

5-2023

PROLONGED EXPOSURE TO CONGREGATE CARE AND FOSTER YOUTH OUTCOMES

Tiffany Acklin

Follow this and additional works at: <https://scholarworks.lib.csusb.edu/etd>



Part of the [Social Work Commons](#)

Recommended Citation

Acklin, Tiffany, "PROLONGED EXPOSURE TO CONGREGATE CARE AND FOSTER YOUTH OUTCOMES" (2023). *Electronic Theses, Projects, and Dissertations*. 1650.
<https://scholarworks.lib.csusb.edu/etd/1650>

This Thesis is brought to you for free and open access by the Office of Graduate Studies at CSUSB ScholarWorks. It has been accepted for inclusion in Electronic Theses, Projects, and Dissertations by an authorized administrator of CSUSB ScholarWorks. For more information, please contact scholarworks@csusb.edu.

PROLONGED EXPOSURE TO CONGREGATE CARE AND FOSTER YOUTH
OUTCOMES

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Tiffany Acklin
May 23, 2023

PROLONGED EXPOSURE TO CONGREGATE CARE AND FOSTER YOUTH
OUTCOMES

A Thesis
Presented to the
Faculty of
California State University,
San Bernardino

by
Tiffany Acklin
May 23, 2023

Approved by:

Anissa Rogers, Ph.D., Research Supervisor, Social Work

Yawen Li, Ph.D., M.S.W. Research Coordinator

© 2023 Tiffany Acklin

ABSTRACT

Long-term exposure to congregate care settings can place foster children at greater risk for negative life outcomes in adulthood such as homelessness, incarceration, and substance use. The significance of this quantitative study is found in the benefits to both the micro and macro fields of social work as well as the practical applications to child welfare practices regarding placing children in congregate care settings. These findings are essential for guiding and improving the already existing child welfare policies and practices regarding the length of stay in congregate care settings as well as providing supportive services to children who are already placed or at risk of being placed in this type of residential setting. This quantitative study uses a descriptive-correlational approach to explore relationship between long-term exposure to congregate care and negative psychosocial outcomes for foster youth such as homelessness, incarceration, and substance use disorders. The hypothesis guiding this study is that long-term exposure to congregate care places foster children at greater risk for certain adverse life outcomes. Secondary data was obtained from national databases which includes the National Survey of Child and Adolescent Well-Being (NSCAW) as well as the Mental Health Service Use of Youth Leaving Foster Care (Voyages), 2001-2003.

ACKNOWLEDGEMENTS

I would like to express my deepest gratitude for every individual who helped in the development and completion of this project. These individuals include Armando Barragán, M.S.W. Research Coordinator and professor at California State University San Bernardino, Dr. Anissa Rogers, Research Supervisor at California State University San Bernardino. And of course, my brilliant and supportive spouse, Abraham Acklin. Thank you for your encouragement and unwavering belief in me, and all the cups of coffee.

DEDICATION

This project is dedicated to the children and adult survivors of the child welfare system. You matter.

TABLE OF CONTENTS

ABSTRACT	iii
ACKNOWLEDGEMENTS.....	iv
LIST OF TABLES	vii
CHAPTER ONE: INTRODUCTION	1
Problem Formulation.....	1
Purpose of the Study.....	2
CHAPTER TWO: LITERATURE REVIEW.....	6
Adverse Economic and Psychosocial Outcomes for Foster Youth in Congregate Care	9
Incarceration	9
Theories Guiding Conceptualization of the Study	12
Summary	14
CHAPTER THREE: METHODS	15
Introduction.....	15
Study Design.....	15
Protection of Human Subjects	17
Measures	17
Summary	18
CHAPTER FOUR: RESULTS.....	20
CHAPTER FIVE: DISCUSSION	25
Summary Findings.....	25
Limitations of the Study.....	25
Implications for Social Work Practice.....	27

Implications for Future Research	28
Conclusion	28
APPENDIX A: DATA COLLECTION GUIDE	29
APPENDIX B: IRB APPROVAL LETTER	31
REFERENCES	33

LIST OF TABLES

Table 1. Pearson R Correlation Coefficient Using NSCAW Data	21
Table 2. Pearson R Correlation Coefficient Using Voyages Data.....	22
Table 3. Bivariate Chi-Square Analysis Using NSCAW Data	23
Table 4. Bivariate Chi-Square Analysis Using Voyages Data.....	24

CHAPTER ONE

INTRODUCTION

Problem Formulation

Congregate care is considered the highest level of care available for children in the foster care system. This type of out-of-home setting serves foster children who exhibit severe emotional and/or behavioral issues. The children placed in these facilities receive intensive therapeutic services that match their individual needs (National Congress of State Legislatures [NCSL], 2020). These settings are restrictive environments with access to staff members 24 hours a day that provide non-medical care (California Department of Social Services [CDSS], 2021). These facilities can vary from single story residential homes to large facilities and have different specializations such as providing intensive care for children belonging to varying age groups, providing shelter services for runaway or homeless youth, and as placement for minor and non-minor parents (CDSS, 2021). These placements are used as a last resort when the child's emotional and/or behavioral needs warrant 24-hour care that cannot safely be provided in a foster home setting (Ryan et al., 2008). Group home placements are meant to provide intensive services to children to help stabilize mental health concerns and negative behaviors so that the children can successfully return to and thrive in a more natural home setting such as a foster home.

Although children are meant to benefit from congregate care settings, there is evidence to suggest that the foster children who live in them are at

greater risk for negative economic and psychosocial outcomes such as homelessness, incarceration, and substance use disorders after aging out of foster care (Administration of Children and Families [ACF], 2020). Foster children living in congregate care settings are more likely than children living in relative or non-relative foster homes to experience mental health issues, use psychotropic medications, adopt deviant attitudes and behaviors, seek out deviant peers, experience disruptions in attachment, lack supportive long-term connections, have a lack of nurturing parenting, have impairments in emotional and social development, are more isolated from biological family, and have lower chances of permanency outcomes (Ryan et al., 2008).

Purpose of the Study

The purpose of this study was to identify relationships between prolonged exposure and/or multiple placements in congregate care and substance use disorders for foster children to further inform the thoughtful development and implementation of policies and practices within child welfare. Congregate care is a term used to describe a shared housing placement for foster children, and is also known as a group home, residential treatment, or a short-term residential therapeutic program (STRTP). These names are used interchangeably for the specific purpose of this study. Extended or prolonged stays in congregate care are placements lasting longer than six months and/or multiple placements in congregate care. The association between foster children and challenges in early adulthood have been thoroughly studied; however, little is known about the long-

term effects of placing children in congregate care settings for an extended period of time and/or multiple congregate care placements. Although there are current state laws that guide and dictate how long a child should stay in these types of settings, children often linger there for a much longer time, which can span years and multiple different placements in this type of setting (CDSS, 2021). Reducing or prohibiting the amount of time a child spends in congregate care has the potential to increase the quality of life for foster children, reduce overcrowding in jails in an already overburdened criminal system, and potentially save millions of dollars in social welfare costs that are currently expended in public assistance programs including housing, unemployment, rehabilitation, mental health treatment, hospitalization, and incarceration.

The research question guiding this study is, “does long-term exposure to congregate care place foster children at greater risk for incarceration?” To address the research question, this study aims to explore the relationship between long-term exposure and/or multiple placements in congregate care and certain adverse psychosocial outcomes such as involvement with the criminal justice system through incarceration. Correlational analyses using national data sets will shed light on the scope of the problem and offer insights into interventions and gaps in knowledge to help mitigate issues for children in congregate care.

Significance of the Project for Social Work. The findings for this quantitative study are beneficial on both macro and micro levels for thousands of children who reside within the foster care system. On a micro level, understanding the effects of long-term exposure to congregate care settings can impact people in many ways. For example, this understanding can assist social workers and other helping professionals in customizing individual treatment plans and providing supportive services. This understanding can also assist social workers in establishing preventative measures that help children transition out of residential settings, provide supportive services after their transition out of congregate care, and/or keep them from being placed in this type of setting in the first place. Ultimately, the long-term goal for understanding the impacts of long-term exposure to congregate care settings is for a reduction of certain adverse life outcomes for former foster youth.

On a larger, macro scale, the findings of this data can be used to solidify the reasoning behind modifying already existing child welfare policies and practices regarding the length of stay in congregate care settings. Congregate care is very expensive and reducing the length of stays in congregate care settings will have a substantial effect on the fiscal budget of child welfare departments which could have far-reaching effects if a portion of that money can be reallocated to treatment and preventative services for children. This study will seek the answer to the following question: What effect does prolonged exposure to congregate care have on the psychosocial outcomes of former foster youth?

Additionally, this study will also seek to explore what increases the probability of successful psychosocial outcomes for former foster youth.

CHAPTER TWO

LITERATURE REVIEW

This chapter will explore the extent of the problem and impact of congregate care on foster youth. Imagine, for a minute, yourself as an 18-year-old young adult full of hope and excitement for the years ahead. College? Maybe. But the freedom! Oh, the freedom! You'll soon be able to make your own choices, do what you want to do, go where you want to go, and work where you want to work, and no one can tell you what to do anymore. You're probably smiling because some of it may have sounded familiar to you. Now I want you to imagine yourself again as an 18-year-old, but this time you've entered adulthood and you're scared. You're scared because you've spent the last decade of your life in foster care, and you don't know where you are going to live. You don't have a connection with foster parents because you don't have any- you've been living in a group home and the only people you know are the staff members who work there. Your parents have all but disappeared into a life of substance abuse and violence and you haven't seen them much or your other relatives in the past decade. You have no money. Your years of trauma have taken its' toll on your mental health as well as your grades and you don't qualify for college. So, what do you do? Where do you go? Thousands of kids with similar stories find themselves in this situation every year.

In 2019, a total of 43,823 children lived in congregate care settings (ACF, 2020). From 2014-2019, the average time children spent in congregate care was

eight months, and 24% of children living in congregate care spent more than one year there (NCSL, 2020). Additionally, children with a DSM diagnosis have experienced three or more placement moves in congregate care compared to other children without a diagnosis (ACF, 2015). Research is limited on the long-term effects of multiple placements within congregate care, however findings regarding congregate care and multiple placements episodes have similarities. According to one study, a higher number of placement episodes is associated with longer stays in congregate care. This is typically due to the severity of emotional and behavioral issues of the children whose needs require a more restrictive setting. These behaviors include property destruction, harm to self, harm to others, demonstrations of anger, lying, theft, running away, unpredictable and impulsive behavior, and inappropriate sexualized behavior (Boylan, 2014). Another study that had similar results stated that children living in congregate care have experienced more placement moves than foster children who have not lived in congregate care due to the severity of their emotional and/or behavioral issues (Shook, Goodkind, Pohlig, Schelbe, Herring, & Kim, 2011). A different study of children living in congregate care reported that by the time children reached 18.13 years old they had an average of 8.2 out-of-home placements. Additionally, 73% of the study sample reported that they have lived in a congregate care setting and spent 37% of their total time in foster care in residential care (Shook et al., 2011). One study found that foster youth who had spent more time in the child welfare system were more likely to have lived in

congregate care than foster children who have spent less time in the child welfare system (Shook, Goodkind, Pohlig, Schelbe, Herring, & Kim, 2011).

There have been many debates regarding the benefits versus the adverse effects of congregate care. Researchers have argued that extended stays in residential care raise concern over whether these settings are truly effective treatment settings for children. Another major concern is the limited number of available alternative placement settings for children requiring a higher level of care. In addition, researchers have questioned whether sound child welfare policies and practices are effectively benefitting foster children (James et al., 2012). The Continuum of Care Reform (CCR), also known as Assembly Bill 403, was signed into California legislation on October 15, 2015. CCR is a statewide effort to reform congregate care and states that residential care should be limited to short-term, therapeutic interventions. Since it was signed into state legislation, it has been implemented in California child welfare agencies as a measure to improve the quality of care and psychosocial outcomes for children (CDSS, 2021). However, if policies like the CCR have already been passed and implemented it is important to explore why some children continue to stay in congregate care settings for extended lengths of time, what is being done about it, and what can be improved to make outcomes more successful for former foster youth. To do this, barriers to policies like the CCR must be identified as well as possible solutions and alternatives. However, before that is done, there must be an established causal link between long-term exposure to congregate

care and adverse effects such as homelessness and incarceration for former foster youth in adulthood. This study builds on prior studies that seek to investigate the relationships between congregate care and adverse psychosocial outcomes as well as the effectiveness of congregate care. Specifically, this study focuses on former foster youth who report multiple or long-term placements in congregate care, and whether a relationship can be established between their extended time in congregate care and incarceration in adulthood. If such a link can be established, results of this study can inform the need for continued reform of existing national policies that govern the length of stays in residential care for foster children.

Adverse Economic and Psychosocial Outcomes for Foster Youth in Congregate Care

For the purpose of this study, the term adverse economic and psychosocial outcomes is referring specifically to incarceration. This does not encompass the various adverse outcomes that foster youth face such as homelessness, substance abuse, and barriers to resources, just to name a few.

Incarceration

Former foster youth are faced with many challenges once they leave foster care. From 2014 to 2018, 54% of former foster youth who reported living in congregate care experienced incarceration by the age of 19. These youth also experienced more out-of-home placements while in foster care and were more likely to face homelessness and incarceration as young adults as opposed to

children who were placed in foster family homes (ACF, 2019). In 2019, 17,563 foster youth emancipated from the foster care system when they were 18 years old, and an additional 2,902 youth emancipated at 19 and 20 years old (ACF, 2019). National data show that 36% of youth who exited the foster care system after the age of 17 reported living in group home settings (ACF, 2019). In a study with adolescent foster youth, it was found that youth placed in congregate care were more likely to become involved in the legal system in the next five years, than youth placed in foster homes (Lee et al., 2010). A similar study also reported a significant increase in involvement with the legal system associated with congregate care placements and attributed it to a variety of factors including negative peer contagion, which is the negative influence exerted on a child by his or her peers while placed in congregate care together (Ryan et al., 2008).

Additionally, studies show that the foster youth in congregate care settings are more than three times as likely to have a DSM diagnosis than foster youth who have not lived in congregate care (ACF, 2015).

Barriers to Short-Term Placements in Congregate Care. There are many reasons a child lingers in congregate care past the recommended six months such as a continued need for intensive treatment services. In these cases, the child's social worker and treatment team must make a decision to act in the best interest of the child. However, the lack of suitable alternative placements cannot be ignored and stems from issues within the larger systems. Alternative placements are difficult to come by and include intensive services foster care

(ISFC) homes, which also provide intensive services to children, but from inside of a foster family home setting (Southern Area Consortium of Human Services [SACHS], 2016). In a majority of cases, foster parents' inability or unwillingness to continue fostering children in their home lead to the children's placement in congregate care due to the children's intensive needs (Ryan, Marshall, Herz, & Hernandez, 2008). To address these needs, ISFC foster parents must receive special training, work with a specialized team, and have a willingness to foster children with emotional and/or behavioral concerns (SACHS, 2016).

Some argue that some former foster youth experience negative outcomes because in congregate care they become accustomed to highly structured environments with staff support as opposed to the limited support and less structured environment when they leave these placement settings (Boylan, 2014). Even with current policies and practices in place, former foster youth who report living in congregate care settings disproportionately experience negative economic and psychosocial outcomes in adulthood such as homelessness and incarceration. This means more must be done to decrease these effects both before and after foster care, and to decrease the likelihood that children will be placed in congregate care.

Research also points to insufficient preparation given to foster children before they transition out of foster care, and a lack of real-world experience due to being placed in congregate care (Havlicek, 2011). Some promising studies report that independent living services offered to foster children before and after

exiting foster care, in conjunction with financial assistance and through promoting higher education, increases the likelihood that these children will experience a successful transition into adulthood (Huang et al., 2021).

More research is needed on the economic and psychosocial effects in adulthood for foster children who have experienced multiple or extended placements in congregate care. The lack of research on the effects of congregate care hinders the social worker's ability to gain a clear understanding the issue which ultimately affects the social worker's ability to implement changes to existing policies and practices or to develop new and more effective ones.

Theories Guiding Conceptualization of the Study

The theories used to guide conceptualization in this study are ecological systems theory and conflict theory. By applying different theoretical lenses, a more comprehensive perspective was gained to help guide and understand the problem and study.

In the perspective of ecological systems theory, foster children are influenced by the various ecosystems around them. A foster child's placement setting is the most immediate and possibly the most influential on the child's psychosocial outcomes. In a congregate care setting, influence stems from those in their immediate vicinity. Some studies have linked negative outcomes for foster children in congregate care based on deviant peers and negative peer attitudes and influence in residential settings (Ryan et al., 2008). The individual experiences that a foster child has in each placement will have a lasting impact

on the child. Additionally, foster children are greatly impacted by the larger systems surrounding them such as the policies and practices of the child welfare system and federal guidelines that govern every aspect of their lives. Outside of this structured environment to which they have become accustomed to, some former foster youth struggle to adjust on their own.

Through the lens of conflict theory, foster children are disproportionately represented in the legal system and other adversities in adulthood such as homelessness and incarceration. This inequality represents a failing of the systems created to protect and care for foster children. Children placed in congregate care settings experience an increased chance of conflict, which in turn can affect their placement stability, which in turn increases their chance of involvement with the juvenile justice system, and ultimately influences what kind of choices they will make as adults (Phillips, 2016). To balance out these inequalities and shift the available resources and power back to foster children, it is important to identify issues involved in placement and provide practical and more effective solutions.

Empowerment theories are also helpful in guiding research on foster care placements such as congregate care. These theories, which are foundational for the social work profession, can be helpful in guiding research and the development and implementation of effective, empowerment-based policies and interventions in congregate care (Phillips, 2016).

Summary

This study sought to identify relationships between prolonged exposure to congregate care and incarceration for foster youth. By doing so, findings of this research can be used to inform the way policies are currently developed and implemented within child welfare on national and local scales. While similar studies have been previously conducted on outcomes of congregate care, the adverse effects of prolonged exposure to congregate care has been largely ignored. There are many barriers to researching this issue, however without first attempting to identify these barriers and/or gap of knowledge, the extent of the problem cannot be known. Through the lens of the ecological systems theory and conflict theory, this study sought to explore the relationships between extended placements in congregate care and incarceration for foster youth.

CHAPTER THREE

METHODS

Introduction

This research study seeks to identify the extent of the relationship between prolonged exposure, defined by extended length of stay and/or multiple placement episodes in congregate care, and incarceration for foster youth. This chapter provides a detailed description of how this study was conducted and is broken down into the following sections: Study design, data source, protection of human subjects, measures, and statistical analysis.

Study Design

The purpose of the research study was to explore the relationship between prolonged exposure and/or multiple placements in congregate care and adverse psychosocial outcomes for foster children to further push for more thoughtful development and implementation of policies and practices within child welfare. This quantitative study uses a descriptive-correlational approach to address the research question “does long-term exposure to congregate care place foster children at greater risk for incarceration?” Specifically, this study will explore relationships between extended stays in congregate care and the adverse outcome of incarceration. This research design was selected to shed light on the scope of the problem and offer insights into interventions and gaps in knowledge to help mitigate issues for children in congregate care.

The independent variable in this study is a prolonged length of stay in congregate care, which, for the purposes of this study, is defined as any lengths of stay lasting longer than 6 months and/or multiple episodes of placement in congregate care whether or not the placements were consecutive or sporadic. The dependent variable is the adverse psychosocial outcome for foster youth, specifically rate of incarceration and/or involvement in the justice system for foster youth.

A benefit for using secondary data for this research study is that it allows for a large sample size and provides objective results. However, a significant limitation for using secondary data is that it does not provide contextual background to describe the social situations behind adverse outcomes. Secondary data also does not explain other environmental factors that can be possible attributes to this phenomenon such as quality of care.

Data Source. Publicly available secondary data was used to address the research question for this study. Data for this study was collected from the National Survey of Child and Adolescent Well-Being (NSCAW) as well as the Mental Health Service Use of Youth Leaving Foster Care (Voyages), 2001-2003.

NSCAW is a nationwide survey of children involved in the child welfare system. This survey focuses on outcomes with a goal of linking child welfare outcomes with the experiences of those inside of the child welfare system and other micro and macro factors. NSCAW data is separated into three cohorts and is an ongoing study. The NSCAW cohort consists of 6,231 children, ages 0-14.

Of these children, 727 have been in out-of-home placement for about 12 months (Research Triangle Institute International, 2008).

The Mental Health Service Use of Youth Leaving Foster Care (Voyages) was a study conducted to identify the use of mental health services for 406 former foster youth in the State of Missouri. Each child was interviewed near their 17th birthday and re-interviewed, if possible, every 3 months until their 19th birthday (McMillen, Scott, & Auslander, 2010).

Protection of Human Subjects

This study used secondary data for foster youth and former foster youth ages 0 through 19 years. All raw data obtained for the purposes of this study are kept confidential and anonymous. Variables describing gender, age, placement information, and foster youth outcomes were utilized for this sole purpose of this study. Names and other personally identifiable information were not used. All raw data that was obtained for this study was stored on a password protected hard drive and accessed on the researcher's own private computer. One year after completion of the study, all raw data files will be deleted from the hard drive. Informed consent was not obtained by the researcher, since the data used for the purposes of this study is made publicly available on the National Data Archive on Child Abuse and Neglect (NDACAN) and does not include identifying information.

Measures

This study used secondary data from foster youth and former foster youth between the ages of 0 to 19 years collected through the NSCAW and Voyages

surveys. The variables used to measure the independent and dependent variables are how many months has the youth been in a residential treatment center and/or group home between 17 and 19-years-old, has the youth been arrested between 17 and 19-years old, number of times the child has been admitted to a residential treatment center and/or group home, and the number of times the child has been arrested.

Statistical Analysis. Statistical analysis software programs such as SPSS were used to analyze data for this study. This study uses descriptive statistics and limited regression analysis to better understand the relationship between foster youth living in congregate care and incarceration. A Chi-Square test was used to test the differences in proportions between foster youth who reported living in congregate care over a length of time and foster youth reported being arrested. A Pearson's correlation coefficient was calculated to measure the direction and strength of these relationships. It is important to note that regardless of the relationship established by the variables, it does not imply causation (Mertler, 2016).

Summary

This research study uses a descriptive-correlational approach to seek to identify the extent of the relationship between the length of stay and/or multiple placements in congregate care and incarceration for foster youth. The use of large national data sets improves on prior studies by offering more

representative, generalizable samples from which data on adverse outcomes of placement can be explored.

CHAPTER FOUR

RESULTS

The outcome of this study provided contradictory results as you will see below. After analysis, it was determined that the results using the NSCAW data were insignificant and in contrast, the results using the Voyages data did produce significant results. The possible explanations for this will be explored in more detail in the discussion section of this study.

Table 1 illustrates the use of the Pearson r correlation coefficient in SPSS using the NSCAW data. The sample size consisted of 727 children and identifies the variables as the number of times the child was admitted in a residential treatment center/group home and the number of times the child has been arrested. Although these numbers indicate that there is a moderate to strong positive correlation between both variables, the results were ultimately non-significant.

Table 1. Pearson R Correlation Coefficient Using NSCAW Data

		#times ch admtd res trtmnt/grp home	#xs ch arrested
#times ch admtd res trtmnt/grp home	Pearson	1	.184
	Correlation		
	Sig. (2-tailed)		.193
	N	52	52
#xs ch arrested	Pearson	.184	1
	Correlation		
	Sig. (2-tailed)	.193	
	N	.52	727

Table 2 illustrates the use of the Pearson r correlation coefficient in SPSS using the Voyages data. The sample size consisted of 2020 youth and identifies the variables as the number of months the youth has been in a residential center/group home between 17 to 19-years-old and has the youth ever been arrested between 17 to 19-years-old. The correlation coefficient indicates that there is a significant relationship between the two variables and is a weak to moderate positive correlation. This relationship indicates that when the number of months a youth lived in a group home increased, the number of times they were arrested also increased.

Table 2. Pearson R Correlation Coefficient Using Voyages Data

		How many months has yth in residential trtmnt cntr or grp home between 17 and 19?	Has yth been arrested between 17 and 19?
How many months has yth in residential trtmnt cntr or grp home between 17 and 19?	Pearson Correlation	1	.089**
	Sig. (2-tailed)		<.001
	N	2020	2020
Has yth been arrested between 17 and 19?	Pearson Correlation	.089**	1
	Sig. (2-tailed)	<.001	
	N	2020	2020

Note: Correlation is significant at the 0.01 level (2-tailed)

Table 3 illustrates the use of a bivariate Chi-Square analysis using the NSCAW data. In this table the p value indicates that there is a significant relationship between the number of times a child was admitted to a group home and the number of times they were arrested. However, it is important to note that there was a 95.2% count of less than 5 which means that there was not enough data to rely on the accuracy of this measure.

Table 3. Bivariate Chi-Square Analysis Using NSCAW Data

	Value	Df	Asymptotic Significance (2-sided)
Pearson Chi-Square	65.156*	30	<.001
Likelihood Ratio	19.377	30	.932
Linear-by-Linear Association	1.720	1	.190
N of Valid Cases	52		

Note: 40 cells (95.2%) have expected count less than 5. The minimum expected count is .02

Table 4 illustrates the use of a bivariate Chi-Square analysis using the Voyages data. In this table the p value indicates that there is a significant relationship between how many months the youth was in a group home between 17 to 19-years-old and if the youth was arrested between 17 to 19-years-old. This test had a 1.9% expected count of less than 5 indicating some inaccuracy with the result.

Table 4. Bivariate Chi-Square Analysis Using Voyages Data

	Value	Df	Asymptotic Significance (2-sided)
Pearson Chi-Square	101.782*	25	<.001
Likelihood Ratio	97.872	25	<.001
Linear-by-Linear Association	15.998	1	<.001
N of Valid Cases	2020		

Note: 1 cells (1.9%) have expected count less than 5. The minimum expected count is 4.85

CHAPTER FIVE

DISCUSSION

Summary Findings

This study analyzed the relationship between the length of time spent in congregate care and incarceration for foster youth. The study found contrasting evidence that there is a significant relationship between the variables. Using the NSCAW data for children ages 0-14, the results were not significant and further showed that there is not enough data to get an accurate measure. Using the data from the Voyages study for youth ages 17 to 19-years-old, the results showed a significant relationship between the length of time spent in congregate care and an increased risk for incarceration. However, the results also showed a low expected count (1.9%) which could skew the results slightly.

Limitations of the Study

The researchers were able to find at least two limitations of this study as they collected data and analyzed the sample. To begin with, it was found that there was simply no data found regarding the total length of time a child has spent in residential care. Some examples of several common data points were the number of placements in out-of-home care, number of placements in residential care, whether the child was currently living in a residential setting, or if the child has lived in a group home. There was no data found on the accumulative time the child has spent in all of their residential care settings. In addition to the datasets collected for this study, the researcher obtained dataset

#256 and #259 from the NYTD and dataset #57 from Adoption and Foster Care Analysis Reporting System (AFCARS), however there were no variables discovered in any of these sources that could be used for this study. This gap in knowledge could be critical in determining how many children linger in congregate care for extended periods of time and what kind of outcomes those youth experience in adulthood versus youth who have spent less time in a group home. Additional studies may wish to focus on bridging this gap in knowledge and by doing so it serve to identify what the barriers are, what kind of services are necessary to help prevent extended stays in residential care, what kind of resources are needed for former foster youth, and what is the potential financial impact on the child welfare and public welfare systems.

A second limitation to the study was the possibility that the findings of the study was not accurate due to sampling errors. In regard to the NSCAW data, the prevalence of missing data cannot be ignored. While the total number of participants was high, most of the participants chose not to answer the question. According to the NSCAW guide sheet, NSCAW uses -7 as a legitimate skip value and is not a valid response. However, identifying how many participants actually answered the question is not possible until running an analysis. Despite the limited generalizability of the study, the data implicated important themes which can be valuable for understanding the relationship between length of stay in residential care and adverse outcomes for foster youth.

Comparison of Study with Prior Research. In previous study, it has been indicated that there was no significant finding between placement in congregate care and poor outcomes for foster youth (James, Roesch, & Zhang, 2011). In comparison to the current study, this result is similar to the results of the NSCAW data. In a similar fashion, the study conducted by the Administration of Children and Families (2020) showed that an extended stay in residential care resulted in lower incarceration rates than youth who have spent less than one year in residential care.

Implications for Social Work Practice

This study can be applied to social work practice on a practical level. While working with children and families, it is important for social work practitioners to keep in mind the possible future outcomes for children living in residential care settings. Social workers have the ability to ensure that the necessary treatment services are being provided to the child and that the child is aware of what services are beneficial to their needs. Social workers also have the unique ability to support and empower children by linking them to resources that will enable them to learn independent living skills and to encourage them to be good advocates for their needs. By doing so foster youth will be better equipped to deal with issues as they arise in adulthood which can increase the possibility for positive life outcomes.

Implications for Future Research

As residential care settings continue to be a viable placement option for many children, it is important to monitor the effectiveness of these type of settings to better understand the relationship with adverse outcomes for foster youth. The available research on residential care settings is limited and more research is needed on the total amount of time spent in congregate care across all placement episodes throughout the life of the case. Future research may help develop programs and modify existing ones to better serve these children. By doing so it may be possible to have a significant financial impact on the existing systems in place.

Conclusion

This research has shown that while there may be a significant relationship between the length of time spent in congregate care and adverse outcomes such as incarceration, more research is necessary to bridge the gap in knowledge on the subject. The limited availability of data and willing participants are barriers to providing effective and meaningful answers to the issue. Since at this time there is a gap in knowledge, it is critical for social work practitioners to consider the future outcomes for the children living in residential care while working with them to give them every possible chance for a successful future.

APPENDIX A
DATA COLLECTION GUIDE

This is a quantitative study and uses secondary data. The data sources are publicly available secondary data from National Data Archive on Child and Adolescent Well-Being (NSCAW) as well as the Mental Health Service Use of Youth Leaving Foster Care (Voyages), 2001-2003. The data collection tool consists of the following demographic data:

- Genders; male and female
- Ages 0-19 years old. It is important to note that the NSCAW study focused on ages 0-14, and those in the Voyages study focused on ages 17-19.
- Placement information, i.e., number of placements in congregate care and/or total number of placements in congregate care, type of placement, shelter care
- Behavioral problems
- Psychosocial outcomes including incarceration, substance use, homelessness, victim of crime
- Mental Health services
- Type of abuse suffered
- Medical issues
- Services/community resources
- Caregiver, relative, teacher reports

APPENDIX B
IRB APPROVAL LETTER

The IRB application was submitted and approved. IRB-FY2022-94. Since the data used in this study is made publicly available by NDACAN and does not include any identifying information, institutional review was not required. There are no known conflicts of interest.

REFERENCES

- Administration of Children and Families. (2020, February 18). National Youth in Transition Database Report to Congress. Retrieved March 07, 2021, from <https://www.acf.hhs.gov/media/9280>
- Administration of Children and Families. (2020, June 23). The AFCARS (Adoption and Foster Care Analysis Reporting System) Report. Retrieved May 16, 2021, from <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport27.pdf>
- Administration of Children and Families. (2015, May 13). A national look at the use of congregate care in child welfare. Retrieved May 16, 2021, from https://www.acf.hhs.gov/sites/default/files/documents/cb/cbcongregatecare_brief.pdf
- Administration of Children and Families. (2020, February 18). National Youth in Transition Report to Congress. Retrieved May 16, 2021, from https://www.acf.hhs.gov/sites/default/files/documents/cb/nytd_report_to_congress.pdf
- Administration of Children and Families. About NYTD Fact Sheet. Retrieved October 25, 2021, from <https://www.acf.hhs.gov/cb/fact-sheet/about-nytd>
- Administration of Children and Families. About AFCARS Fact Sheet. Retrieved October 25, 2021, from <https://www.acf.hhs.gov/cb/fact-sheet/about-afcars>

Administration of Children and Families. National Survey of Child and Adolescent Well-Being (NSCAW). Retrieved March 26, 2023, from

<https://www.acf.hhs.gov/opre/project/national-survey-child-and-adolescent-well-being-nscaw-1997-2014-and-2015-2024#:~:text=%E2%80%8B%E2%80%8B%E2%80%8B%E2%80%8B%E2%80%8B,investigation%20by%20Child%20Protective%20Services.>

California Department of Social Services. Group Homes. Retrieved March 07, 2021, from [https://www.cdss.ca.gov/inforesources/foster-care/group-](https://www.cdss.ca.gov/inforesources/foster-care/group-homes)

[homes](https://www.cdss.ca.gov/inforesources/foster-care/group-homes)

California Department of Social Services. Continuum care reform. Retrieved May 16, 2021, from [https://www.cdss.ca.gov/resource-families/continuum-of-](https://www.cdss.ca.gov/resource-families/continuum-of-care-reform#:~:text=On%20October%2011%2C%202015%20Governor,for%20youth%20in%20foster%20care.)

[care-](https://www.cdss.ca.gov/resource-families/continuum-of-care-reform#:~:text=On%20October%2011%2C%202015%20Governor,for%20youth%20in%20foster%20care.)

[reform#:~:text=On%20October%2011%2C%202015%20Governor,for%20youth%20in%20foster%20care.](https://www.cdss.ca.gov/resource-families/continuum-of-care-reform#:~:text=On%20October%2011%2C%202015%20Governor,for%20youth%20in%20foster%20care.)

California Department of Social Services. Facility types. Retrieved May 16, 2021, from [https://www.cdss.ca.gov/inforesources/childrens-](https://www.cdss.ca.gov/inforesources/childrens-residential/resources-for-providers/facility-information)

[residential/resources-for-providers/facility-information](https://www.cdss.ca.gov/inforesources/childrens-residential/resources-for-providers/facility-information)

California Department of Social Services. National Youth in Transition Database.

Retrieved October 25, 2021, from

<https://www.cdss.ca.gov/inforesources/foster-care/national-youth-in-transition-database>

- Famalette Boylan, M. (2015). *The transition process out of group home care* (Order No. 3682273). Available from ProQuest Dissertations & Theses Global: The Humanities and Social Sciences Collection. (1657427438). Retrieved from <http://libproxy.lib.csusb.edu/login?url=https://www-proquest-com.libproxy.lib.csusb.edu/dissertations-theses/transition-process-out-group-home-care/docview/1657427438/se-2?accountid=10359>
- Havlicek, J. (2011, July). Lives in motion: A review of former foster youth in the context of their experiences in the child welfare system. *Children and Youth Services Review*, 33(7), 1090-1100. <https://doi.org/10.1016/j.childyouth.2011.02.007>
- Huang, H., Li, Y., Campbell, J. M. (2021, February 10). Do independent living services protect youth aging out of foster care from adverse outcomes? An evaluation using national data. *Childhood Maltreatment*, <https://doi-org.libproxy.lib.csusb.edu/10.1177/1077559521992119>
- James, S., Zhang, J. J., Landsverk, J. (2012, February 07). Residential care for youth in the child welfare system: Stop-gap option or not? *Residential Treatment for Children & Youth*, 29(1), 48-65. <https://doi-org.libproxy.lib.csusb.edu/10.1080/0886571X.2012.643678>
- James, S., Roesch, S., Zhang, J. J. (2011, October 13). Characteristics and behavioral outcomes for youth in group care and family-based care: A propensity score matching approach using national data. *Journal of*

Emotional and Behavioral Disorders, 20(3), 144-156. <https://doi-org.libproxy.lib.csusb.edu/10.1177/1063426611409041>

Kushel, M. B., Yen, I. H., Gee, L., Courtney, M. E. (2007, October 01).

Homelessness and health care access after emancipation results from the midwest evaluation of adult functioning of former foster youth. *Archives of Pediatrics and Adolescent Medicine*, 161(10), 986-993.

<http://doi.org/10.1001/archpedi.161.10.986>

Lee, B. R., Bright, C. L., Svoboda, D. V., Fakunmoju, S. & Barth, R. P., (2010, November 08). Outcomes of group care for youth: A review of comparative studies. *Research on Social Work Practice*, 21(2), 177-189.

<https://doi-org.libproxy.lib.csusb.edu/10.1177/1049731510386243>

McMillen, C., Scott, L., & Auslander, W. (2010, n.d.). Mental health service use of youth leaving foster care (Voyages) 2001-2003 [Dataset]. *National Data Archive on Child Abuse and Neglect*. <https://doi.org/10.34681/2KEZ-3840>

Mertler, Craig A., (2016). *Introduction to educational research* (new edition).

Thousand Oaks, CA: SAGE Publications.

National Congress of State Legislatures. (2020, October 30). Congregate Care, Residential Treatment, and Group Home State Legislative Enactments 2014-2019. Retrieved May 16, 2021, from

<https://www.ncsl.org/research/human-services/congregate-care-and-group-home-state-legislative-enactments.aspx>

National Survey of Child and Adolescent Well-Being. (n.d.). Before you begin: A guide sheet for exploring NSCAW I and II [Fact Sheet]. Administration of Children and Families.

[*Guide sheet for exploring NSCAW I and NSCAW II-2014-05-14.pdf](#)

Philips, J. (2016, May). An exploration of foster care group homes through the perspectives of social work professionals (Honors Thesis). Retrieved May 16, 2021, from

<https://digital.library.txstate.edu/bitstream/handle/10877/6134/PhillipsJordan.pdf?isAllowed=y&sequence=1>

Research Triangle Institute International. (2008, April). The National Survey of Child and Adolescent Well-Being I (NSCAW I), General Release- Waves 1-5 (Version 5.4) [Dataset]. *National Data Archive on Child Abuse and Neglect*. <https://www.ndacan.acf.hhs.gov/datasets/dataset-details.cfm?ID=132>

Ryan, J. P., Marshall, J. M., Herz, D., Hernandez, P. D. (2008, September). Juvenile delinquency in child welfare: Investigating group home effects. *Children and Youth Services Review*, 30(9), 1088-1099.

<https://doi.org/10.1016/j.childyouth.2008.02.004>

Shook, J., Goodkind, S., Pohlig, R., Schelbe, L., Herring, D., Kim, K. (2011, July 05). Patterns of mental health, substance abuse, and justice system involvement among youth aging out of child welfare. *American Journal of*

Orthopsychiatry, 81(3), 420-432. [https://doi-
org.libproxy.lib.csusb.edu/10.1111/j.1939-0025.2011.01110.x](https://doi-org.libproxy.lib.csusb.edu/10.1111/j.1939-0025.2011.01110.x)

Southern Area Consortium of Human Services. (2016, February). SACHS literature review: Alternatives to congregate care. Retrieved May 16, 2021, from [https://theacademy.sdsu.edu/wp-
content/uploads/2016/03/alternatives-congregate-care-feb-2016.pdf](https://theacademy.sdsu.edu/wp-content/uploads/2016/03/alternatives-congregate-care-feb-2016.pdf)