

Fostering Connections for Post-Secondary Educational Success for Youth with Foster Care Experience

Creating Stability for Emancipating Youth Leaving Foster Care



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Objective

Participants will translate information on systemic factors of child welfare that influence outcomes for youth with foster care experience in future planning for success.

To meet this objective, we will briefly present what we already know about the characteristics of aging out youth from foster care; some common outcomes for this population; programmatic and policy development to improve outcomes including post-secondary education; analysis of these policies and programs, and our recommendations.

Experiences and Behaviors of Aging Out Youth from Foster Care

Experiences

- Abandonment
- Physical abuse
- Sexual abuse
- Emotional abuse
- Neglect
- Alcohol and substance abuse
- Multiple abuse
- Multiple moves in foster care
- Entry (or reentry) into the public child welfare system at an older age

(DSHS, 2004; Louisell, 2009; & Avery, 2010)

Situations and Related Behaviors

- Greater dependency on adults and resistance to accept it resulting in unruly behaviors and poor service utilization
- Emotional outbursts related to abusive experiences
- PTSD related to the trauma experienced
- Question of belongingness and breaking the norms
- Unprepared to negotiate the world alone, lack of support, and negative impact on mental health and possible addictive behaviors

(http://www.dredf.org/special_education/Issues retrieved 8/18/11; Anderson, 2003)

Social Exclusion of Abused Youth in Out-of-Home Care

As the child welfare system plans to emancipate youth in out-of-home care, it needs to develop sensitivity to the social exclusion experienced by them.

- Social exclusion is often characterized by marginalization, powerlessness, and fostered dependency and lack of role models for creating resilient families, successful work lives, and strong cultural and ethnic identities (Anderson, 2003; Freundlich, 2009; Susinos, 2007).

The process of emancipating this youth need to begin with a conscious social inclusion of these youth in systems that they often interact with and those systems that they will need to interact with once they leave foster care.

Experiences of Youths out of Foster Care

- Disconnected from supportive adults and services
- Homelessness
- Unemployment
- Unplanned parenthood
- Poor parenting skills
- Depression
- Substance abuse problems
- Legal system involvement
- Poor access to health care
- Limited educational opportunities

(Courtney et al., 2005; Metzger, 2006)



Components of Independent Living Programs (ILP) for Youth aging out of foster care

Independent living classes

Counseling (individual, group & drug and alcohol)

Employment

Education/tutoring

Social relationship building and its sustenance

Housing

(DSHS, 2004; Dworsky & Courtney ,2010;Anthony Loman, Siegel, 2000 & Yaron, et al., 2010)

Concerns about the ILPs

ILPs ignore:

- The background of youth aging out of care
- Characteristics of youth aging out of care
- The process and focus on the event
- Educational goals and their attainment
- Development of specific and measurable indicators for success
- Realistic time needed to achieve independence
- Formative evaluation in program planning

(Dworsky & Courtney, 2010; Frey & Greenblatt, 2005)

Educational Goals and their Attainment for Youth with Foster Care Experience

Aging out youth have similar educational goals but lack support and access to meet their goal.

The greatest barriers to education include:

- Insufficient fund
- Lack of support from responsible adult
- Needing to find housing and employment
- Working full time
- Parenting responsibilities

Many youth drop out of college.

(Dworsky & Courtney , 2010; Courtney et al., 2004)



Why do youth drop out of college?

- Health, mental health, and behavioral issues
- Disruption in educational and career goals
 - Low high school graduation rate
 - Time spent in obtaining GED – youth may reach the age of 21 years
- Developmental delays

(Louisell, 2009; DSHS, 2004 & Yaroni, et al., 2010)



Developmental needs/issues about youth in transition to adulthood

- Link with family of origin and other significant AND committed kin
 - Adulthood is gradual and unrelated to specific age
 - Adulthood is marked by cognitive, behavioral and emotional maturity
 - Transition to adulthood has become longer, complex , diverse and uncertain
 - The periods 18-25 mark progress and not achievement toward independence
 - For foster youth, **transition is dualistic process**
- (Avery, 2010; Arnett, & Tanner, 1994; Arnett, 2007; Cooney, & Kurz, 1996)

Desired Long-term Goals for Youth with Foster Care Experience

- Safety and decreased vulnerability
- Permanency
- Well- being
- Stability in living situations

(DSHS, 2004; CDSS, 2005)

Can dropping out of college or just attaining GED help towards achieving these goals?

Program Planning Focus

Planning programs to prepare youth with foster care experience for living on their own focuses on Event (attaining 18 years of age) rather than the Process.

The process needs to begin with the entry of the youth in foster care, even when Adoption may be the goal. Programs that assist these youth in catching up on any developmental delays they might have experienced, links them with service systems that provide stability in their lives, and connect youth to responsible adults in their environment can go a long way in getting them ready for living on their own in future in a safe and stable environment. Youth need to gradually acquire skills to create safe and stable environment for them selves.

Formative Evaluation

Rubin and Babbie (2011) define Formative Evaluation as:

Formative Evaluations ... focus ... on obtaining information that is helpful in planning the program and in improving its implementation and performance (p. 319).

Summary of Systemic Concerns:

- It ignores the developmental needs and task completion of previous stages.
- It does not provide adequate opportunities for the youth to develop needed social skills for autonomous functioning in the adult world.
- Lot more focus on clinical aspects of youth than enhancing their interface with their social ecology
- It ignores the unique characteristics and diversity issues inherent with the population
- It ignores the long term outcome of permanence, safety, and stability

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Systemic response to these concerns

- Family Group Decision Making \ Family Conferencing: Several states including Pennsylvania have adopted these models to link the youth with foster care experience with familial and community support systems for improved permanency, safety, stability, and educational outcomes
- Inter-agency Team Planning to provide wrap-around services to these youth in their preparation for leaving the foster care system / ILPs

Policy Responses

The Federal policy designed to assist youth aging out of foster care attain post secondary education dates back Title IV-E ILP, 1986 & the Chafee Foster Care ILP, 1999.

Promoting Safe and Stable Families Amendment Act of 2001 authorized federal funding to increase educational opportunities for emancipating youth with foster care experience.

The Chafee education and training voucher (ETV) provided \$5000 to current and former youth for:

- tuition and fees
- transportation
- room and board
- Books and supplies

(Dworsky & Courtney, 2010)



Policy Responses

Foster youth making satisfactory progress receive the ETV until 23 if they first received it by age 21.
(Dworsky & Courtney, 2010)

The Fostering Connection and Increasing Adoption Act of 2008 extended the age of Title IV-E eligibility from 18 to 21 beginning federal fiscal year 2011
(Dworsky & Courtney, 2010)

Evaluation studies on the policy impact

Studies indicate that the Chafee Foster Care Independent Living Program has no significant impact, even in the wake of the Fostering Connection and Increasing Adoption Act of 2008 in outcome variables such as:

Educational attainment

Employment stability

Earnings

Avoidance of hardship

(Avery, 2010; DSHS, 2004; Dworsky & Courtney, 2010)

Evaluation studies on policy Impact

At most, youth in foster care until 21 may graduate with an Associate Degree

Former foster youth may graduate with Associate or Bachelors Degree by age 23 or 24

Young people who have routinely extended foster care are not more likely to graduate from college by age 23 or 24

(Courtney & Zinn, 2008; Dworsky & Courtney, 2010)

Recommendations for Policy

Increase the ETV to reflect the realistic college and living expenses

Supporting foster care youth until they are at least 25 years

Making the eligibility criteria for foster care youths to pursue higher education flexible

Plans for permanency should begin as soon as the child enters the foster care system as opposed to the 90 days period stipulated by the Fostering Connection and Increasing Adoption Act of 2008



Recommendation for Policy

Demand for accountability and improvement system that require continuous and recurrent cycle of self-assessment, planning, implementation and reviews.

Use of both quantitative and qualitative data is fundamental to this cycle.



Recommendations: Programmatic Components

Based on our belief that preparing foster youth for independent living needs to be a process, we recommend multi-systemic interventions that begin as soon as the goal of adoption/independent living is established in the service plan.

Multi-systemic interventions simultaneously focus on the individual youth as well as their ‘social ecology’, which may include family, school, employment, religion, and so on.

Nine Principles of Multi-systemic Treatment

Retrieved on 6/30/11 from

<http://mstservices.com/index.php/what-is-mst/nine-principles>

1. Finding a fit. A thorough assessment of youth's needs, what has worked in the past, and services that fit directly with the needs.
2. Focus on the strengths of the youth as well as systems in their social ecology selected to be a good fit.

Nine Principles of Multi-systemic Treatment

3. Gradually increasing responsibility transfer to all systems involved.
4. Developing well defined goals, staying focused on the achievement of goals and staying action oriented.
5. Targeting sequences within the youth and their social ecology that sustain the identified needs.
6. Emphasis on attaining age-appropriate development and completing the tasks related to it.

Nine Principles of Multi-systemic Treatment

7. Continuous effort is deemed necessary for long-term achievement of goals. Multi-faceted problem resolution requires coordination between systems and feedback loops.
8. On-going evaluation of change achieved and fine-tuning of efforts at overcoming problems and/or meeting needs yields more successful interventions.
9. The focal system, in this case the youth, must be prepared to develop abilities to meet their needs after the formal intervention is terminated. This is key to the long-term stability of the focal system.

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