Welcome to the Opportunity Passport™ Participant Survey. The answers you provide will help us learn more about the experiences of young people in foster care across America.

Every effort will be made to protect the privacy of your answers. If you would like more info or want to find out about the results of the survey, please contact: jimcaseysitesupport@childtrends.org.

Personal Information

1. What is your date of birth?

____ / _____ / ____ Month / Day / Year

Note: This survey is private; your name and answers will be separate. What you tell us will help us learn about gender identity.
Note: We ask about gender assigned at birth and gender identity because gender identity can change.

2. What gender were you assigned at birth? Mark one response.

☐ Male    ☐ Female

2a. What is your current gender identity? Mark one response.

☐ Male
☐ Female
☐ I am not sure yet
☐ I feel male sometimes and female at other times
☐ I feel neither male nor female (for example, agender)
☐ I would prefer not to answer this question

Here racial group means the group you share genetic and physical features with. Your ethnic group refers to the group you share language, beliefs, and values with. We ask you to say if you are Hispanic or Latino because it is often considered an ethnic group of any race.

3. Do you identify as Hispanic or Latino?

☐ Yes, Hispanic or Latino    ☐ No, not Hispanic or Latino

1 Modified March 2017
3a. What is your racial background? (Please check all that apply.)

- White
- Black/African American
- Asian
- Native Hawaiian/Part Native Hawaiian
- Other Pacific Islander
- Native American/Alaskan Native
- Other; Please Specify:

3ab. If you would like to add more details regarding your racial background and/or if you identify primarily with a particular country of origin, ancestry, or tribe (e.g., East Asian, Lakota, Navajo, Arab American, Indonesian, South Asian American, Filipino, Portuguese, Cuban, North African, Puerto Rican, Mexican, Russian, etc.), please write it in below. (NOTE: This question is optional.)

3b. Were you born in the United States?

- Yes
- No
- Not sure

4. Are you currently in foster care (under the legal responsibility of the child welfare agency)?

- Yes
- No
- Don’t Know

5. Altogether, how many foster homes or other placements have you ever had?

- 1-3
- 4-10
- 11-20
- More than 20

6. Of these, how many have been in foster homes (not group homes, shelters or residential treatment centers)?

- 0
- 1-3
- 4-10
- 11-20
- More than 20

7. Of these placements, how many have been in group care (for example, group homes, shelters or residential treatment centers)?

- 0
- 1-3
- 4-10
- 11-20
- More than 20

Note: This survey is private; your name and answers will be separate. What you tell us will help us learn about sexual identity and attraction.

Note: This survey asks about sexual orientation and attraction because these can be different.
8. Which of the following best describes your sexual orientation? Mark one response.

- Straight
- Gay or lesbian
- Bisexual
- I am not sure yet
- Not listed above. Please specify: _
- I would prefer not to answer this question

8a. Who are you sexually attracted to? Mark one response.

- Males
- Females
- Both
- I am not sure yet
- Neither
- I would prefer not to answer this question

8b. What is your marital status?

- Single
- Separated
- Living with a partner
- Divorced
- Married
- Widowed

9. How many children do you have?

- None (skip to #10)
- 1
- 2
- 3
- 4 or more

9a. If you have children, do any of these children currently live with you?

- Yes
- No

10. Who has helped you the most with continuing participation in your Opportunity Passport™?

(Please check one only)

- Foster parents
- Biological parents
- Adoptive parents
- Other family member (for example, aunt, grandmother, brother, sister, etc.)
- Another young person (for example, friend, roommate)
- Caseworker (includes case coordinator, case manager, social worker, Independent Living staff, Life Skills worker, Chafee worker, Transition Specialist)
- Teacher
- Someone at my job
- Someone on my Youth Board

Help in Opportunity Passport™ may include suggesting you save money and make deposits, advising you to buy assets, taking surveys, etc.
10a. How helpful has that assistance been to continuing your participation?

☐ Very helpful  ☐ Not very helpful
☐ Somewhat helpful  ☐ Not helpful at all

11. Are you a member of the local Youth Leadership Board?

☐ Yes  ☐ No

Education

12. Are you currently enrolled in school?

☐ Yes  ☐ No (skip to #13)

12a. What type of school are you currently enrolled in? (Please check all that apply)

☐ Junior high school  ☐ College
☐ or middle school  ☐ Graduate school
☐ High school  ☐ GED class
☐ Vocational school  ☐ Other (please specify) ________________________________
☐ Community college  ______________________________________________________

12b. Are you in school full time or part time?

☐ Full-time  ☐ Part-time

13. What is the highest grade you have completed at this time? (Do not include the year you are presently in)

☐ 6th grade or less  ☐ 7th grade
☐ 8th grade  ☐ 9th grade
☐ 10th grade  ☐ 11th grade
☐ 12th grade  ☐ Vocational Program (trade school, cosmetology, etc.)
☐ Certificate Program (postsecondary instruction that leads to certification, e.g. CNA/Certified Nursing Assistant)
☐ Some college  ☐ Associate or 2-year college degree
☐ Bachelor’s or 4-year college degree  ☐ Some Graduate School (school after receiving a bachelor’s degree)
☐ Graduate degree (master’s degree, Ph.D., etc.)

Opportunity Passport™ Participant Survey
14. Have you received a high school diploma, a general equivalency diploma (GED), or any other high school equivalent diploma (e.g., HiSET)? (Please check one only)

☐ High school diploma
☐ GED/HiSET or other high school equivalent diploma
☐ None of the above (skip to #15)

14a. Have you participated in or attended any of the following? (Please check all that apply)

☐ Military
☐ Americorps
☐ Job Corps
☐ Peace Corps
☐ Vocational School (includes trade or technical school)
☐ None of the above

---

Employment

15. Are you currently participating in any of the following: (Please check all that apply)

☐ Work experience activity (for example, “job shadowing” – spending time with an employee at a workplace to see what their job is like, interviewing an employer or employee for a project or report) (skip to #16)
☐ Internship (working on a short-term basis for a company or organization in order to gain practical work experience, could be paid or unpaid) (skip to #16)
☐ Apprenticeship (learning a trade or art through a combination of paid on-the-job training and classes, usually under agreement or contract) (skip to #16)
☐ Pre-employment training (for example, developing a resume, training on work ethics, appropriate dress, or time management) (skip to #16)
☐ On-the-job training (for example, learning how to operate a cash register or a phone system, etc.) (skip to #16)
☐ Independent living classes (either paid or unpaid) (skip to #16)
☐ I am not currently participating in any of these activities (go to 15a)

15a. If you are not currently participating in these activities, have you ever participated in any of the following: (Please check all that apply)

☐ Work experience activity (for example, “job shadowing” – spending time with an employee at a workplace to see what their job is like, interviewing an employer or employee for a project or report)
☐ Internship (working on a short-term basis for a company or organization in order to gain practical work experience, could be paid or unpaid)
☐ Apprenticeship (learning a trade or art through a combination of paid on-the-job training and classes, usually under agreement or contract)
☐ Pre-employment training (for example, developing a resume, training on work ethics, appropriate dress, or time management)
16. How many paying jobs do you currently have (including participation on your local Youth Leadership Board)?
   - None
   - 1 (skip to #16b)
   - 2 (skip to #16b)
   - 3 or more (skip to #16b)

16a. If none, have you ever had a paying job?
   - Yes (skip to #16c)
   - No (skip to #16c)

16b. Are you currently participating in the Youth Leadership Board as a paying job?
   - Yes
   - No

16c. Are you currently seeking employment (including looking for new or additional employment)?
   - Yes
   - No

16d. On average, how many hours do you work per week? (Please enter a number, for example 20 or 30.)

   ____________ Hours/Week

16e. Have you been working full-time (40 hours or more per week) without interruption (straight) for the past six months or longer?
   - Yes
   - No

16f. How many months or years have you been working without interruption (straight) at your current job?

   If less than 1 year, enter the number of months you have been working:
   ____________ Months
   (Enter a whole number, for example 3, 4, 5, etc.)

   If 1 year or more, enter the number of years you have been working:
   ____________ Years
   (Enter a whole number, for example 1, 2, 3, etc. Round your answer, for example less than 1 and a half years would become 1 year; and 1 and a half years would become 2 years)

16g. What is your hourly pay? (Please enter a number, for example, 7.50 or 8.00.)

   $__________
17. **Are you currently receiving Medicaid?** (You do not need to answer if you are currently in foster care. If you are in care, skip to #18)

- [ ] Yes  
- [ ] No  
- [ ] Don’t Know

Other names for Medicaid include HUSKY, Medi-Cal, TennCare, MaineCare, RItecare and Title 19.

17b. **Are you currently receiving any other form of public assistance (for example, Social Security, TANF, Disability, Unemployment, Food Stamps, WIC, EBT, or Section 8)?** Please do not include supports that you are receiving because you were in foster care, such as transitional housing or room and board payments. (You do not need to answer if you are currently in foster care.)

- [ ] Yes  
- [ ] No  
- [ ] Don’t Know

Permanence and Support

*Permanence means having adult(s) to rely on for a lifetime and supportive family networks.*

18. **When you need someone to give you good advice about a crisis, are there…**

- [ ] Enough people you can count on
- [ ] No one you can count on
- [ ] Too few people you can count on
- [ ] Don’t know

19. **When you need someone to give you advice about your job or school, are there…**

- [ ] Enough people you can count on
- [ ] No one you can count on
- [ ] Too few people you can count on
- [ ] Don’t know

20. **When you need someone to loan you money in an emergency, are there…**

- [ ] Enough people you can count on
- [ ] No one you can count on
- [ ] Too few people you can count on
- [ ] Don’t know

21. **Do you have an adult in your family that you will always be able to turn to for support (for example, birth or adoptive parent, spouse, adult sibling, extended family member, legal guardian)?**

- [ ] Yes  
- [ ] No (skip to #22)

21a. If yes, which one adult family member do you turn to most often? (Please check one only)

- [ ] Birth parent
- [ ] Adoptive parent
- [ ] Spouse
- [ ] Adult sibling
- [ ] Extended family member (for example, aunt, grandfather, cousin, etc.)
- [ ] Legal guardian
21b. If you need it, what can you count on this person to do? If needed, I can count on him or her to…
(Please check all that apply)
- Celebrate special events with me, such as my birthday, holidays, etc.
- Talk with me about my problems
- Help me feel good about myself
- Be trusted with my most private information
- Provide me with a place to live
- Help me find a job
- Help me if I am sick
- Celebrate my successes with me, such as school graduation, getting a new job, etc.
- Help me get into college, community college or vocational school
- Help me pay for some or all of my education
- Help me care for my children

Helping you get into school refers to free support like finding a college or school, help filling out forms, taking you to college visits, etc.

22. Do you have an adult other than a family member that you will always be able to turn to for support?
- Yes
- No (skip to #22P)

22a. If yes, which one adult would you turn to most often? (Please check one only)
- Foster parent
- Caseworker (includes case coordinator, case manager, social worker, Independent Living staff, Life Skills worker, Chafee worker, Transition Specialist)
- Teacher
- Someone from my church or faith-based community
- Other (please specify) ____________________________

22b. If you need it, what can you count on this person to do? If needed, I can count on him or her to… (Please check all that apply)
- Celebrate special events with me, such as my birthday, holidays, etc.
- Talk with me about my problems
- Help me feel good about myself
- Be trusted with my most private information
- Provide me with a place to live
- Help me find a job
- Help me if I am sick
- Celebrate my successes with me, such as school graduation, getting a new job, etc.
- Help me get into college, community college or vocational school
- Help me pay for some or all of my education
- Help me care for my children

Helping you get into school refers to free support like finding a college or school, help filling out forms, taking you to college visits, etc.

Opportunity Passport™ Participant Survey
22P. Please think about adults in your life who support you in some way. If you need it, what can you count on these people to do? (Please check all that apply) (You do not need to answer this question if you answered “yes” to #21 or #22. If you answered “yes” to one of these questions, skip to #23)

- Celebrate special events with me, such as my birthday, holidays, etc.
- Talk with me about my problems
- Help me feel good about myself
- Be trusted with my most private information
- Provide me with a place to live
- Help me find a job
- Help me if I am sick
- Celebrate my successes with me, such as school graduation, getting a new job, etc.
- Help me get into college, community college or vocational school
- Help me pay for some or all of my education
- Help me care for my children

Housing

23. Where are you currently living? (Please check one only)

- Living Independently (by myself, with a friend, roommate, boyfriend, girlfriend, fiancé, husband, wife, etc.)
- Living with Family (Birth parents, other relative such as aunt, brother or sister, Adoptive parents, legal guardian)
- Living in a Foster Home
- Living in a Group Setting (Group home, Residential Care or Residential Treatment Facility)
- Living in a School Dormitory (Indian Boarding School or college dormitory)
- Independent Living Program or Supervised Independent Living Program or Transitional Living Program
- Couch Surfing or Moving from House to House (because you don't have a place to stay)
- Homeless (includes living in a homeless shelter)
- Other (please specify) ________________________________

24. How many different places have you lived in the past twelve months?
(Please enter a number, for example 3.)

24a. If you have moved in the past 6 months, which of the following caused you to move? (Please check all that apply)

- I didn’t move.
Employment or Education
☐ New job
☐ To look for work or lost job
☐ To attend or leave college
☐ Easier commute

Family/Relationship or Placement
☐ Moved foster homes or other placement change
☐ Conflict with others in apartment/home
☐ Change in marital or relationship status
☐ Death or health issue of a parent or family member

Housing or Neighborhood
☐ Wanted a new or better home/apartment
☐ Cheaper housing
☐ Better neighborhood
☐ Foreclosure/eviction

Other
☐ Felt the urge to move
☐ Other, please specify: ________________________________

25. (BASELINE) Have you ever couch surfed or moved from house to house because you didn’t have a place to stay? (You do not need to answer if you selected Couch Surfing in #23)
   ☐ Yes ☐ No

   (FOLLOW-UP) In the past six months, have you couch surfed or moved from house to house because you didn’t have a place to stay? (You do not need to answer if you selected Couch Surfing in #23)
   ☐ Yes ☐ No

26. (BASELINE) Have you ever slept in a homeless shelter or in a place where people weren’t meant to sleep (for example, a car, the street) because you didn’t have a place to stay? (You do not need to answer if you selected Homeless in #23)
   ☐ Yes ☐ No

   (FOLLOW-UP) In the past six months, have you slept in a homeless shelter or in a place where people weren’t meant to sleep (for example, a car, the street) because you didn’t have a place to stay? (You do not need to answer if you selected Homeless in #23)
   ☐ Yes ☐ No
27. Do you pay for housing?
   □ Yes □ No (if No, skip to #29)

   If you are paying for some of your rent, you should say Yes.

28. Is your housing affordable?
   □ Yes □ No

   Affordable means you can pay for your housing and still have money for things like food, transportation, and utilities.

29. Do you feel safe inside your home?
   □ Yes □ No

30. Do you feel safe in the neighborhood where you live?
   □ Yes □ No

31. Do you feel that your housing situation is stable (for example, can you stay as long as you would like to and do you have control over whether you stay or have to leave — excluding reasons around your lease coming to an end)?
   □ Yes □ No

32. Do you have access to the transportation you need to get to school or work?
   □ Yes □ No

33. Do you have a valid driver’s license?
   □ Yes □ No
   □ I’m not old enough

34. Do you own a motor vehicle (for example, car, van, truck, etc.)?
   □ Yes □ No

35. Do you have an Independent Living Plan that a caseworker or social worker helped you to prepare? (You only need to answer this question if you are currently in foster care)
   □ Yes □ No (skip to #36)

   An Independent Living Plan is a written life plan for goals like school, jobs and housing.

   35a. If yes, does it contain a housing plan that you believe will lead to safe, stable and affordable housing?
   □ Yes □ No (skip to #36)
35b. Did you participate in the development of this housing plan?
☐ Yes  ☐ No

Physical and Mental Health

36. Do you have health insurance? (You do not need to answer if you are currently in foster care. If you are in care, skip to #37.)
☐ Yes  ☐ No (skip to #37)  ☐ Don't Know (skip to #37)

36a. If yes, who pays for your health insurance? (Please check one only)
☐ Covered by my parents’ insurance
☐ Covered by my spouse's insurance
☐ Covered by insurance provided by my employer
☐ Covered by insurance provided by my school
☐ I buy private insurance myself
☐ I am covered by Medicaid (including HUSKY, Medi-Cal, TennCare, MaineCare, RItecare and Title 19)
☐ Other (please specify) __________________________
☐ Don’t Know

36b. Does your health insurance have dental benefits, or do you have separate dental insurance?
☐ Health insurance has dental benefits
☐ Separate dental insurance
☐ I do not have dental insurance
☐ Don’t Know

36c. Does your health insurance pay for you to get mental health services, like counseling and substance abuse treatment, if you needed it?
☐ Yes  ☐ No  ☐ Don’t Know

37. When did you last have a physical examination by a doctor or nurse?
☐ Less than a year ago
☐ 1 to 2 years ago
☐ More than 2 years ago
☐ Never
☐ Don’t Know

38. When did you last have a dental examination by a dentist or hygienist?
☐ Less than a year ago
☐ 1 to 2 years ago
☐ More than 2 years ago
☐ Never
☐ Don’t Know
39. Would you say that, in general, your physical health is excellent, very good, good, fair, or poor?
   - Excellent
   - Very good
   - Good
   - Fair
   - Poor
   - Don’t Know

39a. Has there been any time over the past six months when you thought you should get medical care but you did not?
   - Yes
   - No (skip to #40)

39b. What kept you from seeing a health professional when you really needed to (please check all that apply)?
   - Didn’t know who to go and see
   - Had no transportation
   - Had nobody to go with me
   - Parent or guardian would not go with me
   - Didn’t want my parents or others to know
   - Difficult to make an appointment
   - Afraid of what the doctor would say or do
   - Thought the problem would go away
   - Didn’t want to talk about the problem
   - Couldn’t pay
   - Other (please specify) __________________________________________________________
   - __________________________________________________________
   - __________

40. Would you say that, in general, your mental and emotional health is excellent, very good, good, fair, or poor?
   - Excellent
   - Very good
   - Good
   - Fair
   - Poor
   - Don’t Know

40a. Has there been any time over the past six months when you thought you should see a mental health professional for a problem such as depression, substance abuse or anxiety, but did not?
   - Yes
   - No (if No, skip to #41)
40b. What kept you from seeing a mental health professional when you really needed to (please check all that apply)?

- Didn’t know who to go and see
- Had no transportation
- Had nobody to go with me
- Parent or guardian would not go with me
- Didn’t want my parents or others to know
- Difficult to make an appointment
- Afraid of what the doctor would say or do
- Thought the problem would go away
- Didn’t want to talk about the problem
- Couldn’t pay
- Other (please specify) ____________________________________________

- Don’t know

Financial Capability

41. Right now, do you have a bank, or credit union, account into which you can deposit and withdraw money?

- Yes
- No (skip to #42)

41a. (If yes) What kind of account do you have? (Please check all that apply)

- Savings account
- Checking account

42. In the past month did you have enough money to cover your expenses (e.g. rent, bills, transportation, school supplies, child care, school loans, etc.)?

- Yes
- No

43. How did you cover your expenses? (Please check all that apply)

- Got money from a job or found additional work
- Used money from student loans or scholarships
- Got money that I do NOT have to repay from a family member or friend
- Got money that I have to repay from a family member or friend
- Got a loan from a bank or credit union
- Got money from some other type of lender (e.g., payday loans, loan shark, pawn broker, etc.)
- Got money from stipend, organization or agency (e.g., Opportunity Passport™, Independent Living classes, speaking engagements, community agency, etc.)
- Used money that I saved for other purposes (savings can be money that you put away somewhere in your home, deposited in an account at a bank or credit union, etc.)

HELP: This is an account that you can use to manage money. This account is not in overdraft status or chex systems.
☐ Sold some of my possessions
☐ Used my credit cards
☐ Overdrew my bank account ("go negative")
☐ Used government resources (e.g., welfare, TANF, WIC, SNAP, state funds, food stamps, etc.)
☐ I did not cover my expenses

44. What would you do if you had an emergency and needed $500 dollars? (Please check all that apply)
☐ Get money from a job or find additional work
☐ Use money from student loans or scholarships
☐ Get money from a family member or friend
☐ Get a loan from a bank or credit union
☐ Get money from some other type of lender (e.g., payday loans, loan shark, pawn broker, etc.)
☐ Get money from stipend, organization or agency (e.g., Opportunity Passport™, Independent Living classes, speaking engagements, community agency, etc.)
☐ Use money that I saved for other purposes (savings can be money that you put away somewhere in your home, deposited in an account at a bank or credit union, etc.)
☐ Sell some of my possessions
☐ Use my credit cards
☐ Overdraw my bank account (go negative)
☐ Use government resources (e.g., welfare, child support, TANF, WIC, SNAP, state funds, food stamps, etc.)
☐ I would not know what to do

HELP: Usually people need about $500 in hard times. Try to imagine what you would do if you needed $500 in an emergency.

45. Do you currently have any savings (savings can be money that you put away somewhere in your home, deposited in an account at a bank or credit union, asked a family member or friend to keep for you, etc.)?
☐ Yes
☐ No

46. Do you currently owe money?
☐ Yes
☐ No (skip to #47)

46a. (If yes) Who do you owe money to? (Please check all that apply)
☐ Family member or friend (e.g., foster parent; adoptive parent; biological parent; sibling; extended family member like a cousin, grandparent, or aunt, significant other, etc.)
☐ Credit cards
☐ Student loans
☐ Home mortgage
☐ Bank or credit loan
☐ Car or other motor vehicle loan
☐ Student obligations (e.g., PELL grant, parking fees, activity fees, library fees, housing, etc.)
☐ Bank account (e.g., chex systems, overdraft fees, etc.)
☐ Child support
☐ Other type of lender (e.g., payday loans, loan shark, pawn broker, etc.)
☐ Medical expenses (e.g., insurance, hospital, doctor, co-pay bills, etc.)
☐ Court related costs (e.g., restitution, fees, etc.)
☐ Employer

Social Capital

Please think about your life goals when answering the following questions. (Examples of life goals could be: to own a business, have a family, build or expand professional networks, earn a degree, sign a lease for an apartment, own a home, get a driver’s license, become financially independent, establish a healthy peer network.)

A peer is someone who is around your age.

47. What adults do you have in your life right now who can help you go after your life goals? (Please check all that apply)
   ☐ Someone in my family (for example, birth parent, adoptive parent, adult sibling, extended family member, legal guardian, self-identified family, etc.)
   ☐ Someone from school (for example, teacher, principal, coach, school counselor, etc.)
   ☐ Someone from work (for example, boss, supervisor, older co-worker)
   ☐ Someone from my neighborhood or community (for example, older neighbor, pastor, friend’s parents, mentor, church, community organization, etc.)
   ☐ Someone from the child welfare system (for example, foster parent, group home staff, case worker, CASA, GAL, Opportunity Passport™ staff, life coach, etc.)
   ☐ I don’t have any adults who can help me go after my life goals right now. (skip to #48)

47a. And which of those adults will still be there to help you go after your life goals in the next few years? (Please check all that apply)
   ☐ Someone in my family (for example, birth parent, adoptive parent, adult sibling, extended family member, legal guardian, self-identified family, etc.)
   ☐ Someone from school (for example, teacher, principal, coach, school counselor, etc.)
   ☐ Someone from work (for example, boss, supervisor, older co-worker)
   ☐ Someone from my neighborhood or community (for example, older neighbor, pastor, friend’s parents, mentor, church, community organization, etc.)
   ☐ Someone from the child welfare system (for example, foster parent, group home staff, case worker, CASA, GAL, Opportunity Passport™ staff, life coach, etc.)
   ☐ I don’t have any adults who will still be there to help me go after my life goals in the next few years.
   ☐ I don’t know
48. What **adults** have you **asked for and received help from** in going after your life goals? (Please check all that apply)

- Someone in my family (for example, birth parent, adoptive parent, adult sibling, extended family member, legal guardian, self-identified family, etc.)
- Someone from school (for example, teacher, principal, coach, school counselor, etc.)
- Someone from work (for example, boss, supervisor, older co-worker)
- Someone from my neighborhood or community (for example, older neighbor, pastor, friend’s parents, mentor, church, community organization, etc.)
- Someone from the child welfare system (for example, foster parent, group home staff, case worker, CASA, GAL, Opportunity Passport™ staff, life coach, etc.)
- I have not asked for and received help from any adults in going after my life goals. (skip to #49)

48a. Do you recall a time in the past 6 months when one of the adults in the list above **came to you for help and you helped them**?

- Yes  
- No (skip to #49)

48b. **How did you help them?** (Please check all that apply)

- I provided practical support (for example, volunteered, helped someone move)
- I provided financial support (for example, loaned or gave money, bought something for them that they needed)
- I provided personal/emotional support (for example, allowed someone to vent, listened and advised/shared perspectives, was honest, used “tough love”—keeping it real, helped make decisions)
- I helped provide support through my leadership (for example, engaged other youth, served in a leadership role, helped other young people become leaders, partnered in providing training/technical assistance)
- Other, please specify: ____________________________________________

49. Do you have any **peers** in your life **right now** who can help you go after your life goals?

- Yes  
- No (skip to #50)

49a. **Will any of those peers still** be there to help you go after your life goals in the **next few years**?

- Yes
- No
- I don’t know

50. Have you ever **asked for and received help from** any of your peers in going after your life goals?

- Yes
- No (skip to Other)
50a. Do you recall a time in the past 6 months when one of those peers came to you for help and you helped them?

☐ Yes
☐ No (skip to Other)

50b. How did you help them? (Please check all that apply)

☐ I provided practical support (for example, volunteered, helped someone move)
☐ I provided financial support (for example, loaned or gave money, bought something for them that they needed)
☐ I provided personal/emotional support (for example, allowed someone to vent, listened and advised/shared perspectives, was honest, used “tough love”—keeping it real, helped make decisions)
☐ I helped provide support through my leadership (for example, engaged other youth, served in a leadership roles, helped other young people become leaders, partnered in providing training/technical assistance)
☐ I provided educational support (for example, tutored, shared information about supports)
☐ I provided job/career support (for example, helped someone to network)
☐ Other, please specify: ________________________________

Youth Engagement

Youth engagement is the meaningful participation and consistent involvement of a young person with an adult in an activity. These are activities that are not organized by your caseworker. Below are some questions designed to understand this engagement better.

51. Have you attended a training, or received help from staff or adults in the community, to support your leadership and advocacy skills (for example, deciding what policies and practices to advocate for, preparing for meetings with legislatures, planning for educating or training on foster care awareness, planning for participation in panels, providing feedback on laws and/or programs in your state, etc.)?

☐ Yes
☐ No

52a. Outside of the work with your caseworker, within the past 6 months have you met or worked with staff or adults in the community on any of these: education, housing, transportation, physical and mental health, social capital, permanence, financial capability, or employment?

☐ Yes
☐ No, staff asked me but I declined (skip to #53a)
☐ No (skip to #53a)
52b. If yes, in what way did you work with adults? (Please check one only)

- You came up with ideas and had more say than the adults in making decisions
- You came up with ideas and had an equal say with the adults in making decisions
- You came up with ideas and had some say with the adults in making decisions
- You came up with ideas and you did not have any say in making decisions
- You were asked to give feedback on adults’ ideas and were not involved in making decisions
- You had no role

53a. Outside of the work with your caseworker, in the past 6 months have you met with staff or adults in the community about evaluation (for example, talking about and sharing data with others, reflecting on the data, analyzing the information, etc.)?

- Yes
- No, staff asked me but I declined (skip to #54a)
- No (skip to #54a)

53b. If yes, in what way did you work with adults? (Please check one only)

- You came up with ideas and had more say than the adults in how the data and information will be used
- You came up with ideas and had an equal say with adults in how the data and information will be used
- You came up with ideas and had some say with adults in how the data will be used
- You came up with ideas and you did not have any say in how the data will be used
- You were asked to give feedback on adults’ ideas and were not involved in how the data will be used
- You had no role

54a. Outside of the work with your caseworker, in the past 6 months did you meet or work with staff or adults in the community in advocating for young people (for example, deciding what policies and practices to advocate for, preparing for meetings with legislatures, planning for educating or training on foster care awareness, planning for participation in panels, providing feedback on laws and/or programs in your state, etc.)?

- Yes
- No, staff asked me but I declined (skip to #55)
- No, I was not asked and did not participate (skip to #55)

54b. If yes, in what way did you work with adults? (Please check one only)

- You came up with ideas and had more say than the adults in making decisions
- You came up with ideas and had an equal say with the adults in making decisions
- You came up with ideas and had some say with the adults in making decisions
- You came up with ideas and you did not have any say in making decisions
- You were asked to give feedback on adults’ ideas and were not involved in making decisions
- You had no role
55. Outside of the work with your caseworker, in the past 6 months, what resources/activities were you connected to in your community by staff or adults in the community? (Please check all that apply)

- Events/conferences
- Lifestyle training
- Employment
- Public speaking opportunities
- Financial literacy
- Educational
- College help/scholarships (financial aid, loans, applications)
- Tutoring
- Housing
- Medical
- Mental health
- Mentoring
- Other (please specify) ____________________________
- I asked and no one helped
- I didn’t ask
- None

56. In the past 6 months, in what ways did staff contact you? (Please check all that apply)

- Email
- Text
- Phone calls
- In-person meetings
- Social Media
- Video calls (Facetime, Skype, Oovoo)
- Bulletins/postings
- No one contacted me
Is there anything else that you would like to tell us?

Thank you for taking the survey! The answers you gave will help your community make decisions about creating opportunities for young people leaving foster care. Remember, follow-up surveys are in April and October — don’t forget to take your next one!