

Some youth report positive experiences in the system that helped prepare them for life after foster care, including interactions with dedicated case workers, caring individuals at group homes, and foster parents who provided guidance. One young adult in Maine described her experience with her independent living coordinator by saying, “I love him to pieces. He’s such a great guy. . . . He actually cares. He comes up to you and talks to you . . .” As one young person from Iowa said, “Luckily I had good foster parents that helped me out and put me in the right direction, helped tell me where I’ve got to go, what’s available to me.”

However, focus group participants from California noted that negative effects from being in foster care will likely stay with them for the rest of their lives.

YOUTH 1	It depends on the individual. If you came out of foster care with dependencies and issues, unresolved issues that you carry around into your adulthood . . . It depends on the individual, but a lot of foster kids, they have the same baggage. Foster care tends to . . .
YOUTH 2	Takes your childhood.
YOUTH 3	I don’t want to get attached to anything. Things maybe, because I know that’s fine. But like people? No. People that I’ve been attached to, it takes awhile, I have to know them. Because it’s like you’re affected. You don’t know if you say something that might upset them and they stop calling. Or they change your case for some other one. Know what I mean? It’s things like that. That’s the baggage that I’ll carry around forever.

“Having family helps with identity formation, a sense of belonging, and the security of knowing that no matter what, you will always have a place to go. Having family to care about them can be the single most healing experience for many youth in foster care.”

SARAH GREENBLATT, *Casey Family Services*

A BRIEF HISTORY OF PERMANENCY AND FEDERAL CHILD WELFARE POLICY

Federal child welfare policy has evolved in such a way that federal financial structures can work at cross-purpose with federally-stated permanency objectives. The federal government’s role in setting child welfare policy began with the Social Security Act of 1935, which authorized small federal grants to states for child welfare services. The Social Security Act also established the Aid to Dependent Children (ADC) program to help states provide assistance to needy dependent children. In 1961, amendments to ADC created ADC-Foster Care, which provided states with federal matching funds for foster care payments made on behalf of children removed from their homes. Though the



SHARDE, former foster youth, Indiana

Aid to Families with Dependent Children (AFDC) program (as it was renamed in 1962) was eliminated in 1996, current eligibility for foster care remains tied to AFDC rules.¹⁷

The Child Abuse Prevention and Treatment Act (CAPTA), the first major federal legislation addressing child abuse and neglect, was passed in 1974. The Indian Child Welfare Act (ICWA) was passed in 1978 to help reduce the high numbers of Native American children being removed from their families and placed outside of their communities.¹⁸

Congress enacted sweeping federal child welfare legislation in 1980. In fact, today's child welfare system is founded on the Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272) which moved AFDC-Foster Care funds to a new Title IV-E in the Social Security Act. This landmark legislation established a major federal role in the administration and oversight of child welfare services for the first time. Key aspects of the Act were requirements that states make "reasonable efforts" to keep families together by providing both prevention and family reunification services; the creation of an adoption assistance program (Title IV-E Adoption Assistance); and the creation of the first significant role for the court system by requiring courts to review child welfare cases on a regular basis.¹⁹

In 1993, the Family Preservation and Family Support Services Program amended Title IV-B of the Social Security Act to add Subpart 2, which was intended to encourage and enable states and tribes to develop and operate family preservation and community-based family support services.²⁰

Then, in 1997, Congress again enacted significant changes to child welfare policy through the Adoption and Safe Families Act of 1997 (ASFA). ASFA contained provisions to ensure that child safety, permanency, and well-being are of paramount concern in any child welfare decision; to encourage states to expedite permanency decisions for children in foster care; to promote and to increase the number of adoptions of children in foster care; and to establish performance standards and a state accountability system whereby states face financial penalties for failure to demonstrate improvements in child outcomes. ASFA also updated the Family Preservation and Family Support Services Program from 1993, continuing federal funding for family support and family preservation services and expanding the program to support time-limited family reunification services and adoption promotion and support activities.²¹

Title IV-E provides federal funding to states to support foster care for children and youth. As amended by ASFA, Title IV-E places a greater emphasis on finding a permanent family for children and youth in foster care; however, other than administrative support, it does not fund services to achieve permanency through reunification with birth parents, adoption or guardianship. Title IV-E adoption assistance does provide post-adoption funding for subsidies



JJ, former foster youth, Michigan

for some children adopted from foster care, but funds are not provided under Title IV-E to support efforts to safely return children and youth to their families, to support guardianships with relatives and other caregivers, or to work intensively with youth to identify key adults in their lives who could provide permanent families for them. Some states have received a federal waiver to use Title IV-E to support guardianship.²² Furthermore, Indian tribes are not eligible to receive Title IV-E funds for children under their jurisdiction.²³ Because of constraints on how Title IV-E funds can be used, it does not provide states with needed resources to ensure that each child and youth in foster care leaves care with a permanent family.

It should be noted that Congress has recognized that the government has an obligation to help those youth who will leave foster care without a permanent family. In 1986, as part of the Consolidated Omnibus Budget Reconciliation Act, Congress authorized the Independent Living Program to assist adolescents who age out of the foster care system in transitioning from foster care to living on their own. It was replaced by the John H. Chafee Foster Care Independence Program created by the Foster Care Independence Act of 1999. This new program expanded funding and services up to age 21 for adolescents making the transition from foster care to self-sufficiency and for former foster youth.²⁴ The Chafee Act recognizes the importance of permanence for youth in foster care and includes language that says that permanency planning for adoption for older children and independent living services can be provided “concurrently.”

However, according to some experts interviewed for this report, the Chafee Act also created some disincentives to helping establish permanent family relationships for youth. Foster youth who leave care because they are reunited with their families, adopted or placed with guardians before the age of 16 lose access to education and training benefits. Some youth describe this situation as having to choose between a family and an education.

“I was lucky to be adopted, but now there’s nothing available to me because I was adopted. And I didn’t age out. And now there’s very few scholarships that I can apply to, that I know of now.”

Former foster youth, Iowa

“I’m smart and very good with money. If my aunt adopted me, I would lose my benefits. I mean adoption is great and everything, but you sacrifice a lot. It is crazy the way the system works.”

SHEILA, former foster youth, Maryland



ELIJAH, former foster youth, Hawaii



NEVER TOO OLD FOR A PERMANENT FAMILY

For older youth in foster care, child welfare agencies have historically seen their role as preparing the youth for “independence”—life on their own—when they leave foster care. Frequently, youth are placed on an “independent living” track when they reach a certain age, often 14 or 15, at which time the agency may discontinue efforts to return the youth to parents or extended family or find a new family for the youth through adoption or guardianship. Through independent living programs, states provide an array of services focusing on education (tutoring), every day activities (such as driving) and employment (career mentoring and interning), among other kinds of services that are designed to help youth live successfully on their own after aging out of foster care. For example, programs help youth obtain high school diplomas, teach budgeting and money management and provide counseling as well as providing many other services.²⁵ These independent living services should be continued in concert with permanency planning for every youth.

“The quality of a youth’s support system is the greatest predictor of how well a young person will do. Our obligation is to help youth maintain relationships, reconnect youth with important people in their lives, and help them develop new relationships.”

DOROTHY ANSELL, *University of Oklahoma, National Resource Center for Youth Services*

“When you have a family, you have everything. You are lucky to have parents and you should always remember that. When I won the Youth Spirit Award, it was exciting. And I have won many awards and things at school, too. But every time I walked up to receive my award, there was no family there to see me get it. Other kids had a mom or a dad to watch them get their award. It should have been a happy occasion. But for me ... I wish I had a family there for me.”

ANNA MARIA, *former foster youth, Connecticut*

CONCLUSION AND RECOMMENDATIONS FOR REFORM

A permanent and loving family is important for children to grow and flourish, but the need for a family doesn’t end when a child turns 18. Aging out of foster care without a permanent family means no one to walk you down the aisle when you get married, no one to cheer you on during your successes or comfort you during hard times, no one to be a grandparent to your children or celebrate the holidays with. The youth stories shared here, as well as academic studies, document the many harmful long-term effects that aging out of foster care has on a growing number of youth each year. We can do better.



"I have come to believe that the drive for family is hard-wired in us.

These young people know there is no substitute for that unconditional support family provides. Just like all of us, they need someone to write home to, and our foster care system should be helping them find that family."

GARY STANGLER, Executive Director, Jim Casey Youth Opportunities Initiative and member of the Pew Commission on Children in Foster Care



DAN, former foster youth, New York

As the youth interviewed in the focus groups so poignantly point out, they deserve what every other child has: a permanent, safe, loving family on whom they can count in their adult years. Much more needs to be done to improve the system so that all children in foster care achieve permanency with families, and to ensure that proper support is in place for those who may age out of the system without a permanent family.

There have been numerous policies identified to better serve youth who age out of foster care, including: extending foster care and Medicaid eligibility up to age 21 for all youth and providing services under the Chafee Foster Care Independence Act to all youth who leave care, not just youth aging out between the ages of 18 and 21.²⁶

Additionally, there is widespread recognition among leading child welfare organizations about the need for fundamental reforms to the federal foster care financing system to improve permanency outcomes for children and reverse the growing trend of youth aging out of foster care. Today, the majority of federal child welfare funds are restricted to supporting children in out-of-home foster care placements, and few incentives are in place to prevent the need for foster care in the first place, help reconnect youth with family, or find new families through adoption or guardianship.

The national, non-partisan Pew Commission on Children in Foster Care recommended a reliable federal financing system with both increased flexibility and accountability as a means to prevent children from languishing in foster care. A broad spectrum of other child welfare organizations also advocate for changes to the way the federal government's child welfare system finances services for children in foster care. New federal financing policies, combined with recently enacted state court improvements,²⁷ would provide professionals who serve children and families with better tools to help more families stay together, ensure children in foster care exit the system for safe, permanent families, and reduce the number of youth who age out each year.

Specifically, the following policy options would address the problem of growing numbers of youth aging out of our foster care each year:

- 1. Establish a federal foster care financing system that states can rely on to be sufficient and flexible.** Today's federal IV-E financing incentives favor foster care over other services that could keep families together, reunify them quickly and safely, and, when that is not possible, help children leave foster care to join safe, permanent families through adoption or guardianship. Addressing the inflexibility of current federal IV-E funding is critical to ensuring that case workers and other professionals can deliver services that are tailored to meet the needs of each child and family they serve. For example, services such as family counseling or referrals for drug treatment programs can both prevent the need for foster care or help some children reunify with their families.

With more flexible funds, states and tribes could help find more children permanent families through activities like increased foster or adoptive parent recruiting or help new permanent families be successful when reunification is not possible by providing more post-placement supports.

2. **Help more children leave foster care by supporting federal guardianships for relatives and other caregivers.** In most states, relatives and others who become permanent, legal guardians for a child in foster care lose federal financial assistance and services once the child exits foster care (some adoptions receive federal support). Although some relatives decide to adopt their kin, adoption is not a viable option for others. For example, it may not be appropriate to terminate parental rights for a parent with significant disabilities who physically cannot parent, but wants to remain in the lives of the children who love her. Or an older youth who maintains close ties with his or her birth parents may not want those parental rights terminated. An estimated 20,000 children living in long-term arrangements with relatives today could leave foster care if federal foster care funds could be used to support guardianship.
3. **Reward states for reducing the number of children in foster care and achieving all forms of permanence.** States should be rewarded for reducing the number of children in foster care, rather than punished by losing federal funds for case workers. Under the current system, states lose money for caseworkers when the caseload declines. States should be allowed to reinvest savings from safely reducing their foster care case loads into their child welfare programs.
4. **Make all children eligible for federal foster care support.** The link between eligibility for federal foster care support under Title IV-E to eligibility for the now-defunct Aid to Families with Dependent Children program should be removed.²⁸ Social workers should be focused on helping children find safe, permanent families, rather than wasting hours chasing down paperwork related to a parent's eligibility for a program that hasn't existed for 10 years. Native American children under the jurisdiction of a tribal government are also not eligible to receive the benefits of Title IV-E, since tribes are not eligible to apply for this federal program. Tribal governments should be allowed to apply for Title IV-E funds directly and operate the program for children under their care.

Every day we wait for financing reform, 67 more children age out of the system, on their own, because we have failed to find them families they can count on.



SETH, former foster youth, Oregon

APPENDIX A

NUMBER AND PERCENT OF YOUTH AGING OUT BY STATE (2000–2004)²⁹

State	2000		2001		2002		2003		2004	
	#	%	#	%	#	%	#	%	#	%
AK	48	5.3%	33	3.3%	26	3.1%	27	3.5%	30	4.2%
AL	103	4.4%	110	4.8%	115	4.3%	177	6.3%	58	1.9%
AR	172	4.7%	166	5.1%	223	7.0%	195	5.7%	199	6.1%
AZ	450	8.9%	363	7.7%	400	8.4%	412	8.6%	453	8.9%
CA	4,489	9.0%	4,046	9.2%	4,011	8.8%	4,486	10.1%	4,535	10.5%
CO	252	4.6%	297	5.7%	329	5.2%	436	6.0%	399	5.3%
CT	53	2.2%	32	1.6%	32	1.1%	46	2.1%	34	1.6%
DC	25	7.9%	49	12.6%	54	13.6%	71	9.4%	118	11.5%
DE	46	5.2%	50	5.5%	70	7.5%	67	8.3%	63	8.4%
FL	900	5.8%	828	4.9%	939	5.4%	1,594	7.4%	1,332	6.3%
GA	56	1.2%	112	1.5%	318	3.4%	402	4.0%	621	5.6%
HI	121	7.2%	139	7.2%	138	6.6%	120	5.7%	147	6.7%
IA	249	4.6%	269	4.7%	286	5.1%	291	5.1%	319	5.8%
ID	44	4.4%	58	5.4%	71	6.8%	66	6.0%	77	5.8%
IL	1,350	13.1%	1,131	13.5%	1,250	15.7%	1,238	17.7%	1,020	15.8%
IN	294	5.7%	260	5.5%	257	5.6%	254	5.2%	312	5.7%
KS	149	8.3%	160	8.9%	195	11.4%	233	10.2%	259	11.7%
KY	232	6.9%	303	7.2%	353	8.0%	413	8.3%	472	9.3%
LA	298	9.5%	311	9.8%	291	9.7%	279	9.7%	265	9.9%
MA	557	8.7%	542	8.7%	726	13.1%	759	12.4%	731	11.5%
MD	230	7.4%	231	7.5%	384	11.1%	295	9.6%	361	11.1%
ME	15	2.1%	24	3.4%	33	4.5%	209	22.4%	196	20.3%
MI	564	7.2%	485	5.8%	607	6.2%	664	7.4%	667	7.2%
MN	527	5.3%	520	5.6%	561	5.8%	607	7.2%	624	8.1%
MO	600	10.9%	676	11.9%	275	4.3%	337	5.1%	329	5.4%
MS	62	3.6%	62	3.7%	89	5.9%	62	4.1%	116	7.4%
MT	90	6.8%	99	6.6%	82	6.4%	76	7.0%	92	9.3%
NC	277	6.2%	302	5.8%	328	6.1%	387	7.6%	389	7.5%
ND	43	5.1%	46	5.6%	58	6.7%	60	6.8%	62	7.1%
NE	2	0.1%	0	0.0%	83	2.6%	86	2.7%	101	3.2%
NH	57	11.6%	54	11.5%	56	10.9%	71	11.6%	60	11.5%
NJ	307	7.5%	289	6.3%	290	5.4%	330	6.0%	418	5.9%
NM	26	1.5%	13	0.7%	11	0.7%	22	1.5%	41	2.2%
NV	2	0.5%	40	1.3%	42	1.4%	99	3.1%	103	2.9%
NY	1,568	7.7%	1,324	7.1%	1,498	8.3%	1,471	8.7%	1,481	9.2%
OH	1,028	7.3%	1,013	7.2%	1,161	8.1%	1,211	8.4%	1,293	9.5%
OK	54	1.0%	280	4.8%	340	5.4%	283	4.9%	315	6.2%
OR	147	3.2%	159	3.5%	157	3.4%	195	4.6%	183	4.2%
PA	688	5.8%	692	5.6%	742	6.2%	844	7.0%	1,025	8.1%
RI	82	6.1%	77	6.3%	62	4.5%	85	6.3%	82	5.6%
SC	271	8.6%	214	6.9%	250	7.3%	311	9.6%	333	10.6%
SD	23	2.2%	42	3.6%	41	3.6%	58	5.6%	62	5.5%
TN	596	13.6%	581	11.4%	488	9.0%	658	15.3%	735	15.1%
TX	365	4.6%	259	2.9%	288	3.2%	297	2.9%	325	3.0%
UT	172	7.6%	163	8.1%	170	8.0%	146	8.0%	162	9.0%
VA	542	29.7%	556	26.5%	510	22.1%	587	23.9%	586	21.1%
VT	105	14.9%	52	9.0%	89	13.5%	119	15.7%	108	14.2%
WA	333	4.7%	327	5.1%	327	5.1%	338	5.4%	357	5.9%
WV	87	3.9%	81	3.5%	99	4.0%	137	10.8%	152	11.8%
WI	254	6.3%	336	7.7%	334	6.4%	238	4.1%	475	8.4%
WY	36	4.9%	45	6.5%	62	8.5%	61	7.6%	41	4.6%
PR	8	0.8%	8	0.8%	13	0.5%	25	1.0%	23	1.2%

NOTE: AGING OUT PERCENT CALCULATED WITH DENOMINATOR OF THE TOTAL NUMBER OF CHILDREN AND YOUTH WHO EXITED FOSTER CARE.

APPENDIX B

CHARACTERISTICS OF FOCUS GROUP PARTICIPANTS AND METHODOLOGY

The 54 youth focus group participants were 15- to 24-year-olds (mean age = 18). Youth were recruited by the liaisons at the Jim Casey Youth Opportunities sites, where the focus groups were conducted. Two-thirds of the participants (68.5%) were female. Almost half of the participants were white (46.3%), 18.5% were Latino/a, 13% were African American, and 18.5% were mixed race. One respondent was Native American, and one respondent did not report race.

The respondents reported a variety of living experiences in foster care. During the pencil and paper demographic survey they filled out prior to the discussion, many were hard pressed to know how to define their current living situation. We asked youth to classify themselves as “in care” or “out of care.” Several of the youth in Bangor had “V-9s”, a plan for living that kept them semi-independent and semi-connected to “the system.” Several participants in Denver and Detroit had been brought to the site from juvenile correction facilities, and were understandably unclear about whether they should indicate that they lived in a “group home” or “other.” In addition, given the research interest in youths’ feelings of permanency, several had difficulty knowing how to indicate the fluid nature of their status—moving from family-based foster care to group home and back again, or living long-term with a foster family but deciding against permanency solely on the basis of financial reasons. With these limitations in mind, 59.3% indicated that they were “out of care” and 40.7% indicated that they were “in care.” The largest number of participants reported they were living alone (29.6%), and the next most common living situation was living with a foster family (24.1%). Eleven percent said they lived with a relative, and a comparable number lived with a friend or significant other. 5.6% lived in a group home. 16.7% lived in an “other” situation (including a correctional facility and a homeless shelter). Two (sisters) had been reunited with their birth mother.

Youth were asked by site liaisons to attend a 60-90 minute focus group discussion at a facility in their city. The groups were held in the evenings (6pm-8pm) between March 5th and March 9th. A moderator led each group in a discussion (average length of time, 90 minutes) which focused on three primary topics: (1) identifying “important people” in their lives and defining their characteristics; (2) describing their feelings about being “in care” and “out of care” and the process of (or expectations for) transitioning to adulthood; and (3) brainstorming about ways in which foster care might be “fixed,” with a focus on ways of strengthening relationship bonds.

Youth were provided dinner and a monetary compensation for their voluntary participation in the research. Consent forms were obtained for minors and assent forms were obtained for all participants (in addition to written assent, participants were verbally told of their rights as research participants). Participants were told they would receive copies of the final report, and were guaranteed anonymity and confidentiality except in the situation where they may be presently at risk.

APPENDIX C

2004 NUMBER OF FOSTER YOUTH AGING OUT AND LENGTH OF STAY BY STATE³⁰

STATE RANK	STATE	Number of Youth Who Age Out	Average Stay for Youth Who Age Out (months)	Average Stay for Youth Who Age Out (years)	Percent Who Age Out	Total Number of Children Who Exited Foster Care	Average Stay (months)	Average Stay (years)
44	AK	30	48.6	4.05	4.2%	715	24.0	2.0
50	AL	58	70.2	5.85	1.9%	3,042	17.3	1.4
32	AR	199	40.7	3.39	6.1%	3,264	9.7	0.8
20	AZ	453	46.1	3.84	8.9%	5,108	13.9	1.2
13	CA	4,535	72.5	6.04	10.5%	43,170	25.6	2.1
42	CO	399	45.6	3.80	5.3%	7,577	12.6	1.0
51	CT	34	78.9	6.58	1.6%	2,119	19.6	1.6
8	DC	118	81.1	6.76	11.5%	1,024	46.5	3.9
21	DE	63	35.3	2.94	8.4%	749	10.6	0.9
30	FL	1,332	47.0	3.91	6.3%	21,097	18.7	1.6
38	GA	621	57.9	4.82	5.6%	11,094	15.6	1.3
29	HI	147	36.0	3.00	6.7%	2,199	13.9	1.2
35	IA	319	37.7	3.14	5.8%	5,484	10.4	0.9
36	ID	77	36.2	3.02	5.8%	1,337	11.8	1.0
3	IL	1,020	107.6	8.96	15.8%	6,472	47.5	4.0
37	IN	312	54.6	4.55	5.7%	5,470	17.5	1.5
7	KS	259	42.5	3.54	11.7%	2,216	25.4	2.1
16	KY	472	38.2	3.18	9.3%	5,095	15.4	1.3
14	LA	265	70.1	5.84	9.9%	2,671	22.0	1.8
9	MA	731	51.7	4.31	11.5%	6,347	22.4	1.9
11	MD	361	83.8	6.98	11.1%	3,265	35.1	2.9
2	ME	196	62.6	5.21	20.3%	967	34.6	2.9
27	MI	667	59.0	4.91	7.2%	9,234	26.2	2.2
23	MN	624	56.0	4.67	8.1%	7,718	11.8	1.0
41	MO	329	65.9	5.49	5.4%	6,047	21.8	1.8
26	MS	116	64.7	5.39	7.4%	1,560	22.6	1.9
17	MT	92	54.7	4.56	9.3%	992	18.8	1.6
25	NC	389	48.7	4.06	7.5%	5,194	20.1	1.7
28	ND	62	41.9	3.49	7.1%	874	14.4	1.2
46	NE	101	29.5	2.46	3.2%	3,118	20.5	1.7
10	NH	60	56.8	4.74	11.5%	523	26.6	2.2
33	NJ	418	44.9	3.74	5.9%	7,101	21.7	1.8
49	NM	41	54.2	4.52	2.2%	1,841	9.4	0.8
48	NV	103	68.8	5.74	2.9%	3,575	11.5	1.0
18	NY	1,481	83.3	6.94	9.2%	16,085	37.3	3.1
15	OH	1,293	48.4	4.03	9.5%	13,574	17.1	1.4
31	OK	315	45.7	3.80	6.2%	5,063	17.8	1.5
45	OR	183	71.7	5.97	4.2%	4,340	22.3	1.9
24	PA	1,025	53.2	4.43	8.1%	12,625	21.0	1.7
39	RI	82	65.9	5.49	5.6%	1,462	17.1	1.4
12	SC	333	68.0	5.67	10.6%	3,150	18.4	1.5
40	SD	62	40.5	3.37	5.5%	1,125	11.9	1.0
4	TN	735	37.9	3.16	15.1%	4,877	20.5	1.7
47	TX	325	58.7	4.89	3.0%	10,842	21.7	1.8
19	UT	162	34.5	2.87	9.0%	1,791	11.9	1.0
1	VA	586	43.6	3.63	21.1%	2,772	25.0	2.1
5	VT	108	50.1	4.18	14.2%	763	23.5	2.0
34	WA	357	48.2	4.01	5.9%	6,082	16.7	1.4
22	WI	475	54.0	4.50	8.4%	5,682	21.6	1.8
6	WV	152	65.8	5.48	11.8%	1,283	26.5	2.2
43	WY	41	32.6	2.71	4.6%	885	11.0	0.9
52	PR	23	69.8	5.82	1.2%	1,937	20.4	1.7
Totals		22,741				282,597		

THE STATES ARE RANKED ACCORDING TO PERCENTAGE OF YOUTH WHO AGED OUT WITH 1 BEING THE HIGHEST PERCENTAGE.

APPENDIX D

COMPARISON OF OUTCOMES FOR YOUTH WHO AGE OUT OF FOSTER CARE: THE MIDWEST EVALUATION AND THE NORTHWEST ALUMNI STUDY³¹

EDUCATIONAL OUTCOMES	Over 33% of study participants had not received a high school diploma or GED, compared to 10 % in the national sample. Study participants remaining in care were twice as likely to be enrolled in an educational program as those discharged.	Over 85% of alumni had completed high school, with 28% obtaining a GED. The rate of study participants completing a bachelor's or higher degree was approximately 2%, compared with a national rate of 24%.
HEALTH/MENTAL HEALTH OUTCOMES	Over 75% of young adults reported good health, although participants were more likely to report limiting health conditions than the national sample. 33% of young adults reported mental health issues, including Post Traumatic Stress Disorder (PTSD), major depression, and alcohol and substance abuse. Study participants were twice as likely as same-age peers in the national sample to have a child.	33% of study participants had no health insurance, double the national rate. More than half of study participants reported clinical levels of at least one mental health issue in the last month, with 20% reporting three or more mental health issues. PTSD was prevalent, with 25% of alumni experiencing PTSD symptoms in the prior year.
EMPLOYMENT/INCOME OUTCOMES	Employment of study participants was found to be "sporadic," with 90% earning less than \$10,000 over the past year. Over 25% of study participants were categorized as food-insecure. Discharged young adults were twice as likely as those remaining in care to be unemployed and out of school and three times more likely than the national sample.	The employment rate for study participants was 80%, compared to 95% for same-aged members of the general population. 33% of study participants had incomes at or below the poverty level, a figure three times that of the national poverty rate.
LIVING ARRANGEMENTS	Almost 30% of young adults discharged from care lived with their biological parents or other relatives, with 10% continuing to live with their foster parents. 29% of young adults reported living in their "own place." One in seven reported experiencing homelessness at least once since discharge.	More than one in five alumni reported experiencing homelessness since discharge from foster care.
CONTACT WITH THE CRIMINAL JUSTICE SYSTEM	28% of study participants reported having been arrested and almost 20% had been incarcerated since the first interview.	Not addressed.

ENDNOTES

- ¹ Kids Are Waiting analysis from data on the US Department of Health and Human Services' website. Data can be accessed at: www.acf.dhhs.gov/programs/cb/stats_research/index.htm.
- ² Mark E. Courtney, Amy Dworsky, Sherri Terao, Noel Bost, Gretchen Ruth Cusick, Thomas Keller, and Judy Havlicek. "Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Age 19," Chapin Hall, 2005.
- ³ Northwest Foster Care Alumni Study, Casey Family Programs, 1998.
- ⁴ Courtney, M.E. & Dworsky, A. (2005). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 19*. Chicago: Chapin Hall Center for Children.
- ⁵ Pecora, P.J., Kessler, R.C., Williams, J., O'Brien, K., Downs, A.C., English, D., White, J., Hiripi, E., White, C.R., Wiggins, T., and Holmes, K. (2005). *Improving family foster care: Findings from the Northwest foster care alumni study*. Seattle, WA: Casey Family Programs.
- ⁶ National Census Bureau. "Educational Attainment in the United States: 2004." Accessed April 12, 2007: <http://www.census.gov/Press-Release/www/releases/archives/04eductableA.xls>
- ⁷ National Data Archive on Child Abuse and Neglect. (2006). Available at: http://www.ndacan.cornell.edu/NDACAN/Datasets/Abstracts/DatasetAbstract_AFCARS_General.html. Unless otherwise noted, data and analyses contained within this report were produced by Dr. Elliott Smith or Michael Dineen, National Data Archive on Child Abuse and Neglect, and are based on the Adoption and Foster Care Analysis and Reporting System data from 1998-2004.
- ⁸ National Governors Association Center for Best Practices. (2007). Issue Brief: State policies to help youth transition out of foster care. Washington, DC.
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- ¹² Children's Advocacy Institute. (2007). Expanding transitional services for emancipated foster youth: An investment in California's tomorrow. San Diego: University of San Diego School of Law.
- ¹³ The Midwest Study, a longitudinal study conducted in three stages, involves interviews with youth from Illinois, Iowa, and Wisconsin. In 2005, the Midwest Study published data from the second phase of interviews administered in 2004, when study participants were nineteen years old. At the time of interview, approximately half of the 603 participants in the study had not been discharged from foster care (Illinois courts allow young adults to remain under state agency supervision until the age of 21). Courtney, M.E. & Dworsky, A. (2005). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 19*. Chicago: Chapin Hall Center for Children.
- ¹⁴ Child Welfare Information Gateway (2006). *Sibling Issues in Foster Care and Adoption Bulletin for Professionals*. Accessed 5/2/2007
- ¹⁵ Camp to Belong; <http://www.camptobelong.org/home.htm> (Accessed: May 4, 2007.) Child Welfare Watch, *Uninvited Guests: Teens in the New York City Foster Care System*. Fall, 2002. Available on-line at: http://www.citylimits.org/images_pdfs/pdfs/CWW%20Teens%20Fall%202002.pdf (accessed May 15, 2007).
- ¹⁶ See Appendix B for all states. National Data Archive on Child Abuse and Neglect. (2006). Op Cit.
- ¹⁷ Murray, K.O. & Gesirich, S. (n.d.). A brief legislative history of the child welfare system. Pew Commission on Children in Foster Care. <http://pewfostercare.org/research/docs/Legislative.pdf> (accessed May 1, 2007).
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- ²⁰ "Family Preservation and Family Support Services." National Resource Center for Respite and Crisis Care Services, ARCH National Respite Network, Factsheet Number 37. <http://www.archrespite.org/archfs37.htm> (accessed April 27, 2007).
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- ²⁵ These services can be provided with federal funds through the Chafee Foster Care Independence Program. National Foster Care Coalition. (2000). *Frequently Asked Questions: About the Foster Care Independence Act and the John H. Chafee Foster Care Independence Program*. <http://www.casey.org/NR/rdonlyres/E8E5EC9B-2C0B-496B-A165-5A55D2F793A5/459/ChafeeFAQ11.pdf> (accessed February 19, 2007).
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- ²⁷ These were enacted through the Strengthening Courts Amendments of the Deficit Reduction Act of 2005.
- ²⁸ *Fix the Foster Care Lookback (2007)*. Kids Are Waiting: Fix Foster Care Now, a project of The Pew Charitable Trusts.
- ²⁹ National Data Archive on Child Abuse and Neglect. (2006). Op cit.
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- ³¹ Courtney, M.E. & Dworsky, A. (2005). *Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 19*. Chicago: Chapin Hall Center for Children; Pecora, P.J., Kessler, R.C., Williams, J., O'Brien, K., Downs, A.C., English, D., White, J., Hiripi, E., White, C.R., Wiggins, T., and Holmes, K. (2005). *Improving family foster care: Findings from the Northwest foster care alumni study*. Seattle, WA: Casey Family Programs.

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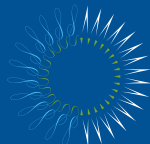
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