Aging Out: Preparing Youth for Life after Foster Care in Massachusetts

by

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ABSTRACT

Each year, twenty thousand youth are emancipated from our nation’s foster care system with insufficient preparation for the responsibilities and realities that await them, and little or no support from family or government. Youth aging out of foster care at 18 experience significantly higher rates of homelessness, incarceration, incomplete education, unemployment, and substance abuse. Outcomes are bleak both in Massachusetts and nationally.

This thesis studies the foster care system and the resources, programs and policies surrounding the transition from care in light of their implications for aging out. It posits that these elements surrounding the transition from care do not adequately address the needs of most youth in foster care. The incentive system and allocation of resources is geared to meet the needs of the youth who are in the best position to take advantage of these resources rather than those most in need of them.

It is argued that the foster care system’s singular pursuit of permanency through reunification and subsequently through adoption or independent living can come at the cost of providing the stability required for successful youth development. Additionally, the educational requirements tied to accessing transition services work to the disadvantage of many of the system’s neediest youth. Further, the system does not demonstrate the value of education to foster youth until they are ready old enough to leave. At that point, it becomes a requirement for youth to stay in the system.

Thesis Supervisor: Langley Keyes
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This thesis is dedicated to the foster youth who are struggling and who are succeeding and to the people there to support them. I dedicate it also to my parents – thank you for always being there for me.

So, this is the thesis. It happened after all. I am glad. In sum, the experience has been more rewarding not nearly as scary as anticipated. It is my hope, that after reading it, you feel the same. If I could do it again, there are things I would have done sooner and things I would have done differently. But, without the help and support of the people below, I could not have done it at all.

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It turns out that the infinite corridor is not so infinite after all.
Thesis Contents

Acknowledgements ................................................................. 3
Chapter One: Introduction and Methodology ........................................ 5
  Introduction .............................................................................. 5
  Methodology ........................................................................... 11
Chapter Two: The Foster Care System – Implications for Youth Aging Out ........................................ 13
  Ward of the State ..................................................................... 14
  The Child Welfare System ...................................................... 14
  The Foster Care Placement ..................................................... 15
Chapter Three: Transitions – Aging Out and Staying In ............................................ 31
  Aging Out v. Staying in the System at 18 ..................................... 31
  Chafee Program: Support and Safety Net? .................................. 43
Chapter Four: Achieving Permanence in Temporary Care ........................................ 51
  How the system works towards permanency ................................ 56
  How the system works against permanency ................................ 59
Chapter Five: Education: Priority and Paradox ........................................ 68
  The Role of Education ............................................................ 68
  What this means at 18 ............................................................. 70
  Educational and Placement Instability ......................................... 71
  Staying in School, Staying in Care .............................................. 75
Chapter Six: Conclusion .................................................................. 78
  Providing a Safety Net ............................................................. 79
  Further Research ....................................................................... 87
Appendix: Interviews and Workshops ................................................... 90
Bibliography ................................................................................. 91
Chapter One: Introduction and Methodology

Introduction

Each year, twenty thousand youth are emancipated from our nation's foster care system with insufficient preparation for the responsibilities and realities that await them, and little or no support from family or government. In Massachusetts, an estimated 500 youth age out of foster care each year.¹ A foster youth's 18th birthday signifies not only a symbolic end to childhood, but a very real end to the services provided by the Department of Social Services (DSS). While the days when youth in the care of DSS were effectively shown the door and handed a map to a local homeless shelter on their way out are, for the most part, over, for some youth the reality is not dramatically different.

In the context of the more than 11,000 youth in the care of the Commonwealth's child welfare system or the total Massachusetts child population of more than 1.5 million, 500 youth aging out of care may not seem significant. However, the combination of the negative outcomes that disproportionately affect this population and the Commonwealth's responsibility for their health and well-being have served to bring the issue of the preparation of these youth for adulthood and independent living to the attention of policymakers, providers, and to some extent, the general public.

Over 60,000 reports of child abuse and neglect were filed in Massachusetts in 1998, representing nearly 100,000 children. That year, 13 children known to the state child protection agency died.² Sadly, the foster care system generally draws the attention of the media and the general public only when a child in care dies or disappears. The general public has little understanding of what foster care is or how it works. The system

¹ Collins 2000c, p.11.
is able to hide under its purported need to protect the privacy of these youth and thus it can take a scandal to bring it to the public eye. This increased media attention in turn reinforces the central mission of the foster care system – the care and protection of children – to the exclusion of the system’s other goals and objectives like preparing youth for adulthood. However, there are countless additional tragedies neither reported in the media nor addressed by public outcry.

Youth exiting the foster care system are disproportionally represented in state institutions such as prisons and hospitals and on the rolls of public entitlements including welfare and disability insurance. The increased attention to discharge planning in these state institutions coupled with the increased ability to obtain information pertaining to individuals’ entrances and exits from state systems and the utilization of mainstream resources have demonstrated and documented the nexus between foster care and continued dependence on the Commonwealth’s resources. The evidence is conclusive and the conclusion is alarming.

The intersection between foster care and homelessness is clear. Thirty percent of the individuals in the Massachusetts homeless population were once foster children\(^3\) and 20% of the Massachusetts homeless population has children in the foster care system.\(^4\) Additionally, it is reported that approximately 25% of youth aging out of foster care are homeless for at least one night.\(^5\)

Though the foster care system does not have adequate mechanisms for collecting accurate information on youth after they exit the system, numerous studies have:

\(^3\) A State Call to Action, April 2001.
\(^5\) ADVOCASEY Index 2002
documented a range of negative outcomes disproportionately suffered by youth who have aged out. Youth aging out of foster care at 18 experience significantly higher rates of homelessness, incarceration, incomplete education, unemployment, and substance abuse. Outcomes are bleak both in Massachusetts and nationally. Though foster children constitute less than .003% of the nation’s population, 17% of our states’ prisoners are former foster care children. Additionally, 40% of foster children leave the system to go on the nation’s welfare rolls. As mentioned above, the intersection between homelessness and the foster care system is particularly strong. The prevalence of negative outcomes among this population is significantly higher than in other populations of at-risk youth.

Similarly, youth aging out of foster care are significantly less likely to achieve positive outcomes such as education, job training, employment, housing, health care, and contact with service providers. Elements considered critical to youth development are generally alien to the experience of youth in the system: safety, permanence, positive role models, supportive peers, structure, work ethic, community service and responsibility.

This thesis is an effort to provide insight regarding how DSS practices and the deficiencies in transition support and aftercare services leads to adolescents being disproportionately represented among the Commonwealth’s homeless, incarcerated and otherwise dependent individuals. Hopefully, it will provide some insight for the development of policy and the planning of programs and interventions to address the needs of this population.

7 ibid
The central policy development reflecting, responding to and stimulating the increased attention on the negative outcomes facing youth aging out of care is the Foster Care Independence Act and John H. Chafee Independence Program of 1999 (Chafee Act). The Chafee Program replaced the Title IV-E Independent Living Initiative established in 1986. Although Massachusetts efforts to help youth transition successfully from care predate the Chafee Act, the impact of Chafee is significant – in terms of raising both dollars and awareness and adding credence to youth aging out as a policy issue.

The Chafee Act doubled Federal funding for Independent Living Initiatives from $70 million to $140 million and requires states to provide youth between 18 and 21 years old who have aged out of the foster care system with assistance and services. Currently, the program is funded at $105 million. Funds are distributed to states according to the total number of foster children in the state as a proportion of the national total. The minimum allocation is $500,000. Massachusetts’s allocation is $2.5 million with a state match of $522,000. Primarily, the Massachusetts Chafee Program consists of Outreach Workers, Discharge Support, and Independent Living Support. These will be discussed further in Chapter Three.

Evidence that youth are staying in foster care longer raises the question as to which youth are staying in the system and which are not. In a system that advocates permanency via adoption, reunification or guardianship, the decision to stay in the system is considered a positive decision for youth for whom permanency was not achieved during their time in care. Examining the policies and programs intended to support the transition from care, in combination with conversations with practitioners,

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9 The Chafee Independence Program replaced the Title IV-E Independent Living Initiative established in 1986.
obliges a closer look at the Massachusetts foster care system itself to better understand who really has access to the resources available and why. Determining who has access to resources involves establishing which youth meet the technical eligibility criteria for accessing resources, understanding which groups services target and understanding who, due to the characteristics of their career in foster care, is most likely to take advantage of these resources.

How does a youth's experience in foster care influence his ability or willingness to access available resources? How does the system affect the transition process? What are the conflicts/paradoxes evident in the elements proclaimed to be critical to this transition? How are the priorities emphasized in the transition from foster care related to the priorities of the foster care system?

The fact that the state now has programs and services in place for youth after age 18 is evidence of the dramatic philosophical shift the system has undergone in recent years. DSS policymakers have adopted the philosophy that the Commonwealth has a responsibility to support foster youth in their transition to adulthood. This philosophy is in evidence in some regional and area offices but the transformation is not complete; there are still DSS employees and offices that subscribe to the belief that the system's responsibility is to protect children and that 18 year-olds are no longer children. They believe that any service provided to that population is a privilege, not a right. The waitlists for these services are evidence of the need for increased resources. They are also evidence that the facilitation of successful transitions to independent living is still not a central priority throughout the system.

State and federal regulations encourage judges and child welfare workers to keep children with biological parents – even abusive and neglectful parents. The emphasis of
the child welfare system is on permanency via family reunification or, when that is not possible, adoption. Foster care is intended to be a tool providing temporary substitute care while working toward the goal of permanency. Regardless, a considerable number of youth spend a significant percentage of their young lives in foster care and only leave when they age out of the system. Generally, these youth age out at 18, though recent developments have enabled youth to remain in the system until age 21 or 22. However, the conditions tied to the change and the experiences of the youth in foster care are such that significant numbers are leaving the system on or around their 18th birthday. Approximately 60% of the almost 900 youth leaving care in 1999 left as soon as they turned 18. Only recently has attention focused on the experience of these youth within the system and in aging out of care.

If the mission of the foster care system is commendable, its results often are not. Advocating permanency, stability and concentrating on the safety and protection of the child, the system promises to be the good parents that a child's own parents were not. However, countless factors prevent the system from fulfilling the range of parental responsibilities a parent performs for her child - those of advocate, coach, and networker. The statistics alone help explain the inadequacies of the system in this regard. Statistics demonstrate significant staff turnover, high caseloads, increasingly complex problems, and the reduction in the number of foster parents. So what are we left with? Too many youth getting too little attention and being forced into independence at 18.
Methodology

This thesis is based on a review of literature concerning the provision of foster care and aging out of that system, and interviews with individuals involved with the foster care system and concerned with the outcomes facing these and other at-risk youth. Interviews were conducted with individuals in the Department of Social Services, contracted agencies, academics, advocates and practitioners. Interviews focused on the performance of the foster care system assisting youth with the transition out of care, model programs and practices, and discussion of the impact of the decentralized nature of the system on providing consistent quality care to foster youth. A list of individuals interviewed is provided in Appendix 1.

The literature review and interviews were substantially enhanced through participation in a number of workshops and panel discussions. A list is included in the Appendix.

This thesis is organized in six chapters. Chapter One provides an introduction to the issue of youth aging out of foster care as well as an overview of the genesis and objectives of this thesis. Any discussion of the issues of youth aging out of the foster care system presupposes an understanding of the mechanisms and context of that system. The complexity of the system in terms of geographic and policy decentralization, the variety of programs and placements, and the intersection with other systems and communities requires some familiarity with the system. Chapter Two provides an overview of the elements of the foster care system influencing and directing the transition from care. Chapter Three builds on the discussion of the foster care system to present a more focused discussion of the Transition Program, a classification I have given to the system elements impacting the transition and the programs and services
provided by the State and the Federal Government targeted to ease the transition out of foster care. Based on Chapter Three’s discussion of what Massachusetts is doing to help youth prepare for adulthood and independent living, Chapter Four discusses the implications of both the system and the transition program on Permanency for the youth. Achieving permanency is a central focus of the child welfare system’s commitment to youth as well as a measure of a successful transition from care. Chapter Five continues the discussion of the implications of foster care on permanency with further illustration of one of the paradoxes of the system – the relative emphasis on education within the foster care system and in the transition from care. Education is critical to successful outcomes for youth. However, the system does not demonstrate the value of education to youth in care until they are ready to leave. The failure to emphasize education within the foster care system prevents youth from achieving a successful transition let alone success in independent living. In Chapter Six I discuss possible long- and short-term policy recommendations to help address the paradoxes found in the intersection between the foster care system and successful transitions from care.
Chapter Two: The Foster Care System – Implications for Youth Aging Out

The transition of youth from the foster care system into independent living is a fairly new policy issue. The mechanisms for supporting that transition are still being developed and refined, so it is difficult to quantify how the system is doing in terms of preparing youth to age out. Without outcome measures and clarity regarding what constitutes success and failure, it is hard to compare one foster care system to another. That said, the outcomes information that is available demonstrates without question that systems are performing poorly in terms of preparing youth to age out of care. “No state or county in the country has a child welfare system that can be pointed to or referred to as a model for others.”

The reasons for this failure are numerous and the evidence of the failure is both significant and appalling.

Some of the reasons behind the failure of these systems include:

- The primary focus of the foster care system is the safety and protection of the children within its care and anything else is secondary;
- The problems of these youth are such that the challenge of helping them to age out successfully is formidable;
- The foster care system is decentralized and policy changes take time;
- The foster care system itself works in such a way that not only are youth deprived of the opportunity to learn the skills and gain the tools and supports necessary to succeed, the system actually exacerbates the difficulties they will face – it poses its own challenges.

A youth's transition from foster care is determined largely by the circumstances of his entry into and journey through the foster care system. These factors are influential not only because of their developmental implications for the youth, but also in terms of their ramifications for the youth's ability to access services and opportunities. To explain the impact that the entry into and career in foster care have on the transition from care, I will provide an overview of the Massachusetts foster care system, emphasizing the implications for aging out of the system and the intersection of the foster care system with other youth-serving systems and the larger child welfare system. I will discuss the relevant players and components of the system where their distinction has implications for permanency and the transition from care.

Ward of the State
When the Department of Social Services (DSS) commits a child to its care or custody, effectively making the child a ward of the state, DSS makes a commitment to protect that child and to provide care in the least restrictive setting. DSS's responsibility extends beyond its initial responsibility to keep the child safe from harm, to assuming full parental responsibility for the youth. This obligation ceases only when transferred to another responsible party (e.g., government agency, adoptive family, family of origin) or the child turns 18, legally an adult and responsible for his own care.

The Child Welfare System
The foster care system itself is just one component of DSS - the child welfare system. As of 3rd Quarter 2002, 27% of all children with open cases with DSS were in foster care placement. Although the primary agency responsible for child welfare, DSS is only one of several state government agencies serving youth. Youth in foster care may

11 DSS custody implies a court order while DSS care implies a Voluntary Placement Agreement.
also be involved with the Department of Mental Health (DMH), the Department of Mental Retardation (DMR), the Department of Youth Services (DYS), and the Division of Medical Assistance (DMA). Depending on the circumstances under which a youth comes into care and what the particular needs of that youth may be, DMH, DMR, DYS and DMA may have varying levels of involvement in the youth's care. The increasing mental health needs of foster youth have resulted in considerable overlap between these systems as well as a growing need for collaboration.

When DSS becomes involved in a case, the other state agencies generally abdicate responsibility, happy to preserve precious resources. When a case requires out-of-home placement, it generally falls under DSS. DMR does not provide out-of-home placements and DMA only becomes involved in placement when hospitalization is required. DMH has intensive residential treatment programs and inpatient hospital services for youth with significant mental health problems, but any other youth needing out-of-home placement fall under the jurisdiction of DSS.

The Foster Care Placement

Where the youth physically goes upon entrance into foster care is a function of (1) the circumstances under which the youth enters care, (2) the area office responsible for placement, (3) DSS's assessment of the youth's needs, and (4) available resources. These

12 The Division of Medical Assistance will be eliminated as part of Governor Romney's Health and Human Service Reorganization.
13 The re-organization occurring under the direction of the Romney Administration should have implications for jurisdictional issues and inter-agency collaboration: The proposed Children, Youth and Families division of the Executive Office of Health and Human Services will combine the Department of Social Services, the Office of Child Care Services, the Department of Transitional Assistance, the Department of Youth Services and the Office for Refugees and Immigrants. Providers are hopeful that this reorganization will increase collaboration and communication between agencies, and reduce infighting rather than reducing resources. Given the prevalence of mental health issues among DSS and DYS consumers, the omission of DMH from the consolidated agency is likely to reduce the potential efficiencies afforded by the consolidation. Ideally, these changes will result in the provision of better service to children within and in-between these systems.
are the critical elements influencing the initial placement, the journey through care, and the timing of and supports associated with the transition out.

**Figure 1: The Placement Decision – A Model**

![Diagram of the Placement Decision Model]

- Assign Foster Placement based on:
  - Emergency Status, Safety Considerations
  - Previous Experience in Foster Care
  - Area Office Policy
  - Assessment of Foster Youth Need, Age
  - Available Resources

- Foster Home
- Specialized Foster Home
- Residential Program
(1) Entrance into Care

Youth enter the foster care system via one of three routes. The most common method -- accounting for over 80%\textsuperscript{14} of consumer intakes -- is through the filing of a 51-A petition alleging that the youth is being abused or neglected, or is believed to be at risk of abuse or neglect. These cases are known as Care and Protection (C&P).\textsuperscript{15} If the allegation of abuse or neglect is supported, the case becomes an official open case in the DSS system and the youth in question becomes a ward of the Commonwealth of Massachusetts. The other two methods are Voluntary Requests for Services, where the youth or the youth’s family requests services from DSS, and Child in Need of Services (CHINS), where a court orders DSS to provide services.

The C&P caseload represents not only the majority of cases, but also the current and historical emphasis of the system. As such, the discussion that follows, while for the most part applicable to all cases, is intended to be representative of C&P cases. Where differences in services are affected by the method of entry into the system, the distinction will be made explicit.

Once a child has come into the system, his case file is transferred to the assessment unit. Depending on the age of the youth when he first enters the system, he will either be assigned a caseworker in the ongoing unit who essentially operates as a generalist, charged with infants as well as older adolescents, or a caseworker in a

\textsuperscript{14} DSS Quarterly Statistics, 3rd Quarter FY 2002, p.34.

\textsuperscript{15} The reporting and investigation process is a two step process. Once a report is filed, specially trained screeners make the decision as to whether to screen the case in or out. If there is enough information to demonstrate that there might be a problem, the case is screened in for investigation. If a case is screened in, it is either screened in as an emergency in which case the case enters a 24 hour investigation period or a non-emergency where the investigation period can last up to 10 days. Alternatively, if the case is screened out, the Area director signs off on the decision and there is no investigation into the allegation. Once a screened in case undergoes investigation, it is then either supported or unsupported.
specialized adolescent unit. The adolescent units generally handle all CHINS cases and adolescent C&P cases as caseloads permit.\textsuperscript{16}

Caseworkers and other system professionals treat C&Ps and CHINS youth essentially the same throughout their time in care. However, once a youth reaches age 18, the youth's status as C&P or CHINS affects both the resources and opportunities available to them and, to some degree, the willingness of the system to keep the youth in care. System policy demonstrates an increased sense of responsibility for C&P cases as indicated through the decision to limit access to resources such as the Tuition Waiver Program and Foster Child Grant Program.

The placement may also be influenced by safety considerations, the age of the foster youth, and the number of times the youth has been in care. There is a disparity in foster care placement decisions between first-time entrants and re-entrants into foster care. Re-entrants are youth who have been in care at some point in the past. This population includes both youth coming back to foster care from a non-foster placement and youth changing placements within the system. Re-entrants are more likely to be placed in residential programs and less likely to be placed in foster homes.\textsuperscript{17}

\textsuperscript{16} The other way to enter the child welfare system is through the filing of a Child In Need of Supervision (CHINS) petition. These petitions are generally filed by or for adolescents in cases where the youth and the parent are unable to remain in the same household. By definition these cases are not characterized by neglect or abuse, but drawing a clear line between CHINS and C&P cases is easier said than done. CHINS cases are often also unreported C&P cases or cases that either were or should have been C&P in the past. Organizationally, these cases are seen by caseworkers in dedicated CHINS units, who have developed a specialization in such cases. However, in some area offices, these units are Adolescent Units rather than CHINS units and see Adolescent C&P cases as well as CHINS cases.

\textsuperscript{17} According to DSS Quarterly Statistics, 3rd Quarter FY 2002, p.36, 30\% of re-entrants are placed in residential programs as opposed to 14\% of first-time entrants. Conversely, only 63\% of re-entrants are placed in foster homes as opposed to 83\% of first-time entrants.
Administratively, the Department of Social Services is a three-tiered system. The first tier is the Central Office under the direction of a Commissioner located in Boston. The second tier consists of six regional offices\textsuperscript{18} which, in turn, oversee between four and seven area offices. The 26 area offices are responsible for recruiting and retaining a network of foster families. It is at this area office level that youths enter the system. Discrepancies in the number of youth in foster placement across area offices can be attributed to the interplay between geography and need as well as in differing placement practices between offices.

Though policy is formulated at the DSS Central Office, the decentralization of the system provides area offices with considerable latitude in interpreting that policy. This latitude can be evidenced both explicitly in policy decisions made within the area office and implicitly by observing the differences between area offices. The dissemination of information plays a considerable role in discrepancies in policy and practice across DSS offices. “Anything new takes years for someone to understand because they are so busy they don’t see it.”\textsuperscript{19} Things change at different rates in each office depending on the experience of that office. Agencies adopt polices at rates dictated to some degree by the cases they have to deal with.

The Massachusetts foster care system’s approach to preparing youth to transition from care and into independent living is characterized by the collision of federal, state and local policy decisions with the individual characteristics and needs of youth in every part of the system. The decentralized nature of the system is such that the models and

\textsuperscript{18} Regional Offices include: The Western Regional Office in Springfield, Central Regional Office in Worcester, Northeast Regional Office in Lawrence, Metro Regional Office in Arlington, Southeast Regional Office in Brockton, and the Boston Regional Office in Boston.  
\textsuperscript{19} Stephanie Burke and Eric Cousineau, DSS Outreach Staff, Interview February 27, 2003.
best practices taking root in some areas of the system are based on a set of practices contrary to the historical policies still informing decisions in other areas. The belief that the foster care system’s role and responsibility as a parent to the 11,000-plus foster youth in the system extends to the successful transition of youth into adulthood and independence is divergent from the narrow philosophy that has guided this system for so long: ensuring the safety and wellbeing of children.

There are many DSS employees who believe that 18-year-olds are no longer children and are not only beyond the responsibility of the system, but also that the allocation of resources to this population is deliberately working against the primary responsibility to protect younger children. At the very heart of the system’s difficulty serving this population is a disconnect as to whether –and to what degree – the system should actually be serving the population. Though there has been a shift in the policy arena toward the belief that the state does indeed have a responsibility to ensure the successful transition of youth - a responsibility that requires programs and funding – this mentality has not yet spread throughout the system.

(3) Assessing and Addressing Youths’ Needs in the Continuum of Care

It is critical to understand the “continuum of care” that makes up the foster care system, because the differences among placements have considerable implications for issues of relevancy, accessibility, and awareness surrounding and mechanisms for providing services to assist youth with their transition from care. It is also important to understand the mechanics of and philosophy behind moving youth through the foster care system. Foster placements are not determined by the needs of youth alone; rather, the circumstances regarding the entrance into care, the area office responsible and the resources available all have implications for placement decisions.
Given the system’s emphasis on permanency and the desire to keep youth with their family of origin if possible, youth are only brought into the foster care system if it is determined that keeping youth with their family and providing wrap-around or “Family Based Services” is inappropriate. As a system, there is a push to maintain the youth in the family if at all possible both for C&P cases and CHINS cases. When youth do enter the foster care system, their case is reviewed by the Assessment Unit where an appropriate placement is arranged based on youth needs, previous involvement with the foster care system, and their home situation. After being assigned to a caseworker from the area office that serves the youth’s home community, youth are either immediately placed in a foster placement or temporarily sent to a “hotline” or temporary placement while an appropriate foster placement is determined. Alternatively, youth may be sent to a Bridge Home in response to an assessment that the youth is likely be returned home in the short term.

DSS has a mandate to keep youth in the least restrictive setting possible. The continuum of placements provided through the department provides different levels of care depending on youth needs. Additionally, within each category, there are different models of care. The more troubled or in need of services the youth, the more restrictive the placement required. Placement types, from most restrictive to least restrictive, are:

- Psychiatric Hospitals,
- Residential Facilities,
- Group Homes,
- Specialized/Therapeutic Foster Care, and
- Foster Care.
More restrictive placements provide more services onsite and restrict the youth’s contact with the community. The Department has guidelines encouraging a “step-down” process where youth in more restrictive settings are moved to a less restrictive setting as appropriate, ideally after no more than twelve months.

The more restrictive the settings youths are in as they approach their 18th birthday, the direr the consequences are likely to be. These youth have less access to resources, less contact with “the real world,” and are likely to have considerable difficulties with the transition to independence. Given the system’s emphasis on “stepping down” the level of care, these are the youth with problems too great for less restrictive settings.

**Figure 3: Differential Resource Allocation Based on Placement**

Temporary Placements

Youths’ entrance into the foster care system is often initiated as a response to a crisis that requires the expeditious if not immediate removal of the child from home.
Accordingly, the system requires a place to house youth while a longer-term placement and or services can be arranged. Massachusetts has two forms of temporary care available to house youth entering the system. The first of these is the ‘Hot-line’ foster home. These placements are essentially emergency placements and typically last between one and three days. The second form of temporary care available is the ‘Bridge Home.’ These temporary group home placements are made while DSS plans permanent placements for youth in the Department’s custody. Generally these youth are referred into the system through 51-As and stay in the Bridge Home placement for up to 45 days. The purpose of Bridge Homes is to remove the youth from the parent/guardian’s home, stabilize the situation, and ideally return the youth to his family. Approximately 40% of youth in Bridge Homes are returned to their families.20

**Foster Homes**

The least restrictive form of placement under the custody of DSS, there are two types of foster care placements: unrestricted and restricted. Unrestricted placements are those homes licensed by DSS to care for children regardless of whether the child and foster parent know each other. Unrestricted foster parents participate in a 10 week assessment and training known as the Massachusetts Approach to Partnerships in Parenting in addition to providing references, and passing criminal record investigation and a home study.

Restricted homes are otherwise known as “child specific homes.” A large percentage of this placement type consists of “kinship foster care,” which refers to placements of children with relatives. DSS tries to put youth in kinship care wherever

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20 School Enrollment of Children in DSS Custody Residing in Bridge Homes, Memorandum to School Superintendents from David Driscoll, Commissioner of Education and Jeffery A. Locke, Commissioner of DSS (Interim), August 13, 1999.
possible. Also included in this type are placements with other parties responding to the needs of this particular youth, such as teachers, neighbors, or family friends. Many youth actually find their own foster placements by recruiting the families of their friends. The restricted placements are not held to the same standards as unrestricted providers and therefore are not eligible to take in other youth.

As of December 1996, the MA foster care system consisted of 4,636 homes. Of these, 1,718 were restricted (child specific) with a capacity of 2,580 children. An additional 2,721 were unrestricted and had a capacity of 6,073 children. The remaining 197 homes with a capacity to house 254 children were unclassified. The need for foster homes is increasing as more children enter the system and the increasingly severe service needs of children in the system require more intensive support than before. Additionally, overcrowding in foster care homes has resulted in a DSS policy that restricts foster homes to no more than four foster children and six total children per home.\textsuperscript{21} The existing 4,636 homes can thus serve a maximum of 12,239 foster care children and an additional 6,515 non-foster care children. The ability to maximize placements is complicated by the system’s attempts to make appropriate placements with regard to special needs, ethnicity and geography.

Foster care placements are generally made within the youth’s home community. Youth will be placed in a foster care home within their DSS Area unless there is a compelling reason (generally involving the safety of the child) for DSS to place the child outside of his home territory. These decisions often stem from the extent or circumstances of the removal or gang involvement on the part of the youth — a

\textsuperscript{21} Watson 1996: p.6.
consideration that is becoming more common. Kinship placements may also result in
the youth being removed from their community.

In the continuum between foster care placements and residential programs are
specialized or therapeutic foster care placements. A therapeutic foster care placement
involves the placement in a home with a foster family and resembles traditional foster
care, but the intensity of the youth’s needs require additional attention. Therapeutic
foster parents receive specialized training, and one parent is expected to stay home with
youth on a full-time basis. Additionally, therapeutic foster homes are permitted to care
for only two foster youth at a time, whereas unrestricted homes can have up to four
foster youth in care. Though an effort is made to keep youth in their community,
placement in these specialized settings increases the probability that youth will be
removed from their community. Because these homes are not evenly spread throughout
the Commonwealth, utilization of therapeutic foster care is uneven in relationship to the
area office’s emphasis on keeping youth in their community.

Foster Facilities: Group Homes, Residential Programs and Psychiatric Hospitals

Youth aging out of care from foster care facilities often leave foster care without
any real connections or significant relationships. They have been isolated from the
community, haven’t been encouraged to utilize Outreach Workers and have spent their
time in an artificial setting in which a program takes the place of a parent. Staff,
regardless of their level of dedication, cannot make significant connections with every
youth who comes through their program. Youth often leave these programs without a
support structure or safety net. Without personal relationships to guide them, youth are
unlikely to be convinced of the value of remaining in the system any longer than
necessary.
Compounding this is the reality that youth aging out of care at this level have been unable to step down to foster care. These youth face difficulties that have prevented them from full integration into the community. The probability of these difficulties complicating or preventing a successful transition is significant.

"Massachusetts relies on residential settings for its children in care to a greater extent than just about any state in the nation. We have always had an excellent residential system and have come to reflexively rely on it. The unfortunate result is that we have failed to develop the full depth and array of community-based alternatives that other states have put in place." 22 In enacting the FY ‘03 Budget, the Commonwealth has given DSS the mandate to move children from residential settings to community-based care wherever possible." 23 In recent years, however, the residential care population has been increasing.

Table 1: Increasing Residential Care Population

<table>
<thead>
<tr>
<th>Date</th>
<th>Foster Care</th>
<th>Residential Care</th>
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</thead>
<tbody>
<tr>
<td>6/88</td>
<td>7,292</td>
<td>1,616</td>
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<tr>
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<td>6/97</td>
<td>10,158</td>
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</tr>
<tr>
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<td>N/A</td>
</tr>
<tr>
<td>6/99</td>
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</tr>
<tr>
<td>6/00</td>
<td>7,923</td>
<td>2,184</td>
</tr>
</tbody>
</table>

Source: http://www.state.ma.us/dss/Statistics/ST_outofhome.htm

22 Internal Massachusetts DSS Communication from Commissioner Harry Spence to DSS Employees, not dated.
23 Internal Massachusetts DSS Communication from Commissioner Harry Spence to DSS Employees, not dated.
The most restrictive setting in the placement continuum is the psychiatric hospital. DSS increasingly finds itself as part of the children's mental health system as families that cannot manage children exhibiting significant medical, emotional and behavioral problems turn to the state to provide assistance. According to Commissioner Spence, Massachusetts has the highest utilization of psychiatric hospital days of any state in the country. “Not because our kids are more messed up, nor are they better served.”

The Role of Commonworks: A Continuum in the DSS Continuum

Commonworks is a managed-care style social service system contracted by DSS to provide “community-based residential, specialized foster care, and aftercare services to adolescents aged twelve to eighteen” in DSS custody. There is a movement in the system towards utilizing Commonworks for all adolescent placements. DSS developed the concept in the late 1980s when it began having trouble placing high-risk youth in residential programs. At that point, DSS assigned youth to residential programs by sending a Request for Placement (RFP) to residential programs and sending the youth to the first program that responded. DSS realized that about the RFPs for the 10-15% of higher-risk youth were being returned and the youth weren’t being placed.

Commonworks was created as a response to the difficulties associated with placing these youth. Agencies signed on as Commonworks providers and in exchange for a higher pay rate, relinquished their right of refusal. Providers were thus unable to send back the most difficult cases. Youth are referred into the Commonworks network and become the responsibility of the area lead agency. It is, in effect, a continuum within a

25 http://www.commonworks.org/Pages/ProgramOverview.htm
continuum. Though most high-risk youth are placed with Commonworks, most adolescents in general are also referred into the Commonworks system.

Youth are referred to the Commonworks lead agency by the respective DSS Regional Office. The Commonworks lead agencies in each of the six regions work with networks of designated providers27 and are responsible for determining an appropriate placement for the youth. These Commonworks providers might also be DSS providers. The six Commonworks regions correspond to DSS Regions. And, like DSS area offices, the Commonworks lead agencies exhibit different mentalities in terms of placement decisions. The “Length of Stay Analysis” produced by Commonworks to identify regional differences in the average length of time youth spend in Commonworks placement is evidence of the difference. There is a statistically significant difference in the average length of stay between regions that ranges “from a low of 369.04 days in the Metro Region and a high of 507.17 days in the Central Region.28

(4) Available Resources and System Pressures

As the number of children in care expands and the amount of time children spend in the system increases, the number of foster parents is contracting and the percentage of foster care children adopted out of the system is declining.29 Compounding this strain on the system is the increasing complexity of children’s medical, behavioral and emotional problems and the burden of the increasing number of placements that foster care children must endure in the present system.

The number of foster homes is declining as a result of a number of policy decisions and additional requirements placed on foster families. Concerns for the safety

27 The Key Program, one of the five providers, covers two regions.
and protection of children in care have resulted in policy decisions that limit placements. At the same time, the institution of additional training requirements and the Criminal offender record information ("CORI") Requirement has served to limit the foster parent population. Additionally, the imposition of a limit on the number of foster youth that can be placed with a foster family30 and a commitment to providing geographically and culturally appropriate placements has served to further limit the number of placements.

Personnel and financial resource limitations also affect placement decisions. The more restrictive the placement, the more expensive it is. Budgetary considerations are but one of a number of forces encouraging movements to less restrictive settings. These considerations will be discussed further in Chapter Four.

Given the instability of the foster care experience and the system’s necessary emphasis on the immediate safety of youth within its care, poor outcomes are not surprising. Our nation’s foster care population is growing, as is the severity of their problems. More youths are entering foster care than are exiting, and the average length of time spent in care is also increasing. Fully 43% of Massachusetts youth in foster care during FY 2002 had been in continuous care of DSS for more than two years, and 21% had been in continuous care for more than 4 years.31 The recent increase in the number of young people entering residential care32 and the increased federal attention on outcomes for youth aging out of the foster care system provide both the impetus and the mandate for efforts to better understand current policies and practices and

30 A maximum of four foster children can be placed in any one foster home. The maximum total of foster and non-foster children has been set at six.
opportunities for collaboration between the foster care system and other providers of youth services.

The decentralized nature of the foster care system, both nationally and within Massachusetts, creates obstacles to the implementation of policy and programmatic change and effective monitoring and evaluation. The additional strain of high staff turnover and the potentially conflicting goals of child safety and family reunification serve to further complicate both service delivery and evaluation. In a system preoccupied with past and present crises affecting the children it takes into its charge for their own protection, consideration of the future is often of secondary importance.
Chapter Three: Transitions – Aging Out and Staying In

Aging Out v. Staying in the System at 18

The mission of the child welfare system centers on ensuring the safety and protection of the children within its care. While at one time this focus precluded the system from providing services to youth beyond their 18th birthday, several forces have combined to cause a philosophical shift regarding the system’s responsibility to young adults. Associated with this is a growing resistance to determining need based on which side of the 18th birthday – the narrow boundary separating childhood and adulthood – a youth falls.

Youth at this age are at various levels of development and have different needs and capabilities. Childhood trauma and the prevalence of loss often associated with the foster care experience results in developmental delays for some youth. Instability prevents them from developing at the same rate as their peers. The extension of services from age 18 to 21 addresses the fact that achieving independence at 18 is an unrealistic expectation for any youth. However, it only partially addresses the fact that foster youth are at widely different developmental stages at this age and that some may never be ready for true independence. “What is the magic of 21? For some of the kids in the system, that is no different than 12.”

The philosophical shift regarding DSS’ responsibility for youth aging out of the system was gradual and uneven. The DSS “Over-18” Policy communicates whether – and in what circumstances – youth can stay in care. The evolution of this policy in recent years is demonstrative of the changing perception.

33 Dawkins, Judge Nolan. CWLA National Conference Workshop B-28 Effective Discharge Planning for Youth Aging Out of the Foster Care System, March 5, 2003.
The DSS Over-18 Policy, as it was communicated in November of 1991, held that services to children were to be terminated when they turned 18. However, the policy provided the Area Director with discretion to approve the continuation of services beyond 18 in cases where youth were in need of financial support and were enrolled full-time in high school, a GED program, college or vocational training.\textsuperscript{34} In 1998, the Policy's continued ambiguity prompted a clarification. In this communication, the former Commissioner of DSS Linda Carlisle effectively changed the policy language from stating that Area Directors \textit{could} approve the continuation of services to stating that they \textit{should} approve the continuation of services: "I would like the department to continue to provide services to those youth over age 18 who are: in compliance with the service plan which has a goal of independent living; attending high school or college, participating in a GED program and/or a vocational training program; and demonstrating the potential to achieve their educational or vocational goals with support of the Department’s services."\textsuperscript{35}

Though this clarification served to further establish the successful transition from care as a component of the DSS' responsibilities to youth, the policy falls short of a mandate and has resulted in inconsistencies in interpretation and application across area offices. Further, the former Commissioner's statement that "Our intent is to encourage and support youth who have overcome challenges and established positive life goals" coupled with the condition that youth "demonstrate the potential to achieve educational and vocational goals" seems to encourage differential treatment. DSS, it

\textsuperscript{34} Internal Massachusetts DSS Communication. Policy: Continuation of Placement for Certain youth Over 18, November 15, 1991. 
\textsuperscript{35} Memorandum to Regional Directors and Area Directors from the DSS Commissioner Linda K. Carlisle. Policy Concerning Youth in Care Over Age 18. June 25, 1998.
seems, wants to help those youth who can help themselves. The better position a youth is in to succeed, the better position they are in to take advantage of DSS resources.

The Youth Advisory Board (YAB) has taken issue with the uneven application of the policy across the state and is working with the current Commissioner to develop a uniform Over-18 Policy. Because of the apparent discretion that area offices exercise in interpreting the policy, the YAB has submitted a request to the Commissioner asking for an Over-18 Policy that is explicit in its requirements and conditions for youth to stay in care. While one area office may determine that a youth who attends school part-time and works meets the “attend a full-time school program” criteria, another area office will argue that the youth is not fulfilling requirements. Yet another area office will not only insist that the youth attend school full-time, but will stipulate that the youth maintain a certain GPA – a GPA that may exceed the requirements of the school or program the youth attends. Additionally, the “maintain compliance with service plan” criteria can provide the opportunity for discretion as a single missed appointment may cause a youth in one area to be in violation while another office may be more lenient. Though the conditions required for continuance in care may not be accessible to everyone, the YAB and the Commissioner are collaborating to establish policy criteria to ensure that all youth face the same eligibility requirements.

Much of the inconsistency in interpretation can be attributed to the differences in perception regarding whether the ability to stay in care is the right or the privilege of foster youth. In a system with scarce resources, the desire to give a youth multiple chances to get his act together and stay in the system is tempered by the recognition that there are younger children competing for the system’s scarce resources. These factors
combined with the difficulty of policy dissemination across a complex and decentralized system explains a lot of the variations across offices.

Imposing limitations on the discretion of area offices to interpret the Over-18 policy also presents potentially adverse consequences. In some instances, DSS has felt a particular responsibility towards youth who have grown up in foster care and/or had an exceptionally traumatic career in foster care. The ability to loosely interpret the policy has enabled DSS to make exceptions for these youth and allow them to stay in care without strict compliance with eligibility requirements.

The philosophy of the foster care system has gradually incorporated a general acceptance of responsibility for foster youth transitioning from the system. This not only involves expanding the definition of "child" or "dependent" to include young adults, it also demonstrates an increased accountability for the outcomes of youth in care. There is a growing recognition that ensuring the safety of youth has implications beyond the physical and the immediate and that the ramifications of actions and experiences of childhood extend beyond the 18th birthday and the time spent in foster care.

Expanding the scope of the systems' responsibility to include older youth doesn't accompany a corresponding expansion of resources. Though the DSS budget and Chafee Funds are tied to the number of youth in care, providing additional services to this population puts an additional strain on already stretched resources. DSS must make decisions about how to allocate and target resources to have the greatest impact. The former Commissioner's statement "By investing in this crucial and final stage of youth's development, I believe that we can assist them in making a lasting difference in their
lives”36 gives the appearance of serving all youth equally. However, given the significant variety in foster youths’ stage of development as they transition from care, this statement illustrates the system’s emphasis on providing services to youth for whom the services might be the difference between making a successful transition or not. Decisions regarding eligibility requirements and services offered have differential appeal and application for youth.

With the understanding of the current unevenness in the application of the policy, what real opportunity is afforded by an 18 year-old foster youth’s ability to sign a voluntary placement agreement to remain in foster care? Theoretically, the foster care system provides all youth with an opportunity to continue services at 18. In reality, the decision and the ability to make the decision to remain in care are very different depending on the youth. The appeal of staying in foster care and the eligibility to do so are affected by the youth’s experience in the foster system. Some of the differential factors include the youth’s history of compliance with service plan, movement and location within the system, the youth’s opinion of the system and ability to see value from remaining, and his ability to access resources such as the Adolescent Outreach Program.

The Best Transition is No Transition

As the preferred outcomes in the foster care system are adoption and reunification, any other transition from care is second-best. But in terms of prospects for youth still in the system at 18, the preferred transition alternative is for there to be no transition at 18. Youth who see the benefit associated with remaining in DSS custody

and who can work within the requirements attached to voluntary placement are considered aging out success stories. To not age out is thus to age out successfully. For the most part, these youth are the ones finishing high school, getting their GED, going to college, or getting vocational training. And they are accepting the support of the system as they pursue these goals.

Youth are choosing to stay in the foster care system after age 18 at an increasing rate. DSS's Associate Director for Adolescent Services Maureen Fallon Messeder estimates that approximately 50% of youth remaining in the system after 18 are doing so to pursue education goals. Others will be in the system until age 22 when they transition to an adult-serving substitute care agency.

Table 2: Youth in DSS Care: FY 2001

<table>
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</thead>
<tbody>
<tr>
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</tr>
<tr>
<td>15</td>
<td>925</td>
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<td>17</td>
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<td>18</td>
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<td>22</td>
<td>17</td>
</tr>
<tr>
<td>23</td>
<td>2**</td>
</tr>
</tbody>
</table>

Source: Chafee Foster Care Independence Program Summary 2002

*18+ (approximately 50% are closing during the 18th year.)
** Can stay until 23 if getting undergrad degree

These youth are ostensibly taking advantage of the opportunity afforded to them by the recent systems change; they are able to recognize and utilize DSS as a resource. The fact that this is happening at all demonstrates a shift in behavior on the part of the youths in question in addition to a shift in the system's practice. Most youth in foster care look at their 18th birthday as a day of liberation from a frustrating and
disappointing system that has represented more losses than gains, and their anticipation of this liberation combined with negative feelings about foster care overshadow feelings of uncertainty about the future.

By providing this support contingent on educational requirements, the system is attempting to mitigate its failings by allowing youth who have fallen behind in school a real opportunity to finish – an opportunity that very likely would not be possible without the system’s support. And the system is also targeting its best – enabling the best, brightest and most compliant foster youth the opportunity it has not afforded the rest. If youth perform, DSS will keep them in care.

Youth remaining in the care of the system are eligible for a suite of resources from DSS and through the Chafee Program. The most critical of these include housing and the continued support of caseworkers and Adolescent Outreach Workers. Additional important resources including Tuition Waivers for state schools, scholarship and grant monies for education-related expenses and tuition, vocational training and preference for some state jobs, discharge support and independent living support are available to any youth in care of the system at 18 who entered the system as a C&P. They are critical supports for youth leaving care, but are for the most part one-time supports that provide skills or a hand-up - but no safety-net.
Aging Out Anyway

Aging out can mean that (1) DSS makes the decision to discharge the youth from foster care or that (2) the youth opts out of care, refusing further services. The reasons for leaving care at 18 despite the option to stay in are as varied as the youth themselves. Having said that, there are a few key reasons for youth not staying in DSS care at 18. These reasons have to do with eligibility, appeal and information.

Eligibility

Not all youth are eligible to stay in foster care after they turn 18. Though some are rendered ineligible due to choices they have made, other youth are restricted due to circumstances arguably beyond their control. A youth can be determined ineligible for continued placement for the following reasons: inability to demonstrate financial need, non-compliance with their service plan, or failure to engage in continued education on a full-time basis.
The Chafee legislation increased the amount of assets that youth could have and still remain in care from $1,000 to $10,000, but youth having more than $10,000 would be determined ineligible for continued care. Interpretations of what constitutes a violation of the service plan vary from office to office. While one office might very strictly interpret the condition such that a missed appointment or minor violation can render a youth ineligible for continued placement, another office might be more lenient and only consider a youth in violation after flagrant or continual violations of the service plan. As mentioned above, some of the variation in the interpretation of this condition may be a result of a youth's C&P or CHINS status or the circumstances of their career in care.

The requirement of full-time educational pursuit is unpalatable to some youth and unachievable for others. For some youth, learning disabilities or other obstacles have combined to make school a place of failure they only want to escape.

Though not the norm, there are foster youth who are able to finish high school on time and thus get their degree or GED in or around their 18th year. For these youth, continuing on in care requires enrolling in a post-secondary education program. This requirement is not consistent with the interests or ambitions of all youth. A lack of interest in or preparation for post-secondary education at 18 does not mean that youth don’t need or want support any more than a high-school degree represents adequate preparation for adulthood. Other states have made the decision to extend eligibility to youth participating in employment programs such as JobCorps. In doing so, these

foster care systems have extended the departmental safety net to youth for whom education isn’t a goal or isn’t an option.

DSS must provide youth whose permanency planning goal is independent living with a “Notice of Intent to Discharge” within 90 days of the anticipated date of discharge. “The plan must include a detailed description of the discharge resources for the youth including: appropriate and stable housing arrangements, employment/source of income, and appropriate community resources.” If appropriate housing cannot be found, the youth should not be discharged.

For some of these youth, the “appropriate and stable housing arrangement” identified during discharge planning is the same house the youth was removed from years earlier. Though this placement might be appropriate for some, for others it may be only a step backward into an unstable situation. “Transition implies a transition to something,” but often kids have nowhere to go and end up returning to their families. The ramifications of inadequate discharge planning are significant for this population.

Adolescence is a complicated and confusing time for any youth. By preventing youth from reentering care after discharge, the system is discounting the difficulty youth have finding direction at this point in their lives and reinforcing the importance of effective discharge planning. There is no cushion for them: no option to leave care and then return after they have chosen a path to pursue or are pushed by a first brush with independence to see the value in continued education and a continued stay in foster care.

40 Dawkins, Judge Nolan. CWLA National Conference Workshop B-28 Effective Discharge Planning for Youth Aging Out of the Foster Care System, March 5, 2003.
Appeal

For many youths, their career in foster care has been characterized by stress and upheaval. Multiple placements, disappointments and rejection have left scars and dissatisfaction with the system. For others, the system has failed them in terms of fulfilling the ultimate objective of adoption or reunification. The system sets itself up for rejection by telling children that it is no longer responsible for them at age 18. Why would these youth volunteer to continue in its care? “Adolescents aging out of care are more likely to establish independence because they are dissatisfied with foster care or because state support ends rather than for more positive, opportunity-oriented reasons such as attending college.” Without a concerted effort on the part of Outreach Workers or other seemingly “independent” individuals, it is unlikely that these youth can be convinced of the benefits of remaining in the system that has failed them. Unfortunately not all youth have access to Outreach Workers, and those who do may not get it early enough or often enough. (I will further discuss this issue within the discussion of the Chafee Program.) Though youth are eligible to have limited access to Outreach Workers at 14 and regular contact at age 16, in a system marked by scarce resources youth can remain on the waitlist for years as older youth – those approaching their 18th birthday – have priority over younger youth. Resourceful caseworkers will put youth on the waitlist early, knowing that the demand for Outreach Workers is greater than the supply.

Information

The ability to make an informed decision regarding whether or not to voluntarily sign themselves into foster care beyond age 18 requires that youth understand the benefits associated with staying in care, are able to comprehend the realities of

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achieving independence from the system at 18, and understand how voluntary placement will work. Only some youth in care are supplied with this information, and even fewer are in a position to have it demonstrated to them.

Unfortunately, foster youth in residential placements have less contact with the community and less ability to obtain information regarding the incentives and consequences of aging out on their own. They are significantly less likely to have any contact with Outreach Workers or anyone who will encourage them to find out what independence means for an 18-year-old. These youth have never known anything but compulsory programs in DSS and may not understand or be able to trust that the decision to stay in care after signing a voluntary placement agreement is truly voluntary. However, these youth are not targeted by Outreach because the substitute care providers operating the residential programs are responsible for the independent living skills training in those programs.

Outreach Workers attempt to make contact with all youth regardless of placement before they are discharged from care. This effort is partially an effort to understand and mitigate the discrepancies found in the administration of the PAYA curriculum between residential programs. In these meetings, Outreach Workers try to communicate the resources available under Chafee and the benefits to staying in care, as well as ensure that youth have a discharge plan. Outreach Workers try to stress that youth who stay in foster care can opt out at any time, but that youth who age out cannot opt back in. However, the impact of a one-time meeting cannot mitigate the negative associations formed over years in foster care.
Chafee Program: Support and Safety Net?

The Chafee Program was established to provide resources for youth who have aged out of foster care or are likely to do so."42 Additionally, the Chafee program plays a significant role in keeping youth in care via the improved communication afforded through the Outreach Program. In Massachusetts, the Chafee Program is administered through the Department of Social Services. Fifteen percent of the more than 11,000 children in care have a service plan goal43 of independent living and are thus primary targets for Chafee resources.

Though Chafee funding must be used to provide programs and services that address the Chafee Independence Program independent living service goals,44 the Commonwealth has considerable discretion in establishing their Chafee program. The Chafee Act leaves the state responsible for determining who benefits from services, but does provide guidelines as to who can benefit from room and board. In Massachusetts, the Chafee program consists of discharge support, independent living support, Adolescent Outreach Workers, educational and employment stipends, and transitional living beds. Discharge support provides assistance to pay for start-up costs for 18-21-year-olds "successfully" discharging from DSS. Eligible uses include first months rent, the security deposit, or purchasing essential furniture. In order to receive this support,

43 Service Plan goals include: Reunify Family, Adoption, Living Independently, Long-Term Substitute Care, Guardianship, Stabilize Intact Family, and Transition to Adult Service Agency.
44 Chafee Independence Program independent living service goals:
1. Identify children who are expected to be in foster care to age 18 and help them make a transition to self-sufficiency.
2. Help these children receive the education, training and services necessary to obtain employment
3. Help them prepare for and enter post-secondary training and education institutions
4. Provide personal and emotional support for children aging out of foster care
5. Provide a range of services and support for former foster care recipients between ages 18 and 21 to complement their own efforts to achieve self-sufficiency and to assure that the program participants recognize and accept their personal responsibility for preparing for adulthood.

-43-
the youth must be able to afford the ongoing costs of the housing. Independent living support provides 14-21-year-olds pursuing independent living with money for “independent living related items” such as transportation costs, membership dues, and education-related expenses. A significant portion of Chafee funding goes towards staff salaries and administrative expenses.

That states are required to use some of the funding on services for 18-21-year-old youth who had aged out of care is new under the Chafee legislation; the former Independent Living Initiative had no focus on youth transitioning from care. Chafee also allows for the use of up to 30% of funds for room and board and permits states to extend Medicaid to youth emancipated from care. Chafee also enabled states to lower the minimum eligibility age below 16. Massachusetts has maintained age 16 as the lower limit on accessing IL Services. Additionally, the Act increases state accountability for outcomes for youth aging out of care. It requires states to collect data to track the number and characteristics of youth receiving services under Chafee, the type and quantity of services being provided, and State performance on outcome measures developed by the Federal Department of Health and Human Services (DHHS). There is speculation that states will not track DHHS outcome measures for the following reasons: Other priorities take precedence; outcomes assessments are expensive – possibly more expensive than the sanctions that will be imposed for noncompliance; and the questions are too numerous and complex.

47 Many states have lowered the age that youth can access Independent Living (IL) services to age fourteen and some states have lowered it as low as 12 (Hawaii) or 13 (North and South Carolina and Washington).
Outreach Program

The Outreach Program is the critical piece of the Massachusetts Chafee program and the effectiveness of Outreach is directly and positively related to the utilization of other components of the Chafee Program and the numbers of youth staying in care. Accordingly, almost 70% of Chafee funds are used towards the Outreach program. In a bureaucracy whose inertia is often broken only by crisis, the Outreach Team represents a cohesive unit providing a consistency of service that isn’t compromised through decentralization. The team acts as a streamlined intervention that can respond to needs and disseminate information with relative speed and accuracy. And by virtue of their federal status, Outreach Workers aren’t burdened by some of the constraints and conflicting priorities confronting caseworkers.

A team in the central office is able to communicate directly with the Outreach Workers implementing policy. This is a much different dynamic than the three-tiered system in DSS. This is not to say that Outreach can make up for the shortcomings of the system; the scale of the Outreach Program is too small and its reach is limited. However, for the youth able to access this resource, Outreach can make a difference.

There are 23 Outreach Workers49 in the state – nearly one per office. Each fulltime worker has a caseload of 15 active cases, where the youth and worker meet weekly. The Lowell Area Office houses an Adolescent Outreach Worker and an Outreach Supervisor.50 The Outreach Program in Lowell is both representative of the Outreach network and its best practices. In March 2003, there were 89 youth in DSS custody with the goal of independent living in the Lowell Area. The list of youth waiting to get on the caseload of the Lowell Outreach Worker was as long as his caseload.

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49 The Adolescent Outreach Team consists of nineteen Outreach Workers and four Supervisors.
50 Supervisor for Lowell as well as Haverhill, Spencer, Worcester, Leomister, and Fitchburg.
The outcomes for graduates of the Outreach Program are dramatically different than for the general foster care population. In 2000, 80% of the program’s graduates were employed, 30% were attending a 2-year or 4-year college, 93% had identified a support system, 77% were using a personal budget, and 93% were in a stable living situation.\textsuperscript{51} This relative success, though correlated with participation in the Outreach Program is not definitively caused by Outreach. The Outreach Program is targeted to youth who are good candidates for independent living through the following mechanisms. Case workers are more likely to recommend youth they think will be successful, Outreach services are intended for youth in foster homes – youth who are living in the least restrictive setting – and youth who have had better experiences in care are more likely to be receptive to participating in a voluntary program.

Outreach Workers attempt to meet with all youth prior to discharge. In an effort to mitigate the reality that Outreach Workers cannot have relationships with all youth preparing to transition out of care, Outreach Workers also have “contacts” with youth who want one-time or occasional assistance but either don’t want a commitment, haven’t been able to get off the wait list, or have already transitioned from care. Workers also run monthly workgroups for younger youth.

Ideally, Workers would maintain a weekly contact relationship with all youth with a goal of independent living for two years before the transition from care. Due to resource constraints, the horizon is usually much shorter than that and the number of youth on the caseload of an Outreach Worker is limited. In practice, waitlists as long as

\textsuperscript{51} Application for FFY 2001 Title IV-E Independent Living Funds of the Chafee Foster Care Independence Program and State Plan for FFY 2002-2004.
the Outreach Worker's caseload are kept and younger youth requesting services are bumped by youth on the brink of aging out of care.

The benefit of a one-time meeting cannot compare to an ongoing relationship. The value of discharge support is likely to be very different depending on the other supports that youth have. The $1,500 in discharge support used towards first months rent and security deposit will not help if youth are unable to get an apartment or cannot find a job. Youth able to create a discharge plan and walk through the discharge process with an Outreach Worker are in a better position to use the available resources effectively and to discharge successfully.

The Outreach Workers are beginning to see youth they met while preparing for the youth's discharge coming back for support after having trouble living on their own. This phenomenon is a result of the evolution of the program in terms of its relative newness and Outreach Workers' more recent attempts to make contact with all foster youth before discharge. Fully one-third of contacts made in the Lowell area are from youth who have been discharged from care. In recognition of this area of need, Outreach Workers have been establishing relationships with homeless shelters in their areas. Workers provide shelter staff with Outreach contact information and work to integrate questions regarding foster care involvement into the intake process. Though the system is unable to admit these youth back into care once they have been discharged, Outreach Workers can provide support with independent living.

Part of the job of Outreach Workers involves public relations duties for the Outreach Program and communicating the needs and circumstances of foster youth. Outreach Workers are making connections within DSS and to homeless shelters, employment programs and other community groups to raise awareness of the Outreach
Program as a resource and addressing questions, concerns and ignorance regarding foster youth.

The Outreach Workers are also key players informing youth and caseworkers of the other services and supports available through Chafee. Most of the referrals to Outreach are from case workers, others come from therapists, prisons and homeless shelters. The Outreach Program doesn’t generally get referrals from residential programs or group homes because the workers in the homes are certified in Massachusetts' independent living skills program – Preparing Adolescents for Young Adulthood (PAYA) - and are supposed to perform essentially the same function as Outreach Workers.

Preparation for Independent Living

According to Chafee, states are supposed to provide independent living skills to all children at risk of aging out of foster care. Chafee does not provide guidance regarding type or format of training, but says that states should offer financial management, preventative health and basic skills training. The primary criterion for Chafee services is need rather than age or placement type.\footnote{The Foster Care Independence Act of 1999 and The John H. Chafee Foster Care Independence Program, Technical Assistance Brief (2002). Permanency Planning for Children Department. Reno, Nevada: National Council of Juvenile and Family Court Judges.} Or at least it is supposed to be.

Though the PAYA independent living skills curriculum and the associated incentives are accessible to youth over 14 the administration of the PAYA curriculum looks very different depending on the placement type. While PAYA in a residential program might mean sitting with a workbook in a room for two hours, PAYA might be administered with hands-on, real-world activities in another program or through the
Outreach Program. In one foster home, the parent might regularly work on budgeting activities with youth while youth in another home may have never heard of PAYA.

DSS's Standards for Independent Living mandate that life skills assessments be performed every six months and that two hours weekly of life skills PAYA training be provided to youth by substitute care providers. It is estimated that approximately 55% of adolescents aged 14-23 are participating in the PAYA program. DSS is undergoing a significant effort to train additional PAYA life skills trainers, 250 were added in 2002. In this program, the substitute care provider, foster youth and case manager collaboratively evaluate the youth's life skills strengths and needs in an effort to identify and prioritize life skill training needed to prepare youth for independent living. Once skills have been prioritized, the youth begins working on the appropriate life skill module of the PAYA curriculum.

What does it mean to prepare youth for adulthood and independent living? It involves providing them with a mechanism to acquire the financial, social, employment skills, education, and housing they need to succeed as independent adults. It also means providing youth with a support system. This can be done by enabling youth to rely on the system and clearly communicating how they can do so, providing knowledge of external support systems and working with them to build their own supportive networks. It means enabling youth to make mistakes and ensuring that when they do, there will be a safety net for them.

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53 Chafee Foster Care Independence Program Summary 2002. p.5.
54 Application for FFY 2001 Title VI-E Living Funds: p.19.
55 Chafee Foster Care Independence Program Summary 2002. p.3.
Without this safety net, life is precarious for foster youth. Even if they age out successfully, they are often one mistake or misfortune away from homelessness or other negative outcomes. According to Courtney/ Piliavin’s 1998 Wisconsin study, fewer than 50% of youth had $250 or more upon leaving care. Without a support system, there isn’t much room to make mistakes. Even if a youth ages out and manages to avoid the negative outcomes that plague this population, goes on to college and manages to find a stable job and become an active citizen, if that youth has nowhere to go for support, for college vacations, or for emergencies – the system has failed them.57

Chafee legislation holds that permanency planning and acquiring independent living skills are not mutually exclusive and that planning for independent living and the transition to adulthood should not preclude attempts to achieve permanency. Permanency is second only to safety in this system, and yet a variety of mechanisms within the system fight permanency and stability at every step.

The ability and willingness of youth to utilize the resources and supports provided through the DSS and the Chafee Program is influenced by the system’s emphases on permanency and on education and the implications of those relative emphases on the lives of youth. Chapter Four will examine the role of Permanency in the foster care system and the transition from care and Chapter Five will examine the role of Education in the system and in the transition from care.

57 Frey, Lauren. CWLA National Conference Workshop C-12 Lifelong Family Connections for Adolescents in Foster Care, March 5, 2003.
Chapter Four: Achieving Permanence in Temporary Care

Permanency and stability are central tenets of the child welfare system and youth development. The objective of the system's initial intervention into a family situation is to stabilize an unstable or unsafe situation. After this initial intervention, the focus shifts to achieving permanency for the youth — initially through reunification and subsequently through adoption if reunification is not possible. However, the narrow pursuit of permanency can be an obstacle to stability as the longer term objective overshadows shorter-term concerns. The pursuit of permanency and stability in child placements has long been a struggle for the child welfare system and is a causal factor in the creation of the foster care system.

The movement from the utilization of orphanages to reliance on foster care placements in the post-WWII period resulted in part from a belief that the role of the child welfare system should be one of temporary intervention rather than a permanent solution. The advent of foster care as a system of care was a response to dissatisfaction with the orphanage system, changes in child labor laws that raised the cost of institutional care, and a belief that "any family care was better than institutional care."58 The theory that foster care is temporary helps to explain the lack of emphasis on building and maintaining continuity of relationship or of place that could provide stability for foster youth.

Because the pursuit of permanency for youth has focused on reunification or adoption, the foster care system is geared toward having youth achieve one of these two options. However, permanency can be and has been achieved for youth in both

traditional and non-traditional ways. Though contrary to the vision of foster care as merely a temporary solution, the best outcome for youth in care – outside of leaving care through a successful reunification or adoption – is to be placed with a "good" foster family and remain with that family throughout their time in care. The reality is that this outcome is impossible for many youth and elusive for others.

The foster care system's reliance on adoption and reunification as the preferred outcomes for its youth means that it is at the mercy of circumstances largely beyond its control. However, for one out of every ten children, foster care is permanent care, given that they will spend more than seven years in the system. By embracing the reality that foster care is not always truly temporary, the foster care system can define a model that creates permanence and stability without abandoning the pursuit of permanence outside of the system.

What does permanency mean for foster youth? The youth best served by the system are those who achieve permanence on two levels. Effectively, they have stability of placement within foster care (permanency as a means) and are able to find a permanent outcome (permanency as an end) through foster care. Achieving permanency needs to be seen as both a means and an end to successful outcomes for youth.

Permanency as a means essentially involves creating or preserving stability in the youth's environment and relationships. Youth must be presented with a consistent set of messages and expectations from home, school and community. When the exclusive emphasis of the system is permanency as an end, decisions are made with that end in mind that undermine the benefits that can be derived from establishing a stable environment and relationships within foster care.

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Sage’s adaptation of Bronfenbrenner’s Ecological System’s Theory (Figure 4) depicts a child interacting with the world through the family system. In the context of the family system, the child operates in the natural environments of his school, work, church and friends. Influences of the media, government, and societal beliefs and values are also filtered through the influence of the family system. Youth transplanted into foster care are often removed from all of their natural environments and forced to adapt to a new set of environments and associated expectations.

**Figure 4: The Family System: Child As Target**

![Diagram of the family system with child as target]
Ironically, the narrow pursuit of permanency through adoption or reunification can result in missed opportunities to achieve permanency for foster youth. These opportunities are missed as decisions are made in light of safety considerations, permanency as an outcome, and constrained resources. By not properly valuing and/or facilitating the preservation of youth's existing environment and relationships, the system contributes to the youth's instability and weakens or removes the youth's support structure. Though circumstances have necessitated the foster youth's removal from the family home, it is often not necessary to remove the youth from community, school, church and other family members. Rather, these separations are a result of insufficient resources and the failure to properly prioritize stability.

As a child moves through the foster care system, service plan goals are identified. The most prominent of these goals are “Family Reunification” and “Adoption”; however, the likelihood that either of these will be achieved is inversely related to the length of time in the system and the age of the youth. A goal of adoption and the pursuit of independent living skills are often seen as mutually exclusive, to the detriment of the youth.

As youth enter the teen years, goals of adoption are changed to goals of independent living. (Table 3) In some cases, this is in response to the changing needs and desires of the youth; in others, however, it is not. The change to a goal of independent living is more often a reflection of system dynamics than the needs of youth, but is a service to neither. “A decision to provide independent living services to a child does not absolve that state from continuing to make reasonable efforts toward permanence for the child...enrollment in independent living programs can occur
concurrent with continued efforts to locate and achieve placements in adoptive families." 60

Table 3: Youth in Foster Care by Age and Service Plan Goal

<table>
<thead>
<tr>
<th>Service Plan Goal</th>
<th>6-11 years</th>
<th>12-17 years</th>
<th>18 years or older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reunification</td>
<td>33%</td>
<td>33%</td>
<td>2%</td>
</tr>
<tr>
<td>Adoption</td>
<td>46%</td>
<td>7%</td>
<td>1%</td>
</tr>
<tr>
<td>Independent Living</td>
<td>0%</td>
<td>21%</td>
<td>76%</td>
</tr>
<tr>
<td>Long-Term Substitute Care</td>
<td>8%</td>
<td>24%</td>
<td>5%</td>
</tr>
<tr>
<td>Guardianship</td>
<td>9%</td>
<td>5%</td>
<td>0%</td>
</tr>
<tr>
<td>Stabilize Intact Family</td>
<td>3%</td>
<td>6%</td>
<td>2%</td>
</tr>
<tr>
<td>Long-Term Care w/ Adult Service Agency</td>
<td>0%</td>
<td>2%</td>
<td>14%</td>
</tr>
<tr>
<td>Unspecified</td>
<td>1%</td>
<td>2%</td>
<td>0%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>


Effectively the acquisition of independent living skills has become a proxy for permanency for those youth set to leave foster care without being adopted or reunified. Yet, "permanency is not a plan or a process, it is a relationship." 61 And, the acquisition of independent living skills "is not a [permanency] goal. It should be a service we provide." 62 The identification of youth likely to age out of the system without being adopted or reunified puts an additional responsibility on caseworkers and system

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61 Frey, Lauren. CWLA National Conference Workshop C-12 Lifelong Family Connections for Adolescents in Foster Care, March 5, 2003.
players to make sure those youth gain the skills and competencies necessary to achieve success in their independence. However, there is nothing in the preparation for independent living that is incompatible with continued pursuit of the goals of adoption or reunification; the acquisition of independent living skills cannot substitute for efforts to create permanence for youth through the facilitation of a support network. Permanency and a successful transition from care require a focus instead on inter-dependent living. The system needs to identify the support systems that the youth already have and strengthen them. 63

**How the system works towards permanency**

As foster care was intended to be a system of temporary care, it holds that permanency can only really be achieved by leaving the system. The foster care system was designed to achieve permanency through facilitating exits from the system and to a large degree, it still functions this way. Through successful interventions into the family of origin the child welfare system can protect the child and provide the family with services and support in order to ensure a safe environment for the child. Alternatively, if reunification is not an option, the foster care system can protect the child until such a time as the child can be adopted out of the system, achieving the second permanency outcome.

The decision not to pursue reunification is difficult to make. To a fault, the foster care system attempts to reunify youth with their family of origin. In some instances, youth are shuttled back and forth between foster care and their family of origin as failed reunification attempts lead to further C&P reports. Efforts to adopt children are often

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stalled because of the inability to secure a decree allowing a DSS petition to dispense with the need for parental consent for the adoption of a minor child – to sever parental rights. Because the C&P hearings are heard in district court and the motions to sever parental rights are generally heard in probate court, the judge who has to rule on the severing of rights usually has limited or no knowledge of the youth’s family situation and may refuse to sever rights.

In a number of jurisdictions across the country, the Model Courts have established the “One Judge One Family” program in an effort to mitigate this system failing wherein adoptions can be stalled or prevented by a negligent parent. In the Model Courts, all of a particular family’s court actions are seen by the same judge. In other words, every time a particular youth or any of their siblings, cousins or other family members goes before the court, they are seen by the same judge until they achieve permanence through reunification or adoption. This mechanism ensures that judges are familiar with family dynamics affecting the youths and the families coming before them, and enables them to make the tough decisions that judges in the Massachusetts system feel they are not able to. Additionally, these Model Court judges have expanded their role to take a proactive interest in the lives of the youths who

64 Known as a “210” because it is subject to Massachusetts General Laws Chapter 210: Section 3. Dispensing with required consent in certain cases. A juvenile court or a district court shall enter a decree dispensing with the need for consent of any person named in section 2 to the adoption of a child named in a petition filed pursuant to section 24 of chapter 119 in such court upon a finding that such child is in need of care and protection pursuant to section 26 of said chapter 119 and that the best interests of the child as defined in paragraph (c) will be served by such decree. The entry of such decree shall have the effect of terminating the rights of a person named therein to receive notice of or to consent to any legal proceeding affecting the custody, guardianship, adoption or other disposition of the child named therein. Facts may be set forth either in the care and protection petition filed pursuant to said section 24 of said chapter 119 or upon a motion made in the course of a care and protection proceeding, alleging that the allowance of the petition or motion is in the best interests of the child.

65 Currently, these cases can either be heard in probate court (210s) or the judge that did the original c&p can hear the case if it comes in as a 3?? There are efforts to pass legislation to get cases involving severing of parental rights to be heard in district court.
appear before them and may follow-up on issues related to the youth's education, employment, and relationships.66

The Adoption and Safe Families Act of 1997 (ASFA) was passed in response to a growing concern regarding children's long stays in foster care and the dramatic growth in youth in care. An increasing number of youth were in care for periods of more than five years, and between 1980 and 1998, the number of children in the care of the child welfare system doubled to 510,000.67 ASFA attempts to address the difficult relationship between child safety and keeping a family intact.

The Act accelerates the timeframe for permanency hearings and hearings regarding the termination of parental rights. ASFA requires that permanency hearings be held within twelve months of a youth's entrance into foster care and that efforts to sever parental rights be initiated for youth who have been in DSS custody for fifteen out of the past twenty-two months.68 However, these changes might not have much of an impact on youth transitioning out of care.

If a child's permanency goal is something other than adoption, they will be exempted from the termination of parental rights requirement. Only 7% of 12-17 year-olds identify adoption as their service plan goal;69 only 7% of 12-17 year-olds are affected by the requirements of the ASFA. In contrast, a full 46% of 6-11 year-olds identify adoption as their service plan goal. The disparity in these numbers coupled with the consistency in the number of youth in each age group pursuing reunification lend

68 www.acf.hhs.gov/programs/cb/laws/pi/pig9802.htm
credence to the assumption that many of the 12-17 year-olds with a goal of independent living previously pursued adoption.

**How the system works against permanency**

*We tell the kid, ‘we’re removing you and finding a substitute place.’ We look and look and then for some, the bell rings and you’re 18.*

One of the primary barriers to both permanency and stability for adolescents is that often permanency is not considered to be a priority. As youths approach adulthood, the system’s emphasis shifts toward preparing the youth for independent living and finding a supportive family situation is no longer considered as critical as it was when they were younger. It should be mentioned that foster youths may actually reinforce this shift by rejecting the idea of adoption. The rejection of adoption is often a result of the youth’s *own* fear of rejection, loyalty to their birth family, lack of understanding of options for permanency or wanting to stay with their siblings.

By limiting permanency outcomes to adoption, reunification or independent living — each exclusive of the other — the system is missing opportunities for youth to achieve some type of permanency through the cultivation of personal and systemic relationships within foster care. In overlooking the value of these potentially stable, long-term relationships, the system sets youth up for failure. Foster youth lose personal and system support upon removal from their family of origin and subsequent separation from their school, friends and community. Transplanted into foster care, the youth is left to drift as the system misses opportunities to provide any consistency into the care

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70 DSS Commissioner Harry Spence at Tufts Panel, March 27, 2003.
of the youth by maintaining existing support structures or facilitating the formation of new ones.

An exception to this is the youth's case worker who stays with the youth throughout his career in care. However, even this dedicated source of consistency and support is often temporary. In a Vera Institute of Justice study, foster children often “cited the frequent turnover of caseworkers and rarely made an effort to build relationships with them.”72 Youth in the foster care system are constantly saying goodbye to people – including the caseworkers they are encouraged to trust. Youth are not developmentally set up to say goodbye so often. “Youth need someone to say – I'm not going to go away.”73 Not only does the system neglect to build support networks and stable relationships for youth, the youth that is able to build supportive relationships generally does so in spite of the system.

Lauren Frey of Massachusetts Families For Kids (MFFK) tells the story of a “graduate” of the foster care system who went to college, but when filling out a form answered the question ‘Who do you call in case of emergency?’ with “Call 911, I guess.” Though the youth was a system success story in terms of resiliency and achievement, she had no support network. The MFFK Lifelong Family Connections model is based on the belief that supportive connections to an adult or family are essential elements of successful transitions to adulthood and that “by partnering with youth, we can identify and prepare those adults for such a commitment.”74

In its effort to secure lifelong family connections for teens, MFFK has found more system-related barriers to permanency than youth-related barriers. These system

73 Denise Maguire, Executive Director, Cambridge Family and Childrens Services at Tufts, March 27, 2003.
barriers include: “negative beliefs about adolescents and ‘family’; difficulty embracing youth involvement in decision-making; too narrow a definition of ‘kin’; philosophies not supportive of non-traditional relationships; competing priorities set by programs and agencies; adoption as ‘not an option’ or ‘the only option’.” Because the needs of foster youths are not properly communicated to potential sources of support, opportunities to forge relationships are missed.

_They move you when you’re doing well_

Youth in need of more restrictive care than that provided by traditional foster care are not set up to obtain the permanency offered through a stable long-term relationship. The move to less restrictive settings is driven by (1) system and state policy, (2) incentives and (3) concern for youth well-being.

(1) **System Policy and State Directives:** It is DSS policy that youth should not be in any placement for longer than 12 months, and there is motivation to move youth to a different level of care accordingly. Justifying this policy is a desire to prevent youth from “languishing” at higher levels of care than the youth requires. Though grounded in good intention and arguably in good practice, the policy reinforces the instability that youth experience in care. Unless foster youth are already at the least restrictive level of care and therefore exempt from having to “step down”, the system is mandated to both work towards achieving permanency and to ensure that youth changes placements at least annually.

An additional factor in placement decision-making is the state mandate to reduce the current high rate of reliance on residential programs and “as a department, to look
to the community."75 Over 2,000 of the 11,000-plus youth in out-of-home placement are in residential programs for a length of stay averaging between two-and-a-half and three years. If this doesn’t represent the highest utilization of residential care by any state in the country, it is among the top three.76 The reduction in reliance on residential programs will have a significant impact on adolescents in foster care; adolescents represent 67% to 75% of all residential care placements across regions.77 This policy change will require DSS area offices to place more adolescents within the community and might necessitate a specialized adolescent foster home recruitment effort.

(2) Financial Incentives: Direct reimbursements and indirect savings are associated with moving youth to less restrictive settings.

Within the Commonworks system, the incentive to move youth is explicit and is reinforced through a direct reimbursement to agencies upon the movement of youth to a less restrictive setting. The reality is that the more restrictive the setting, the more expensive the placement. The reimbursement amount is an incentive for Commonworks agencies to be expeditious about moving youth to less restrictive settings, but not enough to prematurely move youth.

Ironically, though 100% of Commonworks funding comes from DSS, the efficiency afforded via Commonworks’ managed-care-style system is such that Commonworks agencies’ decisions are often less fiscally driven. Additionally, moving a youth prematurely results in his return to the higher-level care – an outcome that

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75 DSS Commissioner Harry Spence at Tufts, March 27, 2003.
76 DSS Commissioner Harry Spence at Tufts, March 27, 2003: Part of this is a reflection of the quality of services offered in these schools. Massachusetts has an “excellent network of schools.” New York and the rest of New England send their youth to Massachusetts; there they refer to out-of-state care. Over the next several years, carefully and in phases, more and more kids will be moved out of residential care and into community care. This will put an enormous premium on foster care and necessitates an increased reliance on kinship care.
77 DSS Quarterly Report FY2002 2nd Quarter; 3rd quarter.
reflects poorly on the responsible agency. Without the direct financial incentive to move youth and a gross shortage of available foster placements, movements to lower levels of care are not as expeditious in DSS.

There are also indirect financial incentives to move youth to less restrictive settings. The more restrictive the foster placement, the more expensive it is; thus, the heavy reliance on residential care in the Massachusetts system comes with a significant price tag. Any decision to reduce the reliance on these facilities results in substantial cost savings, at least in terms of the cost of care.

(3) **Concern for youth well-being:** Movements along the continuum from mental institutions to residential programs to therapeutic foster care to foster care are intended to be reflections of improvement on the part of the youth. And though the movement necessitates instability the perception is that the change prepares the youth for independence and reintegration into the community. The less restrictive the setting, the more closely the youth’s placement approximates normal family life.

The one reduction in level of care that does not by definition require a change of setting and uprooting of youth is the movement from therapeutic foster care to unrestricted foster care. In recognition of the increased expectations placed on therapeutic foster parents, they are reimbursed at a higher rate. When youth do well in therapeutic foster care, DSS looks to move them to an unrestricted placement in accordance with the policy to keep youth in the least restrictive setting. Understanding the value of stability to the youth, DSS often requests that therapeutic foster parents consider moving with the youth to a less restrictive level — and becoming an unrestricted

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78 Therapeutic foster parents receive between $42 and $50 dollars per day for each youth in care. Unrestricted foster parents receive approximately $18 daily for each youth in care.
placement. In effect, this means that the foster parent is rewarded for doing a good job with a lower reimbursement rate.\textsuperscript{79}

System policies, funding incentives and concern for youth well-being are necessarily related – each informs the other. The degree to which each of these influences placement decisions in the cases of individual youth is dependent on the area office, funding source and youth's history in care.

They move you when you're doing badly

Youth who are not doing well in their current level of care are also moved. Failure in one placement generally requires a movement to a more restrictive setting or, depending on the nature of the problem, to a different but parallel placement. These movements are built into system policy and practice. Depending on the infraction, efforts should be made to keep youth in placement. Although it is important for their growth that they be able to make mistakes, youth who make mistakes in the foster care system get moved. “The best teaching moments in life are when you make mistakes – these are the best learning moments.”\textsuperscript{80}

Keeping youth in a placement after something goes wrong strikes at the very idea of foster care, which is temporary by definition. As a rule, foster parents do not sign on for an unconditional commitment to foster youth. Truth be told, foster parent do not even sign on for an uncomfortable commitment – and the system does not ask them to. To ask this would be problematic both in terms of recruiting and the consequences of potential reunification. Placements are often made with the understanding that it is a trial and if there is a problem, youth will be removed. Foster parents are not required to

\textsuperscript{79} Meghan Stannard, Assistant Program Manager for Communities for People, Interview March 3rd 2003.
\textsuperscript{80} Marty Zanghi, Program Manager, Muskie School of Public Service, Portland, Maine at CWLA National Conference Workshop A-23: Foster Families Supporting the Transition of Youth Served by the Foster Care System.
be invested in youth and for a variety of reasons it may not be in their interest to become invested. Though it can be argued that foster parents should make an unconditional commitment, this isn’t realistic given the system’s predisposition toward facilitating reunification where possible. The specialized recruitment of foster placements for older adolescents could help resolve this conflict by helping to align expectations.

Compounding the difficulty inherent in determining the level of commitment that foster parents should make to foster youth is ambiguity regarding the system’s expectations of foster parents, especially across offices. Each area office is responsible for the recruitment and screening of the foster parents for that area. “Staff in several area offices acknowledge the difficulty of recruiting and training foster parents when the system transmits mixed messages about whether parents are considered part of a team addressing the needs of troubled children or merely temporary caregivers providing room, board and some emotional support.”\textsuperscript{81}

According to Commissioner Harry Spence, the foster care system needs to build a supportive network for youth from the moment they come into care. The system is a temporary support; it is not intended to be a sustained relationship. “We’re not the good mother. The good mother doesn’t leave at 18.”

\textit{They just move you}

Movements are often a result of a poor fit. The dearth of placement options coupled with the prevalence of crisis situations results in multiple placements. Some placements are temporary by design, others by lack of design. Hotline foster homes are temporary placements designed for very short duration in crisis situations. Similarly, Bridge Homes are temporary group home situations designed to last for a maximum of

\textsuperscript{81} Watson 1996: p.21.
45 days while efforts are made with toward reunification. Alternatively, poor matching, a shortage of placement options and/or unforeseen circumstances can result in mismatches that require youth to change placements.

A foster parent has to give ten days notice to have a child removed from their care except in cases of real physical danger. Limited resources may result in last-minute plans arranged on ‘Day Ten’ with the foster youth sitting at their DSS office waiting to find out what their next placement will be. In some areas, there are volunteers whose role is to take youth on outings to keep their mind off the situation as caseworkers scramble to find an appropriate placement. It is not surprising that some of these placements do not work out.

The convergence of heightened training and eligibility requirements for foster families including CORI checks, the restriction of the number of kids that can be placed with a family, the reduction of the number of “stay-at-home moms,” and fear of adolescents have resulted in fewer available foster homes. Attempts to find ethnically and geographically appropriate placements further constrict the universe of placements. The movement of more and more youth out of residential programs and into community care as a result of the policy, financial and youth development concerns mentioned earlier will put an enormous premium on foster care, and will likely result in an increased reliance on kinship care. DSS already looks to kinship care as the preferred solution in terms of permanency and stability as well as resource utilization.\textsuperscript{82}

Despite all of the above, there are ways to establish degrees of permanency within the foster care system. Some represent service interventions for the individual foster youth while others require the development of systemic collaboration and commitment

\textsuperscript{82} Watson 1996: p.4.
to this population. Chapter Six provides some discussion of ways to achieve permanency and stability.
Chapter Five: Education: Priority and Paradox

The Role of Education

The belief that education is critical to success manifests itself throughout western society to such an extent that success without a college education is cause for attention. Success achieved without a high-school education is cause for amazement. The importance of education to the youth’s ability to succeed is central to our common understanding of opportunity and success itself. It is not surprising that the active pursuit of education is the central component of the Chafee Program and the resources available for youth. What is surprising is that education is not a central element within the foster care system itself; the system does not demonstrate the value of education to youth in care until they are ready to leave. At that point education becomes a requirement to remain in the system.

"The two systems that serve children and youth in care – the child welfare system and the educational system – often do not collaborate to meet the educational interests of the child."83 Though the youth development and education fields are intrinsically linked, the actions and agency of the foster care system generally operate outside of the schools and vice versa. Foster parents, case workers and school personnel have different understandings of foster care and are “usually lacking complete information regarding child placement and academic history."84 None have the whole picture where the child’s welfare and education are concerned. As well, many in the child welfare field are

83 Yu, Day and Williams 2002: p. 15.
84 Finkelstein 2002: p.46.
unaware of the series of mandates requiring that states improve educational outcomes for foster youth. 85

The importance of education to success, if not survival, is reflected in the Chafee legislation and DSS requirements for the continuation of services to youth after the age of 18. The provision of education assistance and the supports required to encourage youth to complete high school, attain their GED, and pursue post-secondary education is a primary purpose of the Chafee program. Two of the five broad purposes set out by Chafee include, “Help these children receive the education, training and services necessary to obtain employment;” and “Help them prepare for and enter post-secondary training and education institutions.”

In order to stay in foster placement after their 18th birthday, youth must be going to school full-time. This requirement can be met through high school, college or vocational training. However, the numbers of youth who leave care without completing their high school education are perhaps more indicative of the importance the system places on education. “Studies found 37% to 80% of youth had not completed a high school education even after leaving care.”86 Clearly, the emphasis on the centrality of education to the success of this population does not come early enough for most.

If youth are not going to school full-time, they are forced to leave the care at 18.87 Youth can be on “good behavior,” demonstrate the need for continued placement, and want to stay in the custody of DSS, but if they are unwilling or unable to go to school full-time they are forced out. Enforcement differs from one DSS area office to another,

85 Ibid.
86 Yu and Williams 2002: p. viii.
87 Except in cases of severe mental or physical disability, in which case youth are eligible and/or required to be transferred to DMH or DMR Adult Care.
but youth advocacy efforts have resulted in a DSS commitment to a uniform and explicit “Over-18” policy. As it stands today, one DSS area office may allow a youth to stay in care if they are in school part-time, while another may pose stricter requirements including the maintenance of a certain GPA in addition to full-time attendance.88

**What this means at 18**

Not long ago, foster youth would be abruptly discharged on or about their 18th birthday with little more than a map to a homeless shelter as the system focused its attention and resources on the protection of children within its care. The Commonwealth has since extended eligibility to stay in DSS care beyond age 18 to youth who are staying in school and complying with their service plan.

Pursuit of education after age 18 is not synonymous with post-secondary education. At 18 most youth are still in their final year of high school, and many in the foster care system have fallen behind their peers. A myriad of factors contribute to youth falling behind. “Placement in out-of-home settings is linked to low academic performance for children and youth in care. Studies found that 26% to 40% of youth in care repeated one or more grades. In addition, 30% to 96% of students in care were below grade level in reading or math.”89

Nationally, over 40% of youth in the system repeat one or more grades. High school non-completion rates among foster youth are estimated to be as high as 60% or greater and it is estimate that less than 15% enter postsecondary programs.90 The

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88 Stephanie Burke and Eric Cousineau, DSS Outreach, Interview on February 27th 2003.
system affords foster youth the supports necessary to stay in school beyond 18 and get their diploma. However, for many youth the incentives to stay in care are not there. Beyond the ability to stay in the system, educational accomplishments may not seem relevant. And continuing in the system may actually represent a disincentive as youths' 18th birthday represents their day of liberation from a cycle of failure within both the educational and foster care systems.

**Educational and Placement Instability**

Success in school has been demonstrated to be correlated with stability. The foster care experience, on the other hand, is characterized by instability of placement and resulting school changes. The need for a youth to change schools – adjusting to new people, a new system and different curriculum – at the same time that his home life is disrupted is as likely to happen in April as it is in September. “Educational continuity is rarely considered when children in care are moved from one home to another.”\(^9^1\) Foster children and youth are made to change schools an average of six times and this number increases with placement changes. With each change in placement, youth must adjust to a new terrain of educational expectations, curricula, teachers and students, in addition to the stress associated with adjusting to a new family and environment. According to the National Association of School Psychologists, youth “need as few as six or as many as eighteen months to regain a sense of equilibrium, security, and control” after changing schools.\(^9^2\)

These changes also require youth to start over and rebuild support systems and friendships. Youth moving from school to school are deprived of the continuity of

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\(^{91}\) Yu, Day and Williams 2002: p. 12.

\(^{92}\) Jacobson 2001: p.32.
relations with school staff and faculty that might normally result in creating advocates within the system who would monitor the youth's progress and development. The ability of schools to address youth needs is artificially retarded by the refusal or inability to share information across school systems.

A youth entering a new school after changing placements is left to navigate the system on their own. Though some foster parents take it upon themselves to advocate for the youth in the school, many foster parents may not see this as their role; there is no clear delineation of responsibility for the academic success of foster youth within either the child welfare or educational system. Even if foster parents are advocates for youth in their care, there is still a strong possibility that strengths or weaknesses will be missed. New foster parents are unlikely to be familiar with youth's potential or challenges and, in the process of establishing a relationship with youth, may have limited ability to push issues of academic achievement or capacity.

The advocate role traditionally taken on by parents is a responsibility of the foster care system as the youth's parent. However, to whom the responsibility is specifically delegated is not clear. The primary concern of case workers is, again, the child's safety. Case workers attend school conferences in the place of a parent, but limited resources and full caseloads may not allow them to do much more than become involved in crisis situations. In a recent study performed by the Vera Institute of Justice, members of adult groups responsible for the welfare of foster youth – foster parents, case workers, biological parents, teachers, and other school officials – responded that "responsibility for monitoring academics should reside with someone other than themselves. As a

result, foster children encountered little resistance to their practical devaluation of academics.94

Repeated school changes resulting from placement changes exacerbate academic problems by leaving disabilities undiagnosed. Frequent absences and lapses in enrollment are a direct result of school changes and the logistics of foster care. They are both symptoms and sources of the feeling of failure that many youth feel in school. The absenteeism, in turn, complicates the situation for school officials unfamiliar with the foster youth and may appear to be the cause rather than the symptom of the performance issues. This failing has implications for both strong and challenged students.

For many youth in the foster care system, school is a place of failure. Even foster youth in favorable long-term foster placements perform below national averages.95 The legacy of parental substance abuse, physical abuse and neglect that necessitated foster placement often results in learning disabilities. Unless a parent or guardian requests an evaluation to determine if special education is required, it is unlikely that such an assessment will be performed. Though all students are entitled to an evaluation, which can be requested by parents, teachers or other professionals, teachers unfamiliar with youth might misread the signs or not be invested enough to initiate the evaluation. In an effort to counteract this, the school systems and child welfare systems in New York City and Seattle have collaborated to create databases that will facilitate the monitoring of the academic performance of foster youth.96

94 Finkelstein 2002: p.46.
95 Yu, Day and Williams 2002: p.3.
Even with the large number of youth whose learning disabilities and special needs go undiagnosed as they move through the foster care and education systems, it is estimated that 30-40% of our nation's foster youth are in special education. “The Department of Education (DOE) works with local school systems to insure that youth with disabilities who otherwise would not be able to progress effectively in regular education have individualized education plans (IEPs) until their high school graduation or 22nd birthday.” The Individuals with Disabilities Education Act mandates that transition planning be done for all students over age 14 who have disabilities. Transition planning must include the identification and involvement of adult agencies that the student will need after they complete high school. Massachusetts law also requires the involvement of adult agencies in planning for special education students.

Failure in school combined with the lack of permanency in any particular school or school system can lead youth to reject school and drop out. Without supports at home or school, a high school diploma may not seem very important. Efforts around the country have been initiated in an attempt to address foster youths’ need for an advocate within the school system and to initiate data sharing between school systems and child welfare systems. The Vera Institute of Justice’s pilot project in New York has installed educational specialists to counsel teachers and foster youth in an effort help foster children succeed in school.

Research demonstrates the importance of education to the achievement of successful outcomes. Statistics point to the obstacles to educational success for foster

98 Delman and Jones 2002: p.10.
care youth, but cannot explain the degree to which the obstacles are a result of involvement with the system itself. However, they do demonstrate a need for the foster care system to collaborate with the education system to provide stability, support structure and appropriate assessments so that foster youth are not set up to fail. The emphasis on the role of education in their lives and possibility of success for these youth must begin earlier; it must be incorporated into the care as well as the transition from care.

The implication of the requirement to remain in school in order to stay in foster care is the recognition of the importance of education to a successful transition to independence. However, the result of this requirement is that the youth who aren’t staying in school are forced to transition earlier and more abruptly.

**Staying in School, Staying in Care**

Despite the lack of collaboration between the education and foster care systems, some youth are staying in school and staying in care. But these youth are the exceptions rather than the rule. “It would take a pretty extraordinary kid to have a stellar academic record and move around as much as these kids do.” According to Casey Family Services, youth enjoying placement stability are three times more likely to complete high school, and those living in less restrictive placements such as family foster care are more likely to participate in post-secondary education. Youth with extensive employment experience are four times more likely to complete high school. Additionally, Casey has found that positive relationships with agency staff increase the likelihood of high school completion.

99 Denise Maguire, Executive Director, Cambridge Family and Children’s Services, Interview March 18, 2003.
100 Yu and Williams 2002: p. viii.
Similar to other states\textsuperscript{101}, the Massachusetts Chafee program provides a suite of education-related resources to help facilitate a successful transition to adulthood via pursuit of higher education. Tuition waivers are available for youth aged 24 or younger who have been in custody for a minimum of one year and have either been adopted through DSS or are a current or former foster youth placed in custody of the Commonwealth through a C&P petition.\textsuperscript{102} These youth are eligible for the Foster Child Grant Program, which provides assistance for education-related expenses, such as housing, fees and books. Additionally, 61 youth attending 2-year and 4-year public or private colleges received William Warren Scholarships from the Department in FY 2002.\textsuperscript{103}

For these youth, the system has found a way to begin to simulate the role that a parent would play. The state is using its resources to provide advantages for foster children; it is both an advocate and networker for youth in its care. And youth are taking advantage of the opportunities provided by the system in increasing numbers.\textsuperscript{104} However, this does not make up for the disadvantage they have known as a result of having the Commonwealth for a parent. And it does not make up for the Commonwealth's inability to provide for all of its children.

In comparison to the other stresses and difficulties in their lives, academic difficulties may not constitute a priority for foster youth. However, the influence of academic achievement on subsequent employment and thus on housing and health-care

\textsuperscript{101} According to GAO's 1999 Report Foster Care: Effectiveness of Independent Living Services Unknown, 41 states assist youth with preparation for completing education or vocational training, 33 states help youth pursue postsecondary education, 21 states award tuition waivers or scholarships and 21 states help pay for other educational expenses.

\textsuperscript{102} National Resource Center for Youth Services: www.nrcys.ou.edu/tuitionwaivers/ma.html

\textsuperscript{103} Chafee Foster Care Independence Program Summary 2002, p.3.

\textsuperscript{104} Maureen Fallon Messeder, DSS Associate Director for Youth Services, Interview January 2003.
options demonstrates that education may be the most important indicator of success. The child welfare and educational systems must unite to remove the current obstacles that their lack of coordination currently poses for youth, and recognize the potential source of stability and consistency for foster youth that they can provide through collaboration.
Chapter Six: Conclusion

There are practices, projects and there are promises. Promises are what you know you need to do.\(^{105}\)

The intersection of foster care with homelessness, incarceration, substance abuse and other negative outcomes is significant and compelling. Disproportionately, foster youth become homeless and the children of the homeless are put in foster care. Disproportionately, former foster youth are incarcerated and the children of prisoners are put into foster care. And so on and so on. These relationships are documented. The foster care system was created to protect the innocent victims of these cycles of abuse and despair. And while the system “strives every day to strike a balance between protecting children and strengthening families at risk,”\(^{106}\) it does not address the core of these issues nor is it effective at breaking these cycles.

The current policy climate and increased attention to the welfare of former foster youth and the difficulties associated with their transition from care has initiated the process of creating programs and policies that address the deficiencies of the foster care system. However, these transition programs cannot stand alone, nor do they pretend to. More comprehensive and collaborative efforts must be undertaken to provide support to youth before, during and after the transition from care. The collaborations being developed to support youth in their transition must inform efforts to care for youth within the system. And the net effect of these efforts must begin to approximate the resources and support that a parent would provide.

\(^{105}\) Model Court Lead Judge Thomas P. Zampino CWLA Imagine an America Conference, Improving Education and Transition Outcomes Policy and Practice Strategies, March 6, 2003.


-78-
Providing a Safety Net

A youth’s transition into adulthood has appropriately been described in terms of navigation. Youth are finding their course in life, often with very little direction and too few tools. For youth to make wrong turns – to make mistakes – is to be expected. This is true for foster youth just as it is for non-foster youth. However, foster youth often do not have the luxury of making mistakes. The mistakes of foster youth, youth with little or no margin for error, can have dire consequences. The system must provide foster youth the luxury of small mistakes.

The open door policy is a foster care system’s ultimate safety net. A limited number of states have made the decision to allow youth who have aged out of their foster care system to return to the system after leaving care. Youth are generally able to return to care until they reach a certain age (usually 22). Massachusetts, however, has made the decision to stop all services to youth once they have left care. The exception to this is the Chafee program, created in part for this purpose.

Accordingly, Outreach Workers make a concerted effort to ensure that youth understand the implications of leaving the system. Outreach Workers guide youth through the process of finding an apartment or a job in order to demonstrate both the difficulty of achieving independence at age 18 and the benefits of staying in the system. They try to convince the youth to sign themselves into care for a trial period of three months or six months, arguing that they can always leave if it is not working out. Because, on the flip side, once youth have left care, they are unable to return. There is no safety net if they make mistakes.

Massachusetts is unlikely to adopt an open door policy in the current budget and policy climate. Resources are limited and given the system’s emphasis on the safety and
protection of younger children, the open door policy would represent a drain on system resources without furthering its primary mission. However, there are less resource-intensive efforts that can provide support for foster youth.

The effectiveness of any effort is dependent on leveraging community and government resources. Inherent in this are coordinated communications and public relations efforts. And to be truly effective, these transition programs must inform change within the foster care system itself. Transition programs will not make up for the failures of the system; the failures of the system must be addressed in their own right. The system of care and the programs related to the transition from care should be internally consistent.

*Leveraging Community Resources*

Transition supports and aftercare services require the active participation of community members willing to mentor and enter into supportive relationships with foster youth. These resources must be pulled from the greater citizenry and from the youths’ existing network. Additionally, an active public relations effort is needed. The general public must be informed about the needs of this population, and the myths and stereotypes surrounding foster care and foster kids have to be addressed.

The preparation of youth aging out of foster care for independent living has gained increased saliency as a public policy issue as federal legislation, increased media attention and constantly improving public welfare data have intersected in recent years. Cable Television programs such as *Homeless to Harvard*, the *Lifetime Channel’s* depiction of a youth’s remarkably successful transition from the foster care system to the Ivy League, recent books and motion pictures including *Antwone Fisher* and *White*
Oleander, and articles in local and national publications including the Lawrence Eagle Tribune and Time Magazine have begun the difficult process of bringing this important issue to the public’s attention. However, these efforts have registered only with those paying attention and much more needs to be done to raise awareness among the wider Massachusetts citizenry.

Community agencies and organizations must be enlisted to provide services to foster youth and, when appropriate, give them preference in hiring or training. Outreach Workers have been making connections with a range of community organizations including homeless shelters, employers, and workforce development programs to create these preferences, to provide tailored services, or alternatively, to refer youth back to the system. These relationships reflect the fact that foster youth are the Commonwealth’s children – those of the government and citizenry alike.

The Commonwealth – employees and citizens – must transform the way it views its responsibility to youth who have been removed from their own families and placed in foster care. In order for this philosophical transformation to be complete, effective communication and a commitment of both financial and personnel resources is necessary.

**Leveraging Government Resources**

Collaboration with other government agencies is also essential. Though the responsibility for child welfare falls under the jurisdiction of DSS, as wards of the state, foster youth are the shared responsibility of all state agencies. DSS and other youth-serving agencies must continue to coordinate planning efforts and resources, define responsibilities, and create greater transparency by sharing data across systems. This
collaboration must extend to other government agencies as well; some leveraging relationships have already been initiated. For example:

- A collaboration between DSS and the Department of Labor and Workforce Development has set aside Workforce Investment Act (WIA) statewide youth funds for demonstration projects designed to improve education and employment outcomes for foster children. "Jointly funded grants provided services to 73 current and former foster youth."\textsuperscript{107}

- DSS has been successful in creating a hiring preference for foster youth at all state agencies.\textsuperscript{108}

Ironically, a significant area in need of greater collaboration and improved communications is within DSS itself. The extent of the variation between area offices in terms of policy, practice and general awareness points to a significant need for coordination. Specifically, there are providers in the DSS system that need to be educated about the Chafee program; until these providers understand the services available, their clients will not be able to benefit from them. The agency is undertaking a variety of efforts aimed at standardizing policy interpretation across offices including the "Over 18" policy efforts mentioned earlier. In the consideration of the effect that inconsistencies in policy interpretation and expectations have on the foster youth, foster parents and the families served by the system, standardization must be a priority.

\textit{The Impending Crisis – Issues of Supply and Demand}

The number of children in care is expanding by virtue of an increase in children entering the system, an increase in time spent in the system, and a reduction in the
number of adoptions from the system. At the same time, the number of foster parents is contracting and the number of placements that youth experience is increasing.¹⁰⁹

Addressing the foster care system’s impending crisis requires making changes to the processes through which youth enter the system. Current efforts in the child welfare system aim to address the increasing size of the foster care population. Specifically, DSS is moving toward a greater reliance – where appropriate – on family-based services. This shift will reduce the number of youth entering foster care. An additional, related effort aims to reduce CHINS cases coming into the system and should also reduce the number of youth entering foster care. Both efforts will impact the number of youth aging out of the system, but stemming the CHINS entrances should have a direct – and positive – impact on resource allocation issues. For instance, a reduction in the number of adolescents in the system would also decrease the number on waitlists for outreach workers.

The size of the foster care population and the population of older adolescents in care may also be addressed by attracting more adoptive parents to the system. This requires increasing awareness about the need for adoptive parents – particularly for older adolescents – and the positive implications for youth. The foster care system should facilitate adoptions and legal guardianship by foster parents. These issues are not discussed often enough and the wider public has not been forced to address them. Similarly, although there are movements within Massachusetts and other states to recruit adoptive parents for older adolescents, not enough is being done. Adoption of this population has not been considered a priority and the system is biased against it. The youth themselves often fail to entertain adoption as a realistic possibility.
An additional component to addressing the growing disparity between the influx of youth into the foster care system and the simultaneous exodus of foster parents is the targeted recruitment of more foster parents. There is already a diversity of roles that foster parents can play in the lives of youth depending on the type of placement they offer in their home. The function that a foster parent plays in a ‘hot-line’ temporary placement is dramatically different than that played in an unrestricted foster home or a therapeutic foster placement. These distinctions are necessary and useful in aligning the expectations of the parent, the child and the system.

Given the diversity of needs and experiences of youth in care, a greater refinement of these types of placements might be useful. Attempts should be made to articulate and align expectations regarding the likely duration of a youth’s foster care experience with foster parents looking to make corresponding commitments. Youth who are unlikely candidates for adoption or reunification due to their age or other circumstances could thus be matched with foster parents ready to make a more permanent commitment. (This is not intended to work against efforts to adopt older youth)

Ways to achieve permanency

Despite all of the above, there are a variety of ways to establish some degree of permanency – some stability – within the foster care system. Some represent service interventions for the individual foster youth while others require the development of systemic collaboration and commitment to this population. None of these require reunification or adoption; however, none of them work against it either. Some of these
have been implemented – at least to some degree – within the Massachusetts foster care system. All of them are in effect somewhere.

Permanency can be established:
1. In systems – through formalized relationships with court advocates and educational advocates; and by increasing resources to ensure access to Outreach programs. Residential programs must be held accountable for fulfilling the function of Outreach Workers for the youth in their care.
2. In the community – maintaining and building community ties.
4. In ties to family – A number of studies have demonstrated that foster youth who maintain contact with birth families are more successful than youth who do not. For most adolescents, there is already someone in their network of relationships willing to make a permanent commitment as “family.” Few need specialized recruitment.
5. In mentoring relationships – though not a panacea, mentoring relationships are an important component in creating permanency for youth. Mentoring is a ubiquitous concept; the mentoring relationships these youth need involve the commitment and assurances of a permanent connection.

Each of these efforts is centered on the ability to change perceptions, to communicate the needs of youth, and to rectify the effect of foster kids’ poor image. “Unlike adults, children do not see themselves as interacting within systems.”

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111 Frey, Lauren. CWLA National Conference Workshop C-12 Lifelong Family Connections for Adolescents in Foster Care, March 5, 2003.
112 Finkelstein 2002: p.45.
youth must be communicated to the public in such a way that distinguishes the youth’s needs from system needs.

On Education:

In light of the emphasis on and importance of education in the transition from care, the following recommendations are specific to improving collaboration between the child welfare and education systems:

1. Make the commitment whenever possible to keep youth in the same school. Foster care, for good or bad, is temporary care, but no such distinction exists for education. Ideally, the movement towards community-based care will help to keep youth in their communities and community schools. The City of Newark has a “Same School Policy”: a commitment to keeping a child in the same school even if his placement changes (as long as it is within the City of Newark).

2. Create a community liaison between the foster care system and the schools similar to the local liaison for homeless children and youth required in the No Child Left Behind Act of 2001. (All school districts are required to designate a liaison for homeless children and youth.113) Not only should case workers and foster parents be required to advocate for youth in the school system, the school system should take a formal and active role in easing the transitions for these youth. The creation of a liaison would be one way of doing this.

3. Encourage foster parents to serve as an intermediary between the school and the foster care system.114 Currently, the foster parent’s role in their foster child’s education
is limited to logistical responsibilities such as registration. Foster parents’ responsibility for education could and should extend beyond this, but may not unless these expectations are articulated.

4. Make assessments within the first 30 days in care to determine eligibility for programs, special education and other supports to place youth on an appropriate track as quickly as possible.

5. Advocate data sharing and cross training between child welfare and education systems. Confidentiality concerns are used as an excuse; these systems need to share educational outcomes data115 and eliminate the distrust between professionals not “speaking the same language.” Improvements in data sharing across systems will help to address complications stemming from current delays in transferring school records and lapses in enrollment, and improve the accuracy of academic placement.

6. Reconsider extending the eligibility of youth participating in job programs to stay in care past age 18. Massachusetts has elected to maintain youth in care if they are engaged full-time in secondary education, college or vocational training, but has not extended coverage to youth involved in JobCorps (other states have). DSS should analyze the ramifications of extending eligibility to youth in JobCorps and related programs.

Further Research:

Given more time, I would have liked to research models of collaboration between the justice and child welfare system and between the education and child welfare system in other jurisdictions, and perform a comparative analysis to determine the implications

for similar efforts in Massachusetts. It is my impression that these collaborations are going a long way to addressing some of the inefficiencies in these systems and could be influential in successful outcomes for youth in terms of education, permanency and general well-being.

A second area of research I would have pursued is the study of housing alternatives for youth leaving care. Though research has been performed on independent living alternatives, I would be particularly interested in researching the impact and implications of collaborations between systems to provide supportive housing for this population. Specifically, I would like to study the impact of the recent collaboration between child welfare agencies and housing authorities to utilize Family Unification Program (FUP) Section 8 Vouchers.

*The Good Parent*

The government must assume the role of a parent – to prepare youth to live on their own and help them achieve their goals. "When government takes custody of teens it must also take responsibility for meeting their needs, protecting their rights, helping them achieve their goals and acquire all the skills necessary to become fully participating citizens."116

This responsibility is at once selfless and self-serving, particularly in the case of the Commonwealth. As a parent, it is selfless to provide for youth expecting nothing in return. However, the Commonwealth has a self-serving interest in ensuring that these youth are well prepared for the "real world" and able to provide for themselves. Otherwise, they are likely to end up returning to the Commonwealth’s care in one way or

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another, acting as a drain on state resources throughout their lives. Alternatively, a youth who is well-cared for and prepared to meet the demands of independent living can contribute to the society, and effectively be in a position where they will be able to care for their parents (i.e., society) in its old age.

Though this line of reasoning is a bit of a departure from the traditional view of the system’s responsibility for the safety and protection of children, it parallels the current experience of childhood in the United States. America’s youth now often move from adolescence to “adultolescence”\textsuperscript{117} as they continue to be supported by their parents into their late 20’s and 30’s. Achieving independence at 18 is difficult for any youth.

The system and series of conditions from which foster youth must transition are fraught with problems and the transition itself is tenuous for youth making it without support. Inadvertently, we look to the youth themselves to make the system work. Not surprisingly, not all youth are resilient enough to endure all that their life and the system throw at them. Yet, the foster care system continues to rely on the resiliency of youth – just as it challenges that resiliency at every opportunity.

\textsuperscript{117} Tyre, March 25, 2002.
Appendix: Interviews and Workshops

Interviews:


Eric Cousineau, Adolescent Outreach Worker for Lowell, Department of Social Services, February 27th 2003.

Jenny Price, Executive Director, Bridge Over Troubled Waters, April 2nd 2003.

John Casey, Regional Director for Massachusetts, Communities For People, March 3rd 2003.

Jonathon Delman, Executive Director, Consumer Quality Initiatives, March 7th 2003.

Lynne Chapman, Director of Programs, Pine Street Inn, March 13th 2003.

Mary Collins M.A., Ph.D., Assistant Professor, Boston University School of Social Work, November 19th 2002.

Maureen Fallon Messeder, Director of Outreach Services, Department of Social Services, January 16th 2003.

Meghan Stannard, Assistant Program Manager, Therapeutic Foster Care, Communities For People, March 3rd 2003.


Stephanie Burke, Adolescent Outreach Supervisor, Department of Social Services, February 27th 2003.

Sy Frieland, Executive Director, Jewish Children and Family Services, January 22nd 2003.

Workshops:


Eureka Fellows Working Group on Youth Aging Out of Foster Care, March 14th 2003.

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