

Aftercare for Youth Across Systems

What is aftercare?

Aftercare refers to services and programming that are put in place for a youth during a transition period, which can include transitioning from a congregate facility to the community, completing probation, moving from one placement to another, or several other transition types. Aftercare might mean something a little different for each transition type but is extremely important across all youth serving systems.

The current problem

As will be discussed below, each system views and enacts aftercare differently, and unfortunately, aftercare is often narrow in scope and inaccessible. Despite recent strides in Philadelphia and many other localities across the country to improve access, there continues to be a lack of a comprehensive and coordinated approach to aftercare, which aims to improve outcomes for youth in each system, as well as cross-system youth.

Scope of the problem

Aftercare should be provided to all youth transitioning within or out of the child welfare, legal, and behavioral health systems in Philadelphia. The scope of these systems is broad, as they serve many youths and families each year. Of those, the youth and families who encounter these systems are disproportionately Black and Brown, as indicated in the figures below.

Child welfare system: The Office of Children and Families (OCF) [reported](#) that on June 30th, 2023, there were 5,292 dependent youth.¹ In total, this figure represented 1,959 youth receiving in-home services and 3,333 youth receiving placement services (238 in congregate care) on that day.² Of all dependent youth in Philadelphia on that date, 65% were Black and 18% were Latino.³

Legal system: Identifying the number of youths involved in the legal system is complicated due to a lack of a uniform data system for tracking youth in adult facilities, diversion programming, probation, and placement. However, a [2023 report from the District Attorney's Office and Econsult Solutions Inc.](#) reported that in fiscal year 2021, 1,968 Philadelphia youth were served by the Juvenile Probation Office (JPO).⁴ This suggests that an estimated 2,000 Philadelphia

youth are involved in the legal system each year. More recently, [OCF's quarterly indicators report](#) stated that in FY23, 275 youth attended an Evening Reporting Center, and on June 30th, 2023, there were 393 juvenile justice system involved youth placed outside of the home, including 237 youth detained at the Philadelphia Juvenile Justice Services Center (PJJSC).⁵ Of all youth arrests in Philadelphia in calendar year 2019, 81% of arrests were of Black youth and 14% were of Hispanic/Latino youth.⁶ Of all youth held in delinquent congregate care settings on June 30th, 2023, 83% were Black and 14% were Hispanic/Latino.⁷

Behavioral health system: The [Youth Residential Placement 2022 Annual Report](#) states that in fiscal year 2022, 48 youth entered a Psychiatric Residential Treatment Facility.⁸ Of those, 73% were Black and an unknown number were Hispanic/Latino. However, this number does not capture other behavioral health settings, such as substance use treatment facilities, and/or cross-system youth.⁹

Youth often touch these systems due to poverty and a lack of preventative services in their communities, especially Black and Brown communities that have been systemically disenfranchised. Therefore, many of the youth who touch these systems in Philadelphia interact with programming and services for the first time through system involvement. Further, youth who encounter these systems have often experienced various forms of trauma, violence, and loss, which calls for a healing centered approach that highlights their strengths and addresses their needs and goals. As such, aftercare is not only important in preventing youth from entering and reentering these systems on a cyclical basis but should also be pursued as an intentional racial and ethnic equity initiative, which addresses the many experiences of harm in disenfranchised communities.

Aftercare across systems

The Child Welfare System

In the child welfare system, the term aftercare often refers to the [transition to adulthood services](#). This service planning and programming is supposed to happen for all youth who are ages 14 and older and currently being served by the child welfare system. Aftercare may also refer to some limited services that are provided upon permanency. However, all youth in the child welfare system can benefit from aftercare services as they transition to a new setting, whether that be to

the care of their biological parent(s), a kinship care setting, a new foster care home or group home, or a permanency setting.

Under [federal law](#), children ages 14 and older with child welfare involvement should have “a written description of the programs and services which will help such child prepare for the transition from foster care to a successful adulthood.”¹⁰ Additionally, all youth ages 14 and over have the right to be included in their discharge and transition to adulthood planning.¹¹ Federally, this law applies for youth up to age 21. However, in 2020, Pennsylvania was one of a number of states to elect to [extend eligibility](#) for transition services for youth up to age 23.¹² Youth ages 14 and older must have a written plan in place for their transition to adulthood. Of note, these services do not kick in until a youth is (1) age 16 to 23 and has left the child welfare system through permanency, or (2) age 18 to 23 and has aged out of the child welfare system. Transition to adulthood services may include things such as educational services (getting a GED, applying to college), career services (training, assistance finding a job), living accommodations (help finding and paying for a place to live), financial skills building, connecting with community-based services, mentorship, and more.

Philadelphia has taken strides to address aftercare for those with child welfare involvement. For example, [the Achieving Independence Center](#) (AIC) is a hub for current or former foster care youth to go for transition to adulthood services. Services include career planning, housing referrals, and educational services. While this center is a great start, its hours are limited to 12pm-7pm, Monday through Friday, and it only serves youth ages 18 to 23. These services should begin earlier for youth and be more accessible. This need to expand accessible services is exemplified in a [2021 Generocity article](#) which describes the foster care-to-homelessness pipeline in Philadelphia.¹³ The article notes that about 40% of Philadelphia’s unhoused youth population has spent time in foster care.¹⁴ In the article, 19-year-old Miracle explains that she got in contact with the AIC because she heard about it from other youth.¹⁵ The AIC was able to set her up with Valley Youth House (VYH), but she never picked up their phone calls out of fear and a lack of trust in the system.¹⁶ While Miracle did eventually get connected to VYH, her case manager said that it is a common issue for youth to resist services because they may not trust anyone.¹⁷ Miracle’s story demonstrates that while the city has taken steps to put services in place, there needs to be a greater whole system response to ensuring that these services are accessible.

Not only do young people like Miracle often not receive the comprehensive aftercare services that they are entitled to, but also, the onus to succeed is placed on the youth, rather than on the adults tasked with ensuring their success.

All youth, regardless of age or permanency status, should receive aftercare planning prior to their transition. For example, a youth who is in a congregate care setting and is being reunified with their biological parent may benefit from whole family aftercare planning. In practice, this may look like a case worker meeting with the youth and family to build a strengths-based and needs-responsive plan and resource guide to ensure that the youth and family are able to access resources that they may need or want. In this hypothetical, the parent may indicate that they struggle to access affordable and healthy food options in their neighborhood. In response, the aftercare plan can identify and list neighborhood food banks. Additionally, the aftercare plan can help connect the family with a neighborhood basketball league if the youth identifies that they will miss having access to the basketball court they play at in their group home.

The Legal System

In the juvenile justice system, aftercare typically refers to the period of reentry into the community. However, youth who remain in their community on probation or diversion can also benefit from aftercare services to set them up for continued success. Aftercare planning for youth in the juvenile and/or adult legal systems should include programming resources that they can turn to once they have returned home or completed their diversion/probation-based programming.

In her book, *Falling Back*, Dr. Jamie Fader describes her three-year long ethnographic study with adolescent boys and young men returning from juvenile placement facilities to their home communities in Philadelphia.¹⁸ The book details their struggles with the reentry process while also navigating their transitions to adulthood, which ultimately shows a significant absence of aftercare support.¹⁹ While the young men interviewed for the book had reentry plans in place, Fader found that they “were never connected to long-term, stable supports in the community or within their educational institutions that would make success more likely.”²⁰

Regarding the reentry process and aftercare, youth who are sent to placement are expected to go away to a secure, and generally rural, environment to be rehabilitated, but typically return to the

same communities where they engaged in the survival behaviors that led to their system involvement. Ultimately, the system expects youth to return to the exact same environments as before, with little to no support, and then places the burden on the youth to make a change, rather than on the system to support that change.

In addition to the lack of successful reentry and aftercare planning for youth returning from placement, there is often no aftercare planning for youth completing diversion or probation. This means that youth who have been connected to programs and services for months to years while finishing their diversion and/or probation requirements often complete the required programming with nowhere to go or no supports to turn to once they have completed them.

In Philadelphia, [Evening Reporting Centers \(ERCs\)](#) act as alternatives to detention for youth in multiple stages of the system. The Pre-ERC is for youth in the pre-adjudicatory process; the Community Intervention Center (CIC) is for youth during their ongoing court case; the Post-ERC is for youth after adjudication while on probation; and the Aftercare ERC (AERC) is for youth returning to the community from congregate care.²¹ While this is a good start for aftercare, there are limitations. For example, the two ERCs designed for youth after their adjudication, the post-ERC and AERC, only serve boys, which means that girls cannot access these resources.²² Additionally, all the ERCs combined only served 275 youth (63 in the Post-ERC and 64 in the AERC) in fiscal year 2023, despite the fact that on June 30th, 2023, there were 393 juvenile justice-involved youth placed outside the home.²³ This means that the ERCs are failing to accommodate all juvenile justice-involved youth exiting congregate care. Additionally, the ERCs are linked to youths' probation and/or court requirements, so they are typically wearing a GPS ankle bracelet,²⁴ making this a compliance-oriented form of aftercare. Further, the Post-ERC is specifically designed for boys who are struggling to comply with probation requirements, while the AERC is designed for boys returning home from placement. This means that many youths on probation or in diversion services do not have access to these resources.

Therefore, robust and holistic aftercare planning should be standard practice for all youth and their chosen adult support systems as they transition, regardless of their level of supervision while they were system involved. In practice, this may look like a counselor, diversion service provider, or probation officer meeting with the youth and family prior to discharge from the program setting to identify goals. For example, a parent might note that they work late hours and

are worried about their child's behavior after school. In this case, the provider working with the family might engage the young person to understand what their goals are and how they can work towards those goals during the after-school hours. The provider may learn that the youth wants to be able to spend time with peers, without feeling pressure to engage in the behaviors which led to system contact. The provider might then identify an after-school mentoring program in which youth meet other young people who were system involved and have been successful since discharge. Or the youth may express a desire to earn money, and the provider can suggest work programs that may keep the youth occupied after school and meet their financial goals.

The Behavioral Health System

In the behavioral health system, aftercare is often referred to as transition planning, and typically begins prior to a youth leaving their residential treatment facility (RTF). It is supposed to ensure that youth have supports in place, such as outpatient services, to continue their success in the community. Youth returning to their community from behavioral health placements can benefit from discharge and transition plans that ensure they have access to services and programming to support all their needs and strengths, not just their behavioral and mental health service needs.

In Philadelphia, the Department of Behavioral Health and Intellectual disAbility Services (DBHIDS), and the City's contracted service provider, Community Behavioral Health (CBH), encourage providers to begin "return home" planning upon admission.²⁵ Further, CBH requires psychiatric residential treatment facilities (PRTFs) to have an aftercare planning meeting within 30 days of each youth's projected discharge date.²⁶ This mandated aftercare plan must include confirmed living arrangements, a strategy for the family and youth to monitor and cope with triggers/stressors, medication management, pre-scheduled follow-up appointments, and a warm handoff to the youth's community-based care provider. It also includes a mandate that transition-age youth receive special coordination for housing options and case managers, if they do not have family placement options upon discharge.²⁷ CBH and DBHIDS state that discharge plans should be given to youth, families, or other relevant parties such as DHS, as well as their next treatment provider.²⁸ Additionally, CBH requires that follow-up occur at 30 days, 90 days, and 180 days post-discharge.²⁹

It is an excellent start that DBHIDS and CBH are considering the importance of aftercare, including specifically ensuring that aftercare is strengths based and evidence based. However,

aftercare planning should be expanded to include plans for success outside of treatment and housing concerns. While safety planning and continuity of care should be prioritized, aftercare planning must also ensure that youth are connected to resources, services, and programming that address their needs and strengths outside of their behavioral and mental health needs. DBHIDS and CBH recommend that providers familiarize themselves with the [Building Bridges Initiative](#), which is a national initiative to ensure youth success and stability following residential treatment.³⁰ However, it is not mandated that discharge planning include components that focus on whole youth and family success.

In practice, more comprehensive aftercare planning can be done during a youth's "return home" planning. At the planning meeting, the youth and their guardian should sit down with the care team to ensure that they have a standing appointment for outpatient treatment, a pharmacy close to home, and continuity of insurance. During this meeting, the youth may identify that they enjoyed a certain program that they attended at their RTF and would like to find something similar at home. For example, a youth may have been involved in a girl's group while at their RTF and express interest during their planning meeting in continuing their involvement once at home. The care team can identify programs for girls that are close to home or based at the girl's school. At this time, her guardian might point out that the outpatient clinic is two miles from their home, and they don't have a reliable car. The care team can help the family explore SEPTA routes and free passes that they can use or the team can identify a clinic within walking distance of the family's home.

OYO Recommendations for Aftercare

As indicated, despite the demonstrated importance of aftercare in ensuring that a youth and family receives continued supports and services that can maintain success and stability, youth serving systems often fail to provide holistic and robust aftercare planning. When aftercare does exist, it may be limited in scope or rooted in compliance rather than support. Compliance-based aftercare may look like requiring a family to attend a specific program that may or may not align with their definition of success, or ongoing supervision monitoring for kids returning home from juvenile justice placements.

To avoid the pitfall of implementing aftercare that is too narrow in scope or is rooted in compliance, agencies should require that all providers have an aftercare meeting with a youth

and their support person(s), such as a family member and/or mentor, to develop an aftercare support plan that is based on the youth's own identified strengths, needs, and goals.

To help guide this, the OYO has developed an aftercare planning form which providers can refer to during these aftercare meetings. The form, which is available below, was modeled after a form created in 2011 by Juvenile Law Center's youth advocates group.³¹ The original document was designed by youth to be used by a young person and their caseworker during the transition to adulthood planning.³²

The OYO's version of the form was updated to be used by all three youth serving systems that the OYO works with. Recognizing that many young people have concerns across multiple systems, the form is designed to be intersectional and multifaceted. For example, a youth exiting a PRTF may have open juvenile court matters. So, while they may benefit from traditional aftercare planning that assists youth with ensuring they have community-based care, they may also need support complying with probation requirements or paying their fines. Any sections on the form that do not apply to a youth can simply be skipped over. Importantly, the form starts by asking the young person what their goals are before jumping into needs-based sections. This allows the care team to keep a youth's goals at the forefront during aftercare planning, so that any needs-based referrals in the following sections are centered around their goals. At the bottom of the form, there is an additional area for the youth to identify what services and programs they would like referrals to, followed by a section to put those referrals in.

Overall, this tool can allow a youth, their chosen support person(s), and their case worker or service provider to work collaboratively on an aftercare plan that addresses the youth's needs, while remaining focused on their goals and strengths. While this is a helpful resource, the City of Philadelphia should commit to designing, funding, and creating comprehensive aftercare planning and programming to support youth leaving residential care settings.

¹ *Annual Indicators Report: Fiscal Year 2023*. (2023). Philadelphia Office of Children and Families. https://www.phila.gov/media/20231106092952/Quarterly-Indicators-Report-FY23_Q4_11.6.23-FULL.pdf

² *Id.*

³ *Id.*

⁴ *Philadelphia's Shifting Juvenile Justice Paradigm: An Economic Analysis*. (2023). Econsult Solutions Inc. https://phillyda.org/wp-content/uploads/2023/05/Philadelphias-Shifting-Juvenile-Justice-Paradigm_Technical-Report.pdf?utm_source=Main+Media+List&utm_campaign=5a3071b41a-

EMAIL_CAMPAIGN_2020_07_22_01_40_COPY_01&utm_medium=email&utm_term=0_3be4269e47-5a3071b41a-19100917

⁵ *Annual Indicators Report: Fiscal Year 2023*. (2023). Philadelphia Office of Children and Families. https://www.phila.gov/media/20231106092952/Quarterly-Indicators-Report-FY23_Q4_11.6.23-FULL.pdf

⁶ *Id.*

⁷ *Id.*

⁸ *Youth Residential Placement 2022 Annual Report*. (2023). City of Philadelphia. <https://www.phila.gov/media/20230907163106/YRPTF-annual-report-2022.pdf>

⁹ *Id.*

¹⁰ 42 U.S.C.A. § 675

¹¹ *Id.*

¹² DHS Extends Eligibility for Aftercare Services for Former Foster Youth to Age 23. (2020, July 7). *Children's Services*. <https://www.paproviders.org/dhs-extends-eligibility-for-aftercare-services-for-former-foster-youth-to-age-23/>

¹³ Volk, S. (2021, July 28). Youth aging out of foster care are at risk of homelessness. Is Philadelphia doing all it can? *Generocity*. <https://generocity.org/philly/2021/07/28/youth-aging-out-of-foster-care-are-at-risk-of-homelessness-is-philadelphia-doing-all-it-can/>

¹⁴ *Id.*

¹⁵ *Id.*

¹⁶ *Id.*

¹⁷ *Id.*

¹⁸ Fader, J. J. (2013). *Falling back: Incarceration and transitions to adulthood among urban youth*.

¹⁹ *Id.*

²⁰ *Id.*

²¹ *Fiscal Year 2022-23 Needs-Based Plan & Budget*. (2021). Pennsylvania Department of Human Services. https://www.phila.gov/media/20210722074014/NBB51_-22-23_NT-07-21-2021-Public-Draft.pdf

²² *Id.*

²³ *Annual Indicators Report: Fiscal Year 2023*. (2023). Philadelphia Office of Children and Families. https://www.phila.gov/media/20231106092952/Quarterly-Indicators-Report-FY23_Q4_11.6.23-FULL.pdf

²⁴ *Court programs for youth*. (n.d.). City of Philadelphia. Retrieved November 29, 2023, from <https://www.phila.gov/programs/court-programs-for-youth/>

²⁵ *Child and Adolescent Inpatient Performance Standards*. (2017). Community Behavioral Health. <https://dbhids.org/wp-content/uploads/1970/01/CAIP-PS.pdf>

²⁶ *Clinical Performance Standards: Psychiatric Residential Treatment Facility (PRTF)*. (2023). Community Behavioral Health. https://cbhphilly.org/wp-content/uploads/2023/06/CBH_CPS_PRTF_2023-05-02.pdf

²⁷ *Id.*

²⁸ *Child and Adolescent Inpatient Performance Standards*. (2017). Community Behavioral Health. <https://dbhids.org/wp-content/uploads/1970/01/CAIP-PS.pdf>

²⁹ *Clinical Performance Standards: Psychiatric Residential Treatment Facility (PRTF)*. (2023). Community Behavioral Health. https://cbhphilly.org/wp-content/uploads/2023/06/CBH_CPS_PRTF_2023-05-02.pdf

³⁰ *About*. (n.d.). Building Bridges Initiative. Retrieved November 17, 2023, from <https://buildingbridges4youth.org/about/>

³¹ *Youth-Developed Discharge Hearing Form*. (2011). Youth Fostering Change - Juvenile Law Center. https://jlc.org/sites/default/files/attachments/2018-02/Youth-Developed%20Discharge%20Hearing%20Form_0.pdf

³² *Id.*