



Healthy Teen Network

MAKING A DIFFERENCE IN THE LIVES
OF TEENS AND YOUNG FAMILIES

SUMMARY REPORT

Promoting Successful Transition from Foster/Group Home Settings to Independent Living Among Pregnant and Parenting Teens

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Healthy Teen Network
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INTRODUCTION

Adolescence can be defined as a transitional period that begins with the onset of puberty and ends when youth are able to maintain a life independent from their parent/caretaker. The tasks of adolescence include developing an autonomous identity, forming intimate relationships, and gaining the education and skills needed to function independently. The period of adolescence, therefore, varies considerably by culture. In industrialized countries, such as the US, adolescence is reported to end at age 24, or even 26, the presumed age at which young adults complete college and can support themselves. Youth living in foster or group home settings often lack the opportunity to gain adequate education and employment skills, yet they are expected to transition to adulthood at age 18, ready or not.

Policies and programs that address this particular population often have age limits of 18 years, leaving this vulnerable population without adequate supports or services to successfully complete their transition to adulthood. If they have exhausted their five years on Temporary Assistance for Needy Families (TANF)¹ before completing their education and/or job training, there are little, if any, opportunities for continued support. If they “age out” of a group home setting before becoming eligible for affordable housing, they may re-enter unhealthy living situations just to stay off the streets. Transition to adulthood for this group has many barriers which some state and local groups are attempting to address through policy changes and/or creative collaborations and funding.

Healthy Teen Network (HTN), with support from the Freddie Mac Foundation, is attempting to learn more about the contextual assets and barriers that affect transition from foster and group home settings to independent living among pregnant and parenting teens. This two-part project employed key informant interviews to collect qualitative information describing assets and barriers using the Bronfenbrenner Ecological Model. The survey findings were then shared with an expert roundtable to identify program components and strategic approaches to better meet the needs of pregnant and parenting teens exiting foster care.

BACKGROUND

Youth in Foster Care

The number of youth in foster care doubled between 1982 and 2002 with over 500,000 children currently living in out-of-home placements. Approximately 25 percent of all foster children will live in three or more foster homes during their time in the foster care system (Carpenter et al., 2001). Every year 20,000 foster youth, ages 16 and older, exit the system either by reaching age 18 (“aging out”) or becoming legally independent — suddenly finding themselves on their own (Wertheimer, 2002).

Most children who enter the foster care system have emotional, behavioral, developmental and physical health problems, due to the chaotic and often traumatic family and environmental situations that resulted in foster care placements (Wertheimer, 2002). In addition, foster youth are often academically behind, have trouble sustaining work due to a lack of concrete skills (including poor conflict resolution and social skills), are likely to abuse drugs and/or alcohol, be involved with the juvenile justice system, and have unmet mental health needs. Due to these common characteristics, foster youth face several difficulties in transitioning to adulthood. Pregnant and parenting teens living in foster care or alternative settings face the additional challenge of trying to raise a child, often without a support network of family or friends.

Pregnant and Parenting Teens in Foster Care

Despite laudable progress in reducing pregnancy rates and births to teens, the United States still has the highest teen birth rate among Western industrialized countries. Additionally, the overall United States rate does not reflect what is happening in many of our largest cities as rates for teen births in some cities have actually increased over the past ten years (Wertheimer et al., 2002). Approximately 400,000 infants are born to teen parents each year (Martin et al., 2005). Pregnant teens are less likely to receive adequate prenatal care, while more likely to smoke during pregnancy, be unmarried, have inadequate nutrition and give birth to low-birth weight and pre-term infants. Thus, the consequences of teen pregnancy are not isolated to the mothers; their children are also greatly affected.

The rate of teen pregnancy within the child welfare system is of particular concern, as young

people living in foster care or kinship care (with relatives) are prone to higher rates of risky sexual behaviors, including earlier age of first intercourse, greater numbers of sexual partners and earlier age of first pregnancy than their peers not in foster care (Carpenter et al., 2001). This does not mean that living in foster care is itself the impetus to these risky behaviors. Rather, they may be sequelae of their experiences prior to being placed in foster care, as the majority of children in foster care are victims of sexual or physical abuse, neglect or abandonment, or have a parent who is incarcerated or otherwise unable to care for them (Wertheimer, 2002). Currently, there are insufficient data to accurately report the number of pregnant and parenting teens living in out-of-home care.

Policies for Pregnant and Parenting Teens

There are various policies in place to support pregnant and parenting teens in their transition to independent living, with housing assistance being among the most critical. Youth, especially those who transition to adulthood without connection to a supportive permanent family, face many challenges to obtaining housing, including cost, availability, quality, location, and stability (O'Dell, 2004). In an effort to combat these barriers, Congress in 2000 passed legislation to provide Section 8 vouchers (Housing Choice Vouchers) for foster youth under the Family Unification Program (FUP). These vouchers are specifically designated for youth ages 18 to 21 that leave foster care at age 16 or older and lack adequate housing (Child Welfare League of America, 2005).

INDEPENDENT LIVING

For the purpose of this study, successful transition to independent living is defined as: possessing the skills needed to connect with the labor force on a regular basis, establishing positive social support systems, not being incarcerated, capable of being self-sufficient, not suffering from a major, preventable physical or mental illness (including addictions), feeling like a valued member of society, having an interest in civic duty and being an adequate parent, if they have a child (Wald and Martinez, 2003).

However, due to the severe shortage of affordable housing in the United States, only one in four families eligible for vouchers receive federal housing assistance (Center on Budget and Policy Priorities, 2003). In addition, most areas have a long waitlist; in 2000 the average wait time was 28 months and could be up to five years or more in some of the larger cities. Recently, many housing agencies have stopped accepting new applications for vouchers due to the continuous backlog (Swartz & Miller, 2002).

The US Department of Housing and Urban Development (HUD) is the primary source of housing assistance for low-income households. Most of this assistance is distributed by a network of 2,600 state, regional and local public housing authorities around the country (Center on Budget and Policy Priorities, 2003). As a result, policies and procedures often vary from office to office, making it increasingly difficult for case managers, and youth themselves, to navigate the system.

In addition to housing policies, there are a variety of federal programs in place to provide services and supports for pregnant and parenting teens. These include foster care and child welfare services, TANF and the John Chafee Foster Care Independence Program (Chafee Program)². While each of these programs has their own set of rules and regulations, they often overlap and/or intersect. As a result, it is difficult for pregnant and parenting teens to determine the benefits for which they are eligible and how to access those services.

METHODOLOGY

Theoretical Framework

Bronfenbrenner Ecological Model allows for contextual assessment across five spheres of influence: Individual, Family, Peers, Community and Society.

Qualitative Data

12 key informant interviews were conducted with group home, foster care and Second Chance Homes program providers from nine different states.

Validation of Findings

HTN convened ten experts at a roundtable to respond to the survey findings and identify strategic approaches and essential program characteristics.

SURVEY FINDINGS

Ten themes emerged from the key informant interviews. There were two themes, one asset-based and one barrier-based for each of the five levels of influence, per the Bronfenbrenner Model.

Theme 1A: Individual Assets

Pregnant and parenting teens in foster care/alternative settings do best when they have insight and program buy-in.

Theme 1B: Individual Barriers

The lives of pregnant and parenting teens in foster care/alternative settings are very complex and chaotic.

Theme 2A: Family Assets

Pregnant and parenting teens in foster care/alternative settings do best when they have consistent family (or other trusted adult) support.

Theme 2B: Family Barriers

The families of pregnant and parenting teens in foster care/alternative settings are often unavailable or present additional challenges.

Theme 3A: Peer Assets

Pregnant and parenting teens in foster care/alternative settings fare best when they have healthy relationships with both peers and significant others.

Theme 3B: Peer Barriers

Pregnant and parenting teens in foster care/alternative settings tend to gravitate toward unhealthy relationships.

Theme 4A: Community Assets

Pregnant and parenting teens attempting to transition from foster care/alternative settings to independent living fare better when there are comprehensive support services available to them, including child care, education/employment support and stable housing.

Theme 4B: Community Barriers

Pregnant and parenting teens attempting to transition from foster care/alternative settings to independent living face many obstacles to receiving services.

Theme 5A: Society Assets

Recent increased focus and attention on the needs of pregnant and parenting teens, especially among foster youth.

Theme 5B: Society Barriers

Pregnant and parenting teens are a disenfranchised population and face additional challenges due to current programs and policies.

Interviewees were asked to rank the top three assets, barriers and client needs that affect successful transition to independent living among pregnant and parenting teens.

ASSETS

Individual buy-in to the program
Consistent support
Adequate and continuous education
i.e. high school diploma or GED

BARRIERS

Inadequate education
Inadequate supply of affordable housing
Inadequate Job training or employment skills

CLIENT NEEDS

Affordable housing
Real transitional living options,
i.e. a continuum of housing options
Longer time in program/longer financial
support to provide a safety net,
i.e. continued case management

ROUNDTABLE FINDINGS

The following individual, program and policy needs were identified by the expert roundtable, as essential components for promoting successful transition to independent living among pregnant and parenting teens. These findings concur with the survey results.

Individual

Girls need more stability

- ◆ Connection to a caring adult
- ◆ Healthy relationships with family, father of baby, peers, case managers
- ◆ More time receiving services
- ◆ Access to affordable housing

Girls need skills training and support

- ◆ Life skills: parenting, budgeting, job training, effective communication, conflict resolution, time management

Girls need opportunities to “fail” safely and learn from their mistakes

- ◆ Opportunities to make mistakes and then learn from their mistakes without fear of being expelled from the program

PROGRAM

Program services need to:

- ◆ Promote self-sufficiency throughout the entire system
- ◆ Be client-focused and responsive to clients’ needs
- ◆ Promote housing knowledge
 - Offer activities/training on leases and landlord/tenant laws
 - Teach youth that housing is a business
 - Emphasize education and employment in order to earn a livable wage for rent
- ◆ Provide education supports
 - High school diploma
 - Apprenticeships
 - Vocational training
 - College
- ◆ Offer a home visiting component

Program systems need to:

- ◆ Extend systems and supports to at least age 21
- ◆ Streamline a youth friendly intake process
- ◆ Provide a structure to allow girls to “fail” safely
- ◆ Increase collaboration to minimize number of different case managers working with the same youth

Program staff need to:

- ◆ Receive on-going training on a variety of topics, e.g., adolescent development, effective communication
- ◆ Recognize the importance of connection and building trusting relationships
- ◆ Respect cultural and religious influences

POLICY

- ◆ The field needs focused advocacy; promoting one clear, concise message
- ◆ Recognition that age 18 is too young for current program and policy expectations and requirements
- ◆ Increase target age for “adulthood” to 21 or ideally 24
- ◆ More cross-funding of programs
- ◆ Housing policies that support pregnant and parenting teens

- ◆ Policies that encourage capping/reducing case loads
- ◆ Rates of stipend for kinship foster parents needs to be the same as non-kinship foster care
- ◆ Promote and use existing programs: Chafee, FUP, Section 8
- ◆ Increase political will for pregnant and parenting teens in “the system”
- ◆ Acknowledge that youth in “the system” are everyone’s concern
- ◆ Acknowledge the social inequity of the system; break the cycle of poverty

RECOMMENDATIONS FROM EXPERT ROUNDTABLE

The following are recommendations for strategic approaches, training topics and advocacy efforts to promote successful transitions from foster/group homes to independent living among pregnant and parenting teens.

STRATEGIC APPROACHES

- Use “Systems of Care” Approach: Client Focused, Family Involvement, Community Collaboration
- Promote Self-Sufficiency Throughout All Aspects of the System
- Develop a System of Multiple Housing Options
- Collaborate with Head Start and Other Groups Focused on Child Development
- Streamline Provider/Client Contact
- Conduct Home Visits
- Develop a Unified Advocacy Message

TRAINING TOPICS

- Basic Adolescent Development
- Promoting Self-Sufficiency Across the Board for All Case Managers and Foster Parents
- Cultural and Religious Differences
- Effective Communication and Listening Skills
- Child Safety Training and What to Look for When Conducting a Home Visit

ADVOCACY EFFORTS

- Identify Out What Works
- Be Supportive of Others’ Work and Don’t Duplicate Efforts
- Engage Legislative Champions
- Promote the Crossover of Funding Sources
- Approach Individual Donors/Private Foundations in Addition to Federal Funds

Footnotes

- ¹ Temporary Assistance for Needy Families (TANF) has a lifetime limit of 60 months for receiving support and has specific rules for minor parents seeking cash funds. In order to be eligible for TANF, teen parents, under the age of 18, must live with an adult (parent, relative, guardian, or other agreed upon supervised living arrangement) and participate in education leading to a high school diploma or GED (Hummel & Levin-Epstein, 2005). These rules, while meant to encourage successful outcomes, have created unintended barriers for minor parents and older teen parents trying to receive TANF services, as a result of misapplication and misunderstandings (Hummel & Levin-Epstein, 2005). Teens in the foster care system are not eligible for TANF funding or services. Some states have tried to create opportunities for cross funding, such as using a foster care homes as the supervised living arrangement for TANF recipients, but this is not the norm (Levin-Epstein & Schwartz, 2005).
- ² The John Chafee Foster Care Independence Program, established in 1999 offers increased funding for states to provide services and supports for youth ages 18-21, exiting the foster care system. The Chafee Program allows states to use up to 30 percent of their federal funds to provide room and board services, as well as permitting Medicaid coverage for former foster youth until the age of 21. (Courtney, Terao & Bost, 2004).

References

- Carpenter, S. C., Clyman, R. B., Davidson, A. J., & Steiner, J.F. (2001). The association of foster care or kinship care with adolescent sexual behavior and first pregnancy. *Pediatrics*, 108 (3) p. e46.
- Center for Budget and Policy Priorities. (2003, May 14). Introduction to the housing voucher program. Retrieved May 18, 2005 from <http://www.cbpp.org/5-15-03hous.pdf>
- Child Welfare League of America (2005). Housing solutions for child welfare families. Retrieved May 18, 2005 from <http://www.cwla.org/programs/housing/housingaboutpage.htm>
- Courtney, M. E., Terao, S., & Boat, N. (2004). Midwest evaluation of the adult functioning of former foster youth: Conditions of youth preparing to leave the state. *Chapin Hall Center for Children at the University of Chicago*.
- Levin-Epstein, J. & Hummel, L. (2005). A needed transition: Lessons from Illinois about teen parent TANF rules. *Center for Law and Social Policy*.
- Levin-Epstein, J. & Schwartz, A. (2005). Improving TANF for teens. *Clearinghouse Review Journal of Poverty Law and Policy*.
- Martin, J. A., Hamilton, B. E., Sutton, P. D., Ventura, S. J., Menacker, F., & Munson, M. L. (2005). Births: Final data for 2003. *National Vital Statistics Reports*, 54(2).
- O'Dell, K. (2004, March). Addressing the housing needs of low-income families. *Welfare Information Network: Issue Notes*, 8(3).
- Swartz, R. & Miller, B. (2002). Welfare Reform and Housing. *The Brookings Institute. Welfare Reform & Beyond Policy Brief*, 16, March 2002. Retrieved May 22, 2005 from <http://www.brookings.edu/es/research/projects/wrb/publications/pb/pb16.htm>
- Wald, M. & Martinez, T. (2003). Connected by 25: Improving the life chances of the country's most vulnerable 14-24 year olds. Retrieved April 20, 2005 from <http://www.hewlett.org/Archives/Publications/connectedBy25.htm>
- Wertheimer, R. (2002, December). Youth who "Age Out" of Foster Care: Troubled Lives, Troubling Prospects. *Child Trends Research Brief*.
- Wertheimer, R., O'Hare, W., Croan, T., Jager, J., Long, M., & Reynolds, M. (2002). The right start for America's newborns: A decade of city and state trend (1990-1999). Retrieved May 18, 2005 from <http://www.aecf.org/kidscount/rightstart2003/>



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