

ABOUT THE ANNIE E. CASEY FOUNDATION

The Annie E. Casey Foundation is a private philanthropy that creates a brighter future for the nation's children by developing solutions to strengthen families, build paths to economic opportunity and transform struggling communities into safer and healthier places to live, work and grow. For more information, visit the Foundation's website at www.aecf.org.

© 2017, The Annie E. Casey Foundation, Baltimore, Maryland

THE JIM CASEY YOUTH OPPORTUNITIES INITIATIVE

works to improve outcomes for all young people in the United States ages 14 to 26 who have spent at least one day in foster care after their 14th birthday — a population of nearly 1 million. Working with 17 sites across the country, the Jim Casey Initiative influences policy and practices to improve outcomes for teenagers and young adults who have experienced foster care as they transition to adulthood.

Contents

5	>	Introduction
8	>	The Latest Research on Adolescent Brain Development
Ι2	>	Promoting Healthy Brain Development for Youth in Foster Care
18	>	Promoting Development in Four Focus Areas
27	>	Conclusion
29	>	Glossary
30	>	Acknowledgments
30	>	Resources
3 I	>	Endnotes



In 2011, the Jim Casey Youth Opportunities Initiative launched Success Beyond 18, a campaign to raise the age of foster care to 21 nationwide while making the foster care system better and more supportive of adolescents and emerging adults. The campaign began with the publication of a summary of new research¹ on the remarkable period of brain development that occurs during adolescence and young adulthood, and the opportunity of that developmental period to help young people who have been in foster care grow through new experiences and heal from past adversity. The new research showed that adolescents still have a lot of growing to do during late puberty and beyond, and that child welfare systems may be sending them out on their own too early and without necessary resources, relationships and opportunities to thrive.

Twenty-four states and the District of Columbia now have approved plans to provide foster care for young people beyond the age of 18,² adding years of potentially vital support during this time of development. But in too many cases, adding years to eligibility for foster care is not leading to a permanent, rock-solid connection with a caring adult, a connection that is critical to lasting well-being. With or without the extension of foster care, child welfare systems have a tremendous but unrealized opportunity to improve their practices by embracing the power of adolescent brain





development to promote better outcomes in every facet of a young person's life. Most importantly, child welfare service providers must focus on securing permanent families for more young people — even for older youth who are on the brink of adulthood — by understanding and responding to the many layers of each young person's arc of development and emerging identity, from race and ethnicity to economic class to sexual orientation and gender identity. For those young people who leave foster care without legal permanence, child welfare professionals should at least facilitate the relational permanence of durable family-like connections to increase their well-being.

Adolescent development is shaped by opportunities to foster healthy relationships, take risks, make important decisions and accept new responsibilities. All too often, the critical demands to provide for the immediate, basic needs of young people in foster care fall on child welfare professionals, who then have to scramble to provide a safe place for the child to live, meet licensing requirements and make arrangements for medical services and

school. Consumed with these tasks, agencies may lack the capacity to enable young people to have the normal growing-up experiences that will help them develop a stronger sense of self-efficacy, belonging, attachment and identity and that will address their strengths and needs as individuals. Yet it is this very approach that builds the adolescent brain and the ability of young people to navigate their world.

Fundamental to this report is the belief that achieving the best results requires treating each youth as a still-forming individual with purpose and potential and making sure all young people, regardless of the color of their skin or where they grow up, have an equitable chance to reach that potential. About 55 percent of children in the U.S. foster care system are children of color,3 and those children generally experience poorer outcomes than white children. To improve outcomes for children of color, child welfare professionals must understand how structural and institutional racism operates within our society and within the child welfare system and affects young people and their families. Practitioners also should be

aware of the role unconscious and implicit bias can play in their own decisions and actions and understand that experiences with racism and internalized oppression may negatively influence the way young people of color view themselves. Most of all, practitioners must be aware of how important access to opportunities is to helping a young person develop and grow. Only through awareness of these dynamics can professionals and caregivers understand young people in the fullness of their identity, experiences, values and customs.

Research reveals the critical need for effective practices in addressing the trauma, loss and grief that older youth and young adults who have been in foster care are likely to have experienced through no fault of their own. Studies also show the need to address the additional harm of racism, disparate treatment and experiences that children of color face in the foster care system, and that may serve as barriers to their ability to heal from trauma.

This paper offers recommendations for child welfare professionals, caregivers and systems to use this research to work effectively with youth in or emerging from foster care in the four focus areas of the Jim Casey Initiative's work — permanence, educational attainment and economic security, stable housing and supports for young parents. While most of our recommendations are for individuals working with young people — child welfare caseworkers and service providers, judges, lawyers, caregivers, teachers, coaches and mentors — systems and organizations are key to supporting these practices on a broad scale. Success in these focus areas requires that child welfare and related systems make five key changes. We hope they will use this paper as a roadmap to do so:

Train and equip practitioners to understand the role of trauma and racism, and employ effective practices to help young people understand their experiences and develop effective strategies for healing and growth.

Prioritize legal permanency for all youth. This requires creating an intentional, deliberate culture of recognizing and advocating against old attitudes and assumptions, as well as stereotypes that have often negatively affected reunification, the type of home where a child is placed, adoption and length of stay for older youth and youth of color. Use disaggregated data and racial impact analysis tools to hold the system accountable and develop strategies for improvement.

Understand that foster care carries a level of stigma, affecting successful educational outcomes and opportunities for employment. Promote a range of career pathways, from student leadership opportunities to community service, job shadowing and internships, and build connections with guidance counselors and coaches to create on-ramps to college and a career.

Build connections with local housing providers to ensure adequate and safe housing for youth while encouraging youth choice and voice. Understand that race and ethnicity stubbornly remain predictors of where one can live and be accepted by the local community.

Understand that young parents and their children are both in important stages of their brain development. Support practitioners to help young

parents continue to make progress toward their educational and employment goals, build self-sufficiency, maintain healthy relationships and support them as the primary nurturers of their children.

Terms used throughout the paper are defined in a glossary at the end of the text, followed by a resources section to help those who work with young people learn more.

The Latest Research on Adolescent Brain Development

Over the past two decades, significant scientific progress has been made in understanding the changes to the brain that occur during adolescence. In contrast to what was believed, we have learned that the brain continues developing well beyond age 6. Indeed, we experience another major developmental window during adolescence that rivals the growth spurt of early childhood. We know a young person's brain continues to develop through the mid-20s, and we are gaining insights into how the changes affect risk taking, emotional regulation and the ability to connect socially and emotionally with others. We also know that with knowledge of how the adolescent brain matures, adults can do more to not only provide a safer environment for taking risks that meet adolescents' developmental needs but also reduce dangerous behaviors that jeopardize healthy development.

Research shows that humans have a unique ability to mold their own brains through thinking, planning, learning and acting, known as "neuroplasticity," which

is especially malleable during adolescence. This growth in adolescence depends on experiences — trying new things, making decisions, learning skills and forming memories — that build connectivity in the brain and sense of self in the person. This ability also means the adolescent brain can be rewired to heal from earlier trauma, a critical point of opportunity for young people involved in the child welfare system.6 As humans develop from infancy through end of life, they go through approximately seven stages of growth.7 Emerging adulthood describes the gradual transition young people make to adulthood from about age 18 through 25. This process is marked by gradual independence from family in the areas of residence, employment, education, finances, romance and parenting.8

Despite what we know about emerging adulthood and gradual independence, however, young people in foster care often are forced into a rapid transition. While they are in the foster care system, decisions are typically made for them, often without their input. And when they age out of the foster care system at 18 or 21, young people are often suddenly and completely on their own, without having had the opportunity to build skills and experience self-reliance within a safe, nurturing environment.

HOW THE BRAIN DEVELOPS

The brain in adolescence might be compared to a sprinter who is gradually learning to become a marathon runner. During adolescence, different regions of the brain begin to integrate and the prefrontal cortex starts an accelerated pace of development. Adolescent brains are composed

"Teenagers are going to make a lot of mistakes. They really don't know why they did something. They need someone who is not going to quit on them."

— Jim Casey Initiative Young Fellow

The prefrontal cortex houses our abilities to



> Balance our emotions



> Think critically and rationalize for steady decision making



> Plan for the future



> Organize our thoughts



> Regulate impulses



> Be flexible and adapt to changing situations



> Reflect and be introspective



> Exercise empathy

mostly of gray matter, which contains neurons or cells that control thought, perception, motion and bodily functions. Compared with the adult brain, the adolescent brain has much less white matter, which is the connective wiring that helps information flow efficiently from one part of the brain to the other.9 This means that adolescents still rely heavily on the emotional center of the brain for decision making, reacting to rapid-firing pleasurable emotions and rewarding sensations — the sprint. But as they move through this period of development, young people gradually begin to shift more to the prefrontal cortex when making decisions and navigating their worlds, taking context, experience and future implications into consideration in a way that a marathon runner might when pacing and fueling herself for the long run. Perhaps most importantly, as the brain develops, different regions of the brain connect and communicate with each other in a process known as neural integration. One of the

most highly integrated parts of the brain is the prefrontal cortex.

This shift in development happens over time, and looks different for different individuals. The right opportunities can make the most of a young person's sprinting brain — rewarding accomplishments, providing new outlets for affirmation from peers — while also building the marathon skills of going a little further each time, training and learning from mistakes. Strong connections, healthy habits and positive relationships are like having the right shoes and optimal weather for the race; conversely, chronic stress, trauma, the experience of institutional and internalized racial inferiority and unhealthy self-medication during adolescence serve as the hills, potholes and headwinds in the way of reaching the finish line.

The evolution of the sprinting brain into the marathon-running brain is taking place over a longer period of years than

Three Major Systems Under Construction During Adolescence



ever before. Due to a number of suspected factors, including increased obesity, endocrine disrupters (such as pesticides) and family stress, it has been well documented that the onset of puberty starts earlier for adolescents — ages 9 to 12 — than it did in the past. ¹⁰ While adolescents may appear to physically mature faster than before, their brain development is spread out over a longer span of time. As a result, adults may assume that young people are more mature than they actually are — a phenomenon that research has shown is particularly true for young people of color. ¹¹

Three major aspects of the brain are especially active and undergoing changes during adolescence:¹²

Regulation

Neurological research shows us that young people can evaluate risks as well as adults; however, the intensity of dopamine — the pleasure chemical — flooding the brains can easily outweigh consideration of potential negative outcomes.¹³ Positive experiences during adolescence can "fortify healthy neural connections, develop executive function and stimulate learning and healing."¹⁴ Positive experiences that contradict the negative expectations of a child who has experienced trauma are critical to helping the brain readjust itself.¹⁵

• Relationships

During adolescence, young people experience heightened arousal in the brain regions that are sensitive to social acceptance and rejection. Adolescents are particularly attuned to emotional cues such as facial expressions. This means that adolescents actually learn more when they are with their friends and peers. Such influence can be used to help young people grow together in a nurturing, positive environment.

• Rewards

Adolescents are more receptive to reward-based learning than punishment-based learning. Rewards extend beyond gold stars and the promise of a new toy. Things such as peer approval, acceptance and praise trigger a flood of dopamine into the brain, reinforcing actions and behavior.

Because the brain is rapidly growing during this time, adolescent and young adult brains are particularly sensitive and experience a "reminiscence bump" in which memories are more deeply imprinted on their brains, making our teenage years the most memorable.16 Thanks to the neuroplasticity of the brain and the reminiscence bump, learning things as well as developing habits and thought patterns throughout adolescence can deeply shape our identity and stick with us far into adulthood. It also means that the use of substances such as alcohol and other drugs during adolescence can have an even more negative effect more quickly on young people than on adults. Alcohol and drugs disrupt the healthy development of the brain's ability to delay gratification and recognize and avoid unhealthy behavior, and can negatively

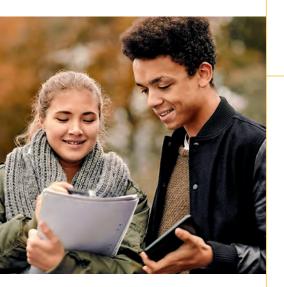
affect the way the reward system functions.¹⁷

The "stickiness" of memories and the key developmental changes happening during adolescence mean that the day-to-day relationship between child welfare professionals and young people matters a great deal. Reactions and actions from adults, both verbal and nonverbal, can have a magnified effect on the growing brain. Professionals and caregivers working with youth should keep the following in mind:

- Be consistent in your relationships with young people, emphasizing compassion, belief in their future and your high expectations of them.
- Be clear and honest about expectations and consequences if expectations are not met.
- Help young people understand and deal with the constant loss of caseworkers due to turnover and the loss of relationships with peers because of moves.
- Celebrate achievements and milestones
 big and small.
- Understand and talk with young people about what is going on in the brain and help them make sense of it.
- Have empathetic conversations with young people about real and/or perceived experiences with racism or discrimination.
- Encourage and acknowledge the novelty experiences young people crave: visiting new places, being encouraged and allowed to go places on their own, learning to drive and falling in love for the first time.

Sex Differences in Brain Development

Researchers at the National Institute of Mental Health found significant differences between females and males in the sequence and pace of development of the various brain regions during adolescence. Among the key findings is that females reach the halfway point in brain development just before 11 years of age, while males do so just before age 15. The study also concluded that a young woman reaches full maturity in terms of brain development between the ages of 21 and 22, while young men typically do not reach this point until nearly 30.18 There is little research on the intersection of gender identity/gender nonconformity and adolescent brain development, which likely has implications for practitioners working with transgender youth and for transgender youth themselves.



• Provide brain-building experiences, which are "stretch" activities that must be slightly beyond reach, yet not unattainable. Reexamine preconceived notions about what a particular young person is ready to do. Can you help her stretch by encouraging a first job that explores her passions? Offer a leadership role in a group? Arrange a public speaking opportunity?

The brain is a social organ, meaning that healthy brain development and overall well-being are dependent upon the quality and consistency of relationships. Adolescents and young adults are hardwired to be brave, try new things, take chances and push boundaries. Taking risks, experiencing success as well as failure and understanding consequences are essential to learning, building resilience and crafting identity. Youth in foster care, group placements or transitional housing need more opportunities to exercise risk and autonomy that are a normal part of growing up, such as staying overnight with a friend, applying to jobs and having romantic

relationships without fear of repercussions that jeopardize their basic stability and attachments. The Preventing Sex Trafficking and Strengthening Families Act of 2014 recognizes this by making clear that the well-being of young people in foster care must be grounded in a normalcy standard — providing them the same family support, opportunities, experiences and high expectations as all other young people in their communities.¹⁹

Promoting Healthy Brain Development for Youth in Foster Care

Promoting healthy adolescent brain development for young people in foster care requires special understanding of how the experience of foster care affects a child's development and how factors such as racism and discrimination compound trauma and chronic stress while limiting access to the opportunities and rewarding

experiences adolescents need to thrive. Caregivers and professionals can help by taking time to understand how each young person in foster care experiences the world, and help them build resilience by recognizing and acknowledging their history while expanding their skills and their horizons.

THE ROLE OF TRAUMA, AMBIGUOUS LOSS AND HOT COGNITION

At the same time young people in foster care are poised to take on new challenges, many of them are dealing with the continuing effects of adverse childhood experiences, trauma and "ambiguous loss." For example, childhood maltreatment can cause irritability in the brain's limbic system, which tends to produce chronic low-level unhappiness, aggression and violence toward oneself or others.20 Separation from one's parents or guardians, either literally through the separation and transition into foster care or figuratively when the caregiver remains in the home but is emotionally disconnected from the child, causes a young person to experience an ambiguous loss. Ambiguous loss is a form of loss in which there is no verification of death, no certainty that the person will come back or no assurance that the person will return to the way they used to be. When ambiguous loss is unresolved, longing persists and can inhibit a young person's emotional availability for new experiences and positive relationships.21 Professionals should take these factors into account and help young people process losses, trauma and stress even as they pursue new developmental opportunities.

The experience of childhood adversity and trauma must be managed throughout life. While young people may have received intervention and support to cope with an issue at one point, the same issue may resurface in a different form as they hit a new stage of development. For example, trauma often resurfaces at times of transition.

In addition to the stress they may carry from past experiences, young people in foster care often face stressful new situations that tax their developing brains. By age 16, adolescents typically have the ability to make mature decisions in situations where they are unhurried, can consult with others and where their emotions are less aroused. This is referred to as "cold cognition," which results in steadier decision making. However, young people may still struggle in "hot cognition" situations, when they feel time pressured, are emotionally aroused in some way or are subject to peer pressure.

For young people in or emerging from foster care, hot cognition moments abound, and the stakes are high. For example:

- I am only given a couple hours of notice to pack my belongings and move to another foster home.
- I am in trouble with my friends and am afraid I will get kicked out of my home if I tell anyone or ask for help.
- I want to explain myself, but people are blaming me without listening to what I have to say maybe it would be easier to take off and not tell anyone.
- I notice the difference in how I am being treated in my group home based on my

"When you have lost everything, you believe you won't amount to anything."

— Jim Casey Initiative Young Fellow race or gender identity, but no one ever believes me so I will keep it to myself.

SEEING BRAIN DEVELOPMENT THROUGH THE LENS OF RACIAL AND ETHNIC EQUITY

During adolescence, brain development depends on experiences and opportunities to build relationships, exercise autonomy, take risks and grow in a supportive environment. For youth of color, normal risk taking may be inhibited by fear of repercussions and more often criminalized.22 Healthy brain development is fundamental to healing, successfully transitioning into adulthood and overall well-being. Yet we are also faced with the reality that youth of color are disproportionately represented in the child welfare system through no fault of their own and experience disparately negative outcomes when compared with their white peers in foster care.23

Adults cannot effectively nurture the development of young people in foster care without considering and understanding the significance of race and ethnicity in a young person's formative experiences. Just as positive and affirming experiences strengthen brain development, the experience of racial discrimination interferes with an adolescent's development and is a strong predictor of preadolescent and adolescent depressive symptoms.24 Once in foster care, young people of color frequently report having difficulty developing their racial and ethnic identity.25 Children of color receive fewer familial visits, fewer contacts with caseworkers, fewer written case plans and fewer developmental or psychological assessments compared with white children.26 Specifically, African-American youth are more

likely than white or Latino children to be placed in group institutions rather than foster families.²⁷ A recent study found that about 57 percent of youth who identify as LGBTQ in child welfare systems are youth of color. Such youth are more likely than their peers to experience instability in their home environments and have poor mental and behavioral health outcomes.²⁸

Racial bias in decision making within various public systems produces more negative decisions against youth of color in comparison with their white peers. The more discretionary the decision-making structure, or the more decisions are rushed, the more likely youth of color suffer from unfair assessments and dispositions.²⁹

Research also shows that a supportive family environment may protect youth of color against the negative effects of racism.30 This means it is critically important for child welfare professionals to seek permanence for youth of color, to connect them to networks and to positively nurture their development with rewards rather than punishment. One study found that a strong sense of self, racial identity and racial socialization can serve as protective factors for African-American adolescents.31 Professionals and parents should be deliberate about helping youth develop these strengths within the context of a family. Child welfare systems should be intentional and deliberate about engaging contracted providers, foster families, judges and other partners in understanding the impact of institutional and structural racism. In other words, our diligence must reflect what we would desire for our own children.



DURING ADOLESCENCE, brain development depends on experiences and opportunities to build relationships, exercise autonomy, take risks and grow in a supportive environment. For youth of color, normal risk taking may be inhibited by fear of repercussions and more often criminalized.

Creating a nurturing environment requires thinking broadly about how to provide brain-building opportunities for young people who may face racism when taking on their new roles. For example, a young Native American man in foster care in New Mexico described his attempt to take on a leadership role by going door to door in his community to raise awareness about an issue he was passionate about, only to be interrogated by police for "looking suspicious." This example illustrates just one of the challenges young people of color face when trying to engage in activities that would otherwise promote healthy development and leadership skills.

IMPLICATIONS FOR KEY DEVELOPMENTAL TASKS

The left side of Table 1 on page 16 identifies the distinct developmental tasks that adolescents must complete to move through the period of emerging adulthood to become healthy, connected and productive adults. The two right columns illustrate how the experience of foster care and various cultural considerations may affect a young person taking on those tasks.

TABLE I — "Normal" Developmental Tasks Required to Transition from Adolescence to Adulthood: 32 Considering Experiences in Foster Care

ADOLESCENTS ARE Expected to	FOR YOUTH WHO HAVE EXPERIENCED FOSTER CARE: WHAT IF	CULTURAL CONSIDERATIONS: WHAT IF	
Adjust to a new physical sense of self	I have grown to feel disconnected from my physical sense of self as a coping mechanism?	I don't have a sense of who I am and almost every message I receive is negative?	
Adjust to new intellectual abilities	My need to focus on survival has overwhelmed or distracted my cognitive capacities?	I can't think clearly or take intellectual risks because of my sense of not being good enough?	
Meet increased cognitive demands at school	Multiple moves and school changes prevent me from applying myself in school?	I am disciplined more than my peers, which means I am often out of the classroom and will never catch up; so why try?	
Expand verbal skills	My stress responses have limited my ability and confidence to verbalize how I feel and what's important to me?	I don't feel like anyone wants to hear or believes what I have to say, so I just remain silent?	
Develop a personal sense of identity	My experiences with adults have not validated that I matter? What if most people have just identified me as "a troubled child"?	Every message I get from society tells me that as a youth of color or identifying as LGBTQ I am inferior?	
Consolidate the capacity to control impulses, calibrate risks and rewards, regulate emotions, project the self into the future and think strategically	I have not had the foundation or environment to develop and consolidate these skills?	My experiences have limited my capacity to look into the future? What if I see too many bad things that I don't understand happening to people who look like me? What if I am unsure that I will even have a future?	
Establish adult career goals	I've been focused on survival — here and now, day to day — and not my future?	I have been in foster care for many years with no significant person in my life? What if all I can focus on is who will be there for me when I leave foster care?	
Gain emotional and psychological independence from parents	My bond and relationships with my parents were disrupted before I gained independence and interdependence?	I did not have the opportunity to bond with my parents and my experiences have primarily been in group placements?	
Develop stable and productive peer relationships	The stability of my relationships with my peers has suffered because I am never in a place long enough to plant friendship roots?	I have not been placed with people who share my culture and values and no one has provided the opportunity for me to build these relationships?	
Learn to manage sexuality and a sexual identity	I don't have someone safe to talk to about safe sex? What if I have been displaced from several homes based on my sexual or gender identity?	No adult in my life shares my cultural background and context for such an intimate conversation?	
Adopt a personal value system	I have not had a consistent and loving relationship to help define a healthy, strong personal value system?	I have always had to agree with someone else's value system, even though mine might be different?	
Develop increased impulse control and behavioral maturity	I haven't had the care, guidance and nurturing to teach and reinforce healthy control over my impulses so that my judgment and behavior mature with my development?	I have been disciplined and restrained for behaviors that my peers were not?	

OVERALL STRATEGIES FOR PROFESSIONALS, CAREGIVERS AND SYSTEMS

Equipping young people with strategies to make sense of things that have happened to them — which include experiences with racism and/or discrimination — helps maximize their developmental gains. Insight into their experiences and internal development serves as a validating and empowering protective factor for them to heal from trauma, adversity, internalized racial oppression and difficult emotions.

Ways professionals and caregivers can help young people respond to trauma:

- Talk about and honor past relationships while recognizing those who will continue to provide support. Understand the role of historical and intergenerational trauma due to racism.
- Introduce activities and practices that are particularly useful in helping young people begin to heal from their experiences of trauma and loss through such practices as mindfulness meditation, restorative yoga and self-guided sports like swimming and running.
- Some youth may feel that prayer or other spiritual activities are useful for healing. Encourage young people to discuss their faith and cultural traditions and provide opportunities for them to continue to participate in ways and with people meaningful to them.³³
- Listen to and respect young people's truths that may not align with your beliefs or experiences.
- Encourage open communication and validate the need to grieve and receive support. Have conversations with young

- people about their interests and hopes for the future. Making thoughtful decisions and plans requires young people to have hope and see themselves as worthy of having the future they deserve. Create a liberated space for conversations on race, racism and discrimination.
- Understand that loss may keep a young person from warming up to a practitioner or a new family, no matter how caring the family is. Help young people reduce stress and take care of themselves by making sure they get enough sleep, eat a healthy diet and limit the use of stimulants such as caffeine.
- Plan as far in advance as possible with young people about upcoming changes and transitions, including changes in caseworkers. Be open about case planning. Let them know what to expect and what resources they will have.
- Actively engage young people in processing and talking through moments of hot cognition. Provide space to reflect with the young person about what was triggering, maddening or confusing.
 Create a plan for handling similar situations in the future.
- When dealing with a young person during a moment of hot cognition, monitor your own reactions. Reflect on the ways in which you might be heightening emotional arousal or helping to balance it so the young person can have room and time to respond productively.
- Recognize that trauma can prompt substance abuse as a form of self-medication and work to equip youth with alternative coping mechanisms. Reduce the chances that young people will turn

Equipping young people with strategies to make sense of things that have happened to them, including experiences with racism, helps maximize their developmental gains.

"What we experience really puts our adult life in our hands. What experiences do we want to rewire our brains?"

— Jim Casey Initiative Young Fellow to harmful substances by providing and modeling a clear, safe, caring value system that has relevance to a young person's identity and background including, but not limited to, race, ethnicity, gender identity and sexual orientation. Recognize the signs that a young person is smoking or using drugs or alcohol, and seek help from expert community organizations if needed.³⁴ Share with young people in foster care the added risks of substance abuse for youth who have experienced adversity and trauma.

 Provide opportunities for young people to attend cultural events that allow them to explore and affirm their racial and ethnic identity, ideally with peers. When considering new roles or experiences for a young person to take on, ensure you are not making assumptions about their racial or ethnic background that would limit their opportunities.

Systems can support these practices by doing the following:

- Work to recruit a diverse pool of foster parents and mentors to expose young people to many different positive role models.
- Use data disaggregated by race and ethnicity at each decision point to hold systems accountable for equity in outcomes for all youth.
- Develop systems improvement strategies by analyzing disaggregated data using a racial impact assessment tool.
- Use a racial impact assessment tool on current and new policies and practices.
- Engage all levels of staff and partners in bold and courageous conversations

that examine attitudes, assumptions and stereotypes about the "why" of the data.

Facilitate training that focuses on creating a common definition and understanding of institutional and structural racism so that a common language emerges to have honest discussions that address racism as being at the very core of racial inequities.

Understanding the developmental stage of emerging adulthood has important implications for practice and programming. Because of the increased neuroplasticity of the brain during adolescence, neural connections can be rewired when the individual has the benefit of corrective experiences and relationships.³⁵

Promoting Development in Four Focus Areas: Recommendations for Child Welfare Professionals and Caregivers

The following recommendations are organized according to the Jim Casey Youth Opportunities Initiative's four focus areas: permanence, educational attainment and economic security, housing stability and supports for young parents. These four areas are interconnected and critical components to ensuring that all young people transitioning from foster care have the relationships, resources and opportunities to ensure well-being and success. Research on adolescent brain development has strong implications for how professionals and caregivers approach young people.

FOCUS AREA I

> promoting permanence

Legal permanence should be a primary goal for child welfare professionals. Because foster care is intended to be a temporary haven, practitioners should never give up on finding a young person a permanent family or reuniting them with their family of origin, no matter how old the young person or how available other support services might be. Many adolescents in the child welfare system are placed in group care facilities, which often limits opportunities for healthy adult relationships and family-like connections.36 We know that the quality and consistency of relationships influence well-being and profoundly shape adolescent brain development. Data indicate that young people transitioning from foster care without strong ties to supportive networks are more likely to experience poor outcomes in the areas of employment, early pregnancy, education, criminal justice and homelessness than most of their peers in the general population. Unfortunately, as a young person's age increases, the likelihood of achieving legal permanence decreases.³⁷ The way we engage both young people and caregivers holds the potential of reversing this trend.

Decisions that result in young people living in group placements can make it harder for them to achieve permanence. About half of older youth who have experienced foster care have spent time in such facilities.³⁸ In fact, African-American youth are more likely to have been placed in group facilities than white or Latino youth, putting them at a marked disadvantage for exposure to opportunities that lead to successful permanence.

Furthermore, African-American youth are emancipated from foster care without permanence at a rate 1.23 times higher compared with white youth, and Latino youth are emancipated at a rate 1.15 times higher than their white peers.39 Because adolescent brain research tells us that healthy development is "experience dependent," the disparate treatment of African-American and Latino youth is ultimately a matter of disparate opportunities to grow, develop and successfully transition into adulthood. The likelihood that African-American children will experience kinship care — living with relatives or friends when their parents cannot take care of them — is much higher than that of the overall population.40 This provides a great opportunity to equip kin caregivers with knowledge and tools about how to maximize adolescent brain development in the context of a young person's racial and ethnic identity and for child welfare systems to commit to greater support of kin based on the return on investment for young people in foster care.

Many adolescents often say they do not want legal permanence because they do not want to experience rejection, disappointment or legal separation from their families of origin. Neurobiologically speaking, their brains are literally urging them to be independent. Yet when child welfare professionals set legal permanence efforts on the back burner and give up on the quest to find a family, young people may experience this inaction as further evidence that they are not worthy of being part of a permanent family.41 As they mature, many young people come to understand the importance of permanence and ultimately want support to gain it.42 Effective conversations that



"Resiliency is a muscle. Every young person has the ability to be resilient."

— Jim Casey Initiative Young Fellow happen early and often can help practitioners and caregivers guide young people to becoming open to permanence and building social capital.⁴³

Integrating cultural, racial and ethnic background is important to a young person's sense of belonging to and bonding with another family. It is important to be aware and understanding when young people want to be part of a family that looks and feels as natural as possible.44 Fortunately, when families and child welfare staff are open to acknowledging, talking about and planning based on feedback from the young person affected, family bonding can happen. Professionals and foster parents can help by connecting young people with communities that reinforce their sense of self. Some developmentally responsive approaches to increase permanency include:

- Develop in-home safety and support plans for both the short and long term to prevent or avoid the need for out-ofhome separations and disruptions.
- Understand that adolescents take risks as a necessary part of normal development. This does not mean they are being deviant or noncompliant, or that they cannot be successful in a family.
- Inform birth parents, foster parents, guardians, caregivers and mentors that every relationship and interaction has a profound influence on the development of each young person.
- Adolescents are in the midst of further developing and navigating their identities. Explore their thoughts, concerns and questions about permanence. Ask what permanence means to them in the context of racial, ethnic and gender

identity and sexual orientation. Ask questions that help youth imagine the future and think about the people they will want to have in their lives.

- Support adolescents in developing their skills to ask critical questions, plan ahead and think about the future. Persist in efforts at family finding. Actively maintain family connections for youth and avoid sanctions that would reduce their visits with family.
- It is never too late to establish permanence. Keep revisiting possibilities for legal permanence. When legal permanence cannot be achieved, concentrate with the same amount of urgency on creating family-like connections that are lifelong and unconditional for enhancing the development and well-being of young people. Talk about and keep options for adult adoptions open.
- Make sure that racial and ethnic bias does not limit opportunities for family connections through extended family and relatives.

FOCUS AREA 2

> advancing educational success and economic security

Being connected to school or work is important for fostering healthy intellectual development, building relationships and contributing to greater economic stability. About 5.5 million youth in the United States are neither in school nor working, and young people who have experienced foster care are less likely than their peers to find and keep stable jobs and are more likely to earn less, even into adulthood.⁴⁵ A 2015 report found

What's Working: Planning Futures With Youth Networks in Hawaii

The E Makua Ana Youth Circle Program is a state-funded transition-planning program provided by EPIC `Ohana, the lead organization of the Jim Casey Initiative work in Hawaii. Youth Circles help current and former foster youth transitioning out of the foster care system by bringing together a youth's family, providers and other supporters to highlight the youth's strengths, share resources and brainstorm options through a collaborative, culturally sensitive process. The youth chooses who will be invited and what kind of food will be served at the circle and chooses his own plan.

that 22 percent of African Americans, 28 percent of Native Americans and 16 percent of Latinos ages 16–24 were disconnected from school and work, compared with 8 percent of Asian Americans and 11 percent of whites.⁴⁶

Taking on the responsibilities of school and work strengthens the brain's regulatory system, reinforcing decision-making and organizational skills. Keeping young people connected starts by maintaining school stability and connections to their communities. If separation from a young person's community cannot be avoided, it is important to ensure opportunities to physically maintain those relationships and ties — beyond connections via social media. Intentionally exposing youth to family, social and community functions that allow them to meet and interact with peers who are supportive, kind and productive can be especially helpful for youth with unhealthy peer relationships.

Helping young people think about the future means first attending to their present basic needs — needs that may not always have been met for youth in foster care. Personality, talent and skills

inventories can help young people tap into areas of the career and educational world for which they have a passion or may be uniquely suited. Encourage young people to get a first job and participate in career and educational programs with peers that provide incentives for milestones achieved, activating the adolescent brain's reward-seeking characteristics.

Practitioners and caregivers should seek opportunities in both school and work to provide young people chances to take on new challenges:

- Advocate for and prioritize school and community continuity even if home environments need to change.
- Provide opportunities for young people to learn new skills that will provide positive reinforcement for the brain's active reward system. Activities such as running for student government, trying a sport or musical instrument or volunteering in the community are just a few of the activities that adolescents can try that will fulfill their developmental need to take risks.

What's Working: Driving and Youth in Foster Care

Learning to drive is a brain-building novelty experience and important developmental task for establishing independence that adolescents should acquire during their late teens. The Keys to Independence Program, which started in Florida, helps provide youth in foster care access to driver's education and the opportunity to earn a driver's license. The program removes barriers to this rite of passage by reimbursing youth and caregivers for certain costs of learning to drive, including fees for driver's education, driver's licenses and insurance. Learn more at www.k2i.us.

- Recognize that in addition to losing family or family-like connections, losing one's friends, teams and other connections only compounds the young person's loss and can ultimately feel like undeserved punishment.
- Help a young person get a first job mowing lawns, walking dogs or babysitting, or, for those who have a job, take up new responsibilities. Being trusted with these duties and rewarded with paychecks and praise builds important connections and reinforcement in the adolescent brain.
- Provide practice and guidance on how to communicate effectively with a supervisor, boss or teacher.
- Work with coaches, guidance counselors and others to help young people develop and navigate their plans for college and a career.
- Access a range of career pathways, from student leadership opportunities to community service, job shadowing and internships, to create on-ramps to employment.

FOCUS AREA 3

> connecting youth to safe and stable housing

Finding safe and stable housing can be difficult for youth transitioning from foster care, particularly if they are transitioning to being on their own. Between 11 percent and 37 percent of youth emancipating from foster care experience homelessness after they transition, and an additional 25 percent to 50 percent are unstably housed after transition, according to the U.S. Department of Housing and Urban Development.⁴⁷ In particular, Native American youth who were in foster care at 17 are more likely to report being homeless by 19 than transitioning youth of other backgrounds.⁴⁸

Many young people are emancipated from foster care to independent living. Adolescents and emerging adults are naturally experiencing a push toward independence; however, prioritizing interdependence and connecting young people with a consistent and supportive network is vital to healthy development. Young people who are ready to live on their own should have a range of housing

options that will enable them to gradually gain independence in supportive settings designed to meet their needs and that take advantage of a young person's network of family, mentors and positive peers. Adults can help young people in their care or on their caseloads by helping them evaluate options and counter the peer pressure that can create hot cognition moments and lead a young person to live somewhere that may be hazardous or tenuous. Landlords and housing systems should create materials for young people that clearly explain rules and responsibilities, and offer accessible support systems and multiple platforms of communication so that young people can get information and understand their rights. Caregivers and practitioners should help young people access this information.

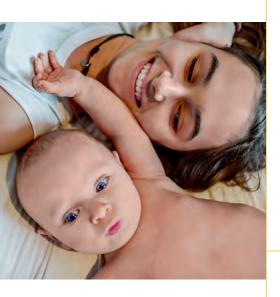
Here are some ways child welfare professionals can help youth navigate housing while promoting healthy adolescent brain development:

- Provide guidance on what to check and look for when inspecting a potential home.
- Have conversations with young people to promote critical thinking and decision-making skills regarding housing options for example: How will I know if this is a safe housing option? How would I access transportation? How do I decide whether to have a roommate? How do I create rules and norms in my living space for myself and others?
- Talk with young people about their rights and responsibilities as a tenant



What's Working: Young People Plan for College and Jobs in Maine

As part of the Jim Casey Initiative and Learn and Earn to Achieve Potential (LEAP), a five-year, \$24 million initiative to increase employment and educational opportunities for young people, the Maine Youth Transition Collaborative provides intensive support to young people as they transition from high school to college and other postsecondary training. An evidence-based teaming model encourages young people in foster care to lead development of a specific plan for their higher education in concert with their hopes, dreams, goals and strengths, exercising the self-regulation, decision-making and planning skills that are developing rapidly during adolescence and young adulthood. As each young person becomes more independent, the program gradually removes supports while keeping in contact, much as a parent would do for a young adult living on his own for the first time. In addition to campus-based supports for those in college, young people in foster care are offered help in applying for jobs and securing job-shadowing opportunities and are able to participate in a training program with a workforce service provider.



Guiding Youth to Stable Housing: Cleveland's 100-Day Challenge

In September 2016, the Jim Casey Initiative site in Cleveland, A Place 4 Me, launched a challenge to house 100 homeless youth ages 18–24 in 100 days and strengthen systems to prevent homelessness for youth aging out of foster care. Among several strategies, the collaborative established 12 adult "system navigators" to guide youth through resources for housing, rather than leaving them to traverse a complex system on their own. The young people were able to make selections — each had three apartments to consider. With their navigators, they discussed how they would sustain the apartment once the subsidy ended. Navigators also connected clients to related resources, such as employment, education and legal help. The effort exceeded its goal, housing 105 young adults — 38 of whom had experienced foster care.

if they are renting housing. If young people are experiencing housing discrimination, help them connect with advocates who can support them in asserting their rights.

- Connect with landlords who are willing to rent to young people and have youthfriendly policies, such as individual leases for roommates. Providers should consider agencies who use master leases with scattered sites throughout the community.
- Promote the development of planning skills with young people by talking about how to pay bills, sort and organize mail and keep track of important documents. Supporting these abilities encourages the development of executive function skills.
- Make sure young people who are attending a residential college are connected with on-site staff to navigate housing options when school is not in session.

 Build financial capability by helping youth navigate budgeting and significant purchases such as a car or computer for school.

FOCUS AREA 4

supporting young parents and family planning

Adolescence is a time of hormonal changes, exploration and identity development. One of the key developmental tasks for young people during adolescence is learning to manage their sexuality and sexual identity. The adolescent brain's great sensitivity to relationships and rewards makes navigating the strong feelings that accompany romantic relationships particularly intense. These developmental processes continue to occur even in the presence of challenges such as untimely or unintended pregnancies. Young people in foster care are statistically more likely to become young parents. Without supports

and nurturing, the children of these young parents are apt to enter foster care, continuing a multigenerational cycle in foster care.⁴⁹

For all young people and for young parents, child welfare professionals can support thoughtful family planning in the following ways:

 Provide support, education and resources to equip young people to navigate contraceptive choices, sexuality and sexual relationships. Encourage supportive, candid, judgment-free conversations about safe sex and sexual

- identity that can strengthen the brain's decision-making pathways.
- Provide information and access to reproductive health resources and services. Encourage young people to ask questions about safe sex, sexual orientation and gender identity. Be prepared to address and ask questions such as: What is protected sex? Where is the closest clinic? How can you get there? What identification do you need? Who needs to know? What rumors are young people hearing about sex and STDs?

What's Working: Supporting Young Parents and Children in Georgia

The Multi-Agency Alliance for Children (MAAC), the lead Georgia agency for the Jim Casey Youth Opportunities Initiative, works to make sure young parents in foster care are equipped to support their children's development without losing sight of their own hopes and dreams. MAAC's Teen Parent Connection (TPC) program supports teen parents in care with professional life coaches. Coaches meet one-on-one with teens and their children and use an evidence-based curriculum designed to help teen parents practice and learn critical parenting and life skills. Through group classes and special events, these young parents interact with peers who also have had children while in foster care, enjoying social activities while learning about early childhood development and their own development, receiving financial coaching, understanding their relationship to their children and their rights as parents and planning for policy advocacy. The peer interaction — which the adolescent brain thrives on — gives young parents hope, said Victoria Salzman, Georgia Youth Opportunities Initiative program director. "For a young mom to see another young mother in care who is three or four years older and has been able to go back to school, to get a car...that's not something often modeled for them," she said. Activities range from whole-family outings to places like a children's museum and Mommy and Me Camp to young-adult-only outings with child care provided. Said Salzman: "They can be as much of a mom as they want to be, or as much of a teenager as they want to be."







- Emphasize the importance of healthy, caring relationships. Provide training and information to foster parents. Encourage them to get to know friends of children in their care and provide age-appropriate supervision. 50
- Family planning requires thinking about the future. Start conversations that help a young parent plan for college, career goals and managing multiple interests.
- Accept and respect young people's sexual orientation, gender identity and expression. Ask their preferred pronouns, and use those pronouns when referring to the young person.
- Ask young people what they need.
- Provide opportunities for peer support.

It is crucial to understand that young people who are parenting and their children are experiencing rapid periods of brain development at the same time. Here are some ways to support young parents to continue on a healthy developmental trajectory as they support their children:

- Strengthen young parents as the primary nurturer. Talk with young people about their questions and concerns about parenting.
- Don't assume that because they are pregnant or parenting that they are knowledgeable about sex and sexuality.
- Help young parents continue to make progress toward their educational, literacy and employment goals.
- Continue to nurture their aspirations and meet their needs for new challenges and opportunities that support healthy brain development, at the same time they focus on their own children.
- Help young parents strengthen their relationships with each other and work together in caring for their children.
- Help both parents and children maintain good health and well-being.
- Make sure young parents can access and receive prenatal care and have access to well-baby medical visits and highquality child care.

The latest adolescent brain research continues to offer great promise for those working with youth in or emerging from foster care to promote growth, healing, hope, belonging and purpose. Sometimes youth who have experienced significant trauma may feel as though their foundation in life has been shaken, eroded or fractured. However, by improving the environment surrounding a young person, supporting his or her racial and ethnic identity and sexual orientation and understanding how the developing brain is driving behaviors but is still in a highly "neuroplastic" stage, we can support youth in and emerging from foster care rewire their brains to better regulate decision making as they enter the adult world. We know that adolescents will benefit from consistent relationships and connections with caring adults, developmentally sound and accessible opportunities to exercise risk and autonomy and the opportunity to nurture their great capacity for resilience. With the concerted efforts of caregivers, professionals throughout systems and youth themselves to apply the insights in this guide, the road leaving foster care can take young people to self-sufficiency and successful adulthood.



Glossary

Ambiguous loss: A form of loss in which there is no verification of death, no certainty that the person will come back or no assurance that the person will return to the way she or he used to be. This form of loss is characterized by having no clear boundaries, no clear ending and often no culturally or societally recognized rituals for grieving or even acknowledging what has been lost.

Cerebral cortex: The outer layer of the brain that plays a key role in memory, attention, perceptual awareness, thought, language and consciousness.

Complex trauma: The dual problem of exposure to multiple traumatic events and the impact of this exposure on immediate and long-term outcomes. For young people in foster care, examples of traumatic events may include poverty, neglect, physical and sexual abuse, separation from and loss of family, multiple moves and relationship disruptions.

Dopamine: A chemical in the brain that affects concentration, memory, problem solving and mental associations between action and pleasure.

Emerging adulthood: A developmental period from approximately 18–25 years old, during which a young person moves gradually from adolescence toward independence, rather than achieving adulthood at a predetermined age.

Gray matter: The brownish-gray matter in the brain that is associated with intelligence and intellect. This type of brain tissue is composed primarily of cell bodies, along with their dendrites. The

purpose of gray matter is to pass along sensory input, gathering information from the sensory organs and other gray matter cells and ensuring that it gets where it needs to go. The speed of communication is determined by the white matter, so one could think of the gray and white matter as the central processing unit of the brain.

Implicit bias (also known as unconscious bias): Attitudes or stereotypes that affect our understanding, actions and decisions in an unconscious manner.

Institutional racism: Racial and ethnic inequity within institutions and systems of power, such as places of employment, government agencies and social services.

Interdependence: The mutual reliance between two or more groups.

Internalized oppression: Believing in negative messages about oneself or one's racial group.

Legal permanence: A child's relationship with a parenting adult that is recognized by law, with the adult becoming the child's birth, kin, foster, guardianship or adoptive parent. Legal permanence confers emotional, social, financial and other status.

Limbic system: The part of the brain associated with processing and managing emotion and motivation.

Neurobiology: The scientific study of the biology of the human brain.

Neuroplasticity: The ability of the brain to alter its structure in response to

experience; the process by which the brain forms new neural pathways, removes old ones and alters the strength of existing connections.

Normalcy: Typical experiences of growing up — from working a summer job to joining the school band and getting a driver's license — that are often out of reach for young people in foster care because of such factors as restrictive child welfare policies designed to keep children safe, frequent moves and the lack of funds and transportation.

Prefrontal cortex: The part of the brain that governs a person's executive functions of reasoning, impulse control and advanced thought; the last part of the human brain to mature.

Promotive factors: Conditions or attributes of individuals, families, communities or the larger society that actively enhance well-being.

Protective factors: Conditions or attributes of individuals, families, communities or the larger society that mitigate or eliminate risk

Pruning: A process in the brain through which unused or underused synapses are eliminated.

Racial and ethnic equity and inclusion:

The state, quality or ideal of being just, impartial and fair and providing authentic and empowered participation and a true sense of belonging when it comes to race and ethnicity. To be achieved and sustained, racial equity needs to be thought of as a structural or systemic concept.

Glossary continued

Relational permanence: The many types of important long-term relationships that help a child or young person feel loved and connected — relationships with brothers and sisters, family friends and extended family, former foster family members and other caring adults.

Resilience: The ability to overcome adverse conditions and to function normatively in the face of risk.

Risk: The possibility of loss or injury.

Social capital: The value that is created by investing in relationships with others. Social capital reflects bonding between similar people and bridging between diverse people, with norms of trust and reciprocity.

Structural racism: Racial and ethnic bias across institutions and society; the cumulative and compounding effects of an array of factors that systematically privilege white people and disadvantage people of color.

Acknowledgments

Numerous staff of the Jim Casey Youth Opportunities Initiative at the Annie E. Casey Foundation contributed to this report, along with site liaisons, site leads and the Jim Casey Young Fellows. Consultants Dr. Abyssinia Washington, Marci Roth and Joyce James provided valuable content and perspective.

Resources

Adolescent brain development and child welfare:

The Jim Casey Youth Opportunities Initiative. (2011). *The adolescent brain:* New research and its implications for young people transitioning from foster care. St. Louis, MO: Author.

Foster parents as practitioners:

The Annie E. Casey Foundation. (2016). *A movement to transform foster parenting.* Baltimore, MD: Author.

Permanency conversations with youth:

Casey Family Programs. (2009). When a teen says no to permanence. Seattle, WA: Author.

Race equity and inclusion:

The Annie E. Casey Foundation. (2014). *Embracing equity: 7 steps to advance and embed race equity and inclusion within your organization.* Baltimore, MD: Author.

Recognizing substance abuse:

National Center on Substance Abuse and Child Welfare. (n.d.). Presentations and publications for substance abuse professionals.

National Institute on Drug Abuse. (2014). *Principles of adolescent substance* use disorder treatment: A research-based guide. Bethesda, MD: Author.

Endnotes

- 1. The Jim Casey Youth Opportunities Initiative. (2011). The adolescent brain: New research and its implications for young people transitioning from foster care. Author: St. Louis, Missouri. Retrieved from www.aecf.org/resources/ the-adolescent-brain-foster-care
- 2. According to the U.S. Department of Health and Human Services as of April 3, 2017.
- 3. The Annie E. Casey Foundation, KIDS COUNT Data Center. *Children in foster care by race and Hispanic origin*, 2015 (Table). Retrieved April 25, 2017, from http://datacenter.kidscount.org/data/tables/6246-children-in-foster-care-by-race-and-hispanic-origin?loc=1&loct=1#detailed/1/any/false/573,869,36,868,867/2638,2601,2600,2598,2603,2597,2602,1353/12992,12993
- 4. Miller, O., & Esenstad, A. (2015). Strategies to reduce racially disparate outcomes in child welfare: A national scan. Washington, DC: Center for the Study of Social Policy. Retrieved June 8, 2017, from www.socialserviceworkforce.org/system/files/resource/files/Strategies-to-Reduce-Racially-Disparate-Outcomes-in-Child-Welfare-March-2015.pdf
- 5. These terms are further defined in the glossary (see page 29). Also, see a fuller discussion of these concepts in The Annie E. Casey Foundation. (2014.) Embracing equity: 7 steps to advance and embed race equity and inclusion within your organization. Baltimore, MD: Author. Retrieved February 3, 2017, from www.aecf.org/resources/race-equity-and-inclusion-action-guide
- Jensen, F. E., & Nutt, A. E. (2015). The teenage brain: A neuroscientist's survival guide to raising adolescents and young adults. New York, NY: HarperCollins Publishers.
- 7. Arnett, J. J. (2007). Emerging adulthood: What is it and what is it good for? *Child Development Perspectives*, 1(2), 68–73.
- 8. Avery, R. J. (2009). An examination of theory and promising practice for achieving permanency for teens before they age out of foster

- care. Children and Youth Services Review, 32(3), 399–408.
- 9. Jensen, F. E., & Nutt, A. E. (2015).
- 10. Fine Maron, D. (2015). Early puberty: causes and effects. Scientific American. Retrieved May 31, 2017, from www.scientificamerican.com/article/ early-puberty-causes-and-effects
- 11. Brody, G. H., Miller, G. E., Yu, T., Beach, S. R., & Chen, E. (2016). Supportive family environments ameliorate the link between racial discrimination and epigenetic aging: A replication across two longitudinal cohorts. *Psychological Science*, 27(4), 530–541. And, see Goff, P. A., Jackson, M. C., Di Leone, B. A. L., Culotta, C. M., & DiTomasso, N. A. (2014). The essence of innocence: Consequences of dehumanizing black children. *Journal of Personality and Social Psychology*, 106(4), 526. Retrieved April 25, 2017, from www.apa.org/pubs/journals/releases/psp-a0035663.pdf
- Steinberg, L. (2014). Age of opportunity: Lessons from the new science of adolescence. New York, NY: First Mariner Books.
- 13. Steinberg, L. (2008). A social neuroscience perspective on adolescent risk-taking. *Developmental Review*, 28(1), 78–106.
- 14. Gasca-Gonzalez, S., & Walters, D. L. (2017). The development and psychology of young minds: Communities can prevent exploitation and facilitate rehabilitation. In *Human trafficking is a public health issue* (pp. 231–249). New York, NY: Springer International Publishing.
- van der Kolk, B. A. (2006). Clinical implications of neuroscience research in PTSD.
 Annals of the New York Academy of Sciences, 1071(1), 277–293.
- 16. Janssen, S. M., Chessa, A. G., & Murre, J.M. (2005, August). The reminiscence bump in autobiographical memory: Effects of age, gender, education, and culture. *Memory*, (6), 658–668.

- 17. King, K. M., & Chassin, L. (2007). A prospective study of the effects of age of initiation of alcohol and drug use on young adult substance dependence. *Journal of Studies on Alcohol and Drugs*, 68(2), 256–265.
- 18. Lenroot, R. K., Gogtay, N., Greenstein, D. K., Wells, E. M., Wallace, G. L., Clasen, L. S., ... & Thompson, P. M. (2007). Sexual dimorphism of brain developmental trajectories during childhood and adolescence. *Neuroimage*, 36(4), 1065–1073.
- 19. The Annie E. Casey Foundation. (2015). What young people need to thrive: Leveraging the Strengthening Families Act to promote normalcy. Baltimore, MD: Author. Retrieved from www.aecf.org/resources/what-young-people-need-to-thrive
- 20. Teicher, M. H., Andersen, S. L., Polcari, A., Anderson, C. M., Navalta, C. P., & Kim, D. M. (2003). The neurobiological consequences of early stress and childhood maltreatment. *Neuroscience & Biobehavioral Reviews*, 27(1), 33–44.
- 21. North American Council on Adoptable Children. (n.d.). Ambiguous loss haunts foster and adopted children. Retrieved February 3, 2017, from www.nacac.org/ adoptalk/ambigloss.html
- 22. Henning, K. (2012). Criminalizing normal adolescent behavior in communities of color: The role of prosecutors in juvenile justice reform. *Cornell L. Rev.*, *98*, 383.
- 23. Miller, O., & Esenstad, A. (2015).
- 24. Brody, G. H., Chen, Y. F., Murry, V. M., Ge, X., Simons, R. L., Gibbons, F. X., ... & Cutrona, C. E. (2006). Perceived discrimination and the adjustment of African American youths: A five-year longitudinal analysis with contextual moderation effects. Child Development, 77(5), 1170–1189.
- 25. Casey Family Programs. (2007). Mental health, ethnicity, sexuality, and spirituality among youth in foster care: Findings from the Casey Field Office Mental Health Study. Seattle, WA: Author.

- Retrieved from www.casey.org/media/ MentalHealthEthnicitySexuality_FR.pdf
- Chipungu, S. S., & Bent-Goodley, T. B.. (2004). Meeting the challenges of contemporary foster care. *Future Child*, 14(1), 74–93.
- 27. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. (2016). Adoption and Foster Care Analysis and Reporting System (AFCARS): Foster Care files, 2002–2014. [Data file]. Available from the National Data Archive on Child Abuse and Neglect (NDACAN), Cornell University, Ithaca, NY.
- 28. Center for the Study of Social Policy.

 (2016). A blueprint for progress A policy guide for advocates: Supporting LGBTQ youth of color in child welfare systems. Washington, D.C.: Author. Retrieved June 8, 2017, from http://www.cssp.org/policy/2016/a-blueprint-for-progress-policy-guide-for-advocates-supporting-lgbtq-youth-of-color-in-child-welfare-systems-web.pdf
- 29. The Annie E. Casey Foundation. (2006).

 Race matters: Unequal opportunities for
 youth in transition. Baltimore, MD: Author.
 Retrieved from www.aecf.org/resources/
 race-matters-unequal-opportunities-foryouth-in-transition/
- Brody, G. H., Miller, G. E., Yu, T., Beach,
 S. R., & Chen, E. (2016).
- 31. American Psychological Association, Task
 Force on Resilience and Strength in Black
 Children and Adolescents. (2008). Resilience
 in African American children and adolescents:
 A vision for optimal development. Washington, DC: Author. Retrieved from www.apa.
 org/pi/cyf/resilience.html
- 32. Labouvie-Vief, G. (2006). *Emerging structures of adult thought*. Washington, DC: American Psychological Association.

- 33. Scott, L. D., Munson, M. R., McMillen, J. C., & Ollie, M. T. (2006). Religious involvement and its association to risk behaviors among older youth in foster care. American Journal of Community Psychology, 38, 237–249. doi: 10.1007/s10464-006-9077-9
- 34. Youth.gov: Warning Signs. http://youth. gov/youth-topics/substance-abuse/ warning-signs-adolescent-substance-abuse
- 35. van der Kolk, B. A. (2006).
- 36. The Annie E. Casey Foundation. (2015).

 Too many teens: Preventing unnecessary
 out-of-home placements. Baltimore, MD:
 Author. Retrieved from www.aecf.org/m/
 resourcedoc/aecf-TooManyTeens-2015.
 pdf
- Child Welfare Information Gateway.
 (2016). Foster care statistics, 2014. Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.
- 38. Analysis of Adoption and Foster Care Analysis and Reporting System (AFCARS), FY 2014 Foster Care data file.
- Analysis of Adoption and Foster Care Analysis and Reporting System (AFCARS), FY 2014 Foster Care data file.
- 40. The Annie E. Casey Foundation. (2012). Stepping up for kids: A KIDS COUNT® Policy Report. Baltimore, MD: Author. Retrieved from www.aecf.org/resources/ stepping-up-for-kids
- 41. Casey Family Programs. (2009). When a teen says no to permanence. Retrieved February 5, 2017, from http://centerforchildwelfare.fmhi.usf.edu/kb/permanency/WhenATeenSaysNo.pdf
- 42. The Annie E. Casey Foundation. (2016). Every kid needs a family: A message to caseworkers (Video). Baltimore, MD: Author. Retrieved from www.youtube.com/ watch?v=Wc6Bq6gltGQ

- 43. Casey Family Programs. (2009).
- 44. North American Council on Adoptable Children. (n.d.).
- 45. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (2008). Coming of age: Employment outcomes for youth who age out of foster care through their middle 20s. Retrieved February 6, 2017, from https://aspe.hhs.gov/basic-report/coming-age-employment-outcomes-youth-who-age-outfoster-care-through-their-middle-twenties
- 46. Lewis, K., & Burd-Sharps, S. (2015). Zeroing in on place and race: Youth disconnection in America's cities. Brooklyn, NY: Measure of America. Retrieved June 1, 2017, from http://ssrc-static.s3.amazonaws.com/wp-content/uploads/2015/06/MOAZeroing-In-Final.pdf
- 47. U.S. Department of Housing and Urban Development. (2014). *Housing for youth transitioning out of foster care*. Washington, DC: Author. Retrieved from www.huduser. gov/portal/publications/pdf/youth_hsg_main_report.pdf
- 48. Analysis of 19-year-old follow-up surveys from the National Youth In Transition Data (NYTD), FY 2013 Outcomes data file. Sample size for Native American/Alaskan Native, NH, population is 133 of the 7,711 total respondents.
- 49. Boonstra, H. (2011.) Teen pregnancy among young women In foster care: A primer. Guttmacher Policy Review, 14 (2), 9. Retrieved June 9, 2017, from https://www. guttmacher.org/sites/default/files/article_ files/gpr140208.pdf.
- 50. The National Campaign to Prevent Teen Pregnancy. (2006). Ten tips for foster parents to help their foster youth avoid teen pregnancy. Washington, DC: Author. Retrieved January 15, 2017, from https://thenationalcampaign. org/sites/default/files/resource-primarydownload/10TipsFoster_FINAL.pdf

