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## Memo from CalYOUTH: Early Findings on the Relationship between Extended Foster Care and Youths' Outcomes at Age 19

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Support for the extended care provisions of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 was, to a large extent, based on the belief that allowing youth in foster care to remain in care past their 18th birthday would improve their outcomes as adults. Research following foster youth into adulthood has shown that they generally fare much worse than their age peers in terms of educational attainment, employment and earnings, homelessness and economic hardship, health and mental health, early pregnancy and parenting, victimization, and criminal justice system involvement (Courtney, 2009). However, in recent years the Midwest Evaluation of the Adult Functioning of Former Foster Youth (Midwest Study), which followed foster youth in Illinois, Iowa, and Wisconsin from ages 17 to 26, has helped identify potential benefits of allowing youth to remain in care past their 18th birthday. Researchers have taken advantage of the difference in policy between Illinois—which allowed young people to remain in care to their 21st birthday at the time of the study—and Iowa and Wisconsin—where youth very rarely were allowed to remain in care past the age of 18—to examine outcomes

associated with remaining in care past 18. Remaining in care has been found to be associated with greater educational attainment (Courtney & Hook, 2017), increased earnings (Hook & Courtney, 2011), delayed pregnancy (Dworsky & Courtney, 2010), delayed homelessness (Dworsky, Napolitano, & Courtney, 2013), a reduction in crime and criminal justice system involvement (Lee, Courtney, & Hook, 2012; Lee, Courtney, & Tajima, 2014), and increased involvement of noncustodial fathers with their children (Hook & Courtney, 2013).

Despite these encouraging findings, it is important to continue to examine whether extended foster care benefits young people transitioning to adulthood from care. Since the passage of the Fostering Connections Act, nearly half of the states have taken up the option of extending care to age 21 with federal financial support. States vary considerably in their implementation of extended care, so it will be important to learn whether and how between-state variation in implementation influences foster youths' outcomes. California is a particularly important place to study the relationship

between extended care and youths' outcomes, given that the state was an early adopter of the policy option and has the largest population of youth in care after age 18.

This brief provides an early look at the relationship between extended foster care and selected outcomes for youth transitioning to adulthood from care in California. Examining outcomes observed when young people participating in the California Youth Transitions to Adulthood Study (CalYOUTH) were nineteen years old, we find evidence that remaining in extended care is associated with a number of benefits for young adults.

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## Study Methods

Data used for this report come from the first and second waves of interviews with youth participating in CalYOUTH,<sup>1</sup> administrative records from California's Child Welfare Services/Case Management System (CWS/CMS), and college enrollment records from the National Student Clearinghouse (NSC).<sup>2</sup> CalYOUTH is following a group of young people who were between 16.75 and 17.75 years old and had been in the California foster care system for at least six months when they were interviewed in 2013. The original sample of youth, which is representative of the statewide foster care population that met the study eligibility criteria in 2013, was stratified by county to maximize the ability of researchers to examine between-county differences in youth outcomes. Of the 727 youth who were interviewed in 2013 at age 17 while they were still in care, 611 (84% of the baseline sample) were interviewed again in 2015 after their 19th birthday. Over three-quarters of the 19-year-olds ( $n = 477$ ; 77.3%) were in care at the time of the follow-up interview and a bit less than one-quarter ( $n = 134$ ; 23.7%) were no longer in care. Almost one-fifth of the youth who were in care at the time of the

follow-up interview ( $n = 87$ ; 18.2%) had left care at some point after the baseline interview but had returned prior to follow-up interviews.

The purpose of the study reported here was to assess the relationship between how long youth remained in care past their 18th birthday and selected outcomes that were measured at the time of our second interview with the youths. Using CWS/CMS data, we calculated the number of months that youth spent in care after their 18th birthday.<sup>3</sup> This was the primary predictor variable of interest in our analysis of the impact of extended care on young adult outcomes. The variable ranged from zero months to 25.7 months and youth had been in care an average of 14.6 months past their 18th birthday at the time of the follow-up interviews.

Table 1 shows the outcomes that we assessed when youth were 19 years old, reporting statistics on each outcome for the entire sample at follow-up. We report on two measures of educational attainment. Secondary education was based on youths' responses during the follow-up interviews regarding whether or not they had obtained a high school diploma, GED, or other secondary credential. Postsecondary educational attainment was based on college enrollment records from the National Student Clearinghouse, which were obtained in early 2016 when participants were 19 or 20 years old, and supplemented with self-report data collected during the follow-up interviews.<sup>4</sup> Our outcome variable captures whether a youth has at any time enrolled in college. We relied on self-report data collected at the follow-up interview to identify whether youth were employed and how much they had earned from employment in the prior year. To capture youths' financial assets, we asked them for the total balance they had across all checking, savings, money market,

<sup>1</sup> For a description of the methods used in the baseline CalYOUTH youth survey at age 17, see Courtney, Charles, Okpych, Napolitano, & Halsted (2014). For a description of the methods used during the follow-up interviews at age 19, see Courtney et al. (2016). Note that sample weights are applied to all analyses here to account for the stratification of the baseline sample by county.

<sup>2</sup> The NSC is a 501(c)(6) nonprofit and nongovernmental organization that provides information on enrollment status and degree records for more than 3,600 public and private US postsecondary institutions, which comprise about 98 percent of the postsecondary student body.

<sup>3</sup> For the purposes of these analyses, we coded all youth who exited care on or before their 18th birthday as having spent zero months in care after their 18th birthday (i.e., no youth were assigned negative values for time in care after reaching 18).

<sup>4</sup> At the time that the NSC data were obtained, the average age of the CalYOUTH participants was 20.2 years. Self-report data from the Wave 2 CalYOUTH interviews were used to identify youth who had entered college but did not appear in NSC data due to blocked records and colleges that do not report data to the NSC.

**Table 1.**  
**Selected CalYOUTH Participants' Outcomes at Age 19 (n = 611)**

Outcome	Outcome Measure	
Secondary education	Completed diploma, GED, other credential (n = 545) <sup>a</sup>	67.8%
Postsecondary education	Enrolled in college <sup>b</sup>	49.7%
Employment	Currently employed	31.2%
Income	Amount of income from employment previous year, Mean (SD)	\$3,455 (\$6,621)
Assets	Current balance across all accounts, Mean (SD)	\$885 (\$2,438)
Economic hardship	Number of hardships in past year <sup>c</sup> (0–6), Mean (SD)	1.2 (1.5)
Food insecurity	USDA Food Insecurity Measure <sup>d</sup>	29.3%
Homelessness	Homeless or couchsurfing since baseline interview	32.0%
Receipt of need-based public aid	Amount of CalFRESH benefits received in past year Mean (SD)	\$190 (\$635)
General health	General health rating	
	Poor/Fair	18.0%
	Good	27.3%
	Very Good	30.7%
	Excellent	24.0%
Mental health	Any mental health disorder	26.9%
Substance use disorder	Any alcohol/substance use disorder	14.1%
Social support	Total number of nominated supports (0–9), Mean (SD)	3.2 (1.4)
Pregnancy	Became pregnant/impregnated female since baseline interview	25.9%
Parental status	Had a child since baseline interview	15.5%
Criminal justice system involvement	Arrested since baseline interview	14.5%
	Convicted of a crime since baseline interview	8.3%
Victimization	Physically assaulted in past 12 months <sup>e</sup>	4.1%
	Weapon pulled or used on respondent in past 12 months <sup>f</sup>	11.3%

<sup>a</sup> Excludes youths who already earned a high school diploma, GED, or other secondary credential at the time of their baseline interview.

<sup>b</sup> Measure created from college enrollment records from the National Student Clearinghouse and from self-report at Wave 2 interviews.

<sup>c</sup> Hardships included: not enough money to buy clothing; not enough money to pay rent; evicted because of inability to pay rent or mortgage; not enough money to pay utility bills; telephone and/or TV service disconnected; and gas/electricity shut off.

<sup>d</sup> A youth was classified as food insecure if he or she answered “yes” to two of more of the following items: (1) anyone in household skipped/cut size of meals because of not enough money for food; (2) did not eat for a whole day because of not enough money for food; (3) ate less than you should because of not enough money for food; (4) did not have enough money to buy food after food didn’t last (sometimes or often); and (5) could not afford to eat balanced meals (sometimes or often).

<sup>e</sup> Youths were marked as experiencing physical assault if they reported that someone else beat them up, either with or without theft of their property.

<sup>f</sup> Youths were marked as having a weapon pulled on them if they reported that they had a gun pulled on them, were shot, had a knife pulled on them, or were stabbed.

and other investment accounts they had at the time of the interview. We assessed economic hardship using a six-item scale that captures different aspects of self-reported hardship in the 12 months prior to the follow-up interview. Food insecurity was assessed using the US Department of Agriculture's five-item self-report measure of respondents' food situation in the past 12 months, with which we characterized youth as food insecure or not food insecure. Homelessness was defined as having been homeless or having couchsurfed at any time between the baseline and follow-up interviews. A measure of the receipt of need-based public aid was based on the youth's answer to questions that captured the amount of CalFresh benefits (California's Supplemental Nutrition Assistance Program) the youth had received in the prior year.

General physical health was assessed using youths' self-report of their general health at the time of the follow-up interview. Mental health was assessed using the Mini International Neuropsychiatric Interview for Adults (MINI). Youth whose self-reported symptoms met the criteria for any of the mental health disorders we assessed were categorized as having a mental health problem at the time of follow-up. Similarly, youth who met the MINI screening criteria for substance abuse, substance dependence, alcohol abuse, or alcohol dependence were categorized as suffering from a substance use disorder.

The amount of social support available to CalYOUTH participants was assessed using questions administered during the follow-up interview from a modified version of the Social Support Network Questionnaire (Gee & Rhodes, 2007) that asked youth about the people in their social network that they could count on for emotional support, advice and guidance, and tangible support. Our measure captured the total number of supportive individuals identified by the youth, which ranged from zero to nine. We asked whether youth had become pregnant or had impregnated a female since the

baseline interview. We also asked whether the youth had parented a child since the last interview. We measured two forms of criminal justice system involvement based on youths' self-report: whether youth had reported being arrested or whether youth had reported being convicted of a crime since their baseline interview. Lastly, we measured two forms of physical victimization, including whether youth reported having been assaulted or had someone use or threaten to use a weapon against them in the prior 12 months.

In order to reduce the likelihood that associations we observed between remaining in care and later outcomes were a function of preexisting differences between youth who stay and those who leave, rather than an effect of remaining in care, we estimated multivariate statistical models that controlled for youth characteristics measured at the time of the baseline survey, before any of the youth reached age 18 and were eligible for extended care.<sup>5</sup> Our models were tailored to the nature of the outcome being assessed.<sup>6</sup> Control variables based on youths' self-reports during the baseline survey included: gender; race/ethnicity; age at the time of the baseline interview; sexual minority status; satisfaction with foster care; highest grade completed in school; ever repeated a grade; ever placed in special education; standardized reading score; total number of supportive individuals identified by the youth; ever worked for pay; general health rating; any MINI mental health disorder; any MINI alcohol/substance use disorder; ever been pregnant/impregnated a female; had a living child; a sum of self-reported criminal behaviors; and ever spent a night in jail or prison. In addition to these self-report measures of youths' preexisting risk and protective factors, we also used official CWS/CMS records on youths' prior experiences of maltreatment and their experiences while in foster care, including: urbanicity of the youth's county of placement; substantiated maltreatment prior to

<sup>5</sup> Further information on how these control variables were constructed and descriptive statistics on the measures we used are available from the authors.

<sup>6</sup> For continuous outcome measures (e.g., earnings and assets), we used ordinary least squares (OLS) regression. For dichotomous (yes/no) outcomes (e.g., currently employed; presence of a mental health disorder), we used binary logistic regression. For our measure of health status, we used ordinal logistic regression. For our count measures of economic hardship and social support, we used Poisson regression.

entering foster care (neglect, physical abuse, sexual abuse, or other maltreatment); age at entry to foster care; total number of foster care episodes; whether the youth had ever left care and later reentered; rate of placement change while in care; whether the youth had ever been placed in group care; and whether the youth had ever been placed in kinship foster care. Lastly, we controlled for the youths' age at the time of the follow-up interview to account for differences in how long after their 18th birthday the youth had been interviewed and differences between youth in the length of time between interviews.

## Findings

Table 2 shows the results of our regression models, reporting on the outcomes that were associated in a statistically significant manner ( $p < .05$ ) with the amount of time a youth was in care past their 18th birthday. For every outcome shown in Table 2, remaining in care longer is associated with better outcomes. For ease of interpretation, the table shows the estimated change in outcomes associated with an additional year in care past the 18th birthday, controlling for between-youth differences in characteristics measured at the beginning of the study before the youths reached the age of majority. Each additional year in care more than doubles the estimated odds that a youth will obtain a secondary education credential and nearly triples the estimated odds that a youth will enroll in college. An extra year in care past the 18th birthday also more than doubles the estimated odds that a youth will have financial assets. Among those youth with assets, an additional year in care increases the estimated amount of assets by over \$800. While the latter finding did not reach the traditional level of statistical significance ( $p < .05$ ), taken together, the findings suggest that remaining in care is strongly associated with having assets and that a long stay in extended care is very likely associated with at least several hundred dollars in additional assets. Each additional year in care reduces the estimated number of economic hardships a youth experiences by almost one-third. An additional year in care reduces by more than half the estimated odds that a youth becomes homeless

or couchsurfs. Remaining in care for an additional year reduces the odds of receipt of CalFresh benefits by nearly half, and among youth who received benefits, an additional year in care reduces those estimated benefits by nearly \$900. An additional year in care also halves the estimated odds that a youth will be convicted of a crime. While our findings suggest a number of benefits of extended care, we found no statistically significant associations ( $p < .05$ ) between time in care past the 18th birthday and our measures of several outcomes: employment and earnings; food insecurity; general health, mental health disorders, and substance use disorders; social support; pregnancy and parenting; arrests; and physical victimization. Importantly, none of the statistically significant relationships between remaining in care and outcomes indicate harm associated with remaining in care.

## Study Limitations

Several limitations of this study should be kept in mind. First, the findings may not apply to young people transitioning to adulthood from state care in other places—in particular, places that have implemented extended care in ways that differ significantly from California's approach. Second, while we do not observe statistically significant differences between the youth who were interviewed at baseline and those we followed up with at age 19 in the characteristics we used in our analyses, it is possible that sample loss over time was associated with unmeasured characteristics of youth in ways that bias our study findings. Third, our measures of preexisting differences between youth who stay in care and those who leave, while capturing a wide range of risk and protective factors associated with the well-being of young adults, may not have captured youth characteristics that are associated with both the length of time youth remain in care and their later outcomes. Failure to adequately measure such youth characteristics could also bias our study findings. Fourth, for some of our outcomes it is not possible to determine the temporal relationship between time in care and the event of interest. For example, it is possible that in some cases an outcome that we assessed actually precipitated a youth's exit from care (e.g., a

**Table 2.**  
**Relationship between Years in Care Past 18th Birthday and Selected Outcomes**

Outcome	Outcome Measure	n <sup>b</sup>	Type of Regression	Outcome Unit	Change in outcome from an additional year in care	
					Beta	p-value
Secondary education	Completed diploma, GED, or other credential <sup>a</sup>	545	Logistic	Odds ratio	2.25	< .001
Postsecondary education	Enrolled in college	611	Logistic	Odds ratio	2.81	< .001
Assets	Assets in any account	578	Logistic	Odds ratio	2.55	< .001
	Total assets across all accounts among youth with assets	342	OLS	Dollars	818	.078
Economic hardship	Number of hardships in past year (0–6)	605	Poisson	Relative risk ratio	0.69	< .001
Homelessness	Homeless or couchsurfing since Wave 1	611	Logistic	Odds ratio	0.42	< .001
Receipt of need-based public aid	Received any CalFRESH benefits in the past year	602	Logistic	Odds ratio	0.53	.004
	Amount of CalFresh benefits received by recipients	110	OLS	Dollars	-0.880	.003
Criminal justice system involvement	Convicted of a crime since Wave 1	576	Logistic	Odds ratio	0.48	.016

<sup>a</sup> Excludes youths who already earned a high school diploma, GED, or other secondary credential at the time of their Wave 1 interview.

<sup>b</sup> Sample sizes vary between analyses due to small amounts of missing data on some outcomes.

felony conviction that resulted in a long-term prison sentence or having a child and choosing to marry the other parent), which could confound the observed relationship between remaining in care and that outcome. Fifth, while we assessed a wide range of policy- and practice-relevant outcomes, our measures do not cover all outcomes of potential interest. Perhaps most importantly, the young people in the CalYOUTH study were 19.5 years old on average at the time of the follow-up interview, but young people can now remain in care in California until their 21st birthday. In other words, a clearer understanding of the impact of extended care on young adult outcomes will require longer-term follow up.

## Conclusion

Keeping in mind the study limitations noted above, our findings provide evidence that, midway through the extended period that the new policy allows youth to remain in care, staying in care is associated with a range of important benefits for young people. Compared to youth who left care, youth who remained in care were much more likely to obtain a secondary credential and to continue on to college. Their continuing pursuit of education does not appear to negatively influence their participation in the labor market. In terms of economic well-being, remaining in care significantly decreased

the likelihood of economic hardship, homelessness, and reliance on need-based public aid, while it increased youths' access to financial assets. Lastly, remaining in care was associated with an impressive reduction in the likelihood that youth would be convicted of a crime, an outcome that often has lifelong consequences. Importantly, we found no evidence that remaining in care increases the risk of poor outcomes for youth transitioning to adulthood from the foster care system.

At the same time, remaining in care did not appear to improve a number of other outcomes we assessed. This raises the question of why remaining in care might influence some outcomes and not others. Our analyses to date are limited in their ability to shed light on this. However, it is worth speculating about the importance of the role that extended care might play in meeting youths' basic human needs during early adulthood. Several of the outcomes where benefits of remaining in care were observed—reductions in economic hardship, homelessness, and reliance on CalFresh benefits, as well as increased financial assets—ought to be directly affected by whether or not youth have the means to pay for housing, food, and other necessities. Our study provides strong evidence that remaining in care significantly increases the likelihood that youths' basic needs will be met. Having those needs met may also allow young people who would otherwise need to drop out of school or put off college to continue their education. That continuing one's education is a means of remaining eligible for extended care—and in the process having one's basic needs met—may also explain why we observe a positive relationship between remaining in care and continuing educational attainment. It is less clear how meeting the youths' basic needs would reduce the likelihood that they would be convicted of a crime, particularly given the absence of a statistically significant relationship between remaining in care and the likelihood of arrest.

Interviews with CalYOUTH participants at age 21, after they have all exited the California foster care system, will take place later in 2017. In 2018, making use of all three waves of interviews with CalYOUTH participants, we will report on whether the early benefits of remaining

in care reported here are maintained and if other benefits emerge. Future analyses will also seek to better understand the mechanisms through which extended care assists foster youth as they transition to adulthood.

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