

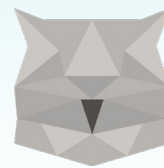
YOUTH TRANSITIONING OUT OF CARE IN BC:

Spring 2023 update

A youth-led study by McCreary Centre Society's Youth Research Academy



**McCreary
Centre Society**



**YOUTH
RESEARCH
ACADEMY**

We acknowledge that the McCreary Centre Society's Youth Research Academy is located on the ancestral, traditional, and unceded territory of the Coast Salish Peoples, including the territories of the xwməθkwəyəm (Musqueam), Skwxwú7mesh (Squamish), and Səlílwətaʔ/Selilwitulh (Tsleil-Waututh) Nations. We also acknowledge the ancestral and continuing connection to this land of the Métis Nation.

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Copyright: McCreary Centre Society, 2023
ISBN: 978-1-926675-93-0

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**McCreary
Centre Society**



**YOUTH
RESEARCH
ACADEMY**

Copies of this report are available at: mcs.bc.ca.
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Thank you

Thank you to all the youth with care experience who have joined this study and for your ongoing participation.

Thank you to McCreary staff for their support of this project, and to all the youth, policy makers, and practitioners who helped to develop the survey.

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This study was initially funded by the Vancouver Foundation and Victoria Foundation. It is currently being supported by an anonymous donor.

This study was approved by the BC Ministry of Children and Family Development Ethics Review Committee.

Citation: McCreary Centre Society's Youth Research Academy (2023). *Youth transitioning out of care in BC: Spring 2023 update*.

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EXECUTIVE SUMMARY

This is the third annual report from our youth-led study of young people in BC transitioning out of government care. It is the first report since major improvements in services and supports for youth transitioning out of care were announced. It is too early to see many of these changes reflected in the results. However, the percentage of youth in and from care who felt hopeful has increased over time, from 22% before mid-March 2020 to 42% after May 2022.

Despite these improvements, youth who have transitioned out of care continue to experience challenges. For example:

- Most youth (84%) had experienced challenges to finding housing in the past six months. The most common challenges among these youth included not being able to afford housing (56%) and a shortage of safe and affordable housing (51%).
- Debt was a reality for around 4 in 10 youth (44% who joined the study after May 2022 vs. 23% who joined the study before March 2020). Among youth who had recently transitioned out of care, common sources of debt included credit cards (45%), unpaid bills (such as Internet and phone bill; 36%), and owing money to a loan agency (29%).
- Around 6 in 10 youth (62%) had experienced barriers to getting or keeping a job in the past six months. Their most commonly identified barrier was mental health, substance use, or other health challenges (65% among those who had experienced barriers).
- Around two thirds of youth (65%) went to bed hungry at least sometimes because there was not enough money for food, including 16% who went to bed hungry often or always.

The study also highlighted youth's skills and strengths, and identified a number of factors associated with a more positive transition out of care. For example:

- When youth had their basic needs met, they were more likely to experience positive health and well-being. For example, youth who never went to bed hungry were more likely to feel hopeful for their future (57% vs. 31% who experienced this type of hunger), and youth who consistently had access to three meals a day were more likely to rate their emotional health as good or excellent (85% vs. 28% of those who did not have access to three daily meals).
- Youth who had an adult to help them with finding housing were more likely to feel their current living situation met their needs and to feel safe where they were living.
- Most youth (64%) had stayed connected to a service provider or staff they had known before transitioning out of care. Staying connected to these adults after transitioning from care was associated with a lower likelihood of missing out on needed mental health services in the past six months (55% missed out vs. 94% who did not stay connected; among those who needed these services).
- Weekly involvement in sports and other extra-curricular activities was linked to more positive health and well-being. For example, youth who participated weekly in sports were more likely to rate as good or excellent their physical health (78% vs. 51% who took part less often) and their emotional health (50% vs. 28%).
- Having a transition plan when in care predicted improved well-being six months later, once youth transitioned out of care. Also, youth who had a transition plan were more likely to feel prepared to live independently (100% vs. 72% who reported they did not have a transition plan) and apply for any needed benefits (e.g., AYA, Income Assistance; 75% vs. 40%) around six months later.

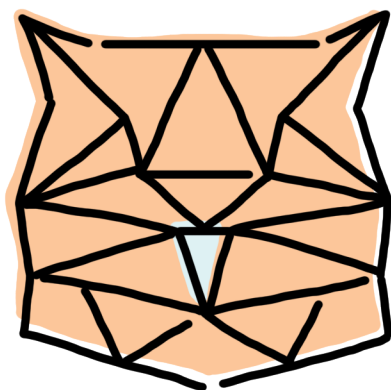
INTRODUCTION

McCreary Centre Society's Youth Research Academy (YRA) is made up of youth between the ages of 16 to 24 who have experience in the government care system. During our time in the YRA, we gain skills to carry out research and community-based projects that are relevant to youth in and from care.

Since 2019, the YRA have been conducting a longitudinal study of British Columbia (BC) youth transitioning out of government care and alternatives to care (e.g., on a Youth Agreement), including youth transitioning out of the services of Delegated Agencies.

The goal of the study is to gain a better understanding of the experiences of BC youth as they go through the process of transitioning out of care. The results of the study are intended to provide policy makers and service providers with up-to-date and relevant information that can help to identify what is working well and what is challenging for these young people, to support youth to experience the most successful transition possible.

As part of the 7th cohort of the YRA (June 2022 to March 2023), we have created the third annual report from the study. We hope this report helps to highlight not only the experiences of youth transitioning out of care, but also how youth can be supported through their transition and into adulthood.



BACKGROUND

In 2019, members of the YRA invited key policy makers and service providers to join them in developing the topics for a survey that youth could complete every six months starting approximately six months before their 19th birthday, through to their 24th birthday. The survey has been modified along the way to reflect the changing circumstances of young people leaving care, including the impacts of the COVID-19 pandemic, as well as the impact of new government policies to support youth transitioning out of care. For example, questions about youth's experiences with transition workers were added to the survey in 2022 to reflect the introduction of these positions. However, many of the core questions have stayed the same to allow for comparisons over time.

Questions on the surveys ask about youth's background, health (including mental health and substance use), experiences in care, living situations, education, employment, finances, goals, access to services and supports, and strengths and needs. Surveys can be completed online or in paper format.

Data collection started in Spring 2019, and will continue through at least 2024.

If you have any questions about the study; wish to request copies of this report; or would like to schedule a presentation of the results, please contact Erin at erin@mcs.bc.ca or (604) 291-1996, ext. 233.

If you are a youth with care experience who may be interested in participating in the study, please contact yicstudy@mcs.bc.ca to receive a survey link.

ABOUT THIS REPORT

This is the third report to be published from the YRA's youth-transitioning-out-of-care study, and includes survey data collected up to March 1st, 2023. It builds on findings that were included in the 2021 and 2022 reports. The report includes data from 301 youth who completed a baseline survey. To date, around a quarter (26%) went on to complete a follow-up survey(s), and a total of 423 surveys were included in the analyses. Many of the 301 youth were not yet eligible to complete a follow-up survey, because they had filled out a baseline survey less than six months earlier.

The report is separated into two major sections. The first section includes youth's experiences with government care, housing, education, employment, finances, health, and accessing services. The second section describes supports, connections, and other factors that can contribute to youth's positive health and well-being, and to a successful transition out of care.

All results and quotes are among youth who had transitioned out of care, unless otherwise noted.



SURVEY PARTICIPANTS

Youth aged 18 to 24 years old may join the study. To date, around 57% were under 19 years old when they joined. Around a quarter (26%) were aged 19, and the remaining 17% were 20 to 24 years old. Most youth (65%) started taking part in the study while they were still in care, including 9% who were in care past their 19th birthday because of extended supports that were introduced during the COVID-19 pandemic.

Sixty percent of participants were female, 35% were male, and the remainder were non-binary. Survey participants reported a range of sexual orientations, including 66% who identified as straight, 18% as bisexual, 6% as gay or lesbian, and 2% who indicated having no attractions. Another 5% were not yet sure of their sexual orientation, and 3% specified a sexual orientation not among the list of options.

Four in 10 participants (40%) identified as Indigenous. Among Indigenous youth, around three quarters (77%) were First Nations and 23% were Métis. The majority of Indigenous youth (62%) could speak at least a few words of an Indigenous language (e.g., Chilcotin, Cree, Shuswap), including 17% who could hold a conversation and 6% who were fluent.

Most survey participants (90%) had lived in Canada for six or more years (including their whole life). They were currently living across all five regions of BC, specifically Vancouver Coastal (36%), Fraser (30%), Vancouver Island (16%), the Interior (11%), and the Northern region (7%).

ANALYSES

Survey data were analyzed using SPSS statistical software. Comparisons were carried out between youth who were nearing their transition out of care and those who had transitioned out. Percentages were similar between the two groups, unless otherwise noted.

Comparisons were also carried out to track any changes in youth's experiences pre- and post- their transition out of care. Percentages were similar across time points, unless otherwise noted.

Additional analyses assessed if there were any changes over the course of the study (from April 2019 to March 2023), perhaps resulting from the COVID-19 pandemic.

Any comparisons in this report are statistically significant at $p < .05$. This means there was less than a 5% likelihood the results occurred by chance.

LIMITATIONS

The findings in this report reflect the experiences of youth who have participated in the study, and may not be representative of all youth with experience of government care or an alternative to care in BC. As the sample of youth who have completed multiple surveys is relatively small, some longitudinal comparisons of pre- and post-transition out of care may not have been statistically significant, and therefore were not reported. These will be revisited in future reports as the sample size increases.



Please continue things like this [survey]. It makes people conscious of their thoughts and actions."



Thanks for having a survey like this. I always thought those of us who grew up in foster homes were somewhat different from the rest but I guess I was wrong. People really do care for us even though it ain't family."



Thank you for conducting the study and making lives better for youth in care and former youth in care!"

PROFILE

This section of the report includes youth's experiences with government care, housing, education, employment, finances, health, and accessing services. Findings were generally similar among youth in care and those who had transitioned out, unless otherwise noted.

GOVERNMENT CARE

Most youth had been in care for at least three years (32% for three to five years, and 30% for six or more years). Another 21% had been in care between one and two years, and 11% for less than a year, while 6% were unsure of how long they had been in care.

Eighty-five percent of youth reported they had received services through MCFD, and 23% from a delegated Indigenous agency (e.g., Métis Nation BC, VACFSS). Among Indigenous youth, 46% had received services through a delegated Indigenous agency.

Most youth had been in foster care and/or on a Youth Agreement at some point. Among youth who had transitioned out of care, 59% had accessed an Agreement with Young Adults (AYA).

All youth in government care in BC are entitled to a written care plan, which is developed within six months of their entry into care and includes input from the young person. The plan identifies the young person's needs and goals, and how these will be addressed. Around 7 in 10 youth (71%) approaching their transition out of care reported having a care plan, while 17% indicated not having one, and the remainder did not know if they had one.

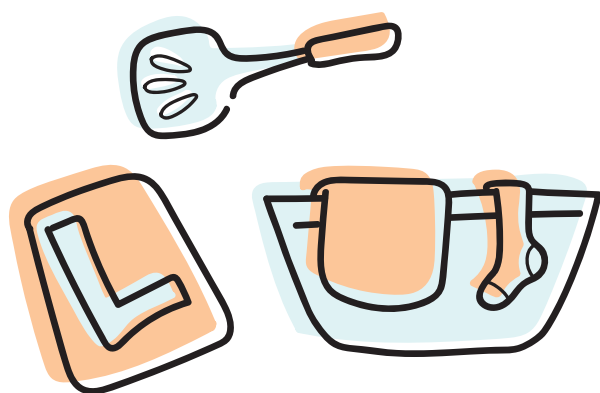
Types of government care or alternatives to care ever experienced

Foster home	68%
Youth Agreement	64%
Group home	45%
Placed with a friend/relative through MCFD	36%
Custody centre	11%

Note: Youth could mark all that applied.

Transition planning & preparedness

Youth who are preparing to leave care should have a transition plan that identifies their post-care plans and goals, and supports them to develop the skills necessary for independent living. Among youth approaching their transition out of care, 51% reported they had a transition plan, 31% did not have one, and 18% did not know. Among youth who had transitioned out of care, 41% had a transition plan while they were still in care, 37% reported they did not have one, and 23% did not know if they had one.



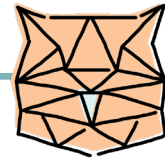
Youth who had transitioned out of care were asked how prepared they had been for their transition, knowing what they know now. A third (33%) had felt not at all or only a little prepared, while 35% had been quite or very prepared, and the remaining 32% had felt somewhat prepared. When asked to explain, some youth indicated they had felt prepared to transition out because they had a good support system, and the process had been explained to them so they knew what to expect. Some also stated they had developed the skills needed to live independently (e.g., to pay their bills and budget) which helped them to feel prepared for their transition. Other youth felt unprepared because transition planning had been left to the last minute, and the process had felt rushed as a result.

Youth were asked how prepared they felt with tasks and skills relating to independent living. At least 7 in 10 youth who had transitioned out of care felt prepared to live independently and to find a job. Less than 6 in 10 felt prepared to find housing and to apply for AYA or other needed benefits.

Youth who felt quite or very prepared to ... (among youth who had transitioned out of care who felt this was a skill they wanted or needed)

Live independently (laundry, cook, shop)	78%
Find a job	72%
Cook healthy meals	69%
Access needed health care	69%
Pursue education	66%
Pay their bills/budget	59%
Have a healthy romantic/sexual relationship	58%
Apply for AYA/income assistance/other benefits	55%
Find housing	55%

Youth aged 19 or older whose time in care was extended (e.g., because of the COVID-19 pandemic) were more likely to feel prepared to apply for needed benefits compared to youth aged 19 or older who had transitioned out of care (78% vs. 57%).



YRA reflections

All youth transitioning out of care or an alternative to care should have a transition plan which they have input into. Transition planning should start as early as 14 or 15 years old, or whenever the youth is developmentally or emotionally ready to start this process. The transition plan should include where youth can go to access supports (both while preparing to transition out of care and afterwards), such as specific financial, education, employment, housing, and life-skills supports.

Social workers, youth workers, and transition workers should routinely check in with youth as they are approaching their transition out of care and assess their level of preparedness for adulthood. Social workers should also not assume that because some youth are doing well and seem prepared for their transition out of care that they don't still need or want support.

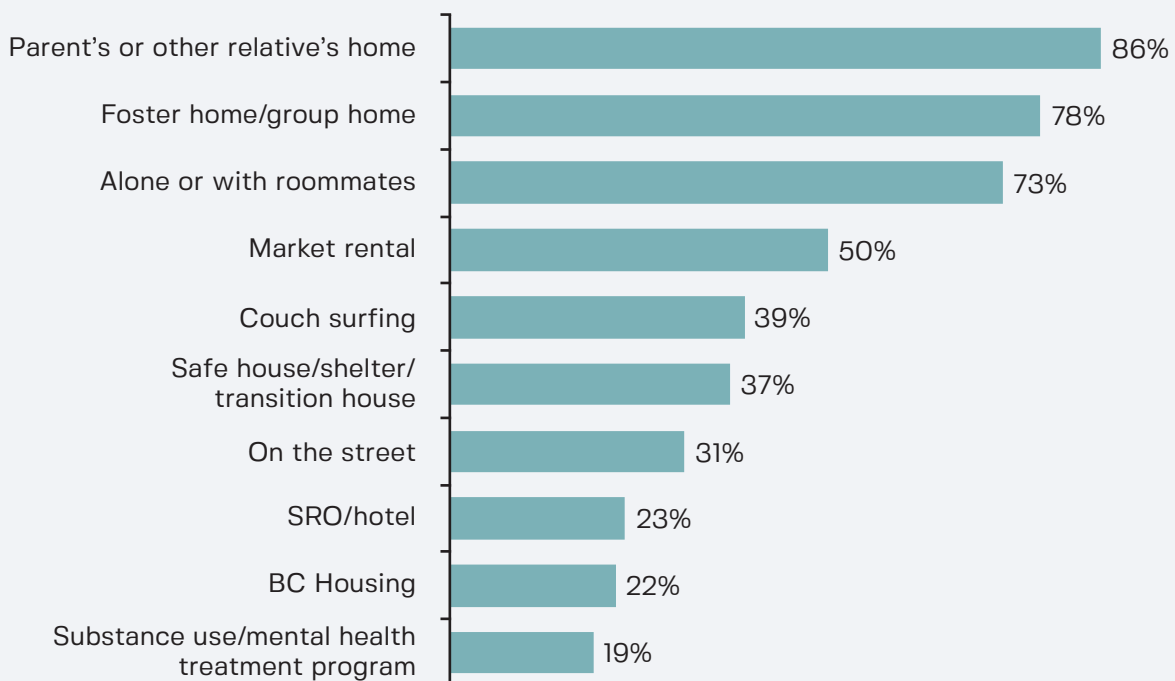
Youth who have transitioned out of care should be given the option to continue having access to the service providers and staff they were connected to before transitioning out. It can be really difficult to lose access to an adult support that you were consistently getting help from and connecting with.



HOUSING

Youth had experienced a range of living accommodations, including precarious housing such as staying on the street, in a shelter/safe house/transition house, SRO/hotel, and couch surfing. Also, around 1 in 5 had stayed in a substance use or mental health treatment program.

Where youth had ever lived



Among youth who had transitioned out of care, just under half (46%) had moved in the past six months. This included 14% who had moved at least twice (vs. 27% of youth still in care). Around a third (36%) were currently living in a market rental, and 8% in BC Housing. They were currently living with a roommate/friend/partner (35%), alone (33%), with their biological family (18%), and/or their own children (7%). Six percent were currently in a youth housing program, and 37% had been in a youth housing program at some point.

Two thirds (67%) of youth who had transitioned out of care felt quite or very safe where they were currently living, while 26% felt somewhat safe, and 7% felt only a little or not at all safe. Around 1 in 5 youth (21%) lived with a pet, and most youth who had a pet reported that their pet made them feel safer (90%) and improved their well-being (90%).

Knowledge of tenancy rights & responsibilities

Most youth who had transitioned out of care (64%) had understood their tenancy rights and responsibilities before moving into their current accommodation. The majority of youth in a rental accommodation (69%) had signed a tenancy agreement before moving into their current place, and around half (47%) had completed a Condition Inspection report with their landlord (and 16% did not remember if they had completed one).



Living situation meeting youth's needs

Over half (56%) of youth who had transitioned out of care felt their current living situation met their needs. When asked to explain, youth who were satisfied with their living situation indicated feeling grateful that their basic needs were met, and that their housing felt stable and safe. Youth who reported that their living situation did not meet their needs identified the small size of their place; not feeling comfortable because it was not long-term housing; safety or health-related concerns (e.g., mold); and challenges living with roommates.



Comments about youth's current living situation meeting or not meeting their needs (among those who had transitioned out of care)

"I feel comfortable, never unsafe like I did often in the past. I have my cat with me without problems, and I have signed a one-year lease."

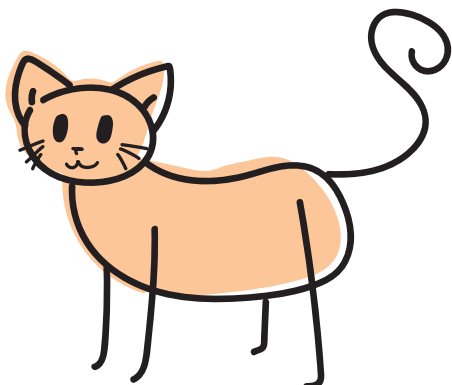
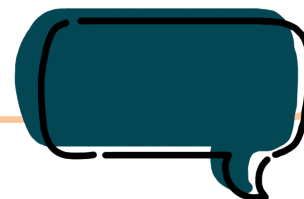
"Running clean water. Safe area. Laundry nearby. Prices reasonable."

"I live in a small dorm with no kitchen, so it is hard to cook. Also, the dorm is very old & moldy, so I think it is making me sick."

"It's a tiny, shitty, and overpriced unit with no washer or dryer, but it was the cheapest place on the market and they actually rented it out to my partner and I, so it's home I guess for now."

"I have a roommate but because of that it's like I'm in care again with all these rules and I don't feel free as I should."

"It's not permanent so I'm unable to feel completely comfortable."

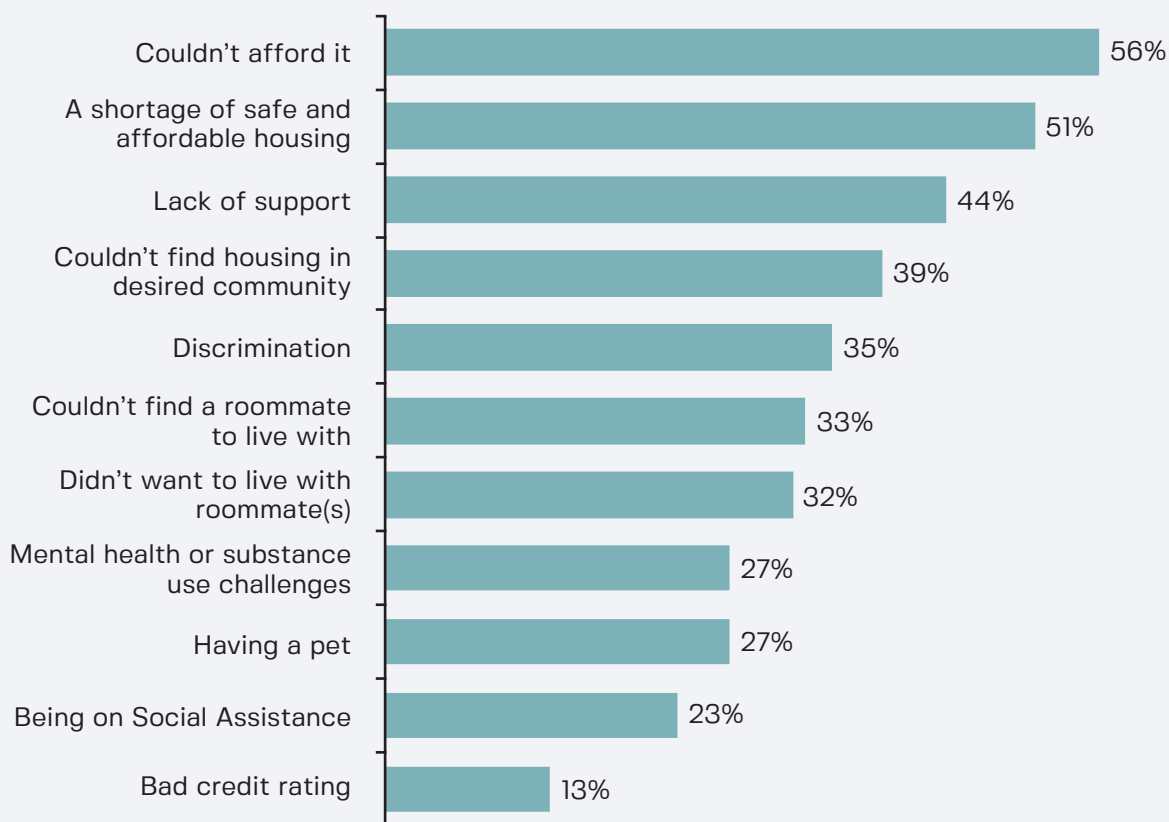


Challenges finding housing

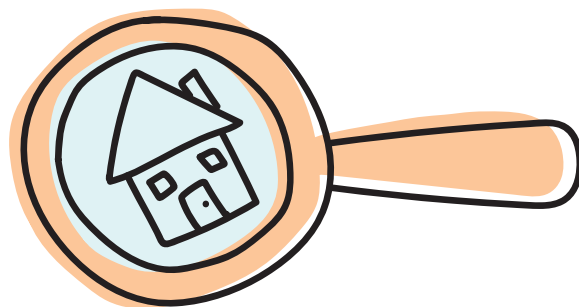
Most youth (84%) who had transitioned out of care had experienced challenges to finding housing in the past six months. Common challenges included being unable to afford housing as well as a shortage of safe and affordable housing.

Youth with a health condition or disability were more likely to experience challenges to finding housing at some point, including due to discrimination (40% vs. 19% of youth without a health condition or disability).

**Youth's challenges to finding housing in the past six months
(among those who had transitioned out of care and had trouble finding housing)**



Note: Youth could mark all that applied.



Housing challenges that youth had experienced ...

"[Landlords] thinking I'm a partier (couldn't be further from the truth)."

"Landlords don't want to rent out to youth."

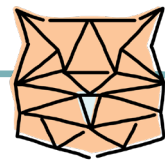
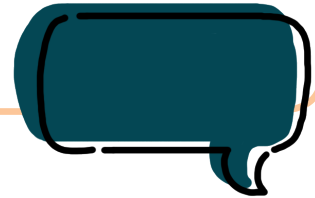
"I can't find okay priced pet friendly housing in Vancouver."

"I feel like I was prepared to live with somebody such as a partner or roommate, but never by myself. When I ended up living by myself, I didn't have enough money to support myself."

"Last time I was on the street I went to viewings for places I could afford and like 80% of them refused me living there, and then a month or two later I would see them on the market still vacant, this is not okay."

"No references and nobody to explain what a Youth Agreement is."

"We only get \$1,250 from AYA and that's supposed to cover \$800 in rent...NOTHING IN BC IS \$800 for rent!"



YRA reflections

Safe and stable housing is a basic need that all youth should have access to. Youth who move constantly likely don't have the opportunity to fully connect to their surroundings or community, and to experience the benefits of feeling connected.

Access to long-term financial support for housing is essential because of the high cost of living in BC. Rent subsidies and emergency rent subsidies are a helpful support for those who are eligible for them. However, having age limits on these subsidies can lead youth to dread their birthdays as they know they will be cut off from this support soon. Youth need to have guidance on what financial support they can access next.

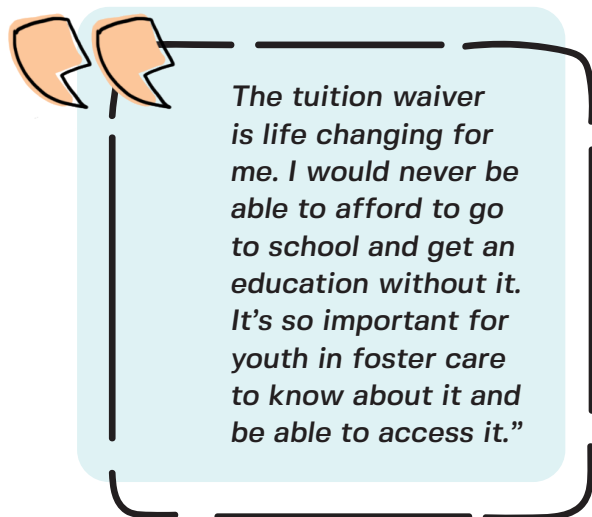
Youth in and from care may rely on pets for a sense of safety and companionship, but having pets can be a barrier to accessing housing for youth. Having supports available to reduce the barriers would be helpful, such as money to cover the cost of a pet damage deposit.

Youth who have transitioned out of care need education on tenancy rights, especially for those living in market rentals. It's important for youth to know what their landlord can and cannot do.

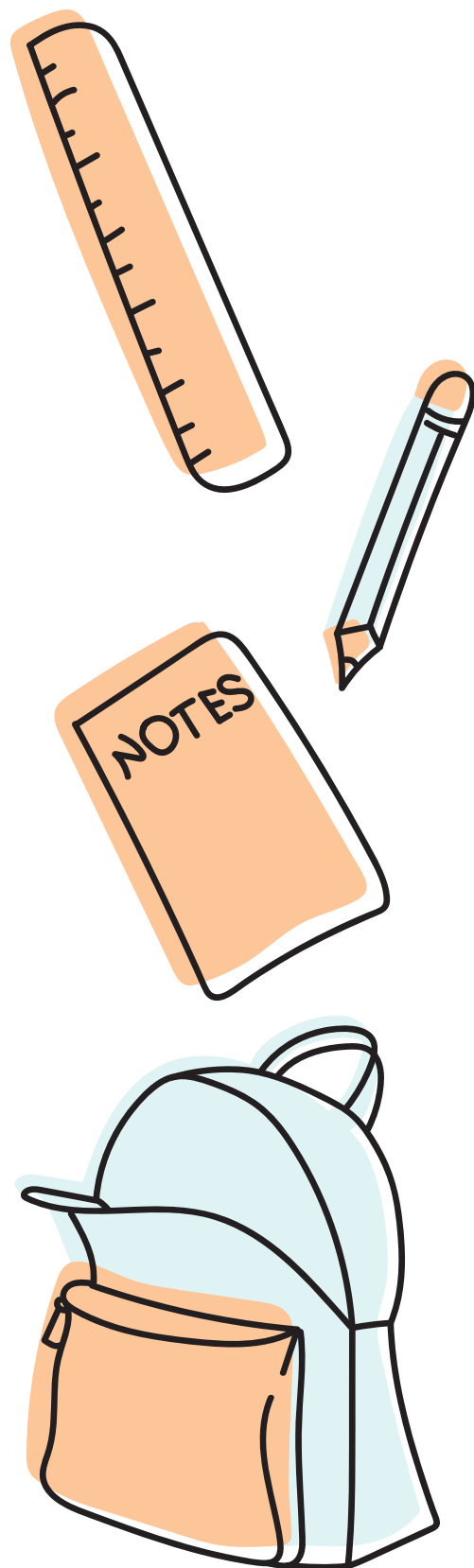
EDUCATION

Among youth nearing their transition out of care, around two thirds (66%) were currently in school (42% in high school and 24% in a post-secondary program). Similarly, 68% of youth who had transitioned out of care were enrolled in school (55% in post-secondary and 13% in high school or the equivalent). Among those not in school (who had transitioned out of care), 48% had stopped going before graduating from high school, 26% had stopped once they finished high school, 13% sometime after beginning a post-secondary program, and the remainder upon completing post-secondary.

Among youth aged 19 or older, those who stayed in care past their 19th birthday were more likely to currently be in high school or the equivalent (37% vs. 13% of those who had transitioned out of care), while those who had transitioned out of care were more likely to be in a post-secondary program (55% vs. 19% of youth aged 19 or older still in care).

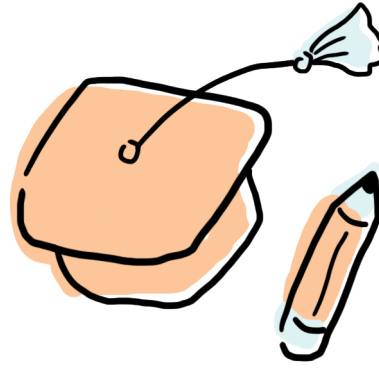


Among youth who had transitioned out of care, over a third (37%) had accessed Adult Basic Education and 38% had received a tuition waiver.

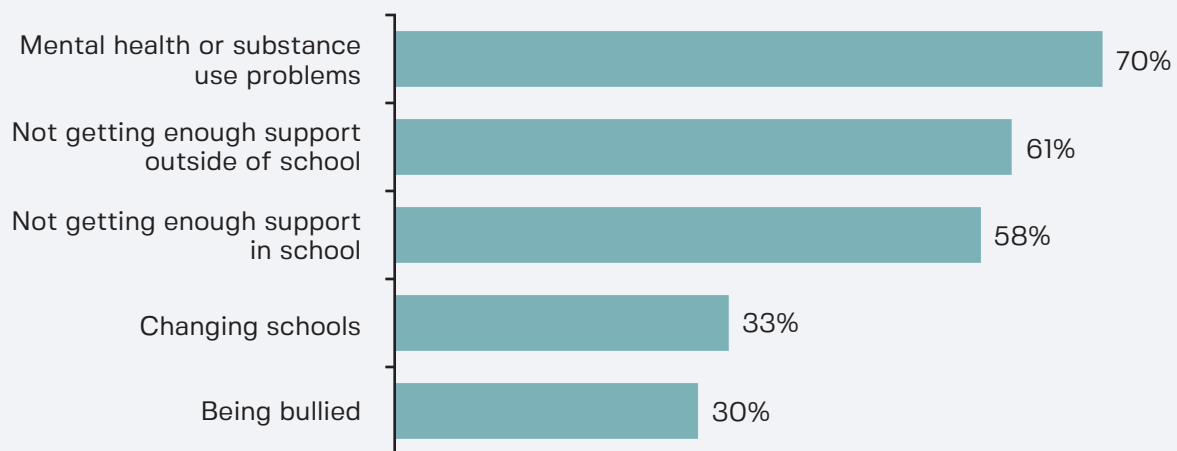


Challenges graduating from high school

Around 8 in 10 youth (79%) had experienced challenges to graduating from high school. Their most commonly reported challenges were mental health or substance use problems, and not getting enough support inside and outside of school.



Youth's most commonly reported challenges to graduating from high school (among those who had transitioned out of care and had experienced such challenges)



Note: Youth could mark all that applied.

Challenges to graduating from high school ...

"Moving homes; getting pulled out of classes for meetings with social workers."

"Homelessness."

"No one expected me to graduate."

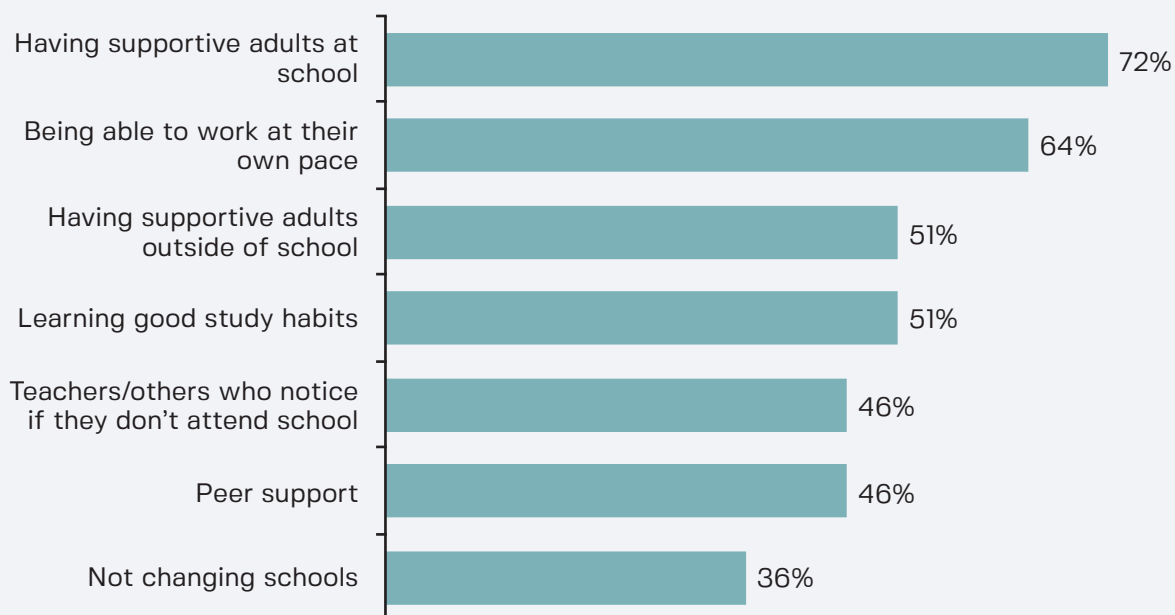
"Mental health issues like anxiety."



Education supports

Most youth (93%) identified supports that had helped them to do well in school. These included having supportive adults at school and being able to work at their own pace.

Supports that helped youth do well at school (among those who had transitioned out of care and felt the question applied to them)



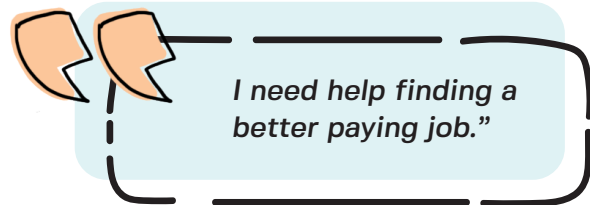
Note: Youth could mark all that applied.



EMPLOYMENT

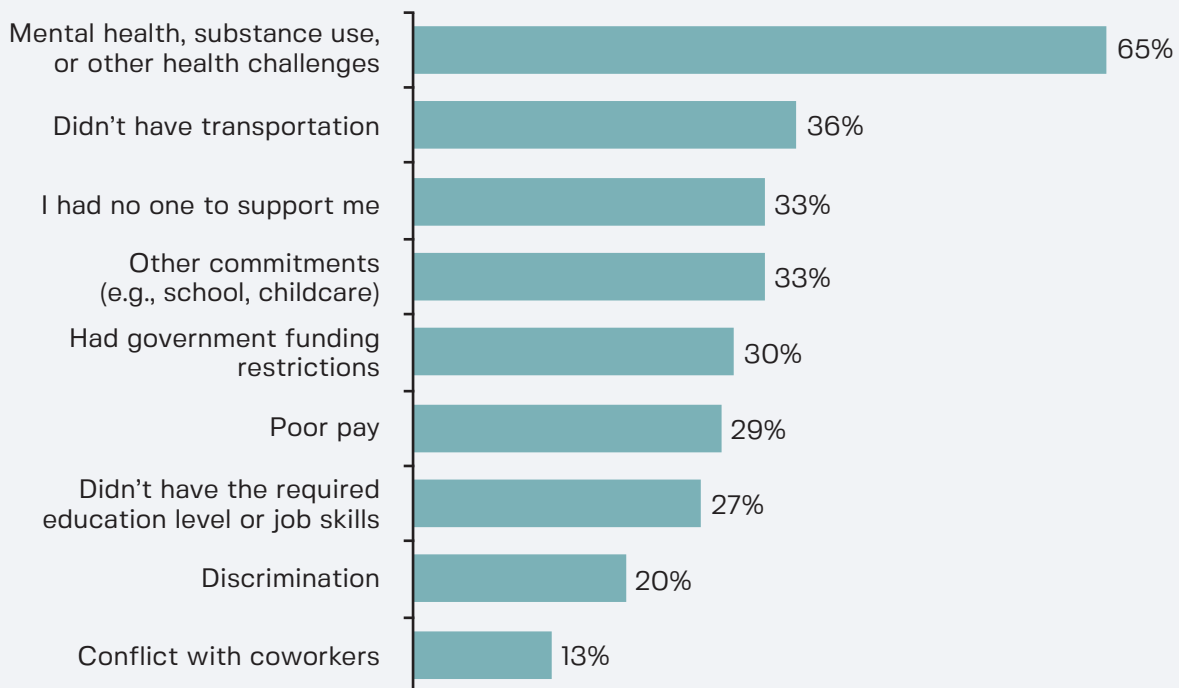
Most youth who had transitioned out of care were currently working (64% vs. 51% of youth still in care), and more than a quarter were working 20 or more hours a week (28% vs. 16% of youth still in care). Just under half (46%) were actively looking for a job (vs. 67% of youth still in care).

Challenges finding & keeping a job

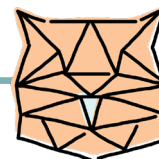


Most youth had experienced employment challenges at some point. For example, 62% of youth who had transitioned out of care had experienced at least one barrier to getting or keeping a job in the past six months. Their most commonly identified barrier was mental health, substance use, or other health challenges.

Barriers to getting or keeping a job in the past six months (among youth who had recently transitioned out of care who had experienced such barriers)



Note: Youth could mark all that applied.



YRA reflections

The survey results showed that mental health, substance use, or other health challenges were common barriers to getting or keeping a job for youth who had recently transitioned out of care. This finding suggests that assisting youth to access the mental health and/or substance use supports they need could help them in various areas, including employment stability.

The survey data also showed that a common employment barrier was transportation challenges. A solution to this issue could be to offer free transit to youth with care experience. Free transit would help them to save money and increase their access to affordable transportation options. Covering the cost of transportation would also lower the percentage of youth who are in debt due to transit evasion tickets.

Another common employment barrier for youth who had transitioned out of care was government funding restrictions. Until recently, there were limits on the number of hours that youth from care could work if they were on Income Assistance or PWD.

Education should be offered to youth in and from care on the different types of government funding and the eligibility criteria for each one, and on recent changes relating to earning exemptions.



FINANCIAL SITUATION

Findings are among youth who had transitioned out of care, unless otherwise noted.

Most youth reported having a bank account (96% vs. 81% of youth still in care), including 86% who had an active bank account (vs. 66%).

The majority of youth had at least one source of income (96% vs. 89% of those still in care). For youth still in care, common sources of money included a legal job (43%), Youth Agreement (33%), a youth program (16%), family members (24%), and honoraria (14%). Among youth who had transitioned out of care, common sources of income were a legal job and AYA.



Most common sources of income (among youth who had transitioned out of care)

A legal job	54%
AYA (Agreements with Young Adults)	38%
Bursary/scholarship	23%
Family	18%
YEOF (Youth Education Assistance Fund)	14%
A youth program	12%
PWD	10%
Honoraria	9%
Income Assistance	8%

Note: Youth could mark all that applied.

Most youth (65%) went to bed hungry at least sometimes because there was not enough money for food, including 16% who went to bed hungry often or always. Also, a minority of youth (13%) always ate three meals a day (25% always ate breakfast; 41% lunch; and 60% dinner).



Debt

Youth were more likely to be in debt after transitioning out of care than they were before their transition out of care (42% vs. 23%; among those who completed surveys both before and after transitioning out of care).

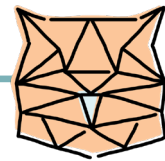
Among those in debt, credit card debt was the most common type for youth who had transitioned out of care (45%), while owing money to a friend or family member was the most common type of debt for youth still in care (56%). Around 3 in 10 youth who had transitioned out of care owed money to a loan agency.

The percentage of youth in and from care who experienced debt increased over time (e.g., from 23% who completed a baseline survey before mid-March 2020, to 44% who completed a baseline survey after May 2022). A rise in credit card debt appeared to be driving this finding (e.g., among those in debt, 58% experienced credit card debt after May 2022 vs. 27% prior to this period).

Most commonly reported causes of youth's debt (among those in debt who had transitioned out of care)

Credit card	45%
Owed money to a friend or family member	41%
Unpaid bills (Internet, cell phone, etc.)	36%
Owed money to a loan agency	29%
Student loan	23%
Overdraft	18%

Note: Youth could mark all that applied.



YRA reflections

Debt is an issue for youth in and from care and it can contribute to youth experiencing challenges to meeting their basic needs. This situation can be improved by increasing financial supports offered to youth. These financial supports should take into account the cost of living in BC, and should be flexible enough so that youth have autonomy over how it can be spent to meet their individual needs.

In addition to financial support, youth should receive education on finances, both before and after their transition from care (debt, credit cards, banking, budgeting, taxes, government funding, etc.). For example, if youth want a credit card, it would be helpful to have access to adult guidance and support, to understand what having a credit card entails and the type of credit card that might be best for them. It would also be helpful for youth to have access to one-on-one support to discuss their financial situation and get help with budgeting to ensure their basic needs are met.

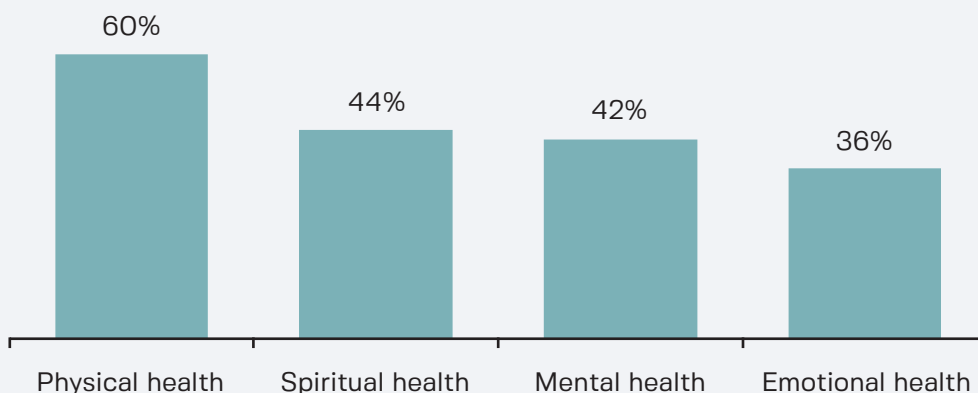
HEALTH & WELL-BEING

Findings are among youth who had transitioned out of care, unless otherwise noted.

The majority of youth rated their physical health as good or excellent, while a minority rated their mental, emotional, and spiritual health this way.



**Youth who rated their health as good or excellent
(among those who had transitioned out of care)**



Among youth aged 19 and over, those who were still in care past their 19th birthday were more likely to rate their emotional health as good or excellent compared to those who had transitioned out of care (59% vs. 34%).

Around half of youth (52%) reported having a mental health condition, and 17% reported an addiction to alcohol, cannabis, or another substance. Also, 23% had a learning disability, 13% a long-term/chronic medical condition, and 5% a physical and/or sensory condition. Among these youth, 68% reported their health condition or disability kept them from doing things that other youth their age could do (e.g., school activities, sports, getting together with friends).



Views on life & themselves

Under half of youth felt satisfied with their life, such as feeling their life was going well (45%), they had a good life (48%), and that they had what they wanted in life (33%). Around 4 in 10 youth (42%) wished they had a different life, and they were less likely to feel this way after transitioning out of care than they were before their transition out (among those who completed surveys both before and after transitioning out of care).

A quarter of youth (25%) reported usually feeling good about themselves, and most (78%) could think of something they were good at. When asked to specify what they were good at, youth commonly listed sports, art, cooking, music, video games, and academics. Many also identified interpersonal skills, such as being good at listening, giving advice, encouraging others, and making friends.

When asked what they were most proud of, many stated they were proud of how far they had come in life despite the challenges they had experienced. Some youth were proud of their education (e.g., graduating from school, getting good grades) and employment (e.g., staying in the same job for an extended period of time). Other youth listed they were proud of their resilience, perseverance, and strength.

Some of youth's comment on what they were most proud of ...

"I am most proud of getting my first-ever device, a laptop. I am proud that because of it I was able to make connections with others and attend college more easily. It really helped me a lot."

"I'm most proud of how far I have come since being a youth in care – university, moving out on my own, making friends, cooking, etc."

"That I have had my job for 2 years with the same organization. Also kept a place for a year and a half."

"I am most proud of taking a stand for myself and breaking the cycle of abuse ... and pursuing an education."

"I'm most proud of my resilience. I'm proud of everything I have accomplished."

"My tough nature to withstand whatever comes my way."

"Being the first in my family to go to university."



Hopefulness & goals

Forty percent of youth reported often or always feeling hopeful for their future. The percentage of youth in and from care who felt hopeful steadily increased over time, from 22% before mid-March 2020 to 42% more recently (after May 2022).



Most youth (80%) had set goals for themselves for the next six months. When asked to specify, they commonly identified education-related goals (e.g., to graduate from high school or to do well in their post-secondary program); achieving financial stability, such as by finding a job; establishing housing stability; gaining more life-skills (e.g., cooking, budgeting); getting their driver's license; and focusing on improving their health and well-being (e.g., by exercising and going to counselling).

Half of youth (50%) reported barriers to achieving their goals. When asked to specify, they commonly listed mental health and financial challenges, as well as not enough consistent support to help them achieve their goals.

Some of youth's goals for the next six months ...

Among youth who were approaching their transition out of care:

"Driver's license, finishing high school, gaining more work experience, and meeting new people."

"Earn and save money for when I age out, get more hours at work, focus on my mental and physical health and happiness, and apply for school."

"To save enough to get my own apartment when I turn 19."

"My goal is to save more money, find our own place near where my school is, and get into nursing school."

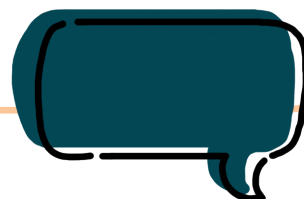
Among youth who had transitioned out of care:

"Save up money to live independently while in school. And also get my driver's license."

"To be able to budget more, and complete 2 more semesters of college ... I also want to make a goal of saving up to go eat at a nice restaurant or cafe with friends or family I know."

"My goals are to catch up in my schooling, get my license, and work on my mental health."

"I want to expand my bubble of places I can go on my own, I want to learn how to cook three new meals, I want to have my room organized to my needs, I want to continue to stay clean. I want to work with trauma workers and I want to continue doing different groups to gain mental health skills and I want to see what if any courses I would need to upgrade to go to college."



ACCESSING SERVICES

Findings are among youth who had transitioned out of care, unless otherwise noted.

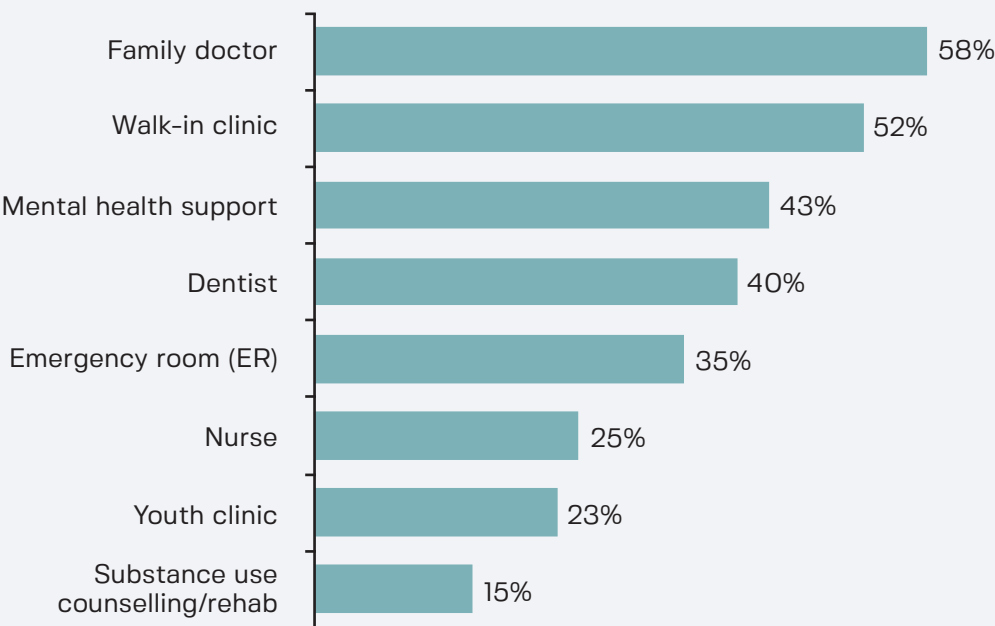
Health care

Around 6 in 10 youth (61%) had needed medical help in the past six months, and around a third of these youth (34%) did not get the medical help they needed. Also, 61% felt they needed mental health services in the past six months, and around half of these youth (53%) did not receive these needed services.

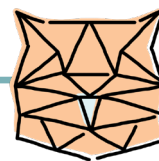
Over 50% of youth had visited a family doctor and/or walk-in clinic in the past six months. Around a third had accessed a hospital emergency room.



Health-related services and providers accessed in the past six months (among youth who had transitioned out of care)



Note: Youth could mark all that applied.



YRA reflections

Accessing health care services can be challenging for youth in and from government care. It is important for youth to have access to health care professionals who are knowledgeable about the experiences and issues they may be facing. This includes health care providers using a trauma-informed approach, and being familiar with and supporting referrals to other health and community supports. Where possible, health care providers should collaborate with a youth's other service providers and be part of the youth's support team in their transition out of care.

Health care services, including mental health care and substance use treatment programs, should be as low barrier as possible. Services should be provided specifically for youth, be available online and in-person, and be available at times when youth can attend, such as evenings and weekends.



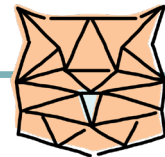
Other supports & services

Youth had also accessed supports and services beyond health care in the past six months. These included education supports (57%), youth employment programs/supports (45%), online supports (42%), services to get ID (38%), and youth drop-in centres (35%). Most youth who had accessed these supports and services found them helpful. For example, 80% found the youth employment programs/supports they had accessed to be helpful.

Also, around a quarter of youth (26%) had accessed cultural supports, and 69% had found this type of support helpful. Among Indigenous youth, 43% had accessed cultural supports, and 79% had found the support helpful.

The majority of youth (83%) had the ID they needed (e.g., birth certificate, BC Services Card). Most (59%) also reported having access to the technology they needed (e.g., cell phone, Internet, laptop). Among those who did not have access to this technology, a laptop was most commonly identified as what they needed.

Half of youth (50%) reported they had needed services or supports in the past six months but did not get them. When asked what they currently needed, many youth identified low-cost mental health counselling. Some youth identified needing support in multiple areas, and a consistent worker to help them access all the supports they needed.



YRA reflections

There are many existing resources and supports for youth in and from care, but youth do not always know where to go to find these supports, and it is not always clear what they can access and how.

Youth should have an adult or peer support who is familiar with existing community resources and who can help them access these programs. These adult or peer navigators could also help youth overcome certain barriers to accessing these resources, such as completing applications, obtaining ID, and applying for funding.

Information about programs and resources for youth in and from care should be shared through a centralized database, like a youth-friendly website. This database should include up-to-date information about each program or service, such as eligibility, referral processes, and waitlists. Some youth might prefer searching for services on their own, or may not have a one-on-one support, so having a comprehensive list of resources available in one place would help youth know where to start to seek the support they need.

Comments from youth on supports or services they needed now (among youth who had transitioned out of care)

"One-on-one counselling would be very beneficial. The only counselling offered [in my area] is group counselling and I am really not ready for that."

"I want to find a way to access a counsellor who I can connect with and am able to see consistently ... I need someone with trauma experience."

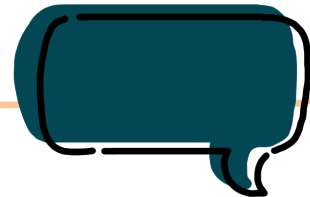
"I need a high support needs worker who could drive me around for appointments/shopping, giving generalized and personal advice on any given issue I'm facing. Someone who isn't swamped 24/7 because the lack of support workers causes them to have more clients than they can handle. It's a nice sounding fairy tale."

"I need help to get ways to get more money, I need help feeling safer to go more places on my own. I need more spiritual help and cultural help. I need more consistent workers; I've [gone] through two case managers in the last 2 months because they keep moving ... I need a support that can help me on a weekly or every two-week basis with life skills ... because I seem stable, I don't get the help I need."

"I'm trying to find all support and services available from housing to financial to safe planning to healthcare."

"I really hope that these surveys help those in charge understand more support is needed for mental health."

"I need my youth worker back please."

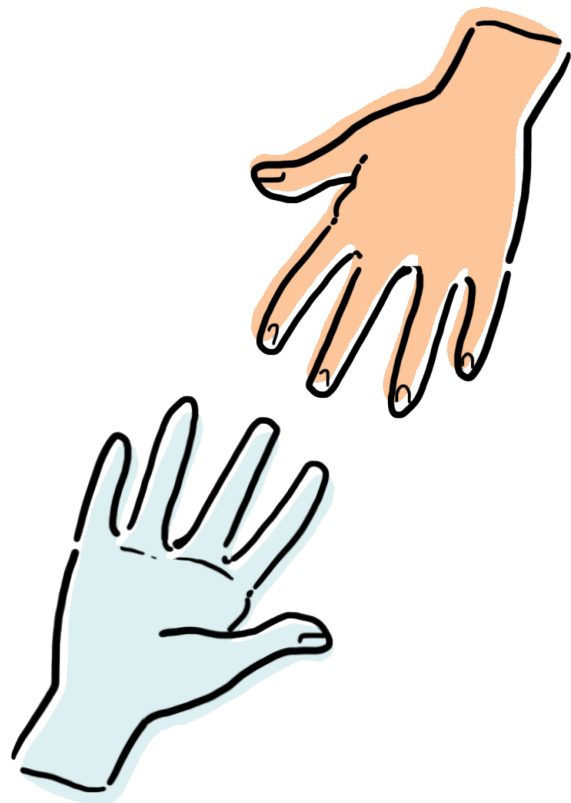


SUPPORTS & PROTECTIVE FACTORS

This section focuses on supports, connections, and other factors that can help to support youth with their transition out of care and into adulthood. The patterns of results were generally similar for youth still in care and those who had transitioned out, unless otherwise noted.

YOUTH'S VIEWS ON SUPPORTING YOUNG PEOPLE'S TRANSITION OUT OF CARE

Youth were asked an open-ended question about how young people can be better supported to transition out of care. Youth who were nearing their transition out of care emphasized the importance of having an adult in their lives who can support them through the transition. Several youth indicated that access to financial support, mental health services, and employment support was important. They also mentioned that youth should be made aware of the services and supports they are eligible for, and that these supports should be easy to access.



Comments from youth nearing their transition out of care on how young people's transition can be better supported ...

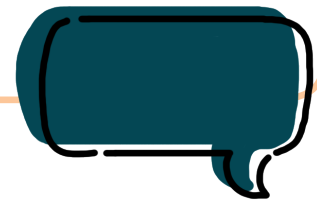
"So many young people need 1 solid adult support to get them headed to success. That adult has to be consistent and preferably for longer term."

"Financial support, mental support, health insurance, trainings, available jobs, scholarships, loan with low interest rates."

"Making sure they have a home after they age out, making sure they're in a program and/or school, they have a support worker still, there's programs they can do that offer money if they need it ... also that they have a phone and their résumés are up to date."

"They could be better supported if they have more people that actually support and care for them and to actually help them be better prepared with knowing how to live on your own and to pay your bills and eat healthy, they need a lot more programs for youth and adults as well!!"

"Have more support groups."



Youth felt that ongoing support should continue to be available to them after transitioning out, such as in the form of a worker who regularly checks in with youth. This worker could offer support in a range of areas, including finding housing, developing independent-living skills, accessing needed services. Some also felt there should be assurance of steady income and stable housing for when youth transitioned out of care.



Comments from youth who had transitioned out of care on how young people's transition can be better supported ...

"Better access to mental health services and resources similar to a youth worker continued after turning 19. Becoming an adult is tough and after transitioning out, there are more responsibilities and yet less support to learn how to traverse them."

"Have more support groups or online virtual groups on how to teach youth to live independently and how to maintain important day to day priorities and tasks by themselves."

"If young people were given a stable source of income – enough to live comfortably – like CERB, they would be able to pursue their dreams without stressing every minute of every day about finances."

"It would be nice to have a young adult's worker—you know, someone who actively shows up and cares about you once you've transitioned out of care. I loved having a youth worker, and I wish there was someone to talk to now as well."

"Social workers should go over what youth should expect when they are transitioning. They can create a plan together and help implement it. Social workers should assess whether youth are even ready to transition so that they do not have to encounter too many barriers."

"I feel like a lot of us formerly/in care don't have access without paying a fortune to get proper mental health help. I'd like to see a well experienced Counsellor without having to pay over \$100 each session."

"I truly believe that when people age out of foster care there needs to be a very detailed plan of support for them until they turn 25 or 30. Often the plans are very short term and the workers are very short-term because they are just working with you until they can transition you out and then often youth go into adult services."

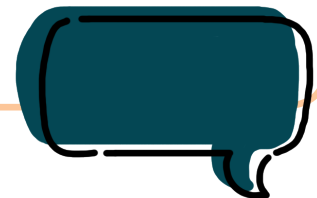
"More real-life education. For example, making appointments, understanding insurance and MSP. Access to their old youth worker, even limited just for any questions."

"More persistent check ins from old workers, until the youth declares they no longer want to stay in contact, or if they gradually lose touch over time."

"To have a youth transition worker two years before they age out. It is very stressful and scary if we are only given 1 year to figure everything out as there is a lot of stuff to do."

"It's be pretty cool if the social workers on AYA cases were more involved with youth at risk like myself ... Not all youth aging out have the same needs, some don't need any assistance, but some need a lot."

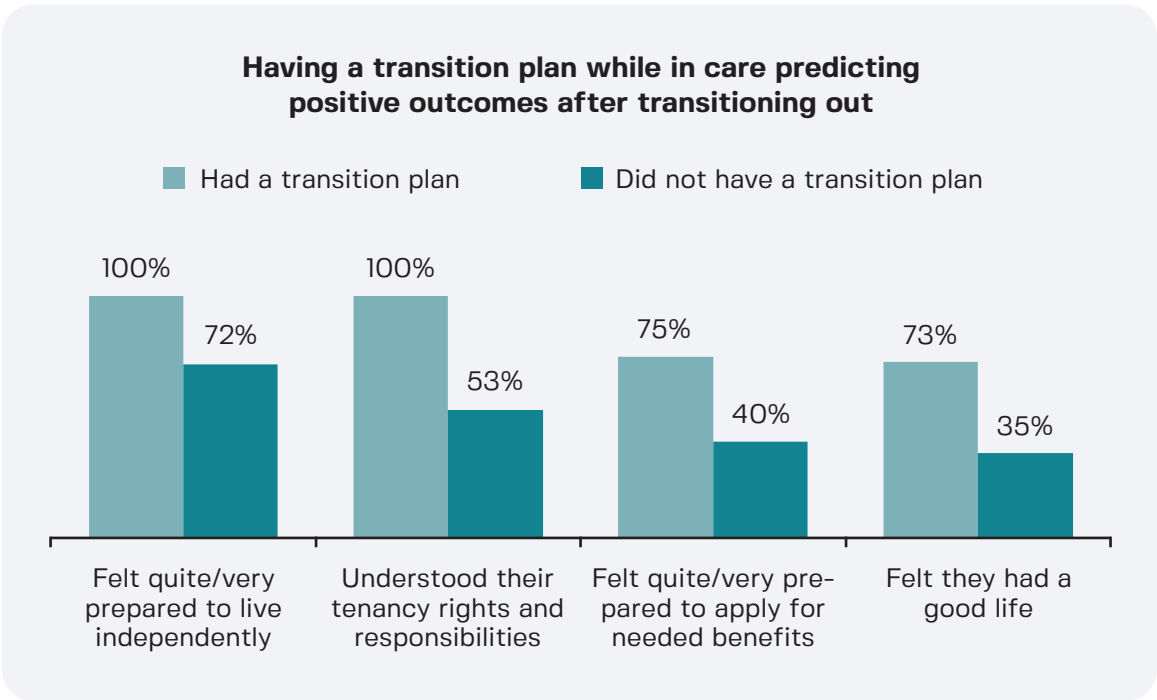
"By having a basic income and a home to go to without barriers."



TRANSITION PLANNING

Among youth still in care, those who had a transition plan were more likely to feel prepared to find housing (51% vs. 33% of those who did not have a transition plan), pursue their education (70% vs. 53%), and apply for needed benefits (69% vs. 46%).

Moreover, having a transition plan while still in care seemed to have benefits for youth six months later, once these youth had transitioned out of care. For example, these youth were more likely to report they had been at least somewhat prepared for their transition out of care (73% vs. 20% of youth who did not have a transition plan). They were also more likely to report feeling quite or very prepared to live independently and to apply for needed benefits (e.g., AYA, Income Assistance). In addition, youth who had a transition plan were more likely to understand their tenancy rights and responsibilities, and to report satisfaction with their life.



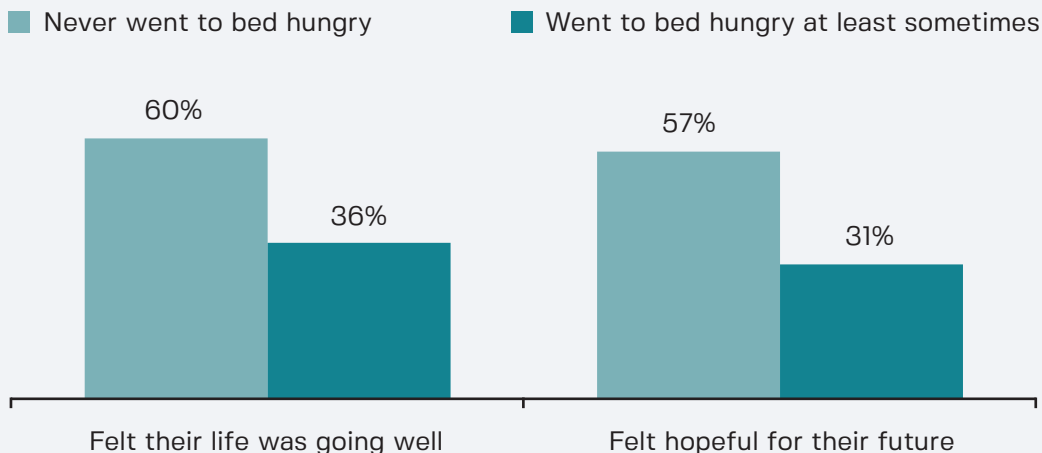
MEETING BASIC NEEDS

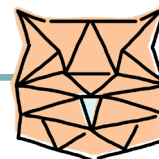
Findings are among youth who had transitioned out of care, unless otherwise noted.

When youth had their basic needs met, their likelihood of experiencing more positive health and well-being increased. For example, youth who never went to bed hungry were more likely to feel satisfied with their life and hopeful for their future than those who went to bed hungry at least sometimes. Similarly, youth who consistently had access to three meals a day were more likely to rate their emotional health as good or excellent (85% vs. 28% of those who did not always have access to three meals a day).

Experiencing housing stability was linked to feelings of connection and life satisfaction. For example, youth who had not moved in the past six months were more likely to feel connected to their community than youth who had moved (33% vs. 13%). Also, youth who felt safe where they were living were more likely to feel satisfied with their life.

Never going to bed hungry in relation to subjective well-being (among youth who had transitioned out of care)

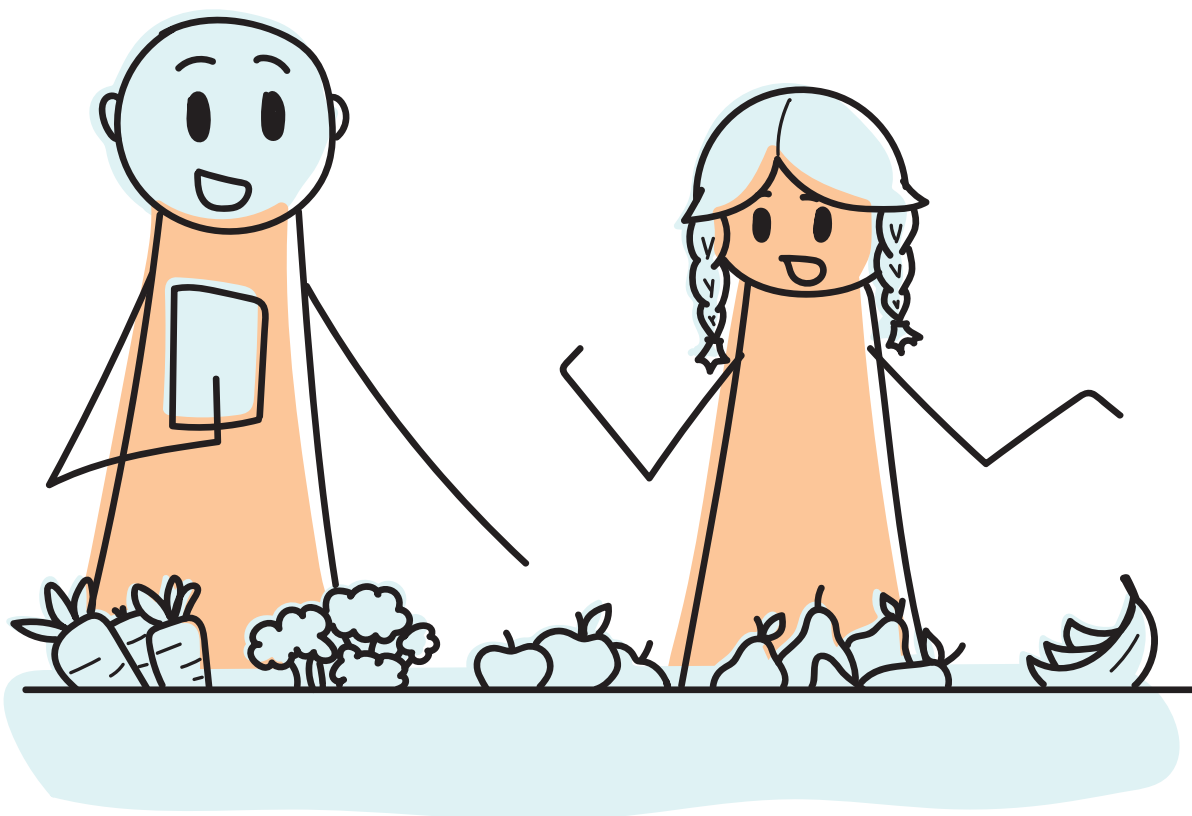




YRA reflections

The findings showed that access to three meals a day was associated with more positive health and well-being. However, it can be difficult to ensure that youth eat three meals a day as this requires money and skills relating to budgeting and cooking. Breakfast programs could be introduced to encourage youth to eat breakfast since it was the least common meal that youth always ate.

Developing a program that supports youth with grocery shopping would also be valuable, particularly if youth were supported to develop skills around creating a budget for groceries, and planning and preparing healthy meals. This program could include providing transportation to the grocery store, as well as education on how to compare prices, read nutrition labels, identify ingredients that can work in a number of meals, and prepare pantry staples into nutritious meals. More information on where to go for low-cost/free food in BC would also be helpful.



SUPPORTIVE ADULTS

Findings are among youth who had transitioned out of care, unless otherwise noted.

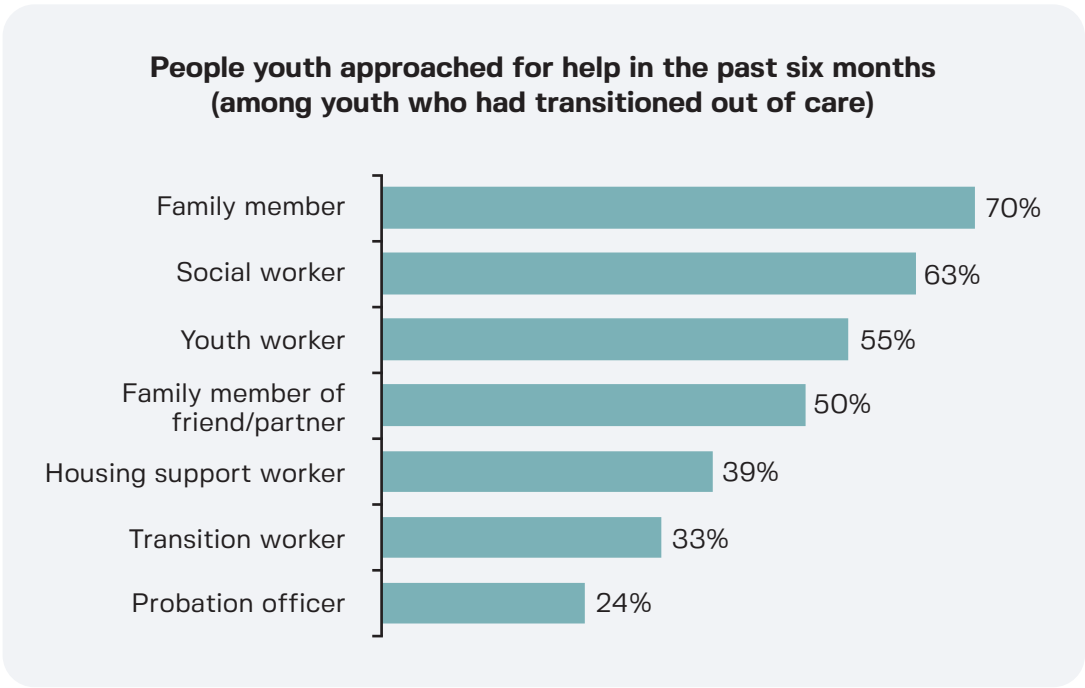
Around two thirds of youth (65%) had at least one adult they could talk to if they were having a really good or bad day. This included an adult they knew socially (53%) and an adult they met through services (32%).

Most youth (64%) had stayed connected to a service provider or staff they had known before transitioning out of care. Staying connected to these adults after transitioning from care was associated with positive outcomes. For example, youth who were still connected to these adults were more likely to report having an adult they could talk to if they were having a really good or bad day (77% vs. 50%) and were less likely to have missed out on needed mental health services in the past six months (55% vs. 94%; among those who needed these services).

Also, 84% of youth felt there was an adult in their life who cared about them. These youth were more likely to feel satisfied with their life than those who did not feel an adult cared about them.

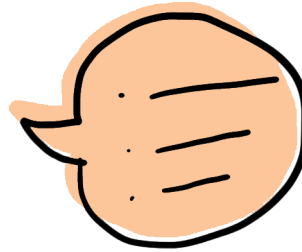
Adults whom youth approached for help

Most youth had approached a family member and social worker for help in the past six months. Also, over half had approached a youth worker for help (55% vs. 70% of youth still in care). Around 4 in 10 had approached a housing support worker (39% vs. 57% of youth still in care).



The majority of youth who had approached someone for help found the support to be helpful. For example, most youth found helpful the support they had received from a youth worker (84%), transition worker (83%), housing support worker (83%), and social worker (76%).

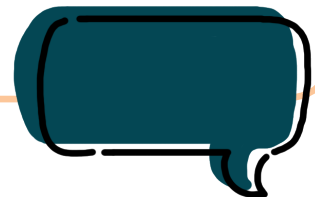
Finding adults helpful, such as social workers and youth workers, was associated with youth feeling prepared with tasks and skills relating to independent living. For example, youth in and from care who had a helpful youth worker were more likely to feel prepared to live independently (79% vs. 52%), pursue their education (73% vs. 48%), find a job (76% vs. 52%), cook healthy meals (71% vs. 52%), and apply for needed benefits (63% vs. 41%). Also, youth who reported having a helpful social worker while still in care were more likely to feel prepared to apply for needed benefits once they transitioned out (82% vs. 38% of those who did not find their social worker helpful).



Among youth who had transitioned out of care ...

"I felt and still feel that I needed the support of my youth worker. Luckily her and I remain in contact, and continue to meet monthly."

"Now that I'm officially aged out, I am still able to contact my youth worker and she has helped me tremendously."

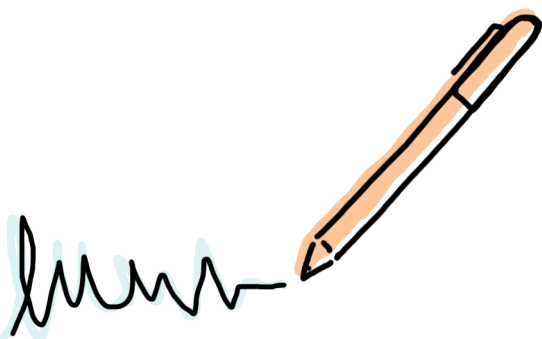


Adults who helped youth with tasks



My social worker was very helpful in answering any questions I had and about applying to university."

Over half of youth had an adult who helped them with applying for school or jobs (61%), with making or getting to appointments (54% vs. 67% of youth still in care), and with finding housing (58%).

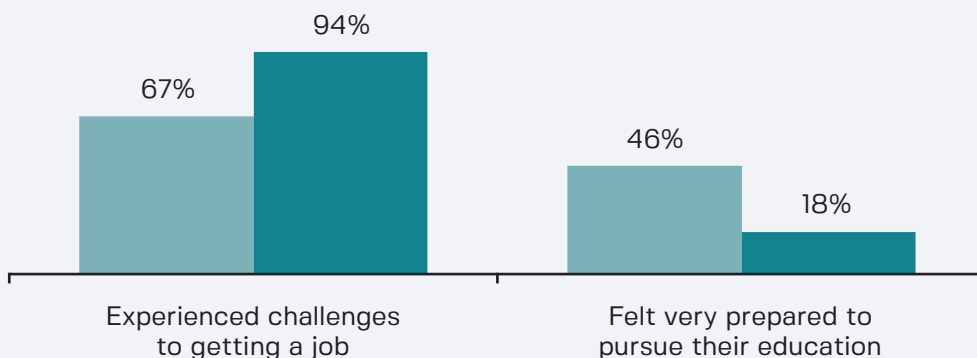


Having an adult to help with finding housing predicted more positive housing outcomes. For example, youth in and from care who had this type of support were more likely, six months later, to feel their living situation met their needs (93% vs. 69% of youth who did not have an adult to help with finding housing). They were also more likely to feel safe where they were living (73% vs. 58%).

Youth who had an adult to help them with applying to school or a job were more likely to report feeling very prepared to pursue their education and were less likely to have experienced barriers to getting a job.

Having an adult who helped with applying for school or a job in relation to education and employment outcomes (among youth who had transitioned out of care)

- Youth who had an adult to help with applying to school
- Youth who did not have this type of adult support



PEERS

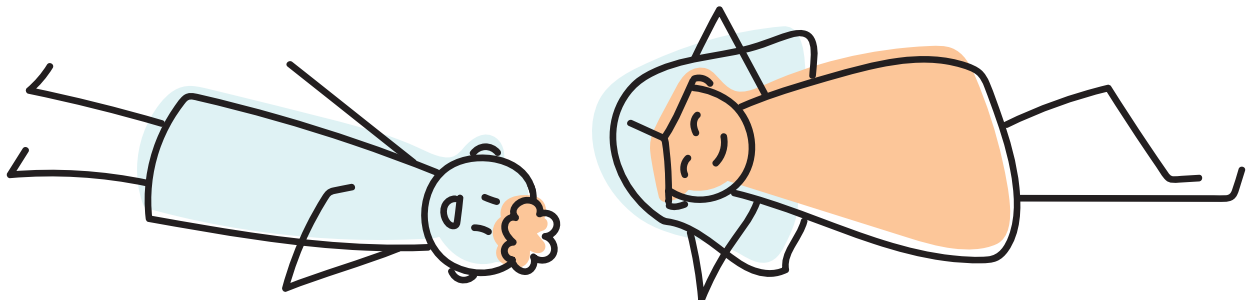
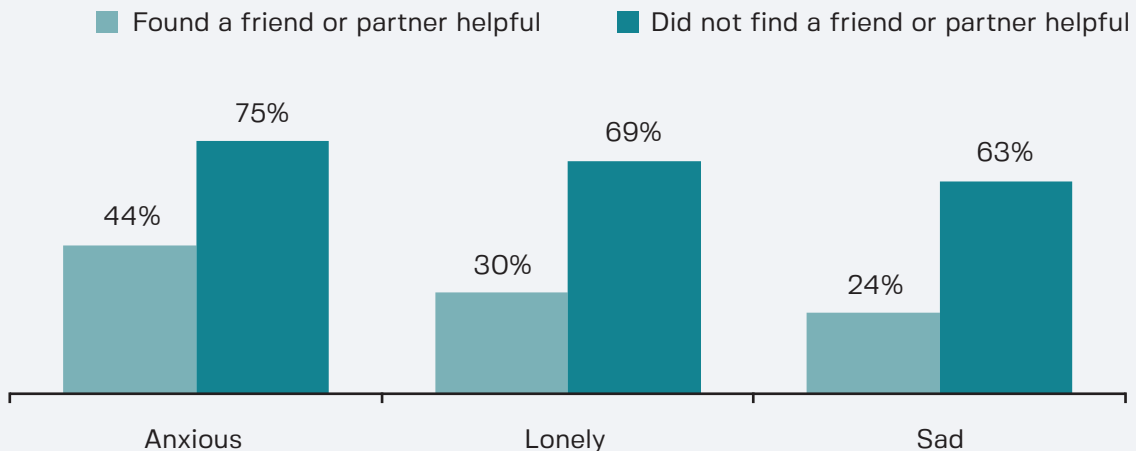
Findings are among youth who had transitioned out of care, unless otherwise noted.

The vast majority of youth (96%) had at least one close friend, including 50% who had three or more close friends. Also, 58% of youth had at least one close friend with government care experience, including 12% who had three or more such friends. Youth who had three or more friends were more likely than those with fewer friends to rate their mental health as good or excellent (58% vs. 26%) and were less likely to often or always feel lonely (22% vs. 44%).

Around 4 in 10 youth (42%) had another youth they could talk to if they were having a really good or bad day. Most youth (85%) had asked a friend or partner for help in the past six months, and 93% had found the support helpful.

Having a helpful friend or partner seemed to have an impact on youth's well-being. For example, these youth were more likely to rate as good or excellent their mental, emotional, and spiritual health, and were less likely to report frequent feelings of anxiety, loneliness, and sadness.

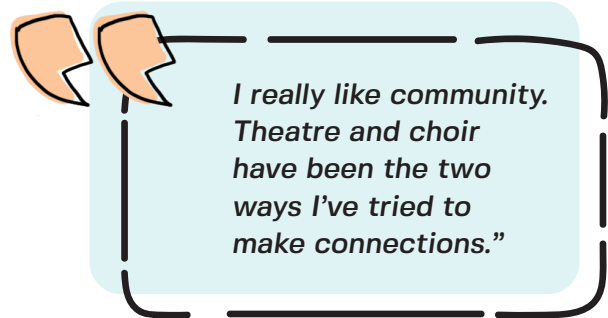
Youth who had a helpful friend or partner in relation to often or always feeling ... (among those who asked for help)



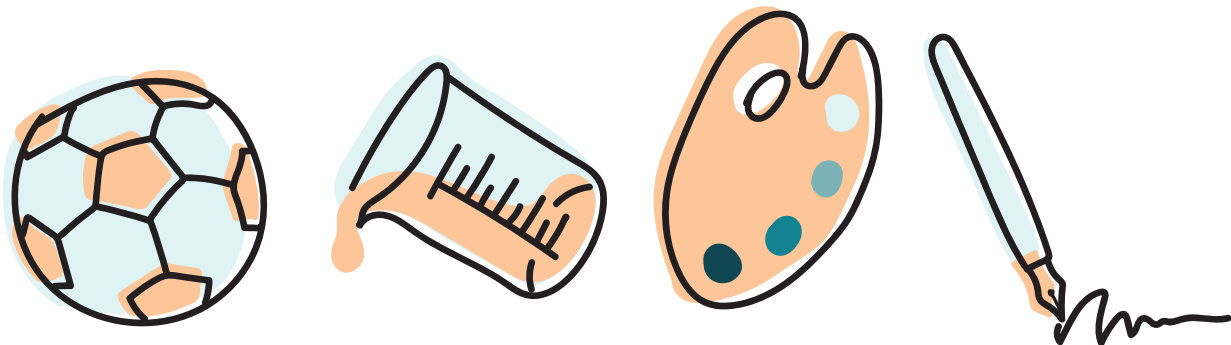
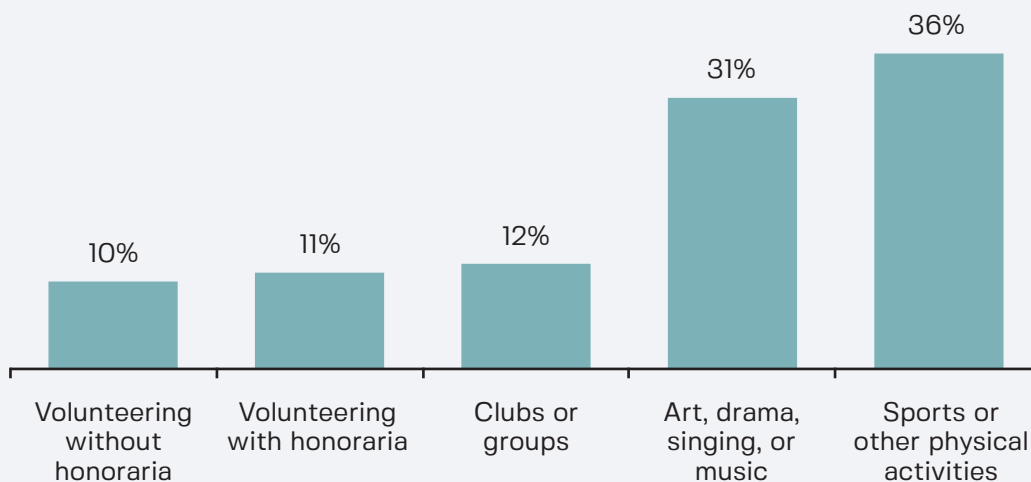
COMMUNITY ENGAGEMENT & CONNECTION

Findings are among youth who had transitioned out of care, unless otherwise noted.

Youth reported participating in a range of community activities in the past six months. For example, over a third had participated in sports or other physical activities on a weekly basis.

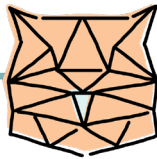
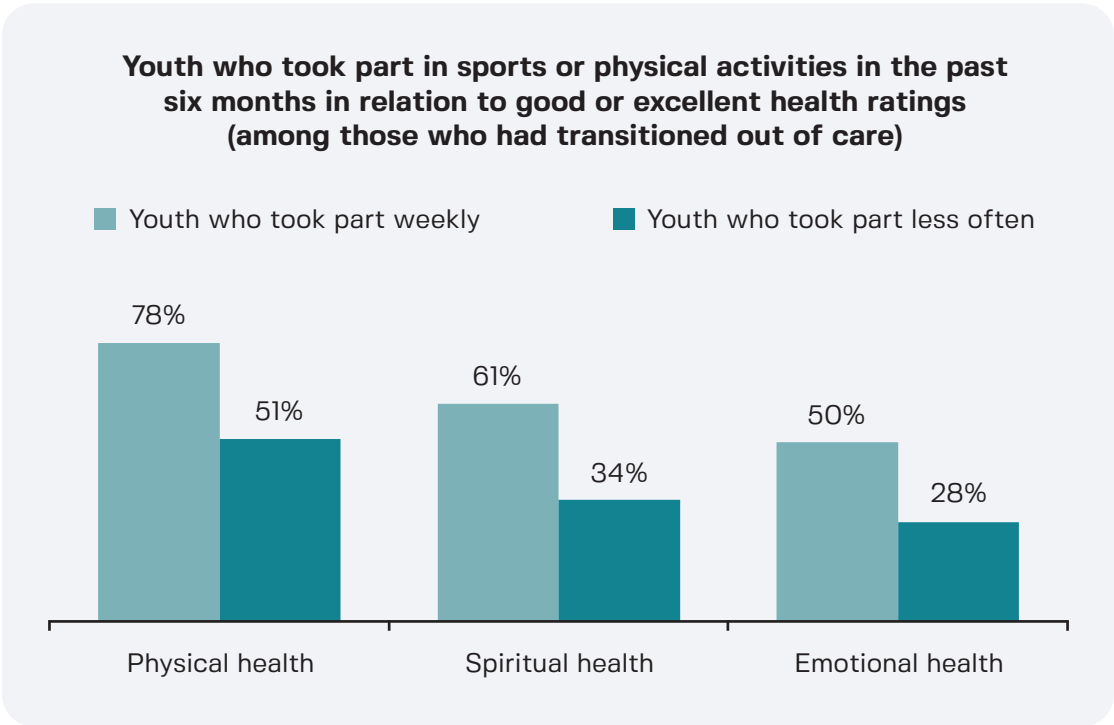


**Weekly involvement in extracurricular activities in the past six months
(among those who had transitioned out of care)**



Weekly participation in sports or other physical activities was associated with more positive health and well-being. For example, these youth were more likely to rate as good or excellent their physical, emotional, and spiritual health.

Engaging in community activities on a weekly basis, such as volunteering with or without honoraria, was also associated with feeling more connected to the community (44% vs. 20% who volunteered less than weekly).



YRA reflections

Youth in and from care should be supported to participate in extracurricular activities, especially in sports or other physical activities. This support could include helping youth get appropriate equipment, paying for registration fees, or assistance with transportation.

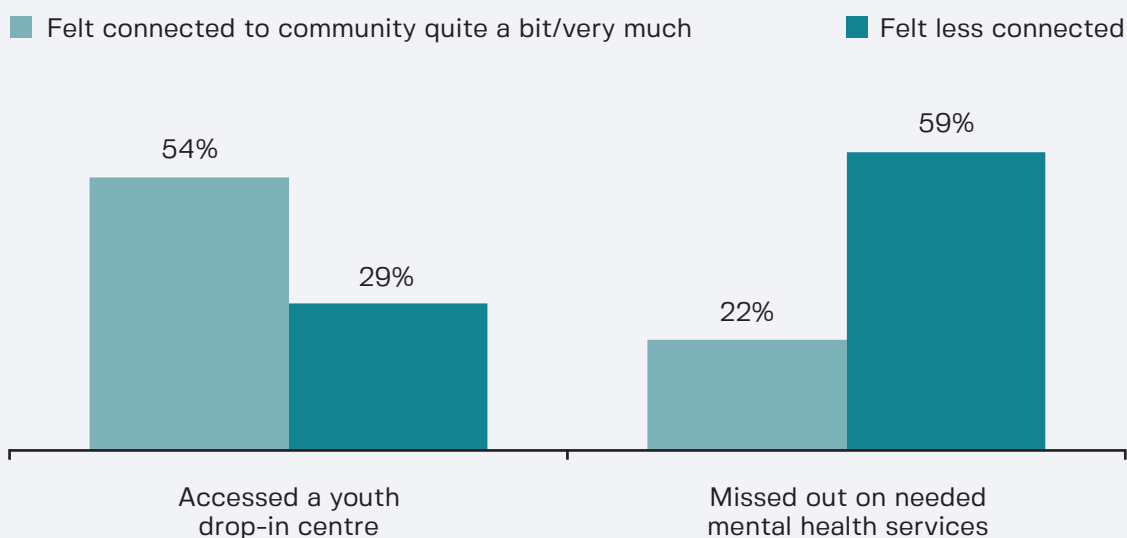
Hobbies that youth are passionate about should also be encouraged and supported by service providers and staff who are connected to them. Transition workers could share ongoing events with youth as it can be difficult to find these opportunities on your own if you don't know where to look.

Community connection

Around a quarter of youth (24%) felt quite or very connected to their community, while 43% felt somewhat connected, and 33% felt not at all or only a little connected.

Youth who felt quite or very connected to their community were more likely to rate as good or excellent their mental health (71% vs. 33% of youth who felt less connected), emotional health (63% vs. 27%), and spiritual health (71% vs. 35%). They were also more likely to have accessed community services in the form of a youth drop-in centre, and were less likely to have missed out on accessing needed mental health services in the past six months.

Community connection in relation to accessing services in the past six months (among youth who had transitioned out of care)



CULTURAL INVOLVEMENT & SUPPORTS

Findings are among youth who had transitioned out of care, unless otherwise noted.

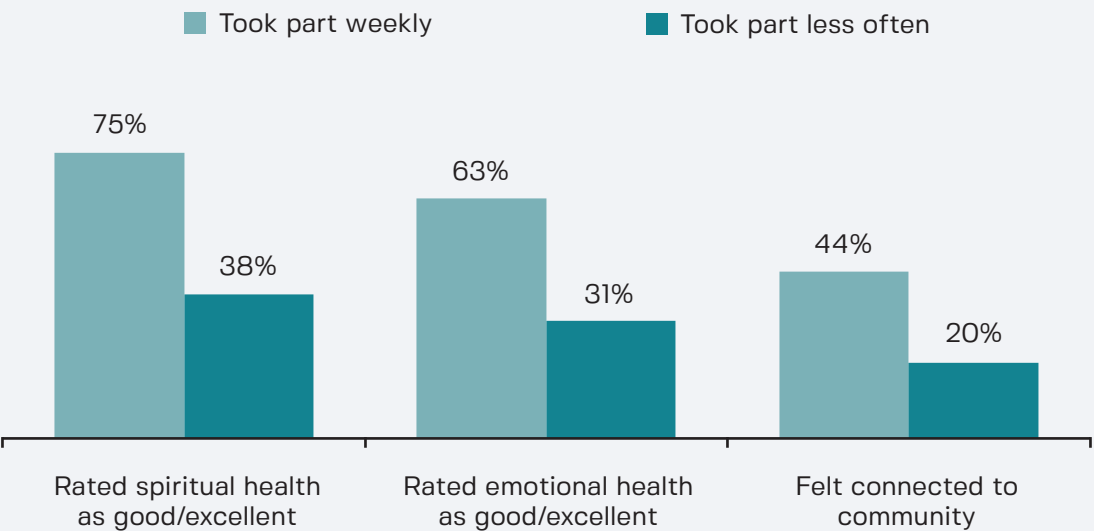
Around 6 in 10 youth (61%) had participated in cultural or traditional activities in the past six months (68% of Indigenous youth), including 16% who had participated on a weekly basis.

Weekly participation in cultural or traditional activities was associated with improved emotional and spiritual health, and community connection. Further, youth who had participated in cultural or traditional activities while still in care were more likely to rate their spiritual health as good or excellent after they transitioned out of care around six months later.

Also, youth who had accessed cultural supports in the past six months were more likely to rate as good or excellent their emotional health (54% vs. 29% of youth who had not accessed cultural supports).



Youth who took part in cultural or traditional activities in the past six months in relation to positive outcomes (among those who had transitioned out of care)



FINAL THOUGHTS & NEXT STEPS

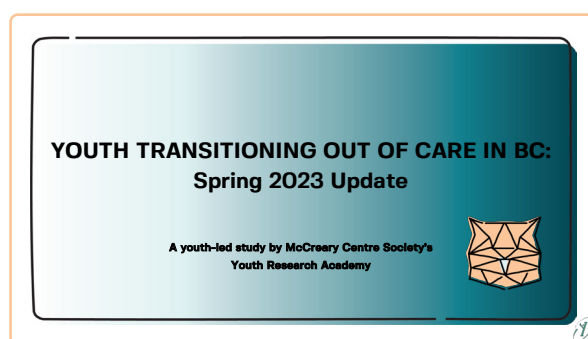
Findings in this report show that while youth transitioning out of care report a range of challenges—such as with finances, housing, and employment—there are supports that can be put in place to help youth through their transition. For example, the results highlighted the importance of supporting youth with meeting their basic needs; connecting them to community activities and services; and ensuring there is a constant adult in their life, who can offer guidance and assistance with navigating the systems and supports they need.

Recent changes announced by MCFD to improve the experiences of youth transitioning out of care, which have been implemented or will soon be implemented, seem to be in line with results from this study about what youth need to support their transition and enhance their health and well-being. These changes include greater availability of transition workers; a rent supplements program; increased availability and flexibility of the AYA and Tuition Waiver programs; and increased support to access mental health counselling.

Findings showed some improvements over the course of this study, such as in youth's hope for their future. It may be that increased MCFD supports that were implemented during the COVID-19 pandemic have contributed to these improvements. Future reports for this study will build on the findings in this report, and will continue to track any changes over time.

Presentations & workshops

The YRA are available to present findings from this report and to host interactive workshops to facilitate discussions based on the findings, with youth and with adults who support youth in and from care. To schedule a presentation or workshop, please email erin@mcs.bc.ca.



How to join McCreary's YRA

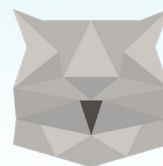
The Youth Research Academy (YRA) is a group of youth aged 16–24 with government care experience who gain research skills and learn about carrying out research projects of interest to youth in and from care and the agencies that serve them. McCreary Centre Society employs eight youth each year for approximately 10 hours a week over a ten-month period from June to March. To learn more about the YRA or how to join, please visit mcs.bc.ca/youth_research_academy or email katie@mcs.bc.ca.

Trevor Coburn Memorial Grants

The Trevor Coburn Memorial Grants are available to BC youth (up to age 29) wanting to carry out projects to support BC youth facing barriers, including youth with experiences of homelessness, substance use challenges, and government care. For more information or to apply, please visit mcs.bc.ca/trevor_coburn_memorial_grants.



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