



Better Outcomes for Older Youth of Color in Foster Care

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The disturbing truth is that children and youth of color, particularly African American and Native American children, are disproportionately represented in child welfare systems throughout the nation. And the troubling result is that for many older youth of color, the systems that were designed to assure their safety and well-being too often result in unacceptable outcomes. While there is no easy, quick formula to ensure better outcomes for youth of color, helping professionals and advocates should know about and attend to at least three critical areas: implicit bias, systemic/institutional barriers, and positive youth development.

National and local data show that youth of color experience longer stays in foster care than their white counterparts, more restrictive foster care placements, and lack of access to meaningful and relevant services, among other poor outcomes. As currently structured, child welfare systems frequently fail to understand and respond to the cumulative life experiences of youth of color, including the circumstances of race, racism, and culture. Youth of color are often viewed by intervening professionals as problematic, pathological, or damaged. Oronde Miller et al., Ctr. for the Study of Soc. Policy, *Changing Course: Improving Outcomes for African American Males Involved with Child Welfare Systems* (2014). This article focuses on older youth of color in the child welfare system—examining what the data tells us and exploring ways to shift the system narrative and structure interventions that can build protective factors in these youth and better promote their healthy development and well-being.

The Data

Nationally, in 2012 African American children comprised 14 percent of the general child population, but represented 26 percent of children in foster care. In the same

year, Native American children made up 1 percent in the general population but 2 percent of the foster care population. Annie E. Casey Found. Kids Count Data Ctr., [Child Population by Race vs. Children in Foster Care by Race](#) (2014). Yet these national numbers don't tell the full story. For children under the age of 18 in placement, 13 out of every 1,000 Native American/Alaska Native are in foster care, representing the highest rate of any other racial or ethnic group of children. Admin. on Children, Youth & Families, U.S. Dep't of Health & Human Servs., [Recent Demographic Trends in Foster Care](#) (Data Brief 2013-1), at 2 (2013).

The picture of racial and ethnic disparities differs when examining local data. While Latino children are slightly underrepresented nationally in foster care (comprising 24 percent of the child population and 21 percent of the foster care population), they are overrepresented in six states. Further, Latino children make up the majority of children in foster care in California—underrepresented in some counties and overrepresented in others. In order to understand the extent and nature of disparate treatment and outcomes, advocates and policymakers must look not only at national data but also at local and regional data and conditions to identify what is happening to produce these effects and whether youth and families of color in particular localities have access to culturally responsive services and policies.

Data show differences by race and ethnicity in rates that children and youth of color are removed from their homes, the types of out-of-home care settings in which they are placed, and the rates they reunify with family or find alternative permanent placements. For example, national data show that African American children spend an average of 29 months in out-of-home placement, Latino children an average of 23 months, and white children an average of 18 months. Recent Demographic



Trends in Foster Care, *supra*, at 4. Data also show poorer outcomes for older youth of color who are involved with the child welfare system than for white youth. For example, African American youth over age 10 are significantly less likely to be reunited with family than white youth, even when controlling for risk factors, child behavior, and agency actions. Keesha Dunbar & Richard P. Barth, Annie E. Casey Found., [*Racial Disproportionality, Race Disparity, and Other Race-Related Findings in Published Works Derived from the National Survey of Child and Adolescent Well-Being*](#) 35–37 (2007).

Through a number of qualitative reviews, the Center for the Study of Social Policy (CSSP) has found that older youth of color too often experience a child welfare system that lacks effective, culturally respectful engagement and services and that frequently fails to sufficiently address a youth's unique needs. CSSP also found that child welfare systems often pay insufficient attention to the trauma, grief, and loss experienced by youth and their families, a trauma that is often exacerbated for youth of color due to historical patterns of differential treatment and racism. Rather than acknowledging the trauma and loss many youth have suffered, older youth are instead often described in case files as hostile, aggressive, and pathological. As an example, CSSP reviewed a case in which a teenage African American boy repeatedly threw himself down a set of stairs after visiting his mother in jail. The caseworker's notes labeled him as psychotic, and he was administered psychotropic medication. Nowhere in the file was there evidence that the professionals treating him linked his self-injurious behaviors to the trigger of his recent visit to his mother, whom he had not seen in a few years.

Further, although well intentioned, interventions for older youth frequently serve to undermine family connections and further disrupt relationships and communities. The family systems of youth of color traditionally involve networks of grandparents, godparents, aunts, uncles, cousins, and real and fictive kin. CSSP found that in efforts to place youth in out-of-home settings, the child welfare system and courts tend to look to one relative to support the youth, but may fail to explore the complex network of informal supports who can offer respite to caregivers and ongoing connection for youth. Finally, youth of color face additional significant challenges as a result of sustained disinvestment in their community—many struggle to find adequate housing and jobs, healthy and affordable food, safe and academically challenging schools, and clean, secure parks and neighborhoods.

New data from the Los Angeles foster youth survey, a telephone survey of 784 youth ages 12–21 involved with Los Angeles's child welfare system, offers insight about the need to also look at intersectionality, the expression of sexual orientation, gender identity, race, ethnicity, and disability, all important parts of a youth's identity. The Los

Angeles survey found that 85 percent of respondents were youth of color, and 19 percent identified as lesbian, gay, bisexual, or transgender. Bianca D.M. Wilson, Univ. of Cal. L.A., "[Yes, There Are Way More Than 3!: Estimating LGBTQ Youth in the Foster Care System](#)," YouTube (Nov. 12, 2014). Understanding the intersectionality of these identities is critical to recognizing the multiple biases and disadvantages that some youth experience.

To summarize, although there are significant regional differences, older youth of color are overrepresented in foster care and too often experience poor life outcomes. How can child welfare systems and advocates better support older youth of color? What are the solutions?

Implicit Bias

In multiple jurisdictions, through the institutional analysis methodology, an assessment intended to better understand system contributors to racial disparities, CSSP found multiple examples of workers describing youth of color as problematic without evidence to support this characterization. These sorts of responses are examples of "implicit bias." The science of implicit bias posits that biases are activated involuntarily. Research also suggests that staff are more susceptible to the effects of implicit bias under conditions that are often found in institutions: ambiguous or incomplete information, time constraints, and high caseloads. Kirwan Inst., [State of the Science: Implicit Bias Review](#) 2014 (2014).

Youth of color often report feeling that their workers do not understand them and that they are not provided with the ability to interact with their peers in ways that are comfortable to them. Data shows youth of color are placed in more restrictive settings than their white counterparts. Miller et al., *supra*. In one jurisdiction working to transition youth back from out-of-state specialized and frequently restrictive placements, the youth of color were the last youth to return. In another jurisdiction, Latino youth who crossed into the United States on their own were not provided services unique to their specialized needs. And in another jurisdiction, a 15-year-old African American male with active mental health issues ran away from placement, and the record provided no evidence of active efforts to find him as workers described him being old enough to take care of himself. Results like these may be outward expressions of implicit bias.

Workers need focused training on implicit bias to recognize what it is, which is the first step toward changing policies and practice to eliminate the often unintended but nevertheless damaging effects on youth of color. Workers need to be supported through supervision and in feedback from the people they serve to understand how their actions can demonstrate respect and understanding as opposed to further demoralizing a youth. Further, even small changes to environments that youth



frequent (offices, visiting rooms, waiting areas) can help to promote a better sense of belonging and positive identify for youth with diverse backgrounds and cultures and serve to counter the negative effects of implicit bias.

Systemic Barriers

Many policies and practices that guide child welfare systems unintentionally disadvantage communities of color. For example, in an effort to promote the safety of children and youth in out-of-home placement, relative caregivers must have criminal background checks completed in order to be approved as a placement. In communities of color that have experienced excessive policing and mass incarceration, many relatives have criminal records stemming from prior drug or property-related drug charges that can prevent them from being considered placement resources, even when they have historically been a youth's caretaker and they can provide a safe and secure home. Other relatives may be undocumented and therefore not considered viable resources.

CSSP found that youth of color are too often placed in communities that are distant from providers offering required services, visitation sites, and court hearings. Historical inequities in transportation patterns and how buses are routed through communities can disparately affect the ability of youth of color and their families to travel to and participate in visitation and other mandated services in a timely manner. Sometimes child welfare systems mandate that youth attend programs such as substance abuse, parenting, or domestic violence programs with providers that are not accessible to communities of color or not culturally relevant. Often these services fail to address the underlying trauma experienced by youth of color and do not support them in the healthy development of their racial/ethnic identity. Systems of accountability rarely look at questions of service accessibility and cultural relevance. Child welfare and related human services systems must work much more closely with communities of color to analyze the ways in which laws, policies, and practices serve to advantage or disadvantage particular populations. This kind of assessment is unlikely to occur in the normal course of events, and so systems must make concerted efforts to engage with communities of color to understand how children and families of color experience the services system and to ensure that available services are of high quality, community-based, accessible, and affordable.

Positive Youth Development

Adolescence is a time of transition and instability for all youth, but represents a period of particular risk for youth of color in the child welfare system. Scientists consider adolescence the second most critical and most vulnerable developmental period in the lifespan, surpassed only by early childhood. Ronald E. Dahl, "Adolescent Brain

Development: A Period of Vulnerabilities and Opportunities," 1021 *Annals N.Y. Acad. Sci.* 1 (2004); Marlene M. Moretti & Maya Peled, "[Adolescent-Parent Attachment: Bonds That Support Healthy Development](#)," 9 *Paediatrics & Child Health* 551 (Oct. 2004). During this period, the brain is developing unevenly: the structure and functions in the limbic system that control emotions develop more rapidly, whereas the area of the brain responsible for cognitive skills such as decision making—the prefrontal cortex—is still evolving well into early adulthood. Jim Casey Youth Opportunities Initiative, *The Adolescent Brain: New Research and Its Implications for Young People Transitioning from Foster Care* 20 (2011).

In this vulnerable stage, negative stressors are potential threats to an adolescent's healthy development and well-being. While all youth confront stressful experiences in the course of growing up, youth in foster care and far too often youth of color experience more than their share of stressors: separation from family, frequent moves, violence, and the collateral consequences of poverty and parental incarceration to name a few. These "non-normative" sources of stress are not regarded as predictable experiences characteristic of this developmental period. Kathryn E. Grant et al., "Stressors and Child and Adolescent Psychopathology: Moving from Markers to Mechanisms of Risk," 129 *Psychol. Bull.* 447 (2003). Sources of stress often experienced by racial/ethnic minority youth have been termed "chronic environmental stress." Louis P. Anderson, "Acculturative Stress: A Theory of Relevance to Black Americans," 11 *Clinical Psychol. Rev.* 685 (1991). Chronic environmental stress is defined as a constant background level of threat based in the environment physical and social structure. It includes racism and economic inequity, but also heightened danger and the intrusion of social problems into everyday life. Chronic environmental stress impinges on optimism, sense of control, and goal-directed behavior. Patrick H. Tolan et al., "Building Protection, Support, and Opportunity for Inner-City Children and Youth and Their Families," in *Investing in Children, Youth, Families, and Communities: Strengths-Based Research and Policy* (Kenneth I. Maton et al. eds., 2004).

Ethnic minority youth involved in child welfare systems face chronic environmental stress in addition to the stressors associated with foster care. When youth face either a single acute episode or multiple extremely stressful experiences, they are experiencing trauma. These traumatic experiences create an intense and sustained activation of the body's stress response system, or what is known as "toxic stress." Jennifer S. Middlebrooks & Natalie C. Audage, Ctrs. for Disease Control & Prevention, *The Effects of Childhood Stress on Health Across the Lifespan* (2008); Jack P. Shonkoff & Andrew S. Garner, "[The Lifelong Effects of Early Childhood Adversity and Toxic Stress](#)," 126 *Pediatrics* 232 (2012). The derailing effects of toxic stress on early brain develop-



ment can become most evident during adolescence. The Adolescent Brain, *supra*; Barbara Hanson Langford & Sue Badeau, Foster Care Work Grp., *Connected by 25: A Plan for Investing in the Social, Emotional and Physical Well-Being of Older Youth in Foster Care: Connected by 25* (2013); Sonia J. Lupien et al., “Effects of Stress Throughout the Lifespan on the Brain, Behaviour, and Cognition,” 10 *Nature Revs: Neuroscience* 434 (2009); [“Excessive Stress Disrupts the Architecture of the Developing Brain”](#) (Nat’l Scientific Council on the Developing Child, Working Paper No. 3, 2014).

Negative outcomes, however, are not inevitable, even when children and youth experience complex trauma. *The Adolescent Brain, supra*; Desmond K. Runyan et al., UNC Injury Prevention Research Ctr., *Ensuring Safety, Well-Being and Permanency for Our Children: Findings, Practice and Policy Implications from LONGSCAN* (2014); Alexandra Cook et al., “Complex Trauma in Children and Adolescents,” 35 *Psychiatric Annals* 390 (2005); M. Ann Easterbrooks et al., “Resilience among Military Youth” 23 *Future of Children* 99 (2013); Middlebrooks & Audage, *supra*. New research suggests that positive experiences and opportunities during adolescence can help create neural pathways, build new brain architecture, and help youth heal from trauma and develop into successful adults. Shonkoff & Garner, *supra*. “Even when stress is toxic, supportive parenting, positive peer relationships, and the availability and use of community resources can foster positive adaptation.” Easterbrooks et al., *supra*, at 102. That is, youth can learn to demonstrate resilience and to thrive when supported by trusted, nurturing, competent, and caring adults who offer positive guidance, provide opportunities for productive decision making and constructive engagement in various social contexts, and promote the development of self-regulation, self-reflection, self-confidence, self-compassion, and character. Charlyn Harper Browne, Ctr. for the Study of Soc. Policy, [Youth Thrive: Advancing Healthy Adolescent Development and Well-Being](#) (2014); *The Adolescent Brain, supra*. In contrast, CSSP’s institutional analyses found that, rather than provide youth of color with the support they need, child welfare workers too often responded punitively and failed to be flexible enough to help the youth develop appropriate decision-making skills.

In 2011, incorporating breakthroughs in the field of adolescent brain development and responding to efforts at the federal level to promote well-being of children and youth in foster care, CSSP introduced its Youth Thrive Protective and Promotive Factors Framework. Youth Thrive is a strength-based, research-informed framework that emphasizes how all adolescents and young adults ages nine through 26, and particularly those most vulnerable, can be supported in ways that advance healthy development and well-being and reduce the likelihood or impact of negative life experiences. Browne,

supra. Based on research on resilience, positive youth development, neuroscience, and trauma, the Youth Thrive framework identified the following five protective and promotive factors as key components of healthy youth development:

- **Youth resilience.** Managing stress and functioning well when faced with stressors, challenges, or adversity; the outcome is personal growth and positive change.
- **Social connections.** Having healthy, sustained relationships with people, institutions, the community, and a force greater than oneself that promotes a sense of trust, belonging, and that one matters.
- **Knowledge of adolescent development.** Understanding the unique aspects of adolescent development (e.g., brain development, the impact of trauma); implementing developmentally and contextually appropriate best practices (e.g., positive youth development strategies).
- **Concrete support in times of need.** Understanding the importance of asking for help and advocating for oneself; receiving a quality of service designed to preserve youth’s dignity, provide opportunities for skill development, and promote healthy development (e.g., strengths-based, trauma informed practice).
- **Cognitive and social-emotional competence.** Acquiring skills and attitudes that are essential for forming an independent identity and having a productive, responsible, and satisfying adulthood (e.g., self-regulation, executive functions, and character strengths).

These five factors play a particularly critical role in serving youth of color, who may be at a disadvantage in having fewer positive experiences or opportunities than their white counterparts. Racial and ethnic or tribal identity as well as gender identity are also important to a youth of color’s healthy social and emotional development. Creating social connections can also be especially important to those youth in foster care who have lost community and/or family.

Judges, law guardians, guardians ad litem (GALs), court-appointed special advocates (CASAs), parents’ attorneys, and other youth workers must become knowledgeable about adolescent development and, specifically, about the effect of trauma on the adolescent brain. Each of these child welfare stakeholders has multiple opportunities to advocate that youth be provided with the positive experiences and opportunities they need for healthy development and to overcome toxic stress. For example, courts can order that youth obtain essential activities, law guardians and CASAs can seek suitable learning environments for youth, and parents’ attor-



neys can educate and support parents in giving youth opportunities to take reasonable risks while avoiding dangerous consequences. These and other adults that touch youth's lives can also provide them opportunities to develop constructive peer and adult relationships that are indispensable to youth as they reach milestones and learn to manage stress productively.

Conclusion

Adolescence is a time of rapid change and transition for all youth, but for youth of color in foster care it presents even greater challenges. There is a lot that child welfare systems can do to help youth overcome these challenges, beginning with a recognition that adolescence is a pivotal time in which the brain is developing rapidly. Workers must be trained about and recognize implicit bias and its malevolent effects on youth of color. Experiences and opportunities provided to youth at this critical juncture will be key in assisting youth to become healthy and productive adults. Court partners and other stakeholders working with youth must diligently address the specific needs of the adolescents they serve, paying particular attention to the levels of toxic stress in their lives, and provide them with experiences and opportunities that advance their healthy development.

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