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# PROGRAM PARTICIPATION AND EXPERIENCES IN YOUNG ADULTS CURRENTLY OR FORMERLY RECEIVING FOSTER CARE SERVICES

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PROGRAM PARTICIPATION AND EXPERIENCES IN YOUNG  
ADULTS CURRENTLY OR FORMERLY RECEIVING  
FOSTER CARE SERVICES

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A Project  
Presented to the  
Faculty of  
California State University,  
San Bernardino

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In Partial Fulfillment  
of the Requirements for the Degree  
Master of Social Work

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by  
Stephanie Carolina Montes  
Chelle Joyce Stokes  
June 2015

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## ABSTRACT

This study examines whether participation in Extended Foster Care (EFC) or the Aftercare Program increase perceptions of independence in former and current foster dependents ages eighteen and older. Foster youth have historically experienced worse outcomes than the general population after reaching age 18. This study surveyed 72 young adults, 36 were in Extended Foster Care (EFC) and 36 were in the Aftercare Program in San Bernardino County. The areas examined were demographics, health care, employment, transportation, education, housing, mental health, pregnancy/parenting status, social support, services received in Independent Living Program (ILP), EFC, and/or the Aftercare Program and the young adults' perception of the helpfulness of the programs, from whom they received information about these services, duration of participation in services, as well as, their confidence in their independence skills. The study found that overall young adults felt prepared for independence and they agreed that EFC or the Aftercare Program contributed to their feelings. The study also found that their outcomes in the aforementioned areas were more positive than previous research indicates. These findings were evaluated through quantitative data analysis of a questionnaire. The significance of this study is that it will determine the programs' abilities to fit the needs of foster youth in overcoming their obstacles to independence. The implications for social work practice, policy and research are discussed.

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-Chelle and Stephanie

To my loving parents,

I never thought this far ahead in my life, but with God on my side and your support I know I can go anywhere and can do anything. I would like to thank you for all the encouraging words every day that kept me going when I didn't want to. I especially want to thank you for loving me always and

providing me with the opportunity for life and all that it offers. I love you bunches and bunches.

To my love,

I want to thank you for your continued support throughout these last six years, but especially the last two; I know I've been busy and it took a lot of time away but you were understanding and I thank you for that.

To Stephanie,

I want to say thank you for keeping me calm throughout this process and always making yourself available to complete everything we had to do despite the demands of life.

-Brittany

I want to dedicate this to my son Liam. Thank you for your sacrifice in your time away from me in your first year of life. You are a true blessing in disguise. God knew what he was doing when he sent you into my life during the start of my last year in this program. With your existence, I was motivated to pull through and complete this program. Although you are just a baby, and not yet vocal, seeing your tiny face encouraged me to complete my education in order to be an example to you. It is in my hopes that one day you too pursue your educational dreams and take the roads that lead you where you want to go.

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-Stephanie



## DEDICATION

We would like to dedicate this to young adults exiting out of foster care. It is in great hopes that you all succeed beyond your imagination because you are all capable of greatness and you all deserve it.

## TABLE OF CONTENTS

ABSTRACT .....	iii
ACKNOWLEDGMENTS .....	iv
LIST OF TABLES .....	xi
CHAPTER ONE: INTRODUCTION	
Problem Statement .....	1
Purpose of the Study .....	4
Significance of the Project for Social Work .....	4
CHAPTER TWO: LITERATURE REVIEW	
Introduction .....	6
Theory Guiding Conceptualization .....	6
The Gap in Literature .....	8
What is Assembly Bill 12? .....	9
Education .....	10
Employment .....	11
Mental Health .....	12
Criminal Justice System Involvement .....	13
Housing .....	14
Pregnancy and Parenting .....	16
Current Perceptions of AB12 .....	17
How to Effectively Implement Foster Care to 21 .....	19
Summary .....	21
CHAPTER THREE: METHODS	
Introduction .....	22

Study Design .....	22
Sampling.....	23
Data Collection and Instruments.....	24
Procedures .....	26
Protection of Human Subjects .....	27
Data Analysis.....	28
Summary .....	29
 CHAPTER FOUR: RESULTS	
Introduction .....	30
Demographics .....	30
Presentation of the Findings .....	33
Major Variables.....	33
Independent Living Program (ILP) .....	33
Extended Foster Care (EFC) .....	35
Aftercare .....	37
Other Major Variables.....	40
Medical .....	40
Transportation.....	40
Employment.....	41
Feelings of Confidence to Provide for One’s Self.....	41
Support System .....	41
Criminal Justice System Involvement .....	42
Education .....	42
Termination Services .....	42

Housing.....	42
Parenting.....	42
Data Analysis.....	43
Summary .....	43
CHAPTER FIVE: DISCUSSION	
Introduction.....	44
Discussion .....	44
Housing.....	44
Employment.....	44
Mental Health.....	45
Support System .....	45
Education.....	45
Parenting.....	46
Confidence in the Ability to be Independent.....	46
Strengths and Limitations .....	47
Strengths.....	47
Limitations.....	48
Recommendations for Social Work Practice, Policy and Research .....	49
Recommendations in Research .....	49
Recommendations for Policy .....	50
Recommendations for Practice .....	50
Conclusions .....	51
APPENDIX A: QUESTIONNAIRE .....	52

APPENDIX B: INFORMED CONSENT .....	65
APPENDIX C: DEBRIEFING STATEMENT .....	69
REFERENCES.....	71
ASSIGNED RESPONSIBILITIES PAGE .....	74

## LIST OF TABLES

Table 1. Demographics of Participants.....	32
Table 2. Independent Living Program (ILP).....	34
Table 3. Extended Foster Care (EFC).....	36
Table 4. Aftercare Program .....	38

## CHAPTER ONE

### INTRODUCTION

Generally, emancipated foster youth are not prepared for independence upon exiting the foster care system at age 18, which has been demonstrated through research and governmental involvement to resolve this issue.

Specifically, this study will look at the following areas of inquiry: Do young adults feel that the Independent Living Program (ILP), Extended Foster Care (EFC), and the Aftercare Program, are helpful? In what ways do the young adults utilize the services offered in EFC and the Aftercare Program? Do the young adults feel their social worker is helpful? Do the young adults feel that the provided services make them more independent or better able to take care of themselves? Last, are the outcomes for the young adults becoming more positive with the use of EFC and the Aftercare Program? Due to the limited research on the topic of outcomes and experiences with services for foster youth since AB 12 was implemented in 2012, the study will be of an exploratory nature.

#### Problem Statement

Emancipated foster youth have historically had higher rates of incarceration, unemployment, early pregnancy, homelessness, poverty, and mental health diagnoses than the general population (Mares, 2010). This issue is well recognized and has been attempted to be addressed through the

implementation of California's Fostering Connection to Success Act, also known as, Assembly Bill 12 (AB 12) in 2012. In this study it may be referred to as Extended Foster Care (EFC), which is one of the terms used to describe the services offered via AB12. This bill implemented the following: Foster care benefits until age 21 instead of age 18 for all foster youth on a voluntary basis and services to those in the Kinship Guardianship Assistance Program (Kin-GAP) and the Adoptions Assistance Program (AAP) as long as the youth were no younger than 16 when their Kin-GAP or AAP agreement was completed (John Burton Foundation, n.d.). Benefits consist of monthly stipends, transitional housing until 25, Medi-Cal until age 26, access to mental health services and various other services to resolve the aforementioned negative outcomes foster youth are experiencing. This study will give a detailed overview of the issues surrounding emancipated foster youth, and examine whether participation in EFC or the Aftercare Program increases independence in former and current dependents aged eighteen and older.

Overall, the general issue is that eighteen is an unrealistic age to be independent. Youth who have not experienced foster care do not have the ability to be completely independent, as evidenced by the increased number of people living with their parents into their mid-twenties (Arnett, 2007). Many foster youth lack sufficient social support or familial connections to assist and guide them when they need that helping hand. Many people who do move out



in the general population, move back home (CAI, 2013). The majority of young adults do not achieve financial independence until age 26 (CAI, 2013)

California's "Fostering Connections to Success Act", known as AB 12, laid out the extension of care for foster youth until age 21 (Courtney et al., 2014). California has the largest population of foster youth in the United States; therefore how Extended Foster Care is implemented in California is significant to the child welfare system (Courtney et al., 2014).

A study conducted in California that consisted of 235 caseworkers working with young adults in EFC, examined their perceptions of the newly implemented program (Courtney et al., 2014). Results showed that at least half the workers had difficulties with a lack of sufficient placement options, a lack of sufficient service, a lack of clarity in policies and procedures of extended care, and a lack of coordination between county child welfare agencies and other systems (Courtney et al., 2014). Other programs such as the Independent Living Program (ILP), the Aftercare Program and the Transitional Housing Plus program were also designed to prevent, as well as decrease the number of negative outcomes social workers continue to see in child welfare.

This problem is relevant to social work practice for obvious reasons. Child welfare workers must be advocates for these youth and young adults. Child welfare workers give a voice to youth and young adults who feel that

they are not being understood, and feel that others perceive them as nothing more than a statistic being thrown around in a broken system.

### Purpose of the Study

Due to the recent implementation of AB12 there are gaps in literature, making it imperative that research be conducted to determine the effectiveness of these programs. Through this research, it was determined what adjustments need to be made to existing programs, to better serve the needs of these young adults. The purpose of this study was to evaluate the outcomes of young adults currently or formerly in foster care in San Bernardino County, based upon their experiences in programs intended to provide them with the skills to be independent. Furthermore, results could yield changes to improve policy and child welfare practice. The methods of evaluation was to conduct a quantitative analysis on 72 young adults, using questionnaires to measure the outcomes of those 18 and over who are involved with EFC or the Aftercare Program.

### Significance of the Project for Social Work

Evaluation is a critical step in the Generalist Intervention Model (GIM) for child welfare practice. It is critical that child welfare agencies are aware of the success, or lack thereof, in accomplishing the goals of their programs. Furthermore, it would be beneficial for the workers to know, for example, why a young adult does not utilize services or why a young adult does not utilize

their social worker, so that in turn they can change the way they function to have an individualized approach to that young adult. Mandated policies for foster youth services in colleges and in child welfare agencies should be amended if service delivery is found not to be compatible for the young adults they serve. The responses from the young adults could imply that further research needs to be done in these areas of service delivery, as well as, others. Subsequently, the research question for this study is the following: Does participating in Extended Foster Care (EFC) or the Aftercare Program increase a young adult's ability to be independent or self-sufficient?

## CHAPTER TWO

### LITERATURE REVIEW

#### Introduction

This chapter will outline a theory that can be used to explain young adults' experiences who have gone or are going through foster care. It will also outline the specificities of AB 12, how to implement it in order for it to be successful, the current perceptions of AB 12, as well as, the main areas foster youth have obstacles in that AB 12 and its subsequent programs serve to eliminate.

#### Theory Guiding Conceptualization

Youth in foster care have been historically disadvantaged in the areas that contribute to their independence and well-being. One developmental theory that aids in understanding the struggles of young adults in general and youth in foster care specifically is Jeffrey Arnett's theory of Emerging Adulthood. The Theory of Emerging Adulthood focuses on the time in adolescents' life when they transition into adulthood. Emerging Adulthood begins at eighteen and goes into the mid-twenties (Arnett, 2007). This theory states that these adolescents go through the five following stages of development: "identity explorations, the age of instability, the self-focused age, the age of feeling in between, and the age of possibilities." (Arnett, 2007, p. 152).

Many people explore their identity in their work or career, however, unfortunately many emancipated foster youth lack the education to obtain a meaningful occupation or lack the education/training to simply obtain a job (Arnett, 2007).

Foster youth experience instability in the areas of housing and familial support, but they do not have the option to move back with family when times become difficult or other issues arise, as well as, not having the financial support many emerging adults in the general population have during this naturally unstable time of life; this is one reason youth aging out of care are vulnerable (Arnett, 2007). The self-focused age in emerging adulthood refers to a time where individuals are not necessarily connected to obligations that structure their lives such as work or school (Arnett, 2007).

For emerging adults that remain connected to a family or guardian, they are able to experience increasing amounts of independence to make choices throughout this stage, however emancipated foster youth do not possess this choice in life because they themselves are often the only dependable connection they have for important aspects in life such as finances (Arnett, 2007). Emerging adults typically feel in between due to their lack of a career, a marriage, being a parent and/or educational attainment, therefore they do not feel like independent adults (Arnett, 2007). However, emerging adults aging out of foster care are forced into this independent role (Arnett, 2007). Due to

the lack of education and lack of preparedness for an occupation, youth aging out of foster care are less likely to attain independence (Arnett, 2007).

Last, emerging adulthood is an age of possibilities because it is a time when individuals have the opportunity to make changes and take chances in their lives and subsequently individuals have high hopes about the changes the future can hold (Arnett, 2007). For youth aging out of foster care, it can be a time of hope and faith that they will be better than their parents; however for this population their choices are limited by the financial situation, their lack of a support network, and the inability to take chances due to a limited safety net.

### The Gap in Literature

The implementation of AB 12 is recent, resulting in a lack of evaluation of the programs associated with it, such as Extended Foster Care, the Aftercare Program and other transitional age youth services. Therefore, this study will examine AB 12 and inform readers of what the program includes. Second, the historical outcomes for foster youth exiting care at age 18 will be examined to set a foundation for the desired outcomes that are hoped to result from the implementation of AB 12. Third, the Midwest Study will play a major part in the review of literature, as it is a study that includes the states of Wisconsin, Iowa and Illinois where Illinois has practiced extending foster care for a number of years, mostly through age 20. This study will examine the positive changes in foster youth outcomes stemming from utilizing extended services. Fourth, the perceptions of caseworkers in California will be examined

in all areas of AB 12 implementation being that they are an intricate part of the process, as well, as possible change agents.

Last, a study will be described that examined what Extended Foster Care should look like, aside from the extension of services, stating how the implementation of services needs to be structured in order to be effective.

### What is Assembly Bill 12?

California Fostering Connections to Success Act, Assembly Bill 12, was signed into law September 30, 2010 by Governor Schwarzenegger to be implemented in January 2012 (John Burton Foundation, n.d.). This bill came out of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008, which promoted permanency, better care for American Indian/Alaskan children, child welfare workers competence, as well as allowing states to increase foster care services until 21 using some federal funding to increase the overall well-being for foster youth (Casey Family Programs, 2009). It also extended foster care services to youth in probation and Kin-Gap youth in foster care (CAI, 2013). In order to participate in receiving care through age 21, requirements are as follows: the youth must have an order for foster care placement on his/her 18th birthday, the youth must continue to be a dependent under juvenile dependency court, the youth must meet one of the five participation conditions (outlined below), and last, the youth must agree to live in a Supervised Independent Living Placement (SILP) that is approved under new standards for young adults ages 18 to 21 (CAI, 2013). The five

participation requirements are as follows: the youth must be working 80 hours a month or in a program that removes barriers to employment, the youth must complete high school or be enrolled in college or vocational training, or be unable to tend to the above activities due to a medical condition (CAI, 2013). The following sections will outline some of the information regarding current and historical outcomes that AB12 and other transitional age youth services are aiming to change.

### Education

Foster youth experience constant instability in their life, which disrupts their educational functioning. Frequent placement changes increase the probability that a foster youth will be required to change schools. The Midwest study interviewed young adults at age 23 or 24 found that over one-third of participants had changed school locations five or more times while in care, and nearly 40 percent had to repeat at least one grade (Dworsky & Courtney, 2010a). In a study that followed sixteen former foster youth for three years to examine their adaptation to adulthood, it was found that only 39 percent to 65 percent of youth in care had received a high school diploma or its equivalent (Jones, 2011). Despite these frequent disruptions and low high school graduation rates, multiple studies show that foster youth still hope and expect to graduate from college (Dworsky & Courtney, 2010a). The harsh reality is that between one and 11 percent of foster youth achieve this goal (Dworsky & Courtney, 2010a). The Midwest study also reveals that young women (38%)



were more likely than young men (23%) to have ever attended college by age 21 (Dworsky, Havlicek, Perez, & Keller, 2007).

The barriers that prevent foster youth from continuing their education include becoming employed, becoming a parent, not being able to afford school, or losing interest (Dworsky et al., 2007). Earning a college degree could potentially give foster youth the ability to earn a higher income, have decreased health risks, and assure leadership positions in civic organizations (Kirk, Lewis, Nilsen, & Colvin, 2013). It is therefore crucial that foster youth have support in order to gain access to these opportunities.

### Employment

Nationally 37% to 60% of foster youth who leave care do not graduate from high school, lessening their chances of stable, sufficient paying jobs (Naccarato, Brophy, & Courtney, 2010). Criminal involvement, substance use, exiting group home care, placement instability, and educational issues result in poorer employment outcomes (Hook & Courtney, 2011). Unfortunately, it has been found that emancipated foster youth experience the aforementioned conditions at higher rates. In the Midwest Study's follow-up at 21 years old, the young adults were evaluated by their race/gender, drug/alcohol use, education, mental illness, earnings, use of Independent Living Services, and mentoring as they related to employment (Naccarato et al., 2010). The following were the results of these areas. African Americans earned much less income than their Caucasian counterparts (Naccarato et al., 2010). A majority

of the young adults stated they did not receive Independent Living Services that pertained to getting a job such as resume writing or interview skills (Naccarato et al., 2010). Almost 40% of the young adults had a GED or some college which decreased their chances of higher earnings. Mental health was not relevant, as 91% of the youth were not diagnosed, however 60% of the youth had used alcohol or other substances (Naccarato et al., 2010). Mentors were positively associated with better employment outcomes for youth at age 21 (Naccarato et al., 2010). Almost half the young adults at the time of the interview had no current earnings (Naccarato et al., 2010). However, when asked about previous income, three fourths of the youth reported less than \$15,600 a year in earnings (Naccarato et al., 2010).

Overall, emancipated foster youth are less likely to be employed, as well as, earning less than the general population of youth and those who come from already low income families (Hook & Courtney, 2011). Essentially their earnings are below the federal poverty level (Hook & Courtney, 2011). There are clear discrepancies in the earnings of emancipated foster youth in comparison to the general population due to outcomes associated with emancipated foster youth and their histories of abuse and/or neglect.

### Mental Health

Foster youth are at greater risk of being diagnosed with a mental health disorder. A compilation of various studies found that 25% of young adults who exit the foster care experience Post Traumatic Stress Disorder (PTSD)

(Gardner, 2008). This is five times more likely than the general population, at four percent (Gardner, 2008). Other common diagnoses for foster youth are depression, anxiety, attachment disorders and substance abuse (Brown & Wilderson, 2010). It is estimated that youth in out-of-home care have mental health needs at four times the rate of those living with their own families (Young Minds Advocacy Project, 2014). Mental health disorders greatly impact a young adult's ability to obtain employment, maintain housing, and obtain postsecondary education, which all impact the youth's ability to be independent.

#### Criminal Justice System Involvement

Aging out of the system with little to no support, and unstable housing increases the likelihood of former foster youth getting involved with the criminal justice system. Research shows that one-third to one-half of former foster youth have been arrested or jailed (Stott, 2012). A study that sampled 25 and 26 year old former foster youth, revealed higher rates of arrest after age 18. In comparison to the general population, after age 18 approximately 42 percent of these former foster youth had experienced an arrest, compared to five percent for the general population (Lee, Courtney, & Tajima, 2014).

Young adults in the Midwest study reported that they experienced high levels of involvement with the criminal justice system. Specifically, in the Midwest study, 31 percent of participants reported being arrested, 15 percent reported being convicted of a crime, and 30 percent reported being

incarcerated (Dworsky et al., 2007). Of these participants, young males reported the highest level of involvement. Being involved with the criminal justice system has many adverse consequences for these youth. With their poor outcomes already in place, a criminal background makes it even more difficult to be successful in many aspects of life, especially employment opportunities.

### Housing

Many foster youth have emancipated from the foster care system at age 18, without a safety net, or somewhere to call home. It is estimated that every year, this challenge affects approximately 29,500 young adults who are in their transition to adulthood (Dworsky & Courtney, 2010b). In the United States, only five to 10 percent of young adults in the general population live on their own by age 18 (Stott, 2013), however, it is expected that the foster youth population be prepared to face life's obstacles on their own at such a young age. In addition, when youth emancipate from foster care they are often unemployed or working low-skilled jobs. Not having a steady income becomes a major factor that contributes to homelessness among youth who get discharged from the system (Jones, 2011). In efforts to alleviate this issue, EFC was designed to provide youth with a secure and stable living environment beyond the age of 18.

According to a longitudinal study done in the Midwest, 732 young adults from Iowa, Wisconsin, and Illinois were interviewed during four waves of data

collection. The first wave of interviews were conducted when the young adults were 17 or 18, the second wave was when they were 19, the third wave was when they were 21, and the final wave was when the participants were 23 or 24. Although extending foster care to age 21 has delayed the chance that these young adults experience homelessness (Dworsky & Courtney, 2010b), it does not prevent it once these youth are 23 to 24 years of age. By age 23 or 24, almost 30 percent of the youth who participated in the Midwest Study had experienced a period of homelessness, and at least 27 percent stated that they spent a considerable amount of time couch surfing (Dworsky & Courtney, 2010b). It is clear that extending foster care benefits has helped decrease homelessness, but it continues to be an issue once young adults stop receiving benefits.

Supportive housing programs in California that have been assisting these youth include, Transitional Housing Program-Plus (THP-Plus) and Transitional Housing Program-Plus Foster Care (THP-Plus Foster Care). These transitional housing programs offer youth housing, and supportive services (Foundation, n.d.). THP-Plus offers former foster youth and probation youth affordable housing assistance until age 24 for 24 months, and does not require youth to be enrolled in extended foster care (Foundation, n.d.). THP-Plus Foster Care offers services and housing that has been licensed and certified through the county until age 21, with the added benefits of financial assistance through EFC (Foundation, n.d.). Despite the ongoing efforts that

these housing programs provide, there is still mixed feelings about the effectiveness of these programs.

### Pregnancy and Parenting

Among the many adverse outcomes that emancipating foster youth experience, is the high rate of unwanted, unplanned, or early pregnancies. The rate of unplanned pregnancies among the young adolescent population has declined for the past several years, however, the pregnancy rate among foster care youth continues to increase, and is significantly higher compared to the general population (Oshima, Narendorf, & McMillen, 2013). Compared to young adolescents in the general population, the Midwest study showed that foster youth are twice as likely to have one child, and more likely to be a single parent (Geenen & Powers, 2007). The Midwest study found that by age 19, half of the former foster youth who were female had been pregnant, compared to 20 percent of the females in the general population (Oshima et al., 2013). Overall, approximately 40 to 60 percent of former foster youth, both male and female have been pregnant, or have been parents to at least one child (Stott, 2012).

A study that utilized data from a longitudinal study with a sample of 325 older foster youth who were under the legal custody of the Missouri Children's Division, showed that regardless of risk factors faced by both foster youth and the general population, foster youth were at a higher risk of early pregnancy between the ages of 17 and 19 (Oshima et al., 2013). This shows that the time

period between ages 17 and 19 appears to be a critical time to intervene with these young people and avoid unwanted, and unplanned early pregnancies (Oshima et al., 2013). Furthermore, studies show that sex education and contraception is misunderstood by foster youth (Dworsky, 2009).

It was also noted that the programs that have been proven to lower the risk of pregnancy in teens are not structured for the needs of foster youth (Dworsky, 2009). Despite the substantial amount of research that shows the risk factors associated with foster youth having an increased risk of pregnancy, there is little information that shows what actually causes foster youth to become pregnant at such alarming rates (Oshima et al., 2013). One study suggested that the feelings of wanting to be loved and wanted encouraged foster youth to deliberately choose pregnancy and parenting as an opportunity to start a family and fulfill those unmet needs (Oshima et al., 2013).

#### Current Perceptions of AB12

The University of Chicago conducted a study for California Youth Transitions to Adulthood Study (CalYOUTH) evaluating AB12 outcomes during the transition period to adulthood for foster youth (Courtney, Charles, Okpych & Halsted, 2014). They used information from transition-age youth, child welfare workers, and government program data. The study was a combination of qualitative and quantitative data. Two hundred and thirty-five social workers were sent an electronic survey to get their perception on AB 12 (Courtney et

al., 2014). Researchers made sure adequate numbers of caseworkers per county were included from the 52 counties, and if the county had less than 10 workers who met the eligibility criteria then all were solicited for the study (Courtney et al., 2014). Counties were broken down by category, based on population size into rural, urban and large urban (Courtney et al., 2014).

Caseworkers reported that half of their youth reported a high need for services in the areas of finding and maintaining employment, managing their money and finding and maintaining housing (Courtney et al., 2014). Based on their work with the young adults, 83% of workers believed youth wanted to remain in care for housing and other support and over half the workers believed the young adults wanted to leave care for the independence (Courtney et al., 2014). Furthermore, caseworkers reported that 85% of their youth had positive attitudes toward their extended care. Almost 70% of caseworkers reported there were more services in their counties for educational and employment purposes than for financial literacy, safety concerns, interpersonal relationships, health education, and sexual health (Courtney et al., 2014).

Furthermore, the majority of caseworkers thought the most helpful of the available services were in areas of education and employment (Courtney et al., 2014). Forty-nine percent of caseworkers selected 'few' available housing options for youth in AB12 and 40% reported that there were 'some'



available options in their county for housing (Courtney et al., 2014). Only 17% of caseworkers felt the housing was appropriate for their youth.

Caseworkers reported neutral feelings concerning the collaboration of services for AB12 youth in the areas of housing, employment, substance abuse treatment, physical and mental health, and education (Courtney et al., 2014). Almost 50% of the caseworkers reported that court personnel was mainly supportive of AB 12 (Courtney et al., 2014). The majority of caseworkers believed services were absolutely needed beyond 18, even though half believed extending care would somewhat increase dependency, the majority also believed youth would be independent at age 21 (Courtney et al., 2014).

The main challenges stated with implementing AB 12 dealt with lack of placement options and services, lack of clarity in policies and procedures of extended care and the coordination between county child welfare agencies and other systems (Courtney et al., 2014). Overall, attitudes about extending care were positive from caseworkers (Courtney et al., 2014).

### How to Effectively Implement Foster Care to 21

It should be noted that Extended Foster Care and the extended benefits it offers should not be all that the program consists of. Implementing new mandates and expecting for it to work in a system that has not historically yielded positive outcomes for emancipated foster youth, and leaving it as is, is not sufficient enough. It should be of quality, and look a certain way and

everyone has to be responsible (Jim Casey Youth Opportunities Initiative, 2011). It should be developmentally appropriate for young adults and their needs, not those of children, it should be geared toward permanency, it should be youth driven and based on research on brain development (Jim Casey Youth Opportunities Initiative, 2011).

Furthermore, the effectiveness of the program means all the responsibility is not left on the young adult, but rather carried by the young adult, their social worker, their attorney and the judicial system (Jim Casey Youth Opportunities Initiative, 2011). The young adult should be responsible for engaging in their permanency plan, engaging in their transition to adulthood and communicating with their social worker (Jim Casey Youth Opportunities Initiative, 2011). The worker should assist the young adult in bettering their well-being, therefore they should include the young adult in the case plan, as well as, assist them in areas such as pursuing education, accessing health needs, good decision making, and overall, being of guidance (Jim Casey Youth Opportunities Initiative, 2011). The attorney should notify the young adult of court dates, encourage the young adult to attend and participate in review hearings, and overall, support the youth in court through advocacy (Jim Casey Youth Opportunities Initiative, 2011). Extended Foster Care should further provide young adults with social engagement opportunities, supportive connections, and employment and career training that lead to a career. Although, this plan of implementation seems obvious, it

is clear that it is not so, as evidenced by, the current and historical outcomes emancipated foster youth have experienced or are experiencing.

### Summary

The historical outcomes of emancipated foster youth have been negative in the areas of housing, mental health, education, employment, the criminal justice system and pregnancy and parenting. However, through the implementation of AB 12 and its associated programs and services, it is with great hope that these outcomes improve in respect to emancipated foster youths' ability to be more independent. Thus far, it appears AB 12 is only satisfactorily making strides according to California social workers as there still seems to be confusion about implementation, some lack of needed services, and a lack of coordination between the counties. However, social workers also believe AB 12 is needed and that youth will be prepared for independence by the end of their extended stay at age 21.

## CHAPTER THREE

### METHODS

#### Introduction

This chapter will outline the design of the study. It will include the sampling utilized, the instruments to collect data and how the data was utilized, as well as, the procedures to conduct the study. It will discuss how the human subjects were protected and how the researcher analyzed the collected data.

#### Study Design

This study was conducted with young adults participating in programs for transitional age youth in San Bernardino County. This study was exploratory in nature as there was not a sufficient amount of literature on the topic of efficacy with the implementation of extending services referred to as Extended Foster Care, the Aftercare Program, or other programs with transitional services available to current or former foster youth. A quantitative method was used in the form of a questionnaire to survey young adults who are participating in EFC and the Aftercare Program. This method was chosen because it yielded a vast array of data, as so much is unknown about program evaluation in extending foster care services.

A limitation of this study method is that the data was collected only from San Bernardino County. A second limitation is that a sample of 72 individuals

is not generalizable due to the sample size in comparison to the massive amount of foster youth who exit the foster care system, however it is representative. A third limitation is that the time frame to collect data was short. Last, mostly concrete answers arose from this questionnaire. There was an option of “other”, but individuals generally decided to not provide a description for indicating this response. The research question was ‘Does participating in Extended Foster Care (EFC) or the Aftercare program increase a young adult’s ability to be independent/self-sufficient?’

### Sampling

The sample consisted of 72 young adults, ages 18 and up, participating in Extended Foster Care (EFC) or the Aftercare program provided by San Bernardino County. The cities in which data collection occurred were San Bernardino, Fontana, Victorville and other cities in San Bernardino County. The EFC sample was collected from various Children and Family Service agencies in San Bernardino County. A questionnaire was given to social workers to distribute to eligible young adults. The sample that is not participating in Extended Foster Care was collected from Aftercare service providers, ASPIRAnet and Walden Family Services. Questionnaires for Aftercare services were dispersed through online survey and/or in person.

This sample was chosen because the youth in these programs and services fit the above criteria for being former or current dependents of San Bernardino County. Permission was requested from San Bernardino County’s

Department of Children and Family Services and ASPIRAnet, and Walden Family Services for data collection. A sample of 36 young adults was obtained from the Children and Family Services Extended Foster Care program. A sample of 36 young adults was obtained from ASPIRAnet and Walden Family Services. The approval letters were submitted to the Institutional Review Board with the proposal application for access to disburse the questionnaires to the EFC young adults' social workers, as well as, directly to those young adults participating in the Aftercare Program at Walden Family Services and ASPIRAnet.

#### Data Collection and Instruments

Data on the following topics was collected: Demographics, health care, employment, transportation, education, housing, mental health, pregnancy/parenting status, social support, services received in Independent Living Program (ILP), EFC, and/or the Aftercare Program and the young adults' perceived notions of the helpfulness of the programs, From whom they received information about these services, duration of participation in services, as well as, their confidence in their independence skills. Please see Appendix A for a sample questionnaire.

The independent variables were the young adults' participation in Extended Foster Care (EFC) and the Aftercare program (Walden Family Services and/or ASPIRAnet). The dependent variable was the young adults' perceived ability to be independent/self-sufficient.

The data was collected through a newly created instrument. The independent variable was measured through the responses to questions concerning the nature of services such as the young adults duration in services, whom they received services from, and what topic areas were learned. The dependent variable was measured by collecting responses concerning the young adults' current status in education, housing, employment, physical health, mental health, parenting, transportation method, and their perceived ability to be independent/self-sufficient. Furthermore, demographics such as age, educational attainment, sexual orientation, gender, ethnicity, marital status and income were collected. The levels of measurements drawn from this data was nominal, ordinal, and interval measurements. Variables addressing the young adults duration in services, whom they received services from, what topic areas were learned, and their current status in education, housing, employment, physical health, mental health, parenting, sexual orientation, gender, ethnicity, marital status and their perceived ability to be independent/self-sufficient yielded nominal data. Age yielded interval data. Questions about the young adult's confidence in their ability to be self-sufficient, as well as, their views of helpfulness of the services, their educational attainment, their social support and income yielded ordinal data.

Existing instruments were not used because there were not any created to measure independence skills among young adults receiving transitioning

age services. The instrument was created through reviewing literature on outcomes of foster youth, and recognizing the persistent themes that kept arising concerning obstacles surrounding the lack of independence. The strengths of the instrument was that it yielded the youths' perception of their independence based on the services they participate in as current or former foster youth. It should be noted that youth perception is most important in this evaluation because if youth do not believe a program is effective in what its goal is, then amendments can be made.

The strengths of collecting data in questionnaire form were that it was quicker, simpler and more feasible than qualitative methods of data collection. A limitation of this created instrument was that data lacked information that is rich in content because quantitative data is concrete. A second limitation is that it was a new instrument and therefore, is not proven to be valid (Royse, 2011). A third limitation is that the instrument is not reliable due to the lack of ability to reproduce similar results in this study (Royse, 2011). This instrument was reviewed by agency supervisors who have histories of working with foster youth and are currently working with ILP youth, EFC youth, and young adults receiving Aftercare services to ensure that the questionnaire was well understood by the young adults.

### Procedures

The researchers notified San Bernardino County Children and Family Services, Walden Family Services, and ASPIRAnet of the study through



personal meetings, electronic mail, as well as, presentations. The agency personnel notified the youth about the study. They provided the youth with online questionnaire links or a hard copy of the questionnaire. Participants were recruited through a time span of January 2015 through March 2015.

The researchers provided questionnaires to participants electronically through an online survey program, through administration by the case carrying social workers, and through dissemination by the researchers. Life Coaches with Walden Family Services disseminated the questionnaire to participants and provided them with return envelopes to ensure confidentiality of their responses and to eliminate chances of repercussions. Participants were provided with written informed consent and were asked to complete a questionnaire consisting of 15 sections, which took approximately 20 minutes to complete. Following the questionnaire, participants received a \$5 gift card to Walmart as a token of appreciation. Please see Appendix B for informed consent.

#### Protection of Human Subjects

The confidentiality and anonymity of the participants was protected through various strategies. The researchers provided participants with a written informed consent and were asked to omit their name and sign an X on the questionnaire, indicating voluntary participation. All responses were kept on a password-protected device for future analysis. Participants were provided with a debriefing statement in which information for the goal of the study was

presented. The debriefing statement included transitional age youth service information, as well as contact information of the researchers. All physical data was destroyed following the completion of the research project. Please see Appendix C for the debriefing statement.

### Data Analysis

The data was analyzed using a quantitative approach to answer the research question. The data was collected through Survey Monkey and exported on to SPSS software for an analysis. A comparative analysis was conducted between current and former foster youth and differentiated between youth who participated in EFC, and youth who did not participate in EFC and only received services from the Aftercare Program. The concepts that emerged were the young adults knowledge of topics learned in EFC and the Aftercare Program through their participation, their perception of the usefulness of services and staff personnel, and their outcomes in the areas of: medical, employment, transportation, housing, parenting, education involvement with the criminal justice system, and perceived notions of connections to support systems and overall independence. The results gathered provided the agencies with an overview of the effectiveness of their programs in promoting independence, and insight on services that may need improvement. Descriptive statistics including frequencies and descriptives were ran on all variables. Bivariate analysis such as correlation relationships were ran on young adults participating in EFC services or the Aftercare

services and their feelings of confidence and their abilities to provide for themselves. Also correlations were ran on having a support system and young adult's feelings of confidence. Independent sample t-test was ran on experiences of homelessness and arrests.

### Summary

The study was exploratory and quantitative, using an instrument in the form of a newly created questionnaire. The sample size included 72 young adults, ages 18 and over, currently or formerly participating in foster care services through EFC, Walden Family Services or ASPIRAnet (Aftercare Programs). Data concerning the young adults demographics, perceptions of services, self-perception of independence, and which topic areas were learned in Aftercare services or EFC, and information concerning health care, employment, education, housing, mental health, pregnancy/parenting status, and social support/connections was collected. Questionnaires took approximately 20 minutes to complete. They were collected through interoffice mail and self-administration. Participants remained anonymous. Final data was analyzed using the SPSS statistical program.

## CHAPTER FOUR

### RESULTS

#### Introduction

This chapter will present demographic data of the participants that was gathered through the quantitative questionnaires. This section will also include major variables and responses that emerged from the young adults and their participation in ILP, EFC, or Aftercare. It will also consist of other major variables including medical information, employment, information, transportation information, housing information, criminal justice involvement, parenting, support system, termination services, and the young adults feelings of confidence in being able to provide for themselves. Lastly, this section will discuss the results for the various tests ran which include frequencies, descriptive statistics, and t-test's. Finally, the major findings of the results of the study will be summarized.

#### Demographics

The total sample population for both EFC and the Aftercare Program was 72. The sample population consisted of 36 young adults participating in EFC, and 36 young adults participating in the Aftercare Program. Of the participants 24 identified as males (33.3%), 46 identified as female (63.9%), and 1 identified as a transgender (1.4%). The young adults were asked to provide their demographic information including their age, gender, sexual

orientation, annual income range, highest level of education, ethnicity, and marital status.

Of the young adults that participated in this study, their ages were 18 to 22+ years of age. When asked their age, 26.4% were age 18, 30.6% were age 19, 33.3% were age 20, 6.9% were age 21, and 2.8% were age 22 or above. When asked about their sexual orientation, 1.4 % identified as gay, 1.4% identified as lesbian, 90.3% identified as straight, 2.8% identified as being bisexual, and 1.4% identified as being queer, or questioning their sexuality. When asked about their ethnicity, 48.6% reported to being African-American/ Black, 23.6% were Hispanic/ Latino, 26.4% were Caucasian/ white, 1.4% were Asian/ Pacific Islander, 4.2 % were Native American, and 5.6% reported as being from another ethnicity not listed. When asked about their annual income range, 84.7% percent reported to earning less than \$10,000 annually, 5.6 % earned between \$10,000 to \$20,000 annually, 2.8% earned between \$21,000 and \$20,000 annually, 1.4% earned between \$31,000 and \$40,000 annually, and 1.4% earned \$60,000 or more annually. When asked about their marital status, 4.2% reported as being married, 73.6% were single, 13.9% were in a relationship, but living separately from their significant other, and 5.6% were in a relationship, and living together with their significant other. Please see Table 1.

Table 1. Demographics of Participants

Variable	Frequency (N)	Percentage
<b>Gender (N = 72)</b>		
Male	24	33.3
Female	46	63.9
Other (Transgender)	1	1.4
<b>Age</b>		
18	19	26.4
19	22	30.6
20	24	33.3
21	5	6.9
22+	2	2.8
<b>Ethnicity</b>		
Caucasian/ White	19	26.4
Hispanic/ Latino	17	23.6
Asian/ Pacific Islander	1	1.4
Native American	3	4.2
African American/ Black	35	48.6
Other	4	5.6
<b>Marital Status</b>		
Married	3	4.2
Single	53	73.6
In a relationship, living separately	10	13.9
In a relationship, living together	4	5.6
Other	2	2.8
<b>Education</b>		
Some high school	15	20.8
High school diploma	23	31.9
Some college	31	43.1
Associates Degree	1	1.4
Bachelor's Degree	0	0
<b>Income Level</b>		
Less than \$10,000	61	84.7
\$10,000 - \$20,000	4	5.6
\$21,000 - \$30,000	2	2.8
\$31,000 - \$40,000	1	1.4
\$41,000 - \$50,000	0	0
\$51,000- \$60,000	0	0
\$60,000 plus	1	1.4

## Presentation of the Findings

### Major Variables

This study consisted of 72 young adults who participated in the Independent Living Program (ILP), EFC and/or the Aftercare Program through ASPIRAnet or Walden Family Services.

#### Independent Living Program (ILP)

Sixty young adults reported participating in the ILP program. At least half of the 60 young adults reported that they learned the following skills in ILP: Housing, employment, resume/interview skills, job training, financial assistance for college/vocation schooling, and educational resources. Money management was the highest reported skill area with 56 of the 60 young adults reporting they learned about it in ILP (93%). When asked what sources the young adults used to obtain information about the ILP program services, the majority of the young adults reported they use their social worker (n=40). Subsequently, they almost equally reported that they used their social worker 'Often' (n=20) or 'Always' (n=21) to find out about services in general. Overall, thirty-seven young adults found the ILP program helpful. Please see Table 2.

Table 2. Independent Living Program (ILP)

Variable	Frequency (N)	Percentage
<b>How many participated in ILP (N = 72)</b>		
Yes	60	83.3
No	12	16.7
I am unfamiliar with this program	0	0
<b>Learned skill areas</b>		
Daily living skills	31	43.1
Money management	56	77.8
Decision making	39	54.2
Building self-esteem	31	43.1
Job training	41	56.9
Financial assistance with College or vocational skills	36	50
Educational resources	37	51.4
Housing (Transitional Housing)	42	58.3
Employment	45	62.5
Resume/Interview Skills	40	55.6
Mental Health Support	25	34.7
Other	3	4.2
<b>From whom did they receive information about ILP services</b>		
Social Worker	40	55.6
Foster Parent/Resource Parent/Caregiver	17	23.6
Legal guardian	3	4.2
A peer	6	8.3
ILP program clerk	17	23.6
PFA (Peer Family Assistant)	0	0
Relative Caregiver/NREFM	1	1.4
Other	9	12.5
<b>Found the ILP program helpful</b>		
Strongly Agree	37	51.4
Agree	21	29.2
Neutral	5	6.9
Disagree	0	0
Strongly Degree	0	0



### Extended Foster Care (EFC)

Thirty-eight of the 72 young adults in this study stated that they participated in the EFC program (52.8%). The requirement that was being fulfilled the most to meet eligibility requirements for EFC was that the young adult was enrolled in college/vocation training at least part time, followed by those who reported they were finishing high school. The young adults mostly reported that they had been in EFC less than 6 months. The major topics the young adults reported learning in EFC was maintaining housing, budgeting money, applying to college/vocational school, opening a savings/checking account and using public transportation. When asked what sources the young adults used to obtain information about EFC, the majority of the young adults said social worker (N=41). Overall, twenty-nine of the young adults reported that they 'Strongly Agree' that EFC has helped them take care of themselves. Please see Table 3.

Table 3. Extended Foster Care (EFC)

Variable	Frequency (N)	Percentage
<b>How many are currently participating in EFC (N=72)</b>		
Yes	38	52.8
No	17	23.6
Unfamiliar with the program	7	9.7
<b>Requirement being used to be involved in EFC</b>		
Work for at least 80 hours a month	7	9.7
Finishing high school	11	15.3
Enrolled at least part time in college/ vocational school	23	31.9
Participating in a program designed to remove barriers	9	12.5
Not able to fulfill education or work requirement	1	1.4
<b>Length of time participating in EFC</b>		
Less than 6 months	19	26.4
6 months- 1 year	17	23.6
1 year-2 years	1	1.4
2-3 years	3	4.2
<b>Topics that participating in EFC helped you with</b>		
Searching for employment	33	45.8
Maintaining employment	18	25.0
Maintaining Housing	35	48.6
Budgeting money	37	51.4
Applying for medical coverage	19	26.4
Applying to college/ vocational school	31	43.1
Maintaining enrollment in college/ vocational school	19	26.4
Open a checking/ savings account	28	38.9
Using public transportation	27	37.5
Providing public assistance	27	37.5

Sex education	17	23.6
Services to address mental health conditions	13	18.1
Individual counseling	12	16.7
Group counseling	17	23.6
Other	9	12.5
	3	4.2

**From whom did you receive information about EFC services**

Social worker	41	56.9
Foster parent/ resource parent/ caregiver	13	18.1
A peer	2	2.8
PFA (Peer Family Assistant)	0	0
Relative caregiver/ NFREM	1	1.4
Other	2	2.8

**Found the EFC program helpful in taking care of myself**

Strongly agree	29	40.3
Agree	15	20.8
Neutral	4	5.6
Disagree	1	1.4
Strongly disagree	0	0

Aftercare

Forty-eight young adults reported that they are participating in the Aftercare Program via ASPIRAnet or Walden Family Services. The most reported area of learning were the following: Maintaining housing, Searching for employment, maintaining employment, applying to college/vocational school, opening a checking/savings account, using public transportation and budgeting money. The young adults' duration in the Aftercare Program was majorly less than six months, followed by six months to a year. Thirty-five

reported that they received information about the Aftercare Program from their social worker. The main reasons young adults stated that they did not participate in EFC was because they did not want to, they were not enrolled in college or they did not complete high school. Overall, thirty-one young adults strongly agreed that participating in the Aftercare Program taught them to be independent/take care of themselves. Please see Table 4.

Table 4. Aftercare Program

Variable	Frequency (N)	Percentage
<b>How many are currently participating in the Aftercare Program (N=72)</b>		
Yes	48	66.7
No	6	8.3
Unfamiliar with the program	2	2.8
<b>Length of time participating in Aftercare</b>		
Less than 6 months	17	23.6
6 months- 1 year	13	18.1
1 year-2 years	8	11.1
2-3 years	10	13.9
<b>Skill areas learned</b>		
Searching for employment	42	58.3
Maintaining employment	36	50
Maintaining Housing	38	52.8
Budgeting money	44	61.1
Applying for medical coverage	32	44.4
Applying to college/ vocational school	37	51.4
Maintaining enrollment in college/ vocational school	33	45.8
Open a checking/ savings account	36	50.0
Using public transportation		
Applying for public	37	51.4

assistance		
Sex education	30	41.7
Services to address mental health conditions	22	30.6
Individual counseling	22	30.6
Group counseling		
Other	26	36.1
	21	29.2
	4	5.6

**Reasons why they are not participating in EFC**

I did not want to	4	5.6
They did not complete high school	4	5.6
They are not working at least 80 hours a month	1	1.4
They are not enrolled at least part time in college/vocational training	6	8.3
They are not participating in a program to promote or remove barriers to employment	2	2.8
They are not able to fulfill of the requirements due to a medical condition	0	0
Other	7	9.7

**From whom did you receive information about Aftercare services**

Social worker	35	48.6
Foster parent/ resource parent/ caregiver	5	6.9
Legal guardian	1	1.4
A peer	7	9.7
ILP program clerk	10	13.9
Peer Family Assistant (PFA)	1	1.4
Relative caregiver/ NFREM	2	2.8
Other	4	5.6

**Found the Aftercare program helpful in taking**

**care of myself**

Strongly agree	31	43.1
Agree	14	19.4
Neutral	3	4.2
Disagree	0	0
Strongly disagree	0	0

**Other Major Variables**Medical

Sixty-five of the young adults said that they had medical insurance. Of the 65 young adults who had medical insurance, 64 had Medi-Cal, and 3 said that they had some other form or type of medical insurance. When asked if they have ever been diagnosed with a mental health condition, 54 young adults said that they have never been diagnosed. Of the 13 young adults that have been diagnosed with a mental health condition, 15 stated that they did receive help/ treatment for their condition, and 10 stated that they have never received help/ treatment for their condition. Of the people that were diagnosed and received treatment for their condition, 6 received counselling services, 1 person received medication, 11 people received both counselling and medication, and 1 person received natural treatment. Of the young adults that did not receive help for their mental health condition, they individually reported that they did not want help or that their medical insurance provider messed up on their paperwork.

Transportation

When asked about their transportation, 53 young adults reported that they did not have a vehicle, and 47 young adults reported that they did not

even have use of a vehicle. The majority of the young adults (44) did not have a valid driver's license. Of the 19 young adults who had a vehicle, all of them had their vehicle up-to-date with insurance and registration. Of those who did not drive, 53 (73.6%) used busing as their main form of transportation, 6 (8.3%) used a train, 9 (12.5%) used a bike/scooter, 12 (16.7%), used a friend, and 4 (5.6%) used other methods of transportation such as family, skateboarding, or walking.

### Employment

Of the total participants, 48 young adults stated that they were unemployed, and 24 stated that they were employed. Of those that were employed, 7 young adults were working full-time, and 16 were working at least part-time.

### Feelings of Confidence to Provide for One's Self

Overall, the majority of the young adults were at least confident in their abilities to provide for themselves. 'Confident' was reported 19 times and 'Very Confident' was reported 33 times.

### Support System

Sixty-seven of the young adults reported that they had someone who would always pick up the phone when they needed help and 54 of them have known this person over two years.

### Criminal Justice System Involvement

Only nine young adults reported that they had been arrested, and two of those arrests were as adults over the age of 18.

### Education

Twenty-four young adults stated that they were enrolled at least part-time in college/vocational school. It was reported that that twenty-one are enrolled full-time.

### Termination Services

More than half of the young adults reported that they received the following upon termination of foster care or at reaching age 18: Social security card, birth certificate, driver's license/State I.D., dependency letter, and their health and education report.

### Housing

Seventy of the young adults reported having stable housing. The most commonly reported housing was THP Plus and THP Plus Foster Care. Twenty-four young adults stated that they had been homeless before. Most of them had been homeless 1-2 times (19) and six had been 4 or more times.

### Parenting

Sixteen young adults reported having a child/children. Thirteen had only one and the others had 2 or more. Fifteen young adults said the child was living with them and three reported being currently pregnant.



## Data Analysis

There was no significant difference between young adults participating in EFC services or the Aftercare services and their feelings of confidence and their abilities to provide for themselves. Having a support system did not increase feelings of confidence among this sample of young adults. There was also no difference in having a child or children and the level of education obtained. However, the relationship between experiences of homelessness and being arrested was significant ( $t=4.8$ ,  $p=.04$ ).

## Summary

This study compared 72 young adults participating in EFC, ASPIRAnet or Walden Family Services. The two groups were represented equally with 36 young adult participants each. Demographics such as age, ethnicity/race, gender, level of education, marital status, sexual orientation, and income were examined. ILP, EFC, and the Aftercare Program were the major variables evaluated. Young adults perceptions of their abilities to provide for themselves, and individual information regarding education, health care, housing, transportation, employment, support system, criminal justice system involvement and parenting status was also examined. Lastly, who they received information from about the EFC and Aftercare program services was determined.

## CHAPTER FIVE

### DISCUSSION

#### Introduction

This chapter will contain a detailed discussion of the findings and the researchers' interpretations of the results. It will also include strengths and limitations of the study, as well as, recommendations for social work practice, policy and future research. Then it will conclude with summarizing statements of the study.

#### Discussion

This study examined former and current foster youth ages 18 and above receiving services from EFC or the Aftercare program. The following will cover some of the interpretations about the reported data.

#### Housing

The majority of the young adults had not experienced homelessness (63.9%) which is similar to that of the Midwest Study. Their study stated that 30% of their sample had experienced a period of homelessness (Dworsky & Courtney, 2010b). However this may be due to the fact that the majority are being provided with housing services through EFC or the Aftercare Program referred to as transitional housing.

#### Employment

In this study, 66.7% of the young adults were not employed. The Midwest Study reported that almost 50% of the young adults were not

employed (Naccarato et al., 2010). However, this can be due to the fact that the majority of young adults in this study are in college or high school.

### Mental Health

It is estimated that 25% of young adults who exit foster care have either PTSD, anxiety, attachment disorder or depression (Gardner, 2008). Although this study did not look at specific mental illnesses, only 13% of the young adults in this study had reported being diagnosed.

### Support System

Research has suggested that the majority of foster youth do not have a reliable support system to fall back on in their time of need, however in this sample the evidence does not support that research finding as 93.1% stated having someone who always answers the phone when help was needed (Arnett, 2007). This poses as a good resource for these young adults being that they are former foster youth.

### Education

A study on former foster youth reported that 39% to 65% of the young adults had a high school diploma (Jones, 2011). This is similar to the 32% of young adults who had a high school diploma in this study. Although only 11% of the young adults in the Midwest study went on and graduated from college, many still hoped that they could fulfill this educational goal (Dworsky & Courtney, 2010a). The goal of attaining a college education can also be

observed from the young adults in this study because 43% of them currently report having 'some college'.

### Parenting

Sixteen young adults in our study reported having children and thirteen reported having only one child. Eleven (68%) of them reported being single possibly meaning they are the sole provider for their child. Also of the 16, eleven reported making less than \$10,000 a year. The federal poverty line for one person is \$11,770 a year (DHHS, n.d.). Being that the majority of young adults in this study make below \$10,000 a year they are considered below poverty. Furthermore, according to the living wage calculator created by the Massachusetts Institute of Technology, \$44,176 a year is required to provide for one adult and one child after taxes (Glasmeier, 2015).

### Confidence in the Ability to be Independent

The majority of the young adults stated that they felt at least confident in their ability to take care of themselves, however the majority of them made less than \$10,000 a year which was indicated to be below the poverty line (DHHS, n.d.). However, this may indicate that these young adults have a positive self-image that they can be self-sufficient regardless of obstacles and therefore, they will be; this is similar to having a self-fulfilling prophecy state of mind.

Overall, the Midwest study emphasized that care past age 18 would yield better outcomes for foster youth. It appears their hypothesis is beginning

to be fulfilled in this sample of young adults. Although 66.7% of the young adults are not employed, most reported having stable housing (97.2%), medical insurance (90.3%), some at least a high school diploma (31.9%) or some college (43.1%), never being arrested (87.5%) and not having any children (66.7%). However, obtaining long term positive outcomes presents concerns in this study being that these young adults currently have additional support and a safety net within the programs they participate in. These programs will no longer be available at age 21 for EFC participants and age 24 for Aftercare participants. Overall, it is promising that these young adults are doing what is needed in order to become stable such as obtaining a higher education.

## Strengths and Limitations

### Strengths

One strength is that the study was quantitative meaning that it required less time than conducting interviews or other qualitative methods. Therefore, the data analysis also required less time being that the program utilized was Survey Monkey which easily exports data into SPSS and this helped efficiency. The racial/ethnic diversity was well represented given the geographical area. The study also yielded an even amount for comparison of the young adults in EFC and the Aftercare Program. The study allowed the young adults to expand on some responses. The study also evaluated a recently implemented program.

## Limitations

It is imperative to note the various inconsistencies of this study. The study consisted of a limited sample of 72 participants. The study strictly consisted of young adults who had current or former dependency cases with San Bernardino County Children and Family Services. Also the study contained largely concrete responses as options. It also appeared that the amount of questions the survey contained was excessive and this resulted in questions not being fully read which resulted in obvious confusions among responses. Certain questions could have been clearer and more distinguishable. For example, there was no difference in THP-Plus and THP-Plus Foster Care, which was important to distinguish young adults participating in EFC or in the Aftercare Program. Also more detail could have been given in areas; for example, there could have been a question on what academic major the young adult was part of which could determine whether employment outlook would be promising. Although the questionnaire was reviewed by professionals who work directly with this population, it was still apparent that certain vocabulary was not recognizable by the young adults. For example, it appeared they did not understand that primary means choose the main one and not multiple responses. Also other research looked at substance use, the number of placements foster youth experienced and the exact disorders young adults were commonly diagnosed with in looking at their outcomes for foster youth and this questionnaire did not address either topic.

Furthermore, the majority of the EFC sample was given to young adults directly by the social worker, therefore responses may not be truthful regarding questions about the social workers overall contribution to the young adults and young adults may have felt coerced into completing the questionnaires. This study also surveyed the young adults who most use these services and therefore, their current outcomes would be more positive than the average former/current foster youth. Lastly, it appeared it wasn't clear to young adults whether they were participating in EFC or the Aftercare Program being that a majority of the questionnaires had responses in both EFC and Aftercare sections; this was most likely due to young adults receiving housing services from the Aftercare Program, but not knowing that their main program of services was EFC. Due to the aforementioned reasons, this study cannot be considered reliable.

### Recommendations for Social Work Practice, Policy and Research

#### Recommendations in Research

It is recommended that more studies examining Extended Foster Care (EFC) and the Aftercare program, as well as other programs assisting foster youth beyond age 18 are conducted in order to evaluate the goals of creating independent young adults and improving outcomes of foster youth.

Furthermore, these studies should be qualitative in nature in order to yield more detailed information, especially regarding young adults plans to enhance

their future well-being and stability. It is also recommended that this type of study be done nationwide. Lastly, it is further recommended that the outcomes of young adults participating or who have participated in EFC and the Aftercare Program be reexamined in three or more years or when the young adults are age 25 and older. This is the first wave of young adults and it is too early to have an accurate evaluation of the programs and services.

#### Recommendations for Policy

It is recommended that if young adults do not appear to be independent by age 21 after further evaluations of services and programs for transitional age former and current foster youth, that care be extended until age 24. Due to the recent implementation of Extended Foster Care and similar programs it is difficult to interpret any need for improvement in policy.

#### Recommendations for Practice

Social workers have a duty to provide service to all clients. We recommend that transitioning age youth receive more attention due to this critical and complex stage in life, therefore it is recommended that these workers have reduced caseloads. Social workers also have a duty to act competently. Therefore, it is recommended that social workers develop their professional expertise to cover areas of adulthood in which young adults have difficulty such as writing a resume, getting financial aid for college, paying bills, writing our money orders etc.



## Conclusions

This study revealed similar findings to that of the Midwest Study which laid the foundation for Extended Foster Care and other programs like it. Although former and current foster youth associated with the foster care system still face adversity, the Aftercare Program and Extended Foster Care appear to be accomplishing the goal of helping young adults become more self-sufficient.

APPENDIX A  
QUESTIONNAIRE

## **Program Participation and Experiences in Young Adults Currently or Formerly Receiving Foster Care Services**

**This survey is designed to learn more about how young adults who are currently or formerly receiving foster care services perceive the services they are provided**

### **A. Independent Living Program**

A1. Did you participate in the San Bernardino County Children and Family Services Independent Living Program (ILP)? (If no or unfamiliar, select no or unfamiliar, and then skip to section B)

1. Yes
2. No
3. I am unfamiliar with this program

A2. If yes, what skill areas did you learn about? \*Circle all that apply\*

1. Daily living skills (cooking, cleaning, washing clothes, personal hygiene, mental health & physical health education etc.)
  2. Money management
  3. Decision making
  4. Building self-esteem
  5. Job training
  6. Financial assistance with college or vocational schools
  7. Educational Resources
  8. Housing (Transitional Housing)
  9. Employment
  10. Resume/Interview skills
  11. Mental Health support
  - 12.
- Other \_\_\_\_\_

A3. How often did you use your social worker/case worker to find out about services? (If you selected 1-4 then skip to A5)

1. Always
2. Often
3. Sometimes
4. Rarely
5. Never

A4. If never please indicate why you did not use your social worker to find out about these services?

---

A5. From whom did you receive information about ILP services? \*Circle all that apply\*

1. Social Worker
  2. Foster Parent/Resource Parent/Caregiver
  3. Legal Guardian
  4. A Peer
  5. ILP program clerk
  6. PFA (Peer Family Assistant)
  7. Relative Caregiver/NREFM
  - 8.
- Other \_\_\_\_\_
- 

A6. Please check one response for the following statement:

I found the ILP program helpful?

1. Strongly Agree
2. Agree
3. Neutral
4. Disagree
5. Strongly Disagree

A7. If you selected disagree or strongly disagree, please explain why? (Skip to section B if this does not apply to you)

---

## **B. Extended Foster Care/AB12**

B1. Are you participating in San Bernardino County Children and Family Services AB12/Extended Foster Care (EFC)? (If no or unfamiliar, select no or unfamiliar and skip to B9)

1. Yes
2. No
3. I am unfamiliar with this program

B2. Which requirement are you fulfilling to be involved in AB12/EFC? \*Circle all that apply\*

1. I work for at least 80 hours a month
2. I am finishing high school

3. I am enrolled at least part time in a college or vocational program
4. I am participating in a program designed to remove barriers for employment
5. I am not able to fulfill the education or work requirement

B3. How long have you been participating in AB12/EFC?

1. Less than 6 months
2. 6 months-1 year
3. 1 year-2 years
4. 2 years-3 years

B4. What topics has participation in AB12/Extended Foster Care helped you with?

\*Circle all that apply\*

1. Searching for employment
2. Maintaining employment
3. Maintaining housing
4. Budgeting money
5. Applying for medical coverage
6. Applying to college/vocational school
7. Maintaining enrollment in college/vocational school
8. Opening a checking/savings account
9. Using public transportation (if participant has no vehicle)
10. Providing public assistance (if needed)
11. Sex Education
12. Services to address mental health conditions
13. Individual Counseling
14. Group Counseling
- 15.

Other \_\_\_\_\_

B5. How often do you use your social worker/case worker to find out about services?

1. Always
2. Often
3. Sometimes
4. Rarely
5. Never

B6. If never explain why you did not use your social worker to find out about these services? (If you **did not** select 'never', skip to B7)

---

B7. From whom did you receive information about AB12/EFC services? \*Circle all that apply\*

1. Social Worker
2. Foster Parent/Resource Parent/Caregiver

3. A Peer
4. PFA (Peer Family Assistant)
5. Relative Caregiver/NREFM
- 6.
- Other \_\_\_\_\_

B8. Participating in AB12/EFC has been helpful in teaching me to take care of myself?

1. Strongly Agree
2. Agree
3. Neutral
4. Disagree
5. Strongly Disagree

### **C. Aftercare Services**

C1. Are you participating in San Bernardino County's Aftercare Program through Aspiranet or Walden Family Services? (If no or unfamiliar, select no or unfamiliar, and skip to section D)

1. Yes
2. No
3. I am unfamiliar with this program

C2. If yes, what skill areas are you learning about? \*Circle all that apply\*

1. Searching for employment
2. Maintaining employment
3. Maintaining housing
4. Budgeting money
5. Applying for medical coverage
6. Applying to college/vocational school
7. Maintaining enrollment in college/vocational school
8. Opening a checking/savings account
9. Using public transportation (if participant has no vehicle)
10. Applying for public assistance (if needed)
11. Sex Education
12. Services to address mental health conditions
13. Individual Counseling
14. Group Counseling
- 15.
- Other \_\_\_\_\_

C3. Participating in the Aftercare Program has been helpful in teaching me to take care of myself

1. Strongly Agree
2. Agree
3. Neutral
4. Disagree
5. Strongly Disagree

C4. How long have you been participating in the Aftercare Program?

1. Less than 6 months
2. 6 months-1 year
3. 1 year-2 years
4. 2 years-3 years

C5. From whom did you receive information about the Aftercare Program? \*Circle all that apply\*

1. Social Worker
2. Foster Parent/Resource Parent/Caregiver
3. Legal Guardian
4. A Peer
5. ILP program clerk
6. PFA (Peer Family Assistant)
7. Relative Caregiver/NREFM
- 8.

Other \_\_\_\_\_

C6. If you are not participating in AB12/EFC, please indicate your reason

1. I did not want to
2. I was not able to meet one of the following: \*circle all that apply\*
  1. Completing high school
  2. Enrolled in college or vocational program
  3. Participating in a program or activity designed to promote or remove barriers to employment, Employed for at least 80 hours per monthOR
4. Is unable to any of the activities described above due to a medical condition
3. Other \_\_\_\_\_

#### **D. TAY Center**

D1. Are you participating in San Bernardino County's services offered by the TAY Center? (If no or unfamiliar, select no or unfamiliar, and skip to section E)

1. Yes
2. No
3. I am unfamiliar with this program

D2. If yes, what skill areas are you learning about? \*Circle all that apply\*

1. Searching for employment
  2. Maintaining employment
  3. Maintaining housing
  4. Budgeting money
  5. Applying for medical coverage
  6. Applying to college/vocational school
  7. Maintaining enrollment in college/vocational school
  8. Opening a checking/savings account
  9. Using public transportation (if participant has no vehicle)
  10. Applying for public assistance (if needed)
  11. Sex Education
  12. Services to address mental health conditions
  13. Individual Counseling
  14. Group Counseling
  - 15.
- Other \_\_\_\_\_

D3. Participating in services through the TAY Center has been helpful in teaching me to take care of myself

1. Strongly Agree
2. Agree
3. Neutral
4. Disagree
5. Strongly Disagree

D4. How long have you been participating in the services in the TAY Center?

1. Less than 6 months
2. 6 months-1 year
3. 1 year-2 years
4. 2 years-3 years

D5. From whom did you receive information about the TAY Center services?

1. Social Worker
  2. Foster Parent/Resource Parent/Caregiver
  3. Legal Guardian
  4. A Peer
  6. PFA (Peer Family Assistant)
  7. Relative Caregiver/NREFM
  - 8.
- Other \_\_\_\_\_

D6. If you are not participating in AB12/EFC, please indicate your reason



1. I did not want to
2. I was not able to meet one of the following: \*circle all that apply\*
  1. Completing high school
  2. Enrolled in college or vocational program
  3. Participating in a program or activity designed to promote or remove barriers to employment, Employed for at least 80 hours per monthOR
  4. Is unable to do any of the activities described above due to a medical condition
3. Other \_\_\_\_\_

**E. Medical Information:**

E1. Do you have medical insurance? (If no, select no and then skip to E3)

1. Yes
2. No

E2. If so, who insures you?

1. Medi-Cal
2. through Employment
3. Other

E3. Have you ever been diagnosed with a mental health condition? (If no, select no and then skip to Section F)

1. Yes
2. No

E4. Did you receive help/treatment for your condition? (If yes, select yes and skip to section F)

1. Yes
2. No

E5. What kind of help did you get?

1. Counseling
  2. Medication
  3. Both
  4. Other
- 

E6. If you did not receive help; why?

---

**F. Employment Information:**

F1. Are you employed? (If no, select no, and skip to section G)

1. Yes
2. No

F2. If so, what is your status?

1. Full-time
2. Part-time
3. Seasonal

### **G. Transportation Information:**

G1. Do you have use of a vehicle?

1. Yes
2. No

G2. Do you own a vehicle?

1. Yes
2. No

G3. Do you have a valid driver's license?

1. Yes
2. No

G4. If you own a vehicle, is it up to date with insurance and registration?

1. Yes
2. No
3. Does not apply

G5. If you do not drive, what is your primary method of transportation?

1. Bus
  2. Train
  3. Bike/Scooter
  4. Friend
  5. Other
- 

### **H. Housing Information:**

H1. Do you currently have stable housing?

1. Yes
2. No

H2. What is your housing status? \*Circle all that apply\*

1. Foster home

2. SILP
3. THP Plus
4. Family
5. Legal Guardian
6. NREFM/Relative
7. Group home
- 8.
- Other \_\_\_\_\_

H3. Have you ever been homeless? (If no, select no then skip to section I) \*This includes couch surfing and moving from home to home\*

1. Yes
2. No

H4. How many times have you been homeless?

1. 1-2 times
2. 3-4 times
3. 4 or more times

**I. Criminal Justice System information:**

I1. Have you ever been arrested?

1. Yes
2. No

I2. If so, were you an adult (18 and over)?

1. Yes
2. No

**J. Parenting information** (if you do not have children, skip to section K)

J1. Do you have any children?

1. Yes
2. No

J2. How many children do you have?

1. 1
2. 2 or more

J3. Is the child/children living with you?

1. Yes
2. No

J4. Are you currently pregnant?

1. Yes
2. No

### **K. Support System Information**

K1. If you needed help do you have someone you could call who always picks up the phone?

1. Yes
2. No

K2. How long have you known this person?

1. 0-6 months
2. 6 months- 1 year
3. 1 year-2 years
4. Over 2 years

### **L. Education Information** (If you're in high school, select yes and skip to section M)

L1. Are you currently enrolled in high school?

1. Yes
2. No

L2. If you're enrolled in college/vocational training program, what is your status?

1. Full-time
2. Part-time

### **M. Termination Services**

M1. Upon exiting care at age 18 did you obtain the following documents? \*Circle all that apply\*

1. Social Security Card
2. A certified copy of your birth certificate
3. A copy of your health and education summary
4. Your driver's license or state I.D. card
5. A letter from the court proving that you were in foster care
6. Proof of your legal citizenship (if this applies to you)
7. A completed a Medi-cal application
8. Referrals to transitional housing programs
9. Other \_\_\_\_\_

### **N. General Questions**

N1. How confident are you in your abilities to provide for yourself?

1. Very Confident
2. Confident

3. Moderately Confident/Neutral
4. Not at all confident

## **O. Demographics**

O1. What is your age?

1. 18
2. 19
3. 20
4. 21
5. 22+

O2. What is your gender?

1. Male
  2. Female
  4. Other
- 

O3. What is your sexual orientation?

1. Gay
  2. Lesbian
  3. Straight
  4. Bisexual
  5. Queer/questioning
  6. Other
- 

O4. What is your annual income range?

1. Less than \$10,000
2. \$10,000-\$20,000
3. \$21,000-\$30,000
4. \$31,000-\$40,000
5. \$41,000-\$50,000
6. \$51,000-\$60,000
7. \$60,000 plus

O5. What is your highest level of education?

1. Some high school
2. High school Diploma
3. Some College
4. Associate Degree
5. Bachelor's degree

O6. What is your ethnicity? \*Circle all that apply\*

1. Hispanic/Latino
  2. African-American/Black
  3. Caucasian/White
  4. Asian/Pacific Islander
  5. Native American
  6. Other\_\_\_\_\_
- 

O7. What is your marital status?

1. Married
  2. Single
  3. Separated
  4. Divorced
  5. Widowed
  6. In a relationship, living separately
  7. In a relationship, living together
  8. Other
- 

**Thank you for participating ☺ Please return the questionnaire back to the person who you received it from to receive your gift card. If you received it by mail, please mail it back in the return envelope. If you received it from your social worker, please return it to them in the envelope you were given.**

Developed by Stephanie Carolina Montes and Chelle Joyce Stokes

APPENDIX B  
INFORMED CONSENT

## Informed Consent

**Description:** This study has been approved by the School of Social Work's Sub-Committee of the California State University, San Bernardino Institutional Review Board. This study has been designed to explore your view of the foster care services or aftercare services you are currently receiving in San Bernardino County. This includes services through AB12 (EFC), TAY Center, ASPIRAnet, and/or Walden Family Services. Specifically this survey will consist of the following topic areas: Health Care, employment, education, housing, mental health, close relationships, services received in Independent Living Program (ILP), EFC, TAY Center and/or the Aftercare Program (Walden or ASPIRAnet) and your view of the helpfulness of the programs, as well as, your confidence in your ability to be self-sufficient/independent. This study will be conducted by Stephanie Montes and Chelle Stokes, MSW Students, under the supervision of Dr. Carolyn McAllister, Assistant Professor and Director of the Bachelors of Social Work Program at California State University, San Bernardino.

**Procedures:** The questionnaire is expected to take 20 minutes to complete. It will consist of multiple choice questions in the topic areas described in the "Description" section, as well as, some open ended questions.

**Risk/Discomforts:** There are no foreseeable risks associated with participation in this study. If you experience any discomfort you may stop participating.

**Incentives:** Once you complete the questionnaire, you will be provided with a debriefing statement explaining the nature of study and a token of our appreciation (\$5 WalMart Card).

**Benefits:** The advantages of participation in this study are that your responses can lead to policy changes and/or improvement in service and program delivery for agencies that serve current and former foster youth.

**Confidentiality/Anonymity:** All responses will be kept anonymous, as you will be marking an 'X' instead of signing your name. If you're participating in the questionnaire through the mailing options, identifying information on envelopes will be destroyed upon receiving the returned questionnaire. All results will be kept on a password protected device in which only the researchers and Dr. Carolyn McAllister will have access.

**Participation:** Participation in this study is voluntary and you also have the option to withdraw from the study at any time without penalty.



**Questions:** If you have any questions or concerns about the study feel free to contact Dr. Carolyn McAllister at (909) 537-5559 for additional information.

**Results:** The results of this study will be available in California State University, San Bernardino's Pfau library after September 2015.

**Confirmation Statement:** By marking with an 'X' below, you acknowledge that you have been informed and understand the nature and purpose of this study, and you give your consent to participate. I acknowledge that I am 18 years of age or older and participating in services through AB 12, TAY Center, ASPIRAnet, and/or Walden Family Services.

Marking: \_\_\_\_\_

Date: \_\_\_\_\_



College of Social and Behavioral Sciences  
School of Social Work

Informed Consent

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Marking: \_\_\_\_\_

Date: \_\_\_\_\_

909.537.5501

5500 UNIVERSITY PARKWAY, SAN BERNARDINO, CA 92407-2393

California State University, San Bernardino  
Social Work Institutional Review Board Sub-Committee  
APPROVED 11/15/14 VOID AFTER 11/15/14  
IRB CHAIR [Signature]

The California State University - Salsfield - Channel Islands - Chico - Dominguez Hills - East Bay - Fresno - Fullerton - Humboldt - Long Beach - Los Angeles  
Maritime Academy - Monterey Bay - Northridge - Pomona - Sacramento - San Bernardino - San Diego - San Francisco - San Jose - San Luis Obispo - San Marcos - Sonoma - Stanislaus

APPENDIX C  
DEBRIEFING STATEMENT

**Program Participation and Experiences in Young Adults Currently  
or Formerly Receiving Foster Care Services  
Debriefing Statement**

The study you have just completed was designed to investigate the outcomes of young adults currently or formerly placed in foster care in San Bernardino County in the areas of society's definition of reaching independence. This study was conducted by Stephanie Montes, MSW Student and Chelle Stokes, MSW Student, under the supervision of Dr. Carolyn McAllister, Assistant Professor at California State University, San Bernardino. In the study, the following areas of independence were assessed: health care, employment, education, housing, mental health, and interpersonal relationships/connections. We are particularly interested in young adult's perceived notions of helpfulness of the services offered in the Independent Living Program (ILP), Extended Foster Care (EFC), Aftercare Program, and the Transitional Age Youth Center (TAY).

We anticipate that your participation in this study will assist the agencies in improving their current services for transitional aged youth that promote aspects of society's definition of independence. If you have any further questions about the study, please feel free to contact Dr. Carolyn McAllister at (909) 537-5559 or [cmcallis@csusb.edu](mailto:cmcallis@csusb.edu). You can learn about the results of this study by visiting the California State University San Bernardino Pfau Library after September, 2015.

If you would like to learn more about the services offered to current or former foster youth in San Bernardino County, please contact Walden Family Services (760) 961-2662, ASPIRAnet (909) 890-9022, or the TAY Center (909) 466-8696.

Thank you for your participation!

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## ASSIGNED RESPONSIBILITIES PAGE

This was a two-person project where authors collaborated throughout. However, for each phase of the project, certain authors took primary responsibility. These responsibilities were assigned in the manner listed below.

1. Data Collection:  
Team Effort: Stephanie Montes and Chelle Stokes
2. Data Entry and Analysis:  
Team Effort: Stephanie Montes and Chelle Stokes
3. Writing Report and Presentation of Findings:
  - a. Introduction and Literature  
Team Effort: Stephanie Montes and Chelle Stokes
  - b. Methods  
Team Effort: Stephanie Montes and Chelle Stokes
  - c. Results  
Team Effort: Stephanie Montes and Chelle Stokes
  - d. Discussion  
Team Effort: Stephanie Montes and Chelle Stokes