the move to adulthood. Throughout the nation there are approximately 200 programs to assist these young people, yet there is little empirical information about the effectiveness of these programs.

Rashid (2004) examined the outcomes of a transitional living program that served former foster youth ages 18 to 23. The goals of this study were to: 1) assess the outcomes of former foster care youth utilizing transitional living programs and 2) compare outcomes achieved by former foster care youth who participated in an employment training program with similar youth who did not.

The study sampled 23 former foster care youth using transitional living services in San Francisco County. Hourly wage, money saved, and employment status outcomes were examined at discharge and housing outcomes were examined at six month post-discharge. All outcome variables demonstrated improvement post-intervention: hourly wage, housing situation, employment, and money saved. At six month follow-up 90% of youth with known housing situations (18 of 23 youth) were in permanent, stable housing. In comparing youth with employment training and those without on hourly wage, those youth with comprehensive employment training had significantly higher hourly wages. This study illustrates that transitional living programs coupled with employment training may be effective interventions for former foster care youth (Rashid, 2004).

Mallon (1998) examined the outcome data of 46 youth who discharged from a residential independent living program in New York between 1987 and 1994. All participants were male and were between the ages of 16 and 23 while in the program. The outcome data shows approximately 72% of the 46 youth had full-time employment and 74% had received a high school diploma or GED (General Equivalency Diploma) when they exited the program. Follow-up was completed on all 46 youth after they had left the program for at least six months. It was found that 76.5% lived in independent living situations and 15% lived with family members. A limitation to this study is that there was no control group.

First Place for Youth in Oakland, California is a housing provider that serves homeless former foster youth in scattered site apartments. They conducted a follow-up survey with former participants and found that the rate of homelessness among youth who have completed their housing program is 4 percent, while housing stability for former participants is 88% (FPY, 2007).

### Employment and financial self-sufficiency

Courtney, Terao, and Bost (2004) surveyed 732 foster care youth, with a median age of 17, prior to leaving care. The researchers found that 47.7% of the youth had been employed at some point in the past and 35% were currently employed at the time of the survey. The average hours worked per week was 25 and the median was 27.

Approximately 30% of the young people reported that they obtained their employment through either Job Corps or another job training program, which illustrates that training may play an important role in these youths' employment (Courtney et al., 2004). It is important to note, however, that 50% of the young people in the overall sample reported still needing future assistance with employment problems even though 67% reported they had participated in a vocational support program. Clearly, youth recognize that employment training and support may be needed even after youth exit foster care, during their transitional years.

The Courtney et al. follow-up study (2005) conducted with 321 former foster youth, from three mid-western states (Iowa, Wisconsin and Illinois), illustrated that although 72% had worked for pay during the last year, only 47% were currently employed at the time of the survey. Additionally, of those who had worked for pay, 84% made less than \$9.00 per hour. These employment outcomes show that youth may struggle to survive financially. In fact, 40% of youth reported not having enough money to buy clothes, 20% did not have enough money to pay rent, and 22% had their phone service disconnected.

The same study found that 37% of the 321 former foster youth reported being not in school and not employed. Additionally, almost 40% were not in school, as well as not employed, homeless, or incarcerated at the time of the interview. These numbers illustrate the high rates of "disconnectedness" among this population of young people (Courtney et al., 2005; Wald and Martinez, 2003; Youth Transition Funders Group, 2004).

Lastly, Courtney et al. (2005) found that 15% of participants reported being hungry because of not having enough money to buy food and 28% had received food or money for food from family or friends. Additionally, over one-quarter of participants could be deemed as "food insecure" by the USDA's food security measure. In terms of receipt of government assistance, Courtney et al. (2005) found that 36% of former foster youth had received food stamps at some point since emancipating and 22% were currently receiving food stamps. And, 17% of the parenting former foster youth were currently receiving Temporary Assistance for Needy Families (TANF).

Goerge, Bilaver, Lee, Needell, Brookhart & Jackman (2002) conducted an outcome study of 4213 youth who aged out of the foster care system in California (n=2824), Illinois (n=1084) and South Carolina (n=305) during the mid-1990s. The study examined employment rates, as well as earned income from employment during a 13-month period. Participants' outcomes were compared with those who were reunified with their parents prior to their 18<sup>th</sup> birthday and those who were from low-income families.

Results indicated that the former foster care youth's unemployment rates varied from state to state (30% in Illinois, 23% in California, and 14% in South Carolina). Youth aging out of the foster care system earned significantly less than youth in any comparison group both prior to and after their eighteenth birthday. In fact, the former foster care youth averaged less than \$6000 per year in wages, which was substantially lower than the 1997 poverty level of \$7890 for a single individual (Goerge et al., 2002).

Pecora et al. (2003) found that of 659 alumni (average age at interview was 24.2 years), 80% reported being employed full-time or part-time. However, their overall employment rates were lower than that of the general population and 33% had household incomes at or below poverty level. Also, 17% were currently receiving cash assistance and 33% had no health insurance (almost twice the rate of the general population of adults ages 18 to 44).

#### *Employment Training Outcomes*

Courtney et al. (2005) found that of the 321 former foster youth surveyed, over 63% reported never having received employment or vocational training with ILSP. Training included such things as resume writing, job application and interviewing skills, or help with job referrals or placements.

Homeless former foster youth have historically been overlooked in studies examining employment training. Lenz-Rashid (2005) examined the baseline information and outcomes following a comprehensive employment training program for 104 homeless former foster youth. The mean age of the sample was 19.27 years (SD= 1.40) with 39% of the youth African American, 29% Caucasian, 12% Latino/a, and 20% Other. Approximately 66% had a mental health issue and 46% had a current substance abuse issue. Although all youth in the sample were over the age of 18 at the time of the study, only 50% reported having a high school diploma or proficiency.

Approximately 60% of the study participants found employment within three months following the training and the mean hourly wage of all participants post-training was \$8.88. Follow-up comparisons found that having a mental health issue most significantly predicted whether a youth found employment following the employment training program, even while taking into consideration foster care history and all other control variables.

Financial self-sufficiency and finding stable housing are two of the most important elements to achieving independence. Youth that emancipate from foster care are clearly

at a high risk of not retaining stable housing and not being able to support themselves financially, which can lead to homelessness and dependency on others.

### Education

Educational deficits, including low graduation and high failing rates, have also been found in numerous studies among youth who have emancipated from out-of-home care (Courtney et al., 2000; Blome, 1997). Courtney et al.'s (2005) follow-up study found that of the 321 former foster youth interviewed, more than 36% reported they did not have a high school diploma or GED. Only 7.9% of those participants were enrolled in a 2-year college and only 3.8% were enrolled in a 4-year college.

Pecora et al. (2003) found that of 659 alumni (average age 24 years), 65% reported seven or more school changes from elementary through high school, 85% had completed high school diploma or GED credential, and 43% received some education beyond high school. Approximately 21% completed a degree or certificate beyond high school, but only 1.8% had completed a bachelor's degree. In fact, the youth in this study were 14 times less likely to complete college than the general population.

Buehler et al. (2000) discovered that participants with a history of foster care were not statistically different from non-foster care participants, or a matched group, in educational attainment (choices were categorized as: less than high school, high school, some college or post-high school training, college degree, post-baccalaureate). Yet, when examining the variable education dichotomously ('high school or less' and 'more than high school') the authors found that the non-foster care participants were significantly more likely to report 'having a high school degree or more' than the foster care and matched groups. Adults in the foster care and matched groups did not differ on this dichotomous measure of educational attainment (Buehler et al., 2000).

Clearly there are some discrepancies in the educational achievements of youth in care when compared to youth not in care. Whether these discrepancies are due to a lack of ability due to upbringing, a non-supportive home life, or minimal residential stability, there is one thing apparent - youth in care tend to fare worse educationally than the general population of youth that reside with their families.

### Mental Health Needs

The data documenting special needs of youth aging out of care are largely unavailable, incomplete, or unreliable from most states (Casey Family Programs, 2000). For the purpose of this paper, 'special needs' is defined as a diagnosed disability; vision or hearing impairment, mental retardation, physical disability, emotional disturbance, other medical condition, child behavior problem, substance abuse problem, or receipt of Social Security Insurance. This information was gathered from the Adoption and Foster Care Analysis and Reporting System (AFCARS) database. Approximately 80% of foster youth have received services for their mental health needs.

Pecora et al. (2003) found that of 659 alumni (average age 24 years), 54% had one or more mental health diagnosis. In fact, 25% held a Post-Traumatic Stress Disorder (PTSD) diagnosis (a rate nearly double that of U.S. war veterans), 20% held Major Depressive Disorder, and 17% were diagnosed with social phobia. About 90% received mental health services while in care.

Courtney et al.'s (2005) study showed that 12% of 321 former foster youth surveyed had a lifetime diagnosis of PTSD and 10% for Major Depressive Disorder (based on the Composite International Diagnostic Interview – CIDI). Also, 11% (at median age 19) were most recently hospitalized for a mental health or substance abuse issue in the last year. PTSD and Major Depression were more prevalent among females. Thirteen percent had received counseling in the last year and 15% had received medication for mental health issues.

Buehler et al.'s (2000) study of three samples of 101 participants (those with a history of foster care, those matched on demographic variables, and those randomly sampled with no history of foster care) compared the three groups on mental health outcomes. Two measures of mental health were examined: self-esteem and depressive affect. Self-esteem was measured using the Rosenberg Self-Esteem scale and there were no differences found between the three groups. Having a depressive affect was measured using the mean of 12 frequently experienced symptoms (e.g. feeling depressed, feeling sad, feeling overly bothered by things, etc.). Participants were asked to note the number of days during the past week they had experienced each of these feelings. There were no statistically significant group differences.

### *Social Support*

There are various kinds of social support young people can receive: emotional support (e.g. someone to share your worries with), tangible support (e.g. someone to take you to the doctor), and recreational support (e.g. someone to spend time with having fun) (Courtney et al., 2005).

Courtney et al. (2005) examined the level of reported social support of 321 youth who had already left foster care by using the MOS Social Support Survey (Sherbourne and Stewart, 1991). Responses were rated on a five point Likert scale (0 = none of the time, 5 = all of the time). Youth reported receiving the lowest rates of social support with emotional support and tangible support (between some and most of the time) and the highest rates for recreational (i.e. fun) support (between most and all of the time).

The Buehler et al. (2000) study explored the variable 'relations with biological family.' This was defined as the respondent's perception of the quality of the relationship with his or her biological mother and father and siblings, and was analyzed using a 7-point scale. The scale ranged from 'very poor' to 'excellent.' Adults in the foster care group had poorer quality relationships with their mothers and fathers than the adults in the random sample and the matched groups. Similarly, the adults in the foster care group got along less well with their siblings than did adults in the other two groups.

In addition to familial relationships, community involvement was also assessed. 'Involvement in community activities' was assessed by asking the frequency of involvement in fifteen community groups (e.g. service clubs, church, school groups, sports groups). Adults in the foster care group were less involved in community activities than adults in the random group, but did not have a significantly different level of community activities than the matched group.

### Substance use

There is little empirical research examining the substance use habits of current and former foster care youth. Of the research available, there are vast differences in outcomes due to sampling, methodology, and instruments. A limitation to the studies below is that outcomes were not distinguished among placement types.

Between 1998 and 1999 Kohlenberg, Nordlund, Lowin, and Treichler (2002) interviewed 231 foster youth anonymously by phone and asked about their substance use. The results showed that foster youth were more likely than adolescents living with their parents to have "lifetime use" and "use within 6 months that constitutes a DSM III substance abuse diagnosis or a current need for treatment." However, foster youth had less "past year" and "last 30 day" use than adolescents housed with parents.

Courtney et al. (2005) found that 15% of 321 former foster youth had a lifetime diagnosis of Substance Abuse and 5% had a diagnosis of Substance Dependence (based on the CIDI). Additionally, 14% have a lifetime diagnosis of Alcohol Abuse. Alcohol and Substance Abuse were more prevalent among males than females. Seven percent had received substance abuse treatment in the last year. In addition, Courtney et al. (2004) interviewed 732 youth leaving foster care with a median age of 17 and found that 11% reported alcohol abuse symptoms, 3% reported alcohol dependence symptoms, 5% reported substance abuse symptoms, and 2.3% reported substance dependence symptoms.

Similarly, English et al. (1994) used case record review and phone interviews with caregivers to explore the substance use behaviors among 464 youth in care. Alcohol use by the youth was reported among 16% of the cases, while drug use was disclosed by approximately 15%. An enormous limitation to this study is that caregivers were surveyed, and not the youth themselves.

Morehouse & Tobler (2000) examined the frequency of substance use among 132 adolescents currently living in residential facilities; foster homes, facilities for juvenile offenders, treatment centers for adolescents with psychiatric problems, and correctional facilities. The participants in the program were high risk, multi-problem, and inner-city youth, primarily of African-American and Latino decent (Morehouse et al., 2000). Of those surveyed, 45% reported using alcohol, 45% using marijuana, and 3% using cocaine in the prior 30 days.

Lenz-Rashid's (2005) study of 104 former foster youth ages 18 to 23 found that 46%, reported some alcohol or illicit substance use in the 30 days prior to the intake being conducted. However, these youth were homeless at the time of the survey, which may have contributed to their reported substance use.

### Incarceration

Courtney et al. (2005) found that of the 321 youth who had aged out of care and now had a median age of 19, 34% had been arrested, 17% had been convicted of a crime, and 24% had spent at least one night in jail, prison, juvenile hall, or other correctional facility since the last interview for the study (when the participants had a median age of 17).

Then, Cusick and Courtney (2007) compared the self-reported offending behavior of youth age 19 with a history of foster care (n=574) and those without a history of foster care (n=499) in the 12 months before being surveyed. They found that youth with a history of foster care were significantly more likely to report having: damaged property (21% vs. 13%), stolen something worth more than \$50 (7% vs. 4%), participated in a group fight (24% vs. 11%), or pulled a knife/gun on someone (6% vs. 3%) (Cusick and Courtney, 2007). It is important to note that these were self-reported incidences, which may actually lower the rate of affirmative responses in both groups of young people.

In the same study it was found that former foster youth reported a significantly higher rate of being arrested since age 18 than their non-foster care counterparts (Cusick and Courtney, 2007). This was true for both males (35.9% vs. 1.9%) and females (17.9% vs. 1.1%). This study's findings that foster youth have higher levels of offending than their same-aged peers, even after accounting for differences in racial distributions, indicate that this group is at high risk for both offending and criminal justice system involvement during the transition to adulthood.

Spatz-Widom (1991) explored the role of placement experiences, in relation to adult criminal, delinquent, and violent criminal outcomes, of a sample of 772 juvenile court cases of child abuse and neglect from the late 1960s. The mean current age of the subjects was 25.69 years (SD = 3.53) and the majority of them (85%) were between the ages of 20 and 30 at the time of the study. It was found that children with no history of care or a history of only foster care had lower rates of any type of arrest than youth placed in group home care or in probationary placements. Therefore, "what have often been viewed as negative (criminal) outcomes of foster care may be due to the confounding influences of a small fraction of children in foster care who have early involvement in criminal activity" (p. 204).

This study illustrates that it is not accurate to assume all foster youth are at higher risk of future incarceration; it is important to distinguish between youth who are in care due to abuse or neglect and those youth who are in care because of abuse and neglect and as a result of their delinquent behavior (Spatz-Widom, 1991).

### *Pregnant and Parenting Youth*

Bilaver and Courtney (2006) studied 732 former foster youth, and compared them to the general population of youth, found that those in foster care were 2.5 times more likely to be pregnant by age 19 than those adolescents not in foster care. By age 19, 46% of those in foster care who had already been pregnant were likely to have a 2<sup>nd</sup> pregnant versus 29% of their non-foster care counterparts. And, females in foster care were more likely than those not in foster care to have sexual intercourse. Lastly, those youth who had left foster care were less likely than those in foster care to have received family planning services.

See Table 1 on the next page for a summary of outcomes.

**Table 1. Current Outcomes of Youth Aging Out of Foster Care**

<b><u>Outcome Area</u></b>	<b><u>Study</u></b>	<b><u>Findings</u></b>
<b>Homelessness</b>	Courtney et al. (2005)	14% reported being homeless for at least one night since leaving care (n=321)
	Courtney et al. (2004)	25% of foster youth experienced homeless for at least one night (n=732)
	Pecora et al. (2003)	22% were homeless for at least one night after leaving care (n=659, average age at interview was 24.2 years)
	California Department of Social Services (2002)	65% of California youth were homeless at the time of emancipation
<b>Employment</b>	Courtney et al. (2005)	47% reported being unemployed at the time of the interview and 84% reported making less than \$9.00 hour when they did have work (n=321)
	Pecora et al. (2003)	84% reported being employed full or part-time after leaving care (n=659)
	Goerge, Bilaver, Lee, Needell, Brookhart & Jackman (2002)	23% did not find employment 13 months after leaving care in California (n=2824)
	Barth (1990)	53% of foster youth reported having serious money troubles (n=55)
<b>Education</b>	Courtney et al. (2005)	36% did not have a high school diploma or GED achieved, 7.9% were enrolled in 2- year college, and 3.8% were enrolled in 4- year college 2 years after leaving care (n=321)
	Pecora et al. (2003)	85% had achieved a high school diploma or GED, 21% had achieved a 2-year degree or certificate and 1.8% had achieved a bachelor's degree after leaving care (n=659)
	Mech and Fund (1999)	2/3 of the youth in less restrictive placements attended post-secondary education, compared to 1/3 who were placed in highly restrictive placements. Nearly 85% of the enrollees in post-secondary education or training programs came from low restrictive placements (n=171)

<b>Financial Self-Sufficiency</b>	Courtney et al. (2005)	36% of former foster youth had received food stamps at some point since emancipating, 22% were currently receiving food stamps and 15% reported being hungry. 17% of the parenting former foster youth were currently receiving TANF (n=321)
	Pecora et al. (2003)	33% had household incomes at or below poverty level. Also, 17% were currently receiving cash assistance and 33% had no health insurance
<b>Mental Health</b>	Courtney et al. (2005)	12% and 10% had a lifetime diagnosis of PTSD and Major Depressive Disorder respectively (n=321)
	AFCARS (2003)	80% of youth in foster care have received services for mental health issues during placement
	Pecora et al. (2003)	54% have a mental health diagnosis after leaving care (n=659)
	Needell et al. (2002)	62% had received mental health service prior to emancipation (n=10,228)
<b>Substance Use</b>	Courtney et al. (2005)	15% had a lifetime diagnosis of Substance Abuse and 5% had a diagnosis of Substance Dependence (based on the CIDI). Additionally, 14% have a lifetime diagnosis of Alcohol Abuse (n=321)
	Courtney et al. (2004)	732 youth leaving foster care with a median age of 17: 11% reported alcohol abuse symptoms, 3% reported alcohol dependence symptoms, 5% reported substance abuse symptoms, and 2.3% reported substance dependence symptoms
	Kohlenberg et al (2002)	Foster youth more likely than adolescents living with their parents to have “lifetime use” and “use within 6 months that constitutes a DSM III substance abuse diagnosis or a current need for treatment,” BUT have less “past year” and “last 30 day” use than adolescents housed with parents. (n=231)

	Morehouse and Tobler (2000)	45% reported using alcohol, 45% using marijuana, and 3% using cocaine in the prior 30 days (n=132, youth were in care)
<b>Incarceration</b>	Cusick and Courtney (2007)	Youth aging out of foster care (n=574) had higher rates of offending across a range of behaviors from property crimes to serious violent crimes than youth in the general population (n=499). And, differences in offending between the samples at age 19, although foster youth were more likely to report damaging property, stealing something worth more than \$50, participating in a group fight, and pulling a knife or gun on someone.
	Courtney et al. (2005)	34% had been arrested, 17% had been convicted of a crime, and 24% had spent at least one night in jail, prison, juvenile hall, or other correctional facility since leaving care for 2 years (n=321)
<b>Pregnancy/ Parenting</b>	Bilaver and Courtney (2006)	A study of 732 foster youth found that those in foster care were 2.5 times more likely to be pregnant by age 19 than those adolescents not in foster care. By age 19, 46% of those in foster care who had already been pregnant were likely to have a 2 <sup>nd</sup> pregnant vs. 29% of their non-foster care counterparts. And, females in foster care were more likely than those not in foster care to have sexual intercourse. Lastly, those youth who have left foster care were less likely than those in foster care to have received family planning services.

While the national and state research have been the focus of this study up until this point, it is also important to examine the numbers of youth placed in, and emancipating from, foster care in California, as well as the San Francisco Bay Area. Additionally, there is some research that has examined outcomes for youth leaving the foster care system in California. The next section describes these statistics.

### California Outcomes

In California, children enter the foster care system under the auspices of either county child welfare services or probation departments (Needell et al., 2002). The state has the largest foster care population in the United States, 85,549 as of January 1, 2007, and 19,329 of those young people are ages 16 to 20. This is an increase from 11,600 ages 16 to 20 in 2002 (Needell, et al., 2007, U.S. D.H.H.S, 2004).

Clearly, California has experienced a significant increase in the amount of adolescents in foster care placements over the last five years, which may have a tremendous impact on the need for comprehensive services as young people leave the system. See Table 2 below for the breakdown of children and youth in foster care placements in 2007 in California.

**Table 2. Foster Care Youth in California (2007)**

	<u>Number</u>
Ages 16 to 20 years in 2007	19,329
<i>(Ages 16 to 20 years 2002)</i>	<i>(11,600)</i>
Ages 11 to 15 years	24,486
Ages birth to 10	40,323
Missing	1,501
<b>TOTAL YOUTH IN CARE</b>	<b>85,549</b>

Needell, Webster, Armijo, Lee, Cuccaro-Alamin, Shaw,  
Dawson, Piccus, Magruder, Exel, Smith, Dunn, Frerer,  
Putnam Hornstein, Ataie Atkinson, and Lee (2007)

Between 2005 and 2006 4,323 foster youth emancipated from the California foster care system, while another 2,068 had “Other” outcomes which could have included youth who ran from foster care as adolescents (Needell et al., 2006c). The majority of these young people leave care at age 18 (72% for child welfare and 69% for probation), but many emancipate before age 18 (15% for child welfare and 28% for probation). Of the 4,323 youth that left care in California, it is estimated that 850 are from the San Francisco Bay Area (CDSS, 2002). Unfortunately, there is very little information about these young people. See Table 3 on the next page for a breakdown of youth emancipating from the Bay Area.

**Table 3. Emancipating Youth in the Bay Area (2006)**

	<b><u>Number</u></b>
Alameda	273
Contra Costa	129
Marin	9
Monterey	28
Napa	6
San Francisco	144
San Mateo	36
Santa Clara	125
Santa Cruz	37
Solano	32
Sonoma	31
<b>TOTAL YOUTH</b>	<b>850</b>

Needell, Webster, Armijo, Lee, Cuccaro-Alamin, Shaw,  
Dawson, Piccus, Magruder, Exel, Smith, Dunn, Frerer,  
Putnam Hornstein, & Ataie (2006b)

Of all the youth in foster care in California, about one-third of these young people have had five or more placements and 41% have been in care for 5 or more years (Needell et al., 2002). Between 2000 and 2001 approximately 65% of the youth aging out were homeless at the time of emancipation (Needell et al., 2002) and 30% were linked to welfare, or Temporary Assistance for Needy Families, after leaving care. Also, former foster youth from California have high rates of publicly funded mental health services (53%), Medi-Cal insurance (59%), and pregnancy (20% are mothers within one year of leaving the system) (Needell et al., 2002). There is no recent (in the last ten years) empirical research related to outcomes examining San Francisco Bay Area youth who have left foster care.

## Solano County Youth in Foster Care

At any point in time there are approximately 180 to 200 adolescents ages 16 to 20 in foster care in Solano County, California, which includes both foster care and probationary youth (Needell, Webster, Armijo, Lee, Cuccaro-Alamin, Shaw, Dawson, Piccus, Magruder, Exel, Smith, Dunn, Frerer, Putnam Hornstein, & Ataie, 2006a). About 71 of these young people are from Solano County and between 100 and 115 are out-of-county youth (Needell et al., 2006a). The out-of-county youth come primarily from Bay Area and Central California counties.

Table 4 below illustrates the numbers of youth placed in Solano County as of January 1, 2006. The ‘Supervising County’ has official court jurisdiction over the case, while the ‘Placement County’ is where the youth physically resides in a foster care or group home placement.

**Table 4. Placement County (column) and Supervising County (row), Jan. 1, 2006**

	<u>Placement County</u>
	<i>Solano</i>
<u>Supervising County</u>	
Alameda	40
Contra Costa	20
Los Angeles	1
Napa	4
Riverside	1
Sacramento	4
San Francisco	40
San Mateo	4
<i>Solano</i>	71
<b>TOTAL 16-20 YEAR OLDS IN SOLANO COUNTY</b>	<b>185</b>

Needell, Webster, Armijo, Lee, Cuccaro-Alamin, Shaw, Dawson, Piccus,  
Magruder, Exel, Smith, Dunn, Frerer,  
Putnam Hornstein, & Ataie (2006a)

It is also important to note that at any point in time there are approximately 25-30 Solano County foster care adolescents that are placed in other counties, primarily in group home placements. These young people are placed in such counties as Alameda, Contra Costa, Sacramento, Fresno, Marin, Napa, Stanislaus, Yolo, and Siskiyou. Some young people are also ‘Missing’ at the time the data was collected. See Table 5 below for the breakdown of where these Solano County youth are placed.

**Table 5. Supervising County (column) and Placement County (row), Jan. 1, 2006**

<u>Supervising County</u>	
<i>Solano</i>	
<u>Placement County</u>	
Alameda	1
Contra Costa	2
Fresno	2
Marin	1
Napa	2
Sacramento	11
Stanislaus	1
Siskiyou	1
<i>Solano</i>	71
Stanislaus	2
Yolo	3
Missing	4
<b>TOTAL FROM SOLANO COUNTY</b>	<b>101</b>

Needell, Webster, Armijo, Lee, Cuccaro-Alamin, Shaw, Dawson, Piccus, Magruder, Exel, Smith, Dunn, Frerer, Putnam Hornstein, & Ataie (2006a)

Outcomes for Adolescents in Placement – Solano County

Of the 115 older adolescents in foster care or probationary placements in Solano County, approximately 87% (100) of them will remain in care until they emancipate, while the other 13% (15) will receive family maintenance or family reunification services (Needell et al., 2006a). It is estimated that about 40-50 youth will emancipate from foster care each year in Solano County (Needell et al., 2006b). See Table 6 on the next page, which illustrates the amount and type of placements from which youth emancipated from Solano County in 2006. This number does not include youth involved in the juvenile justice system (i.e. probation youth).

**Table 6. Adolescent Exits from Solano County, 2006**

<b>Type of Exit</b>	<b>Number</b>
Emancipated	
From Kin placement	5
From Non-kin placement	27
Other (from Non-kin)	10
<b>TOTAL YOUTH</b>	<b>42</b>

Needell, Webster, Armijo, Lee, Cuccaro-Alamin,  
Shaw, Dawson, Piccus, Magruder, Exel, Smith,  
Dunn, Frerer, Putnam Hornstein, & Ataie (2006b)

Given that 30-40 youth emancipate from the foster care system each year in Solano County, it can be assumed that there are approximately 150-200 transitional youth between the ages of 18 and 24 in the county who would be eligible for comprehensive aftercare services. These services may be related to housing, independent living skills training, pregnant/parenting support, mental health treatment, employment/vocational training, or support with post-secondary education.

### **Description of Solano County Services**

The previous sections have examined what is currently known about the various outcomes for youth aging out the foster care system at both the national and State of California levels. It provides an important foundation for examining the current services available for this population. This section describes the independent living skills, housing, employment, and mental health services available in Solano County.

The data was gathered through interviews with county child welfare, probation, mental health, and substance use staff, program administrators of private non-profits/ community-based organizations, along with a review of program materials from community-based organizations. In addition, two youth focus groups were conducted with youth who had emancipated from foster care in Solano County.

#### **Independent Living Skills Program (ILSP)**

In 1999 the Foster Care Independence Act was signed into law (P.L. 106-169). It was called the John H. Chafee Foster Care Independence Program (Chafee Act), named after Senator Chafee of Rhode Island, a long-time advocate for children who are victims of abuse and neglect. The Chafee Act allots \$140 million to ILSP services and requires that former foster care youth who are in care at age 16, and are likely to remain in care until their 18<sup>th</sup> birthday, be served until 21 years of age. The youth could be residing in a foster family home, group home, residential treatment facility, kinship care home, pre-

adoptive home, independent living program, or other state-sanctioned voluntary placement (FAQ, 2001). A youth who was in the custody of the state and has become homeless (due to running away) is also considered to be 'in foster care', if under 18, for the purposes of the Chafee Act and is entitled to services. The State of California's ILSP serves all youth up until their 21<sup>st</sup> birthday who are:

1. Age 16 years old and over who are in foster care (those whom foster care maintenance payments are made under the Title IV-E Program, non Title IV-E eligible, and non Title IV-E eligible youth residing in kinship care who are in receipt of family reunification and/or permanent placement services)
2. Formerly in foster care, who were in foster care after the age of 16
3. Designated as wards of guardians under the age of 18
4. Involved with probation, age (16 and older) who are in foster care

Solano County currently contracts out its services for its federally-funded Independent Living Skills Program (ILSP). For the last several years Solano County's ILSP services were contracted out with Youth and Family Services, which had offices in Fairfield and Vallejo. However, in August 2007 the new contract was awarded to Alternative Family Services, which has provided ILSP services in nearby Marin County for the last nineteen years.

Alternative Family Services' ILSP program will have several different components, allowing individuals to participate in any or all of its parts. An ILSP case manager will meet with interested youth regularly to assess youth and help them set goals, work on educational issues, assist with financial aid for college, research opportunities, look for work, create resumes, set up savings accounts, and much more. The nature of individual work will be decided by the youth's own goals, desires and needs (taken from agency website). However, the ILSP case manager will work closely with the youth's county social worker or probation officer to carry out the court-approved case plan and the Transitional Independent Living Plan (TILP).

### Housing

Apartment rental housing in Solano County can be expensive. In 2005 the median contract rent for a 1 bedroom apartment was \$989 (up from \$797 in 2000), while median monthly housing costs were \$1416 (down from \$1453 in 2000) (City-data, 2007). These costs may make it difficult for former foster youth to obtain and retain their own apartment, without having employment that pays a living wage. Fortunately, in 2007 Solano County was awarded state funding for transitional housing services under the Transitional Housing Program-Plus program. Additionally, the Solano County Board of Supervisors allotted \$400,000 from the county budget to provide for housing for youth aging out of foster care.

### Transitional Housing Program-Plus (THP-Plus)

THP-Plus was established with the passage of California Assembly Bill 427 (in 2001) to provide funding for safe, affordable housing and supportive services to emancipated foster youth, at least 18 years old, through their 24<sup>th</sup> birthday. In 2001 there was a 60% county match required by the state, in order for THP-Plus state monies to be used. However, there is no longer a mandatory county match; THP-Plus is now fully state funded. In October, 2005 California Assembly Bill 824 was signed into law by the Governor which allows former foster youth up to age 24 to be served; previously youth were only eligible up until their 21<sup>st</sup> birthday, which is when ILSP services end. The maximum time for THP-Plus participation is 24 cumulative months.

THP-Plus involves providing housing and supportive services for former foster youth. Supportive services include: case management, 24-hour crisis intervention and support, individual or group therapy (provided directly or through a referral), educational advocacy and support, assistance to pursue college or other post-high school training, job readiness training, mentoring, services to build and support relationships with family and community, a system of payment for utilities and rent, apartment furnishing, monetary support with emancipation, and aftercare services.

The THP-Plus funds are State of California dollars and the current funding was appropriated at \$4.8 million in the 2006-07 fiscal year. The budget for fiscal year 2007-2008 is \$37.5 million. As aforementioned, there is no funding match required by counties, however, counties must submit a plan detailing how local, community-based providers will be certified, as well as establish what the monthly payment rate to providers will be. In October 2006 Solano County submitted its THP-Plus plan to the state and has received approval for implementation.

Solano County Health and Social Services issued its Letter of Inquiry (LOI) and First Place for Youth, based in Oakland, was awarded Solano County's first THP-Plus contract which began on June 12, 2007. Housing will be designed to provide safe residence and allow participants a maximum amount of independence and self-sufficiency. First Place for Youth (FPY) will house 30 single and pregnant/parenting former foster youth in scattered-site permanent apartment and host-home housing. FPY will receive referrals for housing from the Solano County Health and Social Services' Permanency Planning Unit, the Independent Living Skills Program, and the County Probation Department, along with other community-based providers serving this population of young people. Housing units were available in summer 2007. As of August 2007 four youth have been placed in housing.

First Place for Youth will have two main scattered site housing types – 1 and 2 bedroom units. The one bedroom units will be for pregnant or parenting youth and the two bedroom units will be for single youth to share with another youth (2 youth per unit). Some of the one and two-bedroom apartments will be located in the same apartment complexes, while others will be scattered throughout a city or in various cities (most

likely Fairfield and Vallejo). There will be some studio apartments available for participants with more significant mental health issues or difficulties with social skills.

First Place for Youth will hold the master lease on each apartment, but once the youth completes the program they can take over the lease if they choose to do so, thereby making the housing permanent. Therefore, First Place for Youth will select apartments that are affordable for the participants. This is a seamless housing program as the youth do not have to look for future housing once they have finished the FPY program; they can continue to live in the same apartment indefinitely. Participants in the program will be provided with a rental subsidy that decreases over time, along with funding support for groceries and move-in furniture. Participants will set up utilities in their own names and will be responsible for paying for their utilities, but FPY will offer emergency funding for utility support, if needed.

FPY will also offer participants weekly in-home case management services, along with other transitional services such as support with education, employment, mental health, transportation, child care, and the development of independent living and economic literacy skills. Community peer events and health advocacy are also a part of First Place For Youth's transitional services. Lastly, participants will also have access to computers at the agency's offices, which will be located in Solano County; transportation support will also be provided.

#### *Transitional Living Programs (TLP)*

Transitional living programs are yet another community-based intervention utilized to assist the population of former foster youth in Solano County as they age out of the child welfare system. These programs can offer case management, employment, educational, and independent living skills support in addition to housing. There are over thirty (30) transitional living beds in the county in communal settings; whereby youth live in a large residential structure and may share, or have their own, bedrooms and/or bathrooms. Typically, kitchen facilities and other living spaces are shared.

The structure of TLPs for former foster youth in Solano County is varied. Children in Need of Hugs (CINOH) in Suisun City, the House of Joy in Vallejo, and L.A.S.T (Learning, Attitude, Stability, Triumph) Transition House are the three TLPs in Solano County. The L.A.S.T Transition Housing is currently seeking a property for its residential services.

Each TLP has a different level of structure and liability with its staffing model. However, none of these facilities are licensed with Community Care Licensing in the State of California. These TLPs are also funded in different ways. Some receive small amounts of funding from the Solano County Health and Social Services Department, the Administration on Children and Families, private foundations and endowments, and individual contributions. They also rely on the support of volunteers to staff some aspects of their programs. None of these programs currently receive funding through the THP-Plus program in Solano County.

### Employment

Solano County's ILSP program will offer employment training and job readiness skills for youth preparing to leave, and who have already emancipated from, the foster care system. As aforementioned, the ILSP contract with Solano County has just recently been awarded to Alternative Family Services, a private, non-profit agency that has been administering the Marin County ILSP Program for the last nineteen years.

Solano County's Workforce Investment Board (WIB) also has an employment training program for youth up to age 21. The program offers paid work experience for youth, as well as career preparation. Each of the WIB's Youth Programs has a specific funding grant, a limited number of allowable enrollments, and an application process (Solano County WIB, 2007). They also offer support for completing educational and/or training programs. The application process for each program requires that applicants meet a specific set of requirements as defined by the funding grant. The agency's four youth programs are related to: 1) Job referrals, 2) Educational goals, 3) Personal and social development, and 4) Follow-up services and support. WIB's Youth Programs also offer tutoring, counseling, adult mentoring, leadership development, and assistance with child care, and transportation (Solano County WIB, 2007). WIB workers do sometimes solicit direct referrals from Solano County child welfare workers.

Solano County WIB also serves former foster youth in its Adult WIB program, however WIB does not specifically recruit referrals from child welfare for youth who have already emancipated from the foster care system.

### Mental Health

Federal Medicaid law establishes a list of health care benefits and services that state Medicaid programs must furnish. Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program services are federally mandated for beneficiaries who are under the age of 21. The EPSDT program is a part of the Child Health and Disability Prevention Program. In the State of California, current and former foster youth are eligible for EPSDT services until age 21, which include health screening, vision, dental, and hearing services as well as treatment that is necessary to "correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not such services are covered under the State plan." (Siegel, 2004, p. 1). Counties may use EPSDT funding for a variety of services for current and former foster youth. Some counties utilize EPSDT monies by offering mental health services on-site. For example, Solano County has an on-site mental health clinic that serves foster youth under the age of 21, as well as a youth drug treatment clinic. Additionally, Youth and Family Services in Solano County offers outpatient mental health services for youth in foster care with EPSDT funding. These services are accessed by youth either through their child welfare worker, other community-based referral sources, or the youth themselves. As long as a former foster care youth is Medi-Cal eligible, they can access mental health services through an EPSDT provider.

There are currently some mental health residential programs in Solano County, but none specifically serve transitional aged-youth (TAY). Caminar did have a housing program for TAY, but it was closed down four years ago due to lack of funding. Also, there are providers offering mental health support for youth still in foster care in Solano County (e.g. Youth and Family Services and Fred Finch), but none that offer specialized services for youth that have already emancipated.

However, in July 2007 Solano County posted an RFP for housing and supportive services for transitional aged youth. Services would include case management, safe and affordable housing, medication and illness management, identification of core gifts and vocational opportunities, supportive employment, mental health rehabilitation, substance abuse treatment, proactive wellness and recovery action planning, crisis intervention and family support (SCHSS, 2007). Youth that will be eligible for such services are those that are homeless or at risk of being homeless because they are leaving home, becoming independent, and have been involved in child welfare, juvenile justice, or residential treatment services (SCHSS, 2007). In addition, eligible youth are those that may have mental health issues in late adolescence including those youth that are dually diagnosed or have other co-occurring disorders. Proposals are due to the county on September 21, 2007.

Also, to respond to the unique needs of transition-aged youth ages 16 to 24, a new Full Services Partnership (FSP) program will be developed in Solano County. Services will be client centered, outcome driven, and infused with the belief that persons served will develop rich rewarding lives that include safe and stable housing, meaningful work, educational opportunities, supportive relationships and social activities (SCHSS, 2007). To achieve this, the FSP teams will be trained to take the approach that the client knows best what services and supports will most help them achieve wellness, and that the team's role is to do what is most helpful and healthful to assist clients to achieve their identified goals (SCHSS, 2007). Services will be performed in the community at the request of, and based on the needs of, the client served. FSP services will be coordinated with child welfare services including ILSP and THP-Plus, as well as flexible services for certain youth in high-level group home placement.

### Other Programs

Foster a Dream is an agency serving current and former foster youth and is based in Solano County. The agency provides programs and resources that build the hopes, dreams and futures of Bay Area foster children and has a goal to be a guiding source for their successful transition into the adult world (taken from the agency website). There are case managers on staff to work individually with youth.

The following are Foster a Dream's main programs:

1. *Bridges* which provides college scholarships (called Dare to Dream) for former foster youth, a mentoring program, academic guidance and support, employment training and readiness, a week-long technology camp (called Techweek);

2. *Adopt-a-Dream* which offers support for youth pursuing sports, cheerleading, arts, music lessons, prom, special needs, etc;
3. *Pillow Pals* which gives youth a stuffed animal and blanket they can take with them if they move placements; and
4. *Holiday* support which includes a toy drive and holiday wonderland for youth to experience

The next section illustrates the gaps in service in Solano County, as well as programmatic and policy recommendations to improve services for youth aging out of foster care. Also, tables beginning on page 52 break down the various services and policy barriers, as well as recommendations to better serve these young people.

## Solano County - Gaps in Service and Recommendations

After conducting qualitative interviews with key constituents (e.g. administrators of community-based programs and county workers) serving youth aging out of the foster care system in Solano County, and conducting focus groups with former foster youth who were placed in the county, many different service needs were found. There were interviews conducted with twenty-five community-based providers and two focus groups with eighteen youth participants.

### Limitations

It is important to note the limitations to this section of the report. First, a convenience sample was used. All interview and focus group participants voluntarily chose to be subjects in the study and made the effort to contact the researcher after being informed of the general nature of the study. Qualitative interviews and focus groups involve self-report which can include many possible sources of bias. Self-reports are subject to many forms of bias including telling the interviewers what they think interviewers want to hear and social desirability response set which includes telling the interviewers things that make the participants look good. Additionally, self-reports may be unreliable due to participants forgetting information, participants not telling the truth about actual services received by foster care youth, or information not being known by the participants. Also, the interview instrument used to gather data for this study was not checked for reliability.

The following sections describe the feedback about current services, existing gaps in services, as well as recommendations. Each section begins with quotes from youth who participated in the focus groups and/or public or private service providers in Solano County who were interviewed. The main gaps in services are highlighted in blue.

### Transition Planning

*“Because I know a lot of kids when they turn 16 they try to hurry up and do stuff. To me, at 13 you have all the time and you can have like 3 different goals or 3 different obstacles that you can try just to get to your one main goal. To me they should be educating more. Cause right now they educating you at like 15 and a ½ and the statistics is still bad. They probably need to push that back a few years.” (youth)*

*“The Aftercare program needs to be a whole lot better. The Aftercare program so far that I’ve experienced only supplies you with a bus pass. That ain’t gonna get it.” (youth)*

There was a general consensus among youth in the focus groups that they were not adequately prepared for emancipating from the foster care system. Youth felt that the **emancipation planning started too late and was not comprehensive enough**. Youth reported that resource information was provided either right before, or well after, youth had emancipated.

Youth expressed a lack of support from foster parents with emancipation preparation. Youth requested **more involvement of their foster parents and/or group home staff in assisting with transition planning**, not only to model successful independent living skills, but to ease the burden on social workers and ILSP staff to be the primary providers. Specifically, many youth reported that the adults in their lives did not pass on their knowledge of how to budget and save. In fact, youth requested more support from various child welfare and ILSP staff in order to learn how to save money for emancipation. There is the perception that foster/kin parents and group home staff do not have some of the skills, such as how to apply for jobs or college, which again may render them ill-prepared to support youth prior to emancipation.

Additionally, youth believe that foster parents do not know what youth experience after emancipation and may not be able to assist them with transition planning. However, youth believed that it is also the responsibility of foster parents to assist with transition planning because social workers have too many cases and are therefore unable to provide the individual attention needed.

Consequently, youth had a **general lack of knowledge or misinformation about basic resources**. For example, some youth were not aware the ILSP could assist with move-in expenses for a first apartment, buying a cell phone, getting a driver's license or car insurance, or purchasing educational supplies (such as textbooks or computers). Other youth were not aware that ILSP could assist youth with transportation expenses, which is significant issue for youth in Solano County as the county can be geographically difficult to negotiate with public transportation. The prevailing feeling in both focus groups was that Solano County uses a lack of funding as an excuse for not providing services to foster youth.

Youth reported a **general sense that the social workers and ILSP staff do not have much hope for their futures** as evidenced by the lack of options presented to youth as directions for their futures. One glaring example is that several youth stated they were only offered Job Corps or going into the Armed Forces as options for plans after high school. Similarly, youth reported that both ILSP staff and social workers do not, as a matter of course, discuss college as a future option but only for those youth who have positive academic records. This led the youth to feel that the ILSP staff and social workers do not have positive expectations for youth. Some youth reported that ILSP staff and social workers did provide information about school/educational resources.

However, **very few youth reported actually having discussions about college** and any discussions that did happen were only at the initiation of the youth themselves. As a result, youth believe that they are not receiving personalized assistance in emancipation planning and that the ILSP staff and social workers are not interested in the youths' input into their transition plans. Interestingly, most youth were aware of educational funding available to foster youth, specifically the Chafee Grant Program, although few youth reported taking advantage of this program. This may have been due

to the fact that in the last three years the California Student Aid Commission (CSAC) has not been awarding every eligible Chafee applicant with his/her full \$5000 annual award. Youth reported that the application process for Chafee can be very daunting, and if youth are not living in stable, permanent housing, they can lose their award due to not having clear communication with the CSAC.

It appears that post-emancipation support in Solano County is very limited. Most service providers in the community reported that emancipation planning should be done earlier than the year before youth were about to leave the child welfare system. A few individuals stated that Team Decision Meetings (TDM) should be mandatory for each youth leaving the system, within one year of leaving foster care.

A few service providers mentioned that foster care youth may sometimes have a difficult time with the transition process themselves. *For example, some foster care youth may experience a level of denial about leaving foster care, which could affect the amount of cooperation they exhibit with the transition process.*

*Recommendations:*

1. Solano County should continue to mandate Emancipation Conferences where the youth chooses his or her participants, and all aspects of emancipation are covered. Youth could receive all necessary documentation, information on their rights, and have a transition plan developed at this conference. (youth, SW, children's attorneys, ILSP/THP-Plus Coordinator, county counsel, group home/foster/kin provider, who youth will emancipate with, ILSP).
2. Active transition planning should continue to begin at age 15 1/2, with focused discussions of future options beginning at age 13 or 14. Development of case plans should include foster youth's opinions and suggestions regarding resources and services. Conducted every 3-6 months as needed.
3. Child welfare workers and probation officers should conduct monthly comprehensive and culturally sensitive assessments on transitioning youth to identify needs, strengths, social supports, and limitations towards self-sufficiency. They should also discuss college and vocational options with each youth.
4. 1:1 transition planning to occur with each youth, including discussions of careers, education and housing.
5. Transition plans to be reviewed, modified, or expanded monthly by social workers to evaluate the effectiveness of those plans.
6. Protocol needed for standardized transition plan that would include at least 3 specific transition goals and corresponding action steps, to be updated annually.
7. Examine what services are eligible under Emancipated Youth Stipends (EYS) and what the policy is for disbursement with the current ILSP contractor. That is, the new ILSP contractor should develop clear policies about how decisions are made to give out to each young person. So, even if a young person does not have his/her child welfare worker advocate for services, the youth and the ILSP case manager should know what youth are eligible for.

8. Foster parents, kinship providers, and group home staff should closely monitor savings program beginning at age 16 where the youth must bring proof of depositing a percentage of their check into their bank account each time they receive a check, either from employment or ILSP stipend.
9. Youth should be provided with an emancipation resource handbook to be supplied by their county social worker or ILSP.
10. Regular discussions of varying educational options after graduating high school are needed for all foster youth, including college.

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### Housing Interventions

*“[Learning how to apartment search, read a lease, etc.]; all of that would have been helpful. But start it before we turn 18, so we would at least be halfway in the door like buying furniture for the apartment and stuff like that by the time we are 18.” (youth)*

*“I was homeless for 2 or 3 months. I wasn’t always homeless; I was doing stuff to get money so I was having some place to stay. But before I got to someplace steady, it was about 8 months before I got something going.” (youth)*

*“While for some youth the scattered site housing model is the best, I don't believe that all youth are ready for independent living, particularly those with mental or emotional issues, or who are very young and newly graduated from the foster care system.” (service provider)*

#### *Transitional Housing Placement Program (THPP)*

Service providers reported a [need for a continuum of housing options for youth based on age and skill level](#). Providers reported a great need for THPP for 16 to 19 year olds to prepare youth for emancipation. THPP is a California state-funded program that enables youth ages 16 to 18 years old to live in a Community Care Licensed placement while still in foster care. The goal of THPP is to help participants emancipate successfully by providing a safe environment for youth to practice the skills they have learned in their county Independent Living Program (childsworld, 2005). THPP participants may live alone, with departmental approval, or with roommates in apartments and single-family dwellings with regular support and supervision provided by THPP agency staff, county social workers, and ILSP coordinators (childsworld, 2005). Support services may include regular visits to participants’ residences, educational guidance, employment counseling, and assistance with reaching emancipation goals outlines for participants’ transitional independent living plans (if used), the emancipation portion of the youth’s case plans.

Some THPPs are structured as group home, or “communal living” situations where the youth live together in a large house or building. The participants typically share the kitchen, bathrooms, and communal living rooms. Often these programs have paid social work or counseling staff that supervise the facility 24 hours per day. Other THPPs in the Bay Area may have a “host” adult supervising the program site in the evening and weekend hours. These adults reside in the home with the youth and may have other jobs during the regular work week. The host adults may or may not pay rent to the THPP. Case management is a requirement in both of these types of THPP housing models.

Other THPPs are modeled after a “scattered site” setting where youth, ages 16 to 19, live in studios or shared apartment situations. These scattered site models, like the communal living models, also have to adhere to Community Care Licensing (CCL) regulations in order to remain licensed with the State of California. However, the licensing regulations are not as strict as the traditional group home housing model. For instance, 24 hour staff supervision is not required. Solano County is currently not an approved THPP county and therefore [the county does not have a THPP provider to serve its older adolescents in foster care](#). This is a much needed service for older foster youth in every county.

#### *Transitional Housing Program-Plus (THP-Plus)*

Providers reported that more THP-Plus housing models are necessary to meet the diverse needs of youth emancipating from the foster care system. Providers reported that there should be a continuum of housing opportunities for youth who have emancipated from foster care. Some thought the Request for Proposals (RFPs) issued by the County was too narrow and rigid and they hoped that flexibility will be shown in its implementation. The thought was that not all former foster youth possess the independent living skills, as well as social skills to succeed in a scattered-site apartment living situation. [Some youth may need more structure and support from a communal housing program or a host home model](#). Solano County is aware that different models for housing are needed, and decided that the quickest way to provide housing for youth initially was through the scattered-site and host home models. In the future THP-Plus funding will be used for congregate care models of housing.

Additionally, [the current housing options are not enough to address the continuum of functional levels presented by foster youth](#). While some youth will be able to live on their own in an apartment, there are those who need more support, such as youth with mental health issues. Providers also reported that [youth need to have basic ILSP skills prior to taking on the responsibility of an apartment](#). A spectrum of housing options could include other transitional living programs, kin support, or group communal living situations. These are needed to ensure that all foster youth needs and skill levels are met.

However, a scattered site THP-Plus model is often preferred to a shared or communal housing model because individual youth issues can be addressed. Youth can learn more

hands-on skills in a safe environment. Also, youth may be more willing to seek services in this type of model due to increased freedom and not feeling like they are in a program. This may be especially true for youth who have had a history of group home placements. Yet, some youth may become more isolated in an apartment, and may not have the skills to handle the responsibility of living in an apartment.

Although other THP-Plus housing models are not yet being utilized in Solano County, the county began with scattered-site housing and will phase in the host home model during this first fiscal year. This is important as [caregiver or host home THP-Plus models may keep youth at home longer, while offering permanent connections](#).

Solano County plans to use THP-Plus monies to continue some payment foster parents while a youth is pursuing college or transitioning to employment and continuing to reside in the same place. This is important as host home models could also be significantly less expensive than other housing models (such as scattered-site), which could help the county diversify its funding and housing options for youth, and at the same time help youth work towards permanency.

Youth also reported a [lack of support provided to youth around searching for housing options after emancipation](#). There is often a lengthy and difficult application process to apply for Section 8 or other housing subsidy programs, and looking for apartments can be daunting for former foster youth. Some youth reported experiencing homelessness or knew someone who experienced homelessness directly after emancipation. One devastating consequence of this is the extremely high potential for youth to engage in survival sex (i.e. exchanging sex for money, food, or a place to live).

#### Recommendations:

1. County should become certified as a THPP county to provide varied housing options for 16 to 19 year olds.
  - a. County should conduct a needs assessment to verify the extent of the need for THPP housing.
  - b. If needed, county should work with current service providers to offer THPP as a foster care placement option for some youth ages 16 to 19.
  - c. If needed, there should be step-down THPP models (e.g. Peacock Acres in Monterey and Bay Area Youth Centers in Alameda County) which prepare older foster youth for emancipation first in a communal setting and then in scattered-site apartments, before they emancipate from foster care.
2. Youth, social workers, and ILSP workers should begin a housing search, including signing up for open housing subsidy waiting lists or applying for housing programs, by age 16 in order to reduce the risk of homelessness upon emancipation.
3. All THPP, THP-Plus and TLPs receiving funding from the county should include intensive case management and other support services such as employment and educational support.

4. All post-emancipation housing options should be at least 18-24 months long.
  5. Begin and fund host-home model (i.e. caregiver model) through THP-Plus.
  6. Provide funding to Transitional Living Programs through THP-Plus in compliance with the requirements of the THP-Plus legislation as to services and funding limitations.
  7. Work with THP-Plus and TLPs to explore other housing funding options including Federal HOME Funds, such as is done in Livermore and Fremont with Project Independence.
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### Independent Living Skills

*“When I was going to ILSP, my classes were like a discipline class because the kids there were disruptive. But the information they was telling us I knew and the only thing they offered us was Job Corps or the Army. They didn’t offer us anything else.” (youth)*

*“It [ILSP] helped me out a lot and stuff. They paid for my deposit for my apartment and stuff. They helped me out a lot.” (youth)*

*“Yes, I got services, but it wasn’t in Solano County. Contra Costa County is way better—they have more opportunities and stuff. In Contra Costa they actually had a bus come pick us up. Everybody would be outside at Hilltop Mall and they would come take us to Martinez. There were different classes: learn how to cook, how to do resumes. They had different classes through ILSP and they have specialists in different areas: educational specialist, emancipation, it’s like everybody had their own job. Their ILSP had a kitchen, bath, showers, if anybody needed anything.” (youth)*

There were mixed reviews about ILSP services in Solano County, yet there was a significant variance between counties. Youth who had experiences in one of the other nine Bay Area counties expressed that they received more comprehensive services from other counties. The prevailing perception for this difference is the belief that Solano County is the poorest county in the Bay Area and consequently does not have the resources to provide proper services.

One youth remarked on how [providing transportation to ILSP may assist in maintaining high levels of attendance in those courses in other counties](#). On the other hand, youth in Solano County reported they were discouraged to attend ILSP classes for a variety of reasons: [youth felt that the classes were irrelevant](#) and too much like current/past school courses, [stipend payment for class participation was untimely](#) thereby completely negating its incentive effect, segregation of youth into different classes as a result of labeling of youth as “bad kids” or “troublemakers.” Some

youth reported that in the Solano County program there were **specific ILSP courses for youth who were singled out as ‘problematic’ which felt more punitive than educational.**

Youth also reported a variance in level of service between the ILSP in Vallejo and the one in Fairfield, with the latter receiving a more favorable report. As aforementioned, some youth reported receiving assistance from ILSP with apartment deposit, getting a cell phone, driver’s license or car insurance. Unfortunately this **support is not standardized** across youth, nor do many youth know how to qualify or apply for it such services. However, there were consistent reports of both ILSP offices providing assistance with resumes and job search skills.

One problematic aspect of ILSP service provision is a significant level of inconsistency in youth awareness of necessary resources. Most youth reported that **both ILSP staff and social workers were unaware of what is available for youth.** The existence of a resource binder would have been helpful so that youth can learn about and seek services long before emancipation. Lastly, several youth reported only receiving bus passes and assistance with obtaining identification cards from ILSP after they turned 18.

Service providers reported that a major problem with the current ILSP services in Solano County is that the agency with the contract does not do employment or job development with local employers to assist youth with finding employment. When an agency can develop relationships with local employers and educate them on how to work with former foster youth, it can greatly assist with obtaining and retaining employment for the youth for the long-term.

Youth and providers also mentioned that transportation is a huge obstacle with youth accessing ILSP services. It was reported that the **ILSP program should transport youth to ILSP services** with a van, so youth do not have to depend only on free bus passes to get to ILSP classes.

*Recommendations:*

1. Increase visibility and marketability of announcements/flyers for ILSP classes in order to increase youth attendance.
2. Standardize ILSP services county-wide including have a set curriculum, referral guidelines, and protocols for financial assistance.
3. Due to the geographic sprawl of Solano County it would be beneficial to provide transportation services to ILSP offices in the form of a van, in addition to bus passes.
4. Examine the need for a small satellite program for ILSP in hard to reach areas in the county (e.g. Benicia).
5. ILSP case managers should develop a strong relationship with the youth to build trust and maintain attendance.

6. Develop an ILSP curriculum that could be taught to foster parents and group home staff to provide youth with tangible, real life experiences.
7. Set county-wide protocols for timeliness of stipend payments to youth for attendance in ILSP courses and institute an increase in class ILSP stipends to \$20 per class.
8. Solano County should open a savings account for all foster care youth at the age of 15 under the supervision of the child welfare system.
9. ILSP training should place a strong emphasis on money management, organizational skills, job skills, parenting skills, education, housing identification and maintenance, along with “soft skills” such as social skills and conflict resolution.
10. Trainings should include guest speakers (accountants, nutritionists, college professors, job developers, and housing authority specialists) to lead the classes in order to provide important information to the youth well in advance of emancipation, as well as offering community contacts to the youth.
11. Conduct external outcomes and client satisfaction evaluation of ILSP services.
12. ILSP, county social workers, Foster Family Agency workers, county Probation Officers, and other support staff should have the same working Emancipating Youth Resource Binder that is collectively updated every year.

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### Employment Training Interventions

*“Employment training does not start early enough.” (service provider)*

*“It is very difficulty to get foster care youth into WIB’s youth employment programs.” (service provider)*

*“WIB makes it so hard for youth to get jobs and they won’t serve certain youth – even when referred by ILSP” (service provider)*

*“A vocational evaluation should occur at age 14.” (service provider)*

Employment training for youth emancipating and those that have emancipated in Solano County is limited. Both the Independent Living Skills Program and the county Workforce Investment Board (WIB) serve this population by training youth with job readiness skills, job search skills, and ‘soft skills’ such as social and conflict resolution skills. Providers reported that local employers are often frustrated with workforce quality, or soft skills, such as work ethic and attitude; and that former foster youth are often difficult to work with.

The WIB Youth Program, the main employment training and referral source for former foster youth, serves about 120 youth per year. Providers in the community reported that WIB does do periodic recruitment at Solano County Health and Social Services’

Permanency Planning Unit, but that the services do not work that well. For example, providers reported [it can be very difficult getting current and former foster youth into the WIB Youth program](#), the minimum wage employment opportunities are not attractive to former foster youth, it can be difficult getting 18 years olds into WIB youth program (as they are usually steered toward adult program), and that a car is often necessary for most WIB employment opportunities. Lastly, providers reported that the WIB Youth Program is under-enrolled on occasion. WIB representatives cited lack of, or decrease in, federal funding and a lack of communication with Child Welfare Workers as a reason for low enrollment of foster care youth in the WIB youth programs.

However, there is [no extensive empirically-based research evaluating youth outcomes](#), the effectiveness of training, or participant satisfaction of the past ILSP contractor or the Solano County WIB.

### Recommendations:

1. Local WIB and ILSP should examine the best practices of teaching employment skills. Perhaps a one-stop model of employment services is not conducive for these youth while they are still in care.
2. Based on the comments of local employers and WIB representatives, ILSP and WIB employment training curriculum should be focused on work ethics and attitude and their impact on employment.
3. Solano County Health and Social Services could explore a hybrid model of services whereby foster parents and group home staff are trained in a standardized employment training curriculum (that is developmentally appropriate), especially for disconnected youth who may not ever access community employment training programs or ILSP employment training. Incentives could be provided to caregivers for training youth through Chafee ILSP program funding.

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### Mental Health Needs of Youth

*“Yeah, they need to quit bouncing youth from foster home to foster home just because they got anger problems. That is something I had as a youth and they would figure, ‘Oh I can’t deal with you. I don’t want to put in the time to work with you’. Because all behind that anger, it just be a whole bunch of hurt. That’s all it be; you just be mad because nobody taking time to care about you. And then you just be like, ‘Ooh! I don’t know how to express this so I be fittin’ to punch you in your face!’. That is real talk, you be real mad because I know I do. I never knew until this age that the reason I moved so much or had so many anger issues or did all that is because I was hurt because my mom died and I felt like she shouldn’t have died. I was 5 years old when I went in the system and*

*don't nobody even care about you at 5. They still like, 'well, whatever, go sit down'." (youth)*

*"Most foster kids don't need medication. They got foster kids, like probably more than 50% of them, on medication and they don't need it. They really don't need it. They just need somebody to talk to or to be there with them or somebody to take time to stop moving them around. That is all they need. They don't need you and your drugs." (youth)*

*"I know a lot of foster parents like to complain so they can get more money and I think that is so wrong. They need to stop doing that. Because they put really bad labels on kids and some kids are on medication just because they wanted more money." (youth)*

A significant topic raised in the focus groups was the issue of mental health with regard to diagnosing and medicating foster youth. Youth reported how they believed foster youth are often misdiagnosed and subsequently over-medicated. Youth felt that over-medication and over-diagnosing foster youth obscures the real issue of feelings of hurt, grief, and rejection. The young people welcomed the idea of being able to talk to someone about their problems versus being medicated. Youth did say they did not like working with a therapist who they perceived as being from a different economic and social class, or those who do not actively engage with them in therapy. Youth felt that having a mentor, perhaps someone who has experienced the foster care system, would be very helpful for expressing their feelings about being in the child welfare system.

The focus groups also discussed the financial implications of youth having mental health diagnoses and being on medication, specifically with regard to the increased funding for placements housing those youth. There is a perception that youth receive excessive and unnecessary mental health diagnoses simply because the placement will receive more money for that child. The result of this perception is youth do not trust mental health professionals which can be detrimental in any future contact with mental health services. Youth also reported a feeling that the child welfare system reduces them to a dollar amount. This further reinforces the youths' beliefs that therapist, foster parents, and group home staff are not there to support them, but only there for the money.

Youth discussed how mental health diagnoses can follow them throughout their time in the foster care system, thereby potentially shaping the treatment they receive from staff, foster parents and social workers. Youth reported that once someone is labeled as a "bad kid" s/he is treated as such and often blamed for issues in the placement. Unfortunately, placements often do not tolerate youth with aggressive or volatile behaviors.

**Intensive case management is needed by many youth as they leave foster care.** However, housing with intensive case management on-site is often needed. Unfortunately, there are no real residential treatment options for youth with mild mental health or social skills issues (unless youth has SSI or external funding such as private insurance). Additionally, there is no transitional aged housing for youth with mental health needs in Solano County, which is greatly needed, as youth tend to not do well in traditional adult settings. Service providers reported that the supply of board and care facilities has been diminishing greatly in the county; these facilities have been closed down by CCL. However, as aforementioned, there a current RFP has been posted by the county to provide housing and comprehensive services to transitional youth with mental health issues who may be at risk for homelessness.

Intensive case management in Solano County’s Mental Health Transitional Aged Youth (TAY) Team has a waitlist; the program can often only respond to youth while they are in crisis. Providers also reported that there is **not enough mental health staff in the county for Transitional Aged Youth.** And, it was reported that not every youth gets mental health support with community providers. Clearly, there needs to be a stronger coordinated effort for mental health planning for youth as they emancipate from the child welfare system. Lastly, providers stated that mental health treatment services must be coupled with housing, both transitional and permanent.

Providers also reported that there **should be on-going assessment of mental health/developmental disability as many issues can begin during the adolescent years.** Additionally, providers stated that grief and loss issues need to be addressed. Many provider interviewees reported that transitional youth with varying degrees of mental health issues are often difficult to work with as they are already negotiating a transitional time (i.e. they want autonomy and are legally able to have it).

Many youth aging out of foster care do not have significant cognitive deficits, and therefore do not qualify for Regional Center services. However, **mild cognitive deficits or learning disabilities may prevent these young people from completing their goals,** such as education or employment. Even assessment of these transitional youth is difficult. There is often a need for neuropsychological testing once youth age out of care, if they were not tested while in care. Many service providers expressed a difficulty in working with these young people who have “fallen through the cracks” with mild to moderate mental health issues. Child welfare and probation staff, and youth caregivers (e.g. foster parents, group home staff, and kinship providers), should be trained to more thoroughly assess for these issues in order to provide the best prevention and treatment options possible.

*Recommendations:*

1. Annual audits and ongoing QA/QI reviews of files and placements for youth with mental health diagnoses that are on psychiatric medication to ensure

- medication/mental health treatment compliance and no misuse of the diagnoses for financial benefit.
2. Solano County conduct internal audits annually and hire outside consultants every 2-3 years for an independent clinical review of youth with mental health diagnoses and those on psychiatric medications.
  3. Solano County to assist in the formation of a mentorship program for youth, both peer-based (i.e. former foster care youth) and with members of the larger community. Foster a Dream currently has a mentoring program, but youth involved in the probation system are not eligible.
  4. Aftercare services for youth, including case management and crisis intervention, should continue to be provided up until a youth's 21<sup>st</sup> birthday.
  5. Development of transitional and permanent residential services for transitional foster care youth with mental health issues.
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### Health

*“In those type of situations, like me, I didn’t even look forward to the future. It was like in the moment. Do I got somewhere to stay tonight? What’s real funny is some girls are dumb-minded and a lot of pimps go for foster care. They feed on them. I can tell when I see one; I can tell a dumb one and pick her from a million miles. Like: ‘I could get that right there’. And just turn her mind out and do whatever.” (youth)*

One topic that was not discussed in depth in the focus groups was health, particularly sexual health. One youth alluded to the fact that she had to practice survival sex (i.e. sex work or prostitution) upon emancipating in order to keep a roof over her head. The issue of **survival sex is a common occurrence with this population after they leave foster care** and one that needs to be at the forefront of the minds of child welfare workers and probation officers. Because of this, it is imperative that youth have access to HIV awareness and safe sex education, as well as supplies to reduce sexual disease transmission and unplanned pregnancies. The youth in the first focus group related survival sex and promiscuity to feelings of being abandoned, thereby allowing pimps and other people to exploit the youth.

Substance use support is needed as a percentage of youth in foster care, and those aging out, have substance use issues. **Youth often self-medicate after leaving care**, especially if they not linked with adult community mental health services and may no longer be receiving psychotropic medications. It is not surprising that this often disenfranchised, victimized, and traumatized population uses alcohol and other illicit substances after leaving the foster care system. Clearly, more information is needed about the substance use behaviors of current and former foster care youth.

Recommendations:

1. ILSP should offer various types of health education such as HIV awareness, safe sex practices, survival sex, and substance use.
2. Increase visibility of safe sex/HIV awareness materials and supplies in locations where youth meet, i.e. ILSP and THP-Plus offices, housing programs, mental health services, health clinics.
3. Solano County should make arrangements with organizations such as Planned Parenthood to provide sex and health education classes and information about abstinence, birth control, safe sex, and condoms to foster youth.
4. Solano County should develop an instrument, or use a standardized instrument, to fully assess for substance use of youth in foster care since many youth may self-medicate and substance abuse issues may be ignored or mistaken for mental health issues.
5. Foster parents, group home staff, and kinship providers should attend a mandatory training on how to assess youth for substance use issues early.

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Pregnant and Parenting Former Foster Youth

*“There are a lot more things [services] for a parent.” (youth)*

*“They help you get a car when you are pregnant, or fitting to have a child.” (youth)*

*“They should have something [resource binder] for foster youth, like outreach foster care. They should be able to buy a car, help you do this, help you do that. Not just because you have a baby but because you are a foster child, because most foster people do not have a family.”(youth)*

In one of the youth focus groups two of the five women had children of their own, one was the primary caretaker for her partner’s child, and one was two months pregnant. Consequently, a large amount of time was spent discussing pregnancy and parenting service issues. It was clear throughout the discussion that there is a culture of misperception of the level of support foster youth will receive if they are pregnant. **Youth felt they would have more opportunities for resource options, housing and financial support if they are pregnant.**

All youth reported that the only resource guide they knew about, designated for Solano County, was a master resource binder compiled by a program specifically for pregnant women. Consequently, **youth also felt that in order to get information they would be better off being pregnant.** This misperception may affect the decision

making process of former foster care youth about getting pregnant as a means to receive more support.

While youth in both focus groups did discuss the issue of pregnancy and parenting, the only private non-profit agency that offers transitional housing services to homeless transitional youth ages 18 to 21 years if pregnant or parenting in Solano County is Children in Need of Hugs (CINOH). The program is located in Suisun City, in the northern part of the county. Agency staff at CINOH report that approximately 95% of clients are former foster care youth.

Recommendations:

1. Make resource binders and on-line resources standardized and available to all youth, not just those who are pregnant/parenting.
2. Safe sex education, access to condoms and family planning services, and HIV awareness should be a primary responsibility of Solano County contractors serving current and former foster care youth.
3. Child welfare workers, probation officers, and ILSP workers provide resources that include information on child care subsidy programs and food programs.
4. Provide gift certificates or vouchers for parenting/pregnant youth to purchase clothing, bedding, bottles, and other necessities that will help the youth properly care for their children.

The next section describes the Peer Review Team of this research project. A description of the various community-based organizations involved in assisting this project is also included.

## **Solano County - Peer Team Project**

Solano County Health and Social Services had a strong interest in improving its services for youth emancipating from the foster care and probation systems and therefore initiated this project. The first goal of this project was to examine current services for former foster youth in the county. The subsequent goal was to develop and pilot test a county-to-county technical assistance project to improve services for emancipating foster youth in the county. This Peer Team Project was funded by an external foundation, the Zellerbach Family Foundation, and a project coordinator was hired. The coordinator is an Assistant Professor of Social Work at San Francisco State University who is a published researcher on the topic of youth emancipating from foster care. The coordinator of this project brought together a team of expert peers from other Bay Area child welfare agencies, community-based organizations, and private foundations to help Solano County improve its policies and services for youth aging out of foster care. This peer intervention model is being pilot tested in Solano County, revised if needed, and then repeated in other counties, as requested.

The first aspect of the Peer Team Project involved forming a Steering Committee. The Steering Committee was made up of members from Solano County and community-based organizations. There were representatives from child welfare, probation, mental health, housing, substance use, employment, and administration. The Steering Committee met and decided what service needs and priorities the project would be focused on for the Peer Team Aspect of the project. The committee thought the focus should be primarily on housing and employment since the THP-Plus plan had already been approved by the State of California Department of Social Services and the new RFP had already been posted for the county's Independent Living Skills Program contract.

The overall goal of the Peer Team Meeting was to have other county and community-based non-profit staff describe how they implemented their programs. Specifically, they were asked to describe:

1. Programmatic structure;
2. Staffing;
3. Funding opportunities;
4. Relationship and/or billing process with their county child welfare agency, mental health, or probation department;
5. How they handled certain situations with the youth (i.e. how they dealt with youth with behavioral, social skills, mental health, or substance use issues, how they handled youth with lack of follow-through with program expectations, what kind of employment and educational expectations they had for youth);
6. Agency/program culture or values (i.e. abstinence based vs. harm reduction); and
7. Process for program evaluation

## Housing

The Solano County Deputy Director of Child Welfare Services and her staff met with three different THP-Plus housing programs from the Bay Area. The programs were First Place for Youth in Oakland, Project Independence in Hayward, and Larkin Street Youth Services in San Francisco. These three agencies were among the first THP-Plus housing providers in the State of California and had been providing THP-Plus housing to former foster youth for at least five years. Additionally, the Peer Team Meetings for Housing included a meeting with staff from the John Burton Foundation.

### *John Burton Foundation*

The housing Peer Team Meetings began with a meeting with Amy Lemley, Policy Director at the John Burton Foundation and Michele Bryres, Program Manager at the John Burton Foundation. Ms. Lemley is the former Executive Director and co-founder of First Place for Youth in Oakland and with the California Youth Connection helped draft the initial THP-Plus legislation. Ms. Brynes is the former Director of Honoring Emancipated Youth of the United Way of the Bay Area, is an adult supporter of the California Youth Connection, and has helped implement a Guardian Scholars Program, a supportive program for students working towards their undergraduate degrees, at a number of Bay Area universities and community college campuses.

The presenters discussed the different housing models under THP-Plus, such as scattered site (multiple site or one site), host home, and communal living. They also discussed program design, staffing and services. Specifically, they presented which services are required under THP-Plus (coordination with ILSP, case management, 24 hour crisis intervention and support, individual or group therapy, educational advocacy, job readiness training and support, mentoring, services to build relationships and family/community, system of payment for utilities, phone and rent, apartment furnishing, emancipation fund, aftercare services, monthly rental subsidy, and assistance with locating affordable housing).

Next, the presenters discussed the different steps the county must take after selecting a provider, such as certifying the provider, developing a contract with the provider, and ensuring the provider plan is submitted to the county. The billing process was also mentioned. Lastly, how the county will oversee and evaluate the THP-Plus program was discussed. County oversight can include: apartment inspections, periodic consumer/client satisfaction surveys, youth focus groups, progress reports, collaboration meetings with ILSP, and a financial audit of the provider. This presentation was extremely helpful to the Solano County Child Welfare staff as it covered all of the necessary steps to implement THP-Plus in Solano County, under the California Department of Social Services' requirements.

### *Tri City Homeless Coalition's Project Independence*

The second Peer Team Meeting related to housing was with the Tri City Homeless Coalition's Project Independence (TCHC), located in Alameda County. Since 2001, TCHC's Project Independence has been providing housing and support services for emancipating foster youth, including those that are pregnant or parenting. In addition to its scattered-site housing program, Project Independence provides case management, life skills training, mentors, and connections to other community resources. Staff support participants with their educational, employment, health, independent living skills, mental health, substance use, and financial literacy goals. Currently the program houses 45 youth and nine children and has a waitlist of 12 young people.

Project Independence is a two year program. TCHC holds the master lease on each apartment, and provides the rental subsidies. Participants typically live in two-bedroom apartments with another participant. Two-bedrooms are usually \$1200-1300 per month. Participants pay a gradually increasing percentage of the rent on their shared apartment, which begins at 19% and increases 5% each month. For example, in a \$1000 per month apartment, each person is initially responsible for \$190 of the rent. After 2 years, if the participant is a good tenant and can maintain the regular unsubsidized, market-rate rent, TCHC will turn the lease over to the participant who can then stay indefinitely if they follow the lease. A second Peer Team Meeting was conducted with Project Independence and included a site visit to the agency and to a participant's apartment in Hayward.

TCHC uses THP-Plus funding for the majority of its housing. In fact, TCHC was one of the first THP-Plus providers in the state of California. However, the agency also uses Federal Home Funds for partial housing subsidies in certain cities in Alameda County. For example, the City of Fremont has used Home Funds for the last four years and a Community Development Block Grant for services and salaries for case management and administration. Similarly, the City of Livermore will pay up to \$1025 per unit with Federal Home Funds; the City of Fremont pays 47% of this amount for two participants (such as a single mom with a child) and 50% as a subsidy for one bedrooms with singles.

About 90 to 95% of referrals come from Alameda County's ILSP. The youth have to pay a \$500 security deposit and be prepared to pay the first months rent and living expenses. They need to be ready to live on their own in order to be eligible for the program. Additionally, they have to be employed part-time, or qualify for financial aid if in school.

### *Larkin Street Youth Services' LEASE Program*

The third housing Peer Team Meeting occurred with staff from the Larkin Street Youth Services' LEASE Program. Larkin Street Youth Services provides a continuum of housing and supportive services for homeless and runaway youth and young adults in San Francisco County. Since 2002, Larkin Street's LEASE program, in collaboration with the Department of Human Services ILP, has been providing housing and services specifically for youth aging out of the foster care system. All LEASE participants are

housed in scattered-site apartment units in San Francisco and receive comprehensive supportive services including intensive educational and employment assistance through Larkin's HIRE UP program.

Larkin Street holds the master lease on each apartment, but youth can take over lease when they complete the program. Most participants live in studio apartments. "Rent" is paid by each participant and is a minimum of 30% of the participant's income, is increased over time, and is due on the 1<sup>st</sup> and 15<sup>th</sup> of each month. If a participant is attending school he/she has to be employed part-time. If they are not attending school, they have to be employed full-time.

Life skills, or Independent Living Skills, workshops are held two times per month and are mandatory for each participant. The case managers meet with participants in individual meetings one time per week if a participant is working and two times per week if a participant is not working. The referrals mainly come from the San Francisco County Independent Living Skills Program. Participants can have mental health and substance use issues, but not severe enough to prevent them from working or attending school. The program provides a food subsidy of \$100 per month, but it is slowly decreased to \$50 within 9 months. The phone bill is participant's own responsibility, but all other utilities are paid by the program.

### Employment

#### *Youth Employment Partnership (YEP)*

The first Peer Team Meeting focused on employment was at the Youth Employment Partnership in Oakland, California. The agency offers employment training services to the general population of at-risk transitional youth, of which former foster youth can participate.

In February 2005 a pilot project, funded by the Department of Labor Initiative (\$1 million) was launched to specifically serve former foster youth. It was an 18 month demonstration project that served 80 youth who were wards of the court (40 former foster youth and 40 probation). Staff at YEP were able to learn more about serving former foster youth and how their needs may be unique to the other at-risk youth. These needs include: little or no adults to mentor youth with employment skills, mental health or social skills deficits, lack of educational attainment, lack of employment experience, etc. Lessons learned from the project were incorporated into YEP's eleven other employment and educational programs. These lessons included:

- It is imperative to build relationships with group homes, foster homes, and residential mental health programs serving current and former foster youth
- YEP must continue to build relationships with child welfare workers and administrators to gather as much information as possible about each youth's needs (as this continues to be a trouble spot with administrators in Alameda County)

### *Larkin Street Youth Services' HIRE UP*

The second employment program where a Peer Team Meeting occurred was with Larkin Street Youth Services (LSYS) in San Francisco. The agency serves homeless and runaway youth and young adults from ages 13 to 24. Approximately 50-60% of LSYS youth have had a history of foster care (Lenz-Rashid, 2006).

In 1998 Larkin Street Youth Services launched 'HIRE UP', the agency's comprehensive employment and educational program. HIRE UP has a variety of programs including 'Hire Ground' a Day Labor Program for youth who have few job skills or little employment experience. Participants work in supervised day labor crews, cleaning Larkin Street facilities or other local businesses, washing graffiti off walls, moving furniture, stuffing envelopes, and completing other tasks for an hourly stipend. As an incentive to continue their education, youth in HIRE Ground are paid a higher hourly rate when they have completed their GED (high school equivalency). HIRE Ground builds the young people's work ethic and gives them a sense of participation in the community. They learn important skills like following directions, teamwork and accountability which help them be successful as they enter the working world. HIRE ground helps youth establish savings and gain job experience. Through their participation in the program, they prepare for the next phase of their new, safer, more stable lives (LSYS, 2007).

For youth who may not be ready to find jobs HIRE UP also has a Job Ready Certification Class where youth can explore future career options, create a career development strategy, get trained in job search skills, and practice basic work habits (LSYS, 1998). The classes run for three weeks, three hours per day. At the end of each week participants receive a small stipend and at the end of the third week youth attend a graduation ceremony.

After youth at Larkin Street Youth Services have completed Job Readiness Class, as part of the HIRE UP program, they are given the opportunity to move directly onto a rewarding career track. They can do this through the Institute of HIRE Learning, a competitive program offering paid internships with local businesses and organizations (LSYS, 2007).

The internships encompass an impressive array of career opportunities. Culinary arts, veterinary care, multimedia—these are all potential lifelong vocations youth can learn through the Institute. In many cases, they choose to work toward careers in which they can help others as they have been helped, through internships in nonprofit social services, HIV prevention, or nursing (LSYS, 2007).

The next few pages illustrate Solano County's "Action Steps" which includes: the various gaps in policy and services, the barriers in place preventing change from occurring, and recommendations for change and improvements in policy and services.

**Solano County Action Steps:**  
**Programmatic and Policy Change for Transitional-Aged Youth (TAY)**  
**(Table 7)**

***Service 1: Transition Planning***

<b><u>Policy</u></b>	<b><u>Barriers</u></b>	<b><u>County Action Steps</u></b>
Transition Planning	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• Lack of early transition planning for each youth</li> <li>• Lack of provider knowledge about transition planning</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Begin transition planning for each youth at age 14 or 15</li> <li>• Train foster or kin parents, and group home staff on all aspects of transitioning to adulthood</li> <li>• Continue to have youth attend an bi-annual Emancipation Conference beginning at age 15 with all providers and social workers involved in the youth's life</li> <li>• Solano County Health and Social Services should develop and disseminate an Emancipation Binder to every youth aging out of care</li> </ul>

***Service 2: Housing for 16 to 19 year olds***

<b><u>Program</u></b>	<b><u>Barriers</u></b>	<b><u>County Action Steps</u></b>
THPP (16 to 19)	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• There are no community-based organizations able to offer any THPP models</li> <li>• Lack of foster parent (i.e. In-Care) THPP models</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Work with Transitional Living Programs, group home housing, or large foster family providers in the county to see if any would be interested in starting a THPP program</li> <li>• Pilot In-Care Model and train foster parents in ILSP, so they can offer comprehensive THPP services</li> </ul>

**Service 3: Housing for 18 to 24 year olds**

THP-Plus (18 to 24)	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• Lack of funding support for communal living and host home housing models</li> <li>• Lack of permanent housing options for youth</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Work with current TLP communal living providers to encourage them to access all of the federal and state funding available</li> <li>• Expand THP-Plus funding to include communal living and host home models</li> </ul>
Federal HOME Funds	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• No collaboration with county child welfare or CBOs in establishing relationships with cities to access Federal Home Funds (only Alameda County utilizes these funds with 2 different cities – Fremont and Livermore)</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Bring together CBOs and city officials to examine funding opportunities for offering housing to 18 to 24 year olds via Federal Home Funds</li> </ul>

**Service 4: ILSP and Employment Training**

<b><u>Program</u></b>	<b><u>Barriers</u></b>	<b><u>County Action Steps</u></b>
Develop County In-home ILSP (for youth who do not want to or cannot access a one or two site ILSP)	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• Training foster parents, group home administrators, and kinship providers can be time consuming (cost-benefit analysis has not been conducted) and coordination of funding may be a barrier</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Use ILSP funding to give foster, kin, group home providers a stipend to participate in training of how to teach independent living skills to older foster youth</li> <li>• Conduct empirical research/youth evaluations to ensure training occurs (youth outcome and satisfaction data can be collected)</li> </ul>
ILSP	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• No empirical outcome research on contracted ILSP services</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Conduct research/youth evaluations to ensure training occurs (youth satisfaction data can be collected)</li> </ul>

**Service 4 (continued): ILSP and Employment Training**

<p>Employment Training Programs</p>	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• Outside of ILSP, employment training programs are typically 40 hours over one week and a one site model (no job placement or retention services)WIB's youth program is too small and under-funded</li> <li>• WIB's youth and adult programs are not sufficiently coordinated with the county, to ensure that the needs of current and former foster youth are addressed and that the WIB has a user-friendly system for them to access</li> <li>• WIB's employment opportunities do not pay a living wage</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• In ILSP and Solano County WIB, replicate Project Self-Sufficiency model (pilot program to serve older foster youth) of Youth Employment Partnership in Oakland and Hire UP in San Francisco County</li> <li>• Develop a more formalized referral and communication system between WIB and the county Child Welfare and Probation departments</li> <li>• All training should be based on empirically-tested evidence based practice models</li> </ul>
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**Service 5: Mental Health and Substance Use**

<b><u>Program/Policy</u></b>	<b><u>Barriers</u></b>	<b><u>County Action Steps</u></b>
<p>Mental health housing</p>	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• Lack of mental health transitional housing for 18 to 24 year olds in Solano County</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Work with community adult housing providers to replicate Fred Finch's Coolidge Court (in Oakland) model for 18 to 24 year olds, or San Francisco County's Crossroads' model for 18 to 21 year olds</li> </ul>
<p>Substance use assessment</p>	<p><i>Regional Policy</i></p> <ul style="list-style-type: none"> <li>• Lack of empirical research examining substance use of foster youth – no assessment tool utilized by any child welfare agency</li> </ul>	<p><i>Regional Policy Change</i></p> <ul style="list-style-type: none"> <li>• Invest in empirical research examining substance use of older foster youth (i.e. replicate Washington State Dept Social and Health Svcs by Kohlenberg et al., 2002)</li> <li>• Train child welfare workers to assess for substance abuse issues, even if informally</li> </ul>

**Service 6: Health Education**

<b><u>Program</u></b>	<b><u>Barriers</u></b>	<b><u>County Action Steps</u></b>
Health Services	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• No standardized Health Education included in ILSP curriculum</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Include Health Education (abstinence, safe sex, pregnancy, HIV/ sexually transmitted infections, and survival sex) in all ILSP curriculum and train foster, kin, and group home providers in all areas of Health Ed.</li> </ul>

**Service 7: Educate Foster Youth about Their Rights and Privileges**

<b><u>Program</u></b>	<b><u>Barriers</u></b>	<b><u>County Action Steps</u></b>
Emancipation Resource Binder (ERB)	<p><i>Programmatic</i></p> <ul style="list-style-type: none"> <li>• Lack of information by youth and community service providers about the full rights and privileges of current and former foster youth (i.e. access to child welfare and probationary records, contact with siblings, funding and other support, etc.)</li> </ul>	<p><i>Programmatic Change</i></p> <ul style="list-style-type: none"> <li>• Develop an Emancipation Resource Binder (replicate Contra Costa's ERB), which includes firm county policies with regards to funding opportunities (i.e. Emancipated Youth Stipends, computers, transportation and other vouchers, etc.), including those available from ILSP and their child welfare workers, as well as all resources available in Solano and surrounding counties</li> <li>• Develop formal policy with the new ILSP provider (Alternative Family Services) about what youth can receive when they emancipate from the system. Make sure all incentives are equally available to all youth.</li> <li>• Educate all child welfare staff about what is available to each youth.</li> </ul>

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