Northern California Youth Listening Sessions Hearing the Voices of Youth Involved in the Foster Care and Juvenile Justice Systems

In an effort to increase understanding of the needs of youth involved in the foster care and juvenile justice systems, Mental Health California, in partnership with Kaiser Permanente, presented a series of listening sessions across Northern California. Through a regional approach, sessions were held in Sacramento, Oakland, and Fresno, California.

s Kaiser Permanente prepares to bolster services to this population to mitigate the negative impacts of Adverse Childhood Experiences (ACEs), it sought to gain greater insights, hearing directly from the youth, to serve as a guide for service providers with a vested interest in delivering trauma-informed services to individuals and communities impacted by trauma. The project aligned with Kaiser Permanente's national focus on ACEs and a prevention strategy for gun violence reduction. It further supports Kaiser's regional strategies for mental health and community safety. The listening sessions were ideation-centric, blending traditional listening techniques with ideation, art, creativity, and safe space carve-outs for the youth for honest dialogue and self expression.

According to the U.S. Department of Health and Human Services, California is in the midst of a youth mental health crisis. Nearly 1 in 3 high schoolers reported feeling sad or hopeless almost every day for 2 or more weeks in a row. Youth who experience childhood trauma face further challenges that are difficult to overcome. For example, the CDC-Kaiser Permanente Adverse Childhood Experiences (ACEs) Study reveals that young people with past exposure to adverse childhood experiences are at a higher risk for PTSD, substance abuse, and maltreatment, which impact

health and well-being later in life. Youth who participated in the listening sessions have experienced a wide range of difficult circumstances, including physical and verbal abuse, homelessness, street violence, and many have witnessed domestic abuse. Youth attendees have been involved with foster care and/or the juvenile justice system in California, experiencing at least 4 of the 10 types of ACEs. The sessions revealed powerful information for therapists to provide even more attuned mental health care to their system-impacted patients.

The goal of the Youth Listening Sessions was to spotlight the voices of youth in the foster care and juvenile justice systems to gain their honest perspectives and ensure they are heard, with outcomes influencing programs that serve them. In providing a safe space for youth to share the many challenges they've endured, these sessions provided valuable community input to inform the development of mental health services and systems level changes that may bolster youths' health and opportunities to thrive. Among the many learnings at these sessions, youth expressed the vital necessity to expand culturallysensitive mental health and support services, surrounding youth dismantle stigmas involved in the system, and increase personal and professional development opportunities embedded within the juvenile justice and foster care systems.



agenda that allowed the youth voice to be heard. A community welcome and program overview provided context for the sessions. Youth Advocates served as panelists at each session, facilitated by a clinical psychologist with expertise in ACEs/trauma, diversity, and inclusion. Panel discussions centered around the impacts of trauma on system-involved youth. Our Lead Regional Partners, subject matter experts who also facilitated youth engagement and project direction, provided technical expertise by presenting on the status of California's foster care and juvenile justice systems. A featured spoken word artist then engaged participants with dynamic resonance and powerful messages of healing and acceptance. Youth also enhanced their ability to participate in imagining a service provider's future through ideation and innovation discussions. General and breakout ideation activities allowed youth to give input on the systems based upon their personal experiences.

Youth also completed anonymous surveys, sharing about their experiences, health, and well-being. Because participating in listening sessions can be intimidating for youth who have not been involved in such prior activities, they were supported by youth mentors who were able to help them frame their feedback, share their perspectives, and address concerns to help the youth feel comfortable wherever possible. We also infused art into the sessions, giving youth further ways to express themselves while lending creativity to the overall project. Artist workshops included hand illustration to express feelings, spoken word to share life experiences, expressive movement through dance, virtual reality and immersive digital painting for expression, and creating music for moods to help process feelings. In addition to invitations extended to the youth, we invited representatives from audience-specific youth serving organizations, schools, parent and family groups, health and social services organizations, mental health and counseling providers, and others. The listening sessions were private, procured events with 75% participating youth, and 25% participating adults—100 participants maximum at each session.









Being removed from my old home was the best thing to ever happen to me. However, I often feel lost and silenced. Nobody acknowledges my trauma or what got me there in the first place.

Place greater emphasis on those with lived experience and the value they bring.

Not every child has the same trauma. When a child speaks about abuse, listen the first time. Do not push it under the rug. Every child is different and needs different attention.

We need a Youth Mental Health Bill of Rights.

Families should view foster youth as their own children, not just some kid in the house.









Don Mordecai, MD, National Leader for Mental Health and Wellness, Kaiser Permanente

Sacramento Youth Listening Session

he Sacramento Youth listening session presented a dynamic mix of youth, advocates, and providers. The first in the series, this session showcased the excitement surrounding the initiative within a warm and creative setting, providing comfort to the youth. Hosted by the Valley Hi-North Laguna Library, the setting perfectly suited the occasion, and also featured a festive foyer where art activities took place.

The opening panel of Youth Advocates shared their experiences with system(s). Two panel members, both formerly incarcerated youth, spoke of harsh treatment within correctional settings, including threats of pepper spray and bodily injury from correctional officers. One young man, who was incarcerated with adults, described the toll taken on his emotions and mental health. He highlighted the injustices of being housed with adults and the callus treatment experienced at the hands of correctional officers. Both youth called for more mental health screening, and in consideration of justice-impacted youth, recommended an alternative to placing youth in adult facilities.

Evident throughout the series was the youth perspective on foster parents, particularly the need for more screening, accountability, and trauma-informed training.



Sydney Bice, who works at Stanford Youth Solutions and participated as a panelist, said, "I really wish I had access to mental health resources when I was in high school. Once I left home and moved out, all these things started crashing on me. I was experiencing mental health issues, and didn't know what to do. I had no idea it was a problem when I was living it – it was just my life and it was normal."

Another youth recalled a foster parent who had ordered her to stay in her room most of the day and night. Feeling trapped and isolated, she reached out to her social worker for help. She acknowledged caring adults in the system who use their lived experience to help guide youth, but noted the large number of unqualified foster parents who desperately need training, support, and accountability, and much better screening. Youth also expressed not feeling valued in that when they were moved to a new residence, being provided with only a trash bag in which to place their belongings caused hurtful feelings.

Panel facilitator, Dr. Kristee Haggins, Associate Professor, Clinical Psychology Psv.D Program, California Northstate University, discussed the meaning of a traumatic experience and how it manifests itself mentally, physically, and emotionally. She provided insights and ideas on how youth could incorporate positive wellness into their daily lives, such as through creative expression, exercise, spiritual awareness, therapy, nature connections, and meditation, despite their surroundings. She deeply acknowledged the youth's struggles within the systems as well as their emerging advocacy skills to facilitate systems change.



Lead Regional Partner, represented by Ms. Ebony Chambers, Chief Officer, Family and Youth Partnership, Stanford Youth Solutions + Sierra Forever Families, shared with the audience the number of youth in these systems, currently around 60,000 in California, a slight decrease from recent years. She noted a high recidivism rate with youth in and out of the systems, linking this to the need for improvements within the systems to better support youth. "The costs to the systems are nothing compared to the human costs when we age out of a system that didn't care for us. We can end up in the juvenile justice system or without means to seek higher education. The outcomes are not good."

A dynamic spoken word performance by "Coon the Poet" then prepared the audience for the ideation and creative aspects of the event. The poet reminded the audience they were "Beautiful, magical, and phenomenal," creating a safe, inviting atmosphere for the youth.

Five 'ideation' stations were created, whereby attendees gave their suggestions on system improvements on a variety of topics (responses appear later in this report). This activity was designed to lift the youth voice, gaining their insights on needed system changes and improvements.

Adults and youth participated in the emotional expression through art activities including music production, expressive dance, drawing, improv comedy, and spoken word. Youth were deeply engaged in the creative sessions, expressing how pleased and surprised they were at the entire experience, which helped them feel validated and connected to their peers.



Statistics

In 2018, 65,020 juveniles were referred to probation departments; 88.9 were from law enforcement. The majority of referrals are for misdemeanors, over one-third are for felonies and a little under one-seventh are for status offenses.

n 2015, 62,035 children and youth in California were living in foster care, a rate of 5.8 per 1,000. Among groups with data, African American and American Indian/Alaska Native children in California consistently have the highest rates of children/youth in foster care—23.7 and 21.3 per 1,000, respectively, in 2015, compared to 5.7 per 1,000 for Hispanic/Latino, 4.9 for white, and 1.1 for Asian/Pacific Islander children.

Adverse Childhood Experiences (ACEs) refer to ten specific categories of traumatic exposures grouped into 3 types: abuse, neglect, and household dysfunction, such as parental substance abuse, sexual abuse, physical abuse, or family mental illness.

In California, 86% of children who entered foster care for the first time in 2013-15 were removed from their families due to neglect, 8% due to physical abuse, and 2% due to sexual abuse.

Nationally, about 10% of foster youth "age out" of the system (without being reunified with their families or adopted), and services often end abruptly. A high percentage of these youth experience inadequate housing, low educational and career attainment, early parenthood, substance abuse, physical and mental health problems, and involvement with the criminal justice system.

"Children in the foster care and/or the juvenile justice system are often at risk for not getting the mental health help they need, and are more likely to have greater problems that have an impact on the family and the community. The goal of our Youth Listening Sessions is to create a stronger mental health care system for some of our most vulnerable children in California."

Oakland Youth Listening Session

he Oakland Youth Listening Session was hosted by Youth Uprising, a sprawling youth development complex in East Oakland. Accommodating to the youth in every way, the venue gave an exciting, theatrical feel to the session, boosted by a colorful backdrop and mood lighting. The main floor sat adjacent to an open-air dance studio, utilized for the evening's creative expression through art.

Tracy L. Ward, LCSW, Community Benefits Project Manager III, External and Community Affairs, Kaiser Permanente, provided a warm welcome, and Kristene Smith, Chief Executive Officer, Mental Health California, shared an overview of the Youth Listening Sessions. Our series youth panel facilitator, Dr. Kristee Haggins, supported the youth as they described their experiences with the foster care system.

Kejon Swift, majoring in industrial design at Solano Community College, has not 1 but 2 mentors. "I want to design cars," he said. "And own my own company." He is 20 years old. But years of having his belongings regularly stolen have left Kejan distrustful of most people. "To this day, it's still hard for me to trust." He described how his foster parent showed a lack of compassion for his situation, blaming him and not accurately reporting the incident to case management. To add further injury, his caseworker reimbursed him for a fraction of the worth of the stolen items.

His own tool for getting through and beyond his experiences is simple. "I always paid attention. I thought there may be information that I would need later on." His focus on industrial design keeps him positively self-motivated. For those helping youth, he advised, "Be more open to

teaching the children you are working with basic life skills to live on their own."

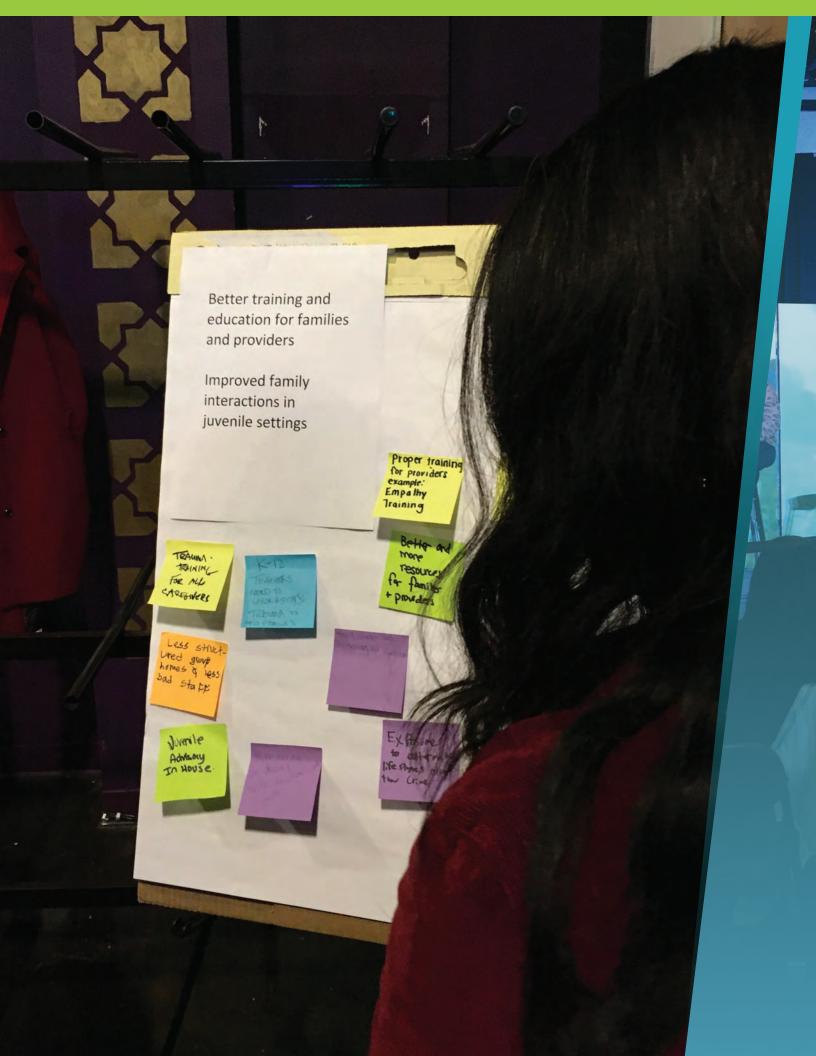
He further recommended that 1) caseworkers take these types of incidents more seriously, 2) reimbursement should be on a case-by-case basis versus a "standard \$25 Walmart gift card", and 3) foster parents be held accountable for accurately reporting loss, theft, and incidents that occur in their homes.

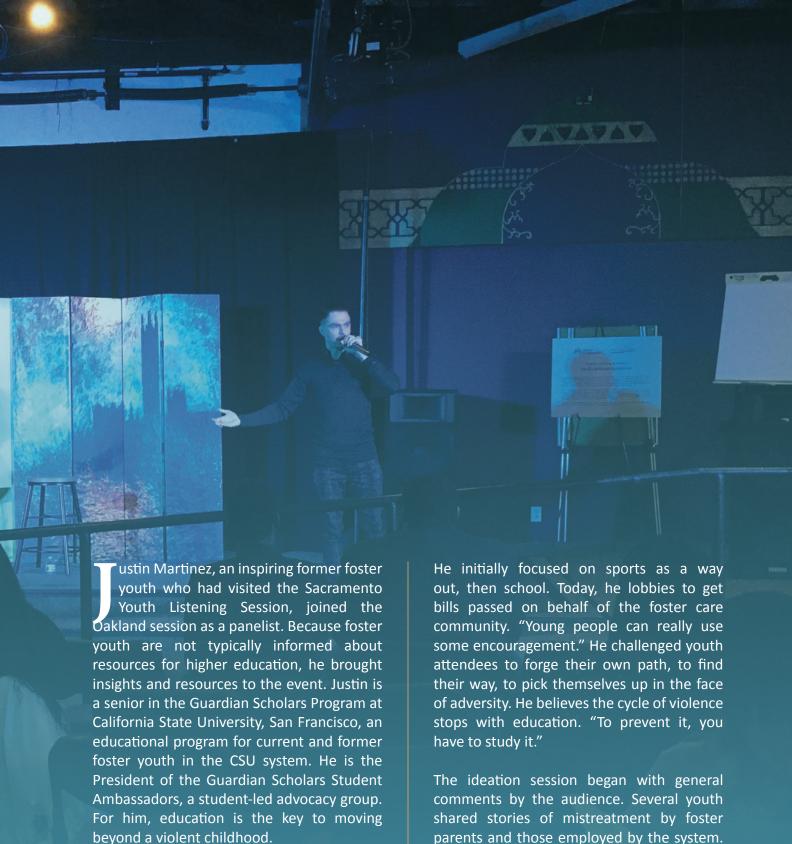
Maya entered foster care at 16, after spending her childhood living with a mother addicted to alcohol and drugs. Not long after, Maya underwent involuntary weekly "reunification" visits with her mother, who was unprepared to take her back. "My mother understood she couldn't physically hurt me anymore, but every week she would make sure to say things that hurt."

Although she was of an age to determine the mandated visits with her mother were more detrimental than helpful, she was made to continue attending them until one day she refused. "I was viewed as being defiant," she said. It took 2 months for Maya to convince her foster parents and social worker that the meetings with her mother had to stop. "I have a hard time trusting people. But I really learned that I have to advocate for myself."









Growing up, his father regularly beat his mother. At 14, he and his 3 younger siblings were put into foster care. "I have episodic memories of the violence I have seen performed on my mother. There are lots of triggers that bring back the memories."

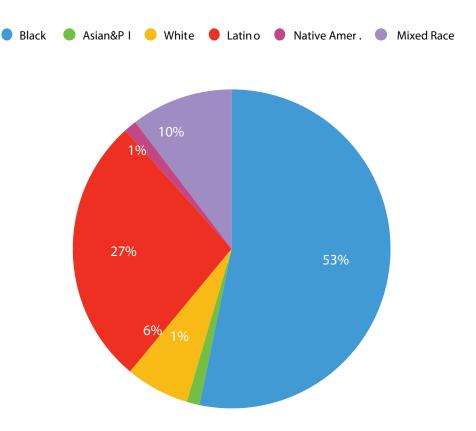
The ideation session began with general comments by the audience. Several youth shared stories of mistreatment by foster parents and those employed by the system. Many reflected on the emotional toll being in the system has taken, citing depression, anxiety, Post Traumatic Stress Disorder (PTSD), lack of trust in adults who are supposed to be of assistance, and feeling as though they are not seen or heard. Youth advocated for more training for caseworkers in the areas of youth trauma and empathy.

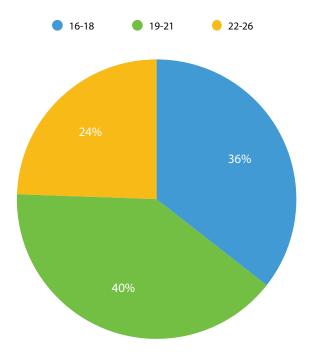
Youth Demographic Survey

Who can you talk to for support, and who is included in your support system?

amily, friends, God, mother, father, foster mother, mentors, aunts, uncles, siblings, teachers, therapist, adoptive parents, supervisor, coworkers, foster family, boyfriend, partner, roommates, sister-in-law, godmother, girlfriend, youth advocate, counselor, grandparents, peers, youth center, wrap around team, caseworker, and coach.

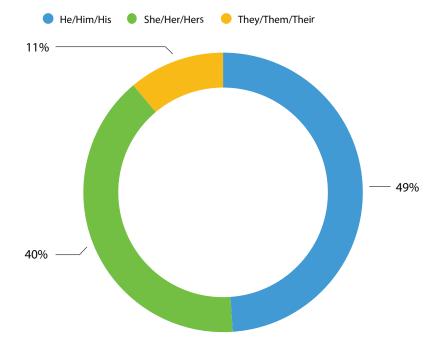
With which ethnicity do you identify?





What is your age range?

Which pronouns do you use to describe and identify yourself?



What is your education level?

Currently in high school 26%

No high school diploma (not currently in high school) 6%

High school diploma or GED 23%

Apprenticeship or vocational certificate 6%

Currently enrolled at a community college 30%

Currently enrolled at a University 4%

Associates Degree (AA/AS) 2%

Bachelors Degree (BA/BS) 2%

Where are you living currently?

9% I live alone

11% With domestic partner/ spouse

11% With parents

2% With immediate family members (not parents)

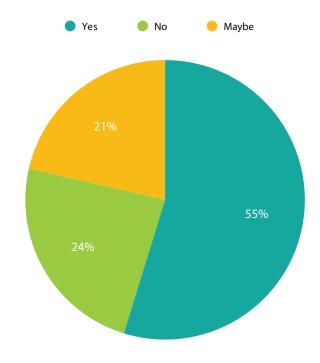
18% With extended family members

13% With friend(s)/ roommate(s)

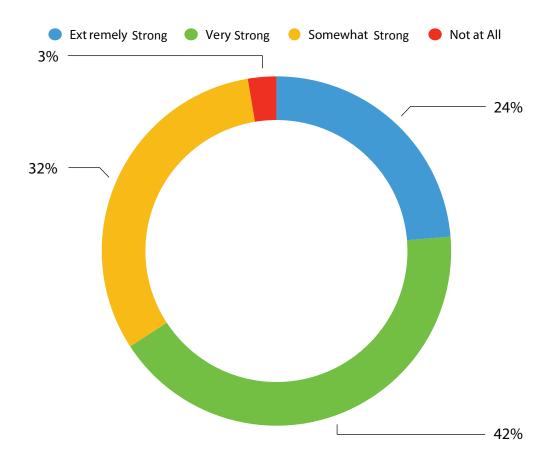
9% With foster parents

27% With others (shelter/ transitional housing)

Are you comfortable sharing your experiences with mental health and/or trauma with others in a group setting, and sharing how it affects your community, your family, and friends?



How strong is your support system?



How important is mental health to you?

2% Of little importance7% Of average importance41% Very important50% Absolutely necessary

The Northern California Youth Listening Sessions were represented by the following zip codes.









91776, 93722, 93726, 94112, 94533, 94558, 94559, 94564, 94585, 94589, 94590, 94601, 94605, 94606, 94709, 94803, 94804, 95340, 95608, 95624, 95655, 95660, 95682, 95695, 95762, 95817, 95823, 95825, 95827, 95828, 95834, 95842, 95864.



Fresno Youth Listening Session

ich, meaningful conversation defined the Fresno Youth Listening Session, held at the beautiful Fresno Art Museum. A sprawling, welcoming setting embraced guests immediately upon arrival. Varied, separate sections of the museum housed purposeful activity including the Bonner Auditorium, a spacious, colorful theater perfectly suited for the occasion, and an art classroom and studio.

A captivated audience listened to a personal story by a young woman, Emily, only 17 years old. She had entered the foster care system voluntarily, considering the conditions of both of her parents, who were battling drug addiction and presenting a chaotic lifestyle in the home. The young woman also had an infant daughter who entered the system with her. The intention was to provide a stable life for her child and herself, but instead, they were placed in a group home where supervision was at a minimum. "I was bullied while the attendants did nothing, telling me they were not going to get fired anyway. When I was assaulted by the bully, I fought back to protect myself, but I was accused of initiating the fight and they took my baby away. I barely see her now. It's frustrating because no one hears me. I'm not being protected. I left my family thinking things would get better and be safer, but it's the opposite." She fears her daughter will be lost to the system. "I'm always anxious because I'm not able to be with my daughter, and she needs me."

According to an article published in the Chronicle of Social Change, for high schoolage foster youth living in group homes, the drop-out rate is 14 percent. In comparison with peers in foster care, students in group

homes are the least likely to graduate high school, matriculating at a rate of 35 percent. Youth with just one placement in a group home were 2.4 times more likely to end up involved with the justice system than other peers in foster care.

Children who spend some time in an institutional facility spend 33 percent longer in foster care than those who live in other foster care placements. Researchers also suggest that an initial placement in an institution like a group home or an emergency shelter lowers the likelihood that a young person will ever reunify with their parents.

California is currently in the midst of an expansive child welfare reform more than a decade in the making. Dubbed 'Continuum of Care Reform', the state is aiming to take some of the hardest to place children out of group homes and help root them in "family-like settings." Beyond the supposed benefits of keeping young people out of these settings, the move is also projected to be a major money saver — every month a child spends at the most intensive group home costs taxpayers \$11,238 a month.





rian Van Anne, Chief Executive Officer, Transitions Children's Services, led a discussion on system realities, including new rules and regulations for former group homes. "A large percentage of group homes statewide have closed because they just didn't want to conform to the new standards," Brian said, referring to the Continuum of Care Reform standards. "Others are conforming to Short-Term Residential Therapeutic Programs (STRTPs).

Formerly known as a group home, Short-Term Residential Therapeutic Program (STRTP) was established effective January 1, 2017 by Assembly Bill 403 (Chapter 773) Statutes of 2015. STRTP is a residential facility operated by a public agency or private organization that provides the following services:

Integrated program of specialized and intensive care and supervision, services and supports, and treatment; and short-term 24-hour care and supervision to children and non-minor dependents.

Jerry Salazar from Los Angeles, a 23-year-old Youth Advocate panelist, said he was pulled out of school and sent to the juvenile justice system after being accused of selling drugs. Salazar said he felt ostracized and bullied by juvenile justice officials – he said they wouldn't listen to him even after he explained he had nothing to do with the drug issues at his school. "I had to learn how to cope with that and deal with people who I felt had no respect for me or my family," he said. Young people like Jerry are becoming advocates for themselves and others who have been part of the foster care and the juvenile justice system.



Joanna Litchenberg, MSW, Chief Executive Officer, Focus Forward, who joined Brian Van Anne for the presentation, noted that juvenile correctional officers are now mandated to be trained in trauma-informed care. "Staff in the system need to be trained. They are not babysitters. They are more than just a worker. They often assume parent-like roles, and so even if they're young and just out of college, they need to be properly trained," she said. "Probation is also making new investments in community-based organizations to bolster services to our juvenile justice-involved youth. Hopefully, this upward trajectory will continue."

he general audience ideation session centered around providing more trauma-informed and sensitivity training for caseworkers. Holding foster parents accountable for doing a better job at conflict resolution, reporting bullying, and fair treatment among all residents were noted. It was also mentioned that the system should place greater emphasis on not placing formerly incarcerated youth back in areas where their crimes were committed.

Youth and adults then took part in spoken word and visual art workshops. Participants expressed their emotions with the assistance of noted Bakersfield visual artist, Brian Garcia. Bold colors swept canvases in the art studio, while others worked with Fresno Art Museum staff on tin foil sculptures and painting exercises.

Spoken word artist "Coon the Poet" directed a session on poetry and journaling, showing the youth how to document their feelings, turning them into art.

The session provided a safe space for these conversations. Youth felt empowered to share not only their experiences, but were open about their recommendations for system improvements. Mental health and trauma continue to be largely overlooked or not considered a high priority within these systems, according to the youth. It was agreed that introducing extensive mental health training, programming, and traumainformed supports for this underserved population would be an ideal outcome of these discussions.





Wednesday, February 5, 2020, Oakland City Hall

Oakland City Hall Youth Listening Session

'aiser Permanente and Mental Health California also hosted an unadvertised Session, presented as a discussion with solely juvenile justice-involved older youth impacted by violence in their daily lives. The convening was organized by Kevin Grant, Violence Prevention Network Coordinator for the City of Oakland. Thirty youth attended (28 males, 2 females), all considered 'rivals', all dealing with trauma. Kristene Smith, Chief Executive Officer, Mental Health California, opened the discussion, touching on stress factors that can lead to anxiety, depression, substance abuse, and how ACEs shows up in adulthood, particularly without interventions. The group discussed the relationship between mental and physical health, how to practice self-care, and personal responsibility toward one's health. The discussion then forged a striking turn upon the introduction of spoken word artist "Coon the Poet", himself a trauma and gun violence survivor who deeply resonated with the youth. Focusing on personal experiences through creative expression to uplift the youth, the poet's positive messages blended with the peace and cooperation among the 'rivals', who remained respectfully fixated on the dynamic energy in the room. Youth engagement had surpassed expectations in a unique manner, as the group began to discuss emotions, negative societal interactions, traumatic experiences, their upbringings... even crying, or the lack thereof. Powerfully presented and received, this private session for violence-involved youth bore the spark for future engagements, breaking barriers to directly address ACEs, behaviors, mental health, pathways to healing, and crafting positive futures.



In 2015, more than three-quarters of all juvenile felony arrests in California involved youth of color. 34% of juvenile felony arrests were for violent offenses, 31% for property offenses, 24% for other offenses (e.g., weapons, hit-and-run), 7% for drug and alcohol offenses, and 3% for sex offenses. Statewide, boys account for the vast majority of juvenile felony arrests—84%.

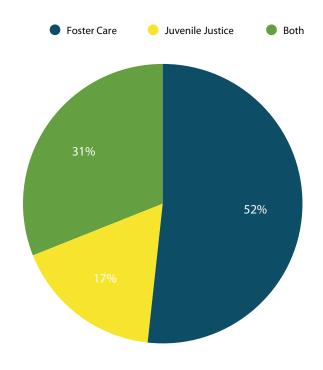
Traumatic exposure without a positive buffer, such as a nurturing parent or caregiver, can lead to a Toxic Stress Response in children, which can, in turn, lead to health problems like asthma, poor growth and frequent infections, as well as learning difficulties and behavioral issues. In the long term, exposure to ACEs can also lead to serious health conditions like heart disease, stroke, and cancer later in life.

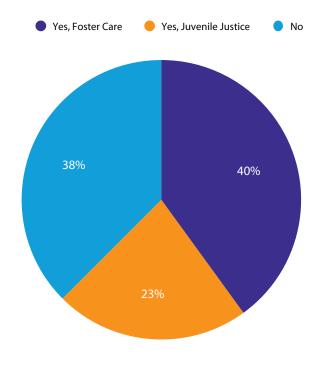
"For many of these young people, this is the first time they're learning what trauma is, processing what they've been through, and how their experiences continue to contribute to some decisions they're making. It also provides the adults in the room with the opportunity to understand what they have been through, which energizes us to really want to deliver solutions for them."

Tracy L. Ward, LCSW, Community Benefits Project Manager III External and Community Affairs, Kaiser Permanente

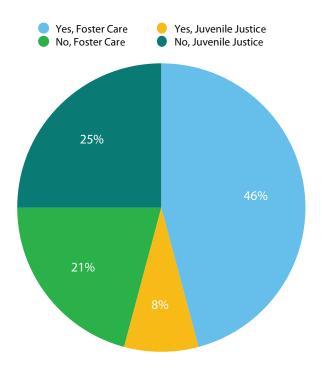
Youth Questionnaire Safety in the System(s). Do You Feel Safe?

In which system(s) have you been involved?





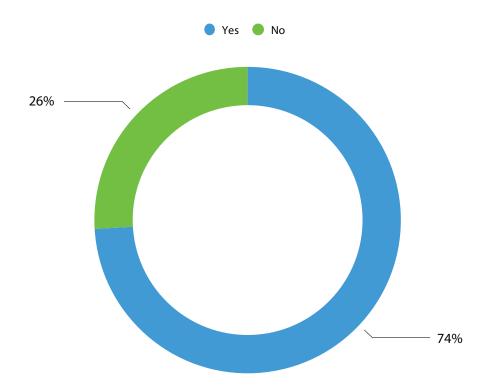
Are you currently involved in a system?



Please explain why you did/do not feel safe in a system.

- They set you up for failure.
- No one was there for me for a long time, then I came to Voices, which helped me.
- When asked how I got through it, I'm now aware that I basically fended for myself.
- Each foster home had its up-side and downside, and abusive/weird side.
- There was no support system for me.

- Authorities take advantage of their power.
- No one can control another's feelings, yet they try to lock us in a box when they hear us, violently at times, crying out for help.
- Because the only way you get help is if you're in a life or death situation.
- People who work within the system have allowed power to get to their head. They also are not trained to rehabilitate, they are trained to punish and keep you in the system.



Please explain why your living environment is not safe.

- Terrible conditions leading to health concerns.
- I live in a safe house; almost homeless.
- It's not my own place. I could be kicked out any second.
- I can be targeted by police because I'm on probation for a felony.

- It's still in the trenches.
- Our poverty levels are so high, everybody in my neighborhood is at risk.
- Crime is high.

How can the foster care and juvenile justice systems be safer for youth?

- The systems need trauma-informed staff and REAL advocates. My experience with past advocates was extremely unsupportive and potentially detrimental to my mental health.
- Provide housing in safe environments after foster care.
- Better social workers; better communication.
- Speak to the youth, no matter how long they've been there. Although youth can be quiet, they have thoughts. Don't take a person and seclude them. Each social worker has multiple lives in their hands! They need to cherish those lives.
- Asking for youth input on how to make the systems safer is needed.
- Fewer caseloads for social workers; get rid of juvenile hall; more credible foster homes.
- Hire and train people in the juvenile justice system who actually care about us. We are human. We are children. We don't have the support we need everywhere we go. Just try, attempt to help. Do what is RIGHT, not what is EASY.
- They can be safer by trying to help, not punish, everyone.
- Putting more safety precautions in place for the youth, and placing them in homes that truly care about them.
- They should find out more about the person trying to raise the child, and help the child find a good parent.
- Do extensive criminal background checks on future foster parents. Create new support systems for both foster youth and juvenile justice-involved youth.
- Helping youth complete their education, supporting everything they do. Place children in a suitable home with foster parents doing this work for the right reasons.

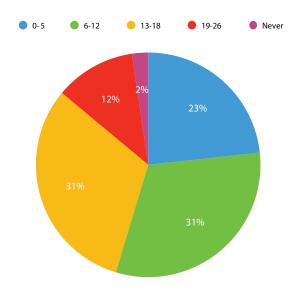
- Provide more comfort such as connecting with other youth. Not having foster parents just doing it for a check.
- ▶ The juvenile justice system should be closed because I feel like it leaves a young person in a state of trauma and allows them to stay in the incarceration cycle. Trauma leaves wounds and the problem is those wounds.
- Better advocacy for foster youth.
- Create open dorms and put everyone to work with each other. Teach youth hands-on trades and provide them with jobs upon release.
- By assisting youth and listening to their needs and situations.
- Teaching the youth how to respect one another to reduce the need for direct supervision.
- Less hands-on discipline and more communicative support to help youth do more positive mind building to help themselves, their families, and their communities.
- Be more open. Stop doing bad stuff without getting caught.
- Have mental health professionals assist. Also focus on rehabilitation. Hire people with patience, not just those wanting a job.
- The system could make a big difference if all youth had a better support system, then they wouldn't run or turn to negative things to relieve stress. Also, listen to what youth have to say and not the workers because sometimes social workers lie about what the youth did, or they don't give the complete story.
- People in power need to have more knowledge on trauma and anxiety, and they need to be more mindful of how they approach youth.
- Be more trauma-informed.
- Foster care can be improved by knowing what kind of people are becoming foster parents through better screening. Youth in the juvenile justice system should be more protected, respected, and heard.





Youth Questionnaire Physical, Emotional and/or Mental Abuse in the System(s).

Have you experienced a traumatic event? If so, at what age?



Please describe the traumatic event you experienced.

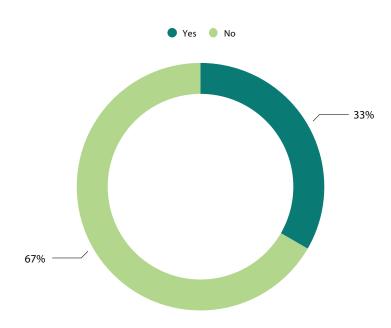
- Physical abuse.
- Too many to explain.
- Series of traumatic events across my lifetime resulting in complex PTSD.
- Parents on drugs, mother prostituting in front of me, kidnapped by my father, sodomized and raped, human trafficked.
- Too many to describe on paper.
- Sexual abuse, molestation, neglect, physical abuse, emotional abuse. I was removed from a sexually and physically abusive household and placed into a drug manufacturing house where I had no food, clean clothes, or other basic hygiene products. When removed from this place I sat next to them for 8 hours without pants. Police did nothing.
- I was abused by a stepparent who was an alcoholic. I was in an abusive

- relationship. I watched my mother abuse drugs and alcohol.
- Being bullied, humiliated, family issues, losing my cousins.
- I saw a man with bullet wounds and blood everywhere in a car one night when I was only five.
- Kidnapped, witnessing domestic violence, homelessness.
- Gun violence, poverty, stress, drugs, loss of family to violence, all resulting in PTSD.
- Deaths of family and friends; homelessness.
- Domestic violence.
- Being left alone by my parent without food, water, or electricity, and having to run from Child Protective Services.
- I have seen murder and robberies first-hand.
- Threat of death by my mother.
- Friend died; I went to jail on gun charges.
- Sexual assault, physical/mental assault in the household.

Have you experienced physical, emotional, and/or mental abuse in a system?

- ▶ 14% Yes, I experienced physical abuse in the foster care system
- 7% Yes, I experienced physical abuse in the juvenile justice system
- ▶ 19% Yes, I experienced emotional abuse in the foster care system
- ▶ 12% Yes, I experienced emotional abuse in the juvenile justice system
- ▶ 15% Yes, I experienced mental abuse in the foster care system
- 8% Yes, I experienced mental abuse in the juvenile justice system
- 25% No, I have never experienced physical, emotional, and/or mental abuse in a system

Have you ever reported abuse in a system(s)?



To whom did you report the abuse? Who did you tell?

- Child Protective Services.
- Social worker.
- Judge; juvenile justice staff.
- Guards.
- Therapist.
- The group home owner and manager.
- Ombudsman's office.

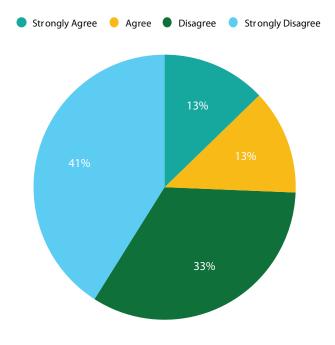
What was the outcome? What happened as a result of the reported abuse?

- They wanted more proof the emotional abuse was hurtful.
- Incidents were brushed under the rug like it was nothing.
- Nothing.
- Got put up for adoption.
- The foster mom left me at Starbuck's for hours with no food. She called me out of my name. I left her home.
- I got a new placement.
- They fired the staff person.
- Nothing, just more trouble.

If you were abused and did not tell anyone, why not?

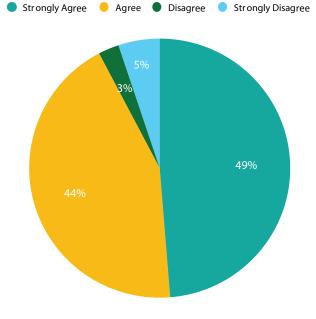
- It wasn't going to make a difference.
- I was scared of being separated from my siblings.
- I didn't know how to report it.
- I did not realize it was abuse until much later.

- I told no one because I was threatened by the foster parents not to snitch, so I moved.
- Built up too much hate.
- No one listens.
- Being isolated, I didn't think anyone would care or believe me.
- I was scared.



I would feel uneasy going to a therapist, counselor, or psychologist because of what some people would think.

If you need help for a traumatic experience or mental health issue, would you know how to get help for yourself?



Please explain how you would get mental health support for yourself.

- Call helplines.
- Go to the doctor.
- Call the therapist.
- Talk with people I trust the most.
- Through my youth-supportive workplace.
- Look to my peers for support.
- Reach out to my former therapist.
- Go to my resources.
- I turn to God. Adults suck in all honesty.
- Counseling.
- Call the county Access line, or seek services from local agencies.
- I'm shy. I don't know how to find resources.
- Through coping skills.
- Call social worker, family, or ILSP.
- Seeking help through a friend, teacher, or mentor.
- Ask a social worker or therapist.
- Talk to family or a therapist.
- Through my support system.
- Through my agency's program.
- Talk with friends, family, or a counselor or psychiatrist.
- Go to my CYC supporters.
- I know of resources in the community.
- Talk to a therapist.
- I would reach out to someone.



Common mental health problems that youth indicated were also being experienced by their peers.

- Stress
- Anxiety
- Depression/ low mood
- Trauma
- Substance abuse (drugs and alcohol)
- Suicide/ suicidal thoughts
- Self-harm
- Bipolar Disorder
- Psychosis
- Other: Borderline Personality
 Disorder, Obesssive Compulsive
 Disorder, intrusive thoughts, Post
 Traumatic Stress Disorder (PTSD),
 Reactive Attachment Disorder



Pdeation













Ideation Exercise

Ideas for Systems Change

Participating youth were provided opportunities to lend their voices to the ideation activities at each session. Ten topics were presented. Youth and adults contributed their ideas to systems change and improvements in a lively environment, filled with discussion on how to make the foster care and juvenile justice systems better and safer for youth.

Ways to improve recruitment of trusting adults.

- Make relationships a priority in building rapport with youth.
- Tell stories about the work. Youth stories. Then people may want to do work to actually help the youth.
- Don't just recruit, but screen when hiring. Focus on WHY they want to do the work.
- Possibly increase age requirements.
 Use a better screening process.
 Use a child advocate for additional support.
- Use positive stories and an abundance of information.
- Talking about your stories and improving youth through them.
- Hire people with a passion for the work. Youth notice it.
- Public forums with storytellers talking about the need for trusting adults.
- Through clergy and schools.
- Recruit only those who care and want to make a difference in our community.
- Hire individuals with lived experience, and more caring caregivers.
- There should be a more detailed process to becoming a foster parent, with more extensive background checks, and a longer evaluation process.

Storytelling and speaking up about abuse—better ways to report abuse.

- CCL should do check-ins with youth post interrogations to ensure youth of no further backlash from staff.
- Add social media chats as a way to report abuse, not just using forms.
- We need safe spaces to report abuse.
- Provide parent education on talking to kids about predators.



Better training and education for families and providers.

- Provide trauma-informed training and care in foster homes.
- Building case plans for youth and their families.
- Parents should receive training on how to communicate with their youth after trauma.
- Welcome packets, resources, referrals.
- Expand existing family services that prepare families for their youth's reentry.
- Cultural sensitivity training.
- Provide self-care resources.
- Group home staff need thorough trauma-informed training to work with youth.
- Add weekend trainings and an abundance of opportunities to participate.
- Hold ILPs accountable and request for trainings that are reflective of our lived experience.
- Provide training for foster parents and caregivers on how to support youth with a drug or alcohol problem.
- More quality training scenarios to help support foster families on "what if" situations.
- Provide proper training for providers, for example, empathy training.
- Weekly support groups for different traumas or addictions.
- Provide diversity, equity, and inclusion training for providers.
- Provide mental health services for providers and staff.

- Proper training on cultural awareness and sensitivity with a focus on rehabilitation.
- Mitigate youth risk. Provide equal trauma-informed training and services regardless of geography.
- Train providers in sex education and harm reduction so they can provide support to the youth.
- Provide training in how to establish a home-like setting for the youth.
- Provide higher education awareness and resources for foster youth, and give positive reinforcement to the youth.
- Provide training in how to have a secure home. Facilities need more security.
- Better education for families with disabled foster youth.
- Implement role playing in home scenarios for those applying to become foster parents. Caregivers need a better understanding of the competencies of working with families facing challenges.

How can the system improve family interactions in juvenile settings?

- Providing transportation to families that can't get to the JJC.
- Allowing incarcerated youth more visiting time with their family and more family members.
- Incorporate family sessions for youth and their families.
- Establish an in-house juvenile advisory committee to provide input and ideas.



Suggested policy improvements for juvenile facilities.

- There's never enough investment in TIC. I think probation should take a lead in training STRTPs in youth with dangerous behaviors.
- Appoint youth mental health ambassadors who would also attend board meetings.
- Allow youth to ask questions, if not audit the juvenile hall, to make sure policies are being consistently followed.
- Create a peer support department with Youth Advocates with lived experience.
- Finding opportunities for group therapy to help youth relate and create long-lasting connections.
- Hire fewer unqualified, bad staff, and less strict environments in group homes.
- More training on dealing with traumatized youth.
- They should make it feel like a home and like a bedroom and not run it like a jail because we are not animals.
- Increase accountability at all levels of juvenile facilities.
- Give youth a voice in court.
- Provide advocates for the youth. Every youth needs an advocate.
- Become more understanding of why youth do what they do instead of assuming.
- More chances before punishment.
 Education over punishment.
 Trauma-informed care.
- Use a mental health focus in facilities.
- Give youth a chance to speak and not assume their situation.

- Probation and courts (DA and defense) working closer with youth mentors.
- Eliminate stigmatizing labels and stereotyping of youth.
- Understand the majority of youth involved in the system have trauma. Provide more trauma-informed training for all staff and providers.
- When youth are sent to level A or B group homes, communicate with CBOs and mentors.
- Provide instruction and training to the youth on how to make better choices.
- Provide youth advocates in facilities to help and assist youth with developing plans and goals.
- Involve families with goals and planning.
- Give incarcerated youth speedy trials and rehabilitation instead of endless delays.
- Better collaboration with grassroots organizations to help bridge the transition back into the community.
- Place more people of color in positions of power.
- Less criminalization of mental illness.
- Improve communication between all staff.
- Institute consequences for poor treatment of youth in group homes.

Improved policies for court and community schools.

- Train employees upon hire. Give them more education about child welfare.
- More peer to peer support.
- K-12 teachers need to understand trauma to help families.

Better pathways to connections with peers for older youth.

- More mentorship programs.
- More youth after-school programs and places with peer mentors.
- Add more trusted and trained mentors who have gone through the system.
- Have current and former foster youth connect to share experiences and give advice.
- Think tanks for older youth to implement on a micro level change and modes of connection and community.
- Provide safe, trusting places where people can go to connect with peers and receive services.

Innovative ways to help Transition Aged Youth become independent.

- More community engagement and positive support for youth.
- Personal life coach to develop goals before aging out of foster care.
- Assurance that the system is working at the youth's pace and not pressuring them to move forward before they are ready.
- Try multi-generational programs to pair older youth with older adults.
- Help TAY through classes and connect them to the community.
- Job fairs for youth and more programs to help them with transition.
- Hands-on training, classes, and interaction.

- Provide surveys to identified youth to see if they're ready to become independent. Maybe use a skills assessment test?
- Provide youth with jobs for which they have experience, such as paid peers, to help other youth.
- Engage community-based organizations to connect youth with older peers.
- Independence is taught at an early age. Start pairing 12 to 13 year olds with role models.
- Use incentives for older youth to become peers.
- Youth need places to live, so there should be an evaluation on income limits on Section 8 and low income housing.
- Provide monetary assistance to youth ages 18+ for housing.
- More programs to teach basic writing skills, and cooking, cleaning, finances, etc.
- Teach youth to set goals for short and long-term planning.
- Provide job networks, career help, and career introduction workshops.
- Develop an out-of-state exchange program for transitioning youth.
- Provide long-term opportunities, such as pipeline programs.
- Provide mental health peer groups in schools, and include independence skill building.
- More classes in school to discuss adult realities.
- Workshops with former system youth to share experiences and realities. Include connections to community resources.
- Organize youth and teach them to advocate.



Ways to use technology and innovation to improve the system(s).

- Create apps to provide support.
- Single integration EHR/system to do care coordination across sectors but with limits for CT protections.
- Launch pages for people who have been through the system to connect and share stories.
- Crisis support via text.
- Make mental health information readily available.





Using social media as an advocacy tool for systems change.

- Use social media to post resources in the community.
- Use social media for community outreach and networking.
- Using Facebook polls to get community input.
- Use social media to gather the community for focus groups to improve systems.
- Post daily informative tools to bring awareness to mental health.
- Support groups on social media for youth to share with peers anonymously their challenges with mental health.



The number of youth across America who struggle with mental health continues to increase. Connecting with youth early on with tools, resources, and support can dramatically improve that young person's future. That is why Kaiser Permanente is committed to working with our mental health community partners to promote self-advocacy in youth experiencing mental and emotional health needs.

Janet Liang, President Kaiser Permanente Northern California







About Mental Health California

Founded by author K.N. Smith, a family member with lived experience, Mental Health California™ is a 501(c)3 nonprofit charitable mental organization delivering health awareness through publishing, community engagement, innovation, new media, and special programs. We produce an innovative digital magazine featuring mental health topics important to Californians across the lifespan. We also provide education and awareness campaigns, and present community forums and special events. Our experience in multicultural outreach and communications allows us to offer multi-layered awareness programs tied to specific communities or cultural groups. Our campaigns offer education, awareness, traditional and digital communications, publishing, innovation, creative arts, clinical supports through partnerships, connections to mental health resources, and more. For information, visit www.mentalhealthca.org.





About Kaiser Permanente

Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America's leading health care providers and not-for-profit health plans. Founded in 1945, Kaiser Permanente has a mission to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. We currently serve 12.3 million members in 8 states and the District of Columbia. Care for members and patients is focused on their total health and guided by their personal Permanente Medical Group physicians, specialists, and team of caregivers. Our expert and caring medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the-art care delivery, and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education, and the support of community health. For more information go to https:// about.kaiserpermanente.org/.

Center for Youth Wellness

https://centerforyouthwellness.org/

Chronicle of Social Change https://chronicleofsocialchange.org/childwelfare-2/california-group-home-reformfalters-without-key-supports-for-youth/33822

County of Orange California Social Services Agency http://ssa.ocgov.com/adopt/ccr/strtp

Kids Data kidsdata.org

Look insideKP Northern California https://lookinside.kaiserpermanente.org/ listening-to-youth-in-foster-care/

https://lookinside.kaiserpermanente.org/ youth-listening-sessions-happening-acrossnorthern-california/

State of California
Department of Justice
Office of the Attorney General
https://oag.ca.gov/news/press-releases/
attorney-general-kamala-d-harris-releases2015-california-crime-reports



Click the image to view the Youth Listening Sessions video.

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