A fundamental tenet of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (Fostering Connections) is that allowing foster youth to remain in care past their 18th birthday would improve their outcomes as adults. One of the most significant challenges transition-age foster youth face is homelessness. Foster youth experience disproportionately higher rates of homelessness than the general population of youth, with rates ranging from 11% to 38% (Berzin, Rhodes, & Curtis, 2011; Curry & Abrams, 2015; Dworsky, Napolitano, & Courtney, 2013; Dworsky, Dillman, Dion, Coffee-Borden, & Rosenau, 2012; Pecora et al., 2005; Reilly, 2003; Shpiegel, 2016; Shpiegel & Ocasio, 2015; Stott, 2013). Some of the variation between these estimates is due to differences in study design, such as the age of the subjects, region where the study took place, time frame of the homeless episode, and the way homelessness was defined.

Several factors have been found to influence the risk of homelessness among foster youth. Some risk factors pertain to placement history, such as removal from the biological home due to child behavioral or emotional problems, running away from a foster care placement, placement instability, and residing in a group care setting (Dworsky & Courtney, 2009; Dworsky et al., 2013; Fowler, Toro, & Miles, 2009; Prince, Vidal, Okpych, & Connell, 2019; Shpiegel, 2016). Other risk factors found to increase the chances of homelessness include gender (males being more likely than females to experience homelessness), exhibiting delinquent behavior, juvenile justice system involvement, family history of criminal involvement, history of experiencing victimization, history of physical symptoms...
consistent with mental health disorders, and prior homelessness (Dworsky & Courtney, 2009; Dworsky et al., 2013; Fowler et al., 2009; Prince et al., 2019; Shpiegel, 2016). On the other hand, previous studies have also found protective factors that reduce the likelihood that foster youth become homeless. These factors include feeling very close to an adult, perceiving more social support, remaining in care into adulthood, and residing in a state with higher than average spending on housing supports allotted by the John H. Chafee Foster Care Independence Act (Dworsky & Courtney, 2010; Dworsky et al., 2013; Prince et al., 2019).

While these studies provide insight into rates and predictors of homelessness among foster youth, some gaps exist in the knowledge base. Most notably, most of the studies were conducted prior to the extension of the foster care age limit under the 2008 Fostering Connections law. Providing appropriate housing while youth are in care has been a critical component of extended foster care services. This memo investigates homelessness among foster youth in California after the implementation of extended care.

California adopted extended foster care early, relative to the rest of the country. The California Fostering Connections Act (AB12) was signed into law in 2010. Since January 1, 2012, eligible foster youth have been permitted to remain in care until their 21st birthday. A foster youth who exits after age 18 is allowed to re-enter foster care, at any time, until their 21st birthday. Since one of the functions of extending foster care is to meet basic needs of youth during the transition to adulthood, it is expected that rates of homelessness would decrease for youth who participate in extended care. An aim of this memo is to examine whether participating in extended foster care decreases the odds of experiencing homelessness among foster youth between roughly ages 17 and 21. This memo also builds on past research by examining risk and protective factors associated with homelessness among youth transitioning to adulthood from foster care.

**Study Methods**

The current memo draws on information from two data sources: three rounds of interviews with youth participating in the California Youth Transitions to Adulthood Study (CalYOUTH) and administrative data from California’s state child welfare data system. CalYOUTH includes a representative sample of adolescents in California foster care who had been in care for at least 6 months, were between the ages of 16.75 and 17.75 years old in late 2012, and were physically and mentally able to participate in the interview (see Courtney, Charles, Okpych, Napolitano, & Halsted [2014] for more details about the sampling procedures). Baseline interviews were conducted in 2013, when most respondents were 17 years old (n = 727). The second round of interviews was conducted in 2015, when most respondents were 19 years old (n = 611). The third round of interviews was completed in 2017 when most respondents were 21 years old (n = 616). For more information about the three waves of interviews, see Courtney et al. (2014), Courtney et al. (2016), and Courtney et al. (2018), respectively.

The sample for this memo includes 616 youths who participated in both the Wave 1 and Wave 3 interviews. This memo examines experiences of homelessness that occurred between participants’ first and third interviews—about a 4-year period between ages 17 and 21. During both the second and third rounds of interviews, respondents were asked about experiences of homelessness since their last CalYOUTH interview. In this memo, homelessness is defined as staying in a “homeless shelter or in a place where people were not meant to sleep because you had no place to stay” for at least one
night. We created a dichotomous variable capturing homelessness between Waves 1 and 3, which distinguished between youth who had and had not been homeless.

We used logistic regression analyses to examine factors that predicted youths’ expected likelihood of being homeless between the first and third interview waves. Our primary interest was in examining the role that youths’ time in extended foster care played in their likelihood of experiencing homelessness. Time in extended care was captured by a count of the total number of years youth had remained in foster care between their 18th birthday and their 21st birthday. This measure came from the Child Welfare Services/Case Management System (CWS/CMS), California’s administrative child welfare data system. We also used data from the third wave of interviews about the age youth reported being last in foster care to corroborate CWS/CMS data and resolve discrepancies.

We also investigated the associations between homelessness and other characteristics of the youths and their experiences. These included youths’ demographic characteristics, maltreatment history, foster care history, education, social support, perceived self-reliance, satisfaction with foster care, and other factors. Most data on these potential risk and protective factors were collected during the first round of interviews, when most youth were age 17. We obtained information on maltreatment and foster care history characteristics from CWS/CMS data. To account for age differences between youth and differences in the length of time participants could have been homeless, we added the age of each participant at their baseline interview and the length of time between their baseline and third CalYOUTH interviews as control variables in the regression models. In all of the analyses, survey weights were used to account for the sampling strategy used to select participants for the CalYOUTH Study.

Findings

Overall, almost a third of youth (30.9%) reported being homeless sometime between their first and third interviews. Using the information from the CalYOUTH interviews, we attempted identify whether youths’ first episode of homelessness occurred before age 18, and whether youth in extended care experienced homelessness while they were in extended foster care. Very few of the youth reported experiencing homelessness between our first interview and their 18th birthday.

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1 Multiple imputation was used to address missing data for predictor variables.

2 Extended foster care allows foster youth who are in care on their 18th birthday to exit and re-enter care up to age 21. For youth who had multiple episodes in care after their 18th birthday, the time in extended foster care is captured by the total time (years) they were in foster care after their 18th birthday summed across those episodes.

3 Although not the focus of this memo, CalYOUTH participants were also asked about their experience of couch surfing between the first and third interview waves. Couch surfing is defined as moving from one temporary housing arrangement provided by friends, family, or strangers to another. About 18% reported that they couch surfed but had not been homeless. However, most of the youth who said that they had been homeless reported that they had also couch surfed (86.2%). Altogether, about half of the sample (50.7%) had been homeless or couch surfed (or both) in the time between their first and third CalYOUTH interviews.

4 During follow-up interviews, CalYOUTH participants were asked about the timing of their first episode of homelessness. Very few of the homeless episodes only happened while youth were minors; among 189 youths who reported ever being homeless by age 21, 6 youths (3.2%) only experienced homelessness before turning 18, which consists of 1.0% of the full
but their reported rates of homelessness varied significantly between groups of youth distinguished by their experience with extended foster care. Among the 616 youths in our sample, 54.9% stayed in care the entire time between ages 17 and 21 (“stayers”); 11.4% left care, reentered, and remained in care until age 21 (“re-entering youth”); and 31.8% left care and never returned (“leavers”). Among the stayers, 20.1% had ever been homeless between ages 18 and 21. However, the incidence rates of homelessness were much higher for the other two groups: 45.1% for re-entering youth, and 44.7% for the leavers. From these findings, it is clear that the rates of homelessness of the re-entering group were comparable to the leavers and quite distinct from the stayers. Although we cannot tell from our data, it is reasonable to hypothesize that some—and perhaps most—of the homelessness experienced by the re-entering group was experienced after they left care. This may have been a factor in their desire to re-enter care. The remaining analyses reported in this memo do not distinguish between these three groups, but we ran sensitivity analyses to compare predictors of homelessness between stayers and re-entering youth and found no evidence that the relationships between predictors and homelessness varied between groups.

Figure 1 displays total number of days youth reported being homeless since their baseline interview. These figures include just the 189 participants who had ever been homeless between their first and third interviews. Youth who reported being homeless averaged 117 days of homelessness between their first and third interviews. Among youth who had been homeless during this time, almost a third had been homeless for a week or less within the 4-year period, while nearly a fifth reported being homeless for more than 180 days. Figure 2 presents the longest episode of homelessness youth experienced since their baseline interview. On average, the longest episode of homelessness is 77 days. More than half of the youth who had been homeless reported that their longest episode of homelessness was less than a month.

In this memo, we ran sensitivity analyses that treated those 6 youths as not experiencing homelessness. The results were substantively and statistically the same as those reported in this memo.
Figure 1. Total Number of Days Homeless between the First and Third CalYOUTH Interviews (includes only youth who had ever been homeless)

Figure 2. Longest Episode of Homelessness between the First and Third CalYOUTH Interviews (includes only youth who had ever been homeless)
Table 1 displays findings from the logistic regression analyses that examined predictors of homelessness between youths’ first and third interviews. Results are presented as odds ratios (ORs). The table only presents youth demographic characteristics and factors that were statistically significantly ($p < .05$) associated with the odds of experiencing homelessness. Factors that were also included in the model but were not statistically significant are listed at the bottom of the table. It is worth noting that after accounting for all of the other factors included in the regression model, time spent in extended foster care served as a protective factor from the likelihood of experiencing homelessness. Each year in care past age 18 reduced the odds of homelessness by about 33%.

Neither youths’ race/ethnicity nor the urbanicity of the county in which they were placed were significantly associated with the expected odds of homelessness. However, the estimated odds of homelessness were about 82% greater for males than for females. Also, youth who reported that they were not 100% heterosexual were at increased risk of being homeless compared to youth who reported that they were 100% heterosexual. Not surprisingly, the more time between youths’ first and third interviews, the more likely they were to report having been homeless.

Based on administrative records of substantiated maltreatment combined with youths’ self-reported maltreatment history from the baseline interview, we found the odds of homelessness to be about 1.9 times higher for youth with a history of neglect than for youth without a history of neglect. A few characteristics of youths’ foster care histories were associated with increased odds of homelessness.

Youth who had ever been placed in a congregate care setting before age 18 (i.e., a group home or residential treatment center) were more likely than youth who had never been placed in one of these settings to have experienced homelessness. In the baseline survey, youth were asked whether they had enough people to turn to for three types of social support: emotional support, tangible support, and advice/guidance. In the regression analyses, only tangible support was statistically significantly associated with the expected odds of homelessness. The odds of homelessness were about 44% lower for youth who reported that they had “enough” people to turn to for tangible support than for youth who had “no one” or “too few” people to turn to.

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5 There are various factors that affect length of time between interviews, such as some youth being harder to locate than others. Also, during follow-up interviews, we attempted to interview young people when they were 19 and 21 years old, respectively. Youth whose 20th and 22nd birthdays were approaching were given high-priority status. Additionally, youth who exited foster care at earlier ages were given high-priority status at follow-up interviews, as they were harder to track down. For more information about survey administration, see Courtney et al. (2014), Courtney et al. (2016), and Courtney et al. (2018), respectively.

6 In California, neglect is defined as the negligent treatment or mistreatment of a child by a parent or caregiver which may threaten the child’s health or welfare. This includes different types of neglect, such as physical, emotional, medical, educational, and environmental neglect as well as inadequate supervision. This also includes varying degrees, such as severe neglect, where a child’s health is endangered (e.g., failure to protect a child from severe malnutrition or physical harm), and general neglect, where there is no physical harm to the child (e.g., failure to provide adequate food, clothing, shelter, supervision, or medical care).
### Table 1. Abbreviated Results from a Logistic Regression Analysis of Predictors of Homelessness ($n = 616$) $^a$, $^b$

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male (reference: female)</td>
<td>1.82*</td>
</tr>
<tr>
<td>Race/ethnicity (reference: White)</td>
<td></td>
</tr>
<tr>
<td>African American</td>
<td>1.13</td>
</tr>
<tr>
<td>Multiracial</td>
<td>1.67</td>
</tr>
<tr>
<td>Hispanic</td>
<td>0.89</td>
</tr>
<tr>
<td>Asian/Pacific Islanders</td>
<td>0.43</td>
</tr>
<tr>
<td>Other</td>
<td>0.58</td>
</tr>
<tr>
<td>Age at baseline interview</td>
<td>1.04</td>
</tr>
<tr>
<td>Length of time in years between baseline and third interviews</td>
<td>3.35**</td>
</tr>
<tr>
<td>Not 100% heterosexual (reference: 100% heterosexual)</td>
<td>1.74*</td>
</tr>
<tr>
<td>County urbanicity group (reference: Rural/Suburban)</td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>1.04</td>
</tr>
<tr>
<td>Large urban</td>
<td>1.44</td>
</tr>
<tr>
<td>Los Angeles County</td>
<td>1.16</td>
</tr>
<tr>
<td>Maltreatment History</td>
<td></td>
</tr>
<tr>
<td>History of neglect</td>
<td>2.87*</td>
</tr>
<tr>
<td>Foster Care History Characteristics</td>
<td></td>
</tr>
<tr>
<td>Ever been placed in congregate care before age 18</td>
<td>1.95**</td>
</tr>
<tr>
<td>Social Support</td>
<td></td>
</tr>
<tr>
<td>Adequate tangible support</td>
<td>0.56**</td>
</tr>
<tr>
<td>Extended Foster Care</td>
<td></td>
</tr>
<tr>
<td>Years in care between age 18 and 21</td>
<td>0.67***</td>
</tr>
</tbody>
</table>

Notes: $^a$ Additional variables included in this model (coefficients not shown) that did not significantly predict homelessness: history of physical abuse; history of sexual abuse; youths’ satisfaction with their foster care experience; placement change rate before age 18; number of foster care episodes before age 18; having a high school diploma; positive screen for a mental health, substance use, or behavior disorder (conduct disorder or oppositional defiant disorder); ever been incarcerated prior to the baseline interview; and ever been pregnant or impregnated someone prior to the baseline interview.

$b$ Additional variables not included in this model that were explored in preliminary bivariate analyses and that were not found to significantly predict homelessness: caregiver background, other maltreatment types, ever ran away from a placement before age 18, ever in relative foster care, highest grade completed before the first interview, ever repeated a grade, reading proficiency score, perception of being an adult, perception of growing up faster than other youth, and willingness to stay in care past 18.
Limitations

Several limitations of this study should be kept in mind when interpreting the findings. First, we were limited in the range of variables that could be statistically controlled in our analysis of the impact of extended foster care on homelessness. This limitation could lead to biased estimates. Second, the measures of homelessness were based on youths’ recollection, which could result in inaccurate estimates or recall bias. Since questions about their experiences with homelessness are retrospective, some youth may have had a difficult time accurately recalling information about past homelessness, especially if the episodes occurred years before the interview. Recall may also have been imperfect for questions about the length and number of homeless episodes. Third, our data did not allow us to differentiate between episodes of homelessness that occurred when youth were in care versus episodes that occurred when they were out of care. Four, the grouping of counties by urbanicity may not fully capture the impact of county context on homelessness. Housing costs may vary within county group, with some counties potentially having much higher housing costs than other counties in the same group. Furthermore, this analysis only includes youth who completed both the baseline and follow-up interviews. Youth who did not participate in the third round of interviews were excluded from these analyses. Those youths may differ from the youths included in the present analyses in terms of their experiences of homelessness or risk and protective factors (or both). Finally, the findings reported here may differ for foster youth in other states due to differences in the demographic composition of the foster youth population, characteristics of the child welfare system, housing costs, available housing options, and housing supports.

Conclusion

This memo explored the relationship between a rich set of potential risk and protective factors and the odds of homelessness among foster youth. Consistent with past studies, we found a troubling proportion of foster youth experience homelessness during the transition to adulthood. Overall, about a third of youth had ever been homeless in the roughly 4-year period between their first and third CalYOUTH interviews, or roughly between ages 17 and 21. Among youth who had been homeless, the majority reported that their total number of days of homelessness was less than 3 months within the 4-year period. Furthermore, for the majority of youth who had been homeless, their longest episode of homelessness was between 1 week and 3 months.

Consistent with previous studies, males were found to be more likely than females to experience homelessness. Given the consistency of this finding, more research is needed to clarify why males appear to be at greater risk. Nearly a quarter (23.4%) of CalYOUTH participants identified themselves as not being 100% heterosexual. The results of our regression analyses suggest that, as they transition to adulthood, sexual minority youth in foster care have a greater risk of homelessness than their peers. Commonly cited reasons among LGBTQ youth for becoming homeless include family rejection because of sexual orientation and being forced out of their home by their family after disclosing their sexual orientation (Durso & Gates, 2018). In the Wave 3 interviews, youth who participated in EFC were asked if they had ever been homeless while they were in care after their 18th birthday, and 18.9% said that they had been homeless at some point while in care (Courtney et al., 2018). We do not have information on the circumstances of homelessness that occurred while youth were in care, such as whether it resulted from youth leaving or being forced out of their placement while in extended care, college dorm closings, inadequate housing, or other reasons.
Homeless LGBTQ youth face obstacles to finding shelters that accept and respect them and are often at a heightened risk of experiencing violence, abuse, and exploitation, compared to their heterosexual peers (Durso & Gates, 2012). Child welfare departments should pay attention to whether LGBTQ foster youth have access to housing arrangements that will respect their sexuality and personal identity. Child welfare workers and service providers should recognize the special needs of LGBTQ foster youth and build inclusive service environments where all youth feel safe and welcome.

Our findings suggest that, all else being equal, youth who have a history of being neglected by their caregivers before age 18 are at increased risk of homelessness compared to youth who have not experienced neglect. We did not find statistically significant associations between other forms of maltreatment and the expected odds of homelessness. Our data do not explain how a history of neglect increases the risk of homelessness, but our findings should encourage professionals working with young adults in care to consider how experiencing neglect during childhood might affect a young person’s access to stable housing. For example, a history of neglect may indicate that youth are less able to rely on family support, including having a place to stay, when they leave care. Alternatively, neglect may impair the ability of youth to form and maintain supportive relationships with peers and adults who can provide them with tangible support, including housing, as they transition to adulthood. Unpacking the nature of relationships between distinct forms of child maltreatment and later homelessness requires further study, given that research findings regarding such relationships remain mixed (Ferguson, 2009; Thrane, Hoyt, Whitbeck, & Yoder, 2006; Tyler, Johnson, & Brownridge, 2007).

We also found a history of placement in congregate care to increase the odds of homelessness. About half of the youth in the sample had been placed in congregate care at some point before age 18. Group homes and residential treatment placements often serve youth whose needs surpass the capacity of traditional family foster care, but are not acute enough to warrant inpatient hospitalization (Child Welfare League of America, 2004). On the one hand, congregate care experience could interfere with youths’ ability to establish stable and supportive relationships with caregivers who could be sources of informal support to help them achieve stable housing. On the other hand, youth who were in congregate care settings as minors may have physical or behavioral health needs (or both) not captured by our measures, making them more vulnerable to housing instability and homelessness. While we statistically controlled for various underlying risk characteristics (e.g., frequent placement changes; history of running away; mental health, substance use, and behavior problems; and incarceration history), an increased risk of homelessness was still present for youth with congregate care placement histories.

Our results also suggest that having enough people to turn to for tangible support buffers youth against the risk of homelessness. In the survey, tangible support included individuals “who can lend or give something the youth needed.” People who can be relied on for material support (e.g., lending money) or practical assistance (e.g., giving the youth a ride) may also come through if youth find themselves in a situation where they might become homeless. One implication for child welfare departments is helping youth to identify and strengthen relationships with individuals who can be relied on for tangible support.

Finally, staying in care after age 18 was found to decrease the odds of homelessness between ages 17 and 21, a finding of considerable relevance for
policy and practice. Each additional year a youth spent in extended care reduced the estimated odds of homelessness by about 33%. Importantly, this finding remained statistically significant ($p < .001$) after accounting for a wide range of risk and protective factors that could be associated with remaining in extended care and homelessness. These findings contribute to the mounting evidence of a positive association between extended care participation and reduced risk of homelessness (Dworsky & Courtney, 2010; Courtney & Okpych, 2017; Prince et al., 2019). States should consider this evidence if they have yet to take up the option, offered under the Fostering Connections Act, of extending the end of eligibility for foster care from age 18 to 21. Professionals working with youth approaching the age of majority in states that have extended care should fully inform youth of the resources that remaining in care can provide them, including support in obtaining and maintaining stable housing. Future research on the relationship between extended care and homelessness should focus on developing a better understanding of how extended care reduces risk for homelessness. In particular, as new living arrangements that recognize young adults’ developmental needs are created under extended foster care, research is needed to assess the utilization and effectiveness of different housing options in terms of preventing homelessness. Transitional housing programs that target older foster youth who are believed to be at increased risk of homelessness should be assessed in particular. Studies are also needed to determine whether extra time in care is associated with the risk of homelessness after youth celebrate their 21st birthday.

References


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