

NATIONAL YOUTH IN TRANSITION DATABASE

Survey Summary Brief, California 2015

Outcomes for the First NYTD Cohort of Youth Ages 17, 19 and 21

Abstract

As part of a nationwide effort to understand the needs of youth transitioning out of the foster care system, the California Department of Social Services conducted surveys with youth in the Child Welfare System (or exiting the system) at ages 17, 19, and 21 in 2011, 2013, and 2015, respectively. This report summarizes survey findings for this first cohort of youth in the areas of financial self-sufficiency, education, connections with adults, access to health insurance and exposure to high risk outcomes. Results indicate that foster youth continue to struggle to accomplish critical developmental tasks and have high rates of homelessness, substance abuse referral, incarceration, and having children. Youth who remained in foster care reported higher rates of educational participation and access to health insurance and lower exposure to high risk outcomes. Recent initiatives to provide support to youth as they exit foster care hold promise for improving conditions for youth with child welfare experience.

Background

In recent years, there has been increasing awareness of the challenges faced by youth exiting foster care. Youth who come of age in the foster care system often have experienced multiple traumatic events, unstable placements, stays in group homes, and other significant challenges. These challenges affect foster youths' ability to achieve developmental tasks such as establishing meaningful relationships, completing educational milestones, and attaining financial independence. While numerous policies and programs have sought to address these challenges, many youth continue to experience difficulties in these areas.

The National Youth in Transition Data Base (NYTD) is a nationwide initiative to better understand the needs of foster youth as they transition out of foster care. To gather information on these needs, surveys exploring key developmental tasks and outcomes were administered to youth in the child welfare system at ages 17, 19, and 21¹. Data collection for this report began in 2011, when the first survey was administered to 17-year-old youth in foster care. The survey was administered again in 2013 to 19-year-old youth who had completed the survey at age 17 and again in 2015 to 21-year-old youth who submitted survey responses at age 17. In this Summary Brief, the findings from the first complete NYTD cohort for the State of California are presented.

Another purpose of the NYTD has been to gather information on the independent living services provided to current and former foster youth. Results from this data collection effort for the state of California will be presented in future reports; the current report focuses solely on survey response data.

¹ For the remainder of this report, the terms "19-year-old," and "21-year-old" are used to refer to youth who were administered the survey within a six month period of the date they turned 19 and 21, respectively.

Survey Participants

In Federal Fiscal Year (FFY) 2011 (October 1, 2010 – September 30, 2011), 5,273 youth were identified as eligible to take the survey at age 17. At the end of the data collection period, 2,295 (43.5%) youth had completed the survey. As noted in Table 1, a substantial percentage of youth either 1) declined to participate, 2) were reported as “runaway or missing” or 3) were not located.

For the first cohort of youth that completed the survey at age 17, response rates in the subsequent data collection waves were much higher. In FFY 2013, 1,819 youth² were eligible for the follow-up survey at age 19, and 1,239 (68.1%) participated. In FFY 2015, 1,819 youth were eligible for the follow-up survey at age 21, and 1,347 (74.1%) participated. It must be noted that the survey process differed across waves of data collection. Specifically, the California Department of Social Services (CDSS) entered into a contract with the University of California, Davis to collect survey data from eligible youth for the first wave in 2011, subsequent waves of data were collected by CDSS and counties.

Different strategies used by the two institutions may have contributed to different response rates across waves of data collection. For the second and third waves, targeted efforts to increase response rates yielded greater participation rates. Strategies used included 1) a reduction in the number of questions on the survey (the first survey administration added a substantial number of questions to the NYTD core questions – these were removed in subsequent administrations), 2) increased follow-up contacts, 3) the creation of a web-based option for taking the survey, and 4) an increased rate of compensation (17-year-olds received \$5, the rate was increased to \$50 at age 19, and 21-year-olds received \$100).

Table 1: Survey Participants

Survey Status	Age 17 (n=5,273)	Age 19 (n=1,819)	Age 21 (n=1,819)
Participated	43.5%	68.1%	74.1%
Declined	16.1%	9.7%	2.9%
Incapacitated	1%	0.5%	0.3%
Incarcerated	4.2%	1.8%	1.6%
Runaway or missing	13.1%	0%	0.6%
Unable to locate	22.1%	19.8%	20.2%
Death	0%	0.1%	0.3%

Demographics of Survey Participants

Youth who participated in the survey at age 17 and in the follow up surveys at age 19 and 21 were demographically similar. This first cohort of youth is racially diverse and generally represented equally by both genders. All youth surveyed at age 17 were in foster care. At the time of the third survey wave, 56% of youth surveyed were no longer in foster care³. As noted above, a substantial percentage of foster youth at age 17 did not participate in the survey during the initial wave of data collection. Summary statistics conducted on non-respondent’s demographic variables (n=2,978, 56.5%) indicate that this population was similar to respondents in terms of race/ethnicity and gender (see Table 2).

² Of the 2,295 youth that participated at age 17, a small percentage participated after the deadline; these youth were not included in the NYTD submission and thus were ineligible to take the survey at age 19. However, data from their surveys is included in the results for 17-year-olds.

³ Consistent with changes in Federal policy, California has opted to extend Title IV-E assistance to youth over age 18, permitting some youth to remain in foster care voluntarily to age 21. At the time of the third survey administration, youth who took the survey prior to their 21st birthday were still eligible to remain in foster care. For this reason, a percentage of the “21-year-old” youth surveyed report remaining in care.

Table 2: Demographics of Survey Participants at Ages 17, 19 and 21, Cohort 1

Race	Age 17 (n=5,273)		Age 19 (n=1,239)	Age 21 (n=1,347)
	Participants (n=2,295)	Non-Respondents (n=2,978)		
American Indian/Alaska Native	1.0%	0.9%	0.6%	0.3%
Asian	2.8%	2.7%	3.2%	2.5%
Black or African American	25.8%	27.5%	26.5%	25.9%
White	25.5%	24.7%	25.5%	27.1%
Latino	42.5%	43.9%	42.4%	43.6%
Missing	2.4%	0.3%	1.8%	0.6%
Gender				
Male	49.8%	56.6%	43.1%	44.3%
Female	50.2%	43.4%	56.9%	55.7%

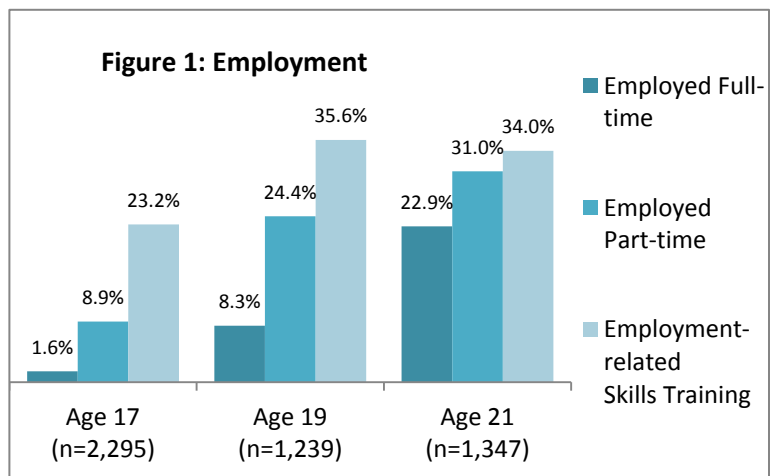
Findings

The purpose of the NYTD survey is to compile data regarding the experiences of transitioning foster youth in the following areas: financial stability, educational outcomes, connection with adults, homelessness, high risk outcomes (including having children, substance abuse and incarceration), and access to health insurance⁴.

Outcome 1: Financial Self-Sufficiency⁵

To gain an understanding of youths' financial status, the NYTD survey poses six questions regarding employment (full-time and part-time), participation in an internship, job training, or other employment related activities, and access to Social Security or educationally-based financial assistance. Findings from the administration of the baseline (initial survey) and follow-up surveys indicate the following:

Employment: As shown in Figure 1, a significant proportion of youth aged 17 reported being involved in work-related activities (10.5% employed either full-time or part-time, and 23.2% received employment related skills training). At both age 19 and 21, the proportion of

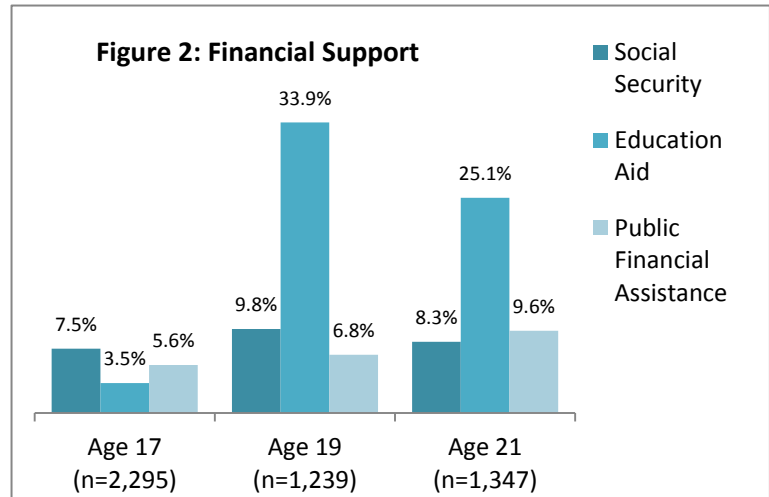


⁴ See the Administration of Children and Families, Federal Register document, regulations: 45 CFR Part 1356 for complete definitions of NYTD data elements.

⁵ Financial self-sufficiency includes whether or not the youth reports (1) being employed full-time, (2) being employed part-time, (3) completing training that acquired employment-related skills, and/or (3) receiving financial support such as Social Security, educational aid, or some other type of financial assistance.

youth with job experiences increased: 35.6% of youth aged 19 and 34.0% of youth aged 21 received employment training. The percentage of youth reporting full-time employment increased from 1.6% at age 17 to 8.3% at age 19 and 22.9% at age 21.

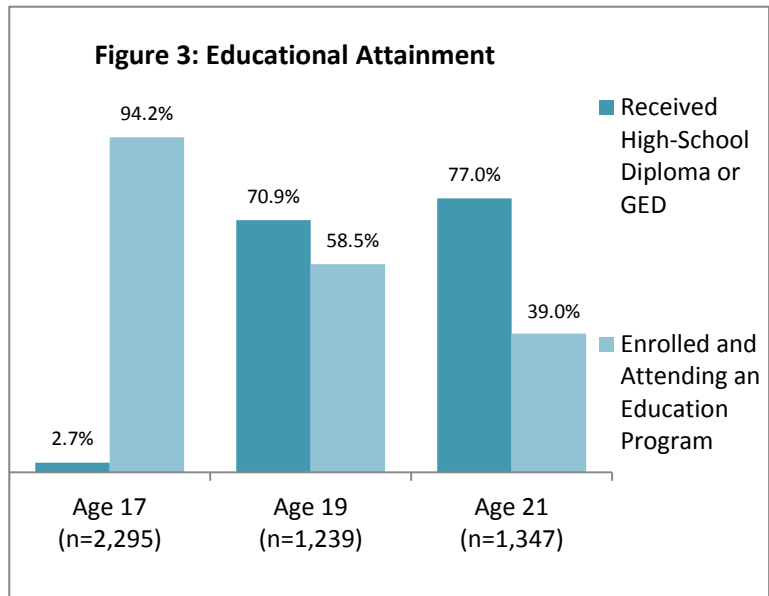
Financial Support: As shown in Figure 2, while a small percentage of youth reported receiving some form of financial assistance at age 17, this number increased for youth ages 19 and 21. This increase was particularly dramatic for educationally-based aid: a third of youth age 19 and a quarter of youth age 21 reported receiving educationally based aid. The NYTD defines Public Financial Assistance as “ongoing welfare payments from the government to support your basic needs.”



Outcome 2: Educational Attainment

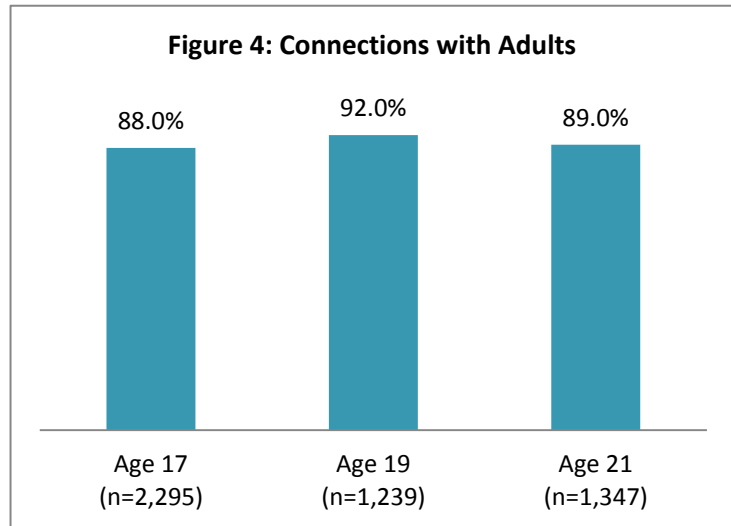
While educational attainment is a critical precursor to employment and financial advancement, many youth in the Child Welfare System (CWS) do not complete high school or attend post-secondary educational programs. To assess the level of educational attainment of youth in the CWS, NYTD surveys youth regarding types of educational programs attended and completed.

As shown in Figure 3, the majority of youth surveyed at age 17 (94.2%) were enrolled in an educational program. By age 19 the majority of youth had received either a high school diploma or GED (70.9%). This number increased to 77.0% by age 21. While the percentage of youth enrolled in educational programs decreased at each age group, a portion of 21-year-old youth continued to report enrollment in educational activities (39.0%).



Outcome 3: Connections with Adults

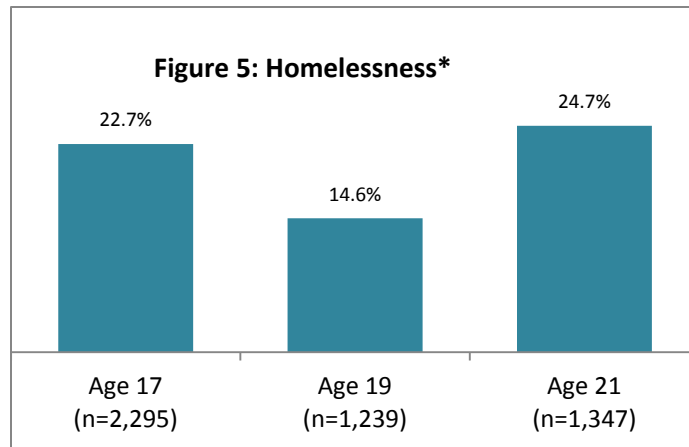
Adolescents must establish and maintain positive relationships with other adults to successfully transition to adulthood. The NYTD survey asks youth whether there is currently at least one adult in their life, other than a caseworker, to whom they can go for advice or emotional support⁶. As shown in Figure 4, the majority of youth (88.0%) surveyed at age 17 reported having a positive adult connection in their lives. Similarly, at age 19 and 21 most youth reported having a positive connection with an adult in their lives (92.0% and 89.0% respectively).



Outcome 4: Experiences with Homelessness

Homelessness is a critical issue affecting youth in the CWS. Not only do many youth experience episodes of homelessness prior to exiting the foster care system, a substantial portion of youth continue to experience challenges obtaining permanent housing as they transition to independence. The NYTD surveys youth both about prior experiences of homelessness (at age 17) and in the past two years (at age 19 and 21).

- A significant percentage of California youth who responded to the survey at age 17 had experienced homelessness at some point in their lifetime (22.7%) (see Figure 5).
- At age 19, 14.6% of youth surveyed reported having experienced homelessness at some point in the past two years (see Figure 5).
- At age 21 this percentage increased: 24.7% reported having been homeless at some point within the past two years (see Figure 5).



*At age 17, participants are reporting lifetime rates, at ages 19 and 21, participants are asked about the occurrence of this event "in the past two years."

⁶ "Adult" is considered to be someone other than the youth's spouse/partner, boyfriend/girlfriend, or current caseworker.

Outcome 5: High-Risk Outcomes

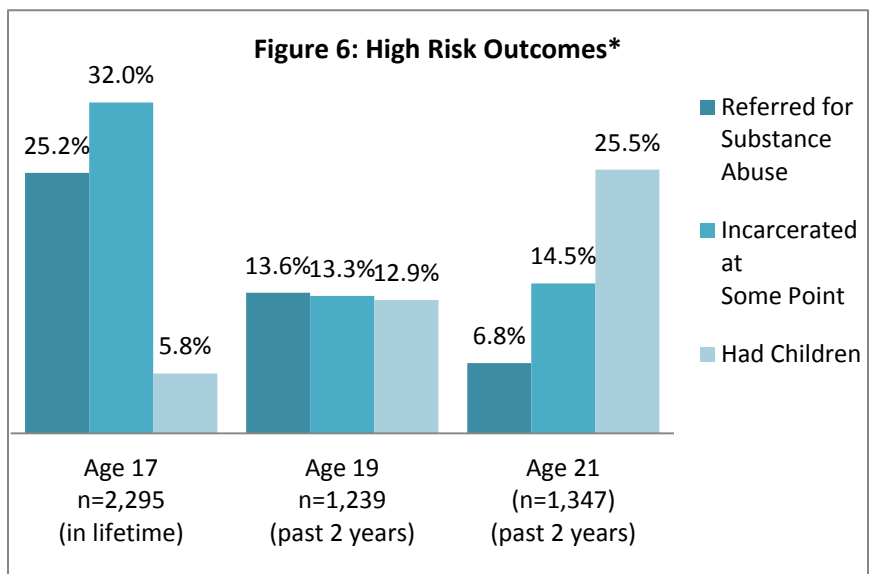
The NYTD survey collects information on the prevalence of outcomes related to high risk behaviors in three categories: substance abuse, incarceration, and having children⁷. Results from the survey indicate a high prevalence of high-risk outcomes for youth surveyed. Specifically, more than one quarter (27.7%) of 17-year-olds surveyed had experienced a high-risk outcome. Additionally, almost one quarter (22.5%) of 19-year-olds reported experiencing at least one high-risk outcome within the past two years. *It must be noted that 17-year-olds were asked about lifetime experiences, while 19- and 21-year-olds were asked whether they had experienced these outcomes in the past two years.* The difference in these questions may account for the higher percentages observed for 17-year-olds in some of the high risk categories.

Substance Abuse: To measure substance abuse, the NYTD survey asks participants whether or not they have received a referral for substance abuse services. As shown in Figure 6, at age 17, one quarter (25.2%) of youth reported having been referred for substance abuse assessment or counseling at some point during their lifetimes. Between the ages of 17 and 19, 13.6% of youth reported having been referred for an assessment or counseling. At age 21, number of youth referred for substance abuse assessment or counseling in past two years continued to trend down to 6.8%.

Incarcerations: At age 17, one-third (32.0%) of youth reported a history of incarceration. Approximately 13.3% of 19-year-olds and 14.5% 21-year-olds reported having been incarcerated within the past two years (see Figure 6).

Having Children: As shown in Figure 6, 5.8% of youth had a child at age 17. At age 19, the number of youth reporting having given birth to or fathering a child increased to 12.9% and by age 21, 25.5% of youth reported having a child in the past two years. Only 6% of the 921 youth at age 19 who had children were married at the time of the child’s birth.

Concurrent Risk Factors: At age 21, nearly one-third (31.0%) of surveyed youth reported a single factor (among substance abuse, incarceration and having a child), 6.0% reported two factors, and 1.4% reported all three factors.



*At age 17, participants are reporting lifetime rates, at ages 19 and 21, participants are asked about the occurrence of this event “in the past two years.”

⁷ High-risk outcomes include histories of substance abuse assessment or counseling, incarceration, or having children. The NYTD survey also asks youth if they were married at the time of the child’s birth.

Outcome 6: Access to Health Insurance

Although youth in Title IV-E foster care are categorically eligible to receive Medi-Cal and are also eligible for health insurance under the Patient Protection and Affordable Care Act (ACA), many youth do not enroll in health insurance programs and do not access health care resources. The NYTD survey asks youth whether they are receiving Medi-Cal or some other type of health insurance coverage.

- The majority of youth at age 17 reported having health insurance. Most reported having Medi-Cal (80.7%). The percentage of youth reporting Medi-Cal and/or another type of health insurance was 85.1% (8.9% had both). However, a percentage of youth (8.1%), reported not knowing if they had Medi-Cal coverage.
- At age 19, 81.0% of youth reported having Medi-Cal, 86.3% reported have Medi-Cal and/or another type of health insurance, and 6.5% of youth reported that they did not know whether they had Medi-Cal.
- Similarly, 81.6% of youth reported having Medi-Cal at age 21, with 87.0% reporting that they have Medi-Cal and/or another type of health insurance and 4.1% reporting that they did not know whether they had Medi-Cal.

Comparison of Outcomes by Gender

Results across outcomes were calculated separately for males and females to explore differences in experiences reported by male and female participants.

- The proportion of youth reporting receiving Medi-Cal did not decrease significantly from age 17 to age 21 for both males and females, but more females than males reported receiving Medi-Cal across all age groups. For example, 84.5% of 21-year-old females and 76.7% of males reported having Medi-Cal at age 21 (see Table 3; [$\chi^2(2, N = 1347) = 16.74, p = .0008$]).
- The number of males and females achieving a high school diploma or GED did not differ significantly; as shown in Table 3, by age 21, 75.6% of females and 77.9% of males reported receiving a high school diploma.

Table 3: Gender Comparisons by Medi-Cal Enrollment and Educational Attainment

Outcome Area	Males Age 17 (n=1,141)	Females Age 17 (n=1,154)	Males Age 19 (n=534)	Females Age 19 (n=705)	Males Age 21 (n=596)	Females Age 21 (n=751)
Has Medi-Cal	78.6%	82.7%	75.7%	85.0%	76.7%	84.5%
High-School Diploma or GED	2.5%	2.9%	68.2%	72.9%	77.9%	75.6%

- The rates of reported substance abuse referrals and incarceration are higher for males than for females. As shown in Table 4, at age 21, the proportion of males (23.8%) reporting having been incarcerated was more than three times that of females (7.1%; [$\chi^2(2, N = 1,347) = 75.49, p < .0001$]).
- More females than males reported having children at ages 17, 19 and 21. As shown in Table 4, 7.0% percent of young women reported having given birth to a child by age 17. At age 19, 17.3% of young women reported having a child within the prior two years. Among males, just 4.7% of 17-year-olds and 7.1% of 19-year-olds reported fathering a child. At age 21, 32.6% of females reported having a child while only 16.6% of males had children [$\chi^2(2, N = 1,347) = 46.87, p < .0001$].

Table 4: Gender Comparisons for High-Risk Outcomes

<i>Outcome Area</i>	Males Age 17 (in lifetime) (n=1,141)	Females Age 17 (in lifetime) (n=1,154)	Males Age 19 (in past two years) (n=534)	Females Age 19 (in past two years) (n=705)	Males Age 21 (in past two years) (n=596)	Females Age 21 (in past two years) (n=751)
Homeless at some point	23.1%	22.3%	15.2%	14.2%	25.5%	24.1%
Referred for Substance Abuse	30.1%	20.3%	16.9%	11.1%	8.9%	5.1%
Incarcerated at Some Point	45.4%	18.7%	21.9%	6.8%	23.8%	7.1%
Had Children	4.7%	7.0%	7.1 %	17.3%	16.6%	32.6%

Comparison of Outcomes by Race/Ethnicity

Decades of research have documented disparities for ethnic and racial minorities across service sectors (US DHHS, 2016, Smedley et al, 2013). Disparities are particularly pronounced in the CWS, in which minority, and in particular Black⁸ children are vastly overrepresented (Harris, 2014; Shaw et al, 2008; Elliott & Urquiza, 2006). This study explored disparities in the experience of high risk outcomes for minority youth by comparing the responses of Black, Latino, and White youth with the overall average response rates (other ethnicities were not included in the disparities analysis as small cell sizes precluded adequate statistical power). Analysis of ethnic/racial disparities in the NYTD data yielded the following results:

- Black youth were *more likely* to report experiencing homelessness: while 24.7% of the 21-year-old youth surveyed reported homelessness, 29.5% of Black youth reported having this experience [$\chi^2(2, N = 1,347) = 6.48, p = .039$]. In contrast, 21-year-old Latino youth were *less likely* to report experiencing homelessness at some point in the past two years [20.8%; $\chi^2(2, N = 1,347) = 11.83,$

⁸ For the remainder of this report “Black” is used to refer to children and youth who identify as “Black” or “Black or African American.”

$p = .0027$)). Significant differences from the expected mean were not obtained for White youth.

- Black youth were *more likely* to report experiencing incarceration: while overall 14.5% of youth reported incarceration, 16.3% of Black youth reported this item [$\chi^2(2, N = 1,347) = 8.18, p = .017$]). Latino and White youth did not differ significantly from the general population of youth surveyed.
- Latino youth were *more likely* to report having children [29.1%; $\chi^2(2, N = 1,347) = 7.11, p = .029$]) White youth were *less likely* to report having children [25.5%; $\chi^2(2, N = 1,347) = 6.38, p = .041$]). No significant difference was found for Black youth relative to the survey population.

Comparison of Outcomes of Youth Remaining in Care with Those Not in Care

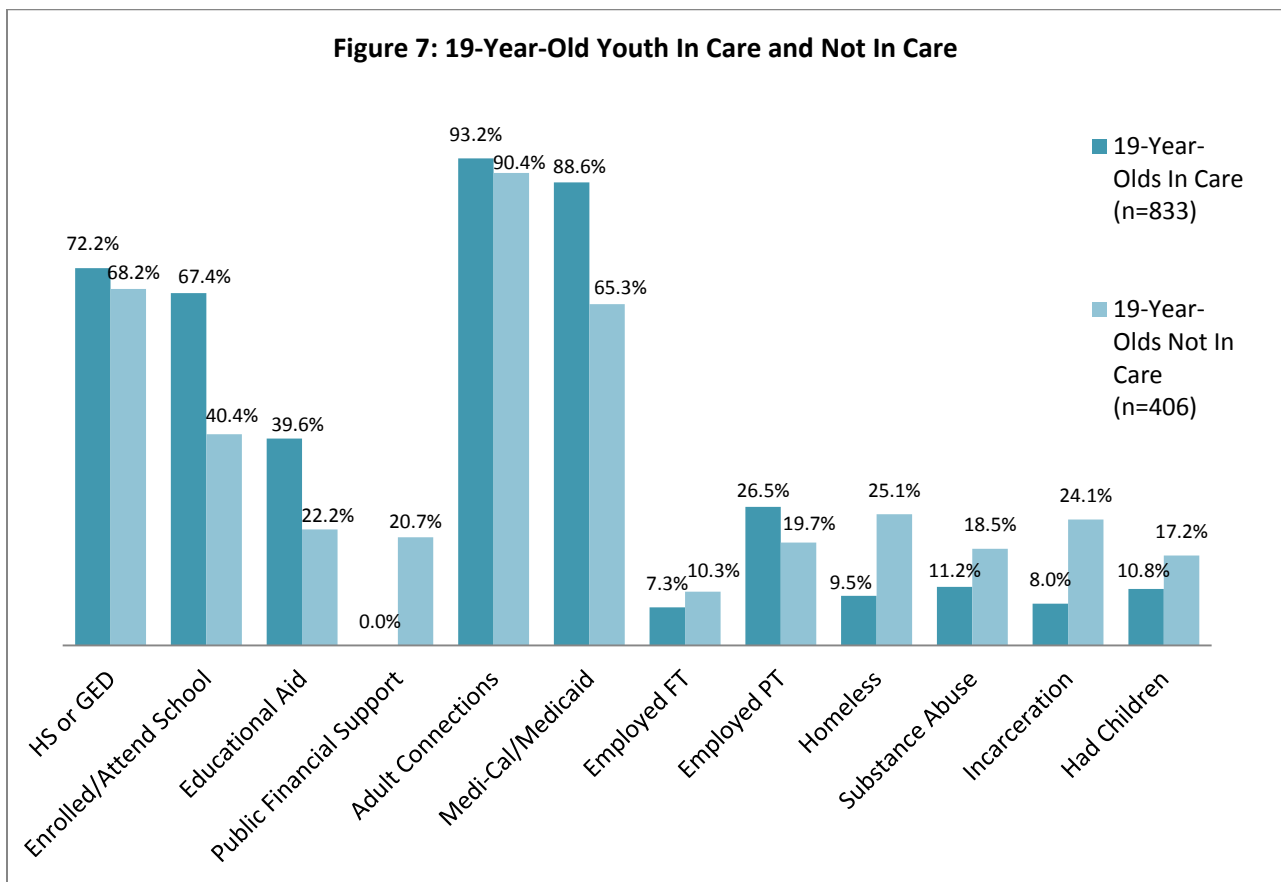
California extended Title IV-E assistance to youth up to age 21 in 2012. As a result, a portion of foster youth has remained in foster care beyond their 18th birthday. Comparisons were made among outcomes for youth in foster care and youth who had exited foster care for both 19- and 21-year-olds (see Figures 7 and 8). Comparisons were not conducted for 17-year-old youth as respondents had to be in care at the time of the first survey to qualify to take the survey.

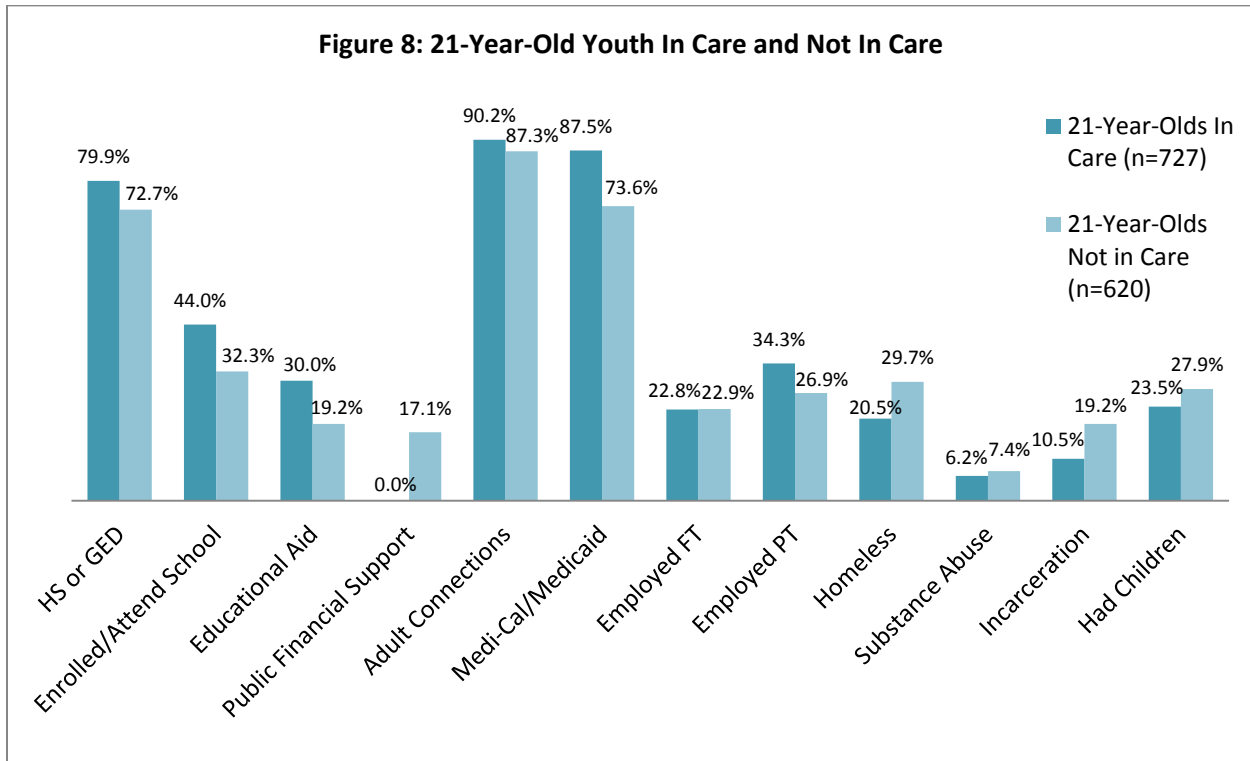
In general, NYTD youth who remained in care reported more positive outcomes across multiple indicators. This finding is consistent with other research (CalYOUTH; Courtney et al., 2016).

- *Youth in care were more likely to be enrolled in a school program and to receive educational assistance at both age 19 and 21.* At age 19, 39.6% of youth in care received education aid as compared to 22.2% of youth not in care [$\chi^2(2, N = 1239) = 37.2, p < .0001$]). At age 21, 30.0% of youth in care received educational aid compared to 19.2% of youth not in care [$\chi^2(2, N = 1347) = 21.2, p < .0001$]). Further, at age 21, youth in care were more likely to report having a high school diploma or GED certificate [$\chi^2(2, N = 1347) = 16.7, p < .01$]).
- *Youth in care were also more likely to have Medi-Cal insurance.* At age 19, 88.6% of respondents in care reported having Medi-Cal as compared to 65.3% of youth not in care [$\chi^2(2, N = 1239) = 107.8, p < .0001$]). At age 21 87.5% of youth in care reported having Medi-Cal as compared to 73.6% of youth not in care [$\chi^2(2, N = 1347) = 43.7, p < .0001$]).
- *Youth in care were less likely to be receiving public financial support at both age 19 and 21.* At age 19 and 21 youth in care were less likely to receive financial support (0.0% and 0.0% respectively as compared to youth not in care (20.7% and 17.1% respectively, [$\chi^2(3, N = 1239) = 1239.0, p < .0001$]) and [$\chi^2(3, N = 1347) = 335.0, p < .0001$]).
- *Employment was the only area in which differences were found in favor of youth not in care.* At age 19, a greater percentage (10.3%) of youth not in care reported being employed full-time than youth remaining in care (7.3%) [$\chi^2(2, N = 1239) = 6.81, p < .05$]). However, at age 21, there was no significant difference in full-time employment. At both age 19 and 21, youth remaining in care were more likely to report part-time employment (26.7% and 34.3% respectively) compared to youth not in care (19.7% and 26.9% respectively).
- *Perhaps most significantly, youth who had exited foster care were more likely to report high-risk outcomes.* Youth not in foster care reported higher rates of homelessness and incarceration at both age 19 and 21. At age 19, 25.1% of youth not in care reported experiences of

homelessness as compared to 9.5% of youth in care [$\chi^2(2, N = 1239) = 53.3, p = <.0001$]. At age 21, 29.7% of youth not in care reported homelessness as compared to 20.5% of youth in care [$\chi^2(2, N = 1347) = 17.5, p = <.001$] At age 19, youth not in care reported higher rates of substance abuse referral 18.5% compared to 11.2% for youth in care [$\chi^2(2, N = 1239) = 13.5, p = <.005$] and having children (17.2% and 10.8% respectively, [$\chi^2(2, N = 1239) = 11.8, p = <.005$]), however there were no significant differences in these outcomes at age 21.

- *No significant differences were found for youth in terms of their connections with adults.* At age 19, 93.2% of youth in care reported having positive connections with adults and 90.4% of youth not in care endorsed this item. Similarly, at age 21 90.2% of youth in care reported having positive connections and 87.3% of youth not in care.





Comparison of Outcomes by California Region

California is diverse geographically, socially, and economically, therefore youth in different regions may face distinct challenges. Analyses were conducted to compare youths’ experiences across five California regions: Northern California, Pacific Inland, Los Angeles, Tri-Coastal, and Central⁹. In general, despite different social and economic conditions, responses varied very little among NYTD respondents by region. (See Appendix A for NYTD regional breakout tables.)

Comparison of Outcomes with National NYTD Data

The NYTD recently released Data Brief #5 with the results of nationwide NYTD surveys for the first complete NYTD cohort. Comparisons were made between national NYTD 17-, 19-, and 21-year-olds and the California’s NYTD cohort. California’s baseline cohort differed demographically from the national averages in the proportion of Latino youth surveyed: in California, Latino youth were 43% of those

⁹ Counties represented in the following regions are:

Los Angeles: Los Angeles,

Pacific Inland: Imperial, Orange, Riverside, San Bernardino, San Diego,

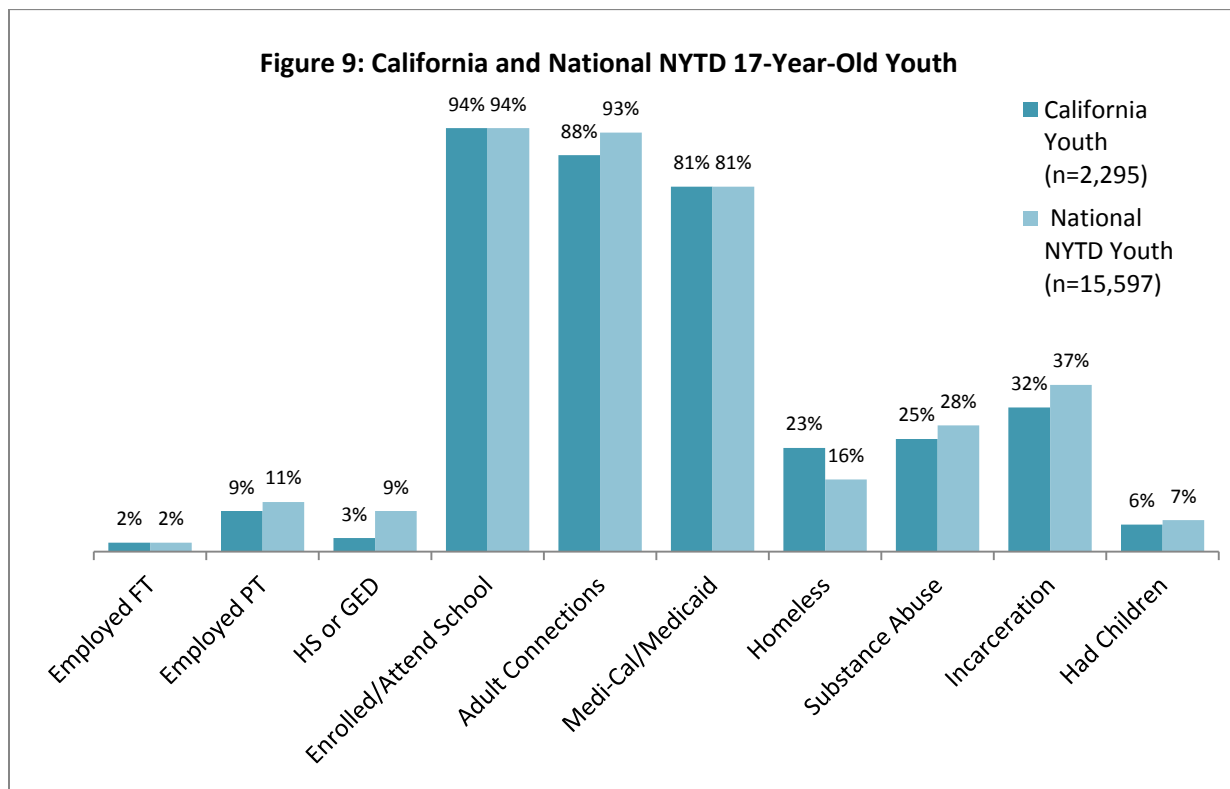
Central: Alameda, Alpine, Contra Costa, Fresno, Inyo, Kings, Madera, Marin, Mariposa, Mendocino, Merced, Mono, Monterey, Napa, San Benito, San Francisco, San Mateo, Santa Clara, Santa Cruz, Sonoma, Stanislaus, Tulare,

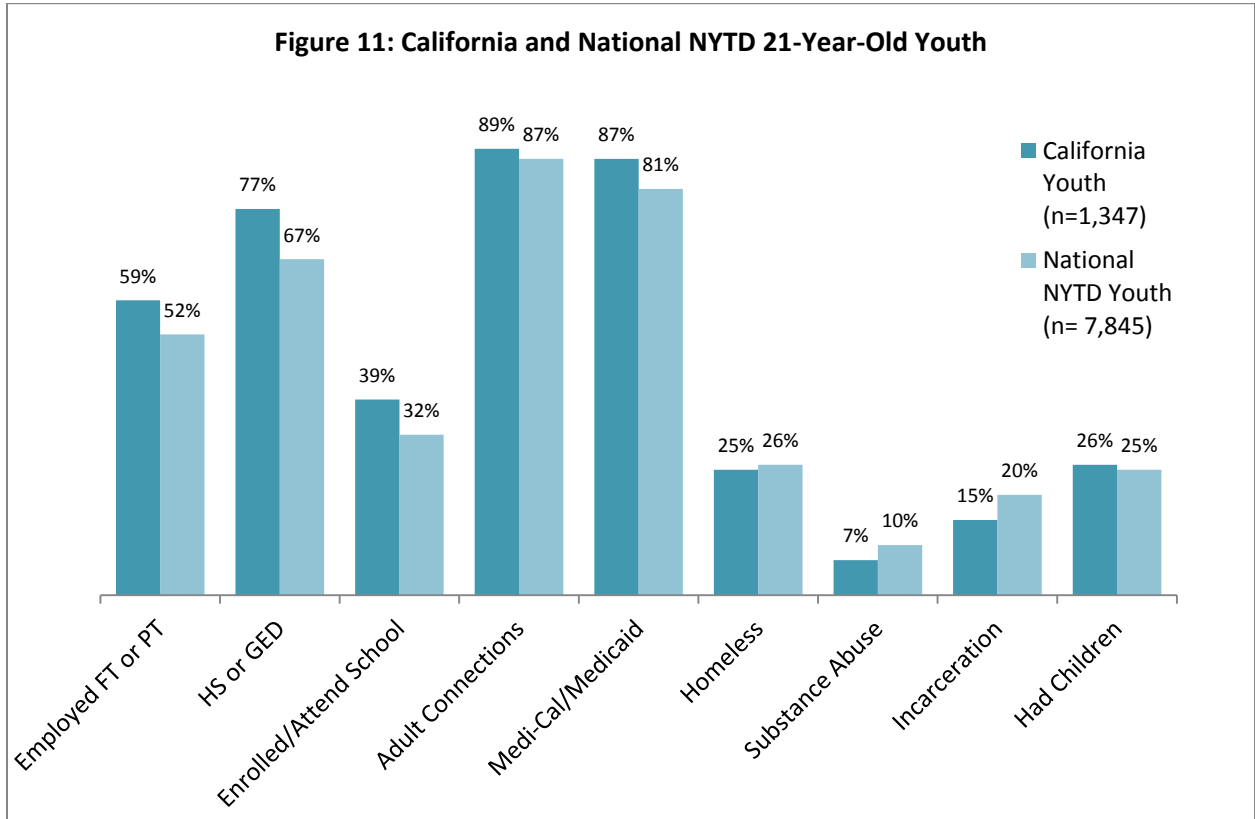
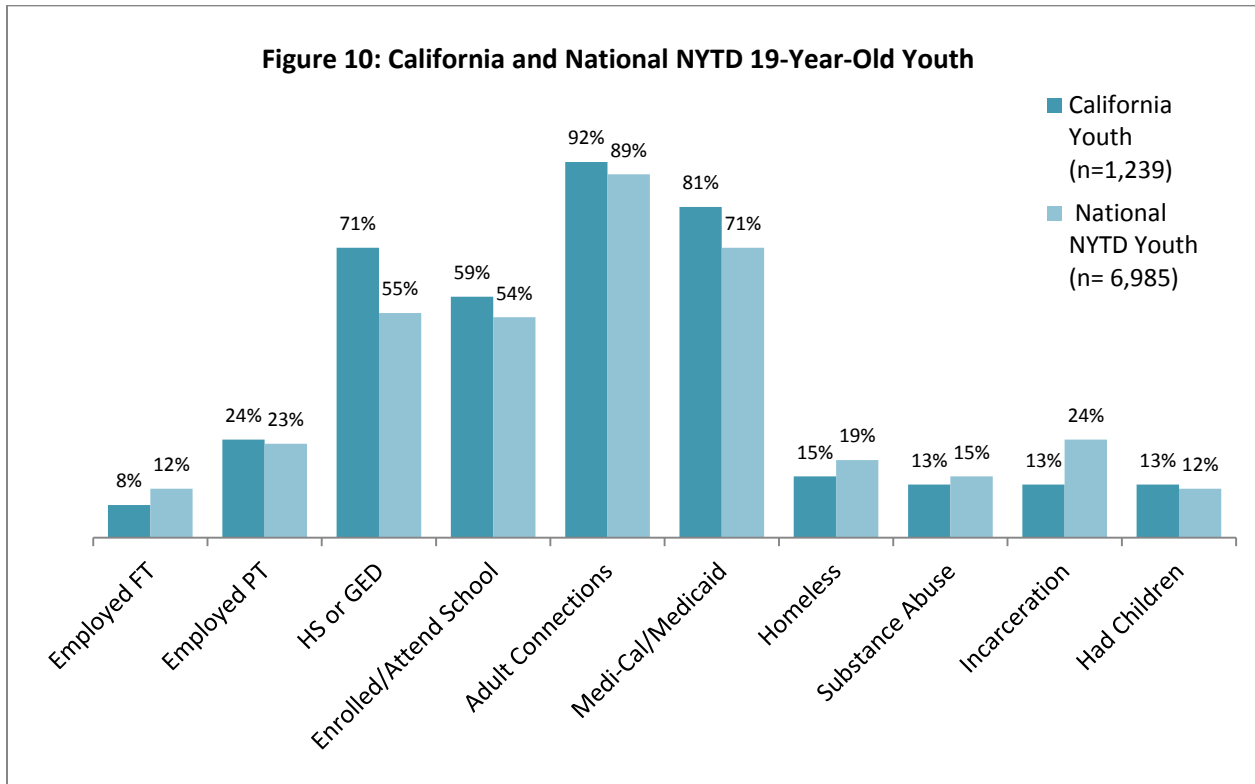
Northern California: Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Modoc, Nevada, Placer, Plumas, Sacramento, San Joaquin, Shasta, Sierra, Siskiyou, Solano, Sutter, Tehama, Trinity, Tuolumne, Yolo, Yuba,

Tri Coastal: Kern, San Luis Obispo, Ventura, Santa Barbara.

surveyed while nationally, Latinos were 19% of youth surveyed at age 17. Consistent with national trends, Black youth are overrepresented in the child welfare population in California (Black youth represent 26% of California youth surveyed and 35% of those surveyed nationally where population estimates are 5.3% and 15% respectively).

Comparisons between data derived from the California sample of youth and data derived from the nationwide NYTD sample must be interpreted with caution, as statistical analyses were not conducted to test the significance of differences. Thus, while there may appear to be differences, it is unclear whether the noted differences are due to error or whether they reflect true population differences. Also, it must be noted that a portion of the nationwide NYTD database consists of California youth, as California has the largest number of foster youth of all states; accordingly, there is overlap in the data. Nonetheless, a side-by-side snapshot of the data illustrated in Figures 9, 10 and 11 suggests that California youth report generally similar experiences to their counterparts nationally. At age 17, California youth appear to be trailing behind national counterparts in educational attainment, part-time employment, adult connections and homelessness; however, have lower exposure to high risk outcomes. At ages 19 and 21, California youth appear to be faring better: a higher percentage report completing high school, and lower percentages report experiencing homelessness, incarceration, and substance abuse than youth nationwide. Once again, these results should be interpreted with caution given the aforementioned caveats.



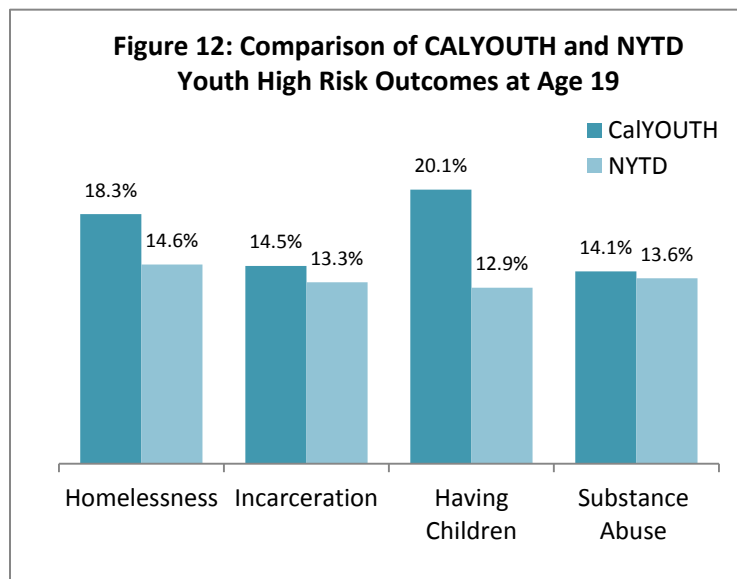


Comparison with CalYOUTH Study

A recent study spearheaded by researchers at University of Chicago surveyed California 17- and 19-year-old youth in 2013 and 2015 using stratified random sampling to collect survey data from 727 of 2,583 eligible youth who had been in the California foster care system (CalYOUTH; Courtney et al., 2016). The CalYOUTH study incorporated some of the NYTD items and included many more items to provide a comprehensive picture of outcomes for foster youth. Authors obtained a high response rate: 100% for the baseline respondents and 84% for the 19-year-olds.

Consistent with NYTD results, the majority of CalYOUTH respondents had completed high school by age 19 (75.7% of CalYOUTH as compared to 70.9% of NYTD 19-year-olds), however most were not employed (15.2% of CalYOUTH and 8.3% of NYTD youth reported being employed full time at age 19). Also consistent with NYTD, CalYOUTH respondents reported high rates of exposure to high risk outcomes of homelessness, incarceration, having children, and substance abuse¹⁰ (see Figure 12, below).

The observed differences for CalYOUTH and NYTD outcomes may be in part explained by slight variations in the way the questions were asked. For example, at age 19 NYTD youth were asked if they had had a child in the past two years. In contrast, CalYOUTH were asked if they had a living child. CalYOUTH rates of having children for 19-year-olds may be higher because they include children that were born before the youth was 17.



¹⁰ Substance abuse is measured by referrals for substance abuse counseling in NYTD. For CalYOUTH, substance abuse was measured by asking respondents directly whether they had substance abuse problems.

Limitations

The results summarized in this report must be interpreted with caution given the low response rate obtained for the first wave of the survey and the propensity for social desirability bias in self-report data. As noted above, survey results were obtained for only 44% of eligible 17-year-old youth. This low response rate was due in part to difficulty locating and establishing contact with youth. Additionally, some youth may have lacked the time, motivation, or organizational skills to complete the task. A body of research examining characteristics of survey “non-responders” suggests that individuals who do not submit survey responses may differ in important ways from those who do respond to surveys (de Winter et al., 2005, Dunne et al., 1997). Further, self-report study results are often influenced by social desirability bias – a common tendency to portray oneself in overly favorable ways. Thus, the low response rate obtained in this study as well as social desirability response tendencies may have introduced bias that resulted in an overly favorable representation of outcomes for youth transitioning out of foster care. The results must be interpreted with these caveats in mind.

Summary

Study results are consistent with findings of other concurrent research suggesting lower levels of achievement in social and financial areas, as well as elevated rates of high risk outcomes for transitioning foster youth (CaYOUTH; Courtney et al., 2016). Comparisons between groups yielded significant differences for youth based on placement status, gender and ethnicity. In general, foster youth who remained in care reported better outcomes: they reported higher rates of health insurance, greater enrollment in educational programs, and had lower rates of homelessness and incarceration. In terms of gender, males were more likely to experience substance abuse and incarceration and females were more likely to report having children. Black youth had higher rates of incarceration and homelessness and Latino youth were more likely to report having children. While these results were obtained from a small sample of California youth, the findings support previous research indicating that Black and Latino youth experience greater exposure to risk and discrimination; and less access to prevention, early intervention, and treatment services and point to the need for enhanced services, outreach and engagement for minority youth (Woods et al., 2012; Aguilar et al., 2012).

This summary of survey findings for the first cohort of NYTD youth provides baseline information regarding youths’ experiences when transitioning out of foster care. The results indicate that despite a potentially favorable bias in the data collected, foster youth continue to struggle to accomplish critical developmental tasks. A staggering percentage of foster youth surveyed report exposure to high risk outcomes including homelessness, incarceration, substance abuse referral, and having children. Nevertheless, a portion of the youth surveyed report high school completion, employment experiences, and positive interpersonal connections. Thus, while foster youth are continuing to experience substantial challenges, there exist critical opportunities to intervene and provide support and buffering for youth as they exit care. Recent initiatives to provide greater financial support, educational opportunities, housing, and extended foster care may hold promise for improving conditions and providing youth with opportunities for success in education, financial stability, and relationships.

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Appendix A: Regional Comparisons for NYTD 17-, 19-, and 21-Year-Old Youth

Comparison of survey results for NYTD 17-year-old youth indicate that across survey responses, there were few significantly different results when comparing California Regions. The three significant differences found for 17 year old youth by region were in the area of employment skills, homelessness and health insurance. Specifically, youth living in the Central Region were more likely to report participating in employment skills training [$\chi^2(2, N = 2,294) = 14.86, p = .001$], Los Angeles youth were less likely to report having been homeless in their lifetimes [$\chi^2(2, N = 2,294) = 17.64, p = .0001$], and Pacific Inland youth were more likely to report being enrolled in a health insurance program other than Medi-Cal (Medicaid) [$\chi^2(3, N = 2,293) = 18.53, p = .0003$].

NYTD Outcomes by Region: 17-Year-Olds (n=2,295)

	<i>Central</i> <i>(n=541)</i>	<i>Los Angeles</i> <i>(n=719)</i>	<i>Northern California</i> <i>(n=351)</i>	<i>Pacific Inland</i> <i>(n=539)</i>	<i>Tri-Coastal</i> <i>(n=143)</i>	<i>Total</i> <i>(n=2,295¹¹)</i>
Employ/Financial						
Full time Employ	1.3%	2.2%	2.6%	.4%	2.1%	1.6%
Part Time Employ	10.0%	8.1%	12.0%	7.8%	4.9%	8.9%
Employment Skills	29.2%	21.4%	22.2%	20.2%	23.6%	23.2%*
Social Security	7.8%	7.1%	6.8%	7.4%	9.7%	7.5%
Educational Aid	3.7%	4.0%	3.1%	2.6%	4.9%	3.5%
Financial Assist	5.4%	5.6%	3.4%	6.3%	9.0%	5.6%
Food Assist	2.6%	5.0%	2.9%	3.9%	6.9%	4.0%
Housing Assist	2.2%	3.1%	2.3%	2.6%	2.8%	2.6%
Other Support	7.0%	8.5%	7.1%	7.4%	9.0%	7.7%
Education/Connections						
HS Completion/GED	4.4%	2.0%	3.1%	1.5%	3.5%	2.7%
Adult Connections	87.3%	86.2%	88.9%	87.6%	91.7%	87.5%
High Risk Outcomes						
Homelessness	26.3%	17.4%	25.9%	23.6%	25.0%	22.7%**
Substance Abuse	21.4%	25.2%	30.2%	26.2%	22.9%	25.2%
Incarceration	33.6%	29.5%	36.8%	29.3%	36.1%	32.0%
Have Children	3.7%	6.3%	6.6%	7.1%	5.6%	5.8%
Health Insurance						
Medicaid/Medi-Cal	81.2%	80.7%	79.8%	79.4%	85.4%	80.7%
Other Health Ins	14.4%	9.7%	11.1%	18.6%	14.0%	13.4%**

*significant at p<.05; **significant at p<.005

¹¹ In general, participants responded to all questions, however for or a few of the data elements, one or two participants did not provide a response.

Comparison of NTYD survey results for 19-year-old youth indicate that significantly fewer respondents from Los Angeles reported part time employment [$\chi^2(2, N = 1,239) = 9.79, p = .007$] and employment related skills training [$\chi^2(2, N = 1,347) = 10.75, p = .005$].

NYTD Outcomes by Region: 19-Year-Olds (n=1,239)

	<i>Central (n=253)</i>	<i>Los Angeles (n=372)</i>	<i>Northern California (n=179)</i>	<i>Pacific Inland (n=359)</i>	<i>Tri-Coastal (n=76)</i>	<i>Total (n=1239¹²)</i>
Employ/Financial						
Full time Employ	9.9%	7.0%	10.1%	8.1%	6.6%	8.3%
Part Time Employ	24.9%	18.6%	34.1%	25.9%	21.1%	24.4%*
Employment Skills	34.4%	29.3%	39.1%	40.4%	39.5%	35.6%*
Social Security	8.7%	10.8%	6.2%	9.8%	17.1%	9.8%
Educational Aid	33.2%	38.2%	36.3%	29.5%	30.3%	33.9%
Financial Assist	5.1%	8.3%	5.0%	7.0%	7.9%	6.8%
Food Assist	7.5%	10.0%	9.5%	12.8%	17.1%	10.7%
Housing Assist	2.0%	2.7%	1.7%	2.2%	2.6%	2.3%
Other Support	24.7%	15.3%	35.8%	19.5%	17.1%	20.9%
Education/Connections						
HS Completion/GED	73.9%	67.7%	73.2%	69.4%	77.6%	70.9%
Adult Connections	93.7%	90.6%	90.5%	92.8%	97.4%	92.3%
High Risk Outcomes						
Homelessness	18.6%	12.9%	18.4%	11.7%	14.5%	14.6%
Substance Abuse	11.9%	14.5%	14.0%	12.8%	17.1%	13.6%
Incarceration	15.8%	11.3%	15.6%	12.3%	14.5%	13.3%
Have Children	10.7%	14.0%	11.7%	14.5%	10.5%	12.9%
Health Insurance						
Medicaid/Medi-Cal	78.7%	83.3%	81.0%	81.1%	76.3%	81.0%
Other Health Ins	13.0%	14.3%	13.4%	13.9%	11.8%	13.6%

*significant at p<.05; **significant at p<.005

¹² In general, participants responded to all questions, however for or a few of the data elements, one or two participants did not provide a response.

Comparison of NYTD survey data for 21-year-old youth indicate that Los Angeles respondents reported lower rates of full time employment [$\chi^2(2, N = 1,347) = 15.89, p = .0004$], employment related skills training [$\chi^2(2, N = 1,347) = 11.31, p = .004$], housing assistance [$\chi^2(3, N = 1,347) = 12.96, p = .005$], and higher rates of public financial assistance [$\chi^2(3, N = 1,347) = 9.66, p = .02$].

NYTD Outcomes by Region: 21-Year-Olds (n=1,347)

	<i>Central (n=331)</i>	<i>Los Angeles (n=393)</i>	<i>Northern California (n=170)</i>	<i>Pacific Inland (n=365)</i>	<i>Tri-Coastal (n=88)</i>	<i>Total (n=1,347¹³)</i>
Employ/Financial						
Full time Employ	25.4%	15.8%	25.9%	26.9%	22.7%	22.9%*
Part Time Employ	28.7%	30.3%	31.8%	32.1%	35.1%	30.9%
Employment Skills	33.5%	27.5%	31.8%	40.6%	42.1%	34.0%*
Social Security	8.2%	8.7%	6.5%	9.0%	10.2%	8.5%
Educational Aid	23.0%	28.2%	22.4%	25.5%	21.6%	25.0%
Financial Assist	8.8%	14.0%	8.2%	9.6%	4.6%	10.2%*
Food Assist	15.7%	21.6%	17.7%	22.7%	25.0%	20.25%
Housing Assist	5.4%	1.8%	3.5%	7.1%	8.0%	4.8%*
Other Support	19.0%	10.4%	14.7%	10.7%	18.2%	13.7%
Education/Connections						
HS Completion/GED	74.0%	74.3%	79.4%	77.8%	86.4%	76.6%
Adult Connections	89.4%	86.8%	90.6%	89.3%	90.9%	88.9%
High Risk Outcomes						
Homelessness	23.0%	27.7%	25.3%	24.1%	19.3%	24.7%
Substance Abuse	4.8%	6.6%	7.1%	8.0%	9.1%	6.8%
Incarceration	15.1%	15.3%	17.1%	12.3%	12.5%	14.5%
Have Children	25.7%	22.7%	24.1%	27.7%	31.8%	25.5%
Health Insurance						
Medicaid/Medi-Cal	83.4%	78.1%	85.3%	80.6%	79.6%	81.1%
Other Health Ins	15.1%	18.1%	11.8%	14.8%	9.1%	15.1%

*significant at p<.05; **significant at p<.005

¹³ In general, participants responded to all questions, however for or a few of the data elements, one or two participants did not provide a response.