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# **Review of Policy and Practice for Youth Leaving Care**

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# FOREWARD

Dear Reader:

It is my pleasure to provide this review of data to help inform policy and program development for youth leaving state care or “aging out”. Children’s Aid Foundation of Canada commissioned this work to find evidence and provide insights to further support programs and initiatives to help improve outcomes for young people who have grown up in care. This document is intended to be introductory or supplementary to more extensive research undertaken prior to designing programs or services for youth in transition that could also include a review of work currently being done by the sector that may not be published in academic journals.

The child protection sector is filled with passionate and caring people who wish for the best futures for youth after care. This document should be read with a growth mindset. The academic literature suggests that the practice of child protection ought to evolve to exert more substantial effects on youth life outcomes to ensure children thrive in adulthood. This document is a candid look at the data available on policy and practices serving youth leaving care.

The sources rely exclusively on peer-reviewed academic journals to ensure objectivity and methodological rigour. Most studies have been published in the United States. Of the limited publications in other jurisdictions, for example Canada or United Kingdom, the consistency across findings justifies utilizing lessons learned in all studies. Ideally, provincial and territorial governments in Canada would undertake systematic studies of youth transitioning from care to best understand how to serve the unique needs of children under their legal responsibility.

The research shows that the child welfare sector could benefit from increasing evidence-based program design and rigorous impact measurement. This document seeks to provide insight that ensures limited resources are used most effectively to improve the lives of children raised in child protection after aging-out. The first section is a literature review of typical policies and practice for youth in transition. It is important to first be aware how child welfare sectors serve the youth they are responsible for transitioning to adulthood, and whether common interventions have been successful in improving the life outcomes for youth-in-care. The second section makes evidence-informed recommendations for improving service to youth leaving care.

Due to the significant lack of best practices for youth in transition, innovation through rigorously tested pilot projects will be an essential part of moving the field forward. The guiding principle for piloting new interventions ought to be *fail fast*. This means evidence-based program design must be paired with rigorous impact measurement to determine whether interventions are in fact improving lives or failing to have observable impact. The sooner this is known, the sooner programs can evolve to increase impact.

Thank you for the opportunity to help contribute to this most important work. I wish to live in a society where we effectively support strength and resilience in the children and youth from care well into adulthood.

Kindest regards,



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## ABSTRACT

This research was undertaken to add to the evidence-base about policy and programming for youth transitioning from child protection to adulthood. The need for this type of analysis stems from the magnitude of outcome studies that show youth struggle after they “age-out” of child protection systems. Common life trajectories for youth after care include: low academic achievement; unemployment or underemployment; homelessness and housing insecurity; criminal justice system involvement; early parenthood; poor physical and mental health; and loneliness. Studies across decades, countries, varied policy approaches and the research methodology show the same results. It is suggested here that the consistency of these results stems from well-meaning, but poorly informed policy-making. Lack of rigorous evaluation studies and theoretical underpinning make it inherently unclear as to whether policy, programming and practice exert positive effects on life outcomes for youth transitioning from child protection. A cultural shift towards evidence-based policy-making and programming is necessary to improve youth outcomes. To avoid anecdotal evidence or questionable measurement, this analysis relied heavily upon peer-reviewed academic literature. This document first summarizes the literature on the policy and practice in youth transitions from child protection and makes evidence-informed recommendations intended to strengthen policy responses to youth leaving care.

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# CHAPTER 1 INTRODUCTION

## 1.1. Purpose

This is a general education document. This research explores policy and programming responses to youth transitioning from child protection and makes recommendations for future opportunities to strengthen service to youth leaving care. This research heavily relies on studies from American jurisdictions due to the dearth of rigorous policy and program evaluation studies and systematic research on youth who age out of care in Canadian systems. The lack of rigor in evaluation research, if any has been undertaken at all, is well-documented. Thus, the scope of this research focused exclusively on peer-reviewed academic publications despite the geographic limitations.

## 1.2. Background

In child protection, few if any, governments measure policy efficacy leaving impact on youth outcomes after care unknown. In general, despite increased investment, changes in policy and the wide-array of programming available to youth transitioning from care, youth outcomes have stayed the same. Child protection systems are failing to systematically affect positive life trajectories for youth leaving care. It is necessary to understand root causes for youth outcomes to inform policy-making. It is likely that no one factor is necessary or sufficient for any particular outcome. Interventions often lack a theoretical and empirical basis for the causes of outcomes, thus, cannot effectively interact with root causes to improve life outcomes for youth from care. Most interventions focus on activities or outputs instead of measuring the change they are designed to affect. This further limits the ability to strengthen promising programs.

## 1.3. Method

This resource document depends heavily on peer-reviewed academic studies. This is especially relevant when considering the impact of programs and policies. Providers often lack the resources to undertake sophisticated research studies and may have a stake in the results. Thus, this research exclusively focuses on academic publications.

For the literature review, very broad searches on policy and programming were undertaken in general and specialised databases including JSTOR and Social Services Abstracts respectively.

Though most studies were American, the consistency of result across Western countries suggests a level of applicability in the Canadian context. There is also a lack of long-term outcome studies. Most studies only consider outcomes directly after leaving care, and occasionally, up to age 30. Very little is known about outcomes of former youth-in-care aged 30 and above, which is a problem for policy-makers. Significant costs to society arise from the possibility that poor outcomes persist. It should also be noted that the research is sometimes insensitive to differences stemming from types of placement, types of custody arrangements, time of entry into care, purpose for entering care, or number of years spent in care, which limits understanding about possible systematic impacts on certain youths.

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# CHAPTER 2

## YOUTH TRANSITION POLICY AND PRACTICE

The youth-in-transition policy literature discusses systemic issues about why impact on outcomes is generally not observed despite substantial policy and programming for youth raised in child protection over the last several decades. Generally, momentum is building for more evidence-based policy and programming that is centred on youth life outcomes.

### 2.1. Youth-in-transition Literature Review

#### 2.1.1 *Key Findings*

1. There is increasing pressure for evidence-based and outcomes focused child protection.
2. Despite policies and programs for youth in transition, there has been no significant improvement in life outcomes across time.
3. The pervasive lack of impact measurement makes it impossible to discover best practices.
4. Policy involves unrealistic expectations of youth from care far outside of societal norms for same age peers note.
5. Though the point of aging-out is codified in law, youth often leave care in unplanned or disorganized ways.
6. There is an inequitable distribution of resources in the sector because the most vulnerable youth are often the least served.
7. Services can also have negative effects on life outcomes.
8. Youth-in-care are not a homogenous population; yet, specialized programming is rare.
9. Programming is more often based on clinical and rehabilitative services rather than social or relational supports.
10. Programming should support creating and building resiliency.

#### 2.1.2 *Discussion*

There is growing pressure from “private and public agencies, juvenile court judges, class-action lawsuits, physicians, and various other stakeholder groups, [to ensure] foster care systems are beginning to be held accountable for the effects of their services” (Massinga & Pecora, 2004, p. 152).

A review of American policies and outcome studies for youth transitioning from care over the last quarter century found no significant improvement in the life outcomes (Stott, 2013). “Despite the plethora of policies and programs, older foster children continue to experience substantial challenges, and foster agencies struggle to keep older children in stable foster homes, teach them life skills as early as possible, and assist them in thinking seriously about life after foster care” (Massinga & Pecora, 2004, p.154). Even if youth accessed all services available, it is unclear if youth needs would be met (Massinga & Pecora, 2004). Increases to funding for housing supports and post-secondary studies have also failed to affect overall life outcomes (Stott,

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2013). It is possible that programs are not relevant to youth served or are too diluted to make an impact on outcomes (Geenen & Powers, 2007).

An alternative explanation for the reason the child welfare system does not effectively serve transition age youth is because it “is not the mission of the agency” (Collins & Clay, 2009, p.745). Instead the focus is on children, not teens or young adults, and child protection, not child welfare. Put another way, the system provides good protection, but is not a good parent. This is further exacerbated by problematic inter-system collaboration, implementation challenges, lack of accountability for poor outcomes, little evaluation of policy decisions, and poor practice at earlier stages with the child (Collins & Clay, 2009). One practitioner explained that “By the time the kids age out, they are the product of system failures” (Collins & Clay, 2009, p.746). Collins and Clay (2009) that remedies for these systemic issues include: 1) creating a sense of permanency, 2) undertaking research and evaluation, 3) implementing programs, 4) enhancing system coordination, 5) adjusting legislation, and 6) standardizing practices. That said, individual-level problems such as lack of permanent relationships, trauma, and life skills can also be barriers to policy and program efficacy (Collins & Clay, 2009).

It is also impossible to know the best practices for improving youth outcomes without data (Collins, 2001). It is often assumed that youth serving organizations positively impact outcomes, but this is rarely empirically tested. Very few studies examine the effects of organizations on youth development. One review of evaluation studies found more than “700 citations for youth development programming, of which only 15 include an evaluation component of sufficient methodological rigor” (Collins, 2001). Quality of data, sufficient scale, and robust evaluations have not occurred to determine which programs work and which do not, thus, “...it is impossible to know how well programs are working” (Massinga & Pecora, 2004, p.154).

Child protection tends to be a needs-based model as opposed to a strengths-based one (Collins, 2001). Most studies reflect this by focusing on risk as opposed to resiliency, thus, leaving out important information about youth-in-transition (Collins, 2001). It is suggested that a positive youth development approach may supplement the risk avoidance approach increasing the efficacy of interventions.

There is a well documented theoretical gap when it comes to policy and programming for youth transitions from care. Developmental theories describing the process of adulting are generally not considered. This is evidenced by unrealistic expectations outside of societal norms for this population (Avery & Freundlich, 2009; Okpych, 2012; Greeson, et al., 2015; Osgood, et al., 2010). Canadian youth-in-care are expected to transition to full adulthood abruptly at age 18 in some jurisdictions, and certainly by age 24 with very minimal supports in other jurisdictions (Reid & Dudding, 2006). However, according to the latest Canadian Census, 42.1 percent of adults aged 20 to 34 lived with their parents in 2016 (Statistics Canada, 2016). In the United States, only five to ten percent of youth not from care live on their own at age 18; half still live at home between age 18 and 24 (Stott, 2013).

Youth have better outcomes if remain attached to foster care system after age 18 (Courtney, et al., 2007). Avery and Freundlich (2009) add that releasing youth from substitute care at age 18 can adversely impact youth. This is in part because it is unrealistic to assume youth are developmentally ready for independent living at this early life stage. Progress towards adulthood is gradual. Some authors have suggested that those in ‘emerging adulthood’ have yet to acquire their full decision-making faculties. At this stage, emotions still exert significant influence causing self-protective or selfish behaviours. As such, youth have a continued need for social scaffolding after care even into their third decade (Avery & Freundlich, 2009).

Collins (2001) explores the sociological literature on life transitions as a potential basis for policy-making. She notes timing of transition can have long term negative effects if attempted too early because transitions out of sequence with institutional structures can create barriers (Collins, 2001). Some authors suggest instant adulthood leads to poor outcomes (Geenen & Powers, 2007). One study found youth who exited care prior to age 19 experienced unemployment and were out of school more often than peers (Daining & DePanfilis, 2007).

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Other research suggests age is not the key factor, but rather, leaving to pursue opportunities tends to facilitate better transitions (Collins, 2001). However, in one large scale American study, only 45.8 percent of youth felt that leaving care was their idea in (McCoy, et al., 2008). Of those, 20 percent left care because they achieved their independent living goals and 17 percent had other positive discharges; whereas, 26 percent were discharged for refusal of additional services (including runaways); 10 percent for unplanned family reunification; 5 percent by the court for unclear reasons; 4 percent for marriage; and 1 percent for incarceration (McCoy, et al., 2008, p.736). Many older youths said they left care because either their needs were not being met or they were frustrated with the system (McCoy, et al., 2008). For most youths, leaving care is a disorganized process; most are not discharged because they are ready to live as adults. Many youth returned to their biological homes and those that remained in the system often lived in their own apartments” (McCoy, et al., 2008, p.735).

The question of reunification with the birth family is one that must be further explored. Many youths will seek out their biological family because they will find themselves without options soon after care or may be seeking nurturing they did not receive from the system (Geenen & Powers, 2007; McCoy, et al., 2008). On the other hand, some youth reported refusing assistance from biological parents because they felt more secure in the role of the provider (Samuels & Price, 2008). In one study, case workers recommended that programming ought to enable youth to explore biological family relationships before aging-out to mitigate the risks of reunification during a time where youth still have the support of the child protection system (Geenen & Powers, 2007). Another recommendation suggested incorporating information about the complexities of living with biological family into independent living programming (McCoy, et al., 2008).

Program eligibility requirements often exclude the most vulnerable people from services (Osgood, et al., 2010; Stott, 2013). This can occur because funding flows to providers who administer their own version of programs for youth transitioning from care, leaving youth struggling to fit into the box to access these services (Geenen & Powers, 2007). It has also been suggested that youth who are most motivated to partake in school or work are the same youth most likely to be selected for additional supports. One study found youth in programs had statistically significantly less placements and entered care later than peers not receiving services after age 18 (Stott, 2013). Another study found that youth with one or two placements receive more services than those with three or four placements. Those with a greater number of placements were also more disillusioned with the system (Brown & Wilderson, 2010). Some youth may also actively avoid institutional supports to create distance with their experience in care (Perez & Romo, 2011).

Foster youth are uniquely disenfranchised (Samuels & Price, 2008). Foster care seems to fall short of being a developmentally caring context and there are unique aspects to being in care that may “affect one’s use of, or openness to, receiving or requesting support” (Samuels & Price, 2008, p. 1199). Further, one study found that youth expected impermanence in their placements even if they have lived in the same home for years (Kools, 1997). Another study added that youth viewed permanency as pessimistically time-bound and most did not even consider it until aging-out (Collins & Clay, 2009). Some youth also perceived having a safety net as a luxury and viewed the uninterrupted care of parents as an overly protected and unrealistic real-world experience. Dependence was considered a threat to independence and success by youth (Samuels & Price, 2008). It is important to understand factors that facilitate or constrain program use as well as the development of relational connections.

Kools (1997) found foster care had a negative impact on identity development. Youth often indicated being devalued by others and felt the need for self-protection. Of the institutional factors that led to the devaluation experienced by youth in foster care, excessive restrictiveness, instability, lack of respect for the individual, and focus on pathology and deviance were all common themes. Stigma was also a key feature of the process of devaluation of the youths. “Systems of care must minimize the damage they do to those they serve. No

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doubt the damage is unintentional, and it is difficult to distinguish such damage from the very problems that bring youth into these systems in the first place” (Osgood, 2010, p.221).

Though, there will be commonalities among all youth-in-care, it is a common mistake to assume “youth-in-care” are a homogenous population. Subgroups of youth-in-care, such as Aboriginal populations in Canada, are highly over-represented. At present, there are more Aboriginal youth-in-care than in the Sixties Scoop (Edwards, 2017). In the United States, Black and LGTB youth are also disproportionately represented (Stott, 2013). One American study, as cited in Daining and DePanfilis (2007), found that African American children had longer stays in care, more placement disruptions, less access to adequate services and were less likely to be reunited or adopted, but there was no difference in the incidence of maltreatment based on ethnicity. It is essential to identify the specific needs of subpopulations to be able to effectively match youth with appropriate services when aging-out of care (Keller, et al., 2007). Specialized programming for vulnerable sub-groups is rare (Massinga & Pecora, 2004; Stott, 2013). As a cautionary note, more research is needed to understand if services tailored along ethnic or cultural divisions is the most efficacious approach to services.

Instead, one study used a person-oriented approach to distinguish meaningful subpopulations in a large representative sample of youth from care. Keller et al. (2007) found four common profiles of youth: 1) distressed and disconnected (43 percent of the sample); 2) competent and connected (38 percent); struggling but staying (14 percent); and hindered and homebound (5 percent). The study goes into depth about the type of youth most likely to be found in each profile. Assessment tools that correspond to tailored services for each group normed on a relevant population ought to be developed.

Common assistance offered to American youth transitioning from the system includes: education, employment and housing supports; financial stipends; support networks; and occasionally, health and mental health services (Massinga & Pecora, 2004). These are common forms of assistance in Ontario as well. However, more can be done to support older youth transitioning from the system. Reviews of programs show significant focus on clinical and rehabilitative services more than normative activities like “school, recreation, making and keeping social contacts with peers, work skills, and job experience” (Massinga & Pecora, 2004, p. 152). Developing social capital is often overlooked by child welfare systems. After youth leave care many have no safety net whatsoever (Avery & Freundlich, 2009). As such, there are gaps in programming for relational and social development as well as providing greater safety nets and resources (Stott, 2013). It has also been suggested that poor outcomes after care are more strongly connected to lack of ongoing support from parents after adolescence than history of maltreatment or child welfare history (Collins, 2001).

Studies have sought to understand the role of resiliency in youth transition out of care. Several protective factors that contribute to resilience include: academic success, healthy interpersonal relationships, and some personality traits like persistence and confidence (Osgood, et al., 2010). Another study found that females, older youth, and youth with less perceived stress had higher resiliency (Daining & DePanfilis, 2007). “The relationship between gender and resilience suggests a need to acknowledge differences between males and females in designing program activities” (Daining & DePanfilis, 2007, p.1170). Another study found females received more independent living resources than males (Daining & DePanfilis, 2007).

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# CHAPTER 3

## TYPICAL RESPONSES

### 3.1. Independent Living Services

Policy and programming for youth leaving care clusters around several typical responses. Below independent living services (ILS), especially in-class life skills and mentorship, will be discussed. This discussion is significantly limited. Future research ought to consider the effects of policies supporting post-secondary achievement of former youth in care on their life trajectories. There is a related body of literature that suggests educational attainment generally improves life outcomes. However, the lack of impact measurement of specific academic policies on the life trajectories of this population did not permit for a literature review here.

#### 3.1.1 Key Findings

1. Independent living services have a slight, positive impact on youth life outcomes.
2. Due to lack of rigorous program evaluation, it is impossible to know how to maximize benefits of ILS.
3. Gaps in ILS are well-established; new programming should seek to fill the gaps.
4. One study suggested that ILS may struggle to build youth's social networks; another found ILS did not affect rates of homelessness, criminal justice involvement and health services.
5. Some ILS providing housing supports may be ineffective or harmful.

#### 3.1.2 Discussion

This section explores the literature reviewing services for youth in transition. Independent living services (ILS) or independent living programs (ILP) are catch-all terms for various supports or resources provided to youth related to their transition to independence. The conventional wisdom on programming for youth-in-transition suggests that “Programs that draw on community resources, promote a system of care, link children to mentors, and teach them life skills hold promise for improving the lives of these children” (Massinga & Pecora, 2004, p. 151). Typical services include: independent living allowances, tuition grants or other academic support, transition housing, employment services, health benefits, life skills training, or mentorship programs.

Specifically, the *American Foster Care Independence Act* funds: assistance in obtaining a high school diploma; career exploration, vocational training, job placement and retention; training in daily living skills, training in budgeting and financial management skills; substance abuse prevention; preventive health activities; education; training and employment services; preparation for post-secondary training and education; mentors and interactions with adults; financial, housing, counseling, employment, education and other appropriate supports and services for young people ages 18-21 formerly in foster care (Collins, 2004, p.1056). In practice this means a “chaotic blend of programming with little theory base or evaluation” (Collins, 2004, p.1056). Canadian jurisdictions also fund a broad range of unproven services unguided by standardized evidence-based best practices.

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Studies on ILPs often have severe methodological limitations; therefore, the impact of these programs on youth outcomes is far from clear (Collins, 2004; Lemon, et al., 2005). Though, as cited in Collins (2004), one national study by Cook (2004) found a slight, but positive impact of independent living services. It is fair to say these types of services are useful, however, the best way to implement them for maximum impact is unknown.

Packard et al. (2008) suggest that increasing transitional supports can reverse the poor outcomes associated with leaving care, but current programming is fragmented and under-funded, not comprehensive, and not of sufficient scale to exert significant effects.

Formal independent living programming is too heavily focused on the ‘here and now’. Youths often leave care without future planning. Most youth in one study expressed “fear, insecurity, and a perceived lack of preparation for impending independent living” (Kools, 1997, p. 269). Further, “[F]ew programs provide apprenticeships or affordable vocational programs, connections to potential employers were not well developed, experiential activities to practice living skills were not common, availability of transitional housing services was limited, and after care services were highly variable” (Collins, 2004, p.1056).

In one study, Lemon et al. (2005) used college attendance as a proxy for successful outcomes and compared 81 former youth from care attending college who participated in an ILP to 113 college foster youth who had not. Several external factors correlated with increased attendance including: role models from the school setting, people who helped youth, enrollment in advanced placement classes, school clubs, and participation in independent living services. Both groups felt that foster care did not adequately prepare them for college. The ILP group was more prepared for concrete, emotional as well as social skills. This could be partly because the program serves as a vehicle for creating bonds with helpful adults. However, the non-ILP group was more likely to be employed after care. Both groups had similar rates of homelessness, criminal justice involvement and health services.

Housing support is another common ILS. One study found that affordable accommodations are often concentrated in dangerous neighborhoods and quality of living may be sub-standard. Programs or transition staff may overutilize certain buildings or areas of town creating a geographic concentration of youth-in-care. This may be helpful for meeting peers, but it may also make these youths a target for exploitation. As cited in Collins (2004), Jaklitsch (2003) found that “early attempts at providing supervised apartment programs were largely unsuccessful; they ‘...were viewed as dumping grounds for youth who were unmanageable in other settings. Poor assessment and screening, combined with a financial incentive to fill apartments, caused programs to put young people into supervised apartments who were clearly not ready for this level of freedom’” (p. 1061). In jurisdictions across Canada, housing supports vary wildly. There is also little to no emphasis on checking impact or ensuring equitable distribution of resources across the youth-in-care population.

Collins concludes that there is a need for more resources as well as research to study the impact of the resources (2004).

## **3.2. Life Skills Training**

### **3.2.1 Key Findings**

1. Life skills training is the foundation of independent living services for youth in transition.
2. More research and program innovation are necessary.
3. The in-class structure of life skills training is particularly ineffective; youth require the opportunity to practice skills in real-world settings.
4. The evidence on life skills training shows marginal positive effects on some life outcomes and no effects on others.

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5. Life skills training is not a substitute for permanent connections or interpersonal skills.

### 3.2.2 Discussion

The purpose of life skills training (LST) is to provide youth transitioning from care vital skills required to successfully navigate adult life. Life skill training is the foundation of independent living services for youth who are transitioning out of care, but “Whether life-skills training programs target key skill deficits and effectively maximize learning is not well known” (Massinga & Pecora, 2004). There is a serious lack of rigorous evaluation studies (Collins, 2001). Also, how skills are taught is also not measured or standardized in any way (Massinga & Pecora, 2004).

Programs often utilize a range of resources including resource books, training materials, workbooks, videos, games, exercises in a classroom setting (Collins, 2004). Evidence suggests that coursework without hands-on experience in this domain is of little value (Vacca, 2008). Many authors have cited the need to provide youth opportunities to practice life skills in real-life settings (Collins, 2001).

Though data is limited, some studies indicate success in affecting outcomes like education, employment and independent living (Massinga & Pecora, 2004). One small study found that participants were more likely to live independently, pay their bills, and have higher academic attainment. There were no differences with non-participants regarding employment and financial self-sufficiency (Collins, 2004). However, another study observed positive effects on employment, health care, cost to the community, overall satisfaction with life, and self-sufficiency, but early parenthood, change in educational status, and having a social network were unaffected (Collins, 2001). Because not all life skills training is created equally, it is difficult to generalize findings. Further, it is also possible that some outcomes may be more amenable to change by targeted life skills training than others.

Greeson et al. (2015) undertook a randomized controlled trial of four independent living programs to understand the effect of life skills training on social support networks of youth from care. The study of 482 youth found no difference in social support across groups who participated in life skills training and those that did not. As such, it was suggested that life skills programs are adapted with the goal of increasing social support. Greater social support seems to be predictive of improved outcomes, but the effect does not hold for youth with severely traumatic backgrounds. The protective effect of social support on psychological distress is unrealized if the network is too limited. Networks consisting of peers only also appear to have less protective effects and may increase risky behaviors. The authors conclude that the field has yet to design and implement an effective program that increases social support for youth leaving care (Greeson et al., 2015).

Another study of various American independent living programs teaching basic life skills found that after a decade of implementation there was little evidence to suggest youth outcomes had improved or that youth were prepared to live independently (Geiger & Schelbe, 2014). One youth in a focus group said, “You know, like these life skills programs, they don’t teach you how to survive in the real world” (Gomez, et al., 2015). Whereas, a qualitative study of youth, workers, and foster parents found reviews of life skills training mixed (Geenen & Powers, 2007). Some participants indicated that in-class training was insufficient and not relevant for a real-world setting. Youth often described frustration about being able to practice skills of self-determination in care, but were abruptly left to figure it out the day of emancipation. Foster parents added that agency policy often inhibited their ability to facilitate certain opportunities for youth’s self-determination. There was general consensus that this type of program had potential, but was ultimately entirely inadequate (Geenen & Powers, 2007).

The focus on life skills training may have drawn attention away from ensuring youth leave care with permanent connections that can continue to provide support after care (Avery & Freundlich, 2009). Skills training may provide basic competencies, but youth often lack emotional, relational and social skills (Stott, 2013).

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### 3.3. Mentorship Programming

#### 3.3.1 Key Findings

1. There are at least two types of mentorship: programmatic and natural.
2. Natural mentorship consists of supporting existing relationships of youth or facilitating environments where mentorship can evolve organically.
3. Programmatic mentorship seeks to approximate natural, healthy relationships with caring adults through a formal program structure that matches participants together.
4. Natural mentorship programming tends to have more positive effects.
5. Mentorships must last one year or more to exert effects.
6. Formalizing interpersonal connections is wrought with challenges, but marginal positive and negative effects on youth life outcomes are observed.
7. Youth from care are uniquely disenfranchised compared to other disadvantaged youth; this creates issues for 'buy-in'.
8. Any observed effects on life outcomes attributed to mentorship programming may be the product of sampling issues, measurement error, or unsound impact measurement.
9. More research is necessary to understand if mentorship programming, as it is typically conceived, effectively impacts life outcomes for youth-in-care.

#### 3.3.2 Discussion

The question of the efficacy of mentorship programming improving youth life outcomes is garnering increasingly more academic attention. “[I]t is not typical for youth to leave foster care and function effectively on their own” (Greeson & Bowen, 2008, p.1179). Thus, mentorship programming seeks to respond to the evidence that suggests youth outcomes significantly benefit from long-term positive contacts with caring adults. For example, youth, workers and foster parents cited the importance of youth having strong relationships with caring adults when leaving care especially as a resource for information when the child welfare system was no longer available (Geenen & Powers, 2007). “This was often portrayed as more important than accessing formal services”; yet, youth participants often spoke of the lack of such relationships (Geenen & Powers, 2007, p.1092). Youth indicated a lack of role models or people who could provide advice in their lives (Greeson et al., 2015). Mentorship programs strive to bridge this gap. However, Avery (2011) cautions that “there is significant danger in assuming that relational permanency can be achieved by mentorship programs alone. Mentoring relationships are no substitute for the intimate and lifelong bond to an adult...” (Avery, 2011, p. 19).

The literature explores two main types of mentorship. Programmatic mentors are assigned by youth-serving agencies; whereas, natural mentors come from the youth’s natural environment (Greeson & Bowen, 2008). Programming for natural mentorship can support the development of youths’ naturally occurring relationships (Munson et al., 2010) or create programs that bolster relational opportunities (Munson & McMillen, 2009). Formal mentoring strives to recreate the positive effects of natural mentorship relationships (Greeson & Bowen, 2008). Youth described the best mentors as having amicable personalities and often appreciated mentors who were still relatively close in age (Munson et al., 2010). Youth believed that successful mentorships required caring relationships, high expectations, and opportunities for success to have protective effects (Greeson & Bowen, 2008). Mentors provided a range of social support including emotional, tangible and informational (Munson, et al., 2010). Munson et al. (2010) found the most common types of natural mentors included family friend, professionals or community members. In one

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study, two thirds of youth identified a non-kin natural mentor; however, only one third reported the relationships lasting across time. In the sample, 85 youth could not identify even one non-kin supportive adult in their lives at age 18 and 19 (Munson & McMillen, 2009).

There is some evidence that formal and natural mentoring may exert positive effects on youth outcomes. However, many studies are not exclusively based youth from care, so generalizability is a point of caution (Munson & McMillen, 2009). A meta-analysis of 50 studies of mentorship programs concluded there is limited support for their efficacy overall. Programs that fared better included several features: ongoing mentor training; structured activities for participants; clear expectations around contact; engagement of parents; and monitoring of program implementation (Avery, 2011). One study of a formalized mentorship programming noted that two types of relationships emerge: 1) developmental and 2) prescriptive. The developmental style of relationship was more successful because it allowed time for trust to build before immediately seeking to change the youth (Munson, et al., 2010). Mentorship programming can also exert unintended negative effects on youth if relationships fail or the high turnover of mentors (Avery, 2011).

Greeson et al. (2015) developed an intervention for natural mentors called ‘Caring Adults ‘R’ Everywhere’ (CARE), which is undergoing a randomized, controlled study. The intervention is administered by an MSW level professional who: implements a trauma-informed training to mentors, supports the relationship, and facilitates life skill building in a natural and realistic relational context. The findings suggested that enduring natural mentor relationships had positive impacts on educational, vocational and behavioral outcomes even after 38 months, but this was dependent on maintaining the relationship (Greeson, et al., 2015). Other studies add that one year appears to be a unique critical marker for mentorship relationships exerting positive effects (Munson & McMillen, 2009). Youth who left care reported lower stress if they had a natural mentor for one year or more (Munson et al., 2010).

Munson and McMillen (2009) sought to understand whether non-kin natural mentor relationships last over time and the possible psychosocial outcomes of these connections on youth-in-care. They found that the presence of a natural mentor decreases stress and depressive symptoms and increases life satisfaction at age 18. At age 19, youth reported less stress and reported less arrests, however, no effect was found for employment or substance use. It is important to be cautious of the findings due to concerns with endogeneity. It was not clear if mentorship caused better psycho-social outcomes or if better psycho-social characteristics allowed for more successful mentorship arrangements.

One Hawaiian study of maltreated youth found that those with supportive adult connections fared better and were more successful at establishing supportive relationships with partners (Munson & McMillen, 2009). Another study found that African American teenage girls with natural mentors reported less depression and more optimism about life and opportunities that education could provide (Massinga & Pecora, 2004).

Jekielek et al. (2002) reviewed five structured mentorship programs in the United States. They concluded that “mentored youth are likely to have fewer absences from school, better attitudes towards school, fewer incidents of hitting others, less drug and alcohol use, more positive attitudes toward their elders and toward helping in general, and improved relationships with their parents” (p.1). However, mentoring relationships of short duration may do more harm than good, and most programs are augmented with other services like academic support making it difficult to understand the causal mechanism for these outcomes (Jekielek, et al., 2002). There were no differences between the mentored and not-mentored at-risk youth for stealing, damaging property, cheating, or smoking. Whether being formally mentored affects drug use is also unclear (Massinga & Pecora, 2004). This begs the question of whether formal mentorship may be most effective for the least at-risk youth, and potentially, not effective for higher-risk youth. One must also cautiously interpret these results, as the target population under study was not youth transitioning from care.

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One study looked at a Higher Education Mentoring Initiative (HEMI) being implemented in Ohio with youth aging-out of care (Graham, et al., 2015). Mentors commit to youth for up to six years to help them graduate high school and a post secondary program. The program boasts a 100 percent high school graduation rate and 75 percent post secondary uptake. That said, it is not clear if selection bias contributes to these rates; participants were not randomly selected from the total child protection population. This means it is not possible to confirm the impact of this program, as youth participants may have already been on a positive life trajectory. Even though many HEMI youth started college, many needed to take time off or drop out. The youth cited the usual challenges facing youth aging-out, but also added that they would be more successful if they were encouraged more and better understood the significance of postsecondary education. The youth were also only moderately prepared for life skills. For example, they were best prepared for survival skills like navigating a bus route, but not driving or maintaining a vehicle (Graham, et al., 2015).

Greeson, et al. (2015) studied youth perceptions of natural mentorship programming and found that youth were cautiously optimistic. Youth identified issues with ‘buy-in’ and the possibility that relationships could be superficial because youth felt pressure to be what professionals want them to be to increase their chances of stability (Greeson et al., 2015). Further, youths’ experiences with relational violations in care may impact efficacy of mentorship programming (Munson, et al., 2010).

“Although studies are accumulating that support the benefits of natural mentoring among older youth in foster care, there are no known theory-based, empirically verified child welfare interventions that promote the identification and growth of these relationships (Greeson, et al., 2015, p.141). Both formal and natural mentorship are still understudied when it comes to youth from care (Munson, et al., 2010). In a meta-analysis of mentorship programming, Avery (2011) found that most studies suffer from sample related issues and focus on short-term as opposed to long-term impact on outcomes.

In sum: some studies report some positive affects on life outcomes - especially with natural mentorship. However, a meta-analysis found mentorship generally ineffective, and occasionally, harmful (Avery, 2011). Part of the reason for conflicting findings seems to stem from a distinction drawn between natural mentorship and formal mentorship programming. Though natural mentors tend to have several positive affects on life outcomes, it presents a challenge for programming to facilitate ‘natural’ mentorship opportunities. That said, some positive effects of formal mentorship programming have also been noted, but it is unclear if this is generalizable to higher risk youth and/or former foster youth populations (Jekielek, et al., 2002). As such, whether formal mentorship programming exerts significant benefits on life outcomes for former youth-in-care is inconclusive; however, studies of former youth-in-care have found positive benefits associated with natural mentorship (Greeson, et al., 2015; Massinga & Pecora, 2004; Munson et al., 2010; Munson & McMillen, 2009). Mentorship programming is not a panacea for solving issues related to youth outcomes after care (Avery, 2011).

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# CHAPTER 4

## FUTURE OPPORTUNITIES

### 4.1. Introduction

It is clear that substantial policy innovation is required to effectively enhance youth outcomes after care. This does not necessarily require further investment. Rather, it requires strategic policy making rooted in evidence and checked with impact measurement.

This section explores future opportunities to strengthen policy and program responses to youth leaving care - especially life skills and mentorship programming. It should be noted that extended financial supports and education support are also common interventions and ought to be further reviewed in subsequent research. Preliminary analysis suggests that extended financial support after age 18 tends to lead to improved outcomes. Similarly, higher education is very well established as increasing social mobility and opportunity for graduates. That said, whether policies aimed at increasing post-secondary enrollment or graduation rates for youth from care are having the intended effect requires further research.

Most governments fail to systematically track the life outcomes of children raised in state care. As such, it is impossible to confirm the efficacy of any intervention.

Further recommendations correspond to identified gaps in the literature or discuss emerging trends in the sector. It should be noted that this is not an exhaustive list of future opportunities, but rather a short list of areas that require substantial innovation or sectoral leadership. The list of opportunities ought to be ever evolving as new best practices and evidence come to light.

It should also be noted that the following section is written for service providers as well as policy makers. Thus, some recommendations may be more or less applicable depending on the stakeholder.

### 4.2. Key Recommendations

1. Develop a research-informed and standardized life skills training program.
2. Adopt evidence-based best practices in mentorship programming.
3. Pilot a resource-hub project with an online component.
4. Lead the sector in evidence-based best practices for youth in transition.

#### 4.2.1 *Research-informed standardized life skills program*

A common form of independent living programming for youth-in-transition is life skills training. This is typically undertaken in the form of classroom learning. The efficacy of these types of interventions are disputable, and the in-class model is particularly ineffective. This is in part because youth are unable to practice life skills in real-world settings.

Further, in most jurisdictions there is no standardized delivery of services to youth transitioning from care. Arguably, many agencies struggle to serve youth transitioning from care and may prefer to sub-contract the delivery of the program. As such, there is an opportunity to develop a set of standardized, product-based, and expert led modules based on evidence in the literature to serve youth in transition.

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Each module could be based on a learning outcome accompanied by a tangible product the youth will encounter after leaving care. The job of the program implementer would involve organizing and training community partners to administer respective modules to achieve the learning outcomes in real-world settings.

For example, the *Finance* module could be administered by a financial officer working with a community bank partner who must explain budgeting, saving, loans, credit scores, and common credit pitfalls and corrections. Examples of products include: bank account, TFSA, starter credit card, discussion about credit scores, and the contact for the financial officer for future needs.

This way participation in the module ensures every youth has essential resources for adult living and a relationship with a community member who can help with future needs. Certain modules can be mandatory to achieve a level of standardization and some can be selected by youth to create 'buy-in'.

Though the standardized, product-based, and expert led aspects of the program have support in the literature, such an initiative has yet to be undertaken. Thus, impact measurement is essential to ensure the models efficacy.

#### **4.2.2 Research-informed mentorship innovation**

The literature is less than clear on the overall efficacy of mentorship programming on life outcomes - especially for youth-in-care. Despite the recent interest and proliferation of mentorship programming, meta-analyses reviewing efficacy find both marginally positive and marginally negative effects on certain life outcomes for participants. Mentorship programs can suffer from mentor turnover or termination of the relationship. Harmful effects emerge when youth-in-care experience another failed interpersonal connection. Natural mentorship generally seems more effective than structured mentorship programs for youth from care. There are two schools of thought: 1) help youth build strong relationships with people in their existing networks; and 2) create programs that allow mentorship relationships to emerge organically.

Youth-in-care are uniquely different from other disadvantaged youth; they are system-wise and system-weary. As such, some youth actively avoid formal or structured interventions. Therefore, the youth who are most likely to access services are often the least vulnerable. This lack of random selection in the sample can make structured mentorship programs appear highly effective, however, it may simply be that the youths participating are the same youths already on a positive trajectory.

It is recommended that current programs with mentorship aspects make evidence-based adjustments shifting the culture towards natural mentorship. It is also essential that attention be given to sampling as well as rigorous impact measurement to ensure programs are most efficacious. Results ought to be published to contribute to the body of objective data in the field especially since mentorship style interventions are recently trending.

#### **4.2.3 Resource hub pilot project**

There is evidence that service hubs (wrap-around services or services under-one-roof) have successfully impacted outcomes in other sectors like healthcare. One study examines service hubs for youth mental health (Hetrick, et al., 2017). It was supposed that lack of access to mental health services was undermining youths' mental health outcomes. Thus, a service hub was applied as the innovative solution to address issues of access. Self-reports by youth suggested that organizing service in this way improved mental health outcomes for lower risk youth in particular (Hetrick, et al., 2017).

Before generalizing these tentative findings in youth mental health to the child welfare sector, it is important to consider several points.

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- Child mental health interventions have been rigorously tested by scientific methods. Interventions for children aging-out of care are essentially untested in a systematic and credible manner. Thus, a service hub comprised of ineffective services will likely fail to affect outcomes.
  - It was presumed that mental health outcomes were compromised by a lack of access to service, or rather, inefficiencies in the system that the service-hub model solved. The evidence suggests that interventions for youth aging-out of care are ineffective rather than inconvenient. Outcome studies rarely identify access to services as the key problem undermining youth outcomes after care. Thus, it is unclear if easier access to already existing services would substantially improve the life outcomes youth face after care.
  - Notwithstanding, there are also issues with access to service for the entire youth from care population. The most vulnerable are the least served. However, reasons for this are not well understood. It is possible youth from care actively avoid institutional supports; whereas, parents with children who have mental health issues wanted help. Though a clear need for services to youth-in-transition is present, this may not translate to demand if barriers to access remain unknown.

If this direction is pursued, it is recommended that a more conservative pilot project with rigorous impact measurement be undertaken. For example, perhaps begin with a resource-only hub in one jurisdiction where youth may call in for any information about services or resources available to them including a supplementary website. This could be modelled after constituency offices that navigate the bureaucracy on behalf of constituents and make connections to the appropriate services or supports that are being sought.

This model also allows for substantial data collection about the types of concerns or services sought by clients. This information could be used to identify service gaps that could be subsequently addressed. Also, the types of challenges faced by clients after care will also be quantifiable and can inform future advocacy efforts.

#### **4.2.4 Leader in evidence-based best practices and policies**

At present, child protection systems across Canada lack a common entity with standard setting authority for evidence-based best practices in the sector. Supports to youth-in-transition vary wildly across the country. This leads to immense inequities for youth raised in child protection simply based on where they were born. For example, some provinces provide support until age 18; whereas, others provide limited support up to age 24 (Reid & Dudding, 2006).

It is suggested that the Blueprints Conference model for child development practitioners be considered. The goal of the conference is below.

To disseminate science-based information on programs that have the highest standards for promoting education, behavior, emotional well-being, physical health and positive relationships. This conference will provide support, guidance and tools by program and prevention experts to promote effective policymaking and help practitioners implement these programs successfully in their own communities (2018).

A panel of experts peer-reviews promising programs by applying rigorous standards to ensure efficacy. Blueprints provides a certification to successful programs so consumers can have confidence that implementing the program will result in change to targeted behaviors or developmental outcomes of youth.

No Canadian equivalent presently exists. The Child Welfare League of Canada undertakes research in the sector, however, there is no policy or program peer-review certification process for promising policies or programs. As such, there is an opportunity to emerge as a sectoral leader through this model in child welfare.

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Research into best practices and accountability through certification are only a piece of the puzzle. It is essential that substantial lobbying be undertaken to ensure legislators are educated so that legislation and funding for programs is evidence-informed.

### **4.3. Conclusion**

This document sought to provide an introduction to the literature exploring policy responses to youth leaving care and to make evidence-informed recommendations for innovations that will support maximal impact on youth outcomes after care.

Despite policies and programming for youth in transition, outcomes are persistently depressed among youth who age-out across countries, decades and research studies. There are substantial opportunities to improve upon existing policies, programs and practices by studying impact on youth outcomes.

The sector would benefit from a cultural shift towards evidence-based policy making. Rigorous impact measurement ensures accountability. It is of little value to expend good will, effort and resources on interventions that fail to improve the lives of the children served. Impact measurement is the only way a system can be progressive - integrating lessons learned to build on promising programs. Only scale up programs that demonstrate impact on outcomes; adapt or delete others.

The fundamental real-world implication of this report is improved life outcomes for youth leaving care through evidence-informed policy and programming.

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