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The detrimental effects of aging out of foster care and Knoxville's representativeness of appropriate services

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The detrimental effects of aging out of foster care and Knoxville's representativeness of

appropriate services

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Introduction

Imagine coming home from school on your eighteenth birthday and immediately being told that you would have to move out, that week or sometimes even that day. Imagine returning to the group home or institution you have lived in for some time, and being told to pack your bags because there is no more money to house you. Imagine leaving these homes with no job, no identification, no money, and no idea how to get those things. Where would you sleep? How would you get to school the next day? What will you eat? How will you make money for survival? For adolescents aging out of the foster care system, this can be a real life situation (St. Martin, 2013). For many people, transitions in life are the most difficult time periods to navigate (Brammer, 1992). Whether it be transitioning into college life, adulthood, marriage, divorce, or having a new baby, these periods come with changes one can never be fully prepared for and that one may not know how to handle. However, there are countless books, classes, and seminars designed to help ease these transitions. These transitional periods are times of growth, times of fear, and one of the most dynamic segments of life (Brammer, 1992). The transition into adulthood, for many, is a slow, gradual process with plenty of room for mistakes (Furstenberg, Rumbaut, & Settersteen, 2005). However, the sad truth for adolescents who age out is that this tricky transition must happen quickly and one false move could potentially trap you into a dangerous and detrimental lifestyle (St. Martin, 2013). The anxiety and stress that accompany transitions (Brammer, 1992) for these adolescents is often compounded with overwhelming loneliness and fear.

Defining Aging Out

Aging out is a term used to describe children who after residing in foster care are not reunified with their biological parents or adopted by the age of majority, 18 years old

(Whitelaw Downs, Moore, & McFadden, 2009) . As each child enters state custody, a permanency plan, a plan for finding a stable, long-lasting living arrangement, is created (Whitelaw Downs, Moore, & McFadden, 2009; State of Tennessee Department of Children's Services, 2010). This plan, created by a team of social workers, other professionals, and the child's respective family, calls for the child to be placed either in kinship care, reunified to their home of origin, placed in a facility (institution or a group home), or emancipated (Whitelaw Downs, Moore, & McFadden, 2009). In the vast majority of situations, the permanency plan calls for reunification and this plan is typically achieved (Courtney & Heuring, 2005; Department of Health and Human Services, 2012). However, for teens it is much more likely that they will age out of the foster care system.
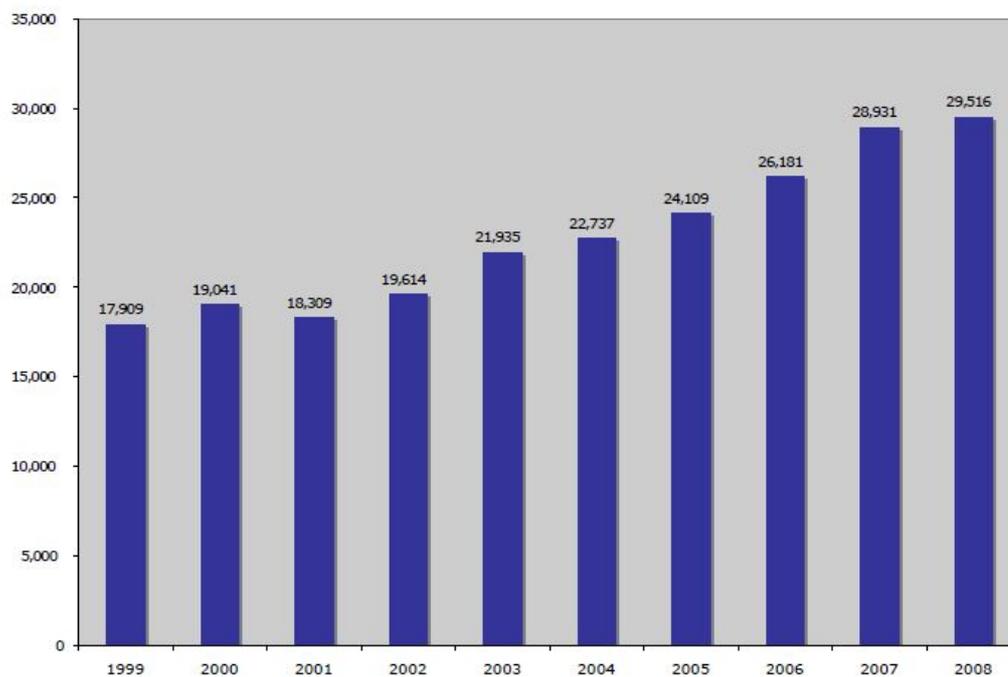
While figures vary widely on how many children age out, most statistics agree that more than 25,000 adolescents age out of the system each year (Department of Health and Human Services, 2011; McCoy-Roth, Devooght, & Fletcher, 2011). Upon aging out, these foster care clients lose housing, healthcare access, financial assistance, and in several situations they lose their social workers or case managers. Of these adolescents, some are fortunate enough to move in with extended family members or move into special living situations, such as institutional care facilities, but many become emancipated and begin life on their own as adults. They leave the homes they have lived in and the communities they know, and are often expected to transition into self-sufficiency practically overnight (Atkinson, 2008). At 18 years old, they are expected to achieve a level of independence most do not find until their early- to mid- twenties. To further complicate their loss of access to most services and the elements of life that have thus sustained them, they also lose a support system. When life becomes overwhelming, they have no homes to return to and sometimes no stable adults from whom they can seek advice and aid (Atkinson, 2008). These adolescents are taken from their families with the assumption that the government can and

should do a better job than their parents (Courtney & Heuring, 2005), but yet they remain a highly at-risk population. They will face a myriad of problems most people never face and certainly not at such a young age.

Policy Affecting Issue

Although there were studies completed as early as the 1920's, the plight of these youth in transition was not widely addressed or discussed in policy until the 1980's (Courtney & Heuring, 2005). This era saw a drastic increase in the number of children in out-of-home foster care, largely attributed to the increase in crack cocaine usage (Barbell & Freundlich, 2001). As this number increased, so did the number of children aging out of foster care and thus the struggles they faced became vastly more apparent.

Figure 1 - Number of Youth Aging Out of Foster Care (1999-2007)

Year	Number
1999	17,909
2000	19,041
2001	18,309
2002	19,614
2003	21,935
2004	22,737
2005	24,109
2006	26,181
2007	28,931
2008	29,516

(McCoy-Roth, Freundlich, & Ross, 2010)

At this point the government began addressing the issue through policy and allocating budgetary funds for programs, to be determined by each state, to assist these adolescents in transition (Courtney & Heuring, 2005). One of the first major acts fell under the American Recovery and Reinvestment Act and was commonly called Title IV- E, Adoption Assistance and Foster Care Programs (DHHS). The next major act affecting youth in transition was the Foster Care Act of 1999, often called the Chafee Act. Through this act $140 million dollars was provided for the meeting of basic physical and mental health needs, as well as transitional needs. An additional $44 million per year was established for educational vouchers and training (McCoy-Roth, Freundlich, & Ross, 2010). Although this funding was used to increase the quantity and quality of programs, it stands true that even after the implementation of programs, youth who age out of foster care are still highly at-risk and the negative effects are still present (Courtney & Heuring, 2005; Scannapieco, Connell-Carrick, & Painter, 2007) . From this we know, that there must be changes made in policy and in practice to better serve these adolescents and prepare them for life on their own.

Extent of Aging Out, Needs, and Consequences

According to the AFCARS report by the Department of Health and Human Services (2012), as of 2011 there were upwards of 400,000 children in out-of-home foster care. Of these, the case goals for five percent included emancipation and one percent were already in independent living situations (DHHS, 2012). The needs to prepare these adolescents for independence are great and must be implemented long before they enter into life on their own (Whitelaw Downs, Moore, & McFadden, 2009; Getz, 2012). Not only to be a functioning member of society, but also to simply survive, one needs sustainable shelter, access to food and water, warmth, sleep, and safety. One also needs a sense of love and belonging. According to Maslow's hierarchy of needs, without these elements in place, making attempts at setting goals for employment, for self-actualization, and/or efforts to do with building self-

esteem and better mental health are worthless (McLeod, 2007). More practically stated, before working with young adults who have transitioned out of foster care on higher-thinking issues, it must first be ensured that they are having their basic needs met. Because these needs are not being consistently, effectively met, adolescents aging out of foster care are still considered an at-risk population. The following are issues in which those aging out are at-risk:

- They are less likely to graduate high school and less likely to attend or graduate college. According to a University of Chicago study, 45% of students who aged out and were not connected to transitional living services were high school drop outs (Courtney et al., 2011).

- They are more likely to experience mental health problems. In fact they suffer, post-traumatic stress disorder twice as much as military veterans (Association of Small Foundations, 2009)

- While studies are not conclusive as to whether or not children aging out of foster care have significantly increased risk of physical health problems, they do show that these adolescents have less access to medical care and insurance (Getz, 2012)

- They have an increased risk of resorting to criminal acts and a higher chance of being involved with the criminal justice system than their non-foster care peers.

FOSTER YOUTH	⚖️	COMPARISON GROUP
77%	Ever Arrested, Males	20.1%
55.3%	Arrested since Age 18, Males	7.5%
54%	Ever Arrested, Females	4.3%
29.6%	Arrested since Age 18, Females	0.5%

PRODUCED BY: JASON ALCORN/INVESTIGATEWEST
SOURCE: CHAPIN HALL/OUTCOMES AT AGE 21, 2007

(Rowe, 2013)

- They tend to have more issues building and maintaining families. They are less likely to get married and stay married. Upon having children, they are more likely to themselves have a child in out-of-home care (Courtney et al., 2011)

- There is inconclusive data as to whether there is a correlation between likelihood of substance abuse and being or having been in out of home care (Courtney & Heuring, 2005).

- Those aging out of foster care are less likely to achieve financial independence and/or financial stability (Wald & Martinez, 2003).

- They have higher unemployment rates, and were more likely to report having serious financial problems. The University of Chicago study found that 50% were unemployed (Courtney et al., 2011).

FOSTER YOUTH	$	COMPARISON GROUP
50%	Percent Employed	64%
$5,450	Median Earnings	$9,120
26.5%	Not Enough Money to Pay Rent	8.6%
32.8%	Phone Service Disconnected	19.1%
8.3%	Evicted	1.4%

PRODUCED BY: JASON ALCORN/INVESTIGATEWEST
SOURCE: CHAPIN HALL/OUTCOMES AT AGE 21, 2007

(Rowe, 2013)

- They make average wages lower than the poverty level (Goerge et al., 2002). According to the University of Chicago study, 55% lived in poverty (Courtney et al., 2011).

- They also have higher rates of housing instability. Both longitudinal studies of those who aged out of foster care and the high rate of homeless who report having been in out of home care demonstrate that those aging out of foster care are more likely to become homeless (Courtney & Heuring, 2005; Dworsky & Courtney, 2009). The homeless rate for those aging out of foster care is as high as 25% (Courtney & Heuring, 2005). As many as 3 in 10 of the nation's homeless adults have a history in foster care (Roman & Wolfe, 1995).

- (All information in bullets derived from Wald & Martinez, 2003 and Courtney & Heuring, 2005)

While these studies and factors are credible, they are not definitive. There are several hidden variables in many of them including the lack of data on adolescents who run away from foster

care and the fact that most evaluate those aging out of foster care against the entire young adult population, rather than young adults who are from low-income families and/or experienced trauma. Including the data on those who run away would likely increase the percentage suffering the negative effects of aging out. Comparing young adults who age out against a population of young adults who suffered no trauma and/or lived in low-income families, greatly ignores the impact each of these factors have on transitioning into adulthood. However, the sheer number of studies devoted to aging out that consistently find that aging out leads adolescents to grave disadvantage makes it easy to see this is a highly at-risk population. It is also easy to see that these struggles are hardly mutually exclusive; each issue leads to and coincides with others. For example, lower levels of academic achievement and school completion likely lead to underemployment which likely leads to housing instability. Understanding the nature of these struggles as both cyclical and compounding makes it imperative that transitional living services meet those needs, as life could quickly spiral out of control. It also shows the need for intensive services that implement prevention strategies at the root of the problem; rather than temporarily providing shelter and sustenance for youth in transition, there must be work towards life and employment skills as well as encouragement for academic success.

Origin of Need for Intervention

The youth who actually age out of the foster care system, typically enter the system later in life, towards late adolescence (Courtney & Heuring, 2005). Approximately fifty percent of children typically spend a short period of time, around a year, before being placed in a permanency situation (Courtney & Heuring, 2005). Both of these factors demonstrate that adolescents who age out of foster care rarely actually grow up in foster care (Wulczyn, Brunner-Hislop, & Goerge, 2001). Therefore, we can infer that the challenges faced by those aging out comes not from their time living in foster care but from the combination of

spending lengthy amounts of time in low-income homes with histories of maltreatment and of having little to no support upon aging out (Courtney & Heuring, 2005). Their respective time in foster care was not often detrimental; rather, aging out throws them into precarious and challenging situations with low levels of social capital to utilize in handling them.

Following this train of thought, studies have now switched from looking at the risks faced by those aging out to attempting to evaluate why the existing programs are not working. Several agencies are conducting research or having it conducted on their own practices to find where the issues in services lie. Why with so many programs being offered are these adolescent still being shown to be at risk? Is it that there are not enough programs serving enough children? Or do the programs have inadequate focus? One thing that seems central through these studies is that as foster care is not the "problem" and the effects of the traumatic past cannot be overlooked, transitional care providers must learn to combat the low levels of social capital brought to transitioning as well as the lack of support during transitioning to effectively assist these clients.

Meeting Basic Needs: Housing

The first step in helping an adolescent who is aging out is ensuring that his or her basic needs are being met. Does he/she have adequate, sustainable shelter? Does he/she have a safe space to sleep in for the night? Roughly one third of the children who age out spend their first night on their own on the streets (Courtney & Barth, 1996). Long before the youth ages out, it should be confirmed that they have a safe place to stay. These adolescents have fewer kinship relations with which to seek shelter and due to consistent moves are likely to have fewer social connections/friendships. Short term housing is a must, but in the long term, case managers must assist the individual in finding affordable housing. Given the fact that most adolescents aging out are underemployed and unlikely to seek higher education, a more

permanent solution to the housing instability they face is seeking out sustainable, affordable housing (Dworsky, Dillman, Dion, Coffee-Borden, & Rosenau, 2012; Bates, 2008). However, placing them in housing for free could be considered enabling and does not in fact build the skills that they need for independent living. It further creates dependency, which most are allowed until their mid-twenties, but these children do not have the luxury of.

Meeting Basic Needs: Medical and Health Care

As youth in transition typically have low levels of financial capital, it is also necessary to ensure that the youth in transition have adequate access to food, water, transportation, and medical care. Medical care is incredibly expensive and without viable, affordable health insurance options it is unlikely that a young adult struggling financially could afford it even when necessary (Getz, 2012). If not addressed in a preventative manner, medical bills could accumulate and create debt that a single, young adult would struggle to climb out of (Getz, 2012). For example, a parent I encountered through my current field placement discussed with me that she had gotten injured in a car accident shortly after aging out of foster care. She incurred over $19,000 dollars in debt that she has still yet to pay off and she doubted that working as a hairdresser and as a single mom that she ever will. The medical care necessary to save her life now seems to her a burden. The meeting of these needs is also necessary for anyone living as a responsible adult.

Need for Workforce Preparation and College Assistance

Another step in the helping process, after aiding these clients in meeting their own most basic needs, is finding employment and financial assistance when needed (Courtney & Barth, 1996). When adhering to Maslow's Theory of the Hierarchy of Needs, we see that

these issues could only be considered after the most basic needs are met (McLeod, 2007). Having no transportation, no cell-phone, no appropriate attire, and no knowledge of basic interviewing skills would create several barriers to the hiring process and make finding employment very difficult . Add to that low levels of educational attainment, job skills and/or training, and these underprivileged young adults are not highly desirable job candidates. Even helping them make decisions as to the type of job they are looking for and finding creative ways to look for those jobs are learned skills. As most of these adolescents are also of an age to be considering college, sometimes what is required is not job skills assistance, but help with college and scholarship applications (Wald & Martinez, 2003). Applying to college is time consuming and quite tricky, even occasionally expensive (due to application fees); applications ask questions that any adolescent would likely have no idea how to answer on their own. Even once through the application process, there are countless enrollment forms and a lengthy process of applying for financial aid. This process is incredibly difficult to navigate especially if you have no experienced connections to assist you (Choy, 2001). I remember the stress of this time period and choosing a school being overwhelming in my own life, doing so with no support would have been much worse. While neither of these programs should be pushed onto the adolescents, they should engage in one of the other. It is important for their self-determination to decide which is more appropriate, but it is integral that they find assistance in at least one area. The central factor of both college and job skills assistance enterprises is the necessity of money and being able to make money in society today. To fully transition into responsible adults, these adolescents must find the means to make money and support themselves.

Preparation for Independent Living

Another key element in support that must happen at this time is life skills training, also often called preparation for adult living services (Courtney & Barth, 1996). Life skills

are learned, primarily through observing one's parents (Siegel & Loman, 2000). Children coming from low-income families are already disadvantaged in this manner (Siegel & Loman, 2000). Children coming from low-income families with histories of maltreatment are doubly disadvantaged. When a child has suffered both of these issues and then is further disengaged from life skills by being bounced from home to home, there is a good chance they do not know how to function and maintain a healthy home. If no one teaches you how to pay bills, write a budget, or manage money, you simply do not know how to do it. If no one teaches you how to cook, grocery shop efficiently, and maintain a home, you do not know how to do that either. When needs are not being met by the family, the state steps in (Courtney & Heuring, 2005). Therefore, when these skills are not being taught and the child is removed from the family, whose responsibility it is to teach them, the state must assume this role.

Combatting the Lack of Support

Another important issue youth in transition face in their lives is the lack of human support (Courtney & Heuring, 2005). As previously stated, not only have they lost connections with several family members, they more than likely had a family of origin that was less than supportive in the first place. They have likely changed foster homes and perhaps schools, indicating a probable lack of stable and close friendships. Even given that there is a high turnover rate for case managers, they may have experienced more than one social worker. Providing and creating networks of support for youth in transition is very important (Courtney & Heuring, 2005). Once again referring to Maslow's Hierarchy of Needs, we see that the need for love and belonging is essential to survival (McLeod, 2007); as support aids in transitions (Brammer, 1992), aiding adolescents aging out in finding support could ease the stress of their transitioning. Not only should there be efforts made at seeking out and enhancing the natural supports, there should be efforts made to build new

communities of support as well as plugging these youths in to existing communities. For natural supports, relationships with extended family members should be encouraged. Adolescents aging out of foster care, while often losing contact with immediate family members, tend to remain in contact with extended family members (Courtney & Heuring, 2005). These relationships can help the client retain some continuity and can provide support in times of need. As long as the relationships are beneficial, they should be encouraged by case workers. This lack of support also indicates a flaw in the foster care system as a whole. The fact that some foster parents will move the child out the day funding ceases shows the lack of responsibility some assume when taking on a foster care role. These adolescents quickly learn that "you can't pay someone to care about you" (Getz, 2012. p.12). This lack of support or emotional connections can be particularly detrimental during transitioning as it may increase anxiety, loneliness, and stress. Natural supports should be maintained whenever possible to discourage this strain and sense of inadequacy.

Community Development and Networking

As for creating new networks of support, one key element is connecting adolescents who are aging out of foster care with each other. During my time in Australia, one of the things that helped me the most during my transition was living in and being surrounded by other people in my same situation. Our host university did a very good job of connecting the international students as well as offering us connections with people who could show us the ropes, i.e. students who had already been studying abroad for a semester. After taking a course on community development, I see that much of what they were attempting to do was to build a community amongst the international students. Following this same pattern and building community amongst adolescents aging out of foster care has the potential to drastically benefit all involved. Services for youth in transition need to be more youth focused (Scannapieco, Connell-Carrick, & Painter, 2007). Providing them a community in

which they can work together to meet needs and determine services definitely makes the services more youth focused. This community also has the potential to provide love and belonging. Working to build a community and then working in the context of that community is not only more efficient, it is more effective. The youth become empowered as they help themselves and self-determine their needs and can later help the new youths aging out. It creates a self-sustaining community with the potential to serve more clients while using fewer resources and less energy from the social workers involved. It is important to understand in this scheme of community to understand both that community is not found, it is built and that it will be necessary to include some professionals in the start-up of the community. Until the original community members are capable of meeting their own needs, a professional will be required to aid in transitioning. Once those members are capable, they can begin aiding the younger adolescents. Hopefully, learning to help themselves and help others will be a skill that can build some of the social capital these youth in transition lack.

Best Practice Models

In the context of aid programs, services for youth in transition are still new and therefore still developing. However, there have been a few research-based developments as to the best practices governing these agencies and programs. According to the National Association of Social Workers' Code of Ethics, one of the core values of social work is self-determination (1996), As the point behind many transitional services is preparing adolescents to live as adults (Courtney & Barth, 1996), it is important that they learn to make their own decisions and that staff aid in this transition (Association of Small Foundations, 2009). The transitional journey is a journey towards independence; case workers providing needs and making decisions for clients fosters dependence and thusly does not prepare them for adult life. Effective services for those aging out help the adolescent learn by doing, rather than approaching from an expert teaching perspective. In the spirit of self-determination and

with regards to the unlikelihood that all clients will set the same goals, services offered should be flexible (Whitelaw Downs, Moore, & McFadden, 2009). Rather than having a set process to follow, services should offer up several choices and adhere to the needs and desires of the client whenever possible. Best practices also provide wrap-around and intensive services (Whitelaw Downs, Moore, & McFadden, 2009). The needs of these children are great and often play off each other. Working in all areas of the child's life, while expensive, is also a necessity. If programs only address certain needs, such as housing, other needs, like the need for employment, will continue to perpetuate the needs services are attempting to meet. Services that are not comprehensive are not sustainable or cost effective. The intensive element of services primarily comes from service providers. As best practice methods usually indicate having a 24 hour on call staff, the staff must be committed and competent at their jobs (Whitelaw Downs, Moore, & McFadden, 2009). It is also important to note that these staff persons are also providing the support and care that adolescents aging out have no other methods of obtaining. Case managers should have smaller caseloads to be most effective (Youth Transitions Advisory Council, 2011). The intensity of services is greatly benefited by having an intentional and devoted staff (Whitelaw Downs, Moore, & McFadden, 2009). One additional element of creating intensive services is the length of services. To be most effective, services should last at least until age 21 (Youth Transitions Advisory Council).

Although there are large amounts of funding going to those aging out, nationally around two-fifths of eligible adolescents are actually receiving preparation for adult living and/or independent living services. There simply is not enough money allocated to give all of these children all of the services they need (Courtney et al., 2011). And as best practice models indicate that services are only truly beneficial and effective if they are wrap around services, it is considered better to fully serve a smaller number of clients than to partially

serve several. One area that could change to benefit both clients and services would be for programs offering aid to begin collaboration with one another. Many agencies are busy trying to hire staff and create new programs rather than coordinating with services that are already available (Whitelaw Downs, Moore, & McFadden, 2009). For example, several agencies start their own job training programs when there are several existing agencies or programs devoted to workforce development. This is a less efficient use of both time and money and hinders the capability of helping clients to our full capacity.

Social Costs of Not Meeting Needs

Outside of the risks created for adolescents who are not having their needs met, there are also huge social costs for failing to meet the needs of youth in transition. As aging out of foster care has shown to be a risk factor for both incarceration and involvement with the law, we see that not aiding these youths can contribute to the expense of incarcerations later on. One study found that the decrease in percentage of 100 children incarcerated after receiving transitional services vs. 100 children who did not had the potential to save 2.6 million dollars in incarceration and probationary costs (Youth Villages, 2010). These adolescents are also at higher risk for parenting at a young age and eventual family breakdown (Courtney et al., 2011). These adolescents are also at risk for homelessness and drug crime (Courtney & Heuring, 2005). Preventing these issues could save the cost of intervening in them later. Along with the fact that transitional services could be more fiscally responsible, they could also be more socially responsible. As transitional services can be shown to reduce risk of incarceration (Youth Villages, 2010), these could lower crime rates thus creating safer cities. Transitional services can also be shown to improve employment rates (Youth Villages, 2010), therefore these services can enhance economies by providing more workers and the need for less budget for unemployment benefits. Aiding youths in attending college helps academia as a whole as these youths later contribute to study and even pour into the next generation

(Youth Villages, 2010). Even with all of these costs, socially and fiscally, what we lose out on the most by failing to help is who each child has the potential to become and what they have to contribute to the world. An adolescent could be the next great innovator of medical technology, but if he/she ends up homeless due to a lack of support the world will never know and never have what she has to offer (Youth Villages, 2010).

Development of Community in Knoxville Transitional Service Agencies

The state of Tennessee is making several advancements and efforts in aiding youth in transition. The Tennessee Commission on Children has even started a Youth Transitions Advisory Council to evaluate best practice methods and offer support and advice to concordant agencies (Youth Transitions Advisory Council, 2011). Knoxville has more specifically created the Knoxville Youth in Transition Council which is being run by K-Town Youth Empowerment (K-Town Youth Empowerment, 2013). This council is making efforts to find what still needs to be done in Knoxville to aid this population. I had the privilege of attending a meeting, where I learned that the council is made up of applicable agency employees, experts in the field, and concerned citizens. This council is designed to provide a "seamless web of services" to youth in transition, according to the meeting flyer. K-Town has equally started a youth council comprised of youth who are currently transitioning and their families (K-Town Youth Empowerment, 2013). This council is open to all. At the meeting I attended, we had the privilege of hearing from two youths who are currently transitioning. They shared much of what they are doing, learning, and hoping for through transitioning. The design of this council is aiding in building community amongst youth who are aging out. This push in new councils and finding new solutions came about as Knoxville saw a twenty percent increase from 2006 to 2008 in the number of teens in state custody (Kennedy, 2010). At the same time, there was a two month increase in the waiting time of these teens for foster care placements. Knoxville is currently struggling to find enough foster care placements for

all foster children. Because there is nowhere else for them to go, many children with no mental health needs, behavioral issues or disabilities are being placed in institutionalized care. These adolescents then doubly suffer as they grow up in institutionalized care and age out of the system.

Knoxville's Representativeness of Effective Programs

Knoxville currently has three major agencies offering extensive services for youth in transition, however there are several other agencies offering some services that youth in transition need. The first agency is K-Town Youth Empowerment which offers support for children who are disadvantaged in transitioning into adulthood by emotional disturbance or other barriers. This agency provides wrap around services for adolescents and their families including therapy, housing assistance, job skills training, and several others. Another agency providing similar extensive services is Child and Family Tennessee. Child and Family appears to have strong counseling services offered in several different methods. These services are both flexible and wrap around. Child and Family Tennessee offers counseling, runaway shelters (with runaway prevention programs), and a transitional living program that includes housing, case management, educational assistance, job skills training, life skills, medical and mental health, and various other benefits (Child and Family Tennessee, 2010) Another agency currently offering services is Youth Villages. Youth Villages is nationwide organization that offers a myriad of services that vary in each region. In East Tennessee they offer transitional living services and counseling as well as other programs. Not only does Youth Villages offer extensive services, they also recently completed a study to determine the effectiveness of their services. The results were as follows:

- 84% were living independently or with family two years after aging out.

- 83% were graduated, in school, or employed after completing the program.

- 77% had no involvement with the law after two years of completing the program. (Youth Villages, 2010)

Conclusion

I could not find information on the number of children being served in Knoxville or the number of children in Knoxville aging out each year. While I cannot determine if Knoxville services are serving a representative amount of youths, I can see that the services offered are following best practice models and are on the leading edge of improving services. They are implementing networking strategies between organizations as well as the youths receiving services. They are creating councils centered on finding new methods and new services. Knoxville, like any city, has room for improvement through better networking and also through achieving more funding to be able to assist more clients. However, as stated, at the Knoxville Youth in Transition Council meeting, I actually got to meet two students from the Youth Council. Each of them proudly discussed their achievements and new living situations. They additionally discussed other children in the program and how the children were managing. While this is a very small glimpse into the successes of these programs and the council, seeing the smiles on their faces when discussing all the new programs they were participating in made the programs seem very effective indeed.

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