CALIFORNIA’S EXTENSION OF
FOSTER CARE THROUGH AGE 21:
AN OPPORTUNITY FOR PREGNANCY PREVENTION
AND PARENTING SUPPORT
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CALIFORNIA'S EXTENSION OF FOSTER CARE THROUGH AGE 21: AN OPPORTUNITY FOR PREGNANCY PREVENTION AND PARENTING SUPPORT

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PROJECT OVERVIEW
The Children’s Data Network (CDN) is a university, agency, and community collaborative focused on the integration and application of data to inform programs and policies for children and their families. The CDN is funded by First 5 LA and the Conrad N. Hilton Foundation, housed at the USC School of Social Work, and developed in partnership with the California Child Welfare Indicators Project. Support for the Child Welfare Indicators Project is provided by the California Department of Social Services and the Stuart Foundation.
SUMMARY

BACKGROUND
Girls who have experienced maltreatment are at increased risk of giving birth as adolescents and their children have high rates of next-generation child protective services involvement. For older adolescents in foster care, the risks may be particularly acute given not only a history of abuse and neglect but also challenges to achieving permanency before aging out of the system at age 18.

PURPOSE
Federal legislation now provides states with funding to extend foster care through age 21, offering a critical window in which maltreated adolescents may receive targeted services related to both pregnancy prevention and parenting. Yet there are limited data available to track current or changing birth rates in the wake of this notable policy shift. This brief report presents an analysis of California county variations in cumulative birth rates during the period before the formal extension of foster care. The objective was to generate data that would provide a descriptive foundation for assessing the potential impact of this policy change in a state defined by a diverse, county-administered child welfare system.

DATA AND ANALYSIS
Administrative child protection records were used to identify the full population of female adolescents in foster care at age 17 between 2003 and 2007 (N = 20,222). Records were linked to vital birth data and organized longitudinally to document the cumulative percentage of youth who had given birth by age 18 (the age at which an exit from foster care would have historically occurred) and by age 21 (the age at which youth may now exit foster care). Birth rate variations were examined by county and race/ethnicity.

BACKGROUND FINDINGS AND IMPLICATIONS
Early data from California indicate that more than 60% of youth in foster care at age 17 are opting into extended foster care. If historical patterns hold, 1 in 3 (35.2%) adolescent girls currently in California’s foster care system will have given birth at least once before age 21, with two thirds of these births occurring after age 18. Although significant birth rate variations emerged by county and race/ethnicity, even at the very low end of the county range, 29% of girls had given birth at least once by age 21. Extended foster care offers an opportunity for intentional pregnancy prevention work coupled with targeted parenting support.
BACKGROUND

DURING THE LAST 25 YEARS, TEEN BIRTH RATES IN THE UNITED STATES HAVE STEADILY DECLINED. STILL, IN 2013 ROUGHLY 1 IN 14 CHILDREN WERE BORN TO ADOLESCENT MOTHERS. RESEARCH HAS INDICATED THAT MALTREATED GIRLS IN FOSTER CARE HAVE HEIGHTENED RATES OF:

- EARLY SEXUAL DEBUT
- PREGNANCY
- CHILDBIRTH DURING THE TEEN AND YOUNG ADULT YEARS

Yet most jurisdictions have limited data with which to document and track cross-sectional or cumulative birth rates for adolescent girls in foster care.

IN A SERIES OF 2014 ANALYSES FROM CALIFORNIA, RESEARCHERS USED LINKED CHILD PROTECTION AND BIRTH RECORDS TO STUDY TEEN BIRTH RATES AMONG GIRLS IN FOSTER CARE.5 6

- ONLY 3.5% OF GIRLS BETWEEN 15 AND 17 YEARS OF AGE GAVE BIRTH IN ANY SINGLE YEAR5
- A CUMULATIVE 11.4% HAD GIVEN BIRTH AT LEAST ONCE BEFORE AGE 18
- 28.1% HAD GIVEN BIRTH BY THE END OF THEIR TEENS5
With the implementation of California Assembly Bill 12, youth can now remain in foster care as non-minor dependents beyond age 18. As of 2014, California youth in foster care are eligible to participate in extended transitional foster care until age 21.

Although there is a strong moral justification for providing extended care to foster youth as they transition into adulthood, the financial rationale is premised on the potential for improved outcomes in the areas of housing, education, and employment. Less frequently discussed has been how this window of extended care might be used to deliver targeted services related to pregnancy prevention and parenting support. In other words, this policy may serve as a vehicle for health care systems and community programs to reach a highly vulnerable youth population during the years in which many individuals will become first-time parents.

The current research brief builds on and extends earlier California studies. Specifically, in this analysis we lengthen our examination of cumulative birth rates through age 21, providing data needed to understand pre-policy birth rate patterns through the age at which youth may presently remain in care. Additionally, we move from state-level data to county-level data. California is defined by vast socioeconomic and geopolitical diversity and operates a county-administered child welfare system. State data may mask significant within-state variations by county that could be used to better understand birth rate dynamics among youth in foster care.

Child protection and vital birth records were obtained from California’s Department of Social Services and Department of Public Health. Child protection data from 2003 to 2007 were aggregated to identify all girls who were in child-welfare-supervised foster care at age 17. These records were then linked to birth records from 2001 to 2011 to identify whether a first birth had occurred before age 21. Probabilistic matching algorithms were used to generate potential record pairs based on a combination of unique and non-unique personal identifiers. Clerical reviews were conducted to establish lower- and upper-bound thresholds for deeming a record pair to be a true match, with all record pairs falling between established thresholds manually assigned. Data were stratified by the county supervising the child welfare episode corresponding to each girl’s 17th birthday. Births could have occurred before, during, or after this episode in care.
Statewide, 20,222 girls were in foster care at age 17 between 2003 and 2007.

Cumulatively, 35.2% of female foster youth had given birth at least once by their 21st birthday.

By age 18, 11.4% had given birth.
By age 19, 19.0% had given birth.
By age 20, 28.1% had given birth.

Figure 1 presents county-level stratifications of cumulative birth rates for 28 counties and the state overall. Thirty counties were excluded from Figure 1 due to small cell sizes, but their data were included in the statewide rates. Among counties included in the subanalysis, birth rates before age 18 ranged from a low of 7% to a high of 17%; rates of teen births by ages 19 and 20 spanned 14% to 26% and 22% to 39%, respectively. By age 21, rates ranged from 29% to 46%. It is important to note that as reported in an earlier California study, among girls who gave birth while in foster care before age 18, roughly half were already pregnant when they entered the system.
FIGURE 1
CUMULATIVE BIRTH RATES

<table>
<thead>
<tr>
<th>County</th>
<th>AGE 18</th>
<th>AGE 19</th>
<th>AGE 20</th>
<th>AGE 21</th>
</tr>
</thead>
<tbody>
<tr>
<td>CALIFORNIA</td>
<td></td>
<td></td>
<td></td>
<td>35.1%</td>
</tr>
<tr>
<td>ALAMEDA</td>
<td></td>
<td></td>
<td></td>
<td>36.8%</td>
</tr>
<tr>
<td>BUTTE</td>
<td></td>
<td></td>
<td></td>
<td>35.9%</td>
</tr>
<tr>
<td>CONTRA COSTA</td>
<td></td>
<td></td>
<td></td>
<td>33.6%</td>
</tr>
<tr>
<td>FRESNO</td>
<td></td>
<td></td>
<td></td>
<td>44.7%</td>
</tr>
<tr>
<td>IMPERIAL</td>
<td></td>
<td></td>
<td></td>
<td>43.3%</td>
</tr>
<tr>
<td>KERN</td>
<td></td>
<td></td>
<td></td>
<td>40.3%</td>
</tr>
<tr>
<td>LOS ANGELES</td>
<td></td>
<td></td>
<td></td>
<td>34.3%</td>
</tr>
<tr>
<td>MADERA</td>
<td></td>
<td></td>
<td></td>
<td>34.1%</td>
</tr>
<tr>
<td>MERCED</td>
<td></td>
<td></td>
<td></td>
<td>38.8%</td>
</tr>
<tr>
<td>MONTEREY</td>
<td></td>
<td></td>
<td></td>
<td>32.8%</td>
</tr>
<tr>
<td>ORANGE</td>
<td></td>
<td></td>
<td></td>
<td>33.0%</td>
</tr>
<tr>
<td>RIVERSIDE</td>
<td></td>
<td></td>
<td></td>
<td>38.2%</td>
</tr>
<tr>
<td>SACRAMENTO</td>
<td></td>
<td></td>
<td></td>
<td>37.4%</td>
</tr>
<tr>
<td>SAN BERNARDINO</td>
<td></td>
<td></td>
<td></td>
<td>40.2%</td>
</tr>
<tr>
<td>SAN DIEGO</td>
<td></td>
<td></td>
<td></td>
<td>30.0%</td>
</tr>
<tr>
<td>SAN FRANCISCO</td>
<td></td>
<td></td>
<td></td>
<td>30.4%</td>
</tr>
<tr>
<td>SAN JOAQUIN</td>
<td></td>
<td></td>
<td></td>
<td>38.4%</td>
</tr>
<tr>
<td>SAN LUIS OBISPO</td>
<td></td>
<td></td>
<td></td>
<td>35.7%</td>
</tr>
<tr>
<td>SANTA MATEO</td>
<td></td>
<td></td>
<td></td>
<td>28.8%</td>
</tr>
<tr>
<td>SANTA BARBARA</td>
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<td>42.7%</td>
</tr>
<tr>
<td>SANTA CLARA</td>
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<td>32.2%</td>
</tr>
<tr>
<td>SANTA CRUZ</td>
<td></td>
<td></td>
<td></td>
<td>34.3%</td>
</tr>
<tr>
<td>SHASTA</td>
<td></td>
<td></td>
<td></td>
<td>32.4%</td>
</tr>
<tr>
<td>SOLANO</td>
<td></td>
<td></td>
<td></td>
<td>32.8%</td>
</tr>
<tr>
<td>STANISLAUS</td>
<td></td>
<td></td>
<td></td>
<td>37.5%</td>
</tr>
<tr>
<td>TULARE</td>
<td></td>
<td></td>
<td></td>
<td>45.9%</td>
</tr>
<tr>
<td>VENTURA</td>
<td></td>
<td></td>
<td></td>
<td>36.3%</td>
</tr>
</tbody>
</table>
Figure 2 graphs cumulative teen birth rates through age 18, 19, 20, and 21 for the three largest racial/ethnic groups in California's foster care system (Black, Hispanic, and White). Rates for Black youth were excluded in three counties (Imperial, Santa Cruz, and Yolo) due to small cell sizes. For California overall, birth rates by age 21 were highest for Hispanic youth (43.1%), a dynamic that emerged consistently in most counties. Statewide, Black and White youth had cumulative birth rates of 33.0% and 29.4%, respectively. Across counties, cumulative birth rates by age 21 ranged from 30% to 56% for Hispanic youth; 20% to 48% for Black youth; and 14% to 41% for White youth.
FIGURE 2 (CONT.)

CUMULATIVE % FIRST BIRTHS

BLACK  HISPANIC  WHITE

SOLANO  STANISLAUS  TULARE

VENTURA  YOLO
DISCUSSION

California and at least 21 other states have adopted policies that extend foster care services to youth beyond age 18. In addition to support services intended to lay a foundation for financial independence, this transitional period also provides an opportunity to engage youth who are among the most vulnerable next generation of parents.

Early data from California indicate that more than 60% of youth in foster care at age 17 are opting into extended foster care. It may be that the simple act of allowing youth to remain in care beyond age 18 will translate into significant birth rate reductions. But if historical patterns hold, more than 1 in 3 (35.2%) adolescent girls currently in California’s foster care system will have given birth at least once before age 21. Although significant birth rate variations emerged by county and race/ethnicity, even at the very low end of the county range, 29% of girls had given birth by age 21.

A consideration of births is relevant to service delivery and program design for at least three reasons.

FIRST

First, approximately two thirds of all first births by age 21 occurred after age 18, when youth would have historically aged out of foster care. Although future research is needed to better understand how youth may be differentially selecting into extended foster care, data from the present brief suggest that there is a window in which intentional efforts could be made to delay first births.

SECOND

Second, the extension of foster care through age 21 means that in any given year, the child welfare system will likely have more dependent adolescents and young adults who are parenting than it has ever had in the past. Housing, child care resources, and other transitional supports may need to be reconsidered and reorganized to reflect changing demographics.

THIRD

Third, young and first-time mothers may be more amenable to engaging in parenting programs and other services because they are less familiar with pregnancy, labor, delivery, and care. Young maternal age is strongly correlated with poor outcomes for both mothers and their children. Children born to adolescents who were themselves maltreated face a risk of abuse and neglect that is 3 times that of children born to demographically similar adolescents who were not maltreated. The extension of foster care through age 21 means that a vulnerable population of young, first-time mothers can be easily identified and targeted for services that enhance parenting capacity in an effort to improve next-generation outcomes.
Child welfare systems in California and other states are now charged with coordinating transitional services for foster youth beyond age 18. Linked child protection and birth record data indicate that in addition to youth who are already parenting, a significant share of youth eligible for extended care will have a first birth between age 18 and 21. This critical window offers an opportunity for intentional pregnancy prevention efforts coupled with targeted parenting supports.


7Cal Stat 2010 ch 559.


