The Junior League of San Diego, Inc. is a member of an international organization of women committed to promoting voluntarism, developing the potential of women, and improving the community through the effective action and leadership of trained volunteers. Its purpose is exclusively educational and charitable. The Junior League welcomes all women who value our Mission. We are committed to inclusive environments of diverse individuals, organizations and communities.

The following report details findings and outcomes from the Junior League of San Diego’s 2015 Solutions Summit focused on California’s Assembly Bill 12 and the implementation challenges effecting transition-age foster youth.
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Junior League of San Diego Solutions Summit on California AB12

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(From left to right: Betsy Miller-Vixie, Brandi Cropper, Kaaren Nyberg, and Lisa Cobble)

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The Junior League of San Diego would like to thank the following for their commitment and contribution to the 2015 Solutions Summit:

- Access Inc.
- California State San Marcos ACE Scholars Service
- California Youth Connection
- Casa de Amparo
- Casey Family Programs
- Child Welfare Services, Children’s Advocacy Institute
- Council District 6
- Cuyamaca College
- Dependency Legal Group of San Diego
- Katherine Stuart Faulconer, First Lady of San Diego
- Foster the Youth
- Fostering Futures Initiative
- Fred Finch Youth Center
- Grossmont College
- Grossmont Guardian Scholars
- Home Start
- Health and Human Services Agency
- Junior League of San Diego SPAC, Advocacy and Solutions Summit Committees
- Just in Time for Foster Youth
- Tilisha Martin, Esq.
- Mira Costa and Palomar College
- Creative Life Action Network
- Patricia Sue Cohen Foundation
- Pfister Family Foundation
- Promises2Kids
- Dave Roberts, Vice Chairman, San Diego County Board of Supervisors
- San Diego Center for Children
- San Diego County Child Welfare Services
- San Diego District Attorney’s Office
- San Diego Office of Education
- San Diego Youth Services
- Second Chance Program
- South Bay Community Services
- TAY Academy
- Trio EOC
- The County of San Diego
- The John Burton Foundation
- The University of San Diego
- Voices for Children
- Wahupa Educational Talent Search
- Walden Family Services
- Assemblywoman Shirley N. Webber
- YMCA Youth & Family Services

Most importantly, the Junior League of San Diego’s Solutions Summit on California AB 12 would like to thank the former foster youth who dedicated their time, energy, resources and voices to the successful outcomes of the Summit.
Introduction

In April 2015, the Junior League of San Diego convened a two-day Summit on the recently enacted *Fostering Connections to Success and Increasing Adoptions Act* (FCA or “Fostering Connections”, formally known as Assembly Bill 12). AB12 took effect January 1, 2012 and is among the greatest legislative accomplishments in foster care history. AB12 drastically changed foster care, by optionally extending foster care from the age of 18 to the age of 21. As California, and specifically San Diego County, have begun to implement aspects of this new federal legislation, a variety of challenges have resulted. Solutions Summit brought together 105 attendees from over 40 organizations for two days of discussion and active problem-solving surrounding significant challenges facing San Diego’s transition age youth (TAY) population. The focus of the Summit was to create solution roadmaps to the challenges that arose from the initial implementation of Assembly Bill 12, California’s Fostering Connections Act.

The Junior League of San Diego created a Steering Committee consisting of local San Diego TAY service providers and experts to generate the 2015 Solutions Summit topic. Leveraging the expertise of those involved on the front lines and who experience first-hand the challenges faced by this population was critical to the success of the Summit.

The identified topics of discussion included training programs for successful implementation of AB12 for all stakeholders, reasons why TAY are not succeeding under AB12, unique issues for dual-jurisdiction TAY, issues or roadblocks preventing TAY from re-entering AB12 after losing eligibility, how to support TAY in maintaining AB12 eligibility, improving financial planning and money management skills, improving access to the medical system, increasing the amount of appropriate housing options to reduce homelessness, and how to improve the educational outcomes of TAY.

The Junior League of San Diego’s 2015 Solution’s Summit attracted key experts, TAY service providers, and politicians from across California. With over 105 participants, the Summit had attendance from community partners that covered the breadth of TAY services: Access Inc., California State San Marcos ACE Scholars Service, California Youth Connection, Casa de Amparo, Casey Family Programs, Child Welfare Services, Children’s Advocacy Institute, Council District 6, The County of San Diego, Cuyamaca College, Dependency Legal Group of San Diego, Foster the Youth, Fostering Futures Initiative, Fred Finch Youth Center, Grossmont College, Grossmont Guardian Scholars, Health and Human Services Agency, Home Start, The John Burton Foundation, Just in

There are two terms used throughout this report when referring to those in the foster care system or AB12. A non-minor dependent is the terminology used to define those that chose to remain a part of the system at the age 18 and participate in AB12. TAY is the terminology used to describe youth between the ages of 16-25 who are or have been a part of the system.

The outcomes of the Junior League of San Diego Solutions Summit are eight roadmaps and a collective way to move forward in key areas of AB12 implementation. A Junior League of San Diego committee will focus solely on advancing these roadmaps to continue the momentum of active problem-solving that occurred during those two days. With the continued participation of Solution Summit attendees, these roadmaps will be further developed, assessed, and implemented in phases over an appropriate timeline. The Steering Committee for the second annual Junior League of San Diego Solution’s Summit is already exploring the topic for the 2016 Solutions Summit. We are proud to be a part of this dialogue and a driver of change for the TAY population.

Junior League of San Diego
August 2015
Summit Structure

The 2015 Junior League of San Diego Solutions Summit was structured as a two-day, small team, active problem-solving summit among key TAY experts from across California. During registration, attendees ranked their top three choices for breakout topic areas and were assigned to their topic area before the Summit began. The experts were broken into the following topic areas:

- **Topic 1:** What training programs are needed to successfully implement AB12 for non-minor dependents, government officials, and non-government organizations (NGOs)? What tools, training or other support are needed to assist social workers as they aid non-minor dependents in successfully navigating extended foster care?

- **Topic 2:** What roadblocks remain for non-minor dependents under the extended foster care system (AB12)?

- **Topic 3:** What issues cause non-minor dependents to lose their AB12 eligibility? What factors prevent them from regaining their eligibility? What support can be provided to non-minor dependents enrolled in post high school education and extended foster care to ensure they continue to meet the eligibility requirements?

- **Topic 4:** What method can be used to improve financial planning and money management for non-minor dependents in extended foster care?

- **Topic 5:** What methods can be used to improve access to and use of the medical system including mental health by non-minor dependents?

- **Topic 6:** What can be done to increase the amount of appropriate housing options and reduce homelessness among non-minor dependents under AB12?
Junior League of San Diego Solutions Summit Report

- Topic 7: Combined use of AB12 and special educational resources to improve educational outcomes for non-minor dependents.

Each working group contained a mixture of attorneys, transition-age foster youth, social workers, service providers, and group home leadership. The working groups were led by facilitators who are leaders in the Junior League of San Diego. There was also a note taker in each team to ensure all ideas, feedback, progress, and roadmap decisions were documented.

The first day of the Summit was kicked off by the Junior League of San Diego President, Erin Leventhal, followed by two keynote speakers: the First Lady of San Diego, Katherine Faulconer, and Tilisha Martin from Dependency Legal Group. Attendees then met with their working groups and spent the first day discussing the challenge, what existed, what improvements could be made to what existed, and new solutions to the challenge.

The second day of the Summit, the teams constructed roadmaps for implementation of efforts to alleviate the challenges of their focus area and then presented this to the entire Summit. The presentation period was a time for collaboration as other teams asked questions, posed potential resources, and had the opportunity to understand the work of the other attendees.

San Diego County Supervisor, Dave Roberts, was the guest speaker during day two. Dave Roberts is an adoptive parent and his legislative priorities include the County’s foster care and adoption services, domestic and child abuse.

While actively problem-solving to develop a recommended solution and roadmap, each work group was asked to focus on the following:

- What currently exists today?
- What isn’t working with what exists today?
- What could be done to leverage, change, or improve what exists today?
- How will success be measured?
- What would the impacts of the successful implementation be?
- What would a timeline for implementation look like?
➢ How much would implementation cost?
➢ What are potential sources of funding?
➢ What barriers are there for implementation of this solution?
➢ Who will manage the collaboration?
➢ Who will manage the progress of the roadmap? Who will own the final project or initiative?
➢ What roles and responsibilities are involved for project owners?

Chapter One

SUMMARY of SOLUTIONS & RECOMMENDATIONS

In an effort to identify ways in which the implementation of AB12 can be a smooth transitional process, allowing for a more effective and beneficial system for non-minor dependents, the 2015 Solutions Summit participants developed the following solutions and recommendations:

• Standardized support services offered by all local two and four year colleges. Currently college-level TAY support programs and services vary greatly and are developed at will by each college. Once implemented in San Diego County, this initiative will expand the standardization of support services for TAY attending two and four year colleges statewide.

• Financial planning and money management program as a standard component of the foster system and/or AB12.
• Bi-annual collaboration, coordination, and networking for TAY professionals responsible for AB12 implementation. Continue to provide the opportunity for TAY experts to discuss peer-to-peer best practices, implementation of legislation, and training using “train the trainer” model.

• “SAFE 24” housing facility to serve 18-25 year old TAY and other high-risk youth. Recommendation to pilot the program with smaller house-style facilities with the ultimate goal of a 100-bed facility. New residents would meet with staff and determine a best-fit among 30-, 60- and 90-day plans. Housing would include on-site mental health facilities, crisis unit, and additional services. Next steps are a feasibility study, constraints analysis, funding search both private and public and pilot the program.

• Mobile health van to bring comprehensive medical services to TAY near their homes to alleviate difficulties with receiving these fundamental services due to lack of transportation or difficulty with scheduling. The mobile health van would provide services that include mental, dental, and medical health. Next steps are searching for funding and identification of service providers.

• TAY matched with a support coach at the age of 14 versus the current standard with which TAY do not receive transition information and a checklist until the age of 17. The coach and TAY work together to create a comprehensive, individualized transition plan that takes advantage of all available resources to increase stability for the youth. Starting these critical discussions at the age of 14 allows the youth significant more time for preparation and success. This will curtail the surprise most TAY experience during the transition and uncertainty on their next steps.

• Decrease high-risk behaviors that hinder ability to participate in AB12 by providing trauma-informed care to 1) All birth parents and children over the age of 12 who are on a reunification plan, and/or 2) Family members, non-related family members, mentors, and CASAs.

“We are working together to try and provide opportunities for youth in this next generation to try to overcome some of the obstacles they’ve had no part in creating.”

Solutions Summit participant
• Training for probation officers who are serving on non-minor dependent cases to ensure that available AB12 services and programs are not neglected and appropriate protocol and interaction with non-minor dependents occurs.
Chapter Two

Challenge #1: TRAINING PROGRAMS FOR AB12

What training programs are needed to successfully implement AB12 for non-minor dependents, government officials and non-government organizations?

The first work group discussed the following training programs and solutions to successfully implement AB 12 for non-minor dependents, government officials and non-government organizations:

Problem: New AB12 legislation is not fully understood by service providers

Evaluation of Current Situation

AB12, California Fostering Connections to Success Act became effective January 1, 2012. This legislation drastically changed foster care by optionally extending foster care for eligible youth beyond the age of 18 to the age of 21. The goal of the legislation was to provide foster youth support while experiencing independence. In January 2013, the second phase of AB12 implementation occurred where youth who were already in the system at the time of their 18th birthday were eligible for AB12.

This new legislation and phase-in of hundreds of non-minor dependents was a big shift for service providers. There are several aspects to this that have caused varied levels of understanding and implementation among service providers. These aspects include funding for AB12, state, county, and individual organization rules and processes for implementation.

An observation provided by the transition-age youth at the Summit is that there is a lot of information and services available; however, these are uncoordinated so it may seem as

“It’s our job whether government, volunteer organizations, or private industry, to help them succeed.”

Solutions Summit participant
though professionals serving the youth are “untrained”. There is inconsistent information being dispersed that can cause these youth to mistrust. Raul, a 22 year old TAY, stated: “There is a lot of information out there, but a lot of different versions of it.”

The group of experts identified the lack of collaboration and integration of best practices as sources for the issues encountered with implementation. They discussed the following necessary components of a possible solution:

1) Goal: Improve the outcome of TAY through better implementation of AB12 policies and programs. Share implementation best practices in a way that makes them accessible to all County stakeholders. Best practices must be shared, distributed, and integrated. All stakeholders will have the same information, working towards the same outcome.

2) Collaboration: Agencies must make efforts to get everyone on the same page.

3) Basic Premise: Want to connect people in a very positive way to an abundance of resources, to fill the collaboration and integration of best practices gap that is effecting AB12 implementation.

4) How to Connect: It’s critical to create authentic connections amongst program participants. How to share information: “Train the Trainer” and “Peer to Peer” are the most familiar and effective ways among service providers.

5) Frequency: Need to set frequency goals for the collaboration program. Recommended held quarterly or bi-annually.

6) Ambassadors: Each agency and/or stakeholder will have an ambassador who will meet with other agency ambassadors. Ambassadors will receive training at the meeting and be responsible for learning and disseminating program information to their agencies.

7) At the Ambassador meeting, “Value Exercises” will be practiced in order to point out that all agencies are aligned and working toward the same goal.

8) TAY agencies want connections among each other and a collaborative ambassador program will provide that.

9) Layering of support throughout all providers participating in the program is a selling point for all involved parties.

10) Resource Toolbox: A toolbox of resources for youth can be available, including professional and peer perspectives.

11) Proven Practice: It is much easier to make referrals between agencies when there is a personal connection between them and/or the program.
12) There must be awareness and support at the agency and individual level of their organization roles.

13) This concept will raise the knowledge of those involved and increase collaboration among the group, thereby creating informed stakeholders that improve the overall outcome of implementation of support of TAY in AB12.

Final Recommendation

The result of these components was a final solution recommendation. The team identified the need for a consistent collaboration program dedicated to sharing best practices, challenges and successes with AB12 implementation, and growing the bonds and support.

This collaboration program is recommended to meet quarterly or bi-annually. Each stakeholder/organization should choose an “Ambassador” to participate.

➢ Meetings will begin with shared values exercises.
➢ Best practices will be communicated including Trauma Informed Care, AB-12 policy updates, positive youth development techniques, and strengths-based exercises.
➢ There will be opportunities for networking so that all ambassadors will know each other personally. This will increase collaboration and ease organizational referrals for TAY. Ambassadors will have the opportunity to clarify their agency roles.
➢ Ambassadors return to their agencies and disseminate information to develop and support TAY.

The concept is that of a “Toolbox” of professional understanding of AB12 implementation. The “Toolbox” has the resident knowledge the agency representative comes with and through participation in the collaboration program, adds tools such as lessons learned, issues encountered through program standup, what has worked, and many more. Through collaboration, this program:

1) Improves implementation effectiveness by sharing issues encountered so other stakeholders can avoid them and not experience the same challenges
2) Creates a network of very informed individuals who can share their knowledge with each other, thereby increasing the knowledge of their respective organizations
3) Reduces “re-creating the wheel” by stakeholders sharing how they successfully implemented aspects of AB12
Chapter Three

Challenge #2: ROADBLOCKS OF AB12

The second working group discussed the following roadblocks that remain for non-minor dependents under AB12 and issues unique to dual jurisdiction non-minor dependents.

What roadblocks remain for non-minor dependents under the extended foster care system (AB12)?

Problem: High-risk behaviors create a barrier to participation in AB12

Evaluation of Current Situation

Maintaining eligibility and enrollment in AB12 is critical to the stability and success of a non-minor dependent. A major roadblock that threatens eligibility and enrollment is engagement in high-risk behaviors by non-minor dependents. High-risk behaviors were defined by the group as the following: promiscuity, unprotected sexual activity, drug use, impulsive spending, criminal activity, unsafe friends, violence and anger control, problem resolution skills and poor social media management.

Based upon experience, the group of TAY experts identified three key reasons why non-minor dependents are engaging in high-risk behaviors and jeopardizing their participation in AB12.

1. **Lack of Modeling:** Non-minor dependents were placed in the foster system due to the poor decisions and abuse they endured while under the care of their guardians. The “modeling” they experienced by their guardians was not the behaviors they need to be successful.

2. **Lack of Internal Moral Compass:** Because of their environment, who they surround themselves with, and a lack of positive support, non-minor dependents can exhibit poor judgement and/or a lack of moral compass.

“JLSD stands with our partner organizations determined to change the outcomes for San Diego’s transition aged youth.”

*Solutions Summit participant*
3. **Poor Relationship Skills:** Due to their background and/or lack of appropriate resources while in the foster care system, non-minor dependents can have poor relationship skills.

The team identified training as a fundamental source for providing the right support and resources to effectively make a change in high-risk behaviors. There are several critical sources of support for non-minor dependents, some of whom do not have any or enough training. The team identified the need for ongoing training for birth parents, guardians, and social workers.

The team set criteria and measurements for success to understand and monitor changes in high-risk behavior with the proposed solution. These metrics include:

- Decreased involvement with law enforcement
- Post-secondary education retention
- Post-secondary education enrollment
- Work retention
- Fewer unplanned pregnancies
- Reduced homelessness
- Fewer medical incidences
- Reduced gang involvement

The team discussed phased implementation and what the roadmap for that would be:

- One Year: Estimated for agency and county collaboration
- Two Years: Estimated for county rule-making on how to implement
- Three to Five Years: Estimated for legislation approval and innovation funding

The team identified possible barriers to the implementation of the developed solution. These potential barriers are funding, getting youth to attend trainings, and determining the appropriate people in the non-minor dependents’ lives to include that could be influential in preventing and changing high-risk behaviors.

There are several community partners, non-profit organizations, and adults involved in the lives of non-minor dependents that were identified as key contributors to the implementation of this solution. Involvement by the following is highly recommended: The John Burton Foundation, San Diego Youth Services, YMCA, Surviving Together, Achieving and Reaching for Success (STARS), Social Advocates for Youth, Foster Families, Birth Families, County of San Diego, Grossmont College and relative care givers. The implementation relies heavily on the collaboration between the county, non-profits, and the community.
Final Recommendation

The team identified the need for ongoing training for birth parents, guardians, and social workers. The details of that are discussed below.

1) **Foster Youth or TAY on a Reunification Plan:** Create a new component to the current wrap-around training with additional check-ins and trauma training with birth parents and youth over the age of 12. The new component would be the development of training on trauma informed therapy. Part of the training should include peer-to-peer training and coaching, and have a parent and TAY as some of the trainers. The youth has input throughout the entire process.

   - Offer trauma-informed training for birth parents to understand how their actions effect youth, creating a better understanding of the long-term effects of neglect, and sexual, physical, and emotional abuse. Educate about what happens when a Child Protective Services (CPS) report is made and provide birth parents with tools when children are removed so that high-risk behaviors can be lessened/improved. Create "CASAs" for birth parents. Currently, some birth parents still do not acknowledge that they are the cause of the TAY’s removal even after several therapy sessions. Create a standard growth assessment for therapy with birth parents.

   - Other family members should be contacted and involved in the training. There is a need for increased family finding efforts, which require an increase in family finding funding. Family finding efforts detail the steps a specific group of social works take to find family members of a youth when they enter the foster care system. This must be a part of the solution and possible funding sources include Mental Health Services Act (MHSA), federal and state grants (e.g., foster care improvement dollars), and foundation funding.

   - Provide trauma-informed training for TAY, including tips on how TAY can process what has happened. Create a space where TAY can thrive during this process. This can help increase accuracy of diagnoses, such as post-traumatic stress disorder (PTSD), and thus increase the ability to gain resources. Mitigate the potential for re-traumatization by ensuring training is not offered too soon after the initial trauma as the youth may be too raw and overwhelmed. Help youth identify what behaviors are high-risk and educate them on the dangers. Train TAY to recognize red flags.

2) **Foster Youth or TAY who are not on a Reunification Plan:** A family member or non-related family member (NRFM), Mentor, and Court Appointed Special Advocate (CASA) will be trained on how to discuss red flags and how to approach situations to avoid dangerous or high-risk behavior with the youth.
The youth will attend meetings with peers and will incentivize levels. The meetings should be held once a month for an hour with a total of 11 meetings held over the course of the year. By the end of the program, the youth and his or her peers will create a video or podcast to train other youth. This graduation project will be worked on in sessions 9 and 10 and be presented at graduation in session 11.

Up-to-date contact information for each organization involved in a youth’s life is a necessary support tool. A recommendation is to create an online resource hub or an app for smartphones (i.e., fosteringchange.org) and an online binder. Incorporating the San Diego County Office of Education model is also highly recommended.
Chapter Four

Challenge #3: ROADBLOCKS OF DUAL JURISDICTION

The second group also discussed which issues are unique to dual jurisdiction non-minor dependents.

Which issues are unique to ‘dual jurisdiction’ non-minor dependents? How can AB12 be used to provide support for these at-risk youth?

**Problem:** Dual jurisdiction TAY have unique barriers to participation in AB12.

**Evaluation of Current Situation**

There are several unique barriers to dual jurisdiction TAY. The team determined the two most common barriers they witness and experience with dual jurisdiction youth. One barrier is the addition of a probation officer to the case management team when TAY enter the juvenile system. The second barrier is the difference in AB12 case handling training between a probation officer and a social worker.

Currently there are disputes over who should take the lead on a dual jurisdiction case. For those AB12 eligible youth in the juvenile justice system, there are a few factors that contribute to the dispute over who should be taking the lead on a case:

- There is a stigma associated with having a probation officer vs. a social worker be the lead on a case.
- There are differences in the way a probation officer and a social worker engage with TAY.
- Some youth respond better to authoritarian leadership, may have a good preexisting relationship with their probation officer, and would prefer their probation officer take the lead.

The team developed two parts to a potential solution to overcome barriers experienced by dual jurisdiction non-minor dependents. The first part is to allow the non-minor dependent to have a voice in their placement. The second part provides for additional probation officer
training regarding appropriate casework engagement with dual jurisdiction non-minor dependents.

Final Recommendation

**Non-Minor Dependent has a Voice in their Case Lead:** Non-minor dependents would benefit from having a say in which department takes the lead on their case. The following youth input factors must be considered:

- Who has a better relationship with the youth
- To whom the youth responds better
- Which program best responds to the youth’s needs

**Additional Training for Probation Officers:** Probation officers are not the experts in AB12. Dual jurisdiction TAY can reenter AB12 under certain circumstances. Probation officers should be educated on this so to ensure the appropriate TAY case handling, getting TAY back into AB12 if desired, and getting TAY the support services they need and for which they are eligible.

Overall, there is a broader need for increased training of probation officers who are going to be serving as case managers for non-minor dependents. Probation officers should be provided with knowledge of what is and is not considered trauma-informed interaction with the non-minor dependents. They also should be trained on the legal responsibilities and limitations of the caseworker.
Chapter Five

Challenge #4: MAINTAINING AB12 ELIGIBILITY

The third work group discussed what issues cause non-minor dependents to lose their AB12 eligibility and what support can be provided to non-minor dependents enrolled in post high school education to continue to meet eligibility.

What issues cause non-minor dependents to lose their AB12 eligibility and what support can be provided to non-minor dependents enrolled in post high school education to continue to meet eligibility?

Maintaining access to the support, resources, and funding AB12 offers can be the one factor that heavily influences a non-minor dependent’s success. California foster youth are less likely than other students to complete high school, enroll in a community college, or persist in community college once enrolled. Less than 3% of foster youth that attend college graduate.

Identifying programs that support foster youth to enroll in and complete post high school education is key to their future self-sufficiency and success. Currently college level TAY support programs and services vary greatly and are developed at will by each college. Promises2Kids is a local, successful program that is making a difference. Their Guardian Scholars program encourages foster youth to pursue higher education through community college, trade school or a university degree. This highly successful resource provides former foster youth with a partial financial scholarship along with mentoring support to assist them in adapting to and excelling in a higher education setting. More than 200 youth have been provided scholarships. Over 90% of guardian scholars will be first-generation graduates.

Raul, a TAY attending Solutions Summit, shared his experience regarding a lack of support when enrolled in post high school education. Raul attends the University of California San
Diego (UCSD), which is a highly regarded university with rigorous academics. When he began at UCSD, there was only one person on staff to assist TAY and he felt the population was underrepresented. Raul took it upon himself to come up with a solution for the lack of support for TAY and former foster youth at UCSD. JLSD has recently assisted Raul in launching a mentoring program for TAY at UCSD. Raul’s hope is to create a safe place for former foster youth with professionals available to assist when needed.

The team of experts identified several sources of why non-minor dependents are losing their AB12 eligibility.

1) **Delinquency:** Once a foster youth engages in a situation that consequentially places him or her in the delinquency system, AB12 eligibility is lost. There are certain conditions under which eligibility can be regained.

2) **After-Hour Emergencies and Stop Gap Between Housing Programs:** TAY experience situations where they need immediate assistance and service providers are not available. These situations usually involved emergency housing and there are no after-hours housing options. Overall, housing is an issue as landlords don’t want to accept housing vouchers and are less open to take a former foster youth.

3) **Evictions:** If a non-minor dependent is evicted from their housing, this affects their AB12 eligibility.

4) **Lack of Knowledge:** TAY preparing for transition and non-minor dependents in AB12 are not fully educated and aware of all program and eligibility requirements. The system is complex, TAY find it hard to navigate, and there is a lot to know.

5) **Limited Availability of Successful Support Programs:** There are programs like Promises2Kids’ Guardian Scholars that is making an impact and successfully providing TAY with higher education support. These programs have limits on their enrollment due to funding. The experts would like to see programs like this expanded and available to more TAY throughout San Diego County.

6) **Lack of Engagement:** Some foster youth are “done with the system” when they are 18 years of age and want to try to be successful without further support. If they are raised in group homes, experts say they see two things happen: the youth have been in a structured environment for so long, so when they have the option for that to go away at age 18 and not enter AB12, they lean towards the opportunity to be “free” of that structured environment with rules and restrictions. The second situation that occurs is when the youth simply wants to avoid responsibility of adhering to the requirements of AB12 because they aren’t ready to commit to those requirements.

7) **Biological Family Connections:** At the age of 18, foster youth can chose to reconnect with their biological family. In some unfortunate situations, the biological family reaches out to the youth wanting to reconnect knowing they will soon be getting a monthly stipend. If the youth choses to live with their biological
family, they lose AB12 eligibility. Some youth try to let their parents live with them secretly.

8) **Parenthood:** 50% of all female foster youth will become pregnant by age 19. Parenting responsibilities are another added challenge to maintain AB12 eligibility. There is a need for more housing programs that take parenting youth and increased childcare support.

After identifying several reasons for why non-minor dependents lose eligibility and may struggle to maintain it, the team of experts focused on how to build knowledge and awareness that leads to engagement in the AB12 program.

A number of needs that the final solution would need to encompass were discussed. The final solution has the need for cross-organizational collaboration, creating a cultural shift to block barriers from getting in the way, banding together to solve the tough problems, creating a culture that fosters strong connection and compassion, non-minor dependent awareness of what is available and what they are entitled to, and finally, funding.

**Final Recommendations**

The team created a final recommendation and focused on the following aspects:

- Better support systems for post high school education success
- Expose non-minor dependents to their interests so they chose a major that most reflects their passion and likelihood to succeed
- Developing a strong connection to the non-minor dependent and connections amongst themselves
- Focus on the development of a healthier, well-rounded, confident person
- Must have comprehensive real-time resources
- Ability to identify and intervene
- Growth objective: on-site childcare for TAY attending a 2 or 4 year college

**Final Solution: Standardize Former and Current Foster Youth Education Support Programs Offered at all 2 and 4 Year Colleges**

Create a baseline level of education support programs that are standardized across all two and four year colleges. This final solution ensures a consistent level of support for TAY and former foster youth with the goal of increasing the higher education graduation rate.

To avoid starting from scratch, the team recommends starting with existing criteria from support programs offered by the John Burton Foundation, Cabrillo College Foster Youth
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Independence Program, and College Pathways. To identify gaps in higher education support programs and services among all San Diego County college campuses, the team recommends an assessment be conducted as well as a review of data that is already being collected by California College Pathways. The second phase would be to develop a site-visit program to provide additional and more robust information. It is recommended this team consist of 10-20 members and could be a possible Junior League of San Diego project.

Implementation will be managed through the development of a Community Advisory Task Force that would use the data gathered to create action plans. The team recommends the task force consist of 18-24 members, including a representative from each area campus, key non-profits (e.g. United Way, California Youth Connection), TAY, non-profits with scholarship programs, County Supervisors, legislative representation, judicial representation, and representation from grant making foundations (e.g. Pritzker Foundation, San Diego Foundation, etc.). It is recommended that the task force meet quarterly to review data, and to create and assess action plans. The goal of the action plans is to create consistent and equitable services across San Diego County campuses. It is recommended that the Community Advisory Task Force is convened by representatives from San Diego grant making foundations and the Junior League of San Diego.

The team worked to define support needed through the various stages of attending higher education:

- **Prior to Arrival at College**
  - Make the initial contact with the student
  - Provide financial aid guidance and support

- **During College**
  - Guarantee admission to the maximum extent possible
  - Develop a plan to provide housing throughout the year.
  - Support in meeting their everyday needs
    - Basket of supplies upon entry to program – toiletries, cleaning supplies, etc.
    - Food
    - Transportation
    - Graduation stipend to cover cap and gown
    - Childcare for parent students
    - $200 per semester discretionary fund
  - Support in meeting their academic needs
    - Priority enrollment and class registration
    - Tutoring
    - Personal financial aid office support
  - Employment
    - Provide convenient work or allow TAY priority for campus jobs
  - Mental health and physical health
    - Unlimited therapy
  - Support in meeting their family connection needs
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- Emotional support
  - Outings, holidays, connections

➢ After Graduation
- Finding employment after graduation
- Alumni involvement
Chapter Six

Challenge #5: IMPROVE FINANCIAL STABILITY

The fourth group discussed financial stability and what can be done to improve and sustain this among non-minor dependents.

What methods can be used to improve financial planning and money management for non-minor dependents in extended foster care?

Problem: Limited financial planning and money management knowledge among non-minor dependents

Evaluation of Current Situation

Financial planning and money management are critical to the stability, personal and professional growth of a non-minor dependent. The lack of financial planning and poor money management can quickly trigger several negative scenarios for a non-minor dependent. Creating a strong foundation in this skill set is critical to preventing larger issues such as homelessness.

Currently there is no financial planning or money management component to the foster care system or AB12, meaning the foster youth don’t receive formal training or education within the structure of the system. There are some non-profits that provide education, but there is no standardized component as a part of the foster care or extended foster care system. There is a significant gap because once in AB12, non-minor dependents receive a monthly stipend to cover all monthly expenses. If the stipend is not managed properly, non-minor dependents can quickly become homeless, find themselves unable to access transportation to get to work or school, or fall into illegal ways of making money.

The team of experts identified several sources of this problem. There is a critical gap in three key, interrelated themes: financial education, relationships, and collaboration.

1) Lack of Financial Modeling: Non-minor dependents were placed in the foster system due to the poor decisions and abuse they endured while under the care of
their guardians. They most likely did not experience appropriate financial modeling. Any financial understanding has been learned from their peers or those with whom they interact.

2) **TAY Culture:** TAY are most familiar with cash and their financial exchanges are cash-based. There also is a mistrust of banks.

3) **Money Management is not an Element of the System:** An early outreach or financial education component does not exist in the foster care system. Money management is not a component of AB12 and there is a lack of non-profit programming in this issue area. There is a lack of collaboration across organizations. Financial mentors aren’t a component of the system or support services.

4) **Lack of Financial Boundaries:** TAY are vulnerable to unhealthy relationships with family members relating to money (i.e. once they receive their AB12 stipend, family and friends often come around to “use” the TAY in order to access this money). TAY have limited understanding of how to balance financial freedom and experiences with responsibility. There is a lack of connection to the value of a dollar.

5) **Limited AB12 Monthly Stipend:** AB12 monthly payment does not cover the expenses of a non-minor dependent living in San Diego County. This influences their stability in several areas. Receiving AB12 monthly stipend also limits access to other programs.

The team identified local and state organizations that engage with TAY on the topic of financial education and money management. There was not enough information and knowledge among the team to fully determine whether this issue is being addressed on a state/national level or in other cities. The local organizations identified were:

- San Diego County Supervised Independent Living Placement (SILP) Workshop on Financial Planning – SILP classes are offered every 3 months and financial planning is just one small component.
- Access – offers a “housing plan” that happens right before the age of 18 and includes a budget and a list of expenses they need to plan for when they move. Access thinks it is better to meet with TAY one-on-one instead of in a class.
- Voices for Children CASAs – Occasionally CASAs will field questions with respect to money management
- Just in Time – Connects TAY with a mentor/coach who discusses and explains long-term savings and money management, but he or she needs to be a part of the Just in Time program. The Financial Fitness program builds financial literacy.
- Foster Youth Mentor Program (San Diego Health and Human Services Agency) – Occasionally mentors will provide situational examples.
Housing programs have an objective to provide a financial literacy program

The team identified several possible solutions to meet the need for money management and financial planning. These possible solutions are listed below along with potential challenges of each:

1) **Increase Community Outreach**: Develop a County workgroup to involve a volunteer base and reach out to the right people in the right ways.

   a. Challenge: Getting the County or another administrator of financial planning and money management for foster youth to create a workgroup. Acquiring the right people to be a part of this.

2) **Place a Social Worker in a Bank** (non-traditional social work)

   a. Challenge: Must get the youth in the bank to make this effective. Youth do not go to the bank or don’t trust it. There must be focused and vetted outreach to youth and the social worker should be trained in providing foster youth-informed training to the professional. Bank buy-in could be a challenge.

3) **Bank Collaboration**: Develop a corporate give-back program

   a. Challenge: Need the ability to have on-call bank support, but most setups limit the amount of hours they will donate, long-term commitment, clear set of expectations, and need foster youth-informed training.

4) **Recruit Financial Mentors**: Engage and collaborate with local university business schools and programs to recruit financial mentors. Engage with financial associations to recruit financial mentors and offer college credit incentives.

   a. Challenge: Need buy-in of business schools and associations. Need mixers and interaction with youth to help relationships happen organically. Must vet the right people to engage in this mentor relationship.

5) **Early Intervention Programming**: Opportunity for Voices for Children to include training for CASAs to provide formalized financial education and focus on transformational impact vs. transactional impact. TAY Academy can have Masters in Social Work (MSW) student hold office hours to provide youth with financial resources, answer questions, and sign them up for financial fitness classes and workshops.

   a. Challenge: The CASA program does not reach the entire population at this point in time. Will need Voices for Children stakeholder buy-in. Will need TAY Academy buy-in and ensuring their knowledge of financial workshops or resources.
6) **Expectation and Accountability of Foster Parents to Provide Financial Education**: Foster parents can provide financial education to youth starting from the age of five. They need TAY financial planning and money management training. Engage federal and state legislators to add this to the foster care requirements. Making this a requirement for foster parents is essential.

   a. **Challenge**: Developing a way to reach foster parents to give them the tools and hold them accountable for providing financial education to youth in their care over the age of five. Achieving the federal/state mandate to make this a requirement.

7) **Group Home Financial Fitness Curriculum**: Develop a financial fitness component to group homes. Ensure this service is being provided by ensuring this requirement as part of FDIC funding.

   a. **Challenge**: This requires group home administration and staff buy-in. There may not be enough time in the day to add this programming. This requires County support and may need to incentivize the staff and/or home to add this curriculum. Peer buy-in would help as youth feed off each other’s attitudes.

8) **Peer-to-Peer Financial Programs**: Youth develop knowledge from foster parents, peers, and caregivers. Peers are a major influencer and a trusted source.

   a. **Challenge**: Finding the right peers to engage in this program are critical.

**Final Recommendations**
The team created a final recommendation and focused on the following aspects:

- Focus on Long-Term Initiatives and Early Prevention
- Integrate Connection, Financial Education and Collaboration with training of foster parent/group home curriculum
- Mandate/Incentive positive financial outcomes as part of upbringing
  - Age-appropriate assessments to determine financial development
  - Establishes modeling and connection to financial literacy early on

**Final Solution:** “Show Me the Money” – financial literacy training for TAY (cohort-based program with year-round supplemental support) – three month program that addresses these gaps. A taskforce is recommended to manage the piloting of the program at TAY Academy and for foster parents and group homes.

- **Program 3 Month Schedule:**
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- Fall: September, October, November
- Spring: February, March, April
- Summer: Drop-in mentoring available

➢ Components and Requisite:

- Set up relationship with banking institutions. Recommend a credit union. Mission Federal already has a youth program.
- Create a Taskforce: Suggestions SDSU, Second Chance, Just in Time
- Funding: 30 kids at $250 each for incentives
- Create online training program and modules
- Select program coordinator: use existing staff infrastructure
- Involve MSW students from San Diego State University (SDSU)
- Recruit volunteer mentors for the TAY
- Determine incentives
- Potential Partners: Just in Time, San Diego Youth Services (SDYS), TAY Academy, Access, Group Homes, Contractors (Transitional Housing Placement (THP), THP+, etc.)
- Intern/volunteer provides the following; teach the class, counsel the TAY, engage in group work and individual connections
- Volunteers go to JIT for training prior to volunteering at TAY Academy. JIT offers “foster youth informed training” for volunteers.
- Taskforce work with Access [Independent Living Skills (ILS) workers] to review curriculum currently used
- Host youth focus groups to understand the needs
- Outreach and awareness to TAY by speaking to those living in group homes
- Workshops held weekly over the three month program
- Youth must attend 9 out of 12 workshops
- Youth must submit monthly budget for review with 1:1 mentor
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- Youth must submit bank account for review with 1:1 mentor
- Have students “graduate” with a certificate from this program and move them on to Just in Time or other organization with similar program and mentor opportunities
- A financial match is a huge incentive
- Program has workshops and then financial volunteers available in the hour before and after the workshop. There should be “drop-in” hours based around the time of the workshops.
- Possible staff position if pilot program is successful

➢ Program Outcomes by Month:

- Month #1 Outcome: Set up bank account with youth ($50 provided for deposit)
- Month #2 Outcome: Monitor youth needs (offer $200 to allocate for emergency expenses, upon approval)
- Month #3 Outcome: Upon completion of workshop, youth given $250 for bank account

➢ How to hold TAY Accountable:

- Responsible for opening an account
- Pre- and post-survey for financial literacy
- TAY create and finalize a budget
- Emergency Fund – $200 balance, can be drawn from as needed. This can also be used as a metric for success: could the participant keep their account fully funded?

➢ Potential Start Date for Pilot Program

- Year 1: Fall 2015 - Spring 2016- Preparation and focus group
- Year 2: Start a regional pilot program
- Start a coalition to push money management and financial planning component at the legislative level
Potential Sources of Funding and Bank Collaboration

- Union Bank and Wells Fargo

Which organizations would need to be involved in order to successfully implement the solution?

- Banks, colleges, transitional housing, nonprofits, group homes, foster parent oversight

What would success look like among pilot programs:

- TAY Academy – creation of a bank account, make deposits for XX amount a month, getting the interns there, creation of a budget, saving a specific amount each month, utilize the drop-in service, youth are not in crisis, measure stability (less reliance on public benefits), able to pay all your bills,

- Foster parent/group home curriculum – active curriculum using solid curriculum and leading to lasting relationships, reach – how many foster parents take the class (pre/post-test)

How would success in the pilot program be measured?

- How many people took the class? Knowledge retention?

- 3-5 Year Check-in: age-appropriate assessment of their financial knowledge

- Need to get the curriculum approved and implemented among foster parents, group homes, TAY Academy, and other youth service agencies. Something similar to FDIC curriculum and Money Smart.
Chapter Seven

Challenge #6: IMPROVE ACCESS TO MEDICAL SERVICES

The fifth group discussed access to medical services and what can be done to improve access among non-minor dependents.

What methods can be used to improve access to and use of the medical system by non-minor dependents in extended foster care?

**Problem:** Limited access and use of medical systems among non-minor dependents of AB12

**Evaluation of Current Situation**

Access to and tracking of medical history is an important necessity to TAY. This information is significant because TAY aren’t always able to ask their biological parents about their medical history and their foster parents, group home administrators, and caretakers only have their health passport. By law, each time TAY in the state of California is relocated, a comprehensive paper file of their medical records, a "health passport", is to be passed along to the new caregiver. This does not always occur, which could potentially have serious consequences. The information in the passport TAY have is often not updated and can be incorrect. This system creates distrust, lack of interest, and a lack of desire to participate in the medical system.

Based upon experience when providing services to the TAY population, the team of experts discussed and identified three key sources to explain why non-minor dependents are not accessing the medical system.

1) Navigating access to system information and resources is difficult for non-minor dependents
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2) There is a lack of community collaboration and partnerships within San Diego County to support non-minor dependents

3) There is a lack of trauma-informed service providers and service options for non-minor dependents in San Diego County

The team dove into each reason to uncover further challenges and possible solutions.

1) **Problem: Navigating Access to Information and Resources:**
   - Clinical language is challenging for youth. Non-minor dependents often do not understand their health information and struggle with interpreting their health records.
   - Lack of knowledge: If youth do not know their medical history, they will not be able to advocate for themselves.
   - Stigma: There is a stigma associated with mental illness and non-minor dependents do not want to be associated with the stigma. They experience anxiety through the process of being labeled and diagnosed with mental and/or physical illness.
   - One place to go for medical information: There is no comprehensive resource available just for foster youth accessing health resources and care.
   - Youth report that information providers do not communicate clearly.
   - If resources are not user-friendly, youth will not be able to access services they need.
   - There is a lack of knowledge regarding health coverage, benefits, and services.
   - There is limited integration of health services within San Diego County.
   - There is a lack of funding focused on alleviating this challenge.
   - Non-minor dependents can encounter limited access to transportation.
   - Medi-Cal is frustrating and not set up to specifically help foster youth access coverage and care.

Possible Solutions:
   - There needs to be training and education for TAY around mental health: alternative methods, medications and side effects, and coping skills.
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- It could be helpful to have a “health passport” to help youth keep track of medical information
- A website or mobile application that youth can access for personal healthcare information
- One organization can be established to oversee health records received to support youth
- Outreach must be done to create buy-in for youth who want to participate in the mobile health services
- Medical liaisons are needed to help youth navigate the Medi-Cal system
- Work to understand how to implement and abide by HIPPA regulations

2) **Problem: Lack of Community Collaboration and Partnerships**

Further Challenges:
- Limited partnership across service sectors and providers
- Lack of youth involved in planning and creating policies and procedures
- Organizational competition between various County services providers must be addressed
- Agencies don’t collaborate enough currently to work together to solve big issues surrounding mental health services
- Organizations have not collaborated well in the past and there is a lack of sharing of best practices
- Limited behavioral health and primary care integration
- San Diego County is big and has many medical providers. Every organization has different systems, policies, databases, etc.

Possible Solutions:
- Community collaboration could be improved through training and outreach.
- In order to facilitate collaboration, coordination of schedules would need to be taken into account
- Potential Barriers: duplication of services, funding sources, grants/partnerships would need to be minimized for privacy of information
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- Agencies should leverage expertise within each organization
- Need stability and consistency with collaboration and partnerships. It is hard when funding changes and staff changes
- Need to efficiently provide services by working together collaboratively

3) **Problem: Lack of trauma-informed service providers/services**

Further Challenges:
- If resources are far away without easy transportation, youth will not seek out support. Support must meet the youth where they are.
- Need more mental health professionals
- Need more male clinicians
- Need clinicians that take Medi-Cal
- Need to have some incentives to service youth who can be perceived as being more of a “hassle” to support
- Programs that serve foster youth may have clinicians but care can only be done inside the program: Unable to access care outside of the program
- Medi-Cal system takes too long to process paperwork
- Billing paperwork is too time consuming

Possible Solutions:
- Train mental health providers on helping youth better understand their mental health
- Training for group homes and housings programs
- Educate and communicate consistently what “trauma-informed” care means
- Need service providers that are trauma-informed in their models, policies, and procedures
- Need evidence-based trainings for clinicians that focus on trauma/foster youth specifically
• Give foster youth the option for a second medical opinion: anonymous person to prevent bias
• Expertise of clinicians who accept Medi-Cal should be varied

Final Recommendations

The team developed a final recommendation to improve access to medical care: a mobile health van. The recommendation is to create a traveling medical van that is staffed with medical providers and medical advocates. The mobile health van will bring comprehensive medical services to TAY near their homes to alleviate difficulties with receiving these fundamental services due to lack of transportation or difficulty with scheduling. The mobile health van will provide mental health, dental, and medical services. This van will have scheduled visits to various areas of San Diego County. The visits will focus on a variety of medical issues that are impacting non-minor dependent youth.

➢ Known Mobile Health Models:
  o TAY Academy used to have mobile care. They received referrals from social workers and would drive to the TAY location to provide services and care to the youth. Their mobile care funding ran out, which caused the program to end.
  o UCLA has a street clinic that serves homeless and low income community members. The street clinic is staffed by graduate students. It used to be a LEAP program (www.leapfoundation.com). The LEAP program did speak-outs at group homes in 2011 to talk to youth about their rights and how to transition out of the state system.
  o Similar models have been effective in other areas: the mobile Bloodbank.

➢ Measure Effectiveness:
  o Participants will have a “Casey Life Skills” Assessment pre- and post-treatment survey. This is a standard assessment conducted by the Casey Family Program.
  o The mobile care unit will need to create a survey specific to the services offered.

➢ Data to Collect:
  o Number of participants, aim for fewer hospitalizations of non-minor dependents, aim for fewer calls to 911.
  o Data collection will come from emergency services, colleges, clinics and other referral sources.

The team identified several potential roadblocks to implementation of the mobile health van. These roadblocks include funding, county-wide collaborations, effective communication to youth, collecting outcome data, liability, and vehicle site limitations.
The team outlined the next steps:

1) Establish the Team: Determine most appropriate organizations to address the stand-up of this recommended solution

2) Create a Proposal: Outline youth needs, services offered, cost, etc.

3) Conduct Needs Assessment: Identify specifics about services and what is and is not feasible to provide through a mobile care unit

4) Conduct Location Assessment: Research throughout the county should be done to determine where needs are most pressing based on county-wide demographics

5) Assign Tasking: Delegate and assign tasks to participating organizations, groups, and individuals

6) Determine Financial Funding: Create an estimated budget for stand-up and continuation

7) Collaboration: The team members must meet as a collaborative group and invite potential stakeholders

The mobile care unit aims to:

1) Eliminate and reduce the barriers non-minor dependents face when accessing services.

2) Increase user-friendly access to services.

3) Address the gap of connecting the most disconnected youth in the county to the services they need.

4) Increase stability in the areas of education and employment for non-minor dependents.

5) Aim for fewer Child-Welfare Service referrals while also encouraging access to scholarships and financial resources.
Chapter Eight

Challenge #7: DECREASE HOMELESSNESS

The sixth group discussed what can be done to increase the amount of appropriate living options and reduce homelessness among non-minor dependents.

What can be done to increase the amount of appropriate housing options and reduce homelessness among non-minor dependents of AB12?

**Problem:** Limited availability of appropriate housing options and high levels of homelessness among non-minor dependents of AB12

**Evaluation of Current Situation**

According to the latest statistics, 40% of TAY in California are homeless within 18 months after emancipation. Homelessness is a critical situation that all service providers want TAY to avoid. Homeless TAY experience chronic physical health conditions, which contribute to high rates of substance abuse disorders. There is also a high prevalence of depression, suicide initiations, and other mental health disorders.

The team of experts identified programs, support services, and legislation that either exist or are working to decrease homelessness for TAY:

- Transitional Housing Placement (THP) and THP+ Housing Programs
- Mentors and CASAs
- Workforce Investment Act (WIA) funded services
- Medical services provided until the age of 26

“You look at foster youth aging out of the system and many don’t have housing.”

*Solutions Summit participant*
Final Recommendations

The team identified several possible solutions to reduce homelessness. These possible solutions are listed below:

1) **Increase THP+:** Add THP+ housing slots and slots for youth with mental health or dual diagnosis needs.

2) **Resident Advisors:** Offer more resident advisors at TAY housing facilities.

3) **Additional Services:** Provide services for youth who don’t “fit the mold”.

4) **Special Needs:** Focus on youth with special needs including boarding and care.
5) **Additional Housing:** Create a shelter exclusive to TAY

**Final Recommendation:** Create a shelter exclusive for TAY

- Offer a Safe Available Friendly Environment (SAFE) 24 housing option
- Shelter should be available 24 hours/day
- The shelter will serve all TAY population including opted-out youth, homeless youth, mental disabilities, and non-eligible TAY.
- The age group of the housing is 18-24 years old.
- Feature a 30/60/90 day program
- Needs-based individual plans will be created including planning for discharge from Day 1.
- Expand to four locations in San Diego: East County, North County, South County and Central.

The team identified the following services that should be provided at SAFE 24 to assist stabilizing TAY:

- Collaboration with existing case managers and links to existing community services
- Mental health services
- Substance abuse treatments
- Housing placement assistance
- Domestic violence services
- TAY to TAY Mentoring Program
- Transportation resources such as assistance obtaining a license, purchasing a vehicle, and getting MTS passes

The team of experts discussed how this program would receive funding. Initial funding would most likely come from private donor(s). There is need for private and/or public partnership for sustainability. An organization needs to be identified to own the pilot. Once piloted, replication is recommended throughout the County and other jurisdictions.
Chapter Nine

Challenge #8: Improve Educational Outcomes

The seventh group discussed and identified resources that can be used to improve educational outcomes for non-minor dependents.

**Combine use of AB12 and special educational resources to improve educational outcomes for non-minor dependents.**

**Problem:** How can we create a truly individualized transition plan for TAY starting prior to the age of 18?

**Evaluation of Current Situation**

Less than 3% of TAY that attend college graduate. Improving this statistic is essential to the stability and success of non-minor dependents. The team focused holistically on the current availability or implementation of an individualized transition plan that spans all life experiences from the age of 14.

Currently, TAY start the discussion on transitioning and receive a checklist from their social worker at the age of 17. Only allowing one year for post foster care planning is unacceptable and not leading to the success of TAY. Also, starting the conversation at the age of 17 when TAY are most likely in their senior year of high school only allows for a few months before college admission application deadlines. This has led to poor post high school education enrollment and success.

The following issues were identified by the team of experts as unmet needs:

1) **Streamline System:** The availability of a streamlined system that provides TAY with educational knowledge and the ability to understand their next steps is lacking.

2) **Early Preparation and Coaching:** There is limited focus on intentional preparation for the long-term at an earlier age. There is no mentor or trusting adult identified for their various needs.
3) **Alternative Post-Education Options:** More education and support is needed for TAY who are not college bound on alternative educational options.

4) **Transportation:** More education is needed for TAY on their options and access to transportation.

5) **Making Decisions:** More education is needed to teach appropriate risk taking.

The team identified local or state agencies that are currently working in this focus area:

- Developing a Program: Promises2Kids Junior Guardian Scholars Program
- Post-Education Alternatives: Pre-employment training
- Public Schools: Individualized Education Plan (IEP) and transition plans
- Just in Time, Bridges to Success Program: a consistent group of committed male volunteer “champions” that provide monthly opportunities for young men in transition to make positive connections.
- Individualized Plan: Independence mapping via ILS and extended foster care worker
- Transition Independent Living Plan (TILP) accessible on Effort to Outcome (ETO): data system for people working with foster youth

**Final Recommendation**

The team of experts’ final recommendation is to match TAY with support coaches at a younger age so they understand the educational resources available and are offered the right educational support at the appropriate ages. The experts recommended providing TAY with a support coach at the age of 14 when TAY are entering high school. This allows for four years of engagement. Starting these critical discussions at the age of 14 allows TAY a significantly lengthier amount of time for preparation and success.

The purpose of the support coach at age 14 is to create a sense of stability; to help the youth set goals that are achievable; and to prepare them to be capable, confident and connected adults. The coach and TAY work together to create a comprehensive, individualized transition plan that takes advantage of all available resources to increase stability for the youth. This program will curtail the surprise most TAY experience during the transition and uncertainty in their next steps.

Further research is needed to determine the appropriate resources and discussions to have at each age from 14-18. It is highly recommended to leverage and reuse other documentation
and resources available to develop the curriculum at each age. Support coaches will need to be obtained and trained.

Organizations that must be involved to successfully implement the solution include:

- Social workers
- Department of Education: Education Liaisons
- School districts
- Educational rights holder
- Mental health professionals
- Health and Human Service Agency: Social Workers

This solution is important because it offers better outcomes for the future of these youth; provides stability and direction; helps to create capable, confident, and connected adults; and teaches self-advocacy.

Success would look like this at age 26:

- TAY would have a meaningful job, stable housing, and some level of education
- They would be empowered youth with developmental markers met
- TAY would meet their own goals identified on their plan
- TAY would increase their income level and/or increase it above the poverty line
- TAY would report their personal improvement
Chapter Ten

Solutions Summit Next Steps

The Junior League of San Diego is committed to the assessment and growth of the eight roadmaps developed at the 2015 Solutions Summit. With the continued dedication, expertise, and guidance from the workgroups, we will work towards a phased implementation of solutions. To adequately support this goal, the Junior League of San Diego implemented a separate committee, TAY Outcomes, dedicated to the continued facilitation.

TAY Outcomes committee will collaborate and communicate with prior years’ Solutions Summit teams and facilitate ongoing discussion, planning, and implementation of roadmaps. The objective is for the Junior League of San Diego to provide ongoing support to past attendees and community partners in executing one or more sustainable projects generated at Solutions Summit. Progress on the roadmaps will be reported in subsequent Solutions Summit conference reports.
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