

# Preparing Our Kids for Education, Work and Life

A Report of the Task Force on Youth Aging Out of DSS Care

Task Force Co-Chairs



Cambridge Family & Children's Service and The Home for Little Wanderers



The Boston Foundation

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## About the Task Force on Youth Aging Out of DSS Care

The Task Force, which is co-chaired by Cambridge Family and Children's Service and The Home for Little Wanderers, engages public, private and nonprofit representatives to ensure that youth aging out of the Department of Social Services (DSS) have lifelong connections with one or more adults, are fully prepared for education, work and life, and are contributing members of their communities. The Task Force has had the active and sustained involvement of the Massachusetts Executive Office of Health and Human Services, DSS and representatives of the Massachusetts Departments of Mental Health, Housing and Community Development, Elementary and Secondary Education, Youth Services, and Transitional Assistance, along with more than 40 other providers. For a list of all members, please see the page opposite the Table of Contents.

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# Preparing Our Kids for Education, Work and Life

## Youth Aging Out of DSS Care

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A PDF version of this report is available at [www.tbf.org](http://www.tbf.org)

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## Preface

Children and teens in the Massachusetts foster care system are among the most vulnerable residents in our communities, but if they are given the supports they need while in foster care—and while ‘aging out’ of care—they can lead positive, fulfilling lives and become tremendous community assets.

One of the Boston Foundation’s primary goals is to help young people graduate from high school prepared for higher education and job training, so that ultimately they can become contributors to our community. A comprehensive approach to working with young people who are transitioning out of foster care can help to put them on the right track—and can avoid some of the harshest outcomes for them, including an inadequate education, lack of skills for the workforce, and even homelessness.

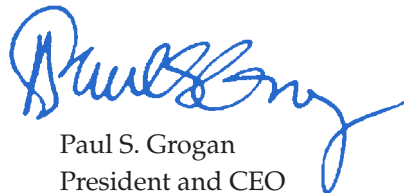
“Our kids,” as they are referred to in this report, deserve the opportunities that all young people should be offered, but they face tremendous obstacles. By the time they are aging out of the care offered by Massachusetts Department of Social Services (DSS), many have experienced numerous foster placements—some living in as many as eight different homes over the course of their young lives. And not all of them have had the benefit of sustained guidance from families, peers or faith communities. Without these supports, in too many cases, these young people find themselves unemployed, living on the streets, incarcerated or victimized in any number of ways.

We are fortunate, however, that Massachusetts has been innovative in its approach to working with youth who are transitioning out of foster care, such as a policy that was instituted in 2005 which allows youth between the ages of 18 and 23 to return to DSS for voluntary services even if they have been discharged from care. Those extended services can be like a lifeline.

The Boston Foundation is proud to publish this report of the Massachusetts Task Force on Youth Aging Out of DSS Care and is grateful to Cambridge Family & Children Service and The Home for Little Wanderers for chairing the Task Force whose members represent close to 50 government agencies and nonprofit organizations from across the Commonwealth. The group has outlined a series of core resources that should be available to all of our kids, including: ongoing nurturing relationships with adults; safe and stable living places; and opportunities for physical and mental health care, education, economic opportunity and civic participation. The report also makes a series of recommendations that emerge from the core resources, including some that would strengthen public policies.

If these kinds of resources are made available to everyone transitioning from foster care in Massachusetts, these young people will have the supports they need to thrive.

On a practical level, we need the active participation of all of our state’s residents—especially our young people—if we are to remain a vibrant community with a healthy economy in the 21st century. On a human level, it is our moral duty to do absolutely everything we can to support “our kids” as they take their first steps toward becoming young adults.



Paul S. Grogan  
President and CEO  
The Boston Foundation

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# Purpose of this Report

## **Aging out refers to youth who leave state care as an adult (between 18 and 23 ) without having been reunified with their families, adopted or guardianed exiting care—they are “on their own.”**

The Massachusetts Task Force on Youth Aging Out of Department of Social Services (DSS) Care engages public, private and nonprofit representatives to ensure that youth aging out of DSS care have lifelong connections with one or more adults, are fully prepared for education, work and life, and are contributing members of their communities. This report is built from the ground up on outcomes we know from research and experience that, if achieved, provide a solid foundation for youth success in their teen years and adulthood. Further, it contains a summary of the first ever study of transitioning youth in Massachusetts and a set of recommendations that create policy, practice and resource conditions for youth to achieve these outcomes.

The Task Force has had the active and sustained involvement of the Massachusetts Executive Office of Health and Human Services and DSS and representatives of the Massachusetts Departments of Mental Health, Housing and Community Development, Elementary and Secondary Education, Youth Services, and Transitional Assistance, along with more than 40 providers throughout the history of the Task Force. Our understanding has deepened and our recommendations sharpened by this array of expertise.

We want to recognize Massachusetts as a national leader in many aspects of policy and practice around youth transitioning from care. DSS has developed some progressive policies and promising practices over the past several years. Examples are “Working with Families Right from the Start,” the Massachusetts Family Finding Program, and the revision of the service plan goals to focus on permanency for all children and youth, including the elimination of “independent living” and “long term substitute care” as case goals. Additionally, there have been important practice improvements. These include: the 2005 policy change

allowing youth ages 18+ who were discharged from care to return to DSS for voluntary services up to age 22; the Break-through Series on Adolescent Permanency; the policy change that allows employees to become life long connections for youth; and the use of Chafee funds for the Adolescent Outreach Program and programs for mentoring, internships and employment.

As in most complex change efforts, the difficulty seems to be in implementing those policies into consistent practice. Our approach is to build on the assets and address ways the system of care and preparation can be refined and strengthened.

Preparing youth for fulfilling and productive futures may sound like common sense, yet it challenges many of the underpinnings of traditional child welfare. “Protection” is a dominant paradigm in child welfare, which by its nature is reactive to the problems kids and families experience and acts to “fix” them. Because many young people remain in care until they are 18 and some up to age 23, this blueprint for action supports the DSS approach of protection combined with a proactive approach of “preparation” as the new paradigm. Massachusetts is beating the national average in most transitioning out of foster care quality measures, and at the same time has opportunities for improvement on a number of key indicators. Building on previous efforts here and across the country, the Task Force has adopted a science-based framework based on the “Five Core Resources”<sup>1</sup> for the healthy development of all youth, especially “our kids”<sup>2</sup> and those who have transitioned from care.

In this report we describe the Five Core Resources and identify ways to use them to frame the work of preparing youth in DSS care for education, work and life.





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# 1. Introduction

Youth enter the child welfare system for a variety of reasons including abuse, neglect or being determined to need supervision.<sup>3</sup> DSS places them in temporary situations such as foster homes, kinship care, group homes or residential treatment while working toward a permanency goal for each child. Reunification with birth families, adoption, guardianship, and an alternative planned permanent living arrangement are all possible outcomes for youth in DSS care. In Massachusetts, the child welfare custody granted through the court system ends when a youth turns 18 years old. They can, however, choose to remain in DSS care voluntarily until 22—in most cases if they are willing to remain engaged with DSS and are actively working on service plan goals, usually including being in school or working. While many youth choose to stay in care, each year more than 600 youth leave foster care in

**“Even with good homes and loving families, we know very well that children today cannot leave at the age of 18 and make it on their own and somehow become successful adults. Why do we expect that of youngsters in foster care... We have to ask ourselves, ‘Are we doing the very best we can?’ ... Why should we do less for these children who are in our care than we would do for our own?”<sup>4</sup>**

— Raymond Torres, Casey Family Services, 2007

Massachusetts and attempt to live on their own or return to their families of origin without support.

These youth must overcome exceptionally difficult circumstances. They come from birth families in crisis and typically have experienced trauma. They also are likely to face serious disruptions in their living situations and education while in the care of DSS. “They are more likely than youth from intact families to end up homeless. They face higher risks of depression, victimization, unemployment and incarceration. They are more likely to be uninsured and less likely to graduate high school and attend college.”<sup>5</sup> Bottom line, many youth in DSS care approach adulthood without the supports that most young people receive from stable families, community resources and networks.

The Commonwealth of Massachusetts, and by extension all of us, serve as the parents of youth in foster care. Our responsibility to provide these youth with an opportunity to be successful in life makes legal, economic, moral and common sense. It is our duty to be the most effective parents possible for youth in our care. For that reason, this report will refer to youth who are in the child welfare system and those who have aged out of care as “our kids” as a way to emphasize our collective responsibility for their lives. We would hasten to say, however, that our first effort should be to ensure these young people leave care to return to family—whether birth, extended, adoptive, guardian or one they create.

The Task Force has identified a major system-wide need to change the way success for youth in care is framed from “protection,” a dominant paradigm in child welfare, to protection combined with the proactive approach of “preparation.” Building on previous efforts in Massachusetts and across the country, the Task Force advocates a scientific framework based on the “Five Core Resources” for the healthy development of all youth, especially “our kids.” The Five Core Resources identify the supports and opportunities all young people need in order to develop into healthy, thriving, productive and contributing citizens. This framework was used by the Task Force to identify

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outcomes and develop strategies to provide the additional attention our kids need in order to be prepared for education,<sup>6</sup> work and life.

## The Five Core Resources

Research supports the need to provide young people with Five Core Resources on a consistent and generous basis as they grow up. These fundamental building blocks for healthy development of young people are:

1. Ongoing, nurturing relationships with adults and positive relationships with peers
2. Safe and stable places for living, learning, working, and playing
3. Values, skills, opportunities and supports that promote optimal physical and mental health
4. Educational preparation and economic opportunity
5. Opportunities to make a difference through community service and civic participation

For many reasons youth who spend part of their childhoods in state care have not been consistently or generously provided these resources by their families, hence, their needs in these five areas can be significant. And, mirroring youth and young adults in the U.S., they need these supports and opportunities after they turn 18—in fact, through young adulthood.

The Five Core Resources form a framework that views young people in terms of their strengths, capacities and developmental needs, rather than their problems and weaknesses. Ideally, all of the components must be present because they are all fundamentally interdependent. Further, the resources must be offered in age-appropriate ways to all youth, including those in DSS care. Finally, for optimal outcomes, on an ongoing and consistent basis young people need to experience the Five Core Resources in all parts of their lives including at home, at play, at school, in the businesses they frequent, and the community organizations and institutions in which they participate.

This all sounds like common sense, yet it is difficult to operationalize. The child welfare system and other institutions affecting our kids are large, often decentralized, bureaucratic entities. This structure makes

**“All adolescents, in all economic and social circumstances, need generous amounts of help, instruction, discipline, support, and caring as they make their way from childhood through adolescence and into adulthood. Such assistance comes from many sources: solid families, good schools, supportive and safe neighborhoods, and a surrounding culture that emphasizes constructive lives and respectful relationships.”**

— Eccles and Gootman,  
*Community Programs that Support Youth Development*

dissemination and implementation of new policies and programs difficult. However, more states and communities across the country are finding creative ways to systematically implement policies, programs and services and create access to opportunities that enable young people to succeed. Indeed, Massachusetts has pioneered and or embraced many innovations, yet there is more to be done in such a complex system.

Can our kids who face great challenges really be prepared for education, work and life? The evidence shows that “disadvantaged children who are considered most at risk are also those who show the greatest gains when they receive investments that build skills for success.”<sup>7</sup> Collectively we can act as good parents to youth in foster care and those who have transitioned from care, to ensure they are nurtured, safe, healthy, skilled and contributors.

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## 2. Background

The Task Force on Youth Aging Out of DSS Care dates back to January 2002. Representatives from Massachusetts governmental agencies and human service organizations came together at a conference entitled, “Aging Out: The Foster Care Crisis.” The event, co-hosted by Cambridge Family & Children’s Service (CFCS) and Harvard University’s Kennedy School of Government, was a forum for exchanging ideas and information about the plight of youth aging out and what might be done to improve their outcomes. Participants included state legislators, members of the judiciary, advocates, and providers of foster care services.

In the months that followed, participants from The Home for Little Wanderers (The Home) and CFCS collaborated to tackle this issue. In the fall of 2002, the Task Force was established. Members of the Task Force quickly realized that they needed to systematically and empirically understand the experiences of youth in care before they could provide policy and program solutions. After raising funds and issuing a request for proposals, the Task Force engaged the Boston University School of Social Work (BUSSW) to conduct the research beginning in 2005.

The research, completed in 2007, is the first of its kind in Massachusetts to examine the experiences of young people who have “aged out” of DSS care. The primary objective of the study was to gather data that sheds light on the experiences of youth as they leave or approach leaving or DSS care. Youth were asked such questions as, *How do you feel your needs were met or unmet? Which approaches do you feel were most or least effective?* The study included: (1) surveys of and interviews with young people who turned 18 in 2005 while in DSS care and young people who voluntarily exited and then re-entered DSS care after turning 18; (2) interviews with stakeholders, including policymakers, foster parents, and providers, and (3) a review of DSS administrative data and linkage of that data with other state databases.

Task Force members also shared their knowledge and experience of the challenges facing our kids while BUSSW conducted its research. Committees addressed practice, legal and legislative issues and formulated recommendations which were then integrated and aligned.

The next section of this report provides some basic demographics for youth transitioning from care and a summary of key findings from the BUSSW study on youth leaving care in Massachusetts.



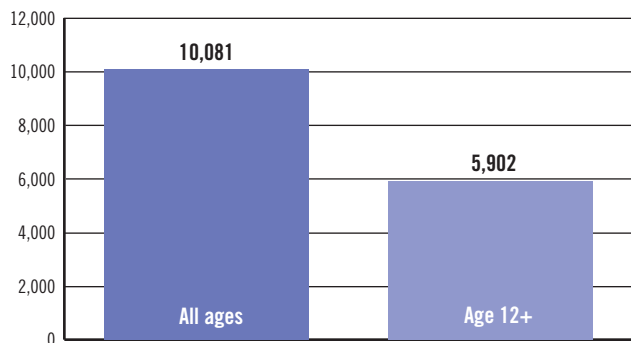
### 3.

## A Snapshot of Outcomes for Youth Transitioning from Care

### Basic Demographics of Youth Age 12+ in DSS Care<sup>8</sup>

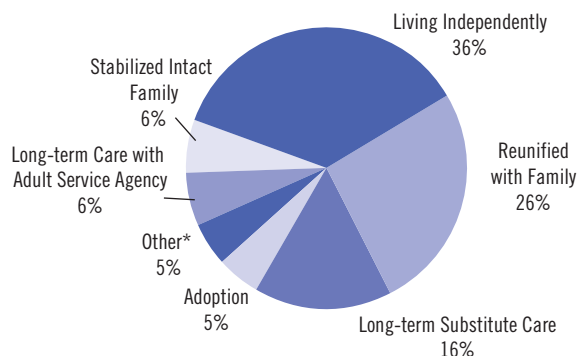
The chart below identifies the number of youth age 12 and over in DSS care relative to the total number of children and youth in care during the 4th quarter of Fiscal Year 2007 ending June 30, 2007. Of note is that 58.6% of foster children in the Commonwealth are age 12 and over.

#### Children & Youth in DSS Placement 2007\*



\* Includes foster care, congregate care, hospitals, other state agencies and youth on the run

### Youth Ages 12+ in DSS Care by Service Goal Plan

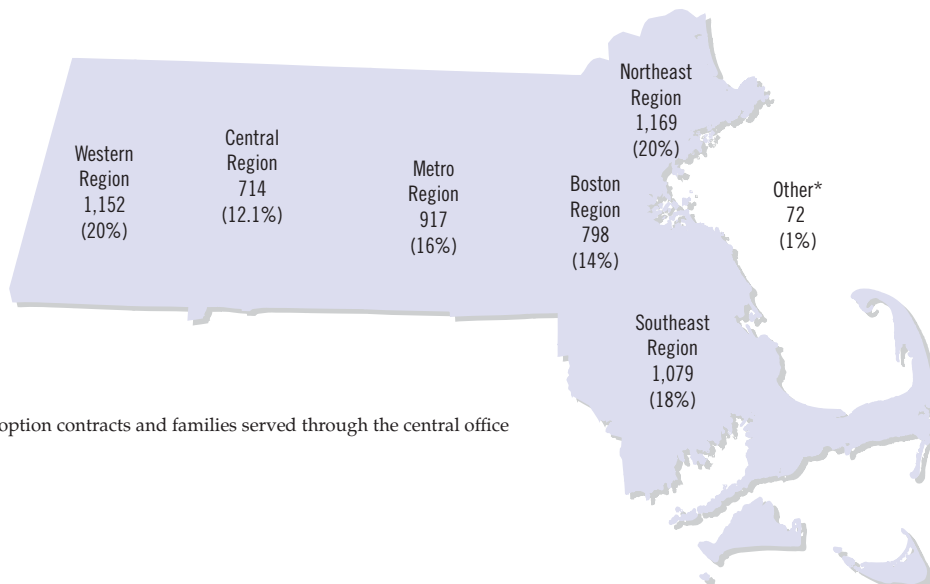


\* Other includes guardianship and unspecified

The pie chart above reflects the 'service goals' of youth. It is important to note that 36% of youth have "living independently" as a service goal.

The map below clearly illustrates that "our kids" live in every part of the state.

### Youth Ages 12+ in DSS Care



\* Other includes adoption contracts and families served through the central office

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## Leaving Care in Massachusetts: Summary of Key Findings of a Report by the Boston University School of Social Work

In 2005, more than 800 young adults transitioned from DSS custody at age 18 in Massachusetts without having been reunited with their family of origin or placed with a new, permanent family. These youth entered legal adulthood and independence after an average of nine years of contact with DSS. During that time, they were eligible for services intended to support them through their childhood as well as effectively prepare them for their approaching adulthood. To better understand what actually happens to these youth as they age out, the Task Force commissioned a study by the Boston University School of Social Work.<sup>9</sup> The study, titled “Leaving Care in Massachusetts: Policy and Supports to Facilitate the Transition to Adulthood,” completed in 2007, represents a foundational effort to assess the life preparation services and supports offered to this population and outcomes for these youth.

### Overview of the Study

The study had four major components. First, DSS administrative data of youth who “aged out” (turned 18 years old) in 2005 were analyzed to provide background information on the study population of 812 youth. These data included demographics, years in care, reasons for removal, and placement history. Second, 96 young adults who aged out in 2005 participated in an in-person survey about their experiences before and after they turned 18 years old. The third component, a qualitative study, provided an in depth description of youth’s processes of leaving and returning to care. The final component of the study analyzes interviews with key policy and program stakeholders to better understand their perspectives on how DSS services to transitional age youth could be improved. Through these interviews, field experts offered opinions regarding best practices and future initiatives that could lead to improved outcomes for youth.

Because of the limitations of recruitment, the sample does not represent the experiences or opinions of all youth who aged out of DSS care in 2005. Nonetheless, the administrative data and retrospective survey data provide valuable information on the characteristics of aging out youth in Massachusetts and their experiences transitioning to adulthood.

### Administrative and Survey Data

The *administrative data* describes the 812 youth who turned 18 in 2005 while still under DSS custody. Some of the youth findings include:

- Some 319 youth had 10 or more placements over the course of their lives
- Close to three-quarters, or 74%, had a reported service goal of living independently
- The age of first home removal was 12.5 years old
- Just over half (52%) of the group was female
- The majority of youth were white (61%), while 22% were black and 4% were identified as other (including multiracial), 12% were unidentified, and 23% were identified as Latino/a
- The primary reasons for initial and subsequent removal from their homes were child behavior problems (34%), neglect (27%), and caretaker inability (25%)
- Before age 18, youth’s placement type varied depending on how many times the youth was placed in a new setting. Foster care was the most common placement (59%-71% of placements), followed by residential treatment (11-17%), group homes (9-15%), and shelters (4-7%)
- 14% of the youth had run away from care at least once

A survey of 96 youth identified the following characteristics:

- Females were overrepresented (63%)
- The sample had a lower representation of white youth (53%) and an overrepresentation of black youth (29%)
- Sexual orientation was also identified, which allowed for some analysis of different needs and experiences of gay/lesbian/bisexual/transgender (GLBT) youth, with 13% identified as gay, lesbian or bisexual and 2% identified as transgendered
- 90% of youth had contact with their birth families, most often with birth mothers or siblings
- 15% of youth were living with a partner or were married, and 15% had a child living with them

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## Services Received

The retrospective study also provides valuable information on the services accessed by youth before and after they turned 18 years old. Before youth turned 18, the majority were receiving help with accessing health care (83%), life skills training/PAYA (66%), “other services” such as therapy/counseling, nutrition programs, college preparation, summer camp, etc. (56%), and help reconnecting with family (53%). A significant percentage were also receiving help with housing assistance (48%), completing high school or GED (46%), and employment searches/job training/job search (38%). In the post-18 group, less than half of youth surveyed were receiving help with the aforementioned services, except access to health care (62%). After 18, the most accessed services were housing assistance (44%) and completing high school or GED (41%). Most youth reported that the services they received, both before and after turning 18, were either “somewhat helpful” or “very helpful.”

## Supportive Relationships

The study also looked at the supportive relationships youth had in their lives. Of the 96 respondents, 66 youth (69%) reported having a mentoring relationship with an adult they could count on. The most common mentors were program staff or a therapist (nine), followed by a foster mother (eight), a mother of a friend (eight), and an aunt/uncle (seven). Many youth also identified other supportive adults in their network, including relatives, significant others, professionals, friends, or others. Some youth mentioned supportive organizations in their lives, such as churches or therapeutic programs.

## Outcomes

The outcomes data collected in the survey indicates that the youth who age out of DSS are still at considerable risk, particularly for homelessness, significant mental health needs, early pregnancy, physical violence and unwanted sexual contact.

- Since turning 18, 37% reported experiencing homelessness
- Only 49% reported excellent or good emotional health, while 59% reported feeling “sad or hopeless almost every day for two weeks or more in a row” during the last 12 months, which is an indicator of depression
- 43% had been pregnant or gotten someone pregnant
- 30% reported being threatened or injured with a weapon in the last 12 months
- 11% reported sexual contact against their will within the last 12 months.

Other important youth outcomes were:

- 54% were unemployed
- Of those who were employed, 47% were employed 20 hours or less and only 10% received health benefits through employment (although 90% of respondents currently have health insurance through Mass Health)
- 34% had used illegal drugs and 31% had drunk heavily in the past 30 days
- 25% had been arrested within the last 12 months
- 8% had been incarcerated within the last 12 months

The data also indicate that while the majority of youth in the study completed high school (62%) or a GED (28%) and close to half were enrolled in college (43%), only 46% were employed and their average monthly income was only \$642.

Data from the survey indicates that outcomes were generally better for young people who were still in care, compared to those who were not, although it is unclear whether continuing to be in care protects against negative outcomes or whether youth who are doing better are more likely to remain or come back into care.

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### Additional Risks for Certain Populations

After transitioning to post-18 services, respondents reported a number of outcomes that fell clearly along lines of gender, race, and sexual orientation. GLBT youth were particularly vulnerable to a number of negative outcomes, including unemployment, high school dropout, drinking and drug abuse, as well as physical and sexual abuse. Minority youth were also more vulnerable to unwanted sexual contact than their white counterparts. Females and minorities were more vulnerable to depression than males or whites. Males of any race were more likely to have been arrested or jailed, and to have experienced homelessness.

### Post-18 Interview Findings

In-depth interviews with youth who voluntarily chose to return to DSS programming were conducted to allow for greater understanding of the experiences of post-18 youth. The interviews explored youth's experiences leaving care, their planning process for independent living/adulthood, their role in decision making, experiences working with adolescent outreach workers, returning to DSS for voluntary services, and outcomes.

### Need for Youth-Led Service Planning

Despite not being asked directly about their experiences with DSS services before they turned 18, a sizeable number of interviewed youth mentioned their negative experiences in the system, particularly in foster care. In one strand of their comments, the youth described feeling powerless in a system designed for young children while, as adolescents, they were in a decision-making life stage. There is widely accepted but narrowly exercised wisdom that youth at the age and experience level that represents the transition to adulthood respond better to guidance than rules. Yet, youth described their lack of involvement in service planning prior to turning 18. One youth said, "I can't really explain it but I feel like I never had any decision because even if you wanted to do something, they always make the final decision," and another explained, "Basically, before you turn 18, before 18 you really don't have a lot of say. You can have your opinion. You can't make the final say."

Some youth ran away from care to avoid what they felt was over-constraint from the DSS system: "Anything that went on in my life in DSS, I had no control. When

my grandmother passed away they didn't want me to go to the funeral, so I ran away."

Youth indicated that they needed to be more involved in their service planning prior to aging out, since they have significant responsibility for independently making major life decisions in early adulthood compared to their peers. One youth said, "I never thought that I was going to have to think about that because all that weight was on my DSS worker's shoulders. I never considered myself important in the DSS role because if I said, 'Hey, I want to be placed here,' my social worker would look at me and say, 'No you're placed where you are.' There was actually a couple times when I said, 'Hey I want to be moved' and never got moved."

For the group of youth interviewed after voluntarily returning to DSS care after age 18, the majority experienced an increase in their level of decision making. One youth said, "You know before it was all regulated by foster homes and DSS. Now it's all regulated by me. Basically I run my own life now." Another said, "I'm in the driver's seat. I'm the big chief; everything goes through me."

When youth came back into DSS care, they described their experiences with DSS caseworkers or specialized workers from the Adolescent Outreach Unit as more collaborative. Most youth were satisfied with their relationship with their outreach worker, and felt that their outreach worker was available, listened to their ideas, and was better able to connect them with resources than DSS workers in their past. Of those receiving services, 77-92% found the services somewhat or very helpful, 80% thought their experiences helped build on their strengths, 57% thought that people at DSS really seemed to care about them a good part, most, or all of the time.

In contrast to DSS caseworkers in general, the individual attention of an outreach worker was noted and appreciated by those youth who had access to them. Furthermore, among those youth interviewed in post-18 services after aging out or dropping out, the outreach worker was often the anchor that kept them connected to the DSS network. One youth said, "Yeah the outreach worker is incredible. I wish I had her my whole life...and when I was in DSS, I didn't feel like anybody cared about me, anybody was worried about me. It's just different."



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## Seeking Connection to Services

As youth aged out of DSS care, they had both a deep desire for independence and a need for connection to resources to help mitigate risk during their transition to adulthood. Youth wrestled with their decision to return to DSS care, after spending an average of 9.7 months out of care for females and 14.5 months out of care for males. One youth said, “I kind of wanted to see if I could actually do it on my own, you know.”

Interviewed youth said their primary reasons for leaving care included a desire for independence, placement failures, frustration with programs and placements, or running away. In the words of one youth, “I felt I didn’t get treated properly because I kind of got tossed in foster homes throughout [the city]... So when I turned 18 and they asked me to sign on, I didn’t want to sign on. I wanted to take a break—a few years’ break, that’s what I needed.” Another youth recalled, “DSS [kicked] me out of the program just because I wouldn’t go to summer school, even though I have gone since I was 12 years old. I wanted a break so I could get a job and money so I wouldn’t have to rely on DSS.”

The need for connection to resources was important to youth voluntarily returning to DSS services after age 18. Youth cited maintenance of current living conditions, a crisis, and/or goal pursuit as their primary motivations for returning to care post-18. Often during the time after youth left DSS, they tried out different living situations, whether with friends or family. A number of these youth became homeless or had a housing crisis, which precipitated their return to DSS care. Others had a specific goal in mind, such as a job or education, and felt they needed to connect with DSS to get the resources to pursue their goals.<sup>10</sup>

The major concerns of interviewed youth in their transition to adulthood mirror the concerns of their peers—namely, finances, housing, as well as being able to make it in school and on their own. Their concerns are reflected in their utilization of post-18 services. Health care, housing assistance, and educational support were the most used services.

## Stakeholder Interview Findings

A variety of stakeholders were interviewed to better understand the opinion of Massachusetts field experts regarding best practices and future initiatives that DSS can pursue. Responses fell under two broad categories: system-oriented challenges and individual-oriented challenges. Stakeholders also offered a variety of solutions.

### System-Oriented Challenges

A number of general systemic challenges were recorded. The first reflects many of the youths’ own statements, namely that the existing child welfare system is focused on children, and not age appropriate for youth or young adults. Second, due to inter-agency collaboration problems, youth frequently “fall through the cracks” between state systems. Third, lack of opportunities and options, especially housing, hindered the successful transition of aging-out youth. Fourth, implementing new ideas and initiatives to overcome these challenges is often difficult, despite departmental vision and intent to serve. In addition, lack of accountability for outcomes hampers the development of better practices. Finally, earlier interventions to keep children at home in the first place and ease the transition to independence once foster care is initiated were seen as important to success.

### Individual-Oriented Challenges

Individual problems that challenged successful transitions to adulthood fell under three main categories. The first was lack of relationships, especially unpaid, caring adult relationships. Strong mentoring relationships were seen as critical for resiliency. Given the widespread positive relationships youth expressed having with their outreach workers, evidence exists to support this premise. Second, the high level of trauma DSS youth have suffered, such as maltreatment, loss, etc., challenges the move to independence. One stakeholder reflected that “by the time the kids age out, they are the product of system failure” that continues to affect them into their maturity. Finally, stakeholders cited the lack of basic knowledge among aging-out youth concerning life skills and continuing sources of resources and support.

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## Solutions

Stakeholders identified many potential solutions to the problems they described. One solution of particular importance was the adaptation of current programming to focus on the unique needs of adolescents, aging-out youth and young adults. This included allowing youth to participate in decision-making and planning. Another suggestion stressed the need to encourage all youth to sign back in, not just the compliant ones, to broaden the safety net for these vulnerable young adults. Several respondents spoke about the need for enhanced inter-agency communication to prevent youth from falling through the cracks, and ensure that they stay at the center of youth development programming. Another solution offered involved the creation of a sense of permanency for DSS youth through fostering strong emotional support networks, as well as developing data, research, and evaluation techniques to address the current lack of accountability.

Youth aging out of DSS services face a number of unique and significant challenges in addition to those challenges that all youth face when transitioning into independence and adulthood. Through careful planning and devoted support, services can be initiated or strengthened to ensure that this transition is as successful as possible for the young people coming out of DSS care in Massachusetts.

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## 4.

# Vision for Youth Aging Out of Foster Care

## The Five Core Resources

### A Brief Primer on Youth Development

In the past decade there has been a knowledge explosion around youth development. A seminal piece of work was sponsored by the National Academy of Sciences<sup>11</sup> in which researchers from across the country agreed upon a basic set of personal and social assets for young people that facilitate healthy development and the essential requirement for the settings in which youth learn to live, work and play. The building blocks necessary for healthy development of all youth are embodied in the Five Core Resources. The Resources provide a holistic and asset-based framework through which the Task Force grounds its understanding of the complexities of preparing youth aging out of care for education, work and life.

This framework...

focuses on the resources, assets and strengths of youth, families and communities. It works to identify and mobilize those resources rather than attempting to catalog and ameliorate deficits. It looks at the conditions that create and maintain problems and seeks to change those conditions. It takes a holistic approach, looking at the person—taking time to understand his/her strengths and what s/he has to contribute—rather than the identified problem. It addresses the community and context in which youth live as a means to enhancing their lives.<sup>12</sup>

—Jarvis, Shear and Hughes,  
“Community Youth Development:  
Learning the New Story”

Again, the Five Core Resources are:

1. Ongoing, nurturing relationships with adults and positive relationships with peers
2. Safe and stable places for living, learning, working, and playing

3. Values, skills, opportunities and supports that promote optimal physical and mental health
4. Educational preparation and economic opportunity
5. Opportunities to make a difference through community service and civic participation

According to researchers, in order to ensure that young people receive the Five Core Resources, the settings in which youth learn to live, work and play must have specific features to promote positive youth development. These include:

- Physical and psychological *safety*
- Appropriate *structure*
- Supportive *relationships*
- Opportunities to *belong*
- Positive *social norms*
- Support for *efficacy*<sup>13</sup> and *mattering*
- Opportunities for *skill-building*
- Integration of *family, school and community efforts*.<sup>14</sup>

The implications of these “features of positive developmental settings” are far reaching. Ideally they would be present in young people’s families, schools, neighborhoods, religious institutions, shopping centers and restaurants as well as on buses and the T, at museums and in parks—and as many other places as possible. Further, young people must be engaged in age-appropriate ways in their own development—that is the path to learning and mastering skills and developing a strong sense of themselves and their ability to navigate through adolescence and adulthood.

Providing the developmental building blocks for youth in DSS care is possible. Since young people in care have faced difficult circumstances, the Task Force recommends overarching themes necessary for imple-

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menting the Five Core Resources effectively across systems. These are to:

1. engage the young person fully and meaningfully in the plans and vision for her/himself;
2. protect basic rights of youth in care; and
3. ensure all providers are culturally competent.

### Engage Youth in Planning for Their Lives

Consistent and continual recognition, encouragement and development of youth voices and choices should be at the center of life planning for youth in care. Youth-centered planning with trusted adults in all aspects of their lives is the cornerstone for ensuring the desired outcomes can be achieved. This kind of planning puts young people in charge of defining the direction of their lives rather than the systems that might or might not be available to serve them.

Youth-centered planning requires the cooperation of all parties to empower youth participation. Our kids need direct instruction in how to advocate for their needs, make and adjust education and career goals, and develop a personal support network. This instruction must be developmentally age-appropriate as well as culturally appropriate. The skills that are taught must be tailored to what the youth needs to ensure that his or her voice is heard and responded to effectively.

### Protect Foster Youth Rights

Task Force members are committed to full-fledged efforts to protect the rights of youth in care and support the formal introduction of a “Bill of Rights” for Foster Youth in Massachusetts. The DSS Youth Advisory Board developed a Foster Child Bill of Rights which will be distributed to all youth in care/custody. Training around the meaning and implementation of these rights will be offered to staff, foster parents and providers.

Educating youth about what they can expect and deserve while navigating the foster care system provides a sense of stability and control. Our kids preparing to transition out of care, and those who already have, often feel the system is acting ‘on’ them rather than ‘for’ them. The foster youth bill of rights articulates fundamental provisions that youth can seek

**“Young people in care often feel powerless, which decreases their motivation to try new activities, learn new skills or work toward long-term goals such as employment. Encourage young people to identify what they want and need, and plan how they will reach their goals and achieve their dreams...It can sometimes be challenging for caregivers and professionals to stand aside while young people chart their own paths, but it can be very empowering for youth when you honor their choices...”<sup>15</sup>**

— Casey Family Programs, *It's My Life: Employment*

if they are not provided by the Commonwealth—helping to reduce a sense of uncertainty. It also gives youth in care a feeling of ownership over their lives and a method of recourse if their rights are not honored.

### Multi-Cultural Competence

Given the disproportionate share of youth of color and GLBT youth in foster care, it is incumbent upon providers and policy makers to be educated and aware of differing needs. Policies, programs and resource allocation can impact these populations quite differently. The Task Force joins with the Commonwealth in focusing on the disparate needs of our kids so they can all be prepared for productive adulthood.

With these three essential elements—youth-centered planning, basic rights, and multi-cultural competency—as a backdrop, we now address the Five Core Resources individually as they relate to youth aging out of foster care.

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## The Five Core Resources

### RESOURCE 1: Ongoing Nurturing Relationships with Adults and Positive Relationships with Peers

Every young person needs at least one consistent, caring adult in their lives—the more, the better. No one said it better than Urie Bronfenbrenner:

*In order to develop normally, a child requires more complex joint activity with one or more adults who have an irrational emotional relationship with the child. Somebody's got to be crazy about that kid.*

Youth in the foster care system have been removed from their homes. They have been abused, neglected or not well taken care of during their childhoods. They often have endured multiple placements while in the child welfare system. Their home lives and the placement disruptions make maintaining relationships with adults and other young people difficult. Each move can mean leaving friends and family members behind. Repetitive severing of relationships can leave young people feeling distrustful, withdrawn and angry.

Ideally, youth are reconnected with their birth families, extended family members, a “family of choice,”<sup>16</sup> or adopted. Permanency is an essential goal for foster youth, no matter what age. However, for many older youth in care their goal for permanency is “independent living.” To be able to develop healthy attachments and successful relationships necessary to succeed in education, work and life, all of our kids need consistent, persistent people in their lives who are positive and caring—who are “crazy” about them and stick with them through the ups and downs of navigating their lives.

Our kids aging out of foster care not only need healthy relationships with adults but also with their peers. Policies which support youth participation in developmentally appropriate activities, such as procuring a drivers license, participating in school and after-school activities, or holding an out-of-school time job, can provide the opportunity for establishing healthy peer relationships.

### RESOURCE 2: Safe and stable places for living, learning, playing and working

Every young person deserves physical and emotional safety whether they live with a family or alone. Safety

is an essential component for young people to be able to focus on preparing for education, work and life. Typically, young people in DSS care have experienced many unsafe environments. It is essential that their surroundings under our watch are safe, healthy and age-appropriate. Our kids require a balance of supervised and unsupervised, structured and unstructured ways to spend their time. It is also critical that youth who age out of care transition into safe places to live, learn, work, and play.

Instability in home and school placements contributes to young people feeling unsafe. The Child Welfare League of America, in a recent joint statement with other organizations, noted the importance of school as a “safe haven:”

*“...In addition to the abuse and neglect initially bringing them to the attention of the child welfare system, they must deal with the emotional consequences of being removed from their homes and communities, separation from siblings, being bounced from home to home, and having the child welfare agency and court system involved in all aspects of their lives. Schools should be safe havens for children during times of transition and instability, but due to poor coordination and communication between schools and child welfare agencies, this often does not occur...”<sup>17</sup>*

National research has shown that youth who had fewer home placements per year were twice as likely to graduate from high school before leaving care.<sup>18</sup> One study found that 30 percent of youth in foster care had eight or more placements with foster families or group homes and 65 percent experienced seven or more school changes from elementary through high school.<sup>19</sup> As a result, foster youth are often disconnected from family and social networks.

Along with placement stability, youth need activities outside of school and home. “Extracurricular activities provide the added benefit of helping youth build interpersonal and social skills, meet other developmental needs, and generally enjoy a well-rounded life. Unfortunately, for youth in care, chaotic personal lives and multiple changes in school placements may interfere with their opportunities to participate in these activities.”<sup>20</sup> Further, these are the places, in addition to their relationships with significant adults, where youth learn important life skills.

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To be able to concentrate on school work, form relationships or learn life skills, youth absolutely have to ‘feel’ safe, not just be safe. Planning for youth safety needs to be tailored to their experiences and with their assistance.

Finally, youth who age out of care need a safe place to go when they leave DSS custody, and it is the goal of the Commonwealth to work with youth to ensure that this transition happens successfully. Unfortunately, a number of studies have found that too many youth exiting care find themselves in homeless shelters or other unsafe environments.

For our kids, past exposure to abuse or neglect and a high rate of change in their foster family and school placements for the most part is a given—our challenge is to be extra vigilant in creating safe and stable conditions for their healthy growth and development. This will better prepare youth in care and those who have aged out of care for education, work and life.

### **RESOURCE 3: Values, skills, opportunities and supports that promote optimal physical and mental health**

Every young person’s ability to thrive is directly related to having a healthy body, mind and spirit. All three are the result of regular health care, good nutrition and exercise, the knowledge and the skills needed to secure health and mental health services, and role models of physical and psychological health. Youth in foster care often have not benefited from these conditions and resources throughout the course of their childhoods.

Overall, national health data for youth in state care is troubling and cries out for a preventive response. High rates of physical and mental health problems have been extensively documented among children and youth as they enter foster care and while they are in care, revealing that many youth in placement under the supervision of the child welfare system have, or are at risk for having, acute, chronic, disabling and potentially life-threatening illnesses or conditions. Many of them could be considered children with special health care needs based upon their chronic medical and mental health conditions. In addition, due to the numerous changes in foster care placements, continuity of treatment often suffers. There is strong reason to believe, and the available data suggest, that when

youth exit foster care their poor health status may persist or even worsen, due to both increased risk-taking behaviors and more limited health care access.<sup>21</sup>

Another health issue that needs to be addressed is the disproportionately high percentage of young women in foster care who become pregnant before the age of 19. By age 19, nearly half of the young women in foster care have been pregnant, compared to only one-fifth of their peers not in foster care, according to statistics from the National Campaign to Prevent Teen Pregnancy. Despite the good efforts of and partnership among DSS, the Department of Public Health and the Massachusetts Society for the Prevention of Cruelty to Children to provide pregnancy prevention training through the Commonwealth to youth, foster parents and staff, there is an urgent need for more high-quality pregnancy prevention programs for teenagers in foster care.<sup>22</sup>

Both providers and foster families need education and support to manage the mental and physical health needs of youth in foster care and those who have aged out of care. Susan Cole, Massachusetts author of “Helping Traumatized Children Learn,” wrote that “mental health professionals with expertise in trauma” can provide a variety of assistance to staff at schools.<sup>23</sup>

Massachusetts has taken an important step in providing for the health and mental health needs of youth aging out of care by extending MassHealth coverage through age 21 for all youth in DSS care following their 18th birthday. However, the expansion of health insurance coverage for youth does not address all of the physical and mental health needs faced by our kids slated to age out of foster care.

Youth in care are more vulnerable to health problems; hence, steps must be taken to ensure their access to age-appropriate services that promote all aspects of physical and mental health. Further, barriers to youth receiving high-quality health care must be eliminated. Clearly, cultivating conditions that lead to good physical and mental health are key to positive youth development and maturation.

### **RESOURCE 4: Educational preparation and economic opportunity**

Every child needs and deserves the intellectual development, motivation and personal, social-emotional and cultural skills necessary for successful work and

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lifelong learning. These are a result of quality learning environments, challenging expectations and consistent formal and informal guidance and mentoring.

Youth aging out of foster care tend to have low rates of high school graduation and college attendance. Youth planning to age out of care need support to finish their high school education and prepare for higher education and vocational education, as well as meaningful employment opportunities. We know from the study conducted for the Task Force by the Boston University School of Social Work that the majority of aged-out youth interviewed completed high school (62%) or a GED (28%) and close to half enrolled in college (43%). These are encouraging data for those youth who remain connected to services.

Helping youth gain work experience in high school has proven to be advantageous. Casey Family Programs' 2003 national alumni study found that youth in out-of-home care who had extensive employment experience while in high school were more than four times as likely to graduate as those who lacked this experience.<sup>24</sup>

Some strides have been made recently in increasing the collaboration between DSS and School Districts. Outcomes include planned communication, information sharing, collaborative planning, joint decision-making, and a better understanding and respect for the capacity, complexity and limits of each agency. Improvement was also observed in the productive participation of foster parents in school meetings and activities and in more effective communication between parents and teachers.

In Massachusetts, youth in care can receive tuition waivers at state colleges—a critical factor in ensuring that our kids can take an important step toward economic self-sufficiency. However, pursuing college presents youth with a series of hurdles—such as housing and transportation—that can be daunting and discouraging.

### **RESOURCE 5: Opportunities to make a difference through community service and civic participation**

Every child and youth needs and deserves the chance to make a difference—in their families, schools, communities, nation and world. These opportunities can provide youth with models of caring behavior,

awareness of the needs of others, a sense of personal responsibility to contribute to larger society, and opportunities for volunteering, leadership and service.

Research has indicated that participation in a variety of service activities benefit youth socially, emotionally and academically and likely has the most positive influence on youth at risk. However, we know that children from lower-income families tend to participate less in out-of-school time activities.<sup>25</sup>

Youth participation in after-school programs improves high school students' attendance in classes, reduces their rate of course failures, and improves graduation rates.<sup>26</sup> Further, participation in project-based, collaborative after-school activities helps youth develop non-academic competencies such as social and critical thinking skills that can help them in other school-related challenges. Lastly, as one report on a Boston program observed, participating in these kinds of activities gives youth more contact with caring adults—and that, by itself, increases their predisposition for learning.<sup>27</sup>

## **Outcomes Framework for the Healthy Development & Preparation of Youth Transitioning from Care**

The framework that follows identifies each of the Five Core Resources and the outcomes which the Task Force posits are essential for the healthy development and preparation of youth transitioning from care. The outcomes are based on science and experience and customized specifically to address the critical life issues faced by our kids. The measures of potential outcomes are noted as "sample indicators" to suggest that each family, institution and provider would need to identify indicators that directly pertain to their current programming, including those that would need program modification or development in order to achieve their goals, and those that could be reached through partnerships. The integrity of the framework rests on *all Five Core Resources* being delivered in a substantive, consistent and generous way throughout foster youth's lives.

## Framework for the Healthy Development & Preparation of Transitioning Youth

### CORE RESOURCES

### YOUTH OUTCOMES

### SAMPLE INDICATORS – EVIDENCE OF:

<p><b>Ongoing, Nurturing Relationships with Adults &amp; Positive Relationships with Peers</b></p>	<p>Youth have a permanent connection to a caring adult Youth have access to supports &amp; resources from adults Youth have healthy peer relationships and friendships</p>	<ul style="list-style-type: none"> <li>• Permanent and unconditionally loving parent(s) or guardian(s)</li> <li>• At least one non-parenting adult they can turn to for support</li> <li>• Adults in their communities value youth</li> <li>• A positive relationship with three or more caring adults</li> <li>• Participation in choosing placements to ensure stability and permanency while in care and after care</li> <li>• The ability to maintain friendships</li> </ul>
<p><b>Safe and Stable Places for Living, Learning Working, &amp; Playing</b></p>	<p>Youth have emotional, psychological &amp; physical safety Youth have a safe &amp; stable home Youth have access to effective learning &amp; working environments</p>	<ul style="list-style-type: none"> <li>• Engagement in after-school care and/or other structured opportunities</li> <li>• Engagement in comfortable unstructured time and play</li> <li>• Physically, emotionally and psychologically safe</li> <li>• Understanding of the importance to voluntarily access DSS services through age 21</li> <li>• Low-cost, safe housing options</li> <li>• Safe places to be with friends during non-school hours</li> <li>• Involvement in sports, clubs, teams, schools or organizations three or more hours per week</li> <li>• CORI barriers are removed to increase access to community activities and resources</li> </ul>
<p><b>Values, Skills, Opportunities and Supports that Promote Optimal Physical &amp; Mental Health</b></p>	<p>Youth have a positive attitude toward the present &amp; future (hope) &amp; the ability to visualize the future Youth are healthy and fit, both mentally &amp; physically</p>	<ul style="list-style-type: none"> <li>• Their lives have a sense of purpose and they are optimistic about their personal futures</li> <li>• Opportunities for spiritual influences and creative expression</li> <li>• Medical and dental check ups in last 12 months</li> <li>• A healthy diet and regular active exercise</li> <li>• The skills and confidence to refuse alcohol, tobacco and other drug use, and sex</li> <li>• Resolution of conflict non-violently</li> <li>• Stable health &amp; mental health providers s/he can name &amp; know how to access &amp; has insurance</li> <li>• Education about sexual health</li> <li>• Valuing their own health and mental health</li> <li>• Delayed gratification in healthy ways</li> <li>• Ability to advocate for oneself</li> </ul>
<p><b>Educational Preparation &amp; Economic Opportunity</b></p>	<p>Youth achieve academic milestones, including high school graduation Youth have life &amp; leadership skills Youth have 21st century work skills for a viable career Youth are prepared for &amp; engaged in one or more post-secondary educational or vocational programs of their choice</p>	<ul style="list-style-type: none"> <li>• Promotion at grade level</li> <li>• Basic literacy</li> <li>• Experiences in workplace learning (e.g., internship, apprenticeship) and/or skill-development activities</li> <li>• Exposure to a variety of jobs (i.e., internships, etc.)</li> <li>• Preparation for employment and placement in jobs</li> <li>• A support system while employed</li> <li>• Knowledge of and comfort with people of different cultural/racial/ethnic backgrounds</li> <li>• Understanding of options for personal banking, consumer credit, asset-building</li> <li>• Ability to plan ahead and make choices</li> <li>• Ability to get along with others in school</li> <li>• Ability to solve problems related to life skills, academic performance and employability</li> <li>• Legal citizenship status in place to increase access to college and work</li> </ul>
<p><b>Opportunities to Make a Difference through Community Service &amp; Civic Participation</b></p>	<p>Youth contribute to their community</p>	<ul style="list-style-type: none"> <li>• Helping other people, such as through food drives, community clean-up campaigns, mentoring younger children, or other pro-social activities</li> <li>• Placing high value on helping other people, including helping other youth</li> <li>• Knowledge of current events</li> <li>• Engagement as key stakeholders among advocates addressing community issues</li> <li>• Involvement in changing policies and community decisions</li> </ul>



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## 5. Recommendations

### Introduction

The Task Force has had the active and sustained involvement of the Massachusetts Executive Office of Health and Human Services and Department of Social Services and representatives of the Massachusetts Departments of Mental Health, Housing and Community Development, Elementary and Secondary Education, Youth Services, and Transitional Assistance, along with more than 40 providers throughout its history. Our understanding has deepened and our recommendations have been sharpened by this array of expertise.

Massachusetts is a national leader in many aspects of policy and practice around youth transitioning from care. DSS has developed some progressive policies and promising practices over the past several years. The difficulty, as in most complex change efforts, is in implementing those policies and translating them into consistent practice. Our approach is to build on the assets and address ways that the system of care and preparation can be refined and strengthened.

*These recommendations are point-in-time statements, designed to be relatively comprehensive and certainly represent goals to which we aspire. Many of these recommendations already in place need strengthening and some are in the process of being implemented. Our purpose here is to look as comprehensively as possible and address key conditions for positive outcomes for foster youth. We are committed to quality—and plan to learn and improve and work in partnership over time with public and private entities to ensure that our kids are prepared for education, work and life.*

### Assumptions

There are a number of assumptions underlying the recommendations presented by the Task Force. They are as follows:

- The youth outcomes framework is the foundation of our approach and is intended to inform practice, policy and resource actions that will lead to achieving positive youth outcomes. From what we have

been able to discern, there is no other statewide effort starting with the conditions necessary for youth to thrive and building from there.

- Sample indicators are listed in the framework because DSS and other government agencies, as well as private providers, will have to develop their own customized set of indicators for which they will be held accountable. The customized outcomes should combine science, experience and program goals and meaningfully address all Five Core Resources to the greatest degree possible.
- Responsibility for ensuring that all our youth are prepared for education, work and life lies not only with DSS, but with many other Executive departments (including those outside of the Executive Office of Health and Human Services), the Juvenile Court, the Legislature, providers, and the private sector. Implementation of the outcomes framework will be a complicated, multi-faceted effort that will require the deep involvement of all relevant parts of the government and the Commonwealth as a whole.
- Implementing the Five Core Resources and outcomes framework will require the strengthening and revamping of current systems and the development of new systems and structures for state and private agencies. This will take time and should be a well-thought out process with clear direction, outcomes, assigned responsibility and timetables.
- Many professions and disciplines are involved in the planning and delivery of services to youth, and all must play a role in developing the new approach called for in this report. Our specific recommendations will impact the work of social workers, mental health providers, educators, lawyers and others. Many proposals touch on needed amendments to the General Laws or to Juvenile Court procedure, because of the singular role that the law plays in framing the rights, duties and obligations of the various parties involved in the transition process.

**RECOMMENDATION 1**

Establish a dedicated and fully resourced transition age youth system of care and preparation that is organized around the Five Core Resources

PRACTICE REALITY	RECOMMENDATIONS	TYPE OF ACTION	PARTY RESPONSIBLE
<p>The youth development model of the Five Core Resources framework is relevant at all levels of the system.</p>	<p>Adequately resource these recommendations that lead to a public/private partnership system dedicated to youth transitioning from foster care to adulthood.</p> <p>Build the Five Core Resources framework into State and sub-contract requirements, as well as into requirements of other funders.</p> <p>Support standardized decision-making practices across the public/private system.</p>	<p>Budget</p> <p>Administrative</p> <p>Administrative</p>	<p>Legislature</p> <p>EOHHS Private funders</p> <p>EOHHS</p>
<p>The DSS Adolescent Outreach Workers are valued by youth in foster care and have been helpful to them in their transition process.</p>	<p>Expand the Adolescent Outreach Program so that outreach workers with specialized training are available in every DSS office throughout the Commonwealth.</p>	<p>Legislative</p>	<p>Congress—Chafee Act</p> <p>Legislature</p>
<p>State provision of services beyond youths' 18th birthday requires a transparent and orderly process for clients to obtain information regarding those services. Youth who are likely to age out, along with their court-appointed attorneys, need timely information concerning the opportunity to receive services past their 18th birthday.</p>	<p>Youth in DSS custody and their attorneys shall receive information at the Foster Care Reviews at age 17 or earlier, notifying them of the availability of services past the age of 18, the eligibility requirements, and the process for applying.</p> <p>Youth and their attorneys should be given the opportunity to negotiate the details of a post-18 service plan prior to the 18th birthday, and the Department should commit to negotiating in good faith.<sup>28</sup></p> <p>DSS should create a new template Voluntary Placement Agreement that is specifically designed for use in cases of youth turning 18.<sup>29</sup></p>	<p>Guidance to FCR</p> <p>Statute Administrative</p> <p>Administrative</p>	<p>DSS</p> <p>Legislature DSS</p> <p>DSS</p>
<p>Quality improvement systems have clear, standardized expectations, data collection and accountability.</p>	<p>DSS should set clear youth development practice expectations of all DSS staff and program providers. Language to this point should be included in contracts and subcontracts.</p> <p>All foster care youth should have a comprehensive life skills assessment.<sup>30</sup></p> <p>DSS staff, group care providers, and foster parents should be held accountable for youth development outcomes in the Foster Care Review.<sup>31</sup></p> <p>Foster parents and biological parents should be required to participate in activities and practices that lead to positive youth outcomes.<sup>32</sup></p> <p>An evaluation system that measures youth outcomes as defined in the Five Core Resources should be put in place across DSS and provider systems.</p>	<p>Administrative</p> <p>Administrative</p> <p>Administrative</p> <p>Administrative</p> <p>Administrative (New Policy)</p>	<p>DSS</p> <p>DSS</p> <p>DSS</p> <p>DSS</p> <p>DSS</p>
<p>Youth with mental health issues who are transitioning from DSS care needing DMH or DMR services as adults should be automatically eligible.</p>	<p>All children in DSS custody who have been determined as eligible for DMH services as children should be automatically eligible for DMH services as adults. This would require the creation and funding of a new level of services and placements that are appropriate for 18-to-22 year olds with moderate mental health issues.</p> <p>DMH and DMR should review and act on applications for adult services from youth in DSS custody who do not already have an open DMH or DMR case six months before turning 18.</p>	<p>Statute and Budget</p> <p>Administrative (New Regulation)</p>	<p>Legislature</p> <p>DMH DMR</p>

## RECOMMENDATION 1 (continued)

Establish a dedicated and fully resourced transition age youth system of care and preparation that is organized around the Five Core Resources

PRACTICE REALITY	RECOMMENDATIONS	TYPE OF ACTION	PARTY RESPONSIBLE
<p>The complexities of the Massachusetts education system for foster youth and their families requires the creation of a shared Secretariat level Task Force to dedicate focused attention on improving educational outcomes for youth in state custody.</p>	All school districts across the Commonwealth should designate a foster care liaison (the Homeless Coordinator would be a good option), charged with coordinating with counterparts in other districts and with DSS when foster youth move into or out of their districts. Further, DSS should be more open to sharing information about youth with school districts, where appropriate.	Administrative (New Regulation)	DESE
	Amend the General Laws to require all school districts to enroll foster children who move into their districts immediately.	Statute	Legislature
	Amend the General Laws to require all school districts to continue the enrollment of foster children who move out of their districts until the end of the current school term, should the State or the Juvenile Court determine that such continued enrollment is in the child's best interests.	Statute	Legislature
	Ensure that all foster youth are engaged in school and have full access to all school-related activities (sports, after-school activities, etc.).	Administrative Budget	DESE, DSS Legislature
	Amend the General Laws to require all school districts to respond to a request from the State or a child's court-appointed attorney for a foster child's school records within three school days, for foster children who move out of the district.	Statute	Legislature
	Ensure that an "education passport" (all education related documents) is maintained and delivered to all foster youth transitioning out of care.	Administrative	DESE DSS
	Fully enforce the McKinney-Vento Act mandating the successful and expedient integration of homeless youth in public schools.	Administrative	DESE, DSS, Advocates
	Any foster child who has an IEP should be referred for transitional services, if needed, under Chapter 688 upon reaching his/her 15th birthday.	Statute	Legislature
	The Educational Surrogate Parent program should be expanded so all foster youth have access to special education advocates and a surrogate parent, if needed, to attend IEP meetings. <sup>33</sup>	Budget	Legislature
	Foster youth who receive special education services need extra attention and an advocate.		

## RECOMMENDATION 2

### Align foster care practices with the Five Core Resources framework for the healthy development of young people

PRACTICE REALITY	RECOMMENDATIONS	TYPE OF ACTION	PARTY RESPONSIBLE
For all youth, the critical skills of goal setting and self-advocacy, and the emotional condition of positive self esteem and self worth, are the result of youth participants being engaged in decisions about their lives. Foster youth full participation in all aspects of decision making and permanency planning should be a given.	Along with older youth in care, DSS should develop and implement a consistent framework for including youth voice in decisions and permanency planning. <sup>34</sup>	Administrative	DSS
Youth who are receiving services post-18 need a review of their service plans to update services as needed.	110 CMR § 6.10(2) should be amended to extend Foster Care Reviews to youth who are receiving services post-18 pursuant to a Voluntary Placement Agreement. <sup>35</sup>	Administrative (New Regulation) Legislation	DSS Legislature
Foster youth need extra supports not present in their everyday environment, such as self-advocacy, information on entitlements (including public or subsidized housing), assistance with developing goal-setting skills, and clear plans for self-sufficiency, in order to best support the 'aging out' process.	Expand opportunities for all foster youth for exposure and interaction: employment connections (presentations, networking, tours, shadow days), entrepreneurship training, participation in team sports, music, clubs, and pro-active early parenthood information. Adopt and disseminate the DSS Foster Child Bill of Rights; it is a comprehensive, compelling argument for supporting the rights and needs of youth in foster care. <sup>36</sup>	Administrative Advocacy Statute	DSS Congress—Chafee Act Providers Legislature
The integration and successful implementation of youth development practices requires a robust professional development system, information sharing process, and culture shift to continuous organizational learning.	Provide youth development training on the Five Core Resources, youth development and attainment of youth outcomes for all staff/foster parents who work with foster youth. Strengthen training for child welfare workers in adolescent permanency planning from a youth development perspective. Establish practice learning networks among state workers and providers. Frontline DSS staff should be assessed on their proper implementation of procedures for offering and negotiating service plans for youth turning 18. <sup>37</sup>	Administrative Administrative (New Policy) Administrative Administrative (New Policy)	DSS Providers DSS DSS Providers DSS

## RECOMMENDATION 2 (continued)

Align foster care practices with the Five Core Resources framework for the healthy development of young people

PRACTICE REALITY	RECOMMENDATIONS	TYPE OF ACTION	PARTY RESPONSIBLE
<p>Massachusetts is a leader in making higher education accessible to former foster youth. Currently only <i>tuition</i> waivers are available to state schools for former foster youth who are in DSS custody on a care and protection matter, and higher education fees must still be paid.</p> <p>Former foster youth who go to college often face extra pressures and challenges because of their history and experiences, and they require extra support and assistance in order to succeed.</p>	<p>The Legislature should expand the foster child tuition waiver program to include CHINS youth and a waiver of fees.<sup>38</sup></p>	<p>Statute</p>	<p>Legislature</p>
<p>Providing transitional support services without housing is like conducting driver's education without a car. All Commonwealth agencies with responsibility for housing should place special emphasis on making housing resources available for aging out youth.</p>	<p>Designate a foster youth liaison at each UMass campus, state college, and community college, and community college, and charging this person with attending to the needs of self-identified former foster youth.</p> <p>Funds should be appropriated to provide extra support services, such as tutoring, mentoring, job placement, and summer programs to enable former foster youth to succeed in higher education.</p> <p>Funds should be appropriated for former foster youth to have temporary housing provided during college vacations, so that they may live in the dorms during session and still have some place to go during breaks.</p> <p>The Family Unification Program's rules should be amended to include a Section 8 priority code for youth aging out of DSS custody.</p> <p>Expand the number of Mass Housing vouchers each fiscal year designated for transitioning youth, and fund wrap-around services.</p>	<p>Administrative</p> <p>Budget</p> <p>Budget</p> <p>Administrative (New Regulation)</p> <p>Administrative</p>	<p>Board of Higher Ed</p> <p>Legislature</p> <p>Legislature</p> <p>DHCD</p> <p>DHCD</p>

## RECOMMENDATION 3

Every youth should transition from DSS care with a secure, permanent relationship with a family or caring adult

PRACTICE REALITY	RECOMMENDATIONS	TYPE OF ACTION	PARTY RESPONSIBLE
Relationships and strong personal connections offer stability and emotional balance. Safe and healthy connections to families of origin are a critical component for youths' successful transition to adulthood, and these connections should be developed and supported.	<p>Whenever possible, ensure youth in care have enduring family relationships.</p> <p>Expand the mentoring program to ensure foster youth have long-term life mentors and other non-family adult relationships to encourage continued engagement in school and academic success as well as daily living matters.</p> <p>Review policies and remove barriers to continuous siblings relationships (housing together, shared community/ work activities).</p> <p>Nurture, support and fund strong local and state networks of current and former foster kids.</p> <p>Support opportunities for youth to connect with youth in similar situations.</p> <p>Entitle adopted foster youth to family search resources.<sup>39</sup></p>	<p>Administrative</p> <p>Administrative</p> <p>Administrative</p> <p>Administrative</p> <p>Administrative</p> <p>Administrative</p> <p>Administrative</p>	<p>DSS</p> <p>DSS Providers</p> <p>DSS</p> <p>DSS</p> <p>DSS Providers</p> <p>DSS</p> <p>DSS</p> <p>DTA</p>
Foster youth with children need additional support after they turn 18. Federal law requires the state to provide support when the teen is a minor, but once turning 18 support is optional.	<p>DSS should work with DTA to ensure benefits are secured for the baby as well as the youth in care until age 21.</p>	<p>Administrative</p>	<p>DSS</p> <p>DTA</p>
Families considering adoption of older youth need access to continued services and support post adoption and foster care.	<p>Expand support of caregivers so they continue to receive state support as they move toward permanency for the youth in their care, including ongoing post adoption and post foster care services.</p>	<p>Administrative</p>	<p>DSS</p>
Massachusetts has an innovative statute providing foster children the right to visit each other when placed separately. There should be clear authority allowing youth who have transitioned to adulthood to visit with younger siblings still in DSS custody. <sup>40</sup>	<p>The Legislature should amend the sibling visitation statute to permit former foster youth over the age of 18 to petition the Juvenile Court for a visitation order with younger siblings who are still in foster care.</p> <p>The Juvenile Court should similarly be given jurisdiction to include in adoption decrees a sibling visitation provision involving former foster youth over the age of 18 at the time of the adoption.<sup>41</sup></p>	<p>Statute</p> <p>Statute</p>	<p>Legislature</p> <p>Legislature</p>
There are legitimate concerns about managing risks associated with working with foster youth. Negative behaviors are often penalized at levels well beyond what youth outside the system of care and preparation would bear, often resulting in placement in more restrictive settings than necessary.	<p>Increase 'time out' options for teens to decrease movement from DSS to DYS.</p> <p>Fully fund DYS's Juvenile Detention Alternatives Initiative as a respite option.</p> <p>Provide more trauma-informed training, guidance and mentoring for workers, foster parents and providers.</p> <p>Work with foster parents and private providers to proactively address risk management issues &amp; develop solutions in alignment with the Five Core Resources, e.g., review 'No Touch' policies relative to healthy transition of youth out of foster care.</p>	<p>Administrative</p> <p>Budget</p> <p>Administrative</p> <p>Administrative (New Policy)</p>	<p>DSS</p> <p>Legislature</p> <p>DSS Providers</p> <p>DSS</p>

## RECOMMENDATION 3 (continued)

Every youth should transition from DSS care with a secure, permanent relationship with a family or caring adult

PRACTICE REALITY	RECOMMENDATIONS	TYPE OF ACTION	PARTY RESPONSIBLE
<p>Youth participation in permanency hearings is an essential element to ensure that these proceedings are meaningful, dignified, and comprehensive.</p>	<p>The Juvenile Court should promulgate a rule or standing order to implement Chapter 4 of the Acts of 2008 statewide.<sup>42</sup></p> <p>Participation should be presumed for all youth 12 and older.</p> <p>The Court should hold DSS and attorneys and parents, accountable for ensuring the participation of youth in permanency hearings.</p>	<p>Administrative (New Court Rule)</p> <p>Administrative (New Court Rule)</p> <p>Administrative (New Court Rule)</p>	<p>Juvenile Court</p> <p>Juvenile Court</p> <p>Juvenile Court</p>
<p>Ensuring that youth make a successful transition to adulthood requires collaboration of public systems, private providers and communities.</p>	<p>The Legislature should amend MGL c. 119, § 29B to require twice-a-year permanency hearings instead of the current annual hearings, particularly for youth 16 and older.</p> <p>The Legislature should amend Chapter 119 to require DSS to continue providing services to youth to age 21, should the youth consent, and to provide ongoing court jurisdiction and continue the appointment of counsel in such an event.</p>	<p>Statute</p> <p>Statute</p>	<p>Legislature</p> <p>Legislature</p>
<p>What we measure matters; data describing the court process is necessary to assess the adequacy of these proceedings.</p>	<p>The Juvenile Court should collect data concerning the timeliness and comprehensiveness of permanency hearings, as well as participation rates for youth. The data should be aggregated and made public on an annual basis.</p>	<p>Administrative and Budget</p>	<p>Juvenile Court and Legislature</p>
<p>By creating a Juvenile Court and designating it as the jurisdiction to resolve matters relating to the care and protection of children, the Commonwealth has indicated the importance of ensuring that youth under the State's care and custody are receiving the help to which they are entitled and are on track to becoming successful, interdependent adults.</p>	<p>The Juvenile Court should commit to a "One Judge, One Family" model throughout the state, so that the same judge hears all aspects of care and protection and CHINS cases, from initial appearance to dismissal.</p> <p>The Legislature should amend MGL c. 119 to create a new "discharge hearing" to occur 30 days prior to the termination of court jurisdiction over transitioning youth. At this hearing, the State would be required to verify that the youth has been provided vital documents; assistance in obtaining various post-discharge services, such as health care, housing, college or technical school admission; and assistance in developing ongoing relationships with adults in the community. If the court finds that the State has not met these requirements, then it should be empowered to maintain jurisdiction until it is satisfied that the requirements have been met.</p>	<p>Administrative (New Court Rule)</p> <p>Statute</p>	<p>Juvenile Court</p> <p>Legislature</p>

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## Legislative Recommendations

The Task Force policy recommendations are aligned with the practice and legal recommendations above and have three facets:

- A comprehensive memorandum to the board on child abuse and neglect established in the Act Relative to Child Abuse And Neglect (2007) to fulfill its charge “(14) Aging-out, including the monitoring of how effectively the department of Children and Families assists adolescents who, due to their age, are transitioning out of the child welfare system with health care, housing, higher education and other needs” as part of “the comprehensive plan [for a coordinated, system-wide response to child abuse and neglect, including related mental health, substance abuse and domestic violence issues] that “shall look forward 5 years or more, shall be updated annually to plan for the ensuing 5-year period [and] assess previous efforts and, if appropriate, shall include legislative recommendations, such as changes to the parameters of the comprehensive plan.”
- An omnibus bill filed in the 186th (2009-2010) General Court, et seq., addressing those provisions of the Task Force’s comprehensive memorandum to the board on child abuse and neglect that require an act of the legislature.
- A unique line item in the Commonwealth’s annual acts of making appropriations for the given fiscal year (beginning with Fiscal Year 2010) to fund a dedicated and resource-filled transition age youth system of care and preparation.

The comprehensive memorandum to the Board on Child Abuse and Neglect, and an act of the legislature relative thereof shall include but not be limited to the following:

### A Preamble of Legislative Intent

Whereas every year approximately 600-700 youth transition out of state custody, it shall be the policy of this Commonwealth to ensure these youth leave having achieved outcomes aligned with the Five Core Resources: **(1)** ongoing, nurturing relationships with adults and positive relationships with peers; **(2)** safe and stable places for living, learning, working, and playing; **(3)** values, skills, opportunities, and supports that promote optimal physical and mental health; **(4)** educational preparation and economic opportunity; and **(5)** opportunities to make a difference through community service and civic participation.

Specific recommendations necessary to fulfill that intent include numbers that refer to the Five Core Resources as numbered in the paragraph above where appropriate):

In order to more readily fulfill Federal Chafee 20% match requirements for youth in these circumstances, the Legislature will establish a Transitioning Out of State Care line item (4800-0039) within the Department of Social Services account (4800-) [LEGISLATION].

**(1)** Require the Five Core Resources be included in contract agreements [ADMINISTRATIVE]

**(1)** Uniform statewide implementation of Ch. 4 of the Acts of 2008 (relative to complying with the Federal Safe and Timely Placement of Foster Children, and the Child and Family Services Improvement, Acts of 2006. [LEGISLATIVE/COURT RULE].

**(1)** Require youth participation in permanency hearings [LEGISLATION/COURT RULE].

**(1)** Juvenile Court should commit to “One Judge, One Family” model and hear all CHINS cases, as well [LEGISLATION/COURT RULE].

**(1)** Juvenile Court should collect data on permanency hearings and made public on an annual basis [LEGISLATION/COURT RULE].

**(1)** Require DSS to report child’s preferred placement to the Court [LEGISLATIVE/ ADMINISTRATIVE].



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(2) Family Unification Program’s rules should be amended to include a Section 8 priority code for youth transitioning out of DSS [LEGISLATION/ADMINISTRATIVE].

(2) Earmark Line Item 7004-9024 - rental assistance to low income families— for housing vouchers [LEGISLATION].

(2) Appropriate funds for temporary housing during college vacations [LEGISLATION/ADMINISTRATIVE].

(3) Change requirement of permanency hearings from annually to twice-a-year and extend in some form to aged out youth 18-21 [LEGISLATION/ADMINISTRATIVE].

(3) Youth and their attorneys should be given the opportunity to negotiate the details of a post-18 service plan prior to the 18th birthday, and the Department should commit to negotiating in good faith. [LEGISLATION/ADMINISTRATIVE]

(3) DSS to issue their new template Voluntary Placement Agreement specifically designed for use in cases of youth turning 18 [LEGISLATION/ADMINISTRATIVE].

(3) Juvenile Court should be given jurisdiction to include a sibling visitation provision in adoption decrees [LEGISLATION].

(3) Permit former foster youth to petition the Juvenile Court for a visitation order with younger siblings [LEGISLATION/COURT RULE]

(3) Children in custody should automatically be eligible for DMH adult services— create new level of services for 18-22 age group [LEGISLATION].

(3) DMH and DMR should review applications for those without open cases six months before turning 18 [ADMINISTRATIVE].

(3) Codify existing regulation that extends coverage until 21st birthday [LEGISLATION].

(4) Designate a foster youth liaison at each UMass campus, state college and community college [ADMINISTRATIVE].

(4) Fund extra education support services i.e., tutor [LEGISLATION]

(4) Include CHINS youth in waiver of fees per SJC ruling equating all kids in care [LEGISLATION].

(4) Amend Chapter 119 to require DSS to continue providing services to youth to age 21 when requested, or establish a presumption of eligibility for 90 days [LEGISLATION].

(4) Amend General Laws regarding enrollment of foster children who must change school districts... file must follow child. [LEGISLATION]

(4) All school districts must designate a foster care liaison [LEGISLATION]

We recognize that we have not yet identified actions relating to Core Resource #5 and plan to do so.



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## Endnotes

<sup>1</sup> These Five Core Resources are adapted from those developed by the Massachusetts Executive Office of Health and Human Services' (EOHHS) statewide Youth Development Advisory Council which developed a statewide youth policy with Five Core Resources in 1999; see also America's Promise Five Promises and the Five Core Resources of the Younger Americans Act.

<sup>2</sup> "Our kids" refers to youth in Department of Social Services (DSS) care and who thereby are the collective responsibility of the citizens of Massachusetts.

<sup>3</sup> Under Massachusetts law, a youth under 17 can be found by the juvenile court system to be a Child in Need of Services (CHINS) and remanded to DSS care for truancy, running away, disobedience and other status offenses.

<sup>4</sup> Baron, J. *Pawtucket Times*, (Rhode Island). "R.I. urged not to drop foster kids at 18," April 4, 2007.

<sup>5</sup> Daly, G. and Faigen, G. (2003). "Foster Care and Youth Development: How Youth Development initiatives in Massachusetts are working to improve outcomes for youth leaving the foster care system," *Common Ground for Professionals, Advocates and Families*.

<sup>6</sup> In this report we use the term, "education," to refer to a wide array of opportunities for post-secondary education and vocational training.

<sup>7</sup> Heckman and Cunha cited in America's Promise (2006). *Every Child, Every Promise: Turning Failure into Action*, Alexandria, VA.

<sup>8</sup> Data Source: Consumers in DSS Placement\* 4Q 2007 (6/30/07).

<sup>9</sup> The study was conducted by Dr. Mary Elizabeth Collins, Principal Investigator; Cassandra Clay, Co-Principal Investigator; and Rolanda Ward, Project Director. Research Assistants Lucy Darragh and Jamie Frederick also contributed to the report. The research team expresses gratitude for the assistance of the DSS Adolescent Outreach Unit for efforts to locate youth and the DSS Data Analysis Unit for constructing the data files for analysis. PDF copies of the report are available by contacting Della M. Hughes at dhughes@brandeis.edu.

<sup>10</sup> Twice as many youth who were no longer in care (versus youth still in care) were parenting, experienced homelessness, received SSI payments and were not enrolled in college. Three times as many youth received TANF payments. 22% were not enrolled in any educational or training program compared to 2% of those youth still in care.

<sup>11</sup> Eccles, J. and Gootman, J. A., eds. (2002). *Community Programs to Promote Youth Development*, National Academy Press, Washington, DC.

<sup>12</sup> Jarvis, S., L. Shear and D. Hughes. "Community Youth Development: Learning the New Story." *Child Welfare*, Sept/Oct, 1997 (Vol. LXXVI, No. 5).

<sup>13</sup> Efficacy is used here to address self-confidence and the ability to be effective in one's efforts.

<sup>14</sup> Op cit.

<sup>15</sup> Casey Family Programs (2004). *It's My Life: Employment*.

<sup>16</sup> "Family of choice" refers to people with whom a young person has developed a strong, positive bond and looks to for a family connection.

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## Endnotes

<sup>1</sup> These Five Core Resources are adapted from those developed by the Massachusetts Executive Office of Health and Human Services' (EOHHS) statewide Youth Development Advisory Council which developed a statewide youth policy with Five Core Resources in 1999; see also America's Promise Five Promises and the Five Core Resources of the Younger Americans Act.

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<sup>11</sup> Eccles, J. and Gootman, J. A., eds. (2002). *Community Programs to Promote Youth Development*, National Academy Press, Washington, DC.

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<sup>14</sup> Op cit.

<sup>15</sup> Casey Family Programs (2004). *It's My Life: Employment*.

<sup>16</sup> "Family of choice" refers to people with whom a young person has developed a strong, positive bond and looks to for a family connection.

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- <sup>17</sup> Child Welfare League of America, March 30, 2007 statement.
- <sup>18</sup> Ibid.
- <sup>19</sup> National Governors Association for Best Practices, "State Policies to Help Youth Transition Out of Foster Care," January, 2007 Washington D.C.
- <sup>20</sup> Casey Family Programs (2004). *A Roadmap for Learning*.
- <sup>21</sup> English, A, Stinnet, A., and Dunn-Georgiou, E. (2006) "Health Care for Adolescents and Young Adults Leaving Foster Care: Policy Options for Improving Access," Center for Adolescent Health & the Law, Chapel Hill, North Carolina.
- <sup>22</sup> The National Campaign to Prevent Teen Pregnancy (2006). "Science Says: Foster Care Youth," Putting What Works to Work.
- <sup>23</sup> Cole, Susan (2005). *Helping Traumatized Children Learn*, Massachusetts Advocates for Children.
- <sup>24</sup> Casey Family Programs (2004). *A Roadmap for Learning*.
- <sup>25</sup> Harvard Family Research Project, Harvard Graduate School of Education (2007). "Findings from HFRP's Study of Predictors of Participation in Out-of-School Time Activities."
- <sup>26</sup> George, R., Cusick, G. (2007). Chapin Hall Center for Children, University of Chicago, "After-school Programs and Academic Impact: A Study of Chicago After School Matters."
- <sup>27</sup> Hall, G., Yohalem, N.; Tolman, J. & Wilson, A. (2002), "Promoting Positive Youth Development as a Support to Academic Achievement," National Institute on Out-of-School Time.
- <sup>28</sup> DSS reports that youth are central participants in the development of their service plans prior to and after age 18.
- <sup>29</sup> DSS reports that this is currently in draft Permanency Planning policy that is being negotiated with 509 prior to implementation.
- <sup>30</sup> DSS reports that youth in Congregate Care/Residential and Intensive Foster Care Programs are required to participate in PAYA program (Preparing Adolescents for Adulthood). Youth in Departmental Foster Care are offered PAYA at local offices by Adolescent Outreach staff. PAYA includes an assessment and reassessment every 6 months.
- <sup>31</sup> DSS reports that youth development outcomes are addressed at the Foster Care Review at which time tasks are assigned to DSS and providers as well as youth, foster parents and parents are reviewed.
- <sup>32</sup> DSS reports that tasks supporting positive youth outcomes are included in service plans.
- <sup>33</sup> DSS reports that Intensive foster care agencies are expected by contract to act as surrogate parent when birth parent is unable. Departmental foster parents may or may not be asked to perform this function based on skill set.
- <sup>34</sup> DSS reports this is contained in DRAFT permanency planning policy.
- <sup>35</sup> According to DSS calculations, this recommendation would require at minimum 10 Licensed Social Worker Staff and additional administrative staff.
- <sup>36</sup> DSS reports that it is in the process of adopting the Bill of Rights as an internal administrative document, but the Task Force recommends codifying it into statute.
- <sup>37</sup> DSS reports this is happening. Consistency in implementation is the critical factor being addressed here.
- <sup>38</sup> There is currently a bill in the Legislature addressing this matter.

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<sup>39</sup> DSS reports that at age 18 they are entitled to these resources and that prior to 18 their families can request them.

<sup>40</sup> Youth who have transitioned can visit younger siblings with DSS consent.

<sup>41</sup> This can be included in open adoption agreements.

<sup>42</sup> One possible way to do it: "Children are entitled to attend court hearings. Every child four years or older must be advised of his or her right to attend court hearings by the social worker and/or his or her attorney of record. A child must attend court hearings unless his or her appearance is waived by his or her attorney of record. The reasons for non-appearance shall be recorded in the court's permanency order. The social worker is responsible for arranging transportation of the child to the court. In all cases, the attorney for the child shall consult with the child and explain the outcome of the proceedings."



