



**Vulnerabilities &
Opportunities:
Profiles of Foster and
Non-Foster Youth
Served by LifeWorks**

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2016

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Executive Summary

Study Overview

Despite the growing interest in the experiences of foster youth, relatively little is known about how foster youth differ from other at-risk youth who have no history of foster care involvement. The goal of the current report is to address this gap in the literature, by providing an in-depth look at how transition-age foster youth compare to other at-risk youth of a similar age across a wide variety of characteristics.

To do this, client data collected as part of the intake process at LifeWorks were examined for the 488 youth between the ages of 16–24 who initiated and enrolled in services during fiscal year 2015 (October 1, 2014–September 30, 2015) and who provided information about their history of foster care involvement.

LifeWorks' intake is designed to paint a holistic picture of each client, by capturing individuals':

- Basic demographic information,
- Educational background,
- Employment status,
- Income and benefits,
- Housing situation,
- Family information,
- History of abuse and trauma,
- Mental and physical health, and
- Legal histories.

In order to place our findings in context with broader trends at the national and state level, the data were compared to recently published reports examining the defining characteristics of foster youth and disconnected youth (i.e., youth age 16–24 who are not meaningfully engaged in school or the workforce), where such information was available.

Key Findings

Notable disparities between foster youth and other at-risk youth served by LifeWorks included:

- **Educational Attainment among School-Aged Youth.** A larger proportion of school-aged foster youth had completed less than high school and were not currently enrolled in school (11.36% versus 1.39%). Relatedly, a smaller proportion of school-aged foster youth were currently enrolled in high school (40.91% versus 68.49%).
- **Employment.** A smaller proportion of foster youth were employed (26.85% versus 44.83%), and foster youth who were employed were more likely to hold part-time positions (57.50% versus 35.38%) and less likely to hold full-time positions (27.50% versus 55.38%).
- **Income.** A smaller proportion of foster youth's households earned income (22.17% versus 51.12%), and the average household income among foster youth was significantly lower (\$209.70/month versus \$1,006.60/month). Similarly, the average federal poverty level was significantly lower among foster youth (14.88% versus 60.36%).
- **Non-Cash Benefits.** A significantly smaller proportion of foster youth's households received non-cash benefits (12.26% versus 26.14%).
- **Insurance.** A substantially larger proportion of foster youth had some type of health insurance (74.26% versus 51.92%). This difference was driven largely by foster youth's access to Medicaid benefits.
- **Housing.** Foster youth's housing situations tended to be more unstable, with a greater proportion of foster youth residing in emergency shelters or staying temporarily with friends, and a smaller proportion maintaining permanent living arrangements with family members or living in subsidized or unsubsidized rentals.

- **Transitions.** Foster youth experienced significantly more custody-related transitions on average (9.96 versus 1.30), which was largely a function of CPS placements.
- **Parenthood.** A smaller proportion of foster youth were parenting a child (22.36% versus 35.47%) or had a child of their own (13.04% versus 21.18%).
- **Abuse.** A substantially larger proportion of foster youth had a history of abuse (58.95% versus 40.18%). This pattern persisted for each specific type of abuse that was examined.
- **Trauma.** A larger proportion of foster youth reported a history of trauma (43.87% versus 32.22%). For each specific type of trauma in which significant differences emerged between the two groups, foster youth were disproportionately affected.
- **Drug Abuse.** A greater proportion of foster youth reported a history of drug abuse (25.32% versus 16.16%).
- **Mental Health.** A larger percentage of foster youth reported a history of depression (58.60% versus 47.00%), suicidal ideation (38.85% versus 26.50%), mental health hospitalizations (32.47% versus 14.65%), and attempted suicide (30.41% versus 9.84%). Foster youth with a history of suicidal ideation made significantly more suicide attempts than non-foster youth (2.97 versus 0.74).
- **Juvenile Justice Involvement.** A significantly greater proportion of foster youth had been involved with the juvenile justice system (19.11% versus 6.86%).

Policy and Program Recommendations

The current findings highlight a number of opportunities for strengthening policies and programs targeting foster youth and other at-risk youth. For instance:

- Amending policies and expanding programming to support youth in their pursuit of education,
- Exploring novel approaches for helping foster youth secure meaningful employment,
- Expanding the availability of affordable housing options in Austin,
- Reevaluating current approaches aimed at preparing foster youth for independent living,
- Increasing access to mental health and substance abuse treatment options,
- Developing and evaluating new models for preventing teen pregnancy,
- Providing more options for affordable childcare,
- Reducing the barriers faced by youth with a history of legal issues,
- Providing additional support for wraparound service models, and
- Establishing and enforcing more comprehensive data collection standards.

Introduction

The number of youth who experience abuse or other forms of maltreatment, often resulting in their placement in foster care, is a major legislative and societal concern. Although the number of children in foster care in the State of Texas has declined slightly over the past five years (from 17,183 in 2011 to 16,378 in 2015), these numbers remain alarmingly high. In Region 7 alone (which includes Austin and Travis County), there were 3,568 youth in foster care in 2015.¹

Many youth in care are nearing adulthood and risk reaching the age of majority while still in foster care. In 2015, 21.7% of youth in foster care were between the ages of 14–17, and an additional 4.0% of youth were between the ages of 18–21 and were receiving extended care services. Youth who are in care at age 16 and who are expected to remain in care until adulthood are eligible for services that help them to prepare for the transition to independence, but the number of Texas youth in foster care who have taken advantage of such services has steadily declined over the past five years (from 8,928 in 2011 to 8,250 in 2015).²

Foster youth often face a number of barriers to successfully transitioning to adulthood. Many of these youth have a history of abuse or neglect—or have experienced a number of other emotionally scarring events during their childhood—increasing their risk of experiencing behavioral health issues, such as depression, suicidality, or substance abuse.³ The majority of these youth have experienced multiple placements during their time in care, undermining their academic success and their willingness to trust others, and increasing problem behaviors.^{4,5} Despite the array of services available to these youth as they prepare to enter adulthood and exit the foster care system (e.g., transition planning, independent living skills classes, financial assistance), foster youth often do not receive many of the services for which they are eligible.⁶ Although foster youth who receive such support services tend to fare better than their counterparts who do not, these youth continue to lag behind their peers in the general population across a range of transition-related outcomes.⁷ Because these youth are generally unable to seek assistance or advice from a stable adult figure as they strive to establish their independence and become self-sufficient, they often find themselves in a more disadvantaged situation relative to their peers.

However, many other youth besides foster youth also have difficulty navigating the transition to adulthood. Youth who are teen parents, homeless, or court-involved may lack a history of foster care, but may be similarly disconnected from educational systems, the labor force, or their communities in general. In 2015, it was estimated that there were 15,140 disconnected youth between the ages of 16–24 in Travis County, representing 10.1% of youth in this age range.⁸

Disconnected youth pose a major economic burden to both taxpayers and society. It is estimated that the immediate taxpayer burden (e.g., lost taxes, payments to federal welfare and social service programs, criminal justice system expenditures) for each disconnected youth is \$13,900 per year, and the social burden associated with each disconnected youth (e.g., lost gross earnings, the cost of crime, lost productivity) amounts to \$37,450 per year. Thus, the annual taxpayer burden for disconnected youth in Travis County

¹ 2015 data book. (2015). Texas Department of Family and Protective Services.

² Ibid.

³ Pilowsky, D. J., & Wu, L.-T. (2006). Psychiatric symptoms and substance use disorders in a nationally representative sample of American adolescents involved with foster care. *Journal of Adolescent Health, 38*, 351–358.

⁴ Joftus, S. (2007). Executive summary. Educating children in foster care: The McKinney-Vento and No Child Left Behind Acts. Casey Family Programs.

⁵ Newton, R. R., Litrownik, A. J., & Landsverk, J. A. (2000). Children and youth in foster care: Disentangling the relationship between problem behaviors and number of placements. *Child Abuse & Neglect, 24*, 1363–1374.

⁶ Courtney, M. E., Lee, J., & Perez, A. (2011). Receipt of help acquiring life skills and predictors of help receipt among current and former foster youth. *Children and Youth Services Review, 33*, 2442–2451.

⁷ Montgomery, P., Donkoh, C., & Underhill, K. (2006). In dependent living programs for young people leaving the care system: State of the evidence. *Children and Youth Services Review, 28*, 1435–1448.

⁸ Retrieved February 14, 2016, from http://readyby21dashboardatx.org/academically-successful-and-workforce-ready/opportunity_youth.php

alone is over \$210 million, with an annual social burden of nearly \$567 million. For the sake of comparison, the entire proposed 2015–2016 budget for the City of Austin General Fund is \$906.7 million.⁹ Provided disconnected youth are not able to become “reconnected,” it is estimated that, between the ages of 25–65, each youth will pose a lifetime taxpayer burden of \$170,740 and a lifetime social burden of \$529,030. Across all disconnected youth in the United States, this translates to an estimated total taxpayer burden of \$1.56 trillion and a total social burden of \$4.75 trillion.^{10,11} Just the economic losses resulting from the disparities in academic achievement among youth aging out of foster care total more than \$40 billion.¹²

Such findings demonstrate how critical it is to better understand the challenges that foster youth and other disconnected youth face during the transition to adulthood, in order to provide more effective services and to reduce the economic costs to our community.

Focus of this Report

Although a number of studies have compared the well-being of foster youth to that of their peers who do not have a history of foster care (or to nationally representative samples of youth), such work oftentimes focuses on a specific subject (e.g., mental health, educational outcomes) and only occasionally adopts a holistic view of clients’ lives. Despite the growing interest in the experiences of foster youth, relatively little is known about how foster youth differ from other at-risk youth who have no history of foster care involvement. The goal of the current paper is to address this gap in the literature, by providing an in-depth look at how transition-age foster youth compare to other at-risk youth of a similar age across a wide variety of characteristics. By examining how foster youth fare in comparison to other at-risk youth who were not involved in the foster care system, service providers and policymakers will be better equipped to address the unique needs of foster youth, as well as the shared needs across these populations.

Although the primary goal of the current paper is to provide a comprehensive investigation into the differences between youth with and without a history of foster care, these findings are discussed in relation to broader trends involving foster youth and disconnected youth (i.e., youth age 16–24 who are not meaningfully engaged in school or the workforce).^{13,14} Considering much of the information presented in the current report has not been collected at the national or state level, comparisons cannot be made across all of the findings. What’s more, given differences in sampling techniques and study methodology, the comparisons made below should be interpreted with caution and are merely used to provide general context to the findings.

Agency Description

LifeWorks is a private, not-for-profit, multi-service agency located in Austin, Texas. LifeWorks’ mission is to be a fearless advocate for youth and families seeking their path to self-sufficiency. LifeWorks has an annual operating budget of more than \$10 million, employs 135 full-time equivalent (FTE) employees, and oversees nearly 100 direct service volunteers. LifeWorks provides supportive services to more than 6,000 individuals each year through its seven service sites, which include three office locations and four residential facilities for homeless/runaway youth and youth transitioning to adulthood. LifeWorks is the only social service

⁹ Proposed budget highlights: Fiscal year 2015–2016, City of Austin. Retrieved February 16, 2016, from https://assets.austintexas.gov/budget/15-16/downloads/Budget_Highlights_FY_16.pdf

¹⁰ Values are presented in 2011 dollars.

¹¹ Belfield, C. R., Levin, H. M., & Rosen, R. (2012). The economic value of opportunity youth. Civic Enterprises.

¹² Sharp, W. W. (2015). The human, social, and economic cost of aging out of foster care. *Adoption Advocate*, 83, 1–11.

¹³ Although discussing LifeWorks’ at-risk, non-foster youth population in relation to disconnected youth is not ideal (as foster youth are also represented among disconnected youth), such comparisons are necessary, given the general lack of data on at-risk youth populations that exclude foster youth.

¹⁴ Inconsistencies in rounding in the findings presented below are a function of the fact that different reports use different standards in rounding. In all cases, the most precise information is presented (rounded to two decimal places).

organization in Austin to provide a comprehensive array of services to youth and families, successfully serving those with the greatest needs through community partnerships and a myriad of programs.

LifeWorks' programs are offered through three service divisions (Housing and Homelessness, Counseling, and Education and Workforce Development) that provide both standalone and mutually supportive services. The Housing and Homelessness division provides a continuum of support (ranging from street outreach to permanent supportive housing) for runaway and homeless youth. The Counseling division is the largest provider of free and affordable counseling in the Austin area, serving youth and families in crisis, individuals who have perpetrated domestic violence, and school-aged youth (and their family members) who need short-term psychiatric services. The Education and Workforce Development division provides critical educational and skill-building services to help youth avoid crisis and develop into independent, self-sufficient adults. Services in this division include GED and literacy classes, life skills training and case management services for youth exiting the foster care system, workforce development services for youth transitioning to adulthood, case management for pregnant and parenting youth, and prevention education for school-aged youth.

Data Source

The current data were collected as part of LifeWorks' intake process. All youth interested in enrolling in education/workforce programming or case management, counseling, or residential services at LifeWorks complete a thorough, interview-style intake prior to program entry. Youth have the right to decline to answer any question for any reason without compromising their access to services. LifeWorks' intake is designed to paint a holistic picture of each client, by capturing individuals':

- Basic demographic information,
- Educational background,
- Employment status,
- Income and benefits,
- Housing situation,
- Family information,
- History of abuse and trauma,
- Mental and physical health, and
- Legal histories.

The information that youth provide is then used to identify clients' needs, inform service delivery, and identify appropriate internal or external referrals. Existing clients who express interest in enrolling in another LifeWorks service do not need to complete the full intake process again, and instead verify or update their existing information.

Served Youth

In total, LifeWorks served 1,023 youth between the ages of 16 and 24 during fiscal year 2015 (October 1, 2014–September 30, 2015). This total represents youth who initiated and enrolled in at least one program after October 1, 2014.¹⁵ The current analyses are limited to those clients for whom information about their foster care status was collected ($n = 488$).¹⁶ Approximately 43.65% of youth included in the sample reported a history of foster care involvement.

¹⁵ To promote accuracy, the current data were limited to those who enrolled in their target program within 30 days of initiating services. Because client data are continually updated, the most recent data for the client collected within the 30 days after initiating services were used in the current analyses. For clients who enrolled in multiple services during fiscal year 2015, the data corresponding to their earliest enrollment during this reporting period were used.

¹⁶ The discrepancy between the total number of youth served and the final sample size is a function of missing data and the fact that not all programs were required to collect information about clients' history of foster care. The majority of clients included in the final sample were enrolled in Street Outreach (26.84%; foster youth: 27.23%, non-foster youth:

The foster care status of these youth at program entry was as follows:

- 16.19% of clients were in care (either because they were still minors or because they voluntarily returned to extended foster care),
- 13.52% of clients had aged out of care,
- 9.02% of clients were out of care (either because they were returned to their biological families or because they voluntarily signed themselves out of care),
- 3.89% of clients were adopted,
- 0.61% of clients were emancipated, and
- 0.41% of clients ran away from care.

Findings

Basic Descriptives

Age and Sex

The average client was 19.94 years old ($SD = 2.31$; range = 16.08–24.88), with foster youth being slightly younger on average than their non-foster counterparts (foster youth: 19.57, non-foster youth: 20.23), $t(483.86) = 3.31, p = .001$. Approximately half of all clients served were female (50.20% female, 49.80% male; of the clients included in the current sample, none identified as transgender or some other gender). The gender distribution of foster youth and non-foster youth was comparable ($p = .59$), with 48.83% of foster youth being female, relative to 51.27% of non-foster youth.

The proportion of male and female foster youth in the LifeWorks sample is consistent with national trends, in which approximately 47% of current and former foster youth identify as female.¹⁷ The gender distribution of non-foster youth observed in the current sample is also consistent with broader trends; at the national level, females are more likely than males to be disconnected (51.39% v. 48.61%), presumably because they are more likely to be parenting and thus less able to meaningfully pursue educational or employment opportunities.¹⁸

Race and Ethnicity

Clients' race and ethnicity can be found in Table 1. Compared to non-foster youth, a greater proportion of foster youth identified as African American, American Indian, or non-Hispanic White, and a smaller proportion identified as Hispanic White.

The racial and ethnic breakdown among LifeWorks' foster youth differs somewhat from national trends. In the United States, 42% of current and former foster youth identify as White (either non-Hispanic or Hispanic White), compared to 55.45% of LifeWorks' clients. Whereas nationally only 19% of foster youth consider

26.55%), although a substantial number of clients were also enrolled in Youth & Adult Counseling (23.98%; foster youth: 10.33%, non-foster youth: 34.55%), and After Care Transition Services (26.84%; foster youth: 48.36%). On average, clients enrolled in 1.35 programs at LifeWorks during fiscal year 2015 ($SD = .73$, range = 1–5). Compared to youth with no history of foster care involvement, foster youth enrolled in a significantly greater number of programs during the reporting period (foster youth: 1.53, non-foster youth: 1.22), $t(331.33) = 4.52, p < .001$.

¹⁷ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

¹⁸ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

Table 1. Race and Ethnicity of Foster and Non-Foster Youth Served by LifeWorks

	All Youth	Foster Youth	Non-Foster Youth	<i>z</i>
Non-Hispanic White	165 (33.95%)	81 (38.39%)	77 (28.62%)	2.26
Hispanic White	162 (33.33%)	36 (17.06%)	118 (43.87%)	-6.24
African American	129 (26.54%)	72 (34.12%)	53 (19.70%)	3.57
American Indian	9 (1.85%)	7 (3.32%)	2 (.74%)	2.06
Asian	6 (1.23%)	1 (.47%)	5 (1.86%)	<i>ns</i>
Native Hawaiian/Pacific Islander	2 (.41%)	12 (5.69%)	11 (4.09%)	<i>ns</i>
Other	23 (4.73%)	12 (5.69%)	11 (4.09%)	<i>ns</i>

Note. $\chi^2(7, N = 480) = 46.14, p < .001$. Percentages may add up to more than 100%, as youth were allowed to select more than one race. Across all youth, four clients (.82%) did not know their ethnicity (all of these clients were non-foster youth), and two clients (.41%) were unaware of their race (.47% of foster youth and .37% of non-foster youth). Ten youth (2.06%) declined to disclose their ethnicity (1.89% of foster youth and 2.19% of non-foster youth), and three youth (.62%) declined to disclose their race (.47% of foster youth and .74% of non-foster youth).

themselves to be Hispanic (and of any race), 26.89% of LifeWorks clients self-identified as Hispanic (and of any race). The proportion of LifeWorks' foster youth who identified as African American is similar to the proportion observed at the national level (31%), as are the proportions of youth identifying as American Indian (1%), Asian (1%), or Native Hawaiian/Pacific Islander (0%).¹⁹

The patterns reported in Table 1 for non-foster youth suggest that the racial and ethnic makeup of LifeWorks' clients who do not have a history of foster care involvement differs from that of disconnected youth in general. Nationally, 45.94% of disconnected youth identify as non-Hispanic White, 21.39% are Hispanic Whites, and 25.15% identify as African American.²⁰ In comparison, a smaller proportion of LifeWorks' non-foster youth identify as non-Hispanic White or African American, and a larger proportion identify as Hispanic White. Given that Austin's population is comprised of larger proportion of Hispanics and a smaller proportion of African Americans relative to the United States, such trends are not surprising.²¹

Country of Origin and Primary Language

With respect to clients' country of origin, the vast majority of clients were born in the United States, and a slightly greater proportion of youth spoke English as their primary language (see Table 2). However, there were significant differences in the proportions of foster youth and non-foster youth who were born in the United States or who spoke English as their primary language. Relative to non-foster youth, a greater proportion of foster youth were born in the United States, a smaller proportion was born in Mexico, and a larger proportion was born in other countries. Similarly, a greater proportion of foster youth spoke English as their primary language, and a smaller proportion spoke Spanish as their primary language.

Unfortunately, information pertaining to foster youth's country of origin or primary language is not consistently collected at the national, state, or local level. Such gaps in data are problematic and often have far-reaching consequences (e.g., an undocumented youth born in Mexico may not be able to access relief options that would otherwise be available).²² However, compared to foster youth in Los Angeles (one of the few sources providing systematic documentation of foster youth's country-of-origin), it appears that

¹⁹ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

²⁰ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

²¹ QuickFacts United States. United States Census Bureau. Retrieved February 16, 2016, from <http://www.census.gov/quickfacts/table/PST045215/00,4805000>

²² Lincroft, Y., Resner, J., & Leung, M. (2006). Undercounted, underserved: Immigrant and refugee families in the child welfare system. The Annie E. Casey Foundation.

Table 2. Country of Origin and Primary Language of Foster and Non-Foster Youth Served by LifeWorks

	All Youth	Foster Youth	Non-Foster Youth	<i>z</i>
<i>Country of Origin</i>				
United States	384 (93.20%)	184 (96.34%)	200 (90.50%)	2.35
Mexico	20 (4.85%)	1 (.52%)	19 (8.60%)	-3.80
Other	7 (1.70%)	6 (3.14%)	1 (.45%)	2.11
<i>Primary Language</i>				
English	465 (96.07%)	209 (99.05%)	256 (93.77%)	2.97
Spanish	16 (3.31%)	1 (.47%)	15 (5.49%)	3.06
Other	2 (.41%)	1 (.47%)	1 (.37%)	<i>ns</i>

Note. Country of origin: $\chi^2(3, N = 412) = 19.36, p < .001$. Primary language: $\chi^2(7, N = 484) = 10.23, p = .02$. Across all youth, one non-foster youth (.24%) declined to disclose his or her country of origin. Across all youth, one non-foster youth (.21%) declined to disclose his or her primary language.

LifeWorks serves a far smaller proportion of foster youth who were born outside of the United States (3.66% versus 9.5%).²³

In general, the proportion of LifeWorks' non-foster youth who were born outside of the United States was slightly lower than the rates observed nationwide (9.05% versus 12.51%).²⁴ Such findings are particularly surprising, considering that a larger proportion of the non-foster youth served by LifeWorks identify as Hispanic Whites, compared to the population of disconnected youth in general. Despite these trends, it appears that the majority of these youth served by LifeWorks were native born.

Sexual Orientation

The majority of youth self-identified as heterosexual (80.57%), with 5.46% identifying as gay or lesbian, 7.64% identifying as bisexual, 0.22% identifying as asexual, and 1.53% identifying as something else. A relatively small proportion of youth were questioning or unsure of their sexual orientation (0.88%) or declined to provide their sexual orientation (3.71%). Foster youth and non-foster youth did not differ with respect to their sexual orientation, $p = .11$.

Only limited data are available regarding the sexual orientation of foster youth served across the United States, although numerous studies suggest that youth who identify as a sexual minority are overrepresented in the foster care system.²⁵ A recent report describing the sexual orientation of older youth involved in the foster care system in Los Angeles indicates that 7.0% of youth identify as gay or lesbian, 8.0% identify as bisexual, and 1.3% indicate that they are questioning or unsure about their sexual identity.²⁶ Overall, these data are generally consistent with the patterns observed among foster youth at LifeWorks (heterosexual: 79.10%, gay or lesbian: 4.48%, bisexual: 7.96%, questioning/unsure: 0.50%).

Even less is known about the sexual orientation of disconnected youth. It is possible that disconnected youth closely resemble the general population in terms of their sexual orientation (in which approximately 6.4–8.0% of youth and young adults identify as a sexual minority).²⁷ Alternatively, it is possible that youth who identify as a sexual minority are more at risk of becoming disconnected (e.g., as a result of being rejected or

²³ Wilson, B. D. M., Cooper, K., Kastanis, A., & Nezhad, S. (2014). Sexual and gender minority youth in foster care: Assessing disproportionality and disparities in Los Angeles. The Williams Institute.

²⁴ Wight, V. R., Chau, M., Aratani, Y., Schwartz, S. W., & Thampi, K. (2010). A profile of disconnected young adults in 2010. National Center for Children in Poverty.

²⁵ Winter, E. A. (2013). Lesbian, gay, bisexual, transgendered, questioning, and queer youth: The challenge for child welfare. In H. Cahalane (Ed.), *Contemporary Issues in Child Welfare Practice* (pp. 127–157). New York, NY: Springer.

²⁶ Wilson, B. D. M., Cooper, K., Kastanis, A., & Nezhad, S. (2014). Sexual and gender minority youth in foster care: Assessing disproportionality and disparities in Los Angeles. The Williams Institute.

²⁷ *Ibid.*

Table 3. Educational Attainment of Foster and Non-Foster Youth Under Age 18 Served by LifeWorks

	All Youth	Foster Youth	Non-Foster Youth	z
Less than high school (not enrolled)	6 (5.13%)	5 (11.36%)	1 (1.39%)	2.37
Less than high school (enrolled)	3 (2.56%)	1 (2.27%)	2 (2.78%)	ns
Some high school (not enrolled)	33 (28.21%)	17 (38.64%)	16 (21.92%)	ns
Some high school (enrolled)	68 (58.12%)	18 (40.91%)	50 (68.49%)	-2.93
HS diploma/GED (not enrolled)	3 (2.56%)	2 (4.55%)	1 (1.37%)	ns
HS diploma/GED (enrolled) ^a	1 (.85%)	1 (2.27%)	—	—

Note. $\chi^2(8, N = 117) = 16.23, p = .04$. Across all school-aged youth, one non-foster youth (0.85%) did not know his or her highest level of education, one non-foster youth (.85%) declined to indicate the highest level of education that he or she attained, and one non-foster youth declined to indicate his or her enrollment status (.85%).

^aYouth in this category have completed their high school diploma or GED and are currently enrolled in either a vocational program or their first year of college.

shunned by their families). Thus, the information about the sexual orientation of non-foster youth served by LifeWorks is a valuable contribution to our understanding of the characteristics of disenfranchised youth. Specifically, 81.71% of non-foster youth indicated that they were heterosexual, 6.23% identified as gay or lesbian, 7.39% identified as bisexual, and 1.17% indicated that they were questioning or unsure about their sexual orientation. Based on this information, it appears that the non-foster youth served by LifeWorks are more likely to identify as a sexual minority, relative to the general population of youth and young adults in the United States.

Education

All youth were asked to provide information about their highest level of education and whether or not they were enrolled in school at the time of intake. The educational attainment and enrollment status of school-aged youth and youth who were age 18 or older can be found in Tables 3 and 4, respectively.

School-Aged Youth

Overall, among the 122 school-aged youth (those younger than 18) served by LifeWorks, the majority of clients had completed some high school and were currently enrolled in school. Among these youth, the distribution of clients' educational attainment as a function of their enrollment status differed significantly between foster youth and non-foster youth. Relative to their non-foster counterparts, a greater proportion of school-aged foster youth had completed less than high school and were not currently enrolled in school, and a smaller proportion were currently enrolled in high school.

Such trends are not surprising, given that youth in care nationwide show poorer educational outcomes compared to the general population. For instance, approximately 20% of youth in care have been kept out of school due to missing documentation.²⁸ What's more, 37% of youth in care ultimately drop out of school.²⁹ In comparison, 50.00% of LifeWorks' school-aged youth in care have yet to graduate and are not currently enrolled in school when they enter services.

²⁸ Advocates for Children of New York, Inc. (2000). Educational neglect: The delivery of educational services to children in New York City's foster care system. New York: Advocates for Children.

²⁹ Blome, W. (1997). What happens to foster kids: Educational experiences of a random sample of foster care youth and a matched group of foster care youth. *Child and Adolescent Social Work Journal*, 14, 41-53.

Table 4. Educational Attainment of Foster and Non-Foster Youth Age 18–24 Served by LifeWorks

	All Youth	Foster Youth	Non-Foster Youth	<i>z</i>
Less than high school (not enrolled)	10 (2.81%)	3 (1.84%)	7 (3.63%)	<i>ns</i>
Less than high school (enrolled)	—	—	—	—
Some high school (not enrolled)	94 (26.40%)	42 (25.77%)	52 (26.94%)	<i>ns</i>
Some high school (enrolled)	41 (11.52%)	21 (12.88%)	20 (10.36%)	<i>ns</i>
HS diploma/GED (not enrolled)	135 (37.92%)	65 (39.88%)	70 (36.27%)	<i>ns</i>
HS diploma/GED (enrolled) ^a	20 (5.62%)	13 (7.98%)	7 (3.63%)	<i>ns</i>
Vocational training (not enrolled)	4 (1.12%)	1 (0.61%)	3 (1.55%)	<i>ns</i>
Vocational training (enrolled)	—	—	—	—
Some college (not enrolled)	10 (2.81%)	3 (1.84%)	7 (3.63%)	<i>ns</i>
Some college (enrolled)	25 (7.02%)	9 (5.52%)	16 (8.29%)	<i>ns</i>
Associate's degree (not enrolled)	2 (0.56%)	1 (0.61%)	1 (0.52%)	<i>ns</i>
Associate's degree (enrolled)	—	—	—	—
Bachelor's degree (not enrolled)	4 (1.12%)	—	4 (2.07%)	<i>ns</i>
Bachelor's degree (enrolled)	—	—	—	—
Some graduate school (not enrolled)	—	—	—	—
Some graduate school (enrolled)	1 (.28%)	—	1 (.52%)	<i>ns</i>

Note. $\chi^2(15, N = 356) = 18.84, p = .22$. Across all clients between the ages of 18–24, one non-foster youth (.28%) did not know his or her highest level of education, and five clients (1.40%) declined to indicate the highest level of education they attained (.61% of foster youth and 1.12% of non-foster youth). Six additional clients (1.68%) declined to indicate whether they were currently enrolled in school (2.45% of foster youth and 1.03% of non-foster youth).

^aYouth in this category have completed their high school diploma or GED and are currently enrolled in either a vocational program or their first year of college.

Disconnected youth also show reduced educational attainment relative to the general population. National estimates suggest that 28.5% of disconnected youth dropped out of high school.³⁰ At LifeWorks, 23.31% of school-aged youth (who were not involved in the foster care system) had not yet graduated and were not enrolled in school at program entry. As such, these youth have a serious risk of permanently dropping out. However, because these youth have connected with LifeWorks services, they may have a greater chance of reenrolling in school than they would otherwise. Similarly, LifeWorks may also be able to prevent youth who are currently enrolled in school from dropping out prior to graduation. Future reports will examine whether the educational outcomes observed among youth exiting services markedly differ from national trends.

Youth Age 18 or Older

Among youth who were 18 years of age or older, the greatest proportion of clients had earned their high school diploma or GED but were not pursuing any additional education. Interestingly, among clients age 18 or older, foster youth and non-foster youth did not differ with respect to their highest level of education or their enrollment status, $p = .22$. Thus, it appears that the discrepancies observed between school-aged foster and non-foster youth may be reduced by early adulthood, likely as a result of foster youth completing GED programs. Indeed, a greater proportion of foster youth earned their GEDs, compared to non-foster youth (15.09% versus 5.29%, respectively; $z = 3.07$), $\chi^2(4, N = 348) = 14.64, p = .006$.

In comparison to national samples, LifeWorks' foster youth population has comparable levels of educational attainment. Whereas 38% of current or former youth in the United States who are over the age of 18 have not earned a high school diploma or GED, 40.49% of LifeWorks' foster youth population has not graduated from high school or a GED program. Slightly more than 55% of LifeWorks' foster youth have earned their high school diploma/GED (and may or may not have earned some post-secondary credits), compared to 56% of foster youth at the national level. At LifeWorks, 1.22% of foster youth have completed some type of

³⁰ Sims, P. (2015). Reconnecting opportunity youth: Data reference guide. Tulane University: Cowen Institute for Public Education Initiatives.

Table 5. Employment Status of Foster and Non-Foster Youth Served by LifeWorks

	All Youth	Foster Youth	Non-Foster Youth	<i>z</i>
Employed	105 (35.71%)	40 (26.85%)	70 (44.83%)	-3.22
Unemployed	172 (58.50%)	102 (68.46%)	65 (48.28%)	3.51
Internship	2 (.68%)	1 (.67%)	1 (.69%)	<i>ns</i>

Note. $\chi^2(4, N = 294) = 14.45, p = .006$. Across all clients, 15 youth (5.10%) declined to disclose their employment status (4.03% of foster youth and 6.21% of non-foster youth).

vocational training or post-secondary education; nationally, less than 1% of foster youth have completed such training or educational programming.³¹ However, the proportion of foster youth who are enrolled in school when they sign up for services at LifeWorks is far lower than national rates of enrollment among foster youth who are over the age of 18 (26.38% versus 54%). It is possible that, when foster youth enroll in services at LifeWorks, they are interested in receiving assistance enrolling in school and pursuing their educational goals. Future studies will examine whether foster youth show meaningful improvements in their educational attainment upon program exit.

In general, it appears that non-foster youth over the age of 18 who were served by LifeWorks have lower levels of education on average, compared to the broader population of disconnected youth. Whereas 25.78% of disconnected youth over the age of 18 lack a high school diploma/GED, 40.93% of LifeWorks' non-foster clients who were over the age of 18 were similarly lacking such educational credentials. What's more, a smaller proportion of these LifeWorks clients had earned their high school diploma/GED (and pursued no additional education or training), relative to the broader population of disconnected youth (36.27% versus 54.95%). However, a similar proportion of these LifeWorks clients had pursued at least some post-secondary education, compared to disconnected youth in general (20.21% versus 19.26%).³²

Employment

The majority of clients were not employed at intake, and foster youth and non-foster youth significantly differed with respect to their employment status (see Table 5).³³ Specifically, a significantly greater proportion of foster youth were unemployed, and a significantly smaller proportion of foster youth were employed.

Among those who were employed, 43.81% were employed in part-time positions, and 44.76% were employed in full-time positions. An additional 3.81% were employed in as-needed positions, 3.81% were working seasonal jobs, and 3.80% were evenly split between those in temporary or temp-to-hire positions. Foster youth and non-foster youth who were employed differed with respect to the types of jobs they held, $\chi^2(5, N = 105) = 10.97, p = .05$. Specifically, foster youth who were employed were significantly more likely than their non-foster counterparts to hold a part-time position (foster youth: 57.50%, non-foster youth: 35.38%; $z = 2.22$) and were less likely to be employed full-time (foster youth: 27.50%, non-foster youth: 55.38%; $z = -2.79$).

Of those who were unemployed, 13.37% reported not working because they were students, 1.74% were unemployed due to a disabling condition, and .58% were unemployed due to a temporary health issue. The remaining clients did not cite a specific reason for their unemployment, but 68.60% reported that they were

³¹ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

³² Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

³³ The analyses on clients' employment are limited to those who were age 18 or older.

Table 6. Clients' Income and Most Common Cash Benefits, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	<i>z</i>
Earned income/ cash benefits	225 (46.67%)	61 (28.77%)	164 (60.82%)	$\chi^2(3, N = 480) = 53.09^{***}$	-6.99
Earned income	185 (38.33%)	47 (22.17%)	138 (51.12%)	$\chi^2(3, N = 480) = 44.85^{***}$	-6.48
SSI	24 (5.00%)	7 (3.30%)	17 (6.34%)	$\chi^2(3, N = 480) = 2.68$	<i>ns</i>

Note. Across all youth, 6 clients (1.25%) did not know whether their households earned income or received some type of cash benefits (.94% of foster youth and 1.49% of non-foster youth), and 21 clients (4.37%) declined to answer (4.25% of foster youth and 4.46% of non-foster youth).

*** $p < .001$.

seeking employment and 15.70% indicated that they were not seeking employment. Foster youth and non-foster youth who were not working reported similar reasons for their unemployment ($p = .62$).

The employment rates observed among LifeWorks' foster youth at program entry differed somewhat from the rates seen among foster youth nationwide. Whereas only 15.44% of foster youth were employed in part-time positions when they enrolled in LifeWorks services (compared to 23% of the broader population of foster youth), the rates of employment in full-time positions were more comparable (7.38% of LifeWorks' foster youth versus 11% of foster youth nationwide).³⁴

The reasons for unemployment reported by LifeWorks clients who did not have a history of foster care involvement differed markedly from those reported by disconnected youth in general. Whereas only 2.32% of these clients reported being unemployed due to a diagnosed disability or health issue, 34.40% of the overall population of disconnected youth report being unemployed for such reasons. Whereas approximately 36.00% of disconnected youth in the United States are unable to find work, nearly 70% of LifeWorks' non-foster youth who were out of work reported that they were seeking employment but had not yet secured a job.³⁵ Given these trends, it appears LifeWorks' clients have greater *potential* (and possibly motivation) to find and obtain employment, relative to the broader population of disconnected youth. Consistent with this notion, whereas 44.83% of LifeWorks' non-foster youth were employed at program entry, only 33.4% of disconnected youth nationwide have worked at some point in the past year.³⁶

Income and Benefits

Earned Income and Cash Benefits

Overall, the proportion of youth's households that earned income or received some type of cash benefits was comparable to the proportion that did not (see Table 6). Slightly more than 40% of youth had at least one household member who earned income, and the most common type of cash benefits reportedly received by households was SSI. The average monthly household income was \$655.41 ($SD = \$1,134.53$; $Mdn = \$0.00$; range = \$0.00–\$8,800),³⁷ placing the average client at 40.32% of the federal poverty level ($SD = 74.67\%$; $Mdn = .00\%$; range = .00–913.00%).

Relative to non-foster youth, a significantly smaller proportion of foster youth reported earning income or receiving some type of cash benefits. A comparable pattern emerged with respect to earned income

³⁴ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

³⁵ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

³⁶ Sims, P. (2015). Reconnecting opportunity youth: Data reference guide. Tulane University: Cowen Institute for Public Education Initiatives.

³⁷ One client's reported household income was deemed an outlier and was excluded from these analyses.

specifically, with slightly more than half of non-foster youth reporting that at least one household member earned income, compared to less than one-quarter of foster youth. However, the proportion of households receiving SSI did not differ among foster youth and non-foster youth, $p = .44$. Given this information, it is not altogether surprising that the average monthly household income differed significantly between foster youth and non-foster youth (\$209.70 versus \$1,006.60), $t(357.33) = 8.92, p < .001$. The average federal poverty level of foster youth and non-foster youth was also significantly different (14.88% versus 60.36%), $t(355.98) = 7.61, p < .001$.

Again, the findings reported above show the proportion of LifeWorks' clients whose *households* report earning income or receiving cash benefits. Whereas only 22.17% of LifeWorks' foster youth report that their *households* earn some type of income, approximately 34% of foster youth nationwide report that *they themselves* earn income. Additionally, a greater proportion of foster youth in the United States receive SSI or SSDI relative to the foster youth served by LifeWorks (14% versus 3.30%).³⁸ A far smaller proportion of LifeWorks' clients who did not have a history of foster care reported that their households received SSI, compared to national trends among disconnected youth in general (in which 15.2% of disconnected youth receive SSI or Medicare).³⁹

Interestingly, there do not appear to be any data at the national or state level examining the income levels of current and former foster youth in tandem. Thus, the current data cannot be compared to broader trends among foster youth. However, information about the income of youth who aged out of care is available and suggests that a far greater proportion of the aged-out foster youth served by LifeWorks live at or below the poverty line relative to aged-out foster youth across Texas (90.91% versus 48.4%).⁴⁰

The information available about the income levels for the general population of disconnected youth once again highlights the vulnerability of youth served by LifeWorks. Given the lower rates of educational attainment observed among LifeWorks' non-foster youth population relative to the broader disconnected youth population, it is not altogether surprising that 75.84% of these clients live in poverty, compared to disconnected youth in general (for whom 44% live in poverty).⁴¹

Non-Cash Benefits

A little over 20% of youth's households received some type of non-cash benefits (see Table 7). Non-cash benefits included, but were not limited to, SNAP, WIC, child care subsidies, and Section 8 (but did not include Medicaid, Medicare, or other federal or local medical programs). Among those who provided information about the non-cash benefits received by their households, SNAP was the most commonly reported type of benefit, although a notable proportion of youth indicated that they received WIC benefits.

The overall distribution of households receiving non-cash benefits varied significantly between foster youth and non-foster youth, with a greater proportion of non-foster youth receiving some type of non-cash benefits relative to foster youth. SNAP was the most commonly accessed non-cash benefit among both foster and non-foster youth, but a far greater proportion of non-foster youth receive SNAP benefits (from a benefits-access perspective, this pattern also makes sense, as foster youth are not eligible for SNAP while they are in care).

It is worth mentioning that foster youth are only able to access the vast majority of non-cash forms of public assistance once they leave care. Indeed, a smaller proportion of youth in care reported receiving some type

³⁸ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

³⁹ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

⁴⁰ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

⁴¹ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

Table 7. Most Common Non-Cash Benefits, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	z
Non-cash benefits	95 (19.96%)	26 (12.26%)	69 (26.14%)	$\chi^2(3, N = 476) = 14.82^{**}$	-3.76
SNAP	89 (18.70%)	25 (11.79%)	64 (24.24%)	$\chi^2(3, N = 476) = 12.62^{**}$	-3.46
WIC	18 (3.78%)	4 (1.89%)	14 (5.30%)	$\chi^2(3, N = 476) = 4.36$	ns

Note. Across all youth, 3 clients (.63%) did not know whether their households earned income or received some type of cash benefits (.94% of foster youth and .38% of non-foster youth), and 13 clients (4.83%) declined to answer (4.72% of foster youth and 4.92% of non-foster youth).

** $p < .01$.

of non-cash benefits, relative to aged-out youth (6.33% versus 19.70%, respectively; $z = -2.43$). This pattern was largely driven by aged-out youth's greater access to SNAP benefits (aged-out: 18.18%, in care: 6.33%; $z = 2.21$), as the proportion of youth accessing WIC was similar across current and former foster youth (aged-out: 1.52%, in care: 0.00%; $p = .67$). Although limited data is available on the overall non-cash benefits utilization of foster youth in the United States, it appears that, at program entry, a smaller proportion of LifeWorks' aged-out foster youth rely on SNAP compared to aged-out youth across the nation (30%).⁴²

With respect to non-foster youth, approximately 43% of disconnected youth come from households which receive some type of public assistance, in comparison to only 26.14% of this segment of LifeWorks' clients.^{43,44}

Insurance Status

On a separate but related note, the majority of youth were covered by some type of insurance (61.69%; 33.12% uninsured; 2.60% did not know; 2.60% declined to answer). Compared to non-foster youth, a greater proportion of foster youth reported some type of insurance coverage (74.26% versus 51.92%; $z = 4.90$), $\chi^2(3, N = 462) = 31.28$, $p < .001$. Given the lower rates of employment observed among foster youth and their greater utilization of Medicaid (foster youth: 43.87%, non-foster youth: 22.73%; $\chi^2(3, N = 476) = 25.66$, $p < .001$, $z = 4.91$), this discrepancy appears to be driven by foster youth's guaranteed (but time-limited) access to public health care benefits.

Compared to national trends, a smaller proportion of LifeWorks' foster youth are covered by some type of insurance (86% versus 74.26%). What's more, a smaller percentage of LifeWorks' foster youth receive Medicaid compared to foster youth across the United States (43.87% versus 71%).⁴⁵ Relative to disconnected youth in general, LifeWorks' non-foster youth are less likely to be insured. Slightly more than half of these clients carry some form of insurance, compared to 60.9% of the nation's population of disconnected youth.⁴⁶

⁴² Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

⁴³ Hair, E. C., Moore, K. A., Ling, T. J., McPhee-Baker, C., & Brown, B. V. (2009). Youth who are "disconnected" and those who then reconnect: Assessing the influence of family, program, peers, and communities. Child Trends Research Brief, 2009-37.

⁴⁴ The authors of the report cited above did not specify the particular forms of public assistance included in their analysis, and thus their definition of public assistance may encompass both non-cash and cash benefits. There is a general lack of information on the rate at which disconnected youth access or utilize specific public benefits.

⁴⁵ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

⁴⁶ Sims, P. (2015). Reconnecting opportunity youth: Data reference guide. Tulane University: Cowen Institute for Public Education Initiatives.

Table 8. Housing Arrangements of Foster & Non-Foster Youth Served by LifeWorks, Prior to Program Entry

	All Youth	Foster Youth	Non-Foster Youth	z
Place not meant for habitation	86 (18.42%)	40 (19.51%)	46 (17.56%)	ns
Temporary arrangements w/ friends	55 (11.78%)	32 (15.61%)	23 (8.78%)	2.27
Temporary arrangements with family (clients ≥ 18 yo) ^a	52 (11.13%)	19 (9.27%)	33 (12.60%)	ns
Client rents/owns home, unsubsidized (clients ≥ 18 yo)	46 (9.85%)	10 (4.88%)	36 (13.74%)	-3.19
Permanent arrangements w/ family (clients ≥ 18 yo) ^b	43 (9.21%)	9 (4.39%)	34 (12.98%)	-3.19
Parents rent/own home, unsubsidized (clients < 18 yo) ^c	41 (8.78%)	4 (1.95%)	37 (14.12%)	-4.61
Foster care home	29 (6.21%)	29 (14.15%)	—	6.29
Emergency shelter	22 (4.71%)	17 (8.29%)	5 (1.91%)	3.23
Permanent arrangements w/ family (clients < 18 yo) ^d	21 (4.50%)	1 (.49%)	20 (7.63%)	-3.70
Transitional housing	13 (2.78%)	7 (3.41%)	6 (2.29%)	ns
Parents rent home, subsidized (clients < 18 yo) ^e	6 (1.28%)	—	6 (2.29%)	-2.18
Client rent home, subsidized (clients ≥ 18 yo)	5 (1.07%)	—	5 (1.91%)	-1.99
Permanent arrangements with friends	5 (1.07%)	5 (2.44%)	—	2.54
Temporary arrangements w/ family (clients < 18 yo) ^d	5 (1.07%)	3 (1.46%)	2 (.76%)	ns
Other ^e	28 (5.98%)	33 (11.22%)	5 (1.59%)	—

Note. $\chi^2(22, N = 467) = 141.21, p < .001$. Across all youth, three clients (0.64%) did not know where they stayed prior to program entry (.98% of foster youth and .38% of non-foster youth), and five clients (1.07%) declined to indicate where they resided (.98% of foster youth and 1.15% of non-foster youth).

^aThis response option includes any time-limited arrangements with their biological/adoptive parents or other family members.

^bYouth in this category are over the age of 18 and are permanently living with their biological/adoptive parents or other family members.

^cYouth in this category are under the age of 18 and have traditional housing arrangements with their biological or adoptive parents.

^dThese youth reside with family members other than their biological or adoptive parents.

^eThe "Other" category includes youth who reside in hotels/motels (.64%), jails/prisons/juvenile delinquency facilities (.64%; $z = 1.96$), permanent supportive housing (.64%; $z = 1.96$), psychiatric hospitals (.64%), boarding homes (.43%), halfway houses (.21%), or other housing arrangements (3.21%; $z = 2.86$).

Housing

Clients' housing arrangements prior to program entry can be found in Table 8. Prior to program entry, the largest proportion of clients resided in a place not meant for habitation; this pattern was consistent for both foster youth and non-foster youth. However, the proportion of foster youth with certain types of housing arrangements differed significantly from the types of housing arrangements secured by youth with no history of foster care involvement. Specifically, relative to non-foster youth, a greater proportion of foster youth resided in foster care homes, emergency shelters, permanent or temporary arrangements with friends, jails/prisons/juvenile delinquency facilities, permanent supportive housing, or "other" housing arrangements. Further, a smaller proportion of foster youth—both those under the age of 18 and those who had reached the age of majority—reported maintaining permanent living arrangements with family members, living in an unsubsidized rental, or living in a subsidized rental.

Overall, it appears that LifeWorks' foster youth population had more vulnerable housing situations relative to the broader population of foster youth. Whereas approximately 27.80% of LifeWorks' youth with a history of foster care involvement were homeless at program entry, only 20% of foster youth across the United States report that they have ever been homeless.⁴⁷ Given that a substantial proportion of the foster youth served by LifeWorks reported that they were temporarily staying with family or friends when they enrolled in services, the unfortunate reality is that an even larger proportion of this segment of clients are at risk of future homelessness.

LifeWorks' youth who did not have a history of foster care involvement have far more vulnerable housing situations relative to disconnected youth in general. Whereas 63.82% of disconnected youth reside with one

⁴⁷ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

Table 9. Reasons Reported for Not Growing up in an Intact Family, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	<i>z</i>
CPS removal ^a	137 (45.67%)	136 (83.95%)	1 (0.72%)	$\chi^2(2, N = 300) = 208.34^{***}$	14.42
Parental divorce	111 (37.00%)	26 (16.05%)	85 (61.59%)	$\chi^2(2, N = 300) = 72.67^{***}$	-8.14
Abandoned by one/ both parents	53 (17.67%)	29 (17.90%)	24 (17.39%)	$\chi^2(2, N = 300) = 3.56$	<i>ns</i>
Incarceration of one/both parents	28 (9.33%)	18 (11.11%)	10 (7.25%)	$\chi^2(2, N = 300) = 4.74^{\dagger}$	<i>ns</i>
Death of one/both parents	25 (8.33%)	13 (8.02%)	12 (8.70%)	$\chi^2(2, N = 300) = 3.63$	<i>ns</i>
Parents' serious health issues	6 (2.00%)	4 (2.47%)	2 (1.45%)	$\chi^2(2, N = 300) = 3.92$	<i>ns</i>
Client ran away	6 (2.00%)	3 (1.85%)	3 (2.17%)	$\chi^2(2, N = 300) = 3.61$	<i>ns</i>
Adoption	6 (2.00%)	6 (3.70%)	—	$\chi^2(2, N = 300) = 8.65^{**}$	2.28
Involvement w/ juvenile justice	2 (.67%)	2 (1.23%)	—	$\chi^2(2, N = 300) = 5.23^{\dagger}$	<i>ns</i>
Other	16 (5.33%)	4 (2.47%)	12 (8.70%)	$\chi^2(2, N = 300) = 9.50^{**}$	-2.39

Note. Clients could endorse more than one reason for why they did not grow up with both biological parents. Three clients (.80%) did not know whether or not they grew up with both biological parents until age 18, all of whom were non-foster youth.

^aNot all foster youth report a history of CPS removal, because clients can end up in foster care for reasons other than CPS removal (e.g., death of both parents, parental relinquishment). The one non-foster client who reported a history of CPS removal is the result of data entry error.

[†] $p < .10$. $**p \leq .01$. $***p < .001$.

or both parents, only 51.16% of LifeWorks' non-foster youth resided with an *adult family member* (who may or may not be the client's parent). The majority of disconnected youth between the ages of 16–18 reside with one or both parents (82.51%), whereas only 62.32% of LifeWorks' non-foster youth in this age range reported living with one or both parents.⁴⁸

Family Information

Family Background

In total, 82.09% of clients did not grow up with both biological parents until the age of 18. The specific reasons that youth cited for why they did not grow up with both biological parents can be found in Table 9. The average client reported experiencing 5.14 custody-related transitions prior to the age of 18 ($SD = 7.88$; $Mdn = 2$; range = 0–50) and 6.04 CPS-related transitions prior to the age of 18 ($SD = 8.56$; $Mdn = 3$; range = 0–48).⁴⁹

Not surprisingly, a significantly greater proportion of foster youth reported not growing up with both of their biological parents ($z = 7.53$), with 68.75% of non-foster youth not growing up in an intact home compared to 98.80% of foster youth, $\chi^2(2, N = 374) = 56.68$, $p < .001$.⁵⁰ Compared to those with no history of foster care involvement, a greater proportion of foster youth reported a history of CPS removal or adoption; however, a significantly smaller proportion of foster youth experienced the divorce of their parents or

⁴⁸ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

⁴⁹ Five clients' reported custody-related transitions and one client's reported CPS-related transitions were deemed outliers and were excluded from these analyses.

⁵⁰ Two foster youth reported growing up with both biological parents, which is likely due to data entry error or clients not fully understanding the question.

Table 10. Parenting Status of Foster and Non-Foster Youth Served by LifeWorks

	All Youth	Foster Youth	Non-Foster Youth	χ^2	<i>z</i>
Serves in a parental role	108 (29.67%)	36 (22.36%)	72 (35.47%)	$\chi^2(1, N = 364) = 7.39^{**}$	-2.72
Has own children	64 (17.58%)	21 (13.04%)	43 (21.18%)	$\chi^2(1, N = 364) = 4.10^*$	-2.03
Primary caregiver for partner's child(ren)	20 (5.49%)	11 (7.28%)	9 (5.11%)	$\chi^2(1, N = 327) = .67$	<i>ns</i>
Primary caregiver for other's child(ren)	42 (11.76%)	11 (6.92%)	31 (15.66%)	$\chi^2(1, N = 357) = 6.49^{**}$	-2.55

* $p \leq .05$. ** $p \leq .01$.

reported some "other" reason for not growing up with both of their biological parents. Youth who reported a history of foster care involvement reported experiencing a greater number of custody-related transitions on average, compared to those with no history of foster care involvement (1.30 versus 9.96), $t(182.9) = -11.05$, $p < .001$, which appears to be predominantly driven by the far greater number of CPS-related transitions that foster youth experienced on average (0.21 versus 9.10), $t(119.65) = -10.33$, $p < .001$.

The number of CPS-related transitions experienced by foster youth in the United States appears to vary widely. Nationwide, 18% of foster youth experience three or fewer placements, 56% have seven or more placements, and approximately 3% have 20 or more placements.⁵¹ In Texas, the typical foster youth experiences 11.1 placements while in care, with an average of 3.3 placements each year in care.⁵² Thus, the number of CPS-related transitions reported by LifeWorks' clients is slightly lower than what is observed across the state, which may be a function of the fact that some of the youth included in the sample are still in care (and may experience additional placements in the future). Indeed, when the sample is limited to youth who aged out of care, they report a slightly higher number of CPS-related transitions (an average of 9.93 transitions).

Unfortunately, data pertaining to the average number of custody-related transitions experienced by disconnected youth in the United States are not available, so comparisons between LifeWorks' data and broader trends cannot be made.

Romantic Relationships and Parenting Roles

Nearly one-third of clients (32.51%) reported being in a serious romantic relationship (2.46% of clients were legally married). Although a comparable percentage of foster youth and non-foster youth were romantically involved (31.25% and 32.43%, respectively; $p = .67$), the overall distribution of clients' relationship status was marginally different for foster youth and non-foster youth, with a slightly greater proportion of non-foster youth reporting that they were married at the time of intake (3.94% versus 0.61%; $z = 2.04$), $\chi^2(2, N = 366) = 5.38$, $p = .07$.

A little less than 30% of clients reported caring for at least one child (see Table 10), and just over 17% of clients reported having at least one child of their own (what's more, notable minorities of clients reported caring for their partners' children or serving as the primary caregiver for someone else's children). The average parenting client reported caring for 2.02 children ($SD = 1.27$, $Mdn = 2$, range = 1–7).

Relative to non-foster youth, a significantly smaller proportion of foster youth reported that they were serving in a parental role or had a child of their own. Although a comparable proportion of foster youth and non-foster youth served as a primary caregiver for their partner's child(ren), a significantly smaller proportion of

⁵¹ Pecora, P. J., Williams, J., Kessler, R. C., Downs, A. C., O'Brien, K., Hiripi, E., & Morello, S. (2003). Assessing the effects of foster care: Early results from the Casey National Alumni Study. Casey Family Programs.

⁵² White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

Table 11. History of Abuse, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	<i>z</i>
Emotional/verbal	137 (33.50%)	81 (42.63%)	56 (25.57%)	$\chi^2(3, N = 409) = 28.75^{***}$	3.65
Physical	135 (33.01%)	82 (43.16%)	53 (24.20%)	$\chi^2(3, N = 409) = 32.73^{***}$	4.07
Sexual	88 (21.52%)	63 (33.16%)	25 (11.42%)	$\chi^2(3, N = 409) = 44.06^{***}$	5.34
Neglect	70 (17.11%)	53 (27.89%)	17 (7.76%)	$\chi^2(3, N = 409) = 43.57^{***}$	5.39
Financial	26 (6.36%)	18 (9.47%)	8 (3.65%)	$\chi^2(3, N = 409) = 15.62^{***}$	2.41
Other	1 (0.24%)	1 (0.53%)	—	$\chi^2(3, N = 409) = 9.69^*$	1.07

Note. Clients could indicate that they experienced more than one type of abuse. Across all youth, four clients (.98%) did not know whether they were previously abused (1.58% of foster youth and .46% of non-foster youth), and 41 clients (10.02%) declined to indicate whether they had a history of abuse (14.21% of foster youth and 6.39% of non-foster youth).

* $p < .05$. *** $p \leq .001$.

foster youth reported caring for someone else's child(ren). Foster youth and non-foster youth who were in a parenting role reported caring for a comparable number of children (1.94 and 2.06 respectively, $p = .67$).

The proportion of LifeWorks' foster youth who reported parenting at least one child was substantially lower than the rates observed among foster youth in Texas more generally (22.36% versus 44.5%). Although the percent of foster youth served by LifeWorks who have a child of their own is comparable to rates observed nationwide (13.04% versus 12%), the proportion of LifeWorks' foster youth who have their own children is dramatically lower than what is observed among the Texas population of aged-out foster youth (58.3%, versus 11.43% of aged-out foster youth served by LifeWorks) and other statewide or regional assessments of foster youth (57.4 – 63.0%).^{53,54}

On the other hand, the percent of LifeWorks' non-foster youth who have their own children appears to be comparable to the proportion of disconnected youth who have children (21.18% versus 18.8%).⁵⁵ However, this comparison data does not specify whether these youth are parenting their own, their partners', or someone else's children. Thus, it is possible that the proportion of LifeWorks' non-foster youth who serve in a parenting role may be a more accurate comparison, in which case the proportion observed among LifeWorks' clients far exceeds national trends (35.47%).

Abuse and Trauma

History of Abuse

With respect to clients' histories of abuse and trauma, 48.90% of clients reported a history of abuse (see Table 11). The most commonly reported types of abuse were emotional/verbal abuse and physical abuse, with approximately one-third of clients indicating that they experienced each of these types of abuse. Not surprisingly, a significantly greater proportion of foster youth had a history of abuse compared to youth who did not have a history of foster care (58.95% versus 40.18%; $z = 3.79$), $\chi^2(3, N = 409) = 34.31$, $p < .001$.

⁵³ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

⁵⁴ Fernandes-Alcantara, A. L. (2014). Child welfare: Profiles of current and former older foster youth based on the National Youth in Transition Database (NYTD). Congressional Research Service, R43752.

⁵⁵ Wight, V. R., Chau, M., Aratani, Y., Schwartz, S. W., & Thampi, K. (2010). A profile of disconnected young adults in 2010. National Center for Children in Poverty.

In Texas, 81.2% of youth enter foster care because of parental maltreatment.⁵⁶ In contrast, only 58.95% of LifeWorks foster youth reported any history of abuse (not limited to parental maltreatment). The most common type of abuse reported by Texas foster youth is sexual abuse (50.8%), followed closely by neglect (49.8%). A little over a third of foster youth in Texas report experiencing physical abuse prior to entering care (36.7%). Although a smaller proportion of foster youth served by LifeWorks reported a history of sexual abuse or neglect, a larger segment reported a history of physical abuse (note that such abuse is not necessarily the reason they entered care, as youth were prompted to report on their *entire* history of abuse).

Unfortunately, no data have been systematically collected regarding the abuse histories of disconnected youth in the United States. However, considering many youth with a history of abuse struggle with a range of issues that undermine their educational success or employment stability (e.g., emotional/behavioral problems, familial disruption), one might expect the rates of abuse and neglect reported by disconnected youth to be higher than those observed within the general population.⁵⁷ Consistent with this notion, the proportions of non-foster youth served by LifeWorks who reported a history of emotional/verbal abuse, physical abuse, or sexual abuse were substantially higher than the rates found across the general population (25.9%, 14.8%, and 12.2%, respectively).⁵⁸

Generally speaking, it is unlikely that the proportion of youth with a history of abuse is fully represented in the data described above. Given the sensitivity of the subject, many youth who have a history of abuse prefer to avoid talking about their prior abuse. Others may feel guilty or embarrassed about their experiences, while others may blame themselves for what happened or minimize their history of abuse.⁵⁹ Even more disconcerting, those who were maltreated on a regular basis may believe that such behaviors are “normal” and not abusive.⁶⁰

History of Trauma

Clients were also asked to indicate whether or not they had a history of trauma (see Table 12). However, it is important to keep in mind that values shown in Table 12 do not represent the proportion of individuals who simply *experienced* a given event, but rather the proportion of individuals who experienced a particular event *and found it to be traumatic*. Across all youth, 37.61% reported a history of trauma. The most commonly cited types of traumatic incidents experienced by youth included the death of a close friend or family member, a period of homelessness, and witnessing domestic violence. Relative to non-foster youth, a larger percentage of foster youth reported a history of trauma (43.87% versus 32.22%; $z = 2.19$), $\chi^2(3, N = 335) = 9.21, p = .03$. Although comparable proportions of foster youth and non-foster youth reported experiencing most types of traumatic events, there were a few exceptions (see Table 16). Interestingly, for each traumatic experience where there was a significant difference between the groups, foster youth were disproportionately affected.

Comparing the current data to broader trends is difficult, as most prior investigations have asked youth to indicate whether or not they experienced a certain event in their lives (e.g., serious car accident, witnessing domestic violence), operating under the assumption that youth would find such an event to be traumatic.

⁵⁶ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

⁵⁷ Casanueva, C., Dolan, M., & Smith, K.R. (2014). Disconnected youth involved in child welfare. OPRE Report #2014-63, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

⁵⁸ Bynum, L., Griffin, T., Riding, D. L., Wynkoop, K. S., Anda, R. F., Edwards, V. J., ... Croft, J. B. (2010). Adverse childhood experiences reported by adults – five states, 2009. Centers for Disease Control and Prevention (CDC). *Morbidity and Mortality Weekly Report*, 59, 1609–1613.

⁵⁹ Widom, C. S., & Morris, S. (1997). Accuracy of adult recollections of childhood victimization: Part 2. Childhood sexual abuse. *Psychological Assessment*, 9, 34–46.

⁶⁰ Briggs, F., & Hawkins, R. M. F. (1996). A comparison of the childhood experiences of convicted male child molesters and men who were sexually abused in childhood and claimed to be nonoffenders. *Child Abuse & Neglect*, 20, 221–233.

Table 12. History of Specific Traumatic Experiences, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	<i>z</i>
Death of close friend/family member	56 (19.18%)	27 (20.61%)	29 (18.01%)	$\chi^2(1, N = 292) = .31$	<i>ns</i>
Homelessness	28 (9.59%)	22 (16.79%)	6 (3.73%)	$\chi^2(1, N = 292) = 14.23^{***}$	3.77
Witnessed domestic violence	26 (8.90%)	17 (12.98%)	9 (5.59%)	$\chi^2(1, N = 292) = 4.86^*$	2.20
Experienced family violence	18 (6.16%)	14 (10.69%)	4 (2.48%)	$\chi^2(1, N = 292) = 8.40^{**}$	2.90
Abandonment	15 (5.14%)	10 (7.63%)	5 (3.11%)	$\chi^2(1, N = 292) = 3.04^\dagger$	<i>ns</i>
Close friend/family member diagnosed w/ life-threatening illness	15 (5.14%)	8 (6.11%)	7 (4.35%)	$\chi^2(1, N = 292) = .46$	<i>ns</i>
Experience dating violence	14 (4.79%)	6 (4.58%)	8 (4.97%)	$\chi^2(1, N = 292) = .02$	<i>ns</i>
Exposure to close friend/family member's substance abuse	12 (4.11%)	8 (6.11%)	4 (2.48%)	$\chi^2(1, N = 292) = 2.41$	<i>ns</i>
Incarceration of close friend/family member	12 (4.11%)	9 (6.87%)	3 (1.86%)	$\chi^2(1, N = 292) = 4.59^*$	2.14
Serious motor vehicle crash	12 (4.11%)	5 (3.82%)	7 (4.35%)	$\chi^2(1, N = 292) = .05$	<i>ns</i>
Experienced partner violence	11 (3.77%)	6 (4.58%)	5 (3.11%)	$\chi^2(1, N = 292) = .43$	<i>ns</i>
Rape	11 (3.77%)	9 (6.87%)	2 (1.24%)	$\chi^2(1, N = 292) = 6.31^{**}$	2.51
Suicide of close friend/family member	11 (3.77%)	7 (5.34%)	4 (2.48%)	$\chi^2(1, N = 292) = 1.63$	<i>ns</i>
Other sexual assault	9 (3.08%)	8 (6.11%)	1 (.62%)	$\chi^2(1, N = 292) = 7.28^{**}$	2.70
Witnessed community violence	9 (3.08%)	4 (3.05%)	5 (3.11%)	$\chi^2(1, N = 292) = .00$	<i>ns</i>
Seriously beaten up	8 (2.74%)	7 (5.34%)	1 (.62%)	$\chi^2(1, N = 292) = 6.05^{**}$	2.46
Close friend/family member diagnosed w/ serious mental illness	8 (2.74%)	6 (4.58%)	2 (1.24%)	$\chi^2(1, N = 292) = 3.02^\dagger$	<i>ns</i>
Experienced abuse outside of family/partner abuse	8 (2.74%)	6 (4.58%)	2 (1.24%)	$\chi^2(1, N = 292) = 3.02^\dagger$	<i>ns</i>
Witnessed school violence	8 (2.74%)	5 (3.82%)	3 (1.86%)	$\chi^2(1, N = 292) = 1.03$	<i>ns</i>
Experienced a natural disaster	7 (2.40%)	5 (1.71%)	2 (1.24%)	$\chi^2(1, N = 292) = 2.05$	<i>ns</i>
Incarceration for an extended period of time	7 (2.40%)	7 (5.34%)	—	$\chi^2(1, N = 292) = 8.81^{**}$	2.97
"Other" trauma	22 (7.53%)	13 (9.92%)	9 (5.59%)	$\chi^2(1, N = 292) = 1.95$	<i>ns</i>

Note. Clients could indicate that they experienced more than one type of traumatic experience. Traumatic experiences reported by less than 2.00% of clients are not included (these include being abducted, discovering a dead body, being shot or stabbed, having major surgery or a history of long-term hospitalization, being mugged or held up, human trafficking, and "other" sexual trauma). Across all clients, one foster youth (.30%) did not know whether he or she had a history of trauma, and 39 clients (11.64%) declined to indicate whether they had a history of trauma (13.55% of foster youth and 10.00% of non-foster youth). Clients who were unsure about or declined to discuss their traumatic experiences are not included in the numbers reported above.

$^\dagger p < .10$. $*p < .05$. $**p \leq .01$. $***p < .001$.

When methodologies of this variety are employed, 87% of foster youth and 60.6% of youth in general are found to have prior exposure to trauma (the proportion of disconnected youth who have a history of trauma is unknown).^{61,62}

Mental and Physical Health

Diagnosed Disabilities

Across all clients, 12.66% of youth had a diagnosed disability (1.53% of clients did not know if they had a diagnosed disability, and 2.18% declined to answer). Of the various types of disabilities (e.g., physical disabilities, developmental disabilities), mental disabilities were the most common among clients, with 5.68% of all youth having a diagnosed mental disability. However, only 43.48% of clients with a diagnosed mental disability were receiving treatment when they enrolled in LifeWorks services.

Compared to non-foster youth, a slightly greater proportion of foster youth had diagnosed disabilities (foster youth: 16.84%, non-foster youth: 9.54%; $z = 2.32$), $\chi^2(3, N = 458) = 6.17, p = .10$, although both groups were diagnosed with mental disabilities to a comparable degree (foster youth: 7.65%, non-foster youth: 4.20%; $p = .81$) and were just as likely to be receiving treatment for their mental disability (foster youth: 66.67%, non-foster youth: 28.57%; $p = .11$).

The proportion of foster youth served by LifeWorks with a diagnosed disability is comparable to the proportion observed among foster youth in Texas (16.85% versus 19.3%).⁶³ However, the percent of non-foster youth at LifeWorks who have a diagnosed disability is far smaller than what is observed nationally among disconnected youth (34.4%).⁶⁴ Disabled youth may be overrepresented among those who are disconnected from school or work, as disabilities often inhibit individuals' ability to regularly attend school or maintain meaningful employment. Given their lower rates of disability, it appears that this segment of LifeWorks' clients may be better able to keep a job or remain in school, relative to the broader population of disconnected youth.

Behavioral Health

Descriptive information about clients' behavioral health issues can be found in Table 13.

Substance Abuse

With respect to clients' substance abuse, approximately twice as many clients reported a history of drug abuse as those who reported a history of alcohol abuse. Of those with a history of substance abuse, 40.63% reported struggling with alcohol and 60.56% reported abusing drugs during the six months prior to intake.

Although a comparable proportion of foster youth and non-foster youth reported a history of alcohol abuse, a greater proportion of foster youth reported a history of drug abuse. However, of those with a history of

⁶¹ Stein, B. D., Zima, B. T., Elliott, M. N., Burnam, M. A., Shahinfar, A., Fox, N. A., & Leavitt, L. A. (2001). Violence exposure among school-age children in foster care: Relationship to distress symptoms. *Journal of the American Academy of Child & Adolescent Psychiatry, 40*, 588–594.

⁶² Finkelhor, D., Turner, H., Ormrod, R., & Hamby, S. L. (2009). Violence, abuse, and crime exposure in a national sample of children and youth. *Pediatrics, 124*, 1–13.

⁶³ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

⁶⁴ Fernandes-Alcantara, A. L. (2015). Disconnected youth: A look at 16 to 24 year olds who are not working or in school. Congressional Research Service, R40535.

Table 13. Clients' Self-Reported Behavioral Health Issues, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	<i>z</i>
<i>Alcohol Abuse</i>					
History of alcohol abuse	33 (9.27%)	17 (10.76%)	16 (8.08%)	$\chi^2(1, N = 356) = 4.39$	<i>ns</i>
Recent alcohol abuse	13 (3.66%)	6 (3.80%)	7 (3.55%)	$\chi^2(3, N = 355) = 3.31$	<i>ns</i>
<i>Drug Abuse</i>					
History of drug abuse	72 (20.22%)	40 (25.32%)	32 (16.16%)	$\chi^2(1, N = 356) = 10.36^*$	2.14
Recent drug abuse	43 (12.11%)	24 (15.19%)	19 (9.64%)	$\chi^2(3, N = 355) = 6.38^\dagger$	<i>ns</i>
<i>Depression</i>					
History of depression	186 (52.10%)	92 (58.60%)	94 (47.00%)	$\chi^2(1, N = 357) = 14.83^{**}$	2.18
Currently depressed	60 (16.95%)	21 (13.46%)	39 (19.70%)	$\chi^2(3, N = 354) = 6.91^\dagger$	<i>ns</i>
History of suicidal ideation	114 (31.93%)	61 (38.85%)	53 (26.50%)	$\chi^2(3, N = 357) = 10.71^*$	2.49
Recent suicidal ideation	46 (12.96%)	22 (14.10%)	24 (12.06%)	$\chi^2(3, N = 355) = 5.88$	<i>ns</i>
Attempted suicide	64 (18.77%)	45 (30.41%)	19 (9.84%)	$\chi^2(3, N = 341) = 24.75^{***}$	4.82
Mental health hospitalization	79 (22.44%)	50 (32.47%)	29 (14.65%)	$\chi^2(3, N = 352) = 19.95^{***}$	3.98

Note. Across all youth, four non-foster clients (1.12%) did not know whether they had a history of substance abuse, and five clients (1.40%) declined to answer (2.53% of foster youth and .51% of non-foster youth). An additional non-foster youth declined to indicate whether he or she abused alcohol in the six months prior to intake, and an additional foster youth did not know whether he or she had abused drugs in the six months prior to intake. Eight clients (2.24%) did not know whether they had a history of depression (1.27% of foster youth and 3.00% of non-foster youth), and six non-foster youth (1.68% of all youth) declined to indicate whether they had such a history. An additional nine clients indicated they were not sure if they felt depressed in the six months prior to intake, and an additional three clients declined to answer. With respect to clients' histories of mental health hospitalizations, six clients (1.70%) did not know if they had previously been hospitalized (1.30% of foster youth and 2.02% of non-foster youth), and 16 clients (4.55%) declined to answer (6.49% of foster youth and 3.03% of non-foster youth).

$^\dagger p < .01$. $^* p \leq .05$. $^{**} p \leq .01$. $^{***} p < .001$.

substance abuse, a comparable proportion of both groups reported abusing alcohol or drugs in the six months prior to program enrollment (alcohol abuse: 35.29% of foster youth versus 46.67% of non-foster youth; drug abuse: 60.00% of foster youth versus 61.29% of non-foster youth; $p_s = .40$ and $.67$, respectively).

Among foster youth in Texas, 32.4% report a history of alcohol abuse (3.0% within the past year) and 26.6% report a history of drug abuse (7.3% within the past year). Although the proportion of LifeWorks' foster youth reporting a history of drug abuse is comparable to what is observed across the state, there is a substantial discrepancy in these groups' rates of alcohol abuse. Substance abuse tends to be underreported—in part because some individuals feel stigmatized, embarrassed, or ashamed of their history of substance use—but considering how commonplace it is for youth to engage in heavy drinking in general, it's possible that clients may simply be unaware that they have alcohol abuse issues, resulting in even higher rates of underreporting.^{65,66}

There is little data about the rates of drug and alcohol abuse among disconnected youth in the United States. However, the rates of drug abuse and alcohol abuse are believed to be higher among disconnected youth than the general population of youth, considering that disconnected youth often have greater access to drugs or alcohol, experience lengthy periods of idleness or stress, and have less exposure to substance abuse prevention messaging.⁶⁷ Lending further support for the notion that disconnected youth often deal with

⁶⁵ Hunt, D. E., Kling, R., Almozlino, Y., Jalbert, S., Chapman, M. T., & Rhodes, W. (2015). Telling the truth about drug use: How much does it matter? *Journal of Drug Issues, 45*, 314–329.

⁶⁶ Wu, L.-T., & Ringwalt, C. L. (2006). Use of alcohol treatment and mental health services among adolescents with alcohol use disorders. *Psychiatric Services, 57*, 84–92.

⁶⁷ Rapid Response Advisory, 2009 National Institute on Drug Abuse Monitoring the Future Study. (2009). Prevention works! Substance abuse prevention for underserved populations: A resource kit. Center for Substance Abuse Prevention/National Prevention Network.

substance abuse issues, nearly a quarter of organizations serving disconnected youth across the United States indicate that there is a serious lack of substance abuse treatment options in their communities.⁶⁸

National findings on the substance abuse rates of the young adult population suggest that approximately 12.3% of young adults have abused alcohol in the past year, and 6.6% have abused some type of illicit drug.⁶⁹ In comparison, 3.55% of the non-foster youth served by LifeWorks reported that they had issues with alcohol abuse in the six months prior to program entry, and 9.64% of these clients reported a history of drug abuse during the prior six months. Thus, it appears that a smaller proportion of LifeWorks' non-foster youth have issues with alcohol abuse relative to the general population, but a somewhat greater proportion of these youth report a recent issues with drug abuse. It is worth reiterating that these numbers likely underestimate the proportion of clients grappling with substance abuse issues.

Mental Health

More than half of all youth reported a history of depression, and just under 17% of clients reported struggling with depression at the time of their enrollment. Further, nearly one-third of clients reported a history of suicidal ideation and nearly 13% of clients reported feeling suicidal within the six months prior to intake. Of those who considered committing suicide, 56.14% had attempted suicide at least once and made an average of 1.91 suicide attempts ($SD = 3.33$; $Mdn = 1$, range = 0–20). Overall, more than one-fifth of youth had previously been hospitalized for mental health reasons.

Compared to non-foster youth, a larger percentage of foster youth reported a history of depression, as well as a history of suicidal ideation. However, a comparable proportion of foster youth and non-foster youth reported that they were struggling with depression at intake. Similarly, there was no difference between the two groups with respect to feelings of suicidal ideation during the six months prior to intake.

A greater proportion of foster youth reported that they had not only considered committing suicide but also previously attempted suicide. Given these findings, it is perhaps not surprising that, among those who previously considered committing suicide, foster youth made a greater number of attempts on average than non-foster youth (2.97 versus 0.74 attempts), $t(70.72) = 3.91$, $p < .001$. In a related vein, a significantly greater proportion of foster youth had a history of hospitalizations for mental health reasons, relative to foster youth.

Overall, it appears that a much greater proportion of LifeWorks' foster youth report a history of depression, compared to foster youth in Texas (58.60% versus 17.9%). However, the proportion of foster youth who have recently been depressed is more comparable across both samples (13.46% of LifeWorks youth reported being depressed at program entry, and 12.0% of foster youth in Texas report being depressed within the past year).⁷⁰ A smaller proportion of LifeWorks' foster youth had recently contemplated suicide compared to national samples, in which approximately 26.8% of youth report recently considering suicide (although youth at LifeWorks were asked if they had considered committing suicide in the prior 6 months, and the comparison study asked foster youth if they experienced any suicidal ideation during the prior year). Whereas 15.3% of foster youth in the national sample reported attempting suicide in the past year, 30.41% of LifeWorks' foster youth have ever attempted suicide.⁷¹ Although direct comparisons between these data cannot be made, they highlight the vulnerability of foster youth with respect to their mental health. Both

⁶⁸ U.S. Government Accountability Office. (February 2008). *Disconnected youth: Federal action could address some of the challenges faced by local programs that reconnect youth to education and employment*. (GAO-08-313). Retrieved February 10, 2016, from <http://www.gao.gov/new.items/d08313.pdf>.

⁶⁹ Substance Abuse and Mental Health Services Administration. (2015). *Behavioral Health Barometer: United States, 2015*. HHS Publication No. SMA-16-Baro-2015. Rockville, MD: Substance Abuse and Mental Health Services Administration.

⁷⁰ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). *Texas foster care alumni technical report: Outcomes at age 23 and 24*. Casey Family Programs.

⁷¹ Pilowsky, D. J., & Wu, L.-T. (2006). Psychiatric symptoms and substance use disorders in a nationally representative sample of American adolescents involved with foster care. *Journal of Adolescent Health, 38*, 351–358.

LifeWorks' data and national trends suggest that foster youth are at least three times more likely to attempt suicide relative to youth who lack a history of foster care involvement.

The rates of depression, suicidal ideation, and suicide attempts among disconnected youth in the United States are unknown, and comparisons of LifeWorks' data to broader trends is difficult, due to differences in age grouping and the phrasing of questions. However, compared to national trends among youth in general, it appears that a greater proportion of LifeWorks' youth who do not have a history of foster care involvement experience mental health issues. For instance, whereas 15.9% of youth have a history of major depression, and 9.9% have a history of minor depression, 47.00% of the non-foster youth served by LifeWorks reported struggling with depression at some point. The rates of recent depression are similarly imbalanced, with 5.8% of youth experiencing major depression in the past month, relative to 19.70% of LifeWorks' non-foster youth who reported being depressed at program entry.⁷² Whereas 7.4% of youth age 18–22 who are not currently enrolled in college report considering suicide within the past year, 12.06% of LifeWorks' non-foster youth had suicidal ideation in the six months prior to program entry.⁷³ Approximately 9.84% of LifeWorks' non-foster youth have previously attempted suicide; in comparison, 1.7% of the general population of youth and young adults has attempted suicide in the past year.⁷⁴

Legal Involvement

Overall, a little less than 45% of clients reported a history of legal issues (see Table 14). The most commonly reported type of legal issues was a history of misdemeanor convictions, although a notable number of clients reported prior involvement with the juvenile justice system.

The proportion of foster youth and non-foster youth who reported a history of legal involvement did not differ (45.86% and 42.29%, respectively; $p = .79$). Compared to youth who were not involved in foster care, a greater proportion of foster youth reported a history of involvement with the juvenile justice system. However, the proportion of foster and non-foster youth reporting any other type of legal issues did not differ.

Compared to broader samples, a somewhat smaller proportion of LifeWorks' foster youth have a history of legal involvement. Whereas 45.86% of LifeWorks' foster youth had a history of some type of legal issues, a far larger proportion of foster youth from the Midwest have previously been arrested (males: 79.4%, females: 56.7%).⁷⁵ In Texas, 68.0% of males and 40.5% of females who were involved with the foster care system have been arrested since leaving care.⁷⁶ Although the proportion of foster youth with a history of legal issues is alarming, these comparisons suggest that the self-sufficiency of foster youth served by LifeWorks may be less impeded by their legal histories, relative to other foster youth.

Once again, there are no precise estimates of the proportion of disconnected youth who have a history of criminal involvement. However, it appears that prevalence of arrest among adolescents and young adults has

⁷² Kessler, R. C., & Walters, E. E. (1998). Epidemiology of DSM-III-R major depression and minor depression among adolescents and young adults in the national comorbidity study. *Depression and Anxiety, 7*, 3–14.

⁷³ Substance Abuse and Mental Health Services Administration. (2014). Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD: Substance Abuse and Mental Health Services.

⁷⁴ Silenzio, V. M. B., Pena, J. B., Duberstein, P. R., Cerel, J., & Knox, K. L. (2007). Sexual orientation and risk factors for suicidal ideation and suicide attempts among adolescents and young adults. *American Journal of Public Health, 97*, 2017–2019.

⁷⁵ Courtney, M. E., Dworsky, A. L., Cusick, G. R., Havlicek, J., & Perez, A. (2007). Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 21. Chicago, IL: Chaplin Hall Center for Children.

⁷⁶ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

Table 14. History of Legal Issues, as a Function of Foster Care Status

	All Youth	Foster Youth	Non-Foster Youth	χ^2	Z
Misdemeanor Convictions	52 (15.66%)	20 (12.74%)	32 (18.29%)	$\chi^2(2, N = 332) = 1.93$	ns
Misdemeanor Charges Pending	20 (6.02%)	11 (7.01%)	9 (5.14%)	$\chi^2(2, N = 332) = .52$	ns
Felony Convictions	7 (2.11%)	5 (3.18%)	2 (1.14%)	$\chi^2(2, N = 332) = 1.69$	ns
Felony Charges Pending	7 (2.11%)	3 (1.91%)	4 (2.29%)	$\chi^2(2, N = 332) = .07$	ns
Deferred Adjudication	14 (4.22%)	5 (3.18%)	9 (5.14%)	$\chi^2(2, N = 332) = .79$	ns
Deferred Prosecution	5 (1.51%)	—	5 (2.86%)	$\chi^2(2, N = 332) = 4.56^\dagger$	ns
Juvenile Justice Arrested, no convictions	42 (12.65%)	30 (19.11%)	12 (6.86%)	$\chi^2(2, N = 332) = 11.30^{**}$	3.35
Other	20 (6.02%)	10 (6.37%)	10 (5.71%)	$\chi^2(2, N = 332) = .08$	ns
	12 (3.61%)	2 (1.27%)	10 (5.71%)	$\chi^2(2, N = 332) = 4.69^\dagger$	ns

Note. Clients could indicate that they had more than one type of legal issue. Across all youth, four clients (1.20%) did not know whether they had a history of legal involvement (1.27% of foster youth and 1.14% of non-foster youth).

$^\dagger p \leq .01$. $^{**} p < .01$.

increased over time, with an estimated 30.2% of youth reporting at least one prior arrest by age 23.⁷⁷ By comparison, 42.49% of LifeWorks non-foster youth had a history of legal issues.

Limitations of the Current Study

There are several limitations to the current study that should be taken into account. First, the data were limited to those for whom information about their history of foster care was provided. As a result, the data may not be perfectly representative of the broader population of clients served by LifeWorks. In order to address this issue, LifeWorks has since expanded the range of clients for whom this information is collected and implemented protocol to further enhance the integrity of the data.

Additionally, because these data are restricted to youth seeking services in Region 7 (primarily within Travis County), our findings may not be generalizable to broader populations of foster youth. Generally speaking, youth in Travis County have access to a range of support services that are unavailable in other parts of Texas (particularly rural communities), and clients may have already taken advantage of such programming prior to enrolling in services at LifeWorks (potentially minimizing some of the disparities that are often faced by other foster youth or disconnected youth).

The current findings are based exclusively on clients' self-reported information, collected through an interview-style intake process. Some of the information that clients were asked to provide may have required clients to recall events that took place many years ago. As a result, it is possible that the data collected from clients may have been subject to recall biases. What's more, because clients may find some of the questions included as part of the intake process to be sensitive, their responses may have been influenced by social desirability pressures as well.

⁷⁷ Brame, R., Turner, M. G., Paternoster, R., & Bushway, S. D. (2012). Cumulative prevalence of arrest from age 8 to 23 in a national sample. *Pediatrics*, 129, 21–27.

Because of sampling and methodological differences, the comparisons between LifeWorks' clients and other populations should be interpreted with caution. For instance, LifeWorks' youth self-select themselves into services, and thus these youth may naturally face more precarious situations than youth who are not seeking services. Additionally, the specific services offered by LifeWorks (e.g., Street Outreach programming) may help to explain the overrepresentation of certain risk factors in the current sample (e.g., homelessness). What's more, most prior studies involving foster youth have recruited individuals who are over the age of 18, many of whom have already navigated the tumultuous transition out of care. Because many of the foster youth served by LifeWorks are under the age of 18 and still under the care of the State, it is likely that the discrepancies observed between LifeWorks' clients and other samples of foster youth can be attributed, at least in part, to differences in age, cohort, or life stage. As discussed below, these trends highlight the need for expanding and strengthening services for transition-age youth.

Summary of Major Findings

The findings reported above are a valuable contribution to the broader literature on foster youth and disconnected youth. By comparing foster youth to a sample of at-risk youth who do not have a history of foster care, the unique needs and barriers experienced by foster youth become particularly pronounced. Notable disparities between foster youth and other at-risk youth served by LifeWorks included:

- **Educational Attainment among School-Aged Youth.** A larger proportion of school-aged foster youth had completed less than high school and were not currently enrolled in school (11.36% versus 1.39%). Relatedly, a smaller proportion of school-aged foster youth were currently enrolled in high school (40.91% versus 68.49%).
- **Employment.** A smaller proportion of foster youth were employed (26.85% versus 44.83%), and foster youth who were employed were more likely to hold part-time positions (57.50% versus 35.38%) and less likely to hold full-time positions (27.50% versus 55.38%).
- **Income.** A smaller proportion of foster youth's households earned income (22.17% versus 51.12%), and the average household income among foster youth was significantly lower (\$209.70/month versus \$1,006.60/month). Similarly, the average federal poverty level was significantly lower among foster youth (14.88% versus 60.36%).
- **Non-Cash Benefits.** A significantly smaller proportion of foster youth's households received non-cash benefits (12.26% versus 26.14%).
- **Insurance.** A substantially larger proportion of foster youth had some type of health insurance (74.26% versus 51.92%). This difference was driven largely by foster youth's access to Medicaid benefits.
- **Housing.** Foster youth's housing situations tended to be more unstable, with a greater proportion of foster youth residing in emergency shelters or staying temporarily with friends, and a smaller proportion maintaining permanent living arrangements with family members or living in subsidized or unsubsidized rentals.
- **Transitions.** Foster youth experienced significantly more custody-related transitions on average (9.96 versus 1.30), which was largely a function of CPS placements.
- **Parenthood.** A smaller proportion of foster youth were parenting a child (22.36% versus 35.47%) or had a child of their own (13.04% versus 21.18%).
- **Abuse.** A substantially larger proportion of foster youth had a history of abuse (58.95% versus 40.18%). This pattern persisted for each specific type of abuse that was examined.
- **Trauma.** A larger proportion of foster youth reported a history of trauma (43.87% versus 32.22%). For each specific type of trauma in which significant differences emerged between the two groups, foster youth were disproportionately affected.
- **Drug Abuse.** A greater proportion of foster youth reported a history of drug abuse (25.32% versus 16.16%).

- **Mental Health.** A larger percentage of foster youth reported a history of depression (58.60% versus 47.00%), suicidal ideation (38.85% versus 26.50%), mental health hospitalizations (32.47% versus 14.65%), and attempted suicide (30.41% versus 9.84%). Foster youth with a history of suicidal ideation made significantly more suicide attempts than non-foster youth (2.97 versus 0.74).
- **Juvenile Justice Involvement.** A significantly greater proportion of foster youth had been involved with the juvenile justice system (19.11% versus 6.86%).

Despite these differences, there were also a number of similarities between these two groups of clients. For instance:

- **Educational Attainment Among Youth Age 18–24.** Youth over the age of 18 did not differ with respect to their educational attainment.
- **SSI Benefits.** A similar proportion of foster youth and non-foster youth came from households receiving SSI.
- **Homelessness.** A comparable proportion of foster youth and non-foster youth resided in a place not meant for habitation.
- **Romantic Relationships.** A similar proportion of foster youth and non-foster youth were in serious dating relationships.
- **Diagnosed Disabilities.** The proportion of foster youth and non-foster youth with diagnosed disabilities did not significantly differ. A similar proportion of both groups were diagnosed with mental health disabilities.
- **Alcohol Abuse.** Foster youth and non-foster youth did not differ with respect to their history of alcohol abuse.
- **Recent Substance Abuse.** Comparable proportions of youth in both groups reported recent struggles with alcohol abuse or drug abuse.
- **Recent Mental Health Issues.** Foster youth and non-foster youth did not differ with respect to their feelings of depression at program entry or recent suicidal ideation.
- **Legal Involvement.** The proportion of youth from both groups who had a history of some type of legal involvement was comparable.

Considering these similarities and differences in tandem, a few suppositions may be made. Given that foster youth and non-foster youth between the ages of 16 and 17 differ in their educational attainment, but no meaningful differences in educational attainment are observed among older clients, it appears that foster youth are able to make significant educational strides during their early years of adulthood (e.g., through the completion of a GED program).

Additionally, the similar rates of disability diagnoses comport nicely with the comparable proportion of households receiving SSI across the two groups (even when the data are limited to youth who are the sole members of their household, there continue to be no significant differences between the groups with respect to the receipt of SSI benefits). It is possible that such findings point to the under-diagnosis of disabilities—or, at least, the underutilization of benefits among foster youth in Travis County. Indeed, 16.85% of LifeWorks' foster youth had a diagnosed disability, but only 3.30% reported that their household received SSI benefits. A greater proportion of foster youth have diagnosed disabilities relative to the general population, which may be a function of the fact that disabled children enter foster care at a higher rate than non-disabled youth, or it may be a function of the foster care experience itself.^{78,79} Alternatively, provided that the incidence of diagnosed *and* undiagnosed disabilities is comparable across both groups, it is possible that *both* foster youth and at-risk youth without a history of foster care involvement experience similar barriers when it comes to accessing and enrolling in mental health services or disability programs.

⁷⁸ Courtney, M. E., Dworsky, A. L., Cusick, G. R., Havlicek, J., & Perez, A. (2007). Midwest evaluation of the adult functioning of former foster youth: Outcomes at age 21. Chicago, IL: Chaplin Hall Center for Children.

⁷⁹ Slayter, E., & Springer, C. (2011). Child welfare-involved youth with intellectual disabilities: Pathways into and placements in foster care. *Intellectual and Developmental Disabilities*, 49, 1–13.

The similar rates of alcohol abuse observed across the two groups lends support to the notion that youth may be poor at gauging whether their alcohol consumption constitutes abuse, particularly when considered alongside the fact that both foster youth and non-foster youth reported *higher* rates of drug abuse. Approximately 34% of youth in Texas between the ages of 18–25 have engaged in binge drinking within last month, and more than 90% of the alcohol consumed by youth is in the form of binge drinking.^{80,81} Taken together, it is not surprising that alcohol is the most widely abused drug among youth in the United States.⁸² Nevertheless, the majority of youth do not consider binge drinking once or twice a week to be problematic, and such perceptions may also be driving the trends observed among youth served by LifeWorks.⁸³

Finally, when the similarities and differences observed between foster and non-foster youth at LifeWorks are considered in tandem, there appear to be some interesting implications for foster youth's employment opportunities. The foster youth served by LifeWorks appear to have several protective factors working in their favor: relative to their non-foster peers, a smaller proportion of foster youth have children; they appear to narrow the gap in their education by young adulthood; and they do not appear to be disproportionately impeded by legal issues, homelessness, disabilities, or recent behavioral health issues (although both groups appear to be in vulnerable situations across the majority of these characteristics). It is possible that the discrepancy between foster youth's and non-foster youth's employment rates may be a function of foster youth's instability during childhood or their prior abusive and traumatic experiences, suggesting a pronounced need for additional preparation for the transition to adulthood or greater access to mental health services. The implications of these findings are discussed more thoroughly in the "Policy and Program Recommendations" section below.

The comparisons between LifeWorks' clients and broader populations of foster youth and disconnected youth shed light on the unique vulnerabilities of at-risk youth in Central Texas. As discussed above (see "Limitations of the Current Study"), the comparisons between LifeWorks' clients and broader trends should be interpreted with caution, given the variations in sampling and methodology between studies. However, it appears that there may be some notable differences between the youth served by LifeWorks and broader populations of adolescents and young adults. For instance:

- **School Enrollment among Youth Age 16–17.** LifeWorks' school-aged foster youth appear to be more disconnected from educational systems than foster youth in general. In contrast, it appears that a somewhat smaller proportion of LifeWorks' non-foster youth who are school-aged are not enrolled in school, compared to the broader population of disconnected youth.
- **School Enrollment among Foster Youth Age 18–24.** It seems a smaller proportion of LifeWorks' foster youth between the ages of 18–24 are enrolled in some type of educational or training program relative to other foster youth.
- **Educational Attainment among Non-Foster Youth Age 18–24.** Non-foster youth enrolling in services at LifeWorks appear to have a lower level of education compared to disconnected youth in general.
- **Part-Time Employment among Foster Youth.** It appears that a smaller proportion of LifeWorks' foster youth are employed in part-time positions, relative to broader populations of foster youth.

⁸⁰ Substance Abuse and Mental Health Services Administration. (2015). 2013 – 2014 National Survey on Drug Use and Health: Model-based prevalence estimates (50 states and the District of Columbia). Rockville, MD: Substance Abuse and Mental Health Services Administration. Retrieved February 12, 2016, from <http://www.samhsa.gov/data/sites/default/files/NSDUHsaePercents2014.pdf>

⁸¹ Office of Juvenile Justice and Delinquency Prevention. (2005). *Drinking in America: Myths, realities, and prevention policy*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

⁸² U.S. Department of Health and Human Services. (2007). *The Surgeon General's call to action to prevent and reduce underage drinking*. Rockville, MD: U.S. Department of Health and Human Services.

⁸³ Substance Abuse and Mental Health Services Administration. (2015). 2013 – 2014 National Survey on Drug Use and Health: Model-based prevalence estimates (50 states and the District of Columbia). Rockville, MD: Substance Abuse and Mental Health Services Administration. Retrieved February 12, 2016, from <http://www.samhsa.gov/data/sites/default/files/NSDUHsaePercents2014.pdf>

- **Employment among Non-Foster Youth.** Compared to disconnected youth in general, it seems that a smaller proportion of LifeWorks' non-foster youth are unemployed as a result of their disability status, and a larger proportion are currently seeking (but possibly unable to find) employment. It also appears that a larger proportion of LifeWorks' non-foster youth are employed, compared to disconnected youth overall.
- **SSI Benefits Utilization among Foster Youth.** It seems a smaller proportion of LifeWorks' foster youth earn income or receive SSI benefits, compared to foster youth in general.
- **Poverty Levels.** A greater proportion of LifeWorks' aged-out foster youth live in poverty compared to the population of aged-out foster youth in Texas. Similarly, it seems a greater proportion of LifeWorks' non-foster youth live in poverty, compared to disconnected youth in general.
- **Non-Cash Benefits Utilization.** It appears a smaller proportion of LifeWorks' aged-out foster youth and non-foster youth receive non-cash benefits, relative to their peers.
- **Insurance.** Compared to their peers, it appears that a smaller proportion of LifeWorks' foster youth and non-foster youth have health insurance.
- **Housing Stability.** It seems LifeWorks' foster youth and non-foster youth have less stable housing situations relative to their peers.
- **Parenting Status of Foster Youth.** It appears that a smaller proportion of LifeWorks' foster youth were parenting, compared to other samples of foster youth.
- **Drug Abuse among Non-Foster Youth.** In comparison to youth in general, it seems that a somewhat greater proportion of LifeWorks' non-foster youth have a recent history of drug abuse.
- **Mental Health.** A greater proportion of LifeWorks' non-foster youth appear to suffer from mental health issues, relative to the general population (with respect to their history of depression, current feelings of depression, and suicidal ideation). Similarly, it seems a greater proportion of LifeWorks' foster youth have a history of depression compared to other samples of foster youth.
- **Legal Involvement.** It appears that a somewhat smaller proportion of the foster youth served by LifeWorks has a history of legal issues, compared to broader samples of foster youth. In contrast, it seems a larger proportion of LifeWorks' non-foster youth have a history of legal issues, relative to youth in general.

However, a number of findings that emerged for LifeWorks' youth appear to be consistent with broader trends observed among foster youth, disconnected youth, and youth in general. Specifically:

- **Educational Attainment among Foster Youth Age 18–24.** LifeWorks' foster youth between the ages of 18–24 appear to have comparable levels of education as foster youth in general.
- **Full-Time Employment among Foster Youth.** A comparable share of LifeWorks' foster youth and foster youth in general hold full-time jobs.
- **CPS-Related Transitions.** LifeWorks' aged-out foster youth experienced a comparable number of CPS-related transitions as other aged-out youth in Texas.
- **Disability Diagnoses among Foster Youth.** It seems a comparable proportion of LifeWorks' foster youth have a diagnosed disability, relative to other foster youth in Texas.
- **Drug Abuse among Foster Youth.** It appears a comparable proportion of LifeWorks' foster youth have a history of drug abuse, compared to foster youth across Texas.

Taken together, these findings help to place the unique strengths and vulnerabilities of LifeWorks' clients in context and highlight opportunities for service provision. For instance, it appears that both foster youth of all ages who enroll in services at LifeWorks are more disconnected from educational systems than foster youth in general (despite comparable levels of educational attainment observed among older foster youth). Thus, a major goal of LifeWorks' service providers should be (and is) to enroll foster youth in appropriate educational programming. In a similar vein, although a larger proportion of LifeWorks' non-foster youth who are school-aged are currently enrolled in school relative to broader samples of disconnected youth, older non-foster youth have lower levels of educational attainment. Thus, a key goal should be ensuring the continued enrollment of younger non-foster youth in educational programming to help prevent further disparities.

There also appear to be opportunities for increased benefits utilization among LifeWorks' foster youth. Specifically, although nearly 17% of foster youth have a diagnosed disability, only 3% of their households currently receive SSI. Similarly, a smaller proportion of LifeWorks' foster youth are currently insured relative to foster youth in general, suggesting these youth could benefit from assistance accessing the health benefits to which they are entitled.

The employment situations of LifeWorks' non-foster youth holds promise. Specifically, it appears that these youth are less inhibited by disabilities than other disconnected youth, and a larger proportion appears motivated to find employment. Such motivation may help to explain the higher rates of employment observed among non-foster youth at program entry, in comparison to broader populations of disconnected youth. LifeWorks aims to capitalize on these youth's abilities and desires to help them secure stable, meaningful employment.

The employment prospects for LifeWorks' foster youth also hold promise, as a smaller proportion of LifeWorks' clients report being parents or having a history of legal issues, compared to other samples of foster youth. Thus, the gap in part-time employment observed between LifeWorks' foster youth and broader samples of foster youth ought to be an addressable issue.

However, in order for youth to be successful in the workplace, the housing situations and mental health issues faced by these youth must be addressed. Both foster youth and non-foster youth served by LifeWorks experience alarmingly high rates of homelessness and housing instability, and a large proportion of these youth are contending with mental health and drug abuse issues. Although LifeWorks offers both housing and counseling services, the need far exceeds the availability of services.

Policy and Program Recommendations

The current findings highlight a number of opportunities for strengthening policies and programs targeting foster youth and other at-risk youth, particularly with respect to educational and workforce programming, low-cost housing, independent living preparation, behavioral health services, affordable childcare, legal assistance, wraparound and integrated services, and more comprehensive and consistent data collection.

Amend policies and expand programming to support youth in their pursuit of education. Youth served by LifeWorks are disproportionately disconnected from school and meaningful employment. Half of LifeWorks' foster youth between the ages of 16–17 are not enrolled in school at program entry, and over a quarter of LifeWorks' foster youth between the ages of 18–24 have not earned their high school diploma or GED and are not currently enrolled in school. Similarly, over 30% of non-foster youth in this age range have not attained this minimum level of education and are not currently enrolled in school. Across both groups, approximately 40% of youth between the ages of 18–24 have earned their high school diploma or GED but could benefit from post-secondary education or training.

Foster youth's academic progress may be impeded as a result of multiple placements. Indeed, even youth who experience a single school transition during high school are only 44% as likely to graduate as their counterparts who did not change schools.⁸⁴ Thus, efforts should be made to reduce the number of placements experienced by foster youth, or—at the very least—attempt to arrange placements that allow youth to remain continuously enrolled in the same school. School policies should be reviewed and amended in order to expedite the enrollment of foster youth in the event that a transition does occur, and the Department of Family and Protective Services (DFPS) should make additional efforts to ensure that all necessary documentation is included in youth's files to ensure a smoother enrollment process.

⁸⁴ Rumberger, R., Larson, K., Ream, R., & Palardy, G. (1999). The educational consequences of mobility for California students and schools. *PACE Policy Brief, 1*, 1–12.

Although foster youth appear to narrow the gap in their educational attainment by young adulthood (primarily through the pursuit of GEDs), a large proportion of older foster youth served by LifeWorks are not pursuing post-secondary education or training when they enroll in services. Greater emphasis should be placed on the importance of higher education or vocational training programs during transition planning in order to promote the educational pursuits of this vulnerable population, and additional efforts should be made to assist foster youth in exploring scholarship opportunities.

Young adults without a history of foster care who enroll in services at LifeWorks appear to have lower levels of education compared to the general population of disconnected youth. Although GED programming could be expanded in order to meet the educational needs of this population, the recent changes to GED testing standards call the efficacy of this approach into question. Since the overhaul of the GED in 2014, a substantially smaller number of individuals have taken the test, and the number enrolling in GED programs has concomitantly declined.⁸⁵ These issues are exacerbated in Texas, given the dynamics of the Texas Education Agency's exclusive contract with Pearson (several other states have abandoned the GED altogether in favor of adopting different equivalency tests).⁸⁶ Given the questionable sustainability of GED programming, alternative educational approaches—including those offered in Spanish—should be explored.

Explore novel approaches for helping foster youth secure meaningful employment. Overall, it appears that a smaller proportion of foster youth served by LifeWorks are employed at program entry, relative to non-foster youth served by LifeWorks. Of those who are employed, they disproportionately hold part-time positions.

Given foster youth's history of abuse and trauma, and considering their high rate of mental health issues, foster youth may have more difficulty than other at-risk youth at securing and maintaining meaningful employment. Although a national framework exists for providing job-related support to at-risk populations, the traditional employment training options offered through the Workforce Investment Act may not be an appropriate fit for this population. Instead, intensive workforce programming designed for individuals with mental health issues, such as supported employment, may be more appropriate. Supported employment services offer on-the-job training and guidance, and employment specialists serve as client advocates in the community and with employers. In line with this perspective, LifeWorks recently replaced its workforce model with the evidence-based supported employment program, Individual Placement and Support, and has seen substantial improvement in clients' employment outcomes since implementation.

Expand the availability of affordable housing options in Austin. An alarming proportion of both foster and non-foster youth served by LifeWorks have unstable housing. Over 18% of these youth were homeless when they enrolled in services, and a substantial proportion of clients reported that they had some type of temporary living arrangements (e.g., transitional living, couch-surfing, staying short-term with family members).

Recognizing that youth homelessness is a national problem, the Department of Housing and Urban Development (HUD) has adopted the goal of ending youth and family homelessness by 2020. Unfortunately, there is a severe shortage of affordable housing options in Austin. In 2014, the City of Austin's Comprehensive Housing Market Analysis found that 48,000 additional low-cost housing units are needed to meet the needs of households earning less than \$25,000 per year.⁸⁷ Many residents opt to relocate out of

⁸⁵ Turner, C., & Kamenetz, A. (2015, January 16). A 'sizable decrease' in those passing the GED. *nprED*. Retrieved February 16, 2016, from <http://www.npr.org/sections/ed/2015/01/09/375440666/a-sizable-decrease-in-those-passing-the-ged>

⁸⁶ Taboada, M. B. (2015, July 17). Texas education board seeks alternatives to GED exam. *Austin American Statesman*. Retrieved February 16, 2016, from <http://www.mystatesman.com/news/news/state-education-board-weighs-future-of-ged-exam-in/nm2QH/>

⁸⁷ BCC Research & Consulting. (2014). 2014 Comprehensive Housing Market Analysis. Retrieved February 12, 2015, from https://austintexas.gov/sites/default/files/files/NHCD/2014_Comprehensive_Housing_Market_Analysis_-_Document_reduced_for_web.pdf

Austin as a result of rising housing costs—a solution that is untenable for LifeWorks' youth, as the limited public transportation options in outlying communities would further increase disparities in their access to and utilization of services.

What's more, the Housing Choice Voucher/Section 8 program currently has more than 1,000 households on its waitlist, and further additions to the waitlist are no longer being accepted. When the Section 8 housing waitlist opened for an eight-day period in October 2015, it was the first time new pre-applications were accepted since 2006, and over 19,000 applications were submitted.⁸⁸

Although recent efforts to provide City-sponsored incentives for the development of additional affordable housing units are welcome and supported, additional steps need to be taken to ensure that youth living in poverty have access to safe and stable housing. The City of Austin—in collaboration with our local Continuum of Care, ECHO—should explore opportunities at the federal level to increase resources to increase the availability of low-cost housing options.

The lack of affordable housing in Austin is compounded by the fact that there are few transitional housing or emergency shelter options available to youth in Austin. Given the increasing price of land in Austin, efforts should be made to identify and preserve land and resources for these purposes (e.g., through initiatives such as the City of Austin's proposed land bank and affordable housing preservation strike fund). Considering the multiple barriers faced by foster youth and other at-risk youth, housing programs that incorporate case management or supportive services should be prioritized to help these youth transition to self-sufficiency.

A final consideration is that HUD's current strategy prioritizes and promotes the expansion of rapid rehousing and permanent supportive housing, despite little data on the appropriateness of such housing models with homeless youth. Additional research needs to be conducted in order to identify the best-fitting housing intervention for promoting long-term housing stability among youth populations, so that federal funds can be most effectively stewarded.

Reevaluate current approaches aimed at preparing foster youth for independent living. Current and former foster youth served by LifeWorks face an array of challenges as they navigate the transition to adulthood. Although the State has implemented new policies over the past ten years to ensure a successful transition out of care (e.g., required annual transition plan/Circle of Support meetings for foster youth over the age of 16, standardization of the transition-planning process, and the introduction of a transitional living service checklist), the current findings demonstrate that many foster youth could benefit from additional supportive or preparatory services.⁸⁹

Youth in care who are 16 or older and who are expected to remain in substitute care until the age of 18 are required to participate in the Preparation for Adult Living program and complete Independent Living Skills classes. Such training should be rigorously evaluated, and best practices should be identified in order to ensure that youth receive the skills and information necessary for living as independent adults. Additional programs could be developed to provide foster youth with on-the-job training opportunities, offer incentives for starting and maintaining a savings account, or providing follow-up consultations and support after youth leave care.⁹⁰ Further exploration and expansion of Supervised Independent Living programs is one possible solution. Considering that DFPS is experiencing a transitional period as a result of its commitment to foster care redesign, the Department (and its partners) should take advantage of this juncture to determine the best approach to preparing foster youth for adulthood.

⁸⁸ Housing Authority of the City of Austin. (2015). 2014–2015 annual report: Bringing opportunity home.

⁸⁹ White, C. R., O'Brien, K., Pecora, P. J., Kessler, R. C., Sampson, N., & Hwang, I. (2012). Texas foster care alumni technical report: Outcomes at age 23 and 24. Casey Family Programs.

⁹⁰ Ibid.

Increase access to mental health and substance abuse treatment options. A larger proportion of the population of non-foster youth served by LifeWorks report struggling with mental health issues, compared to youth in general. An even larger share of the foster youth served by LifeWorks report a history of depression, suicidal ideation, and attempted suicide. Both groups also show a need for substance abuse treatment programming (particularly for drug abuse).

Efforts should be made to expand access to at-risk youth's access to behavioral health services. Youth between the ages of 16–24 face unique barriers to accessing mental and behavioral health services in the community, as programs targeting younger children are often inappropriate for these youth, despite these youth being frequently ineligible or unprepared for adult services. This issue is particularly pronounced in Austin, where there is a severe shortage of mental and behavioral health services available to youth. Texas has fewer than half of the recommended number of child/adolescent psychiatrists for its population,⁹¹ and although it has an adequate number of other mental health providers, the surrounding communities do not. As a result, Travis County is bombarded with people from adjacent communities seeking mental health services, thereby seriously limiting local residents' ability to obtain mental health programming.⁹² Indeed, youth counseling remains one of the most frequently requested services for Central Texas, as reported by Texas 2-1-1. As a result, waiting lists for counseling services often exceed three months, and affordability remains an issue for those who are fortunate enough to access services. Programs that provide free or low-cost counseling to youth—particularly those that require proof of residency (or a declaration of homelessness)—should be preserved and expanded in order to ensure that youth in our community receive the mental health care that they need.

Many youth in need of services have histories of abuse, neglect, abandonment, homelessness, and other trauma, as evidenced by the findings reported above. Agencies should make strides to incorporate more trauma-informed policies and programs, in order to prevent retraumatizing youth who have been abused or who have experienced other emotionally scarring events.

Given the restrictions surrounding reimbursement for those receiving Medicaid and other forms of public insurance, the services available to these youth tend to be limited and of short duration.⁹³ Policies regarding Medicaid reimbursement should be reevaluated and amended in order to provide greater access to mental health services for foster youth and low-income youth.

As highlighted by the Austin/Travis County Substance Use Disorders Task Force, youth are among the most impacted by the lack of substance abuse services in Austin (although youth are currently not accounted for in the Task Force's short-term strategy). There are currently no detox facilities available for adolescents in our community, and free or low-cost recovery support services are severely lacking.⁹⁴ Steps should be taken to expand the availability of such programming, and services and facilities should be inviting to youth and young adults.

In addition to the long waiting lists and unaffordability of mental health and substance abuse programming, youth face a variety of other barriers to services, including an inability to access office locations as a result of limited transportation, office hours that do not coincide with the youth's availability, and stigmatization from peers for receiving behavioral health services, among other things. Additional funding should be made available to provide bus passes or taxi vouchers to youth who do not have access to reliable or affordable transportation. Additionally, peer supporters (i.e., trained yet relatable individuals with lived experience of

⁹¹ Children's Optimal Health. (2011). Clinical care and community supports report. <http://www.cohtx.org/wp-content/uploads/2014/01/Clinical-and-Community-Supports-full.pdf>

⁹² Cook, S. (2013). Texas healthcare transformation and quality improvement program: Regional healthcare partnership plan. <https://www.hhsc.state.tx.us/1115-docs/RHP/Plans/RHP7Plan.pdf>

⁹³ Children's Optimal Health. (2011). Clinical care and community supports report. <http://www.cohtx.org/wp-content/uploads/2014/01/Clinical-and-Community-Supports-full.pdf>

⁹⁴ Woollard and Associates. (2014). Austin/Travis County Substance Use Disorders Task Force: Key Findings, Recommendations, & 2014/2015 Action Plan. Retrieved February 12, 2016, from http://www.integralcare.org/sites/default/files/140616_short_term_plan.pdf

either mental health issues or substance abuse issues) should be more broadly recruited and utilized in order to increase the engagement and retention of youth in behavioral health services.

Develop and evaluate new models for preventing teen pregnancy. Nearly 30% of youth served by LifeWorks were parenting one or more children when they enrolled in services, and nearly 18% had at least one child of their own. Although the birth rate among adolescent females in Travis County has steadily declined over the past several years, these data highlight the need to continue efforts to reduce the rate of primary and secondary births among youth and young adults.⁹⁵ Unfortunately, many existing pregnancy prevention programs (even evidence-based programs) show inconsistent results when it comes to changing youth's sexual behaviors and attitudes. Emphasis should be placed on exploring new approaches to pregnancy prevention, and funding should be made available to develop and evaluate such programs.

Provide more options for affordable childcare. Caring for children may interfere with youth's ability to pursue their educational goals or to maintain employment, yet youth who have low levels of education or lack meaningful employment are less likely to be able to afford childcare.

Travis County currently has the most expensive childcare in Texas, with an annual childcare cost of nearly \$7,000 in 2010.⁹⁶ Although there are a few affordable childcare options available to low-income residents of Travis County, they are extremely limited. For instance, Early Head Start and Head Start, which serves children from birth to age 5, have long waitlists and are typically only available during the school year. The Child Care Subsidy program, managed by the Texas Workforce Commission, requires parents to either be employed, enrolled in school, or participating in workforce training in order to receive childcare vouchers. Finally, pre-kindergarten classes are available for low-income children who are 3 or 4 years old, but such services are not available to children under the age of 3. Funding should be expanded to support affordable childcare services, and new programs should be explored to provide greater access to childcare for young parents.

Reduce the barriers faced by youth with a history of legal issues. Over 40% of youth served by LifeWorks reported a history of legal issues. The greatest proportion of these offenses was for misdemeanors, and only a small percent were for felony violations. Nevertheless, youth with criminal records may have difficulty finding and securing meaningful employment. Agency providers should inform youth who are eligible to have their criminal records expunged or sealed of this option and help to guide youth through the process. Additionally, service providers should take a more active role in approaching potential employers and advocating for their clients who have a prior criminal history.

Considering that court-involved youth who remain jobless are at greater risk of recidivism, educational and vocational services should be expanded within the criminal justice system. If youth have the opportunity to cultivate their employment skills while confined through training, institution-based work programs, or service activities, the transition back into the community may be easier. Additional efforts could also be made to expand awareness of the barriers faced by court-involved youth upon re-entry.⁹⁷

Provide additional support for wraparound service models. Both non-profit and state-sponsored agencies serving at-risk youth should strive to provide a more comprehensive array of services to their clients that both address youth's vulnerabilities and build on their personal strengths. As evidenced by the youth served by LifeWorks, many foster youth and otherwise disconnected youth require a range of services, such as behavioral health interventions, low-barrier housing, employment programming, educational supports, and linkage to benefits. Agencies that provide a "one-stop shopping" experience to clients with multiple barriers

⁹⁵ Texas Department of State Health Services. Vital statistics annual reports, 2009–2013. Retrieved February 16, 2016, from <https://www.dshs.state.tx.us/chs/vstat/annrpts.shtm>

⁹⁶ Koenig, L., Fenimore, C., Gourgey, H., & Van Overschelde, J. P. (2011). Child Care in Travis County. E3 Alliance. Retrieved February 12, 2016, from <http://www.austintexas.gov/edims/document.cfm?id=159542>

⁹⁷ The Task Force on Employment and Training for Court-Involved Youth. (2000). Employment and Training for Court-Involved Youth. U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

can help to ensure that the full range of client needs are met, thereby minimizing the number of systems that the client must navigate and reducing the risk that certain needs go unaddressed. Within such systems, case managers and service providers must be adept at quickly identifying their clients' vulnerabilities, making the necessary linkages, and teaching clients how to recognize their needs, assess their range of options, and seek out the appropriate services, in order to promote their clients' self-sufficiency.

Establish and enforce more comprehensive data collection standards. The current study highlights the range of vulnerabilities experienced by youth receiving services at LifeWorks and speaks to the need for comprehensive assessments across all service providers. By adopting a more holistic view of clients, service providers—and state-funded Agencies—will be better able to identify client needs and referral options. In line with this notion, CPS is in the process of transitioning to a comprehensive standardized intake assessment in order to better serve their clients.⁹⁸

Such nuanced and comprehensive data will also allow for more meaningful comparisons to be made across client populations. Currently, no definitive conclusions can be drawn from the comparisons made between LifeWorks' clients and broader populations, due to differences in sampling techniques and study methodologies. Only by collecting more fine-grained data and making this information more widely available can service providers, legislators, and the general public cultivate a better understanding of the unique needs of at-risk youth in our community.

How LifeWorks Makes a Difference

LifeWorks is committed to helping at-risk youth and families become self-sufficient. By taking a holistic approach to evaluating all case management, counseling, and residential clients when they enroll in services, LifeWorks is better able to identify youth's unique strengths, vulnerabilities, and referral needs. The agency offers more than a dozen integrated services to ensure that youth have access to a range of high-quality, low-barrier, and affordable programming options, including, but not limited to:

- Youth and adult counseling,
- Short-term psychiatric services for school-aged youth and their families,
- Accredited therapeutic programming for domestic offenders,
- Life skills classes and case management for youth preparing to age out of foster care,
- GED and literacy services,
- Evidence-based supported employment services,
- Case management for teen parents,
- School-based substance abuse prevention programming,
- Street outreach and homelessness services,
- Emergency shelter services,
- Group-based and apartment-based transitional living, including programming specifically targeting young parents,
- Rapid rehousing, and
- Permanent supportive housing.

Due to the multitude and complexity of LifeWorks' array of services, its siloed funding structure, and frequent requests for collaboration and advocacy, the organization faces many challenges to prioritizing services, streamlining service delivery systems, and focusing proactive advocacy efforts. The findings outlined above provide helpful direction for the development of LifeWorks' service delivery, as well as its collaborative and advocacy efforts (for examples, see Table 15).

⁹⁸ Texas Department of Family and Protective Services. (2015). Child Protective Services business plan: Fiscal year 2016.

Table 15. Recommendations for LifeWorks' Service Delivery and Advocacy Efforts

Issue	Findings	Program/Service Delivery System	Advocacy/Collaboration
Education	Disparities in educational outcomes	Explore alternatives to GED programming to increase engagement	Strengthen advocacy within AISD for rapid enrollment and retention support
Workforce	Low rates of employment, particularly meaningful, full-time employment	Continue implementation of evidence-based supported employment programming	Develop strong relationship with the Department of Assistive and Rehabilitative Services (DARS); pursue opportunities to advocate at the state/federal level for evidence-based employment programming suitable for at-risk youth
Housing	Large proportion of youth served by LifeWorks are either homeless or unstably housed	Complete The Works II, an apartment-based housing program offering permanent supportive housing and affordable housing options	Identify collaborative and advocacy opportunities made possible by HUD's focus on ending youth and family homelessness by 2020
Transition to Independence & Adulthood	Large proportion of youth served by LifeWorks are preparing to exit the foster care system	Expand the role of case managers serving transition-age foster youth	Explore opportunities to partner with DFPS to strengthen the Preparation for Adult Living program
Substance Abuse & Mental Health	High rates of depression, suicidal ideation, suicide attempts, and substance abuse (particularly drug abuse)	Establish and expand peer support; explore avenues for "nontraditional" therapy; certify LW as a trauma-informed system of care	Pursue opportunities to broaden advocacy for the needs of at-risk youth within the mental health domain
Teen Pregnancy Prevention	High rates of early childbearing	Explore evidence-based and innovative models for prevention programming	N/A
Childcare	High proportion of young parents live in poverty	Increase the number of referrals to existing free and low-cost childcare programs	Join existing efforts to focus federal childcare funding through Workforce Solutions to young parents
Legal Assistance	High rates of involvement with the criminal justice system	Inform eligible youth of their right to have their records expunged or sealed and provide additional assistance with this process	Support local "Ban the Box" initiatives for housing and employment
Wrap-around Services	Foster youth & non-foster youth face a range of complex issues as they transition to adulthood	Standardize service planning across programs and streamline case management functions	N/A
Data Collection	Rapid identification of client needs through use of holistic assessments	Continue efforts to promote data integrity; develop a system for tracking former clients' outcomes and on-going needs (e.g., through quarterly follow-ups)	Share findings with policymakers, other agencies, and the general public; join evaluation initiatives to promote more comprehensive data collection

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Recommended Citation

Schoenfeld, E. A., & McDowell, S. (2016). Vulnerabilities and opportunities: Profiles of foster and non-foster youth served by LifeWorks. Austin, TX: Youth and Family Alliance dba LifeWorks.