

# **Intentions and Results**

*A Look Back at the Adoption and Safe Families Act*

# The Impact of ASFA on the Permanency and Independence for Youth in Foster Care

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In the last decade, youth in foster care (broadly defined as children ages 11 to 20 unless otherwise noted)<sup>1</sup> have captured the attention of policymakers, advocates, and children-serving professionals. The attention is justified. Research documents that youth in foster care remain in care disproportionately longer than their younger peers and that their chances for achieving permanency diminish as they get older (DHHS 2006). Very few are adopted and when they do not find permanent homes, but instead “age out” of foster care, many do not fare well. Research shows that they tend to have poor employment outcomes, earn very little, and struggle with their education. Moreover, developmentally, adolescence brings a whirlwind of conflicting feelings and emotions that can make decisions about permanency as complicated for the youth as for the professionals serving them.

The Adoption and Safe Families Act (ASFA) set a policy goal of permanent families for all children, including youth, and other laws have followed to sharpen the focus on permanency for youth. The primary aims of this paper are to understand how efforts toward this policy goal have played out so far and to identify important next steps in pursuit of the goal. However, ASFA and subsequent laws focused on permanent families cannot be considered in isolation from a parallel series of laws, enacted over the same period, that seek to help youth transition successfully to self-sufficient adulthood. The most important such legislation was the Foster Care Independence Act (FCIA) of 1999, Public Law 1096-169, signed just two years after ASFA. Since it has been about a decade since the passage of these two landmark pieces of legislation, this is an opportune time to step back and examine how they have reshaped our approach to supporting youth in foster care. Additionally, with a new administration and a

new Congress in place, experts, practitioners, and policymakers alike will want to draw on the experiences and lessons of the past in order to think strategically about what ideas and actions will be most urgent over the next decade to support youth in foster care.

*To inform a future policy response to the needs of youth involved with child welfare systems, this essay will seek to answer the following:*

- ▷ Who are youth in foster care, and what do we know about their circumstances and experiences?
- ▷ What have been the policy and practice responses to the needs of youth in foster care, especially in light of the permanency goals emphasized by ASFA? What have been the permanency outcomes so far?
- ▷ What are the key unmet needs and emerging issues?

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## Who Are Youth Involved with Child Welfare Services?

Understanding the basic facts about youth in foster care will help to underscore ASFA's important implications for their lives. The most basic is the significant number of youth in care, both those who have grown up in care and those who enter as youth. These youth represent almost half of all children in foster care at any point in time and a third of all children newly entering care. Another reason to be concerned about ASFA's effects on youth is that the number of youth entering care differs vastly by state. This would suggest ASFA could have prompted potentially different policy and practice issues across states. We also know that once youth enter care, and especially after they leave care, they do not generally fare well in their life circumstances. They tend to stay in care longer than their younger counterparts, and their chances of achieving permanency diminish with time. Many of these youth also present an array of special needs that can make achieving permanency even more challenging.

### ■ How many youth enter and live in foster care?

As noted, this population includes both youth who grew up in care and those who entered care as youth. About 103,000 of children entering care in 2006 were youth (defined in this case as being from ages 12 to 20), representing a third (34 percent) of the new foster care population (DHHS 2008b). The proportion of youth entering foster care varies enormously between states, suggesting likely policy and practice differences. For example, in Pennsylvania in 2005, 55 percent of children entering foster care were 12 and older, three times the proportion (17 percent) in Texas (DHHS 2008c). Nationwide, considering the entire population in foster care ages 12 and older (those who entered as youth plus those who grew up in care), youth represented roughly half of the total (43 percent or 220,000 youth) on September 30, 2006 (DHHS 2008b).

### ■ Why do youth come into the child welfare system?

The reasons youth come into care tend to be different from those for younger children. For about 43 percent of youth entering the system (now using the standard of ages 11 and older), the most serious type of maltreatment reported was neglect (30 percent for "failure to supervise" plus 13 percent for "failure to provide"). For a third of these youth (33 percent),

physical maltreatment was the most serious type of abuse. Sexual maltreatment was reported as most serious for 15 percent, and for 10 percent it was another, unspecified type of abuse (DHHS 2005).<sup>2</sup> In contrast, for two-thirds of children under age 3 the most serious type of abuse reported was neglect (37 percent failure to supervise; 30 percent failure to provide), with fewer being reported with physical or sexual maltreatment as "most serious." Interestingly, for most youth entering the system (86 percent), the onset of maltreatment occurred when they were already adolescents, ages 11 or older, suggesting that these children may be a unique group entering care (DHHS 2005).

Another growing concern is that many youth enter foster care because they are in need of mental health services for which their families cannot provide. The GAO estimates that in 2001, more than 12,700 children, mostly adolescent boys, were placed in the care of child welfare or juvenile justice agencies by their parents in order to receive mental health services (GAO 2003).<sup>3</sup> The degree of unmet need for mental health services for youth also became clear when Nebraska enacted a safe haven law in 2008.<sup>4</sup> Unlike in other states, where such laws focus on infants, Nebraska allowed parents to turn over to state custody, without prosecution, children up to age 18. In less than three months, thirty-five children, many between the ages of 10 and 17, were dropped off at hospitals, most by parents saying the children were "uncontrollable and violent and needed more counseling or psychiatric services than they could find or pay for" (Eckholm 2008).

### ■ What are the needs of youth in foster care?

Youth in care have a unique set of needs as they struggle with both the challenges of being in foster care and the trials of adolescence. It is estimated that 19 percent of foster youth experience a major lifetime depressive episode, compared with only 12 percent of the general youth population (White, Havalchak, Jackson, O'Brien, and Pecora 2007). They are also more likely to suffer post-traumatic stress disorder (PTSD) than youth in general (13 percent vs. 5 percent). Youth in foster care for one year also report high levels of behavioral problems, and more than half of these youth (52 percent) had committed at least one delinquent act in the previous six months (DHHS 2003). Foster youth also have particular educational needs. A study of foster youth in the

Chicago public schools showed that 15-year-olds in foster care were only about half as likely as other students to graduate within the next five years. Nearly half (45 percent) of foster children between sixth and eighth grade were classified as eligible for special education, compared to only 16 percent of other students (Smithgall et al. 2004).

#### ■ What are the experiences of youth in care?

Youth's time in care can be a long and disheartening experience. Youth in foster care for one year are more likely than younger children to be living in group homes or other residential programs (DHHS 2003). According to recent statistics, about one in six youth (here 12 and older) in foster care wait to be adopted, meaning that their permanency goal is adoption and/or that parental rights have been terminated in their cases (DHHS 2008b). It remains unclear what proportion of these youth go on to emancipate and enter their adult lives as legal orphans, having seen parental rights terminated without having reached permanency. An analysis of caseload dynamics between 2000 and 2005 found that youth in care undergo more placement moves than younger children, are less likely to be adopted, and when discharged as youth have a higher likelihood of re-entering care within one year of exit (Wulczyn, Chen and Hislop 2007). Other research suggests that children ages 9 and older stay in foster care longer than younger children, noting that in 2003, for instance, 31 percent of children in this age cohort had been in care for 4 years or more (DHHS 2005b).

#### ■ What are the outcomes of former foster youth?

In 2006, about 7,500 youth (ages 12-20) were adopted from foster care, a number that has grown fairly steadily over the last decade (see Figure 9 and discussion below). In the same year, more than 26,000 youth emancipated from the child welfare system, a number that has also grown steadily in the last decade (see Figure 10 and discussion below). Youth who emancipate from care generally do not fare well as young adults. One recent study found that at age 21 a quarter of youth who had aged out of care did not have a high school diploma or GED, only half were currently employed, and three quarters of the males and more than half of the females had ever been arrested (Courtney et al. 2007). Another study examining youth in California, Minnesota, and North Carolina found these employment patterns persist for many at age 24, with only a small portion

of youth (25 percent in California, 22 percent in Minnesota, 16 percent in North Carolina) managing to maintain consistent connections to the labor market and earn as much as their peers nationally (Macomber et al. 2008). One striking finding is that many of these youth go on to become parents themselves at an early age; in one study, more than half of the young women and almost a third of the young men were parents by age 21 (Courtney et al. 2007).

### ASFA and the Policy Response

With growing awareness of these youths' circumstances, the last decade has brought major legislation focused on two policy goals: permanency and successful independence. No doubt the most significant aimed at permanency was the Adoption and Safe Families Act (ASFA) of 1997. ASFA prompted a new sense of the importance of finding families for foster children, heightened efforts to seek permanent connections for children growing up in foster care, and raised the profile of kin who might offer supportive family connections and permanent homes. However, it did not necessarily focus on the permanency issues of youth relative to younger children.

Since ASFA, additional legislation has sought to bolster states' efforts to find permanent families for youth. The Adoption Promotion Act (2003) increased the bonuses to the Adoption Incentive Payments Program for the adoption of children over age 9. The Keeping Children and Families Safe Act (2003) provided further resources to increase adoptions of older youth, stressing child-specific recruitment strategies. In 2005, the Children's Bureau awarded 5-year cooperative agreements to nine organizations to provide adoption services and support to youth who want to retain contact with family members in order to improve permanency outcomes. These programs focused on introducing the concept of open adoption to youth, connecting youth with caring adults, and promoting models of youth leadership and involvement in planning (DHHS 2006). Most recently the 2008 Fostering Connections to Success and Increasing Adoptions Act further advanced permanency efforts for youth by doubling incentive payments for older child adoptions and adoptions of children with special needs. The Act also makes children 16 and older who are adopted from foster care, or who leave for guardianship with a relative, eligible for independent living services and education and training vouchers. Perhaps most significantly, the Act gives states the option to use federal

Title IV-E funds for kinship guardianship payments. These payments would be for foster children being raised by relative caregivers who are committed to caring for them when they leave foster care.

Given this emphasis on achieving permanency for youth, what progress has been made? Adoptions of youth in foster care have increased substantially since 1998, both in absolute numbers and in terms of the proportion of all adoptions (see Figure 1). In 1998, there were about 4,400 adoptions of youth (ages 12 to 20) from foster care, representing just eleven percent of all foster care adoptions. In 2006, 7,500 youth were adopted from foster care, representing fifteen percent of all foster care adoptions.

Yet states still face significant obstacles in finding permanent families for youth. In a report to Congress on adoption and permanency for older youth, DHHS (2005b) notes several challenges to older child adoption: lack of permanent families, lack of services, inadequate permanency planning, resistance from youth themselves, staff issues, and court and legal issues. The report also suggests promising strategies. They describe the potential value of child-specific recruitment strategies, which seek out a specific family for a given child. For youth, they note programs that recruit families from among people that a youth has known and suggest that engaging older youth in the process of finding a family for themselves may be a particularly promising strategy. They further suggest the value of pre- and post-placement services in smoothing the transition to adoption and increasing the chances of success over the long term. The report cites studies suggesting the hiring and training of staff

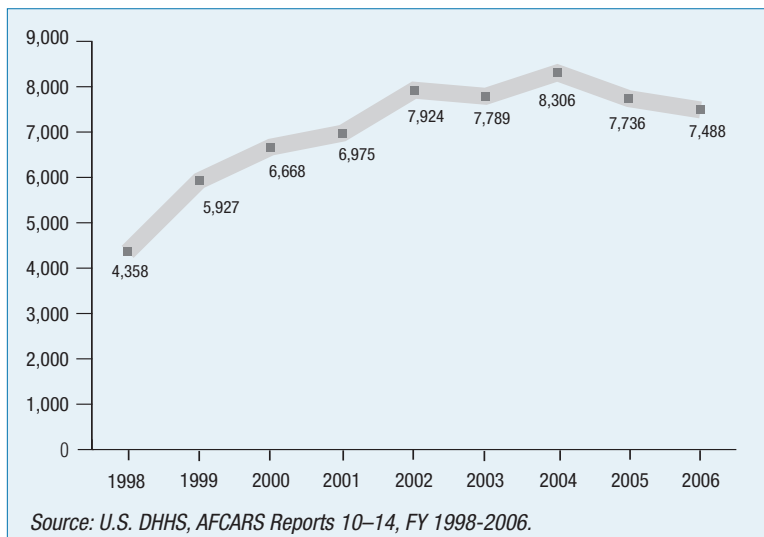
who are effective with teens as vital to successful permanency efforts. Also highlighted is the overall role of court and child welfare system reform, including developing better tracking systems, improving collaboration, and strengthening service provision.

Regarding the goal of promoting youth independence, the most significant legislation in the last decade is the Foster Care Independence Act. This law provided states with more funding and greater flexibility to design services to help youth transition from foster care to self-sufficiency. It doubled funding provided through the Title IV-E Independent Living Program and established the John H. Chafee Foster Care Independence Program (Chafee). The law also allowed states to assist youth ages 18 to 21 who had left foster care, to extend Medicaid coverage for foster care youth to age 21, and to provide youth with aid for room and board payments.

Other legislation since FCIA has sought to further assist youth in making the transition to successful independence. The Promoting Safe and Stable Families Amendments (2001) augmented the John H. Chafee Foster Care Independence Program with a voucher program for education and training of youth aging out of foster care or adopted from foster care at age 16 or after.

The 2008 Fostering Connections Act took a significant step in supporting services to youth who age out of foster care by continuing federal support, at the state's option, for youth until they reach 21. States can receive federal reimbursement for care of youth 18 to 21 who live in foster family care or group homes, or who live independently in a supervised setting. States

**Figure 1**  
Adoptions of Youth (Ages 12–20) from Foster Care between 1998 and 2006



can also extend adoption assistance and/or guardianship payments on behalf of youth through age 21. Some research suggests that allowing youth to stay in care past 18 may benefit them by encouraging pursuit of higher education, increasing earnings, and possibly deferring pregnancies (Courtney, Dworsky, and Pollack 2007). Staying in care until 21 also makes it more likely that youth will get the services intended from independent living programs (Courtney, Dworsky, and Pollack 2007).

What progress has been made in moving youth toward successful independence? The answer appears mixed. More youth are emancipating from foster care (see Figure 2). For example, more than 17,000 emancipated in 1998, representing seven percent of all exits from foster care, and nearly 27,000 in 2006, or nine percent of all exits. It is uncertain what factors are behind this increase. One hypothesis is that with the crack epidemic of the late 1980s and early 1990s, child welfare systems saw an influx of infants and toddlers into care and that this cohort is now reaching the age of majority. At the same time, many youth enter care when they are already older. More research assessing caseload dynamics with a specific focus on youth in care will be needed to understand the reasons for this increase.

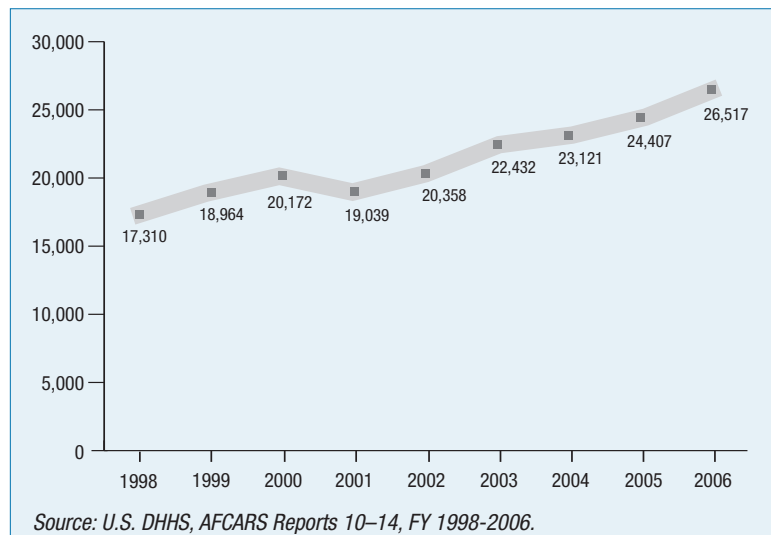
Despite ongoing concerns about permanency, progress has been made in helping emancipated youth develop the skills needed to live independently. A study of the first round of state Child and Family Service Reviews (CFSRs) noted that many states have improved youth services since Chafee, although there is still more work to do. The study identified several

barriers states note in serving youth: 1) gaps in a host of services, such as life skills and job skills training, substance abuse and mental health treatment, general independent living assessments and services, inpatient mental health care, and services for pregnant and parenting teens; 2) inadequate placement resources for adolescents; 3) training for staff and foster parents on adolescence issues; 4) inconsistency in service availability between counties or regions; and 5) differing levels in quality of planning for independent living. States' Program Improvement Plans in response to the CFSRs also varied greatly in the extent to which and how adolescent issues were addressed (Winkle, Ansell, and Newman 2004). Courtney (2007) also concludes that "receipt of independent living services during the transition to adulthood is arguably spotty at best" and that the types of services youth are most likely to report receiving are educational supports, and many youth do not even receive these. Moreover, recent evaluations of two independent living programs did not yield impact, perhaps suggesting that the field is still grappling with how best to serve these youth (DHHS 2008b; DHHS 2008c).

### Future Issues for Policy and Practice

Although evidence suggests that youth adoptions have increased, the total is equivalent to only a third of the number of youth who emancipate each year and to less than ten percent of the number who enter care. While significant effort is being made to prepare youth for emancipation, policymakers, and practitioners have yet to figure out which services will demonstrably

**Figure 2**  
Number of Youth Who Emancipated from Foster Care between 1998 and 2006



improve their lives. This section highlights key issues in thinking about the next generation of policies for youth in foster care. It draws on research findings and practice trends, and seeks to build on lessons learned from the past decade, in which permanency and independence have been primary goals.

### ■ Permanency vs. independent living

Current practice for supporting youth, driven largely by ASFA and FCIA, typically presents youth with two permanency goal options: permanency through adoption or reunification and independent living. As Frey (2004) writes: “Our oldest youth get to have one or the other—permanent families or life skills and long-term supports.” Developmentally, however, youth at this stage require both: they are trying to separate and become independent adults, but still have a strong need to belong in a family (Charles and Nelson 2000). Divergent goals of permanency and independent living might inadvertently push youth and professionals toward one versus the other.

Policymakers and practitioners may want to think about ways to make these two goals more complementary. The Fostering Connections Act took a big step in this direction by making children 16 and older who are adopted from foster care or leave for guardianship eligible for independent living services and education and training vouchers. Youth can now realize permanency through adoption or guardianship and still receive assistance in the transition to adulthood. Further research should seek to clarify the psychological issues involved for youth in forging a relationship with a new family, separating from a biological family that was abusive or neglectful, and forming a distinct adult identity.

### ■ Biological parents

ASFA emphasized finding new permanent families for youth, but it is important to remember that most youth maintain strong ties with their biological families. A recent study found that a quarter of youth who had aged out of foster care were living with a parent or other relative at age 21, and that more than four-fifths had at least weekly contact with a member of their biological family; many were also receiving assistance in the form of cash or child care from families (Courtney, Dworsky, Cusick, et al. 2007). Beyond such contact, Samuels (2008) notes of the foster youth in her study that “biological family remains psychologically present for participants

despite their physical separation.” Youth may need help in understanding and reconciling their feelings about their biological parents in order to welcome new parents into their lives or develop their own identity as independent adults. Practitioners and policymakers will want to incorporate an awareness of the importance of these connections in helping youth plan for permanency and independence.

Some approaches to achieving permanency for youth may present opportunities for productively involving biological families. One such approach is family group decision making, which brings together extended family members and other significant people in a youth’s life to establish a plan for safety, well-being, and permanency (DHHS, 2006). An evaluation of this model found a reduction in re-abuse, more relative care, fewer moves between care settings, greater chances of reunification, more family supports, and increased involvement of fathers and paternal relatives (Merkel-Holguin, Nixon, and Burford 2003—from DHHS 2006). Another strategy, open adoptions, facilitates the forming of a permanent legal family, while allowing children to stay connected with their biological family (DHHS 2006). More exploration of how this strategy might work best for youth and their adoptive and biological families will be useful. Finally, guardianship is another valuable option for providing a legal and permanent family without forcing youth to sever ties with biological parents (DHHS 2006). The Fostering Connections Act will likely facilitate more of this type of arrangement by giving states the option to use federal Title IV-E funds for kinship guardianship payments.

### ■ Engagement with effective services

As noted, youth who age out of foster care are less likely to be employed or have a GED or high school diploma by age 21; many have been arrested, and many become young parents (Courtney et al. 2007). More work is needed to understand what will help these youth engage with effective services. Youth may have difficulty engaging if developmentally they are trying to form their own separate identity and are resistant to strong adult influences. Poor attachment in childhood could also complicate forming relationships with employers, caseworkers, or other concerned adults. Given their exposure to child welfare, they may not want further involvement with the system. At the same time, foster youth cite emotional support as the type most

desired and most often missing (Samuels 2008). Different and creative approaches might be needed to reach youth.

For instance, child welfare agencies might engage other partners in serving youth and administering Independent Living programs, such as churches, schools, employers, or adult service systems. Affiliating programs and services with these other entities might reach older youth who are no longer keen on interacting with child welfare. Involving youth themselves in service development is another important approach that has received increased attention in recent years. The Jim Casey Youth Opportunities Initiative believes that “it is possible to run a foster care system that prepares youth for success as adults only if youth in care are fully engaged in the system’s design and operation.” To this end, they have established Youth Leadership Boards in 12 cities around the country that play a role in designing the Initiative’s activities at the local level, ensuring youth are engaged in shaping their futures, and advocating for changes in foster care systems.

#### ■ Family formation and relationships

The intense focus on finding families for youth can miss the fact that many are forming families of their own. As mentioned above, recent research suggests that a striking fifty-five percent of women who age out of foster care have a baby by age 21, while a corresponding twenty-nine percent of young men become fathers (Courtney et al. 2007). Many also appear to be in serious relationships, as indicated by their living arrangements. Nearly a third of the women and over a fifth of the men were either married or cohabitating (Courtney et al. 2007) at age 21. Developing greater psychological intimacy in dating relationships is a key feature of this stage in life (Berk 1999), but these youth may not have good models for doing this. Given the absence or weakness of family ties experienced by many of these youth, it may not be surprising that they would have a desire to form a new family of their own.

This situation raises three questions for consideration. First, does adoption help with or complicate the wish of older youths for families of their own? Finding new permanent families might be coupled with efforts to help youth delve into their own motivations to form families of their own, and to address issues of sexuality, relationships, and parenting. Two, future independent living programs

will want to consider possible specialized strategies to support this group of youth. The special needs of these youth may require a well-coordinated response, including more housing options and help navigating available services and supports (Max and Paluzzi 2005). And finally, when youth in foster care have children, the child welfare agency may concentrate on these youth (the “wards in care”) and miss opportunities to support the development of their babies. These include monitoring to ensure appropriate prenatal care, connecting youth with Early Head Start or home visiting programs, and helping to secure housing where youth can care for their new infant.

#### ■ Mental and behavioral health

Youth with mental or behavioral health problems may face special challenges in achieving permanency or finding their way as independent young adults. These issues could be especially problematic for former foster youth who are parenting, and these problems could also be detrimental to the prospects of their children. A study of youth who were involved in the child welfare system as adolescents and were parenting at ages 18 to 21 found that twenty-four percent of the mothers and nine percent of the fathers reported signs of clinical depression (Research Triangle Institute International 2008). A related concern would be the youth described above who are coming into care as a result of mental health issues for which their parents cannot address or services in the community are not available.

Mental health issues raise a couple points for future consideration. One, access to effective, comprehensive, and intensive mental health services have been shown to be effective in addressing foster youth depression (Landsverk, Burns, Stambaugh, and Reutz 2006). Specifically a review of the research suggests that particular therapeutic treatments that are largely behavioral or cognitive-behavioral are effective at improving youth depression (Landsverk et al. 2006). These may be essential to helping youth form new relationships with adoptive families and/or learning to live independently. Two, thinking more broadly about systems to support youth with mental health issues to prevent child welfare involvement, in a GAO report (2003) officials from six states pointed to the following contributors to the problem: limitations of public and private health insurance, inadequate supply of mental health services, limited availability

of mental health services in schools and health agencies, and difficulty meeting eligibility rules for services. They suggested seeking new ways to fund or reduce cost of mental health services, improving access to mental health services, and expanding the array of available services as ways to address the problem (GAO 2003).

### ■ Developmental expectations

Adolescent conflicts with foster families, potential adoptive families, and birth families are inevitable, but at times these tensions can be seen as problematic behaviors when in fact they are normal. Unfortunately, when parents, caregivers, and practitioners are not equipped with sufficient knowledge of adolescent development, this behavior might lead to unnecessary placements in foster care or disruptions in foster or pre-adoptive placements. Youth who were exposed to illicit drugs prenatally may be especially vulnerable. Their often impaired ability to regulate emotions or sustain attention on tasks (Mathias 1998) can exacerbate typical behavioral and learning challenges and complicate the responses of parents and caregivers.

Foster parents, potential adoptive parents, and caseworkers may benefit from training on the developmental stages of adolescence and the transition to adulthood. Explaining that adolescents are trying to form independent adult identities and undergoing dramatic hormonal changes, making conflict unavoidable, might ease tensions and improve chances for permanent connections. A review of CFSRs noted that eighty-seven percent of the states reviewed (forty-five at time of report) cited a need for more training on adolescent issues for staff and foster parents (Winkle, Ansell, and Newman 2004).

### ■ Gender identity and sexual orientation

In a small survey of foster youth, about five percent identified their sexual orientation as gay, lesbian, bisexual (GLB) or questioning, and more (eleven percent) reported having questioned their sexual orientation at some point in their lives (White, Havalchak, Jackson, O'Brien, and Pecora 2007). A larger study of Midwestern youth who are or were in foster care found that almost seven percent identified as gay or bisexual (Courtney, Dworsky, Ruth, Keller, Havlicek, and Bost 2005). One other smaller-scale study has called for more policy attention to permanency, safety, and well-being for these youth. Researchers found that the youth had very unstable placements and expressed significant concerns about their safety

whether at home, in school, or in foster care placements. Many desired to be adopted or sought out permanent relationships with mentors, role models, and individuals with whom they have an emotionally significant relationship (Mallon, Aledort, Ferrera 2002).

As for strategies to serve these youth, Mallon et al. (2002) note the value of gay-affirming environments. Two examples are the Green Chimneys Gay Lesbian Bisexual Transgendered and Questioning (GLBTQ) Programs in New York City and Gay and Lesbian Social Services in Los Angeles, which promote educational and life skills of self-identified GLBTQ youth and their families (Mallon et al. 2002). The study also suggests that safely reunifying GLBTQ youth with their families may require that family preservation practitioners develop specialized competencies for working with families of GLBTQ youth. And while there is no evidence that GLB adoptive parents are necessarily better for GLB youth, research suggests that less than a fifth of adoption agencies attempt to recruit adoptive parents from the GLB community (Gates et al. 2007).

### ■ Cultural identity

Over half of children in foster care are minority children (DHHS 2008b). For these youth, exploring their ethnic heritage can be a key focus in their identity formation. This process can be very difficult as youth become aware of discrimination and inequality and feel caught between loyalty to their heritage and the social pressures of the larger society (Berk 1999). Research suggests that youth who successfully form bicultural identities adjust better to their life circumstances and have more positive adult relationships (Phinney and Alipuria 1990). A survey of youth in foster care finds that a substantial majority (sixty-nine percent) wish they could learn more about their ethnic backgrounds (White, Havalchak, Jackson, O'Brien, and Pecora 2007).

As practice and policy push toward ensuring permanent connections and advancing independence, it is critical not to lose sight of how issues of identity formation for minority youth impinge on these goals. In 2004, Casey Family Programs convened a group to identify “the knowledge, skills, and supports social workers need to address racial and ethnic identity formation for all youth in care.” The consensus was that in order to assist youth in their growing self-understanding, practitioners must become more aware of their own racial and ethnic identities. To this end, they developed the *Knowing*

*Who You Are* project, which provides a curriculum to help professionals achieve a healthy sense of identity (CWLA, Children's Voice, 2006).

## Conclusion

Major inroads have been made in raising awareness of the importance of helping youth establish independence and permanent connections with family. Adoptions increased for youth leaving care, and although more youth are emancipating, progress has been made toward establishing independent living services to help with a successful transition to adulthood. ASFA spotlighted the special challenges of helping youth find permanent families or make other permanent connections to caring adults. And the Fostering Connections Act reflects a new understanding of the special needs of youth. Yet more work is still needed to ensure the goals of permanency and successful independence for youth can be achieved.

There are many places to start. Policymakers might consider changes that maintain a simultaneous focus on permanency and independence rather than on one goal versus the other. They might also find ways to ensure intensive mental health services are available to youth in child welfare systems and those at risk of entering. Administrators and practitioners might seek guidance from developmental experts in helping youth to understand relationships with their biological parents, to deal with separation and identity formation, to forge strong new relationships with caregivers, and to seriously examine their objectives in forming families of their own. They will want to continue to elicit the input and opinions of the youth themselves. And caseworkers and caregivers could receive more training on what to expect of youth at this crucial developmental stage. Finally, there is a continued role for research to play in identifying the types of services that engage youth and support their successful transition to adulthood. Researchers could also track how states differ in developing policies to support youth, especially as the Fostering Connections Act leaves them the option to implement such provisions as using Title IV-E for guardianship payments or for support of youth in care until age 21.

The past decade was a period of rapid change in policy and practice for youth in foster care. Through these efforts, it became increasingly clear that adolescence and early adulthood are periods of unique need for foster youth. As ASFA has prompted efforts to expediently achieve permanency, new challenges have

arisen, notably that of finding permanent families for older youth. Although we have seen meaningful headway in helping youth transition to adulthood, there is still much to learn about how best to promote independence and self-sufficiency. Cumulatively, we have a reasonable blueprint of the issues that will demand the continued attention and vigorous efforts of policymakers and practitioners concerned with the safety, well-being, and permanency of youth in foster care.

## Footnotes

- 1 Studies cited in this paper use varying age groups to define youth. When available, the specific age range of youth studied is noted.
- 2 Percentages may not total 100 percent due to rounding.
- 3 The results are based on estimates from child welfare directors in 19 states and juvenile justice officials in 30 counties. GAO suspects this estimate is understated because child welfare officials in 32 states did not provide data and the study included only a limited number of county juvenile justice officials.
- 4 Safe-haven laws are meant to provide an incentive to mothers in crisis to safely relinquish an infant to designated places without prosecution (DHHS, 2007).

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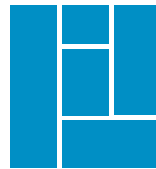


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