

Youth in Foster Care in New York City

DATA BRIEF

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SUMMARY

Teens in foster care are a particularly vulnerable population. Compared to younger children, teens are more likely to live in residential care, more likely to run away from care, and more likely to leave care without permanency.² Each of these traits puts the teen population at higher risk of long-term negative outcomes such as justice system involvement, low educational attainment, unemployment, and dependence on public benefits. This brief describes some recent policy changes impacting teens and presents an analysis of initial placement patterns in one urban jurisdiction, New York City (NYC), that can inform potential responses to these changes. The brief then uses data from the federal AFCARS data system to compare NYC to other large urban jurisdictions on indicators such as how many teens live in foster care, the proportion of the foster care census composed of teens, and more.

The analysis of data from NYC shows that some youth enter care and leave quickly, some stay longer, and still others are re-entering care after previous spells. Almost half of NYC teens are initially placed in residential care, but many of these teens either leave foster care or move to family foster care quickly. The characteristics of the New York foster teen population are similar in many respects to other large urban jurisdictions on the rate of teens in foster care, living in kinship placements, and living in residential care. These analyses have implications for the types of services, placements, and permanency plans for youth.

BACKGROUND

The 2018 Family First Prevention Services Act (FFPSA) aims to limit the use of residential care such as group homes and institutions. Outside of a small number of special circumstances, FFPSA requires residential facilities to be qualified residential treatment programs (QRTPs) to be eligible for federal reimbursement. The new law requires court approvals at regular intervals for stays in residential care as well as formal assessments to determine if residential care is still needed.³ In most situations, FFPSA limits stays in residential care settings to no more than two

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² U.S. Department of Health and Human Services, Administration for Children and Families, and Children's Bureau. "A National Look at the Use of Congregate Care in Child Welfare," May 13, 2015, 24.

³ For a detailed discussion of FFPSA, see Children's Defense Fund (2018). *The Family First Prevention Services Act: Historic reforms to the child welfare system will improve outcomes for vulnerable children*. Retrieved from <https://www.childrensdefense.org/wp-content/uploads/2018/08/family-first-detailed-summary.pdf>.

weeks.⁴ FFPSA draws on extensive research that finds that congregate care settings do not meet children’s service needs or produce outcomes on par with family-like environments.⁵

The limits on congregate care will impact teens more than younger children, as youth are more likely to be placed in congregate care settings. The ripple effects of FFPSA, however, will be felt by all children in foster care. Most jurisdictions cannot afford to place children in congregate care without federal reimbursement, so most child welfare systems will have to follow FFPSA rules on residential care or face serious financial consequences. Teens that might have gone to residential care prior to the implementation of FFPSA will now be candidates for the same foster homes that care for all children in care. Limiting residential care means that systems across the country will need to expand dramatically their foster care pools and increase their capacity to find safe placements with kin.

NEW YORK CITY AND FFPSA

This work is already underway in NYC.⁶ The Administration for Children’s Services’ (ACS) [Foster Care Strategic Blueprint](#), first issued in January 2016 and updated annually, seeks to improve case practice and outcomes across the foster care continuum. The five-year plan seeks to improve outcomes through several strategies, including prioritizing permanency, increasing the size of the foster home pool, supporting kinship placements, and maintaining low caseloads. The Blueprint pays special attention to older youth by encouraging youth involvement in permanency planning, securing new supportive housing slots for youth leaving care, and scaling education and college support programs.

To adequately prepare for FFPSA, NYC and other systems need to understand how they use residential care currently. Below, we examine one aspect of the use of residential care: teen foster care placements in their first nine months in care.⁷ This analysis examines placement patterns of youth aged 14 to 17 years entering foster care in NYC from federal fiscal year (FFY) 2015 to FFY2018. We selected this age group because they are the youth most likely to be placed in congregate care. We selected this time period because it provides current information over several years and can be roughly compared with the federally required Adoption and Foster Care Analysis and Reporting System (AFCARS) data which are grouped by FFY.

⁴ National Conference of State Legislatures. “Family First Prevention Services Act,” September 25, 2019. <http://www.ncsl.org/research/human-services/family-first-prevention-services-act-ffpsa.aspx>.

⁵ See Annie E. Casey Foundation. (2012). Reducing congregate care: Worth the fight; U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. (2015). A national look at the use of congregate care in child welfare; U.S. Department of Health and Human Services, Administration for Children and Families, Children’s Bureau. (2015). A national look at the use of congregate care in child welfare; California Child Advocates for Change. (2016). Child welfare policy brief: Developing a robust continuum of care to support foster youth in family-based settings; Dozier, M., et al. (2014). Consensus statement on group care for children and adolescents: A statement of policy of the American Orthopsychiatric Association. *American Journal of Orthopsychiatry*, 84(3), 219–225.

⁶ See Tim Ross, Erica Pang and Luke Gerber. 2019. *Home Away From Home: Lessons for Building a One Family, One Home Foster Care System*. Available [here](#).

⁷ Youth placed due to juvenile delinquency petitions were excluded from this analysis.

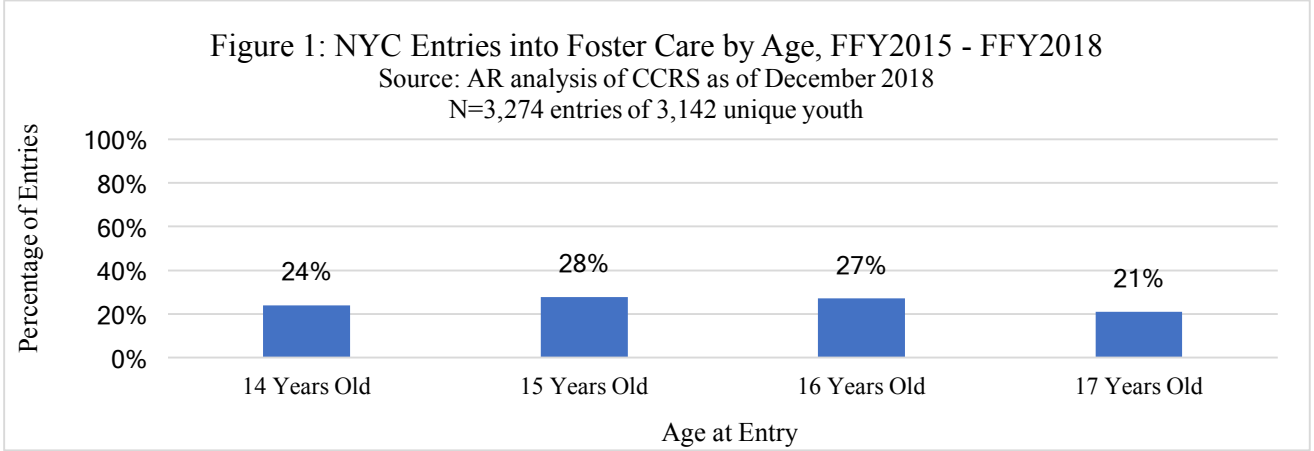
Data source. This analysis uses data from the Child Care Review Services (CCRS).⁸ CCRS data is the primary source of OCFS’ reporting to AFCARS.

Analytic strategy. We examined three different groups of youth entering care: (1) Youth who have brief stays in care (less than 45 days); (2) Youth who enter care as teens and have longer stays (45 days or more); and (3) Youth with a prior entry into care before age 14. We examined the first group to assess the opportunity to reduce the number of “short stayers” that might have been diverted from foster care with additional investments in wraparound services or other supports. We examined the third group because our previous analyses found that teens with prior spells have dramatically different permanency outcomes: many teens coming into care for the first time reunify with their parents in the first, second, and third years in care, but teens with prior spells rarely leave care after their first year. We wanted to see if placement patterns might help explain this finding.

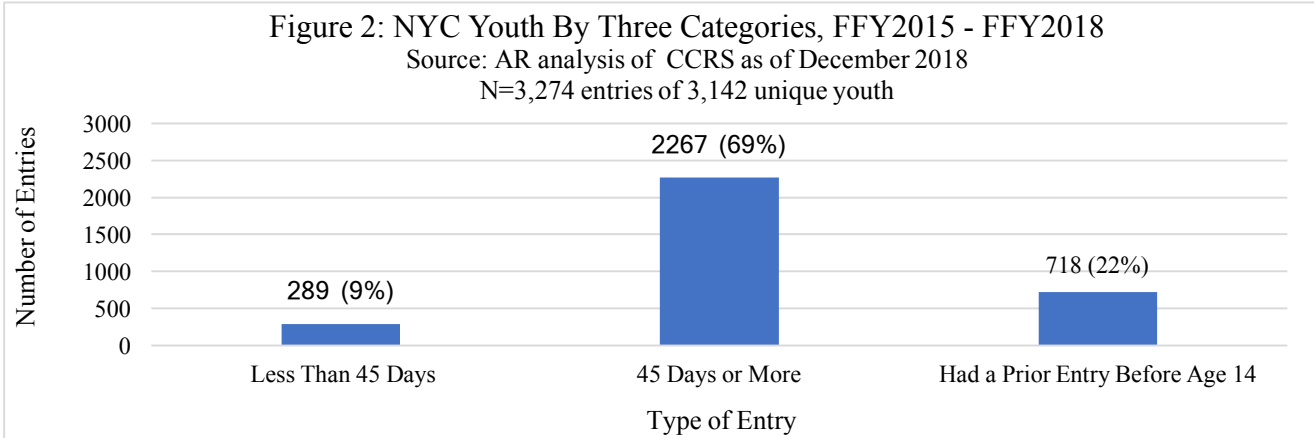
We used points in time to compare the initial, 45-day, and 270-day placement types. There are more rigorous ways to conduct this analysis, as youth can and do move into and out of placement types between the dates on which we extracted a point in time. We used this methodology for two reasons. First, we wanted to demonstrate a methodology that is easy to execute and understand, and which many large public child welfare agencies might be able to replicate without external assistance. Second, the resources available did not support a more rigorous analysis. In spot checks, we found that most of the children in residential care on day 270 were initially placed in residential care and were in residential care at day 45. At day 270, a substantial minority of those in residential care were in the same residential facility as their initial placement. This reflects NYC’s comparatively strong performance on placement stability metrics.

Age. Of the youth aged 14 to 17 entering foster care in NYC from FFY2015 to FFY2018, 786 (24%) were 14 years old, 908 (28%) were 15 years old, 887 (27%) were 16 years old, and 693 (21%) were 17 years old (see Figure 1). The 3,274 entries during this four-year time period were experienced by 3,142 unique youth.

⁸ The analysis uses a historical file created on December 31, 2018. This date is three months past the end of FFY18, so the data have little or no “data lag”—delayed data entry of placement data.

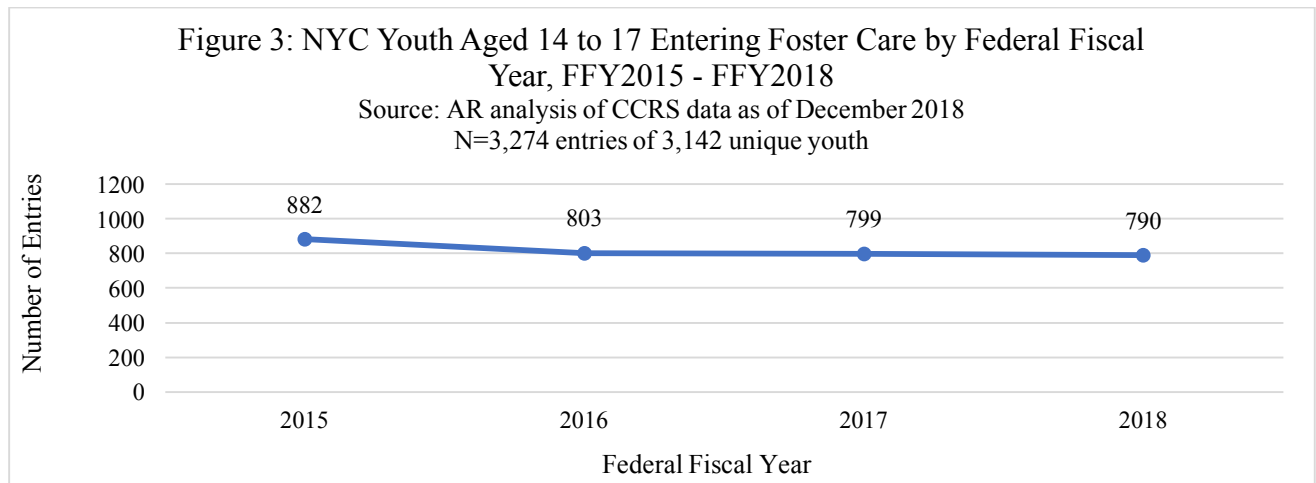


Lengths of stay. Most of the entries into care in NYC of youth aged 14 to 17 from FFY2015 to FFY2018 were longer than 45 days. Of the entries into care for the four-year period, 289 (9%) stays were less than 45 days, 2,267 (69%) stays were 45 days or more, and 718 (22%) were youth who had a prior entry before age 14 (see Figure 2).



Change in entries over time. Entries into foster care of young people aged 14 to 17 years declined by 10 percent over the four years – from 882 entries in FFY2015 to 790 entries in FFY2018 (see Figure 3). This decline is concentrated among 15-year-olds (-21%). We do not have a ready explanation for why this occurred. From 2015 to 2018, the overall number of admissions into NYC foster care declined by five percent.⁹

⁹ See New York State Office of Children and Family Services Monitoring and Analysis Profiles (MAPS) for New York City, 2015 to 2018, page 7, available [here](#). The MAPS data report entries over a slightly different time period but are sufficient for comparisons.



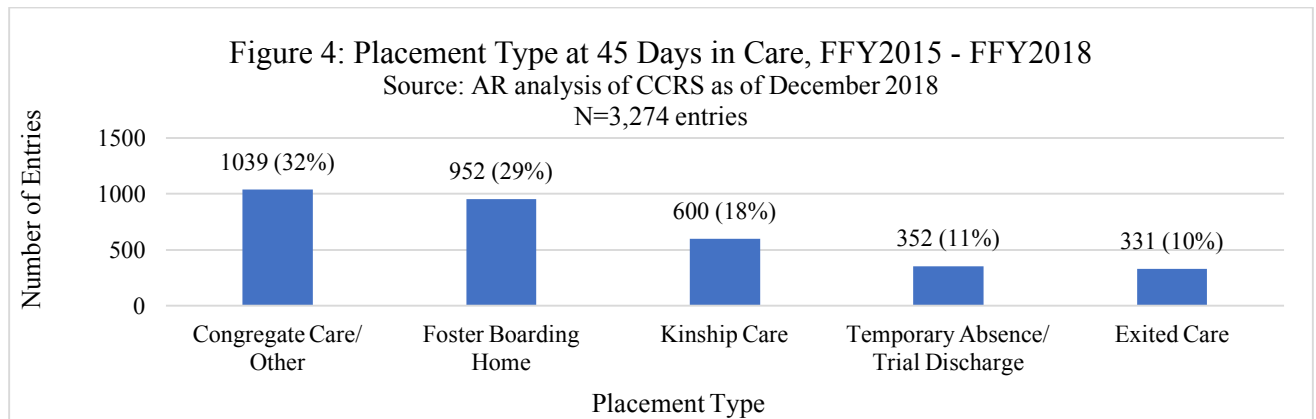
Initial placement types. Past analyses have shown that NYC uses congregate sparingly with residential care rates at a point in time fluctuating between 9 and 10 percent.¹⁰ With this context in mind, the initial placement rate of teens in congregate care is surprisingly high. Of the 3,274 entries from FFY2015 to FFY2018, 1,496 (46%) youth were initially placed in residential care, 1,169 (36%) youth were initially placed in foster boarding homes, and 609 (19%) youth were initially placed in kinship care.¹¹

Placement types at 45 days. Forty-five days after entry, 331 youth of the 3,274 (10%) youth who entered care at age 14 to 17 had exited foster care – 289 first time entries and 42 who had a prior entry in care before age 14. The proportion in residential care dropped markedly, from 46 percent to 32 percent, while 29 percent were in foster boarding homes and 18 percent were in kinship care (see Figure 4). The remaining youth were either temporarily absent from care or on trial discharge.

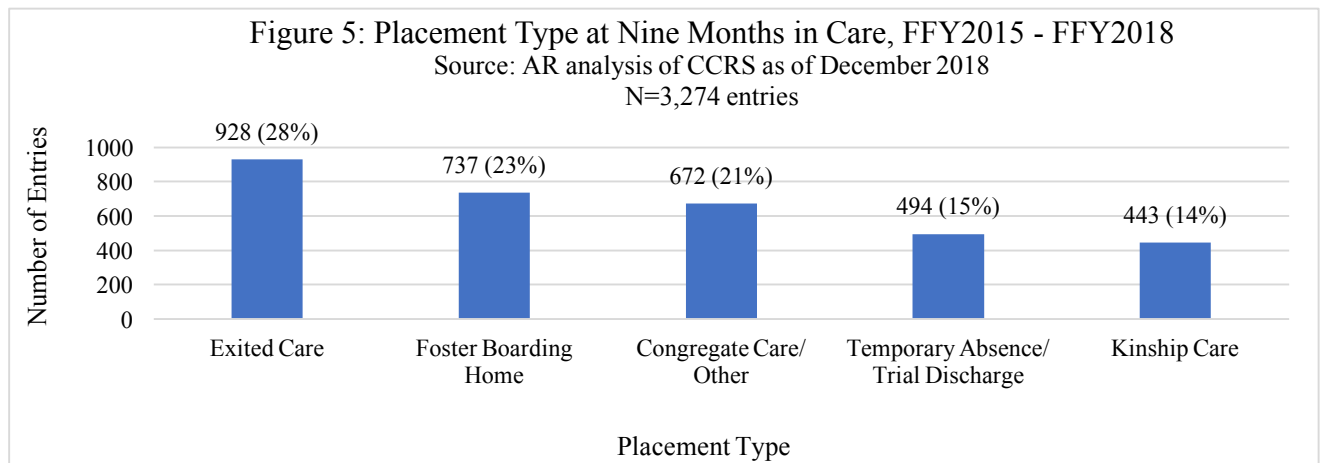
The steep decline in residential care use is good news. At the same time, nearly a third of the teens entering care were in congregate care 45 days after entry. This amounts to an average of over 250 teens in each entry cohort. With NYC congregate care rates averaging over \$300 a day, this is a substantial financial burden, especially if this spending is not eligible for federal claiming. We did not find substantial differences in placement patterns between youth entering for the first time or a successive time, so those numbers are not reported hereon.

¹⁰ See ACS Flash Indicators, available at <https://www1.nyc.gov/site/acs/about/flashindicators.page>.

¹¹ The initial placement type is the first placement after a youth left “pre-placement” facilities. In NYC, ACS operates the Children’s Center and contracts for Youth Reception Centers, which provide care until a placement can be located. If youth remained at the Children’s Center or a Youth Reception after 45 days in care, they were classified as being in congregate care.



Placement types, 270 days or more. By day 270, 28 percent of all youth who entered care aged 14 to 17 had exited foster care. Of all 3,274 entries, 21 percent were in congregate care on their 270th day in care, 23 percent were in foster boarding homes, 14 percent were in kinship care, and 15 percent were either temporarily absent or on trial discharge.



The proportion of youth in congregate care is sharply lower at day 270 compared to initial placements or day 45. Still, one in five youth who entered care at age 14 to 17 are in residential care nine months later. Of all entries, five percent are youth with prior entries living in congregate care after nine months. Our previous analyses show that youth with prior entries are at risk of aging out if they do not return home in the first year. Changing this trajectory is one of the challenges that NYC and many other jurisdictions face in creating the future that FFPSA envisions.

Fortunately, systemic changes envisioned by NYC’s Foster Care Blueprint are producing measurable results. In March 2017, ACS set a public goal of having 46 percent of the foster care census placed with kin by June 2020. Since then, the rate of children initially placed with kin has increased to 41 percent in city fiscal year 2019—the highest rate ever.¹² The percent of children

¹² This figure is from Action Research’s analysis of CCRS data from 1990. Data prior to 1990 are unavailable.

living with kin at a point in time has increased from 31 percent to 39 percent as of September 2019, the highest rate in at least 11 years.¹³ The number of newly certified homes that have taken a placement increased by 32 percent in city fiscal year 2018 and by an additional 13 percent in city fiscal year 2019—after several years of year over year declines.¹⁴ These improvements, in turn, have contributed to declines in the average daily census at the Children’s Center, a key indicator of placement availability for teens.¹⁵ Challenges remain, but many indicators are moving in the right direction.

¹³ See ACS Flash Indicators, available at <https://www1.nyc.gov/site/acs/about/flashindicators.page>

¹⁴ See Ross, Pang, and Gerber 2019.

¹⁵ See ACS Flash Indicators, November 2019.

Appendix: NYC compared to other jurisdictions.

In the analysis above, we followed cohorts of youth through their stays in foster care. Another way to understand patterns among youth is to examine who is in foster care at a point in time. Point in time analyses are easy to understand and commonly available. Points in time, however, over-represent long stayers in foster care, not the typical experience of youth.¹⁶ With that caveat, we present several points in time from across the country to see how NYC compares to other large jurisdictions in its use of foster care for teens.

In sum, we did not find distinct patterns among cities in the rate of teens in foster care, the proportion of teens in the foster care census, and their placement types. Instead, these figures fluctuated substantially. NYC's patterns of teen use showed no unusual characteristics. We should note, however, that these numbers can and do change quickly: NYC has made significant strides in kinship placements and foster home recruitment since the time the data presented here were collected.

Data Source. For our analysis comparing NYC youth trends to other jurisdictions nationally, we used AFCARS¹⁷ FFY2017 data from the National Data Archive on Child Abuse and Neglect (NDACAN)¹⁸ and population estimates from the 2017 American Community Survey (ACS).¹⁹ We analyzed data from the 21 most populous counties in the U.S. (combining the five boroughs in NYC into one county) and focused our comparisons on the five counties with the largest teen populations (ages 12 to 17). Because the 2017 AFCARS data for New York State are under review, we used data from the Child Care Review Services (CCRS) to generate NYC data.

Number of teens in foster care. The five counties with the largest teen populations in descending order are Los Angeles County, NYC (five boroughs combined), Harris County (includes Houston), Cook County (includes Chicago), and Maricopa County (includes Phoenix).²⁰

Rate of teens in foster care. The average rate of teens in foster care among the 21 counties is 5.4 teens in foster care per 1,000 teens in the population. The highest ratios were in Philadelphia County, Pennsylvania (18.5 teens in care per 1,000 teens), Marion County, Indiana (includes Indianapolis) at 14.0, and Suffolk County, Massachusetts (includes Boston) at 13.5. The lowest rate of teens in foster care were 2.1 teens in foster care per 1,000 teens in Tarrant County, Texas (includes Fort Worth). NYC's ratio was 5.7 teens in foster care per 1,000 teens in the population and Los Angeles County's ratio was 6.5 teens in foster care per 1,000 teens in the population. Among the five counties with the largest teen populations, the ratios of teens in foster care per

¹⁶ See Wulczyn, Fred. (1996). A Statistical and Methodological Framework for Analyzing the Foster Care Experiences of Children. *Social Service Review - SOC SERV REV.* 70. 318-329. 10.1086/604185.

¹⁷ AFCARS: <https://www.acf.hhs.gov/cb/research-data-technology/reporting-systems/afcars>

¹⁸ NDACAN: <https://www.ndacan.acf.hhs.gov/>

¹⁹ American Community Survey (ACS): <https://www.census.gov/programs-surveys/acs>

²⁰ American Community Survey (ACS) Population Under 18 Years by Age: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_17_1YR_B09001&prodType=table

1,000 teens in the population ranged from 2.5 in Harris County to 7.7 in Maricopa County (see Table 1).

Youth as a proportion of all children in foster care. Across the 21 counties, the average proportion of children in care that were teens aged 12-17 was 28 percent, just about the same as NYC’s proportion. Teens made up a higher proportion of the foster care census in Shelby County, Tennessee (includes Memphis) at 42 percent of all children in care and San Francisco County, California at 41 percent of all children in care. The lowest proportions of teens as part of the foster care census were in Dallas County, Texas at 21 percent and Duval County, Florida (includes Jacksonville) at 22 percent.

Placement types. We combined federal placement types into five categories: residential care (group home; institution), kinship home (relative foster home), foster home (non-relative foster home; pre-adoptive home), trial home visit, and other (runaway; supervised independent living; missing). Trial home visits and other categories are excluded in this placement analysis.²¹

Teens were close to evenly split across the three placement types.²² Thirty-nine percent of teens between the ages of 12-17 in the 21 major U.S. counties were in foster boarding homes at the end of FFY2017, making them the most common placement type. The second most common placement type is residential care, with 33 percent of teens placed in group homes, institutions, or other types of professional, nonfamily care. Twenty-eight percent of teens were placed in kinship homes.

In NYC, foster boarding homes were the most common foster care placement (49%), which is higher than the average rate across the 21 counties. The next most common was congregate care (30%), followed by kinship homes (22%).²³

Among the 21 counties, the highest proportions of teen placements in kinship homes, after excluding those on trial discharge, were in Marion County (40%) and King County (includes Seattle) (39%). The lowest were in Shelby County (6%) and Tarrant County (10%). The highest proportions of teen placements in congregate care were in Denver County (59%) and Suffolk County (54%), while the lowest were in King County (19%) and Washington DC (18%). Los Angeles (21%) and NYC (26%) counties had lower percentages of teens placed in congregate care than most of the other 21 counties.

²¹ The other category for NYC derived from CCRS includes AWOL, hospital stays, overstayed weekends, temporary foster care transfers, and various other reasons for a child’s absence from care. Therefore, the other category for NYC may not entirely match the AFCARS other category for comparable counties.

²² These figures exclude youth who are on trial discharge, temporarily absent from care (e.g. AWOL), or whose placement types is missing in the data.

²³ Percentages exclude trial home visits from the denominator.

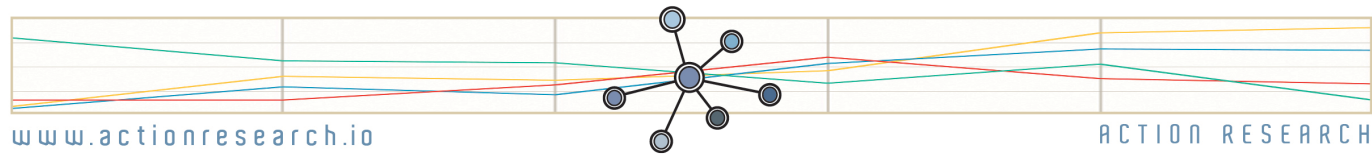


Table 1. Analysis of population and foster care trends on September 30, 2017 for the top five counties with the largest teen populations.²⁴

County	Teen Population, Ages 12-17 ²⁵	Teens in Foster Care (Ages 12-17)	Rate of Teens in Foster Care (no. per 1,000 teens)	Teens as Part of the Foster Care Census	Teens in Kinship Care ²⁶	Teens in Congregate Care ²⁷
Los Angeles County, CA	754,595	4,915	6.5	26%	32%	22%
New York City, NY (5 Boroughs Combined)	554,286	2,825	5.7	28%	22%	30%
Harris County, TX (Houston)	409,793	971	2.5	24%	19%	36%
Cook County, IL (Chicago)	380,715	1,406	3.7	22%	33%	22%
Maricopa County, AZ (Phoenix)	357,124	2,737	7.7	29%	32%	47%

²⁴ We used AFCARS foster care data for all counties excluding NYC. For NYC, we used CCRS data.

²⁵ U.S. Bureau of the Census, American Community Survey, One-Year Estimates.

²⁶ Only children in 24-hour care are included in this analysis. Trial home visits, temporary absences, and youth with missing placement data are excluded.

²⁷ See above.