



DIVISION X
TECHNICAL ASSISTANCE



Capacity Building
CENTER FOR STATES

Rethinking Service Array for Young People Transitioning From Child Welfare

Data from the [Adoption and Foster Care Analysis and Reporting System \(AFCARS\)](#) and the [Midwest Study](#) show that youth and young adults who exit care without a permanent family are at greater risk than their same-age peers for many negative outcomes such as unemployment, lower incomes, housing instability, poorer health, criminal justice involvement, lower educational attainment, less access to health insurance, and higher reliance on public assistance programs (Child Welfare Information Gateway, 2019; Mares, 2010).

This publication offers considerations for redesigning the child welfare service array to meet the needs of youth and young adults currently and formerly in foster care, focusing on topics such as housing, healthcare and mental health, substance use treatment, and education. The resource reflects lessons learned during the COVID-19 pandemic and in the course of implementing the provisions of Division X in states and jurisdictions. Each section discusses:

- Current challenges for youth and young adults in each area of service array
- The structure and programs of current service array
- Jurisdictional and community examples of service provision
- Strategies for young people and agency staff to partner to effect improvements
- Resources for Tribal child welfare agencies

Use the attached worksheet in partnership with youth and young adults to identify existing service challenges or barriers and cocreate ideas for how services can better meet the needs of youth and young adults as they transition to adulthood.

The strategies offered throughout this resource are informed by lived experts. The input of lived experience and expertise has been augmented by examples, research, and other information.

The Consolidated Appropriations Act of 2021 (P.L. 116-260) was enacted in December 2020 in response to the COVID-19 pandemic and resulting public health emergency. **Division X** of the Act, “Supporting Foster Youth and Families through the Pandemic,” included funding for child welfare programs and required agencies to take actions to protect and support youth and young adults currently or formerly in foster care.

Read This To:

Learn about the challenges youth and young adults currently and formerly in foster care face in obtaining services related to housing, healthcare, mental health services, substance use disorder treatment, and postsecondary education

Explore strategies to help young people and agency staff collaborate in developing a more responsive, youth-serving service array

Sections include:

- [What Does a Youth-Focused Service Array Look Like?](#)
- [Housing](#)
- [Healthcare and Mental Health](#)
- [Substance Use Disorder Treatment](#)
- [Postsecondary Education](#)
- [Appendix: Service Array Assessment Worksheet](#)

What Does a Youth-Focused Service Array Look Like?

Child welfare systems have historically focused on providing services to children that ensure their safety and well-being. While many of its principles may also apply to working with young people, a youth-focused service array should be structured to respond to the unique needs of youth and young adults, especially those who are transitioning out of the child welfare system (Center for States, 2018).

The following parameters for developing a youth-focused service array are adapted from [*Embracing a Youth Welfare System: A Guide to Capacity Building*](#).

An authentically youth-focused service array is:

Proactive

- Young people participate in dialogue and share decision-making power.
- Self-confidence is encouraged.
- Assessments are based on relationships and trust between young people and caseworkers.
- Well-being is focused on normalcy as well as physical and mental health.
- Collaborative practice is the norm, not the exception.

Driven by Youth and Young People

- Connections with biological family are driven by the young person.
- Youth voice is primary in decision-making and case planning.
- Young people have choices in most or all areas of their lives.

Normalcy Focused

- Emphasis on protection is relaxed to focus on normalcy.
- In addition to safety, organizations encourage young people to take on developmentally appropriate challenges.
- All care is individualized, and services are aligned with needs.

Looking to the Future

- Young people are able to access services and case planning that will benefit them in the future.
- Agencies and other organizations actively work with youth and young adults to prepare them for adulthood.

These parameters inform the strategies for young people and child welfare agencies that are highlighted throughout.

Housing

Helping youth and young adults over age 18 or aging out of the foster care system access affordable, safe housing is a critical part of helping them transition to adulthood. Unfortunately, providing an adequate array of housing services has long been a challenge for child welfare agencies. There are many complex, interwoven reasons why access to affordable housing is a challenge for youth and young adults, as well as for the agencies that serve them, including (Urban Institute, 2018):

- Shortage of subsidized, affordable, and safe housing
- Rise of market value for housing
- Reluctance from landlords to rent to young people
- Poor cross-system communication between child welfare and other public-serving systems (e.g., public housing agencies)
- Inadequate income and assets (lack of sustainability)
- Inability to obtain appropriate housing and living support for those with mental health challenges
- Resource access in rural areas

Conversations with young people with lived experience revealed additional challenges, including a lack of access or speedy enough access for young people in extended foster care to housing vouchers such as Family Unification Program and Foster Youth to Independence; lack of a family safety net; and possible existence of a juvenile delinquency or criminal record.

Child welfare data collected by the Children's Bureau confirm the housing-related challenges that youth and young adults face. For example, according to data collected in 2016 by the National Youth in Transition Database (NYTD), 17 percent of young people aged 17 had experienced homelessness at some point in their lives. Twenty percent of young people aged 19 reported having been homeless at some point within the past 2 years; of these, 79 percent were no longer in foster care (NYTD, 2017). The COVID-19 pandemic has only exacerbated these trends (American Bar Association, 2021).

Federal Programs

A number of federal programs can support the housing needs of youth and young adults exiting foster care, including (Congressional Research Service, 2021):

- Extended Federal Foster Care
- [John H. Chafee Foster Care Program for Successful Transition to Adulthood](#) (up to 30 percent of the total state funds can be used toward room and board for youth who were in foster care at age 18 and older)
- [Education and Training Voucher \(ETV\) Program](#) (requires recipient to be enrolled in a postsecondary education program)

The following additional federal programs also offer housing support for eligible young people:

- [Family Unification Program \(FUP\) vouchers](#) (U.S. Department of Housing and Urban Development [HUD])
- [Public Housing](#) and [Section 8 Housing Choice Voucher](#) Program (HUD)
- [Foster Youth to Independence voucher](#) (HUD)
- [Transitional Living Program](#), administered by the Family and Youth Services Bureau, an office within the Administration for Children and Families

These are designed to provide young people exiting from care with varying levels of resources to obtain affordable housing.

State and Local Housing Programs: Examples

A variety of state, local, Tribal, and community organizations sometimes work with federal programs to address the housing needs of youth and young adults. For example, Virginia's [Project Life](#) offers housing information and resources to help youth and young adults formerly in foster care gain access to affordable housing. Other states take a more direct approach to providing housing for former foster youth. For example, [California's Transitional Housing Program-Plus](#) is a transitional housing program for young adults who exited foster care on or after their 18th birthday and are not yet 24 years of age (25 in counties that have opted to extend services). The program provides youth and young adults with an opportunity to live in housing in the community while getting support from a team of individuals that assists them with independent living skills.

In many locales, community-based or private organizations often take the lead in providing housing services, whether to youth and young adults formerly in foster care exclusively or to young people as a whole (HUD, 2014). For example, Walden Family Services is a nationally recognized foster care, adoption, and youth services agency that supports birth, foster, and adoptive families and the community in caring for children and youth—many who have physical or developmental disabilities or behavioral or mental health challenges; who identify as LGBTQIA2S+; or who are part of large sibling groups. The agency offers eligible youth and young adults the opportunity to participate in a [Transitional Housing Placement + Foster Care Program](#) that offers skill-building and resources they will need to be able to live on their own after aging out of the system.

Some states and Tribes are partnering with local organizations to support youth and young adults in their communities. For example, the Delaware Department of Services for Children, Youth, and Their Families, in partnership with West End Neighborhood House, offers the [Life Lines Program](#), which serves youth and young adults who are underserved, including those in the LGBTQIA2S+ community, unaccompanied youth, parenting youth, those with mental health needs and experiencing substance abuse challenges, and those who are emancipated or facing judicial challenges. The program is mindful of being inclusive and supportive to all young people and provides transitional housing and permanent housing options for their young people. The program centers youth voice and works to provide education support, substance use disorder treatment access, and transitional support and to expand young peoples' social and support networks.

A number of community organizations work to ensure that LGBTQIA2S+ young people get access to information and resources, including those related to housing. Among all youth experiencing homelessness, an estimated 20 to 45 percent identify as LGBTQIA2S+ and 3 percent of unaccompanied youth up to age 25 identify as transgender or gender diverse. As a result, this population faces special challenges around accessing safe and stable housing both in foster care and after aging out of the system (National Network For Youth, n.d.).

One organization that puts LGBTQIA2S+ young people at the center of its mission, the [Ruth Ellis Center](#) in Michigan, promotes a trauma-informed, strengths-based service model to support LGBTQIA2S+ youth at risk of homelessness. At their drop-in centers, the organization offers LGBTQIA2S+ youth trainings, information, and supports around many different topic areas, including safe and stable housing, safe sex practices, gender-affirming hormone therapy, substance use treatment, and many other important topics. Other programs like Mozaic (a project of Equitas Health) use similar drop-in centers to prioritize youth learning around these topic areas and provide health services and other community supports.

Agencies, youth, and young adults can use the following strategies to begin to address and transform access to safe, affordable housing for youth and young people aging out of care in a post-COVID world.

Strategies for Child Welfare Agencies to Develop Housing Services for Youth and Young Adults Aging Out of the System

These strategies, which were provided by young people with lived experience and expertise, can help child welfare agencies consider how to improve housing services available to youth and young adults in their system:

- Use administrative data to inform need and type of housing services offered.
- Partner with young people early to plan a realistic transition for housing services.
- Collaborate with community providers to provide case management and other services.
- Partner regularly with young people to ensure that resources provided meet identified needs.
- Work with housing mitigation programs for rental support.
- Partner with local and state housing authorities to identify affordable housing and settle disputes.
- Collaborate with existing community organizations to support housing services for youth and young adults.
- Organize symposia, outreach campaigns, and websites to inform young people of the housing resources available.
- Consider how available housing models can properly support youth with special developmental needs.
- Blend state, federal, city, and county resources with funds from private donors (as allowable).
- Ensure that treatment-based models are being used and are providing trauma-informed care (e.g., Housing First, Sanctuary).
- Make sure that housing support is based on a foundation of respect, consistency, and equal coverage for those being served.

What Would Help Young People and Child Welfare Agencies to Partner Around Housing Services?

These strategies, which were provided by young people with lived experience and expertise, can help young people and child welfare agencies work together to develop a more responsive and supportive array of housing services:

- Hire peer navigators to assist youth and young adults with obtaining support and resources for affordable, safe housing.
- Work to identify and remove barriers to housing access, such as by removing credit checks, expunging juvenile records, providing access to and education about banking and other financial services, and educating landlords in the community.
- Ensure that practical education about housing resources is part of every young person's transition plan. Educate staff to provide support in this area.

Tribal Resources

States are responsible for serving American Indian/Alaska Native (AI/AN) children and youth in their jurisdictions. However, it is essential to consider federal requirements as well as how equity is infused in one's program. The following resources can assist states and Tribal child welfare agencies and AI/AN youth and young adults with developing housing services for young people. Depending on each particular Tribal nation's federal status, access to housing resources can be Tribe-limited or may have federal assistance. As a result, not all Tribes have access to the same housing resources or the same amount of funding provided to them.

- [HUD Office of Native American Programs](#) (CodeTalk)

This online resource offers links to a number of housing programs and resources for Tribes and individuals.

- [Indian Child Welfare Act Housing Improvement Program](#)

The Housing Improvement Program is a home repair, renovation, replacement, and new housing grant program administered by the Bureau of Indian Affairs and federally recognized Indian Tribes for AI/AN individuals and families who have no immediate resource for standard housing.

Healthcare and Mental Health

Youth and young adults transitioning out of foster care face a unique set of complex challenges on their path to adulthood that is too often compounded by unmet physical, mental, and medical health needs. Young people who aged out of foster care are more likely than their peers to report having a health condition that limits their daily activities (Congressional Research Service, 2019). The 2010 Affordable Care Act does provide a mandated eligibility pathway for Medicaid that became effective in 2014 for youth and young adults formerly in foster care to receive Medicaid until their 26th birthday. This coverage is similar to that of other young adults with no foster care connection who are able to remain on their parents' healthcare plans until age 26. Young people formerly in foster care are eligible for their state's full Medicaid coverage, regardless of their income and whether the state where they live opted to cover or declined to expand Medicaid coverage under the "adult group."

Studies indicate that for many young people currently and formerly in foster care, many health and mental health issues continue to persist and that—relative to their peers in the general population—children who leave foster care for adoption and those who age out of care continue to have greater health and mental health needs (Child Welfare Information Gateway, 2021; Congressional Research Service, 2014). Certain disparities in conditions and treatment for children and young people in foster care persist, compared with those not in foster care:

- Young people in foster care are significantly much more likely to have conditions such as asthma; obesity; speech, hearing, and vision problems; attention-deficit/hyperactivity disorder; anxiety; behavioral problems; depression; and other health and mental health issues (Turney & Wildeman, 2016).
- Young people in foster care have significantly more hospitalizations and subspecialty office visits than children not in foster care and higher healthcare charges on average (\$14,372 versus \$7,082) (Bennett et al., 2020).
- Children and young people in foster care have higher rates of dental problems, and one-third of children in care have not had a dental visit in the past year (Finlayson et al., 2018).
- In 2018, only 54 percent of noninstitutionalized youth who were enrolled in Medicaid or the Children's Health Insurance Program (CHIP) and who experienced a major depressive episode received mental health treatment (Medicaid and CHIP Payment and Access Commission, 2021).

The following barriers prevent access to mental health care and healthcare access that may lead to health disparities for foster youth:

- Poor cross-system communication between child welfare and other public-serving systems (e.g., Medicaid)
- Challenges obtaining critical documentation (e.g., vaccination records, medical or medical procedure records, birth certificate)
- Inadequate physical and mental health screening for youth entering, during, and while exiting care
- Failure to reach out and enroll youth into federal healthcare (including mental health care) coverage plans

COVID-19 added an unprecedented layer of stress for communities, families, youth, and young people. According to the Surgeon General's Youth Mental Health advisory, even before the COVID-19 pandemic mental health challenges were the leading cause of disability and poor life outcomes in young people, with up to one in five children ages 3 to 17 in the United States having a reported mental, emotional, developmental, or behavioral disorder. In 2016, of the 7.7 million children with a treatable mental health disorder, about half did not receive adequate treatment. Youth and young adults with preexisting mental and physical health conditions aging out of care were put at imminent risk of COVID-19 exposure, remained

uninsured, and received fewer resources and support due to systemic inequalities and a strained health and child welfare system.

COVID-19 disproportionately impacted LGBTQIA2S+ young people. According to The Trevor Project National Survey, 70 percent of LGBTQIA2S+ youth stated that their mental health was “poor” most of the time or always during COVID-19. (The Trevor Project, 2021). Furthermore, 48 percent of LGBTQIA2S+ youth reported they wanted counseling from a mental health professional but were unable to receive it in the past year.

Federal Laws and Programs

Over the years the federal government has invested in the healthcare and mental health care of older youth and young adults in foster care by implementing the following legislation:

- [The Fostering Connections to Success Act](#), which requires states to develop a plan for ongoing oversight and coordination of healthcare services for all young people
- [John H. Chafee Foster Care Program for Successful Transition to Adulthood](#), which expands Medicaid coverage to young people formerly in foster care until their 21st birthday (referred to as the Chafee Option)
- Former Foster Youth Category under the [Affordable Care Act](#), which requires that states allow youth who age out of foster care to access medical insurance until their 26th birthday
- [The Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities \(SUPPORT\) Act](#), which allows Medicaid funds to be used for inpatient mental health treatment for up to 30 days and offers medical practitioners greater flexibility in the provision of medication-assisted treatment for substance use disorder
- [Medicaid](#), which provides coverage to those that meet the income requirements

State and Local Programs

By leveraging federal policies, several state and Tribal child welfare agencies have implemented innovative programs and services to identify and address the healthcare and mental health needs of youth and young adults. For example, in Georgia, children and youth have a care coordinator and receive access to tailored healthcare and mental health services for their unique needs, such as clinical trauma screening, wellness visits, and preventive services. Additional services include a dental cleaning twice a year; free, unlimited over-the-counter items; and general education development. Both Texas and Wisconsin give children and youth access to a specialized medical home where they have timely access to comprehensive health and mental health services for coordinated care. Texas offers small cash grants for personal items (e.g., art supplies, clothing), reward dollars for completing preventive services, and other age-appropriate rewards when a member goes to their 7-day follow-up after a psychiatric hospital discharge for accessing preventive services. In Wisconsin, the state offers youth and young adults access to additional benefits, including dedicated care coordinators, transition healthcare plans, and Early and Periodic Screening, Diagnostic, and Treatment exams at an enhanced frequency.

Agencies, youth, and young adults can use the following strategies to begin to address and transform the pathway to healthcare and mental health care for youth and young people aging out of care in a post-COVID world.

Strategies for Child Welfare Agencies to Support Access to Healthcare and Mental Health Services for Youth and Young Adults Aging Out of the System

These strategies, which were provided by young people with lived experience and expertise, should be considered to support the accessibility of mental health and healthcare services for youth and young adults in the child welfare system:

- Collaborate with the state Medicaid agency to support healthcare and mental health services that young people need and ensure procedures, services, and requirements use best practices and approaches for serving youth and young adults.
- Work to support the documentation requirements for accessing services.
- If this isn't already part of your agency's mental health program, partner with peer navigators with lived experience to develop outreach and education efforts to youth and young adults about how to enroll and recertify in their state as well as their potential eligibility and support youth in maintaining coverage.
- Organize symposia, outreach campaigns, and websites to inform young people of available mental health care and healthcare coverage and available providers.
- Provide coordinated entry for youth and young adults to auto-enroll and recertify annually.
- Ensure age flexibility in service access.
- Ensure that coverage includes dental and vision, mental health care, and reproductive, sexual health, and gender-affirming services and care.
- Ensure transferability of care across states for young people transitioning from foster care.
- Consider how available housing models can properly support young people with special developmental needs.
- Make sure treatment models and healthcare and mental health supports provided under Medicaid are equitable, culturally inclusive, and trauma-informed for all youth and young adults.

Strategies for Young People and Child Welfare Agencies to Partner Around Healthcare and Mental Health Services

These strategies, which were provided by young people with lived experience and expertise, can help young people and child welfare agencies work together to develop more responsive, culturally appropriate, and accessible healthcare and mental health services:

- Ensure healthcare and mental health care coverage are emphasized in transition planning (as necessitated by federal requirements), including by providing a detailed understanding of how services are interlinked and the availability of providers in the area.
- Work closely with a healthcare and mental health care team of state Medicaid representatives, child welfare staff, youth, foster parents, and kinship caregivers to improve care for young people in foster care (as required by federal law).
- Encourage child welfare staff, stakeholders, and medical providers to participate in ongoing training to expand their understanding of policies, programs, and eligibility for mental health and healthcare services to improve timely access for youth and young adults in foster care.
- Hire, train, and support peer navigators with lived experience (or enhance existing support) to conduct outreach and education efforts to young people on healthcare enrollment, recertification, and how to find medical and mental healthcare providers.

- Advocate and ensure that state and federal programs provide transferability of care across states and healthcare and mental healthcare until age 26 (part of the SUPPORT Act starting on January 1, 2023, though the legacy population isn't covered).
- Ensure treatment models, healthcare, and mental health supports and facilities under Medicaid are equitable, culturally inclusive, and trauma-informed for all youth and young adults.
- Develop local or state websites to inform young people of their healthcare coverage and allow them to search available providers and store and access vital documents.
- Design integrated care models to partner with community-based organizations on healthcare access and federal programs to improve access to mental and medical health coverage with auto-enroll processes (e.g., setting up one place where a young person can have their healthcare and mental health care needs met).

Tribal Resources

Accessing adequate healthcare and mental health care is a struggle for families and young people across reservations. By any measure, healthcare for Native Americans lags behind other groups, despite a legal obligation on the part of the United States to provide healthcare to some members of AI/AN Tribes (Smith, 2018). Health outcomes for Native Americans are adversely impacted by inadequate access to comprehensive health services. For example, according to the Centers for Disease Control, AI/AN young people have very high rates of Type 1 and 2 diabetes among people younger than 20 years old. AI/AN youth are 50 percent more likely than non-Hispanic Whites to be overweight (Tribal Health Reform Resource Center, 2016). Despite these challenges, many in the AI/AN community cannot get their basic healthcare needs met or obtain preventive care.

It is important that members of AI/AN communities have the opportunity to access cultural practices for healing from trauma, grief, and loss. For many, the basis of health and mental health is the balance of the creation and the universe; health and mental health challenges occur when there are disruptions to that balance. Restoring balance and wellness through Indigenous healing lifeways is the focus of the following webinar series:

- [Indigenous Healing: We Are All Connected](#) (1 of 3)
- [Indigenous Healing: Individual and Family Healing](#) (2 of 3)
- [Community and Organizational Healing](#) (3 of 3)

The historical trauma that resulted from numerous federal policies has had a direct impact on the health of Native Americans. The video below examines the historical and cultural factors that have an impact on the health of American Indian families and identifies potential solutions for achieving health equity:

- [Impact of Unresolved Trauma on American Indian Health Equity](#)

The following additional resources provide Tribal child welfare agencies with information about healthcare and mental health services for young people:

- [DEI: Health coverage for American Indians & Alaska Natives](#)
This resource offers information about healthcare benefits available to AI/AN populations.
- [Celebrating Our Magic: Resources for American Indian/Alaska Native Transgender and Two Spirit Youth, Their Relatives and Families, and Their Healthcare Providers](#)
This toolkit offers resources and information about access to healthcare for Native transgender and Two Spirit youth facing barriers to accessing healthcare and their families.

Substance Use Disorder Treatment

Youth and young adults in and transitioning from foster care are at significant risk for substance use disorder. This is because transitions, relationships, and self-esteem issues can be stressful factors for young people exiting foster care. Research also shows that risk of substance use disorder is highest during transition periods and periods of emotional or physical turmoil. As risk factors accumulate and go unaddressed, a youth in foster care is more likely to suffer from mental illness or substance use disorder (Havlicek et al., 2013).

Research highlights the significant disparity in substance use and behavioral and mental health issues among youth and young adults who have experienced foster care versus those who have not (CASA, n.d.). Often, if young people have no one to turn to, substance use may serve as a coping tool to help escape the emotional and physical realities they face both in and when transitioning from foster care. Some of the factors that may lead to substance use (which may disproportionately affect youth and young adults currently and formerly in foster care) include (Child Welfare Information Gateway, 2020):

- Family history of substance use disorder
- Domestic violence
- Mental health challenges
- Family rejection of sexual orientation or gender identity
- Childhood sexual abuse
- Low academic performance
- Association with peers who use substances or have a history of delinquent behaviors
- Lack of family support and network

Youth and young adults currently and formerly in foster care need timely, individualized substance use disorder prevention and treatment to mitigate the prevalence and effects of substance use disorder in this population.

Treatment and Support

Access to substance use disorder treatment remains a critical barrier for young people seeking support for substance use. The Substance Abuse and Mental Health Services Administration (SAMHSA) noted that one of the main challenges to obtaining treatment for young people is the lack of facilities that offer programs (especially nonresidential programs) tailored for them. In fact, results from the 2018 National Survey of Substance Abuse Treatment Services found that only 25 percent of facilities offered such programs (SAMHSA, 2019). An earlier survey had found that only 48 percent of facilities even accepted youth clients (SAMHSA, 2014). Programs that are tailored to and meaningful for young people are crucial for positive treatment outcomes because youth and adults have different treatment needs. For example, youth tend to use different substances than adults—e.g., many more youth receive treatment for marijuana use than alcohol, but it is the opposite for adults (National Institute on Drug Abuse, 2014). Programs focused on treating adults may also miss the distinction between recreational or experimental use of substances (which is more common in young people) and diagnosis of substance use disorder.

Federal Programs

The cost of substance use disorder treatment can be high and can keep some people from seeking the treatment they need. This is especially true for youth and young people currently or formerly in foster care, as they often have access to fewer resources than their peers not in foster care. Several federal programs and laws offer or mandate some coverage for substance use treatment, including:

- [Medicare](#) and [Medicaid](#)
- [Substance Use Treatment for Veterans](#) (U.S. Department of Veterans Affairs)
- [The Affordable Care Act](#)
- [The SUPPORT Act](#)

There do not seem to be federal programs specific to funding substance use disorder treatment for youth and young people, but the SAMHSA website offers a 24-hour helpline and a [Behavioral Health Treatment services locator](#) (find more information at www.samhsa.gov).

Programs and Treatment Options

A number of evidence-based prevention programs have shown positive results for decreasing substance use in youth. For example, [LifeSkills Training](#) is a program that targets the major social and psychological factors that promote beginning substance use and other risky behaviors among middle school-age youth. It teaches youth active skills to resist peer pressure, cope with anxiety, and develop greater self-esteem. Another evidence-based program, [Project Towards No Drug Abuse](#), targets high school-age youth to teach them better coping skills for difficult situations they may encounter. [KEEP SAFE](#) is a more general family-based prevention program designed to address problem behaviors, including substance use, in youth in foster care by improving the caregiving environment and improving youth-caregiver relationships.

The following additional resources offer information about substance use treatment approaches for youth (Child Welfare Information Gateway, 2020):

- [Treating Youth Substance Use: Evidence Based Practices & Their Clinical Significance](#) (University of Washington Alcohol and Drug Abuse Institute)
- [Behavioral Health Treatment Services Locator](#) (SAMHSA)
- [Program Search](#) (Blueprints for Healthy Youth Development)

It is important that all substance use disorder programs, including those for youth and young people, be culturally appropriate, which can help with patient engagement, attendance, and provider relationships (Child Welfare Information Gateway, 2020). For more information and resources, visit [The Georgetown University National Center for Cultural Competence](#) webpage and the [National Network to Eliminate Disparities in Behavioral Health Innovative Interventions](#) webpage.

Agencies, youth, and young adults can use the following strategies to begin to address and transform access to substance use disorder treatment for young people currently and formerly in foster care.

Strategies for Treatment, Support, Recovery, and Prevention for Foster Youth

These strategies, which were provided by young people with lived experience and expertise, can help child welfare agencies consider how to improve substance use prevention and treatment services available to youth and young adults in their system (National Institute on Drug Abuse, 2014):

- Tailor treatment to the unique needs of each young person and address their overall needs (e.g., physical health, housing, school, transportation).
- Ensure young people have access to behavioral therapies, which have been shown to be effective in treating youth and young adults with substance use disorder.
- Address co-occurring conditions, as many young people struggle with mental health challenges that can compound substance use.

- Ensure comprehensive recovery support. Multiple rounds of treatment may be needed, and additional supports will be necessary after treatment has been completed.
- Provide or extend prevention supports (e.g., community outreach programs and groups, education campaigns, peer support). Peer support is currently a part of substance use disorder treatment.
- Partner with existing substance use disorder treatment providers as well as other service providers such as educators, mental health professionals, juvenile justice professionals, court staff, and others who work with youth and young adults currently and formerly in foster care.

Strategies for Young People and Child Welfare Agencies to Partner Around Substance Use Treatment

These strategies, which were provided by young people with lived experience and expertise, can help young people and child welfare agencies work together to develop more responsive and user-friendly substance use disorder treatment services:

- Work together to develop a comprehensive and consistent message to support youth and young adults at risk of or already using substances.
- Extend peer programs so that young adults with personal experience in this area can better support youth and young adults who need substance use disorder treatment.
- Develop joint accountability and outcomes that link supportive and treatment services.
- Establish data- and information-sharing measures so that youth and young adults can make informed decisions about their care.
- Provide training for treatment and prevention of substance use disorder among child welfare staff and youth and young adults currently or formerly in foster care.

Tribal Services

Native American communities face significant challenges in pursuing quality substance use disorder treatment that is culturally informed and culturally sensitive. Though there is a higher level of need among AI/AN communities than for the general population, there is a distinct lack of access to treatment. For example, only 12 percent of Native adults receive needed treatment at specialized facilities (The Road, n.d.). Compared to the national average, Indigenous communities' health services also receive significantly lower funding. This lack of culturally integrated programs can often make treatment not fully helpful in addressing the core issues around substance use disorder in Native American communities.

The Indian Health Service provides recurring funding to 12 [Youth Regional Treatment Centers](#) to address the ongoing issues of substance abuse and co-occurring disorders among AI/AN youth.

The following resources offer additional information about substance abuse disorder treatment approaches among Native American communities:

- [Tapping Tribal Wisdom: Providing Collaborative Care for Native Pregnant Women With Substance Use Disorders and Their Infants](#) provides information on direct care, collaboration, coordination (Tribal collaborative structures, collaborating with county child welfare office and community-based recovery supports), and capacity building to address substance use disorders in Native American communities.
- [Resources for Healthy Generations](#) discusses the interconnection of substance abuse, child welfare, domestic violence, and historical trauma and highlights approaches to address them.

Postsecondary Education

Research indicates that children and youth in foster care are more likely than their peers to be absent from school, have special education needs, and experience traumatic life events. In turn, they are also much less likely to graduate high school and to attend or graduate from college than the general population of their peers (Moyer & Goldberg, 2019). This has been a significant concern for the last 20 years and continues to be a critical area of focus for child welfare agencies because without access to postsecondary education—whether college, trade school, certificate programs, or life skills programs—youth and young adults formerly in foster care have fewer chances to gain the skills they need to support themselves and their families going forward.

Youth and young adults exiting care often have limited access to resources about postsecondary education. Some of the resource needs and challenges include:

- Financial resources
- Information about how to complete the Free Application for Federal Student Aid (FAFSA) (e.g., meeting the deadline, knowing how to fill out the form, accessing relevant documentation)
- Information about ways to pay for college or other postsecondary training
- Knowledge about scholarships and other resources (both what is available and how to apply)
- Access to adult mentorship
- Lack of family stability
- Lack of parental support

Even when a young person formerly in care does go to college or enrolls in a training program, it can be a challenge to complete their education. Some of the challenges may include:

- Lack of campus support programs that are strength-based
- Lack of reliable housing and inability to meet basic needs
- Access to reliable and affordable technology
- Academic support (including access to college or postsecondary education readiness classes)
- Mental health services
- Availability of adult mentorship
- Limited peer support for young people currently and formerly in foster care

Federal, State, and Local Programs

Despite the challenges that exist for youth and young adults trying to access postsecondary education, there are resources and programs available that can assist them in attaining an affordable and meaningful education. For example, the Office of Planning, Research & Evaluation (OPRE), together with the Urban Institute and Chapin Hall at the University of Chicago, developed a [brief](#) that offers helpful information and considerations for obtaining a postsecondary education (OPRE, 2019). The U.S. Department of Education has also created tools such as the [College Scorecard](#) to help students and families find the college that is right for them. Other programs, such as [EveryoneOn](#), provide youth and young adults formerly in care the ability to access affordable technology such as reliable internet service, computers, and digital skills training for postsecondary education. A number of community colleges have programs in place to provide technology access to students who need it (see <https://mycollegelaptop.com/home/laptop-guide/laptops-community-college/> for more details).

Some programs work with youth and young adult students formerly in care to gain them access to resources and assist with affordable housing and additional resources as part of a university education package. For example, the [Guardian Scholars](#) at San Diego State University (SDSU) is a holistic support program serving stu-

dents who identify as current or former young people in foster care, wards of the court, under legal guardianship, or unaccompanied homeless young people by supporting their transition to, through, and beyond SDSU. Guardian Scholars offers scholarships, a year-round housing award for on- or off-campus living, priority registration, wellness coaching, a dedicated resource area, and a team of friendly staff to offer support and connection to on-campus and local resources. This program benefits SDSU students with lived experience in child welfare because it provides resources and support that they otherwise might not have been able to access to help them succeed at college.

Finally, a number of university-based programs also offer adult mentorship for youth and young adults formerly in foster care. For example, [Great Expectations](#) is a program of the Virginia Community Colleges for students who have experienced foster care. The program helps students with selecting a school, securing financial aid, and other tasks by connecting them with an adult coach and mentor who will guide them through these tasks. Not only does this program offer resources and support, it also provides a normalcy-based experience since the mentors provide the kind of assistance that parents often give their college-age children.

Agencies, youth, and young adults can use the following strategies to begin to address and transform access to postsecondary education for young people currently and formerly in foster care in a post-COVID world.

Strategies for Child Welfare Agencies to Develop Education Services for Youth and Young Adults Aging Out of the System

These strategies, which were provided by young people with lived experience and expertise, can help child welfare agencies consider how to improve education services available to youth and young adults in their system:

- Conduct outreach in communities to locate youth and young adults formerly in foster care in colleges, universities, and training programs to ensure their needs are being met.
- Ensure that young people are informed about resources available to them, including how to obtain affordable housing.
- Make sure youth and young adults are informed about federal funding, grants, and scholarships available to them for pursuing an education.
- Develop partnerships with colleges and universities to identify youth and young adults formerly in care to meet their unique needs.

Strategies for Young People and Child Welfare Agencies to Partner Around Education Services

These strategies, which were provided by young people with lived experience and expertise, can help young people and child welfare agencies work together to develop a more responsive and user-friendly array of education services:

- Collaborate with young people to ensure that they are informed about the postsecondary education options available to them and discuss which ones meet their needs.
- Develop peer mentorship programs that pair young adults formerly in foster care who have been to university or other postsecondary training with youth and young adults who are considering or starting similar training.
- Create a check-in plan to keep in touch with young adults who have aged out of the system to provide any additional support while they are in education programs.

Tribal Services

Existing federal programs provide funding to Tribes for support of young people currently and formerly in foster care. Some Tribes receive direct funding from the state or from the federal government to provide Chafee and/or ETVs to Tribal youth or young adults.

[The Bureau of Indian Education](#) (BIE) aims to provide quality education opportunities from early childhood through life in accordance with a Tribe's needs for cultural and economic well-being, in keeping with the wide diversity of Indian Tribes and Alaska Native villages that exist as distinct cultural and governmental entities. The BIE offers higher education scholarships for AI/AN students and supports funding for Tribal colleges and universities. The BIE directly operates two postsecondary institutions: the Haskell Indian Nations University in Lawrence, Kansas, and the Southwestern Indian Polytechnic Institute in Albuquerque, New Mexico.

Conclusion

Rethinking the array of services offered to youth and young people currently and formerly in foster care to meet their ongoing needs remains a challenge for child welfare agencies. This resource has explored some of the difficulties agencies face in key areas of housing, healthcare and mental health, substance use treatment, and postsecondary education and offered strategies that can help agencies partner with young people to codevelop services in these areas that can provide real benefit in their lives. The resource's appendix contains an assessment worksheet that can be used to begin the process of collaborating on this important work.

References

- American Bar Association. (2021). *Addressing the post-COVID-19 needs of young people experiencing homelessness*. https://www.americanbar.org/groups/crsj/publications/human_rights_magazine_home/empowering-youth-at-risk/addressing-the-post-covid-19-needs/
- Bennett, C. E., Wood, J. N., & Scribano, P. V. (2020). Health care utilization for children in foster care. *Academic Pediatrics*, 20, 341–347. <https://doi.org/10.1016/j.acap.2019.10.004>
- CASA. (n.d.). *Substance abuse, behavioral and mental health issues among children and youth in foster care*. <https://advocacyinaction.casaforchildren.org/well-being/substance-abuse-behavioral-and-mental-health-issues-among-children-and-youth-in-foster-care/>
- Center for States. (2018). *Embracing a youth welfare system: A guide to capacity building*. <https://capacity.childwelfare.gov/states/resources/embracing-youth-welfare-system>
- Child Welfare Information Gateway. (n.d.). *Children's Bureau timeline*. <https://www.childwelfare.gov/more-tools-resources/resources-from-childrens-bureau/timeline1/>
- Child Welfare Information Gateway. (2019). *Promoting permanency for older youth in out-of-home care*. <https://www.childwelfare.gov/pubs/bulletins-permanency/>
- Child Welfare Information Gateway. (2020). *Preventing, identifying, and treating substance use among youth in foster care*. https://www.childwelfare.gov/pubPDFs/bulletins_youthsud.pdf
- Child Welfare Information Gateway. (2022). *Health-care coverage for children and youth in foster care—and after*. https://www.childwelfare.gov/pubpdfs/health_care_foster.pdf
- Children's Bureau. (1987). *Program Instruction 87-01*. <https://www.acf.hhs.gov/sites/default/files/cb/pi8701.pdf>
- Congressional Research Service. (2021). *Housing for former foster youth: Federal support*. <https://crsreports.congress.gov/product/pdf/R/R46734>
- Congressional Research Service. (2019). *Youth transitioning from foster care: Background and federal programs*. <https://sgp.fas.org/crs/misc/RL34499.pdf>
- Congressional Research Service. (2014). *Child welfare: Health care needs of children in foster care and related federal issues*. <https://www.everycrsreport.com/reports/R42378.html>
- Finlayson, T. L., Chuang, E., Baek, J. D., & Seidman, R. (2018). Dental service utilization among children in the child welfare system. *Maternal and Child Health Journal*, 22, 753–761. <https://dx.doi.org/10.1007/s10995-018-2444-y>
- Havlicek, J., Garcia, A., & Smith, D. (2013). Mental health and substance use disorders among foster youth transitioning to adulthood: Past research and future directions. *Children and Youth Services Review*, 35(1), 194–203. <http://dx.doi.org/10.1016/j.childyouth.2012.10.003>
- Mares, A. (2010). An assessment of independent living needs among emancipating foster youth. *Child and Adolescent Social Work Journal*, 27, 79–96.
- Medicaid and CHIP Payment and Access Commission. (2021). *Report to Congress on Medicaid and CHIP*. <https://www.macpac.gov/wp-content/uploads/2021/06/June-2021-Report-to-Congresson-Medicaid-and-CHIP.pdf>
- Moyer, A. & Goldberg, A. (2019). Addressing the post-COVID-19 needs of young people experiencing homelessness. *Child and Adolescent Social Work Journal* 32(1). https://wordpress.clarku.edu/agoldberg/files/2020/04/Moyer_Goldberg-Foster-Youth-Educational-Challenges.pdf
- National Institute on Drug Abuse. (2014). *Principles of adolescent substance use disorder treatment: A research-based guide*. <https://www.drugabuse.gov/publications/principles-adolescent-substance-use-disorder-treatment-research-based-guide/acknowledgements>

- National Network For Youth. (n.d.). *Prevalence of youth homelessness and LGBTQ+ homelessness*. <https://nn4youth.org/lgbtq-homeless-youth/>
- National Youth In Transition Database. (2017). *Data brief #6: Comparing outcomes reported by young people at ages 17 and 19 in NYTD cohort 2*. https://www.acf.hhs.gov/sites/default/files/documents/cb/nytd_data_brief_6.pdf
- Office of Planning, Research, & Evaluation. (2019). *Supporting youth transitioning out of foster care – Issue brief 1: Education programs*. <https://www.acf.hhs.gov/opre/report/supporting-youth-transitioning-out-foster-care-is-sue-brief-1-education-programs>
- The Road. (n.d.). Substance abuse and Native Americans. <https://theredroad.org/issues/native-american-substance-abuse/>
- Smith, M. (2018). Native Americans: A crisis in health equity. *Human Rights Magazine* 43(3). https://www.americanbar.org/groups/crsj/publications/human_rights_magazine_home/the-state-of-health-care-in-the-united-states/native-american-crisis-in-health-equity/
- Substance Abuse and Mental Health Services Administration. (2019). National survey of substance abuse treatment services (N-SSATS): 2018: Data on substance abuse treatment facilities. <http://www.samhsa.gov/data/sites/default/files/cbhsq-reports/NSSATS-2018.pdf>
- Substance Abuse and Mental Health Services Administration. (2014). *Half of all substance abuse treatment facilities accept teen clients*. <https://www.samhsa.gov/data/sites/default/files/spot125-teen-treatment-acceptance-2014.pdf>
- The Trevor Project. (2021). *National survey on LGBTQ youth mental health 2021*. <https://www.thetrevorproject.org/survey-2021/?section=Introduction>
- Tribal Health Reform Resource Center. (2016). *NIHB Affordable Care Act toolkit for Native youth*. <https://www.nihb.org/tribalhealthreform/acayouthtoolkit2016/>
- Turney, K., & Wildeman, C. (2016). Mental and physical health of children in foster care. *Pediatrics*, 138(5). <https://doi.org/10.1542/peds.2016-1118>
- Urban Institute. (2018). *Housing for young adults in federally funded extended foster care: Best practices for states*. OPRE Report #2018-24. https://www.urban.org/sites/default/files/publication/98874/housing_young_adults_in_effc_0.pdf
- U.S. Department of Housing and Urban Development. (2014). *Housing for youth aging out of foster care*. https://www.huduser.gov/portal/publications/pdf/youth_hsg_main_report.pdf
- Wilson-Simmons, R., Dworsky, A., Tongue, D., & Hulbutta, M. (2016). *Fostering health: The Affordable Care Act, Medicaid, and youth transitioning from foster care*. https://www.nccp.org/wp-content/uploads/2016/10/text_1165.pdf

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Appendix: Service Array Assessment Worksheet

The following questions can help your agency partner with young people to assess the services available in your jurisdiction for young people transitioning out of care in the areas of housing, mental health care and healthcare, substance use treatment, and education.

Assessment Questions: Housing Services

How have young people and staff worked together to identify supports such as local, state, or federal housing agencies, higher education, community organizations, and others that can help agencies work with young people to plan for coordinated services after they transition from care?

Have young people and caseworkers worked together to create a realistic transition plan that will keep them housed the moment they transition from care?

Working in partnership, have you explored how a young person's medical, mental health, or identity needs would impact their available housing choices?

Assessment Questions: Mental Health Care and Healthcare Services

How have young people and staff worked together to identify available health and mental health supports, set up appropriate treatment, identified providers in your area, and figured out how to sustain ongoing coverage?

What strategies can you adopt to develop a continuum of care and access to continued healthcare services (e.g., partnerships with the medical field to establish medical homes)?

What innovative partnerships with community organizations have been (or can be) developed to assist young people transitioning out of care to access mental health care and healthcare (e.g., religious organizations, universities, clinics, permanent supportive housing programs, family practice health centers)?

Assessment Questions: Substance Use Disorder Treatment Services

What substance use treatment programs exist in your area that focus on youth and young adults specifically?

What partnerships have been developed and secured to provide continuous supports, resources, and services for treating substance use disorder?

Were youth and young adult voices and needs prioritized at every stage when discussing the services and supports they need to treat substance use disorder?

Have staff and young people worked together to develop a strategic plan to support young people through the process? Is it comprehensive?

Assessment Questions: Postsecondary Education

Have young people and caseworkers collaborated extensively to discuss the young person's future plans and desires and plan for the types of postsecondary education that might be needed to achieve them?

Do young people know how to apply to postsecondary education such as trade school, community college, and universities, as well as for grants and other financial aid?
