



THE
FOSTER CARE
ALUMNI STUDIES

STORIES FROM THE PAST TO SHAPE THE FUTURE

**Responding to Follow-up Research Findings about How
Alumni of Foster Care are Doing as Adults:
New Findings and Initiatives**

**Presentation for Seattle Children's Hospital
Monday, May 22, 2006**

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Acknowledgements

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Research in this presentation was conducted by:

- **Casey Family Programs**
- **Harvard Medical School**
- **Oregon Department of Human Services**
- **Washington Department of Health and Human Services**
- **The Northwest Alumni Studies team is grateful to and has learned much from the youth, alumni, parents and Casey field staff**

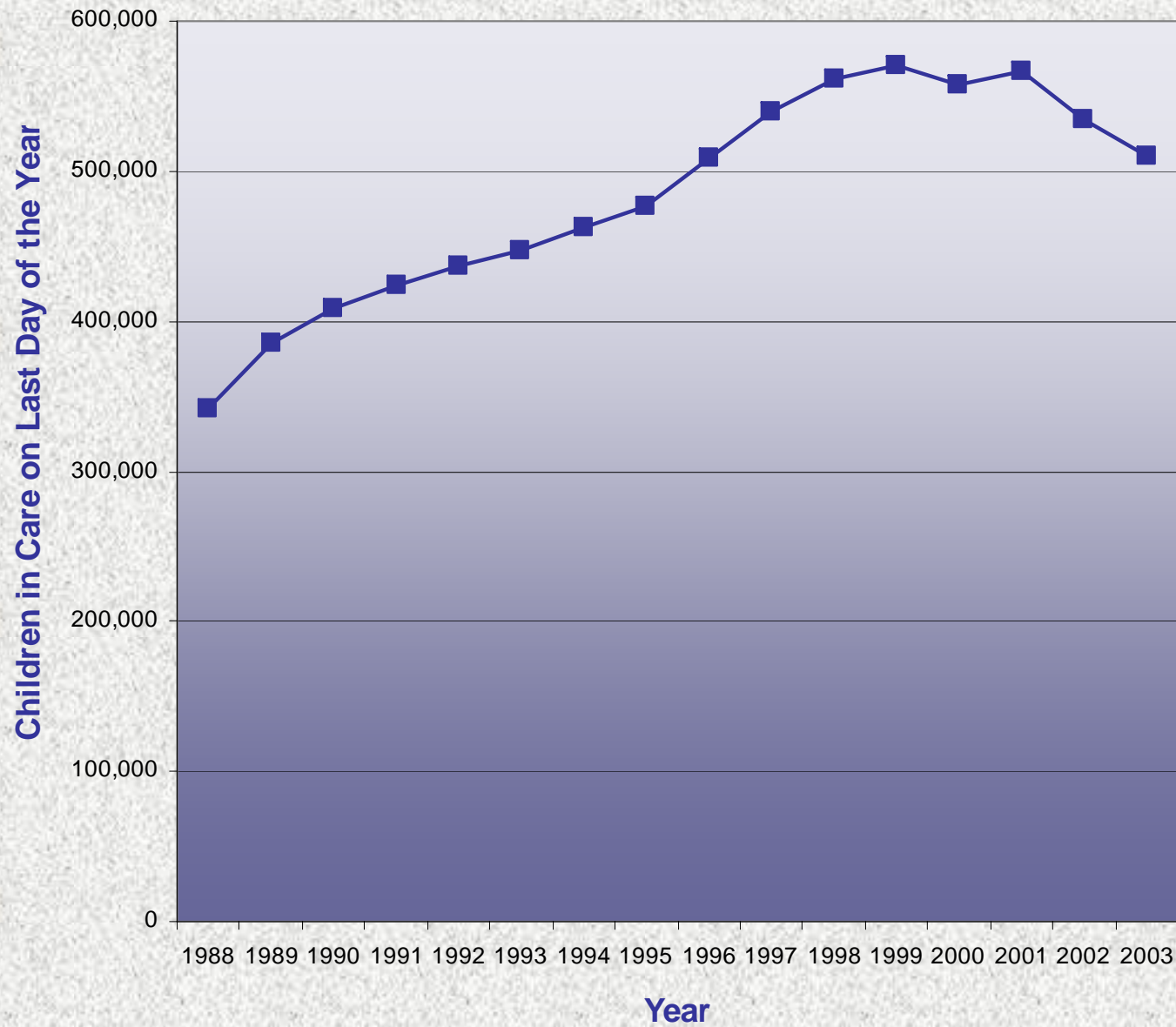
Presentation Outline

- I. Study Methods, Risk Factors, and Foster Care Experiences**
- II. Mental Health**
 - 1. Outcomes**
 - 2. Promising Programs and Strategies**
- III. Education**
 - 1. Outcomes**
 - 2. Practice Recommendations**
- IV. Employment**
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Children in Foster Care, 1988 - 2003



Study Methods: *Research Questions*

1. How are youth who were placed in foster care faring as young adults?
2. Are certain key factors or program components linked with better functioning in adulthood?

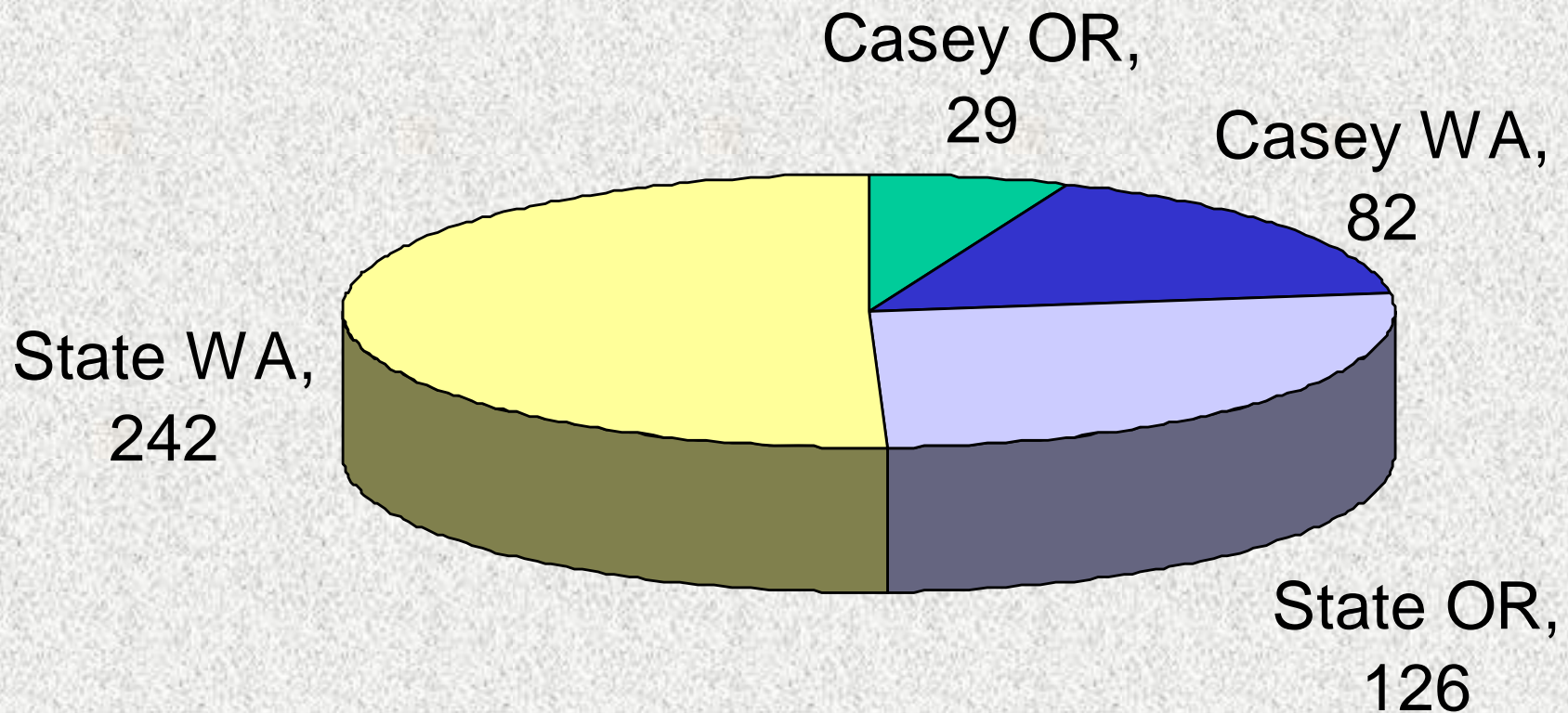
Study Methods: *Inclusion Criteria*

- Placed in family foster care before age 16.
- Spent a year or more in care between ages of 14 and 18, between 1988 and 1998.
- Served in Seattle, Tacoma, Yakima, or Portland.

Case record reviews of 659 alumni,
interviews with 479 (76% response rate).

Study Methods: *Alumni Interviewed*

Interviews with 479 alumni (659 case record reviews):



Study Methods: *Demographics*

Demographics	
Average age at time of interview	24 years (range: 20 – 33)
Gender: Females	61%
Race/Ethnicity: Alumni of Color	55%
Average length of time in care	6 years

Risk Factors

Most Common Form of:	Northwest Alumni
<u>Maltreatment by Birth Family:</u> sexual abuse with physical abuse and/or neglect	49%
<u>Reason for Initial Placement:</u> maltreatment	64%
<u>Mental/Physical Health Diagnoses (before or during care):</u> <ul style="list-style-type: none">● ADHD● Physical or learning disability	14% 13%

Foster Care Experiences

Foster Care Experience:	Northwest Alumni
<u>Placements</u>: 8 or more	32%
<u>School Changes</u>: 7 or more	65%
Had 2 or 3 of the following at exit: <ul style="list-style-type: none">● A driver's license● \$250 in cash● Dishes and Utensils	29%

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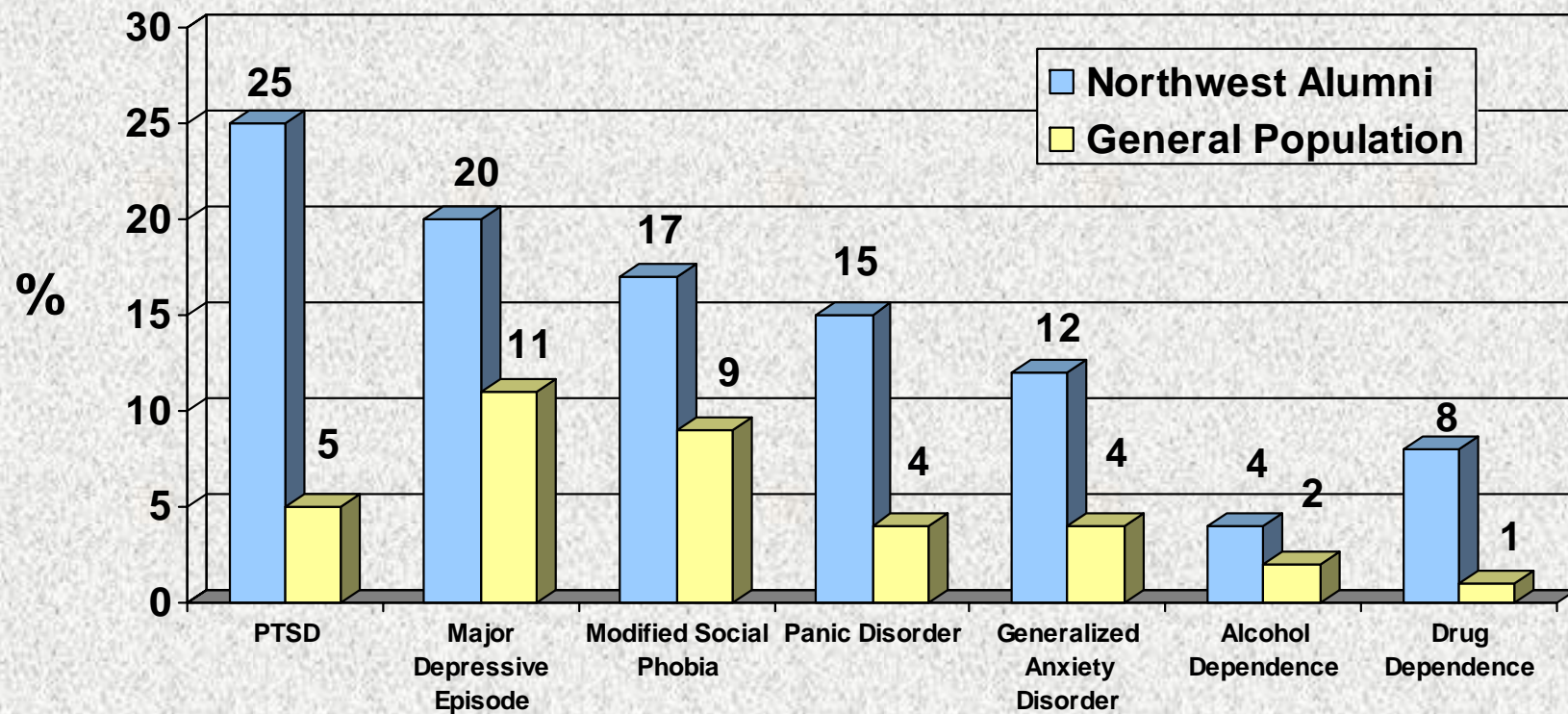
Outcomes: *Mental Health*

Composite International Diagnostic Interview

- Non-clinician mental health instrument
- World Health Organization-approved tool with high reliability and validity
- Assesses mental health during lifetime and over the previous 12 months
- Used as part of the Northwest Alumni Study and National Comorbidity Study-Replication (NCS-R)

Outcomes: *Mental Health*

Twelve-Month Mental Health Diagnoses among Northwest Foster Care Alumni and the General Population



Mental Health Diagnosis

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Promising Programs and Strategies

- 1. Quick listing of current evidence-based treatments for PTSD, Depression, Anxiety and Social Phobia.**
- 2. Discussion of Casey youth and alumni, caregivers, and staff views on mental health challenges and interventions.**

Current Evidence Based Treatments and Promising Practices

Post Traumatic Stress Disorder:

- Cognitive Behavioral Therapy (CBT)
 - Trauma Focused CBT (TF-CBT)
 - Abuse Focused CBT
 - TF-CBT for Childhood Traumatic Grief
- Cognitive Behavioral Intervention for Trauma in Schools
- Parent-Child Interaction Therapy
- Eye Movement Desensitization and Reprocessing
- Trauma Focused Integrative Eclectic Therapy
- Trauma Focused Play Therapy

Current Evidence Based Treatments and Promising Practices (cont)

Depression:

- Coping with Depression for Adolescents
- CBT for Depression
- Interpersonal Therapy for Adolescents
- Self Control Training
- Dialectical Behavior Therapy

Current Evidence Based Treatments and Promising Practices

Anxiety and Social Phobia:

- CBT for Anxiety Disorders
- Participant Modeling
- Reinforced Practice
- Imaginal and In Vivo Desensitization
- Live and Filmed Modeling

Learning from Consumers through Casey Mental Health Focus Groups

What we've been told:

- ❖ Youth and alumni
 - Feel disconnected from decision-making processes
 - Feel misdiagnosed, labeled, and overmedicated
 - Feel that interventions should be more strength-based and varied
 - Feel that trust and relationship are critical
 - Feel that support groups are helpful
 - Describe themselves as “normal kids in abnormal situations”

Mental Health Focus Groups

❖ **Foster parents and kinship caregivers**

- Feel that providers need training in issues specific to out of home care
- Feel that providers must use a “team” approach that includes caregivers
- Feel that youth are commonly mis/over-diagnosed and overmedicated
- Feel that caregiver training on common mental health disorders and treatments is needed
- Feel that caregiver support groups are very helpful

Mental Health Focus Groups

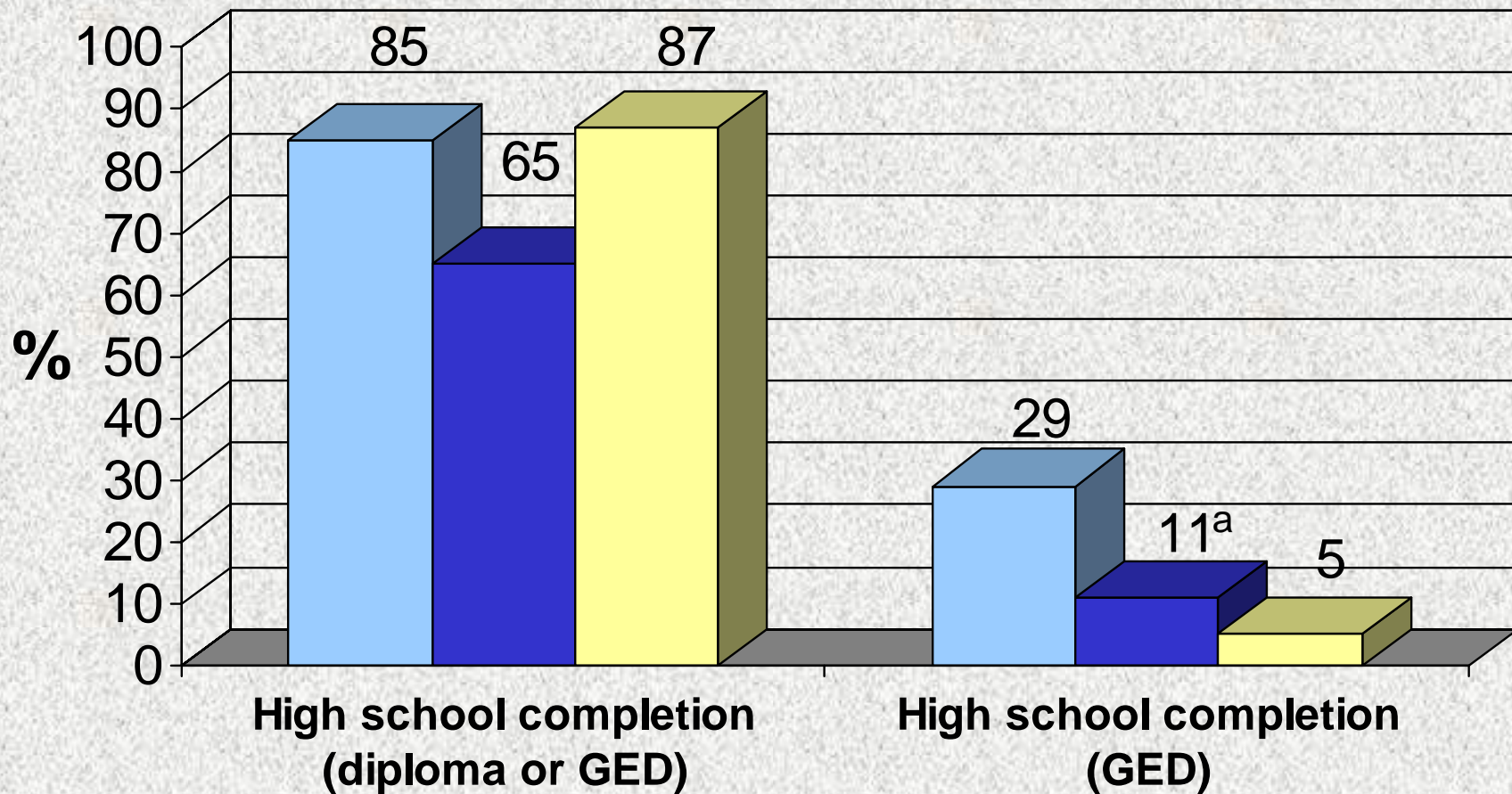
❖ Staff

- Report a very high percentage of youth with mental health challenges
- See the value of having a diverse and comprehensive set of interventions available
- Feel frustrated: systems do not work together and resources are inadequate in their communities
- Feel Medicaid providers are overburdened and/or under trained
- Feel that teamwork is essential – providers that work with staff are more effective

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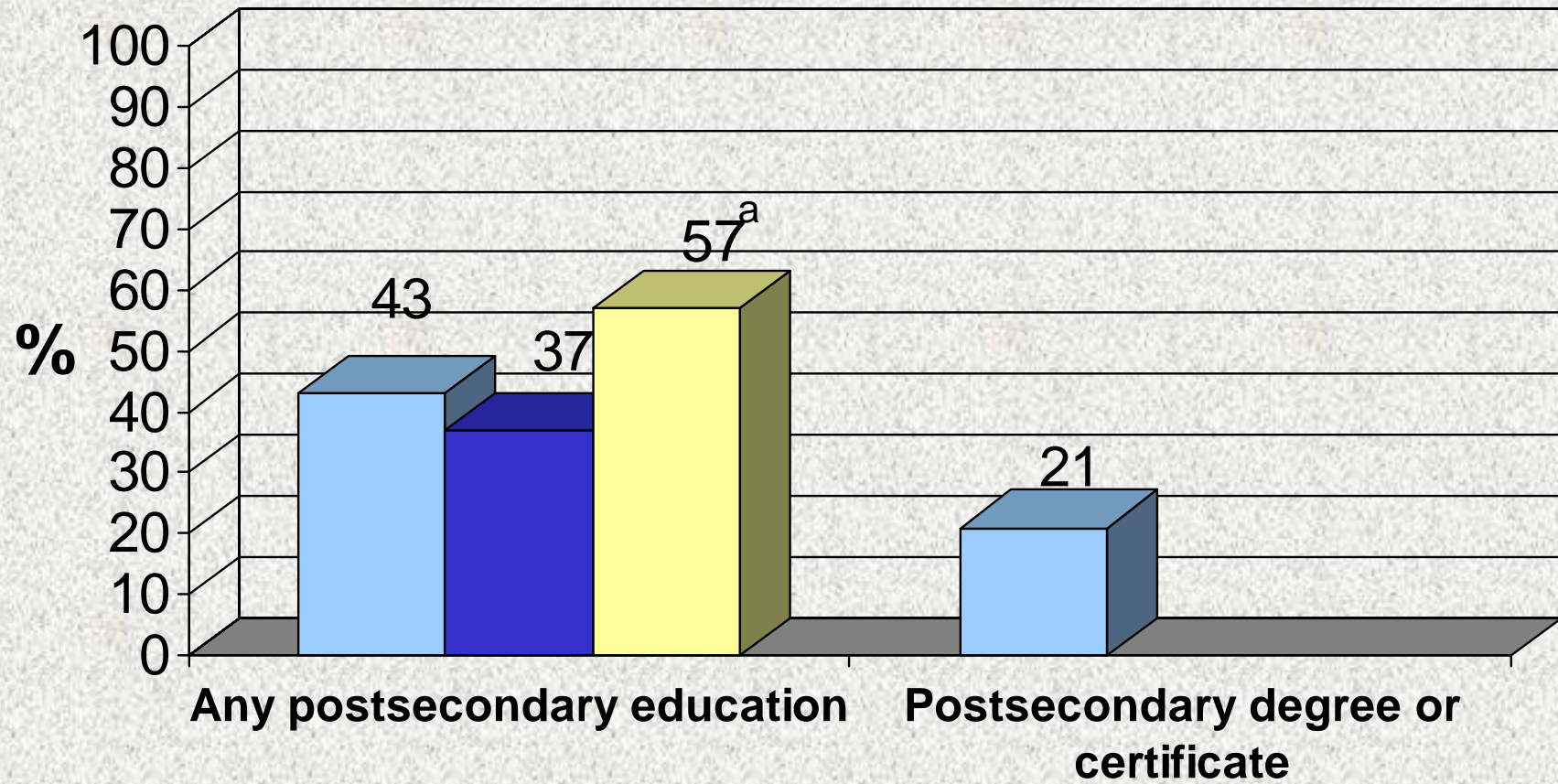
Outcomes: *Education*



Northwest Alumni Other foster care studies General Population

^a (Mech 2003)

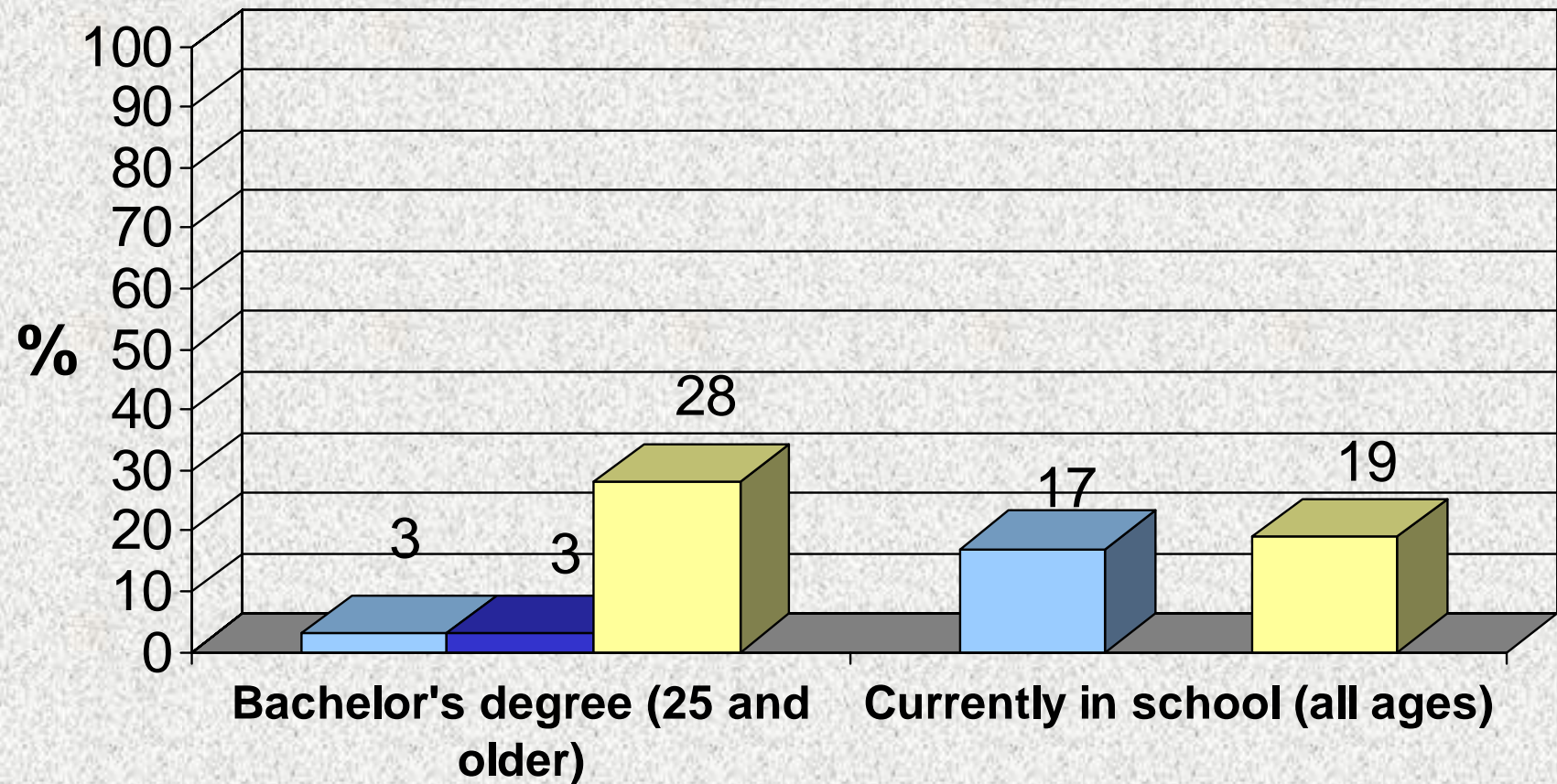
Outcomes: *Education (cont.)*



■ Northwest Alumni ■ Other foster care studies ■ General population

^a Includes enrollment in college only.

Outcomes: *Education (cont.)*



Northwest Alumni Other foster care studies General Population

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Education Strategies

- Provide school placement stability and continuity
- Ensure that when school moves are imminent, that records are transferred quickly and efficiently
- Provide needed support services to youth to support academic outcomes including tutoring, mentoring, mental health services, and school counseling

Education Strategies (cont.)

- Insure that youth are connected with adults who will “look after” their educational success by having high expectations, creating opportunities for them to learn about possibilities after high school, and teaching them self-advocacy skills
- Prepare youth for postsecondary education and training

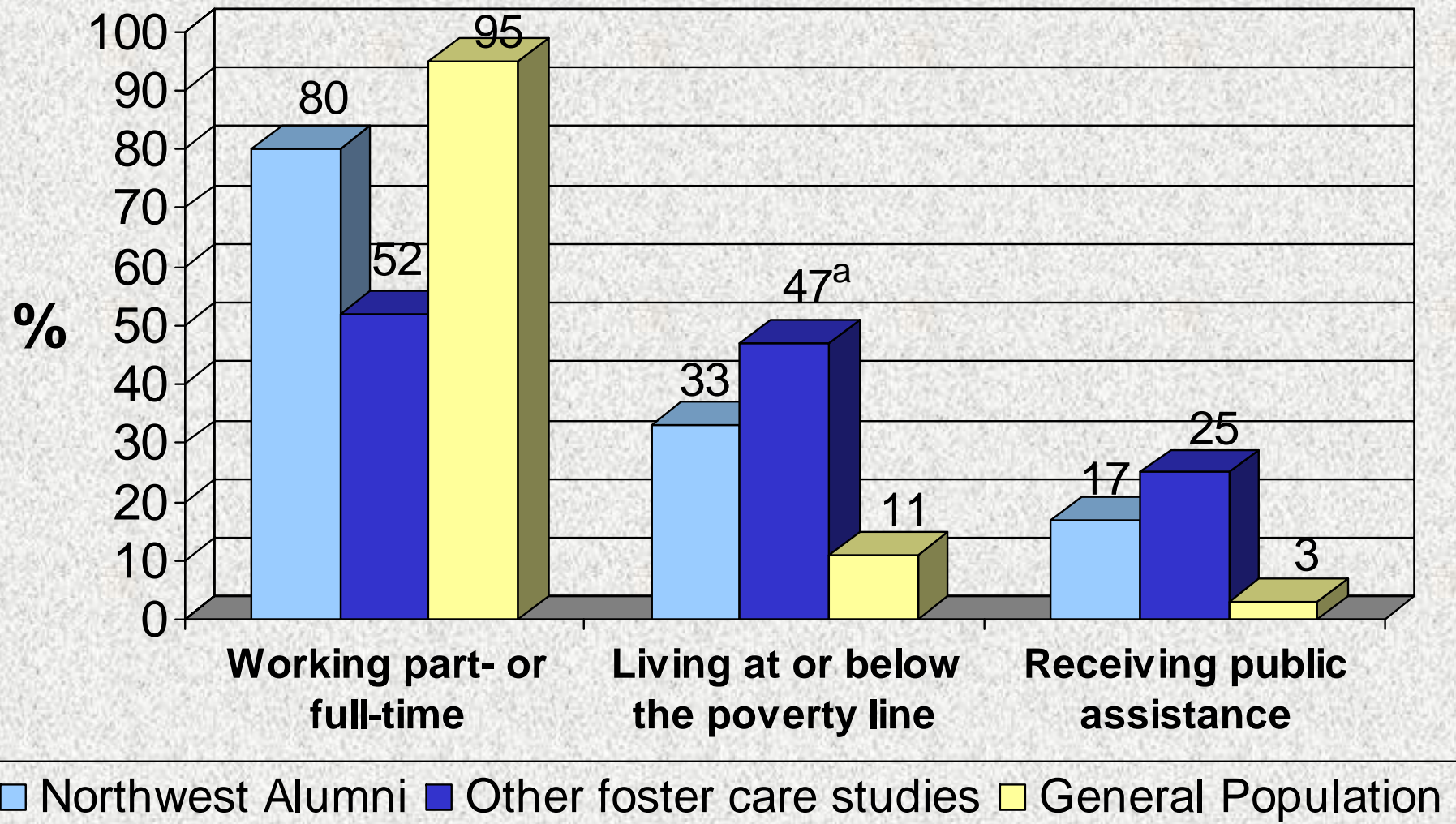
Education Strategies (cont.)

- Educate decision and policy makers around the important educational needs of children and youth in care
- Insure the greater likelihood a youth will enter and attend college by changing emancipation age requirements

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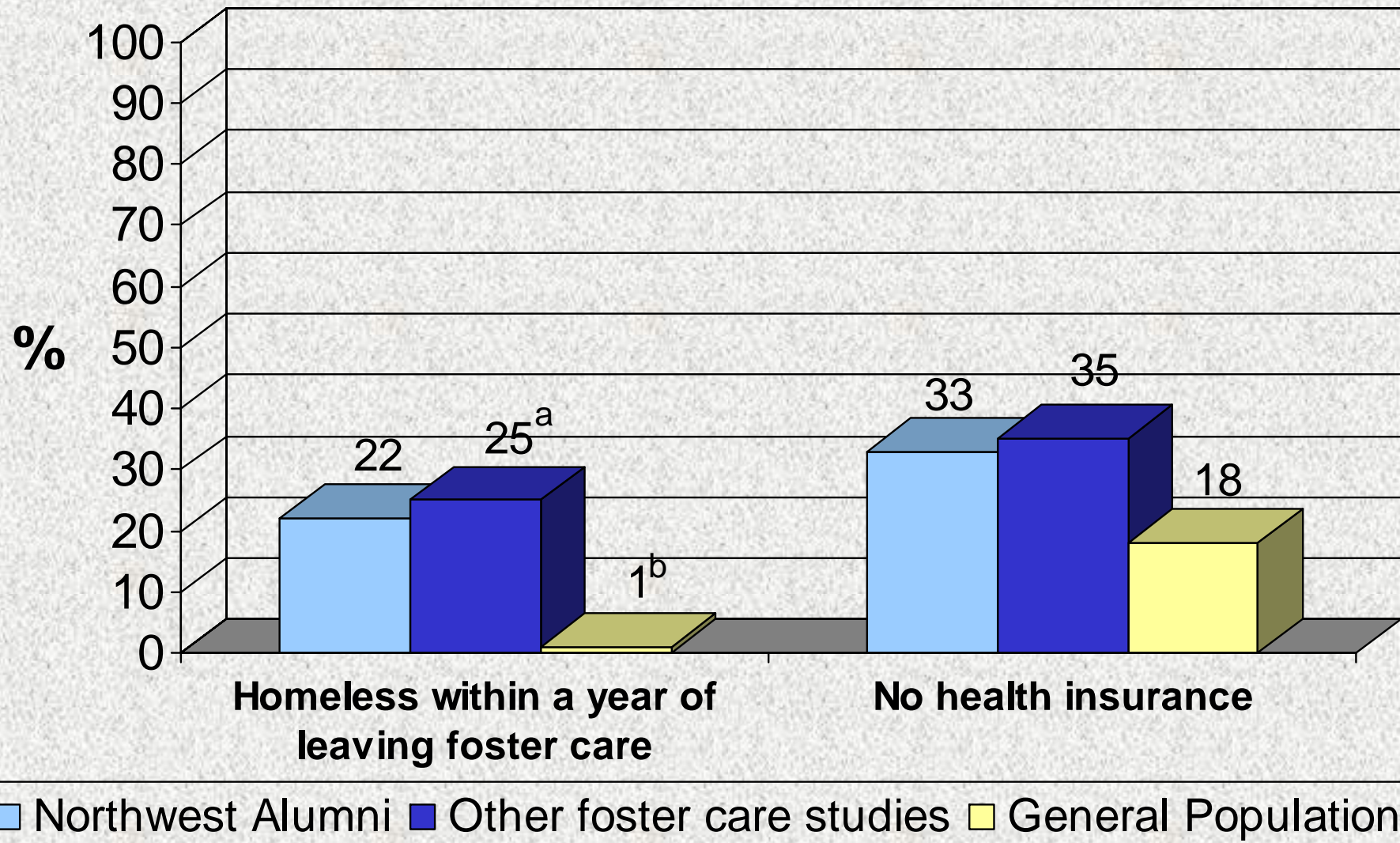
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Outcomes: *Employment & Finances*



^a (Brandford & English 2004, Washington State data)

Outcomes: *Employment & Finances*



^a Homeless at any point since leaving foster care. ^b Homeless at any point in past year.

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**Workforce Development Council of Seattle-King
County (WDC)**

www.seakingwdc.org

What we do:

- **Help youth and adults gain family self sufficiency through employment and training programs.**
- **Convene stake holders to address critical job training and education issues for young adults, currently employed, and older workers.**
- **Partner with colleges, K -12, employers, economic development groups, community and faith based organizations to create and support innovative programs.**
(E.g. Career Pathways program in 5 hospitals)
- **Just under \$4 million of our annual budget is for youth who are low income or at risk.**



- **In School and Out of School programs:**
Since 2000, over 5,000 young people (16 to 24) have entered one of our funded programs.
- **All of these youth are either living at or below poverty level guidelines and/or have barriers to success such as homelessness, living in foster care, have limited English, or are single parents.**
- **This year 1,800 young adults have been served in King County alone through our partner programs.**

Demographics of the youth served:

- **43% are African-American**
- **37% are Caucasian**
- **14% have a disability (learning or physical)**
- **10% are Hispanic/Latino**
- **8% are Native American**
- **2 % are Asian-American**

Employment is the key!

- **National studies have shown that work experience has a positive impact on high-school graduation rates, college enrollment, and long-term earnings.**
- **Last year, over 5 million youth were neither working nor in school.**
- **Employment for youth has dropped by 20% over the past 5 years.**

Poverty as a barrier to self sufficiency and breaking the cycle...

- **Poverty is a key barrier to overcoming obstacles and having education and work experience success.**
- **Average hourly wage for young adults in households at or below 200% of federal poverty level was \$6.90 (2004).**
- **Average hourly wage for young adults in middle/upper income households was \$12.39 (2004).**

Barriers for youth- whom we serve

- **95% are low income**
- **63% lack basic skills**
- **17% are court involved**
- **11% are limited-English**
- **9% are pregnant/parenting**
- **9% are homeless/runaway**
- **At least 10% are foster care- based on self reporting**

Benefits to early work experience:

- **Increases the likelihood that young adult will be able to gain a job where he/she is self sufficient.**
- **Less likely to become a young parent.**
- **Less likely to get in trouble with the law.**
- **Less dependence on public assistance in the long term.**
- **Increased self esteem and self confidence.**
- **Increased sense of independence.**

Integration of classroom and work-based learning programs:

A sampling of successful programs that the WDC funds:

- **Drop Out Prevention Program**
- **Passport to Success (youth with disabilities)**
- **YouthCare/Barista Training Program**
partnership with Fare Start
(homeless/runaway youth)
- **Digital Bridge (at-risk youth/IT focus)**
- **Project Start-Out**
(at-risk youth/Health Care focus)
- **Youth Nursing Careers for All**
(at-risk youth/Health Care focus)

Youth At Work (ages 16 to 24)

Youth At Work Campaign:

- A resource to provide tips for young adults on how to prepare and apply for work.
- Promotes the issue of increasing work exposure activities such as mentoring, job shadowing, and internships.
- Encourage employers to post jobs on the site.
- Encourage young adults to apply for entry level work.
- Get the word out about the importance of early work exposure!



Want to make a difference?

More information on how employers and young adults are connecting:

www.youthatwork.info

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Optimizing Success

- Statistical simulations were conducted that estimated the degree to which optimizing certain foster care experiences might affect alumni outcomes.

Optimizing Success: *Foster Care Areas*

(Red font and italics = factors that decreased negative outcomes the most in the simulations.)

- 1. Placement History & Experience***
- 2. Access to Education Services & Experience***
- 3. Access to Therapeutic Services & Supports**
- 4. Activities with Foster Families**
- 5. Preparation for Leaving Care**
- 6. Resources upon Leaving Care***
- 7. Foster Family & Other Nurturing Support in Care**

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VI. The Foster Care Alumni Movement and Perspectives on Mental Health, Education and Employment

Alumni Organizations

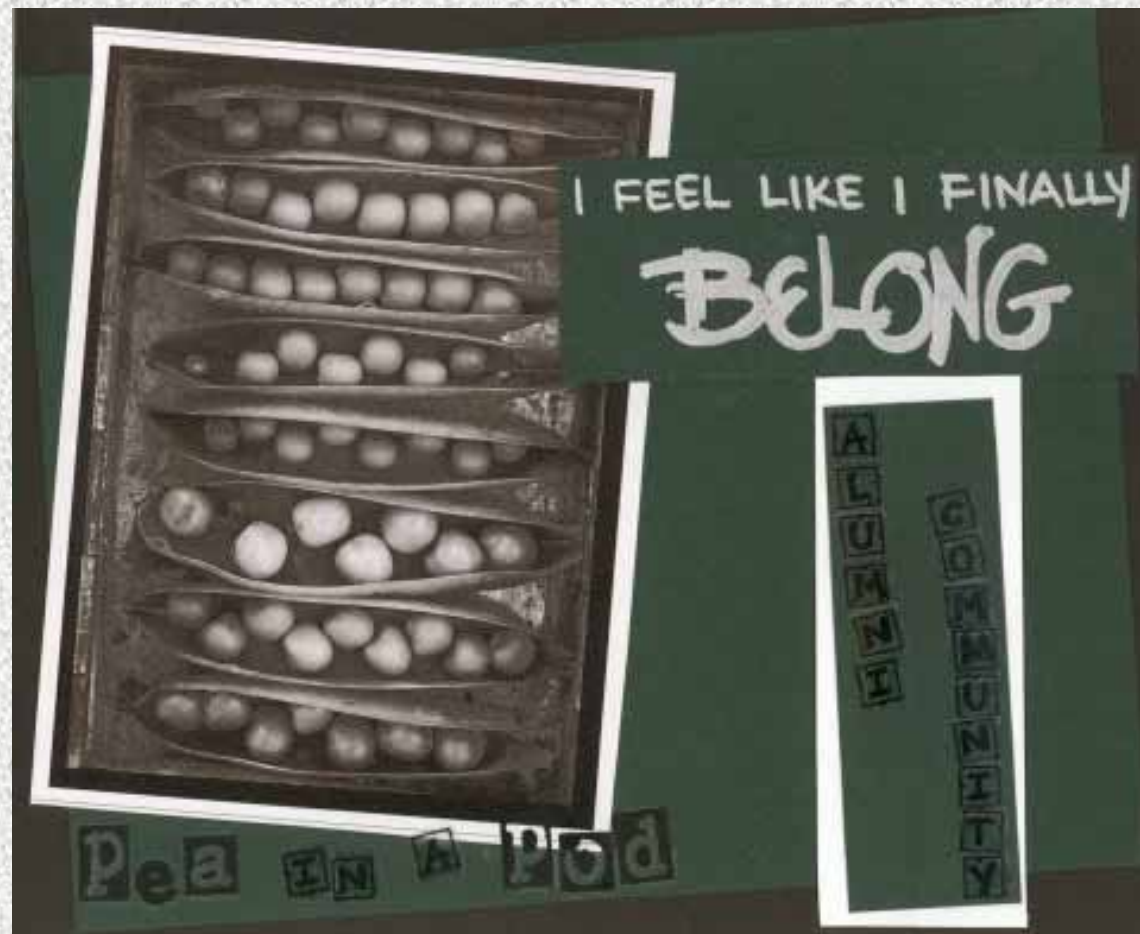
- **Local, National, and state groups**
- **All groups seems to have very similar goals:**
 - **Connect youth and alumni**
 - **Create change in child welfare system**
- **Current Projects vary**

Post Card Alumni Art Project



FOSTER CARE CULTURE

- **Children, youth and alumni of care share experiences and feelings from their time in foster care and alumni share how they deal with it as adults**
- **To view all post cards visit the FCAA website:**
[www. Foster alumni.org](http://www.Foster alumni.org)



MY LAST SOCIAL
WORKER WAS

always running late

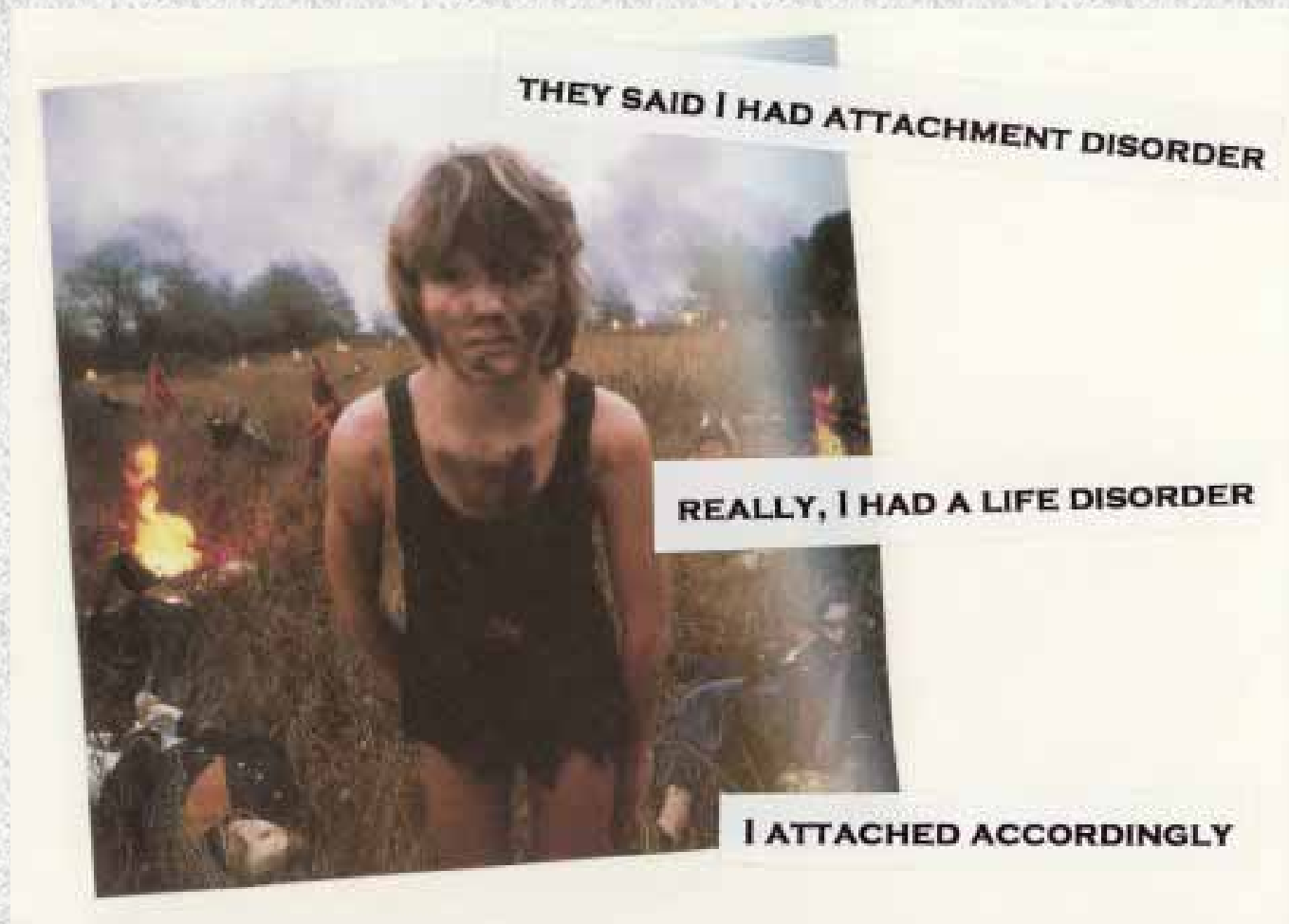
INEFFICIENT

↳

REALLY QUITE STRANGE

BUT HE **LISTENED** TO ME AND

THAT MADE ALL THE DIFFERENCE

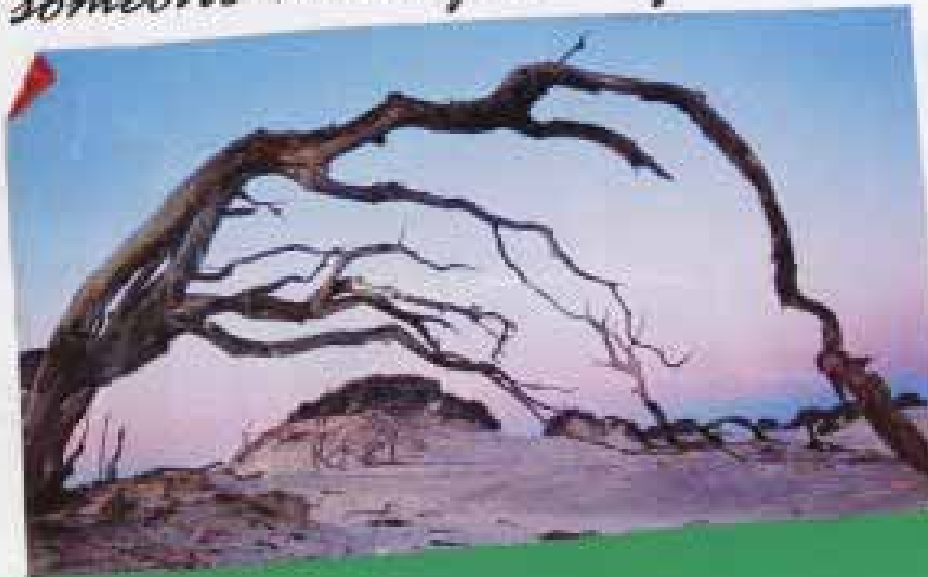




It's not my
fault I'm not
in School...

I REINVENT
MYSELF DAILY
TO DEAL WITH
MY REALITY

*I know I don't trust people, but why
should I? Life taught me that the more I
trust someone the deeper they'll hurt me.*





Don't insult
me
with
your
promise

LIAR

Mental Health Discussions

- **Stability**
 - **Limit children and youths contact with strangers from the system**
 - **Ask youth which birth family connections they would like to maintain and keep them connected....especially siblings!!**
- **Medication for youth in care**
 - Youth feel over-medicated
 - Info on side effects
 - Informed consent for youth
 - Allow youth greater control over health-related decisions

Mental Health Continued

- **Confidentiality:**
 - **Trust relationships can only be developed when one person maintains a youths confidentiality. As long as mental health professionals disclose information given in counseling sessions, youth mental health treatment will remain ineffective.**
 - **A person does not need to read a file to know how to treat a child or youth. We deserve to be treated like any other child, with unconditional love. Providers develop opinions about us before they even meet us because they have read a file, which does not include my good qualities, but my shortcomings.**

EDUCATION DISCUSSION

- School Placement:
 - Children and youth should be kept in their original schools when placed in care. See the school connection as an asset.
 - School placement change should be minimized
- Higher Education
 - Prepare all youth for higher education
 - Foster parents and social workers should foster a value in all youth for education

Employment Discussion

- **Create a vision for youth**
 - **Discuss future in a positive way**
 - **Point out my assets**
 - **Prepare me for the workforce**

Recommendations For Practice:

- Give all youth you come into contact with encouragement, they need to hear you say positive things about them.
- Allow and facilitate youth and alumni connections around their shared culture to eliminate isolation, create a sense of belonging and to give youth a vision of their future.
- See the possibility for success in every youth you come in contact with, and help them harness their strengths to create a foundation for that future.

Recommendations continued

- Bring your whole self to your work with youth, it will make all of the difference in their lives, be genuine.
- Give all youth access to the same information about programs and services, eliminate gatekeeping.
- All youth deserve to have an adult relationship where youth are loved unconditionally. Allow youth to foster that relationship.

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