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Care and Connections

Bridging Relational Gaps for Foster Youths

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Executive Summary

Young people leaving foster care face a number of disadvantages, ranging from low levels of education and employment, a high prevalence of mental health disorders, involvement in the juvenile justice, and high teen pregnancy rates. Significant efforts are made by policymakers at all levels to improve educational, social and economic outcomes for this at-risk group, but with mixed results.

Research suggests that healthy and supportive relationships improve life chances for foster youth. But so far there have been relatively few attempts to build these insights into programs and practice. In 2011, the Administration for Children and Families, Children’s Bureau, funded four projects in different parts of the United States. Each provided services to help foster youths build and use relational skills in order to develop healthy and safe connections with others, and so improve their outcomes, including emotional well-being, permanency, occupational attainment, and educational attainment.

Even though preliminary findings from the projects with results at the time of this publication revealed mixed results, some projects found promising outcomes (i.e., increasing levels of connectedness reported by youths, increasing career readiness, and occupational attainment) that could be evaluated using more rigorous research methods. We explore the steep challenges of both implementing and evaluating relationship-based interventions in child welfare. We also present implications and recommendations for practitioners and researchers interested in increasing relational capacities for foster youths.

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Background

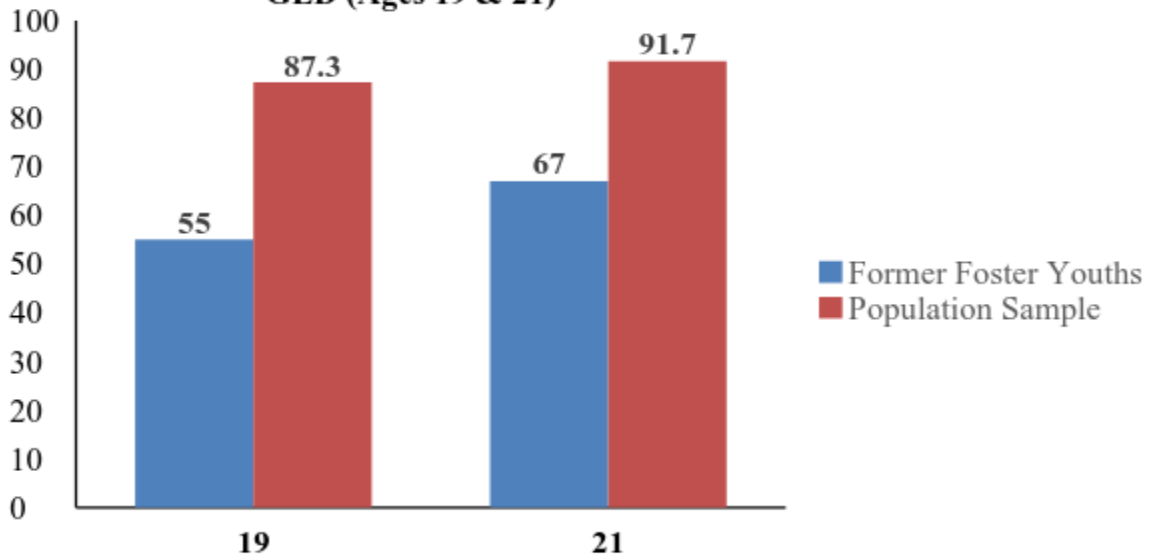
In the United States, more than 20,000 youths “age out” of foster care each year, usually at the age of 18¹. For many of these youths, leaving foster care is an exciting and liberating opportunity. It represents a rite of passage in which they are expected to become successful and independent adults. The reality, however, is quite bleak. Only 55% of former foster youths report having a high school or GED by the time they turn 19, compared with 87% of their peers in the population sample. Differences in educational attainment persist at the age of 21 (67% compared to 91.7%). One in four of these youths become parents by the age of 21—compared to 6.6 % of their peers. Former foster youths also report lower levels of employment, about 33% report being employed (full or part-time) at the age of 19 as compared with 44.7% for the population sample and 52% at age 21 compared with 62% of the population sample (Figures 1 to 3)². Moreover, foster youths are more likely to become homeless, be diagnosed with mental health disorders, suffer from substance abuse, and become involved in the juvenile justice system.

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Cover image from <http://rhey.jsi.com/diverse-youth/>.

¹ Adoption and Foster Care Analysis and Reporting System (AFCARS) 2015. Note: Twenty-four states have extended foster care services to young adults past the age of 18.

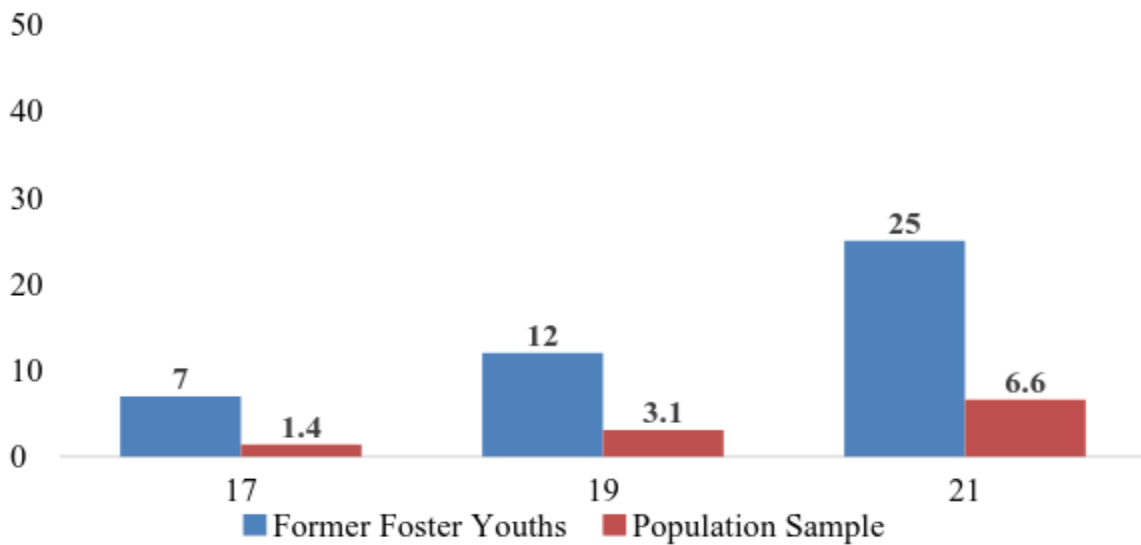
² *Note:* Data on former foster youth were collected using three cohorts: 2011 (17 years old), 2013 (19), and 2015 (21). To align data with those of the general population we retrieved percentages from ACS databases based on the year relevant to each cohort. Further, samples of foster youths and the general population are comparable with respect to gender; however, African-American youths are overrepresented in child welfare. A descriptive analysis on outcomes of interest suggests that observed differences in the general population are not driven by racial components.

Figure 1. Percentage of Youths with a High School Diploma or GED (Ages 19 & 21)



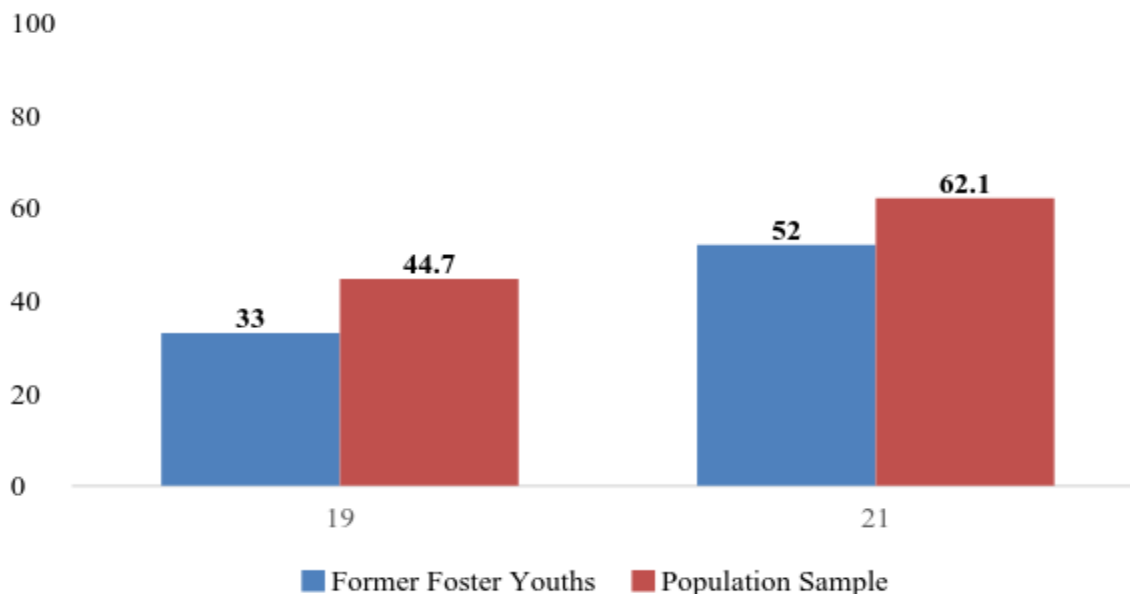
Source: National Youth in Transition Database, Data Brief #5 (2016)
ACS (2013 2015)

Figure 2. Percentage of Youths With Children



Source: National Youth in Transition Database, Data Brief #5 (2016)
ACS (2011 2013 2015)

Figure 3. Percentage of Employed Young Adults



Source: National Youth in Transition Database, Data Brief #5 (2016)
ACS (2013-2015)

Why do foster youths tend to do so poorly relative to their peers? There is no easy answer to this question. Many foster youths are at high-risk due to ruptured, unsafe, and unhealthy family structures that led them to be in the child welfare system in the first place. From the moment foster youths enter the system, they are at a disadvantage. They enter the system with a relational deficit—by not being able to see the parents, relatives, and friends they once had. This lack of relational capacities might prevent some foster youths from developing relationships and strong connections as protective factors. Protective relationships are essential to any youth not only foster youths. Relational deficiencies are often perpetuated in foster care due to the lack of supportive and consistent adults that can better prepare foster youth to transition into adulthood.

Over the past years, there has been an increased interest in the implementation of services designed to help foster youths improve their support system through relationship building interventions. Recent data from a sample of former foster youths revealed that the majority of them reported having at least one adult in their life to whom they can go for advice or emotional support³. This is an encouraging finding; however, instead of simply tallying the number of “supportive” adults, it is important to assess these youths’ abilities to sustain and forge new relationships. Even if “care-leavers” report having an adult in their life with whom they can talk to, research suggests that they may not actually reach to them for concrete or emotional support.⁴ The questions we need to ask are: How easy is for you to reach out for help? How comfortable do you feel opening up when you talk to others? How easy or difficult do you find maintaining close and trusting relationships?

Why Relationships Matter?

Relationships are important. They help us navigate complex environments such as college or the workplace. Young adults are able to develop and sustain relationships through skills they acquired or modeled based on interactions they had growing up. Unfortunately, many foster youths do not experience these positive interactions; as a result, many of them have

³ NYTD, *Data Brief #5 (2016)*

⁴ G.M. Samuels and J.M. Pryce “*What Doesn’t Kill You Makes You Stronger*”: *Survivalist Self-Reliance As Resilience And Risk Among Young Adults Aging out of Foster Care (2008)*; Mark E. Courtney et al. *Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at age 26. (2011)*

underdeveloped relationship-building skills which deprives them of healthy and meaningful relationships as they exit foster care.

One solution may lie in positive youth development (PYD) programs which engage youths in multi-level systems (i.e., family, schools, and communities) in order to create positive experiences and build positive relationships. Youths who have strong parental and nonparental relationships with other adults are more likely to avoid teen pregnancy⁵ and increase college participation⁶. Former foster youths can also benefit from having strong relationship skills as they explore new career opportunities. Evidence shows that former foster youths with low levels of support are less likely to find a job and are more likely to report lower wages⁷.

Teaching relationship building skills to foster youths may help to heal ruptured relationships and perhaps create and nurture new ones. There is, however, limited evidence on interventions that focus on relationship building skills and their impact on foster youths' well-being.

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⁵ R. Blum & P. Rinehard, *Reducing the Risk: Connections That Make A Difference in the Lives Of Youths*. Minneapolis, MN: Center for Adolescent Health and Development, University of Minnesota. (1998); B. Miller, *Families Matter: A Research Synthesis Of Family Influences On Adolescent Pregnancy*. Washington, DC: National Campaign to Prevent Teen Pregnancy (1998); M. Resnick et al., *Protecting Adolescents from harm: Findings from the National Longitudinal Study on Adolescent Health*. Journal of the American Medical Association 278 (10), 823-832 (1997)

⁶ Jean B. Grossman & A. Johnson, *Assessing the effectiveness of mentoring programs*. In: Grossman JB, ed. *Contemporary Issues in Mentoring*. Philadelphia, PA: Public/Private Ventures, (1999).

⁷ Jennifer L. Hook and Mark E. Courtney, *Employment of Former Foster Youth as Young Adults: Evidence from the Midwest Study*. (2010)

A New Generation of Programs to Build Relationships

In 2011, the Administration for Children and Families, Children’s Bureau funded four innovative interventions that aimed to increase relationship-building skills for youths transitioning out of foster care: the *DREAMR Project* in Clark County, Nevada; *Connections Project* in San Diego, California; *Adult Connections*, in Chicago, Illinois; and *Work Wonders*, in Providence, Rhode Island. These programs included new service approaches and aimed to improve outcomes including: occupational attainment, permanence (e.g., having at least one supportive adult) emotional well-being, and teen pregnancy prevention. All of this put relationship building skills front and center. These programs used different interventions for foster youths; and were all required to use a rigorous evaluation design to determine the effects (if any) of the services provided. All the programs intended to use a randomized controlled trial (RCT). However, due to a high attrition rate and/or low enrollment, two of the four programs opted out of the RCT design and instead follow trends and outcomes of program participants using pre and post measures, but with no comparison group. The DREAMR Project in Clark County, Nevada, and the Adult Connections Project in Chicago continued to carry out the RCT design until to completion. Table 1 describes in more detail the services and components of each program, including an overview of preliminary findings.

Table 1. List of Grantees--Improving Services Delivery to Youth in the Child Welfare System

Program	Location	Intervention Elements	Outputs	Findings Overview
DREAMR Project	Clark County Department of Family Services, Las Vegas, NV	<ul style="list-style-type: none"> • 3-5-7 Model™ • Mentor from Big Brothers Big Sisters • Reproductive Health Class i.e., Be Proud! Be Responsible! • Parenting classes (for teenage parents in foster care) 	<ul style="list-style-type: none"> • Improve relational competency • Improve psychological well-being • Prevent teen pregnancies 	There were no significant differences between control and treatment participants.
Connections Project[†]	YMCA of San Diego County, San Diego, CA	<ul style="list-style-type: none"> • Adapted Dialectical Behavioral Therapy (DBT) • Motivational Interviewing (MI) • Harm Reduction (HR) • Well-being classes (focus on skill building in mindfulness, distress tolerance, emotional regulation, and interpersonal effectiveness) 	<ul style="list-style-type: none"> • Improve relational competency • Improve emotion regulation skills and well-being • Mitigate high-risk activities 	Outcomes show improvements in the quality and quantity of relationships, resiliency, social conduct, emotion expression, and impulse control. Decreases in high-risk activities were observed.
Work Wonders Program	Foster Forward, East Providence, RI	<ul style="list-style-type: none"> • Peer supported career-readiness training • One-to-one job coaching • On-site job training 	<ul style="list-style-type: none"> • Increase occupational attainment • Increase career readiness • Increase youths' self-determination and self-efficacy 	Successful increasing youth employment, improving youth career readiness, increasing youth self-determination and self-efficacy, and having a major impact on preparing young adults in care for careers
Adult Connections	Children's Home Aid Society of Illinois, Chicago, IL	<ul style="list-style-type: none"> • One-to-one mentor • Job skills training • Paid internship 	<ul style="list-style-type: none"> • Improve emotional well-being • Increase job readiness • Increase occupational attainment 	Pending

*Findings emerged from a formative evaluation. No control group.

Case Study: The DREAMR Project

The DREAMR (Determined, Responsible and Empowered Adolescents Mentoring Relationships) Project consisted of a multifaceted program serving current and former foster youths ages 12-21. Project participants received a range of services that including: a mentor (from Big Brothers Big Sisters), a youth specialist (DREAMR worker), a sex education class, a cellphone to maintain contact with service providers, and for those youths who were pregnant and/or parenting, a class that taught them parenting techniques and stress-relief strategies. All services, with the exception of the sex education class (which consisted of three 2-hour sessions), were provided throughout a year.

In order to evaluate program impact, participants were assigned to control and treatment groups using cluster randomization. Data collection occurred at three points: at baseline (within the first 30 days of enrollment), after 6 months, and after 12 months of project involvement. Study recruitment occurred between October 2012 and September 2015. During these three years, the project experienced a number of challenges such as staff turnover in both child welfare agency leadership and project staff. Problems contacting youth participants also impeded service delivery.

A total of 121 participants were part of the RCT sample (79 in treatment and 42 in a control group). Youths in the sample were diverse in terms of gender and race; about 60% identified as female, and approximately 40% identified as male. About half of the sample (51.2%) were White and 36.4% were Black/non-Hispanic. About 27% of the sample reported being Hispanic. About half of participants in the randomized group lived in foster care

with an average stay of 2,060 days, and an average of 12.5 placements since they first entered the system. (see Table 2).

Table 2

RCT Sample (n = 121)

Gender	Percent	Living Arrangements	Percent
Female	60.3	Foster Home	46.6
Male	39.7	Parents	16.5
		Relatives	18.4
Age (average)	15.2	Group Home	8.7
Race*		Independent Living	3.9
African-American	36.4	Other	4.9
White	51.2	Length in Care	2060 days
Mixed	10.8	Average number of placements since entering foster care	12.5
Asian	1.7		
Ethnicity			
Hispanic	26.4		
Non-Hispanic	66.9		
Missing	6.7		

**Totals may not equal the sum of the parts due to rounding error.
Source: The Lincy Institute. University of Nevada, Las Vegas*

The key outcome measures for the project were: emotional well-being; knowledge of reproductive health; and relational skills. Because of the small number of participants who completed the project, the data analysis consisted principally of a comparison of mean scores in the treatment and control groups over time, that is, at baseline, 6 months, and 12 months. There were no statistically significant differences at any point in time on any of the scales used to track outcomes for DREAMR participants (see Table 3).

Table 3. Overview of DREAMR Findings: Mean Analyses Between Treatment and Control Groups at Different Times (Baseline, 6 months, and 12 months)*

Dependent Variable	F	P-value
Positive Relationships with Others ^a	.610	.547
Purpose in Life ^b	.52	.949
Depression Scale ^c	.984	.380
Stress Scale ^d	.424	.657

Notes:

*** = 1%; ** = 5%; * = 10%.

^aThe Positive Relationship With Others subscale is a mean to 14 survey statements in which the respondent is asked to rate his/her ability to establish quality ties with others.

^bThe Purpose In in Life subscale is a mean to fourteen survey statements in which the respondent is asked to rate his/her perceived sense of directedness and objectives for life.

^cThe Depression scale is a mean of 20 survey statements that asks participants if they have experienced any depression symptoms 7 days prior to survey completion.

^dThe Stress scale is a mean of 10 survey statements that asks participants about their perceived stress experienced 30 days prior to survey completion.

* The full findings from the DREAMR project are in preparation for submission to academic journals.

The DREAMR research team also conducted a series of focus groups and satisfaction assessments to gauge participants’ views of the services they were receiving. On average, DREAMR participants showed high level of satisfaction with their involvement in the DREAMR Project. One salient theme in these interviews was the relationship-building element of the services. One participant stated,

“I was closer to [my mentor and youth specialist] than I am with my foster parents and we've been with [our foster parents] for like 8 years... so, I can open up to them more than I can [with] my foster parents.”
(DREAMR youth)

Another DREAMR youth talked about her constant struggle connecting with other adults and how her involvement in the project helped her,

"I was like still really scared to really open up to my foster parents, I was like, you know, "who are you, get away from me", you know? But you know, with [my youth specialist and mentor] it was like, completely different, they were there to actually listen. And not just, "oh, whatever, you're just another person in our house", you know? Or another person who I'm dealing with, you know...because being small, being beat around by your mom, 24/7, you know, it's like, you learn to be "get away from me", you know, and not wanting to express yourself" (DREAMR youth)

Another youth talked about how the project helped him open up to others. He said,

"I mean it's not hard to tell, I have some anti-social issues every so often and uh, I mean.... I got to talk to somebody who'd help me open up, at least emotionally a little bit more, you know... [the project] gave me someone to talk to, it was an emotional outlet."(DREAMR Youth)

Two projects moved away from their original RCT design and turned instead to descriptive analyses of process and implementation, in order to deepen understanding of the challenges of running these programs, and to highlight potentially promising interventions that could be evaluated in the future with more rigorous research methods. Youth participants across the three programs did show improvements after the interventions. For instance, foster youths reported a higher level of connectedness, improvements in career readiness, more self-efficacy, and overall higher emotional well-being. But in the absence of a control group, it is not possible to attribute these changes to the interventions themselves. Nonetheless, the analyses from these

programs provide useful information and important benchmarks for relationship-based interventions in child welfare.

The DREAMR project, which kept its original RCT research design, found no significant differences between control and treatment participants across the various outcomes used to track participant progress. Given the small sample size and high overall attrition rate, these findings do not necessarily mean that DREAMR services did not work; it could have been limited statistical power that led to inconclusive results.

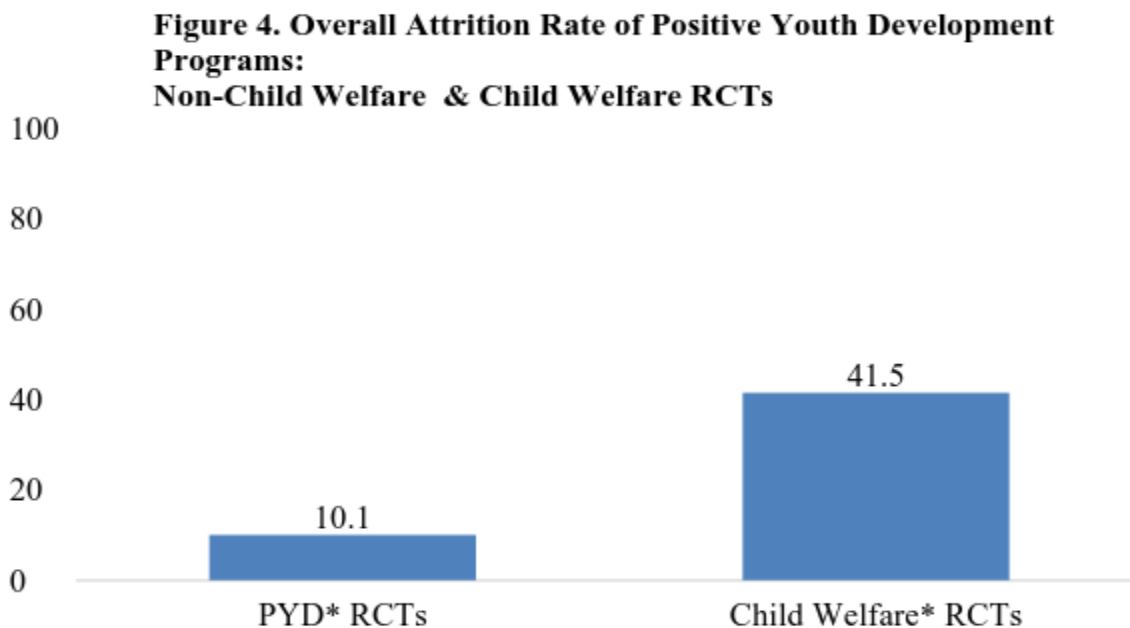
Delivering services to such a transient and vulnerable population is inevitably challenging. When it comes to foster youths and relationship building skills, there is no quick fix; and certainly not a “one-size-fits-all” intervention that can address this matter. Relationship-based interventions are likely to need a level of flexibility in order to meet the needs of each youth.

In the following sections, we discuss the implications of these results for research and practice in terms of helping foster youth build relational skills. We then offer some concluding thoughts.

Implications for Research

In social science research, using RCTs has become the norm as it represents the most reliable type of research design. But RCTs are hard to successfully conduct in child welfare, as the experience of three out of four of these projects shows. In particular, high attrition rates were a common challenge across some projects.

As seen in Figure 4, the average overall attrition rate for the four projects was 42 percent. By comparison, the overall attrition rate of four positive youth development programs applied outside of child welfare settings had an average overall attrition rate of 10 percent⁸.



This gap highlights the difficulty of retaining foster youth in programs at the rates necessary to conduct rigorous research. For other groups, it is easier to remain in contact with participants, for example in school settings. Attrition is one of many challenges in conducting RCTs with such a vulnerable group. As a Children’s Bureau report documents, obstacles such as

⁸ The PYD programs are: All Stars, Big Brothers Big Sisters, Teen Outreach, and Developmental Mentoring program. Source: Ciocanel, O., Power, K., Eriksen, A., & Gillings, K. (2017). Effectiveness of Positive Youth Development Interventions: A Meta-Analysis of Randomized Controlled Trials. *Journal of Youth & Adolescence*, 46(3), 483-504. doi:10.1007/s10964-016-0555-6

staff turnover, legal protocols, and organizational configurations can all stand in the way of both successful implementation and, relatedly, rigorous research.⁹

The inconclusiveness of the findings from the three projects with available results highlights the challenges of employing high-quality research in child welfare. Relationship-building skills can help foster youths to navigate the difficult journey to becoming an adult; however, measuring the effectiveness of relationship-based interventions is problematic. Because of the complexities that exist in child welfare, government officials, researchers, and program developers should be wary of using RCTs as the initial method—especially when evaluating innovative services or measuring “soft” intangible outcomes like connectedness and relational skills.

Instead, researchers and policymakers should consider a step-by-step approach. The PII (permanency innovations initiative) approach delineates a sustainable and practical way for evaluating interventions through gradual processes¹⁰. For instance, if the budget allows, program implementers should have an initial implementation phase in order to identify and mitigate implementation challenges. Subsequent steps should include a formative evaluation that will help correct or adjust service delivery before moving to full implementation of the intervention with an RCT. This gradual research design will help interventionists and researchers produce reliable outcomes.

⁹ James Bell Associates. (2013). *Evaluation Brief: Conducting Randomized Controlled Trials in Child Welfare Practice Settings*. Arlington, VA: Author. (2013).

¹⁰ *PII Approach Brief: Building Implementation and Evaluation Capacity in Child Welfare* (2014).

Implications for *Practice*

While it is clear that more evidence on relationship-based interventions is needed, it is also clear that first, such evidence is hard to generate and second, that there are nonetheless some lessons here for practice. Four stand out:

- 1) Child welfare agencies should collect data that will not only inform practitioners about the number of “supportive” adults reported by youths but also measure youths’ relational capacities. This push should come from child welfare officials at various levels (i.e., local, state, and federal) that will educate front-line workers about the importance of measuring progress and outcomes for youths in foster care, particularly as it relates to their relational needs. Practitioners are saturated with high demands from their caseloads, and relationship-based work might fall low on their priority list. However, we think that by omitting relational deficiencies registered among foster youths, child welfare professionals could miss out a big piece of information that will help them contextualize the needs of the population they serve.
- 2) Multiplying the number of service providers may be counter-productive. Given the transient nature of the living conditions of foster youths, it is important to design relationship-based interventions with care. One challenge perhaps underestimated by the planning committee of the DREAMR Project and the other three projects is that foster youths already have a large group of professionals

working with them on a day-to-day basis. Adding two or three additional service providers to this group of professionals can overwhelm youth participants. Future interventions could address this issue by consolidating services and minimizing the number of people delivering them.

- 3) Relationship-based interventions should seek to tailor services to the unique needs of each youth. The Search Institute, an organization that for almost 50 years has developed and promoted positive youth development approaches has established a framework for building relationship skills among young people, with five key elements: i.e., express care, challenge growth, provide support, share power, and expand possibilities¹¹. Child welfare leaders interested in developing relationship-based programs could use this type of framework to select or develop appropriate interventions.
- 4) An important lesson from the DREAMR Project is the need to get the buy-in of all pertinent parties i.e., caregivers, caseworkers, biological parents (if applicable), perhaps even the attorneys involved in the youth's case. Having the support of all these people can ensure proper implementation of the intervention. This is easier said than done. The steering committee in the DREAMR project can attest to the difficulties in engaging foster parents in relationship-focused interventions. In most cases, caregivers understand the value of these

¹¹ Eugene Roehlkepartain, Kent Pekel, Amy Syversten, Jenna Sethi, Theresa Sulliva, & Peter Scales. *Relationships First: Creating Connections that Help Young People Thrive*. The Search Institute. (2017)

interventions but do not have the time to take part in services. The DREAMR team experienced similar results when engaging caseworkers. Still, it is crucial and necessary to come up with engagement strategies that can include *non-traditional* partners in order to help foster youths reinforce and practice their relationship skills in different environments. Currently, there are some efforts that target caregivers like the CHAMPS (Children Need Amazing Parents) initiative, which focuses on improving the well-being of foster children by increasing the quality of foster parents¹². One of the main goals of this initiative is to recognize the vital role that foster parents play in the lives of foster youths by adjusting state and federal policies in order to ensure the support they need. Indeed, the success of any program working with foster youths will be highly determined by the presence of strong relationships, not only from program providers but of all people involved in the youth's life.

Conclusion

The Fostering Connections to Success and Increasing Adoptions Act of 2008 emphasized the goal of finding permanent family placements for foster youths, in part by widening the connections available to them. Given the negative impact of instability and change, this is indeed an important policy objective. But increasing the number of connections and relationships is unlikely to work unless foster youths have the skills to benefit from them. Helping foster youths

¹² Ron Haskins, *A National Campaign to Improve Foster Care*. The Brookings Institution. (2017)

develop relational skills necessary for strong and positive interactions with others underpins efforts to improve outcomes across a range of areas, including in education, employment, and family formation.

Today, then, one of the most pressing questions related to well-being is how we help foster youths to develop relationship building skills. The body of research from this most recent five-year federal demonstration cluster provides a road map to those researchers, practitioners and policymakers who are seeking to answer that vital question. The stakes remain high.

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