

## Objectives

- Understand the unique challenges of young people exiting foster care in South Carolina
- Increase awareness of the need for research on this particular population
  - Future research would help inform the development of targeted interventions which more closely align with the needs of young people exiting care.

## Relevance to Public Health

Health equity is realized when people have an opportunity to reach their “full health potential” irrespective of their social position or circumstances<sup>2</sup>. For young people exiting the foster care system, their history of system involvement tends to place them at an increased disadvantage. Recent studies suggest that cumulative exposure to stressors such as abuse, neglect, poverty, and housing insecurity places these youth at increased risk of chronic health conditions later in life, more so than their counterparts in the general population<sup>1,3</sup>. Differences in outcomes are evident even when compared to low-income children with no foster care experience<sup>1</sup>, suggesting that differences in outcomes may be related to their unique involvement with the system.

## Methods

### Data Collection

National Youth in Transition Database (NYTD) survey is an ongoing, federally-mandated longitudinal survey offered to all youth in foster care who reach their 17<sup>th</sup> birthday during the federal fiscal year (Oct. 1<sup>st</sup> – Sept. 30<sup>th</sup>) in which the survey is conducted.

In SC, the NYTD survey is mixed-mode with incremental incentives at each wave.



### SC NYTD Instrument

#### NYTD Federal Questions

- Closed-ended
- Regarding 6 Domains
  - Education
  - Finances
  - Health Access
  - High-risk behaviors
  - Social connections
  - Housing

#### State-Specific Questions

- Closed-ended & open-ended
- Expand on 6 federal domains plus ask about transition to Independent Living

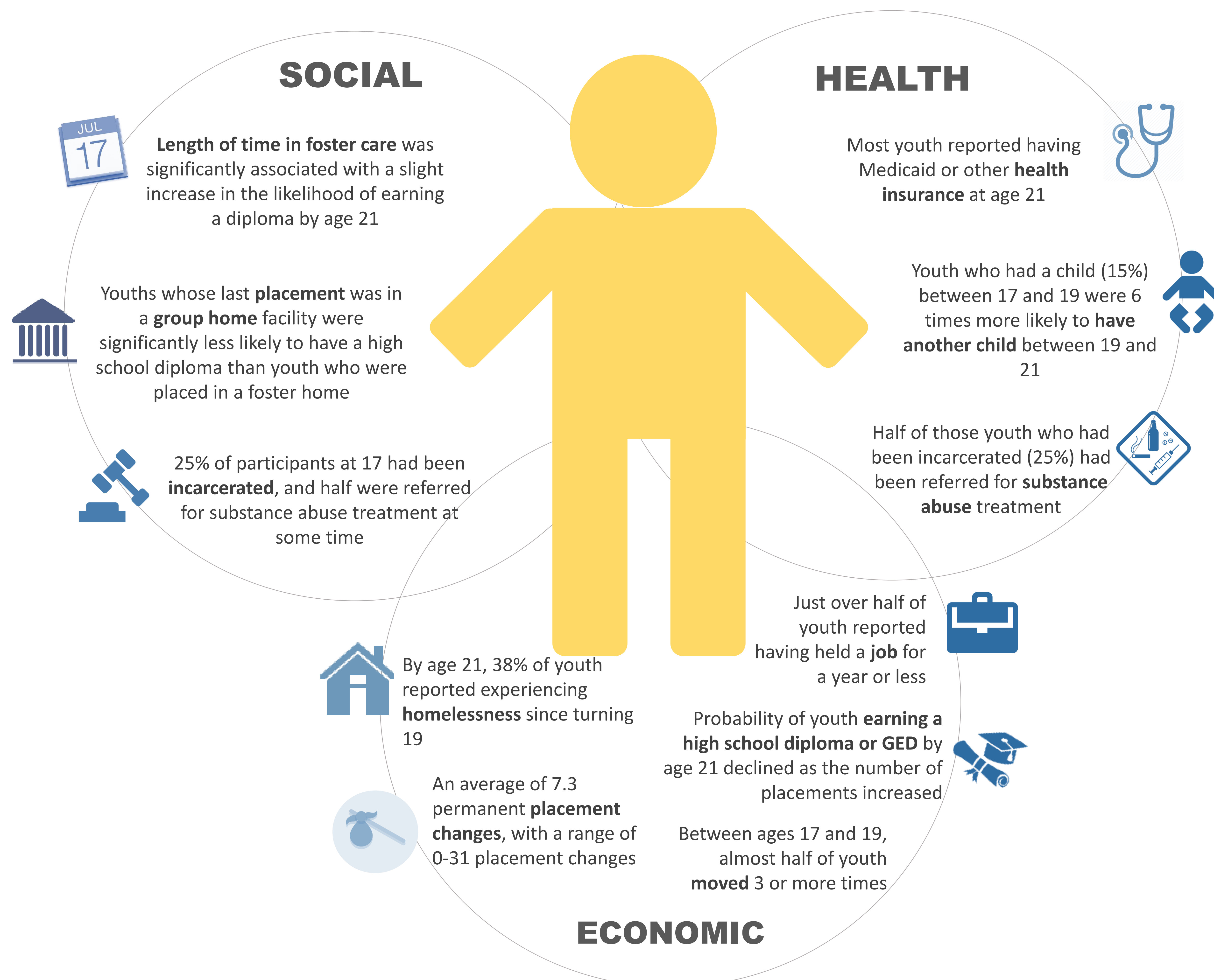
### SC DSS Administrative Data

- Demographic characteristics
- Foster care characteristics

## Data Analysis

Analyses of data from the second NYTD cohort of youth who completed all three surveys in SC (n=105). Statistical analyses were performed in STATA 15. Logistic regression models were used to test associations between independent and dependent variables. Outcomes of interest, included incarceration, access to health insurance, parenting, substance abuse referral, homelessness experience, and instability during and after care (employment, placement changes, number of times moved after 17).

## Stressors and the Foster Care Experience



## Participant Characteristics

Table 1. Demographic information for all survey participants (n=105)

Variable	%(n)
Race	
White	47% (49)
African-American	49% (51)
Other	5% (5)
Female	62% (65)
Life Stage	
Early childhood (0-5 years)	14% (15)
Middle childhood (6-12 years)	33% (45)
Adolescence (13-17 years)	52% (55)
Mean age at entry into foster care (SD)	11.4 (4.7)
Mean years in foster care (SD)	5.1 (3.7)
Mean number of placement changes (SD)	7.3 (6.4)
Last Placement Type	
Foster home	61% (64)
Group home	27% (28)
Correctional facility	2% (2)
Other	10% (11)

## Conclusions

Our findings suggest that youth exiting foster care in SC experience health, social, and economic stressors unique to their foster care involvement, which may increase their likelihood of negative health conditions later in life. Experiences unique to youths' foster care involvement (placement moves and length of time in care) were a risk factor for a number of poor outcomes in young adulthood, including low educational attainment and employment. Future research should continue to address social determinants among this population to better understand outcome differences. Doing so may enable child welfare agencies and community partners to respond more appropriately.

- References
1. Ahrens, K. R., Garrison, M. M., & Courtney, M. E. (2014). Health outcomes in young adults from foster care and economically diverse backgrounds. *Pediatrics*, 134(6) 1067-1074. doi:10.1542/peds.2014-1150
  2. Centers for Disease Control and Prevention. (2018, December). *Health Equity*. Retrieved March 25, 2019 from <https://www.cdc.gov/chronicdisease/healthequity/index.htm>
  3. Rebbe, R., Nurius, P. S., Courtney, M. E., & Ahrens, K. R. (2018). Adverse childhood experiences and young adult health outcomes among youth aging out of foster care. *Academic Pediatrics*, 18 (5) 502-509. <https://doi.org/10.1016/j.acap.2018.04.011>

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