



A Historic Opportunity to Reform the Child Welfare System: Youth & Alumni Priorities on Older Youth Successful Transition to Adulthood

December 2020

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Introduction

While young people are transitioning from foster care to adulthood, many lack the proper support and tools to ensure they thrive in their cognitive functioning, physical health and development, behavioral and emotional functioning, and social functioning. States are not held accountable to provide proper services and help young people establish resilience during their transition. When entering care, young people should be able to obtain peer social support, participate in their treatment plans, actively engage in their health care, receive quality legal representation and build/maintain relationships with their siblings in order to reduce the trauma of entry. Young people must be supported when they are in care, achieve permanency through adoption, connections to relatives, non-relatives, or guardianship, and those reunified with their

biological family or age out. The Council believes, as one Member reflected: “No child/youth should ever have to be in foster care until they age out!” It is critical that permanency is centered in supporting older youth; this can be seen as permanency is not a standalone priority in this document, but rather woven into each priority’s considerations.

Throughout this document we will refer to older youth and young people in extended care. The Council looks to identify needs of this group and to provide solutions for success. We do not intend to exclude other populations in the foster care community.

The general public often assumes that older youth have the resources and tools to succeed. This is not the case. The Council recognizes that non-foster peers are continuously gaining resources and tools for their successful transition into adulthood. Young people in foster care should be supported similarly, in planning for their transition to adulthood, in the same capacity early on through childhood and starting at the latest age 13. We recognize that even though services through the John H. Chafee Foster Care Independence Program (Chafee) start at age 14, often young people may not have immediate knowledge or access to those services. It’s important to start the conversation with youth so they can be equipped to establish well-being, normalcy, and the appropriate skills that youth identify to achieve success during and after they exit care (exiting care could include: reunification, emancipation, adoption, guardianship, aging out of care, etc).

It is our intent by including the following priorities to engage youth at an earlier age to enhance successful outcomes that are critical for youth to thrive. Throughout this statement, we outline opportunities for engagement to implement or further these priorities. This engagement may include opportunities for stakeholders, service providers and agency administration. We want to emphasize the critical role of young people with lived experience in moving towards a 21st Century Child Welfare System. States, tribes, jurisdictions, and agencies must engage young people (and others with lived experience in the child welfare system, such as parents, kinship caregivers and resource parents) across a continuum from the individual/family case level to systems-level change in foster care and child welfare services¹.

“Frankly, IL [Independent Living] will help us get a laptop and fill out a FAFSA but will not assist us in learning how to maintain gainful employment. We learn how to make 4 different types of macaroni and cheese but are never taught how to obtain a lease or the prerequisites of qualifying for one. We are encouraged in IL services to take advantage of our health insurance but are given no explanation on how to navigate our medical system between referrals and PCP [Primary Care Physician] visits, so we find ourselves in the ER taking care of non-emergent

¹ See [Children’s Bureau ACYF-CB-IM-19-03](#), Engaging, empowering, and utilizing family and youth voice in all aspects of child welfare to drive case planning and system improvement.

issues. In sum, the services are not effective in teaching youth how to build resilience through protective factors and navigate adulthood.
- Courtney Canova, experienced foster care in Washington State

Priority 1: Well-Being: We need continuity of health services that support our well-being. Mental health needs to be prioritized as we transition to adulthood.

This priority is focused on mental health, but we also want to recognize the full well-being measures outlined by the Council previously.²

We are not often involved in our mental health services treatment plans; we should be empowered to engage in our own mental health treatment and planning, so we can manage as we transition to adulthood. Further, we believe there is inadequate coordination between young people and the adult mental health system, particularly for foster youth who may lack supportive adults to shepherd and advocate for them through their transition. Lastly, we deserve to understand how mental health coverage may change as we transition out of foster care including the process we need to follow to qualify for extended services, if available. Many of our peers found out too late that they qualified for extended mental health services when aging out of foster care.³

We need continuity of services as we transition to adulthood. Young people who age out of care should be able to receive Medicaid services regardless of whether they cross state lines for family, education or employment opportunities. In order to receive these, young people must be informed how to access Medicaid before they exit care, any reporting or application requirements and supported in knowing who to contact if they run into issues.

Current Priorities/Considerations:

- **Young people need sustained health education** (including mental health, medication management, and psychotropic medication review) in age and developmentally appropriate language and concepts.
- **All youth should be supported regardless of how "externally" they may appear to be coping.** Youth who develop code-switching abilities and coping mechanisms that line up with societal expectations often may not receive the support to process trauma and grief. These youth may be at risk of having their mental and emotional health needs unrecognized.

² Originally proposed in [A Historic Opportunity to Reform the Child Welfare System: Youth & Alumni Priorities on Quality Residential Services, February 2020](#)

³ Originally proposed in [Improving Youth Engagement and Access to Mental Health Services List](#), adopted by the Council on April 2013

- **If a family or youth is at risk of entering foster care, they need access to mental health services.** This could be accomplished through Youth Mental Health First Aid⁴ classes that parents and youth can complete, providing families tools to know and meet the needs of young people. As programs continue to be approved under the Family First Prevention Services Act Clearinghouse, we urge mental health services be considered a priority area of research, evaluation and review - including culturally appropriate services.
- **With training, families can better understand mental health basics, how it may show up within families, how mental health disorders may run in families, and when they need to seek outside help to support their mental health.** Mental health assessments and services can be offered and referred to youth and their parent(s) or guardian(s). By doing this, parents, guardians and youth may be able to prevent a crisis and/or be prepared to manage a crisis should one arise.
- **Build opportunities for youth to have access to peer groups** throughout their transitions into adulthood as young people tend to turn to peers for support. Young people should also have access to peers who have experienced foster care, who have encountered similar barriers (such as support for mental health) and the broader peer group within their community.
 - For example, Achieving Maximum Potential or AMP⁵ in Iowa is a group of young people who have experienced foster care and provide each other support, engage in opportunities for leadership and advocacy development and work together to make systems change.

"Mental health services offered to me never felt like they were presented as a choice. It was as if my trauma and the subsequent behavior challenges that came with it was a burden and something to be fixed. I almost always felt like my autonomy was denied."

- Brittney Lee, experienced foster care in Washington State

Opportunities for Engagement:

- Providing developmentally appropriate education and safeguards for youth who may need, want or be offered psychiatric medications, in regards to the potential risks on how/where to continue receiving resources as they exit care. We affirm the priorities regarding medication put forth by the Council previously.⁶
- Ensure young people are aware of how to access mental health supports after they transition out of foster care to permanency or to adulthood. Peer navigators and opportunities for group therapy are valuable supports.

⁴ <https://www.mentalhealthfirstaid.org/population-focused-modules/youth/>

⁵ <http://www.ampiowa.org/>

⁶ Originally proposed in [A Historic Opportunity to Reform the Child Welfare System: Youth & Alumni Priorities on Quality Residential Services, February 2020.](#)

- Ensuring young people know their rights.⁷ Ensure that young people have access to their rights and are able to report violations of their rights. This will help youth feel able to respond proactively, as well as give them more autonomy over their bodies and well being which is a skill that will help them transition into adulthood.

Priority 2: High Quality Legal Representation: Young people should have access to high quality legal representation.

High quality legal representation is important and necessary to ensure young people's rights are protected and they have access to all appropriate resources. It can be daunting and intimidating for a young person in foster care to be at the table where decisions are being made about their life, especially without their own legal representative at the table. Recently, the federal government has opened up access for states to use federal funds to support legal representation for children and parents.⁸ This also includes paralegals, investigators, peer partners or social workers that support attorneys.⁹

A legal representative can help youth understand legal documents, court orders and processes, and to voice the young person's needs by ensuring there is accountability for the decisions made in a young person's life. For example: a legal representative could be present during an IEP (Individualized Education Plan) meeting to ensure the most effective services/supports are put in place and unnecessary claims/projections are not made that follow the young person or negatively impact their education moving forward.

As a child or teen, the system can be terrifying, scary and at times lonely. It is crucial for young people to have team members they know they can trust. Proper legal representation for a young person will help ensure appropriate communication; the legal representative should be able to communicate sensitive information with the court and judge in a way that does not make youth and families more vulnerable or subject them to additional trauma. For example, a young person and their legal representative may be able to meet with the judge separately before or after a court hearing.

Only when young people have quality legal representation can they trust that:

- Their voices are heard regarding their lives, dreams, plans, and particularly in court
- They gain access to legal documentation (such as identification, birth certificate, school records, etc.)
- They are assured of oversight regarding health needs and assessments (including assessments used to determine entry into Quality Residential Treatment Programs) and

⁷ Originally proposed in [Reducing Vulnerability of Foster Youth to Predators and Sex Trafficking, October 2012](#))

⁸ https://www.acf.hhs.gov/cwpm/public_html/programs/cb/laws_policies/laws/cwpm/policy_dsp_pf.jsp

⁹ [Child Welfare Policy Manual](#), Section 8.1B, Question 32

concerns regarding over-medication and long-term medical concerns, and vaccination records.

- Their education needs are met, including considerations of educational stability resulting from multiple moves. Support young people in sharing their needs and how to best support them - including whether an Individualized Education Plan (IEP) is appropriate.

All youth in foster care must receive information on all of the options available to them. Their legal representative can help them consider and voice their perspective on those options. Options should include permanency, family time, education, connection to family members -- siblings, grandparents, aunts, uncles cousin, fictive kin -- balanced with options and opportunities for higher education. In some jurisdictions, permanent connections debar access to grants and other access to higher education,

We recognize that in addition to young people, their parents and families will also benefit from high quality legal representation.

For example, I was lacking tools I needed to be successful and given tools that were not relevant to both my medical diagnoses and education needs. If I had a legal representative to stand up for me in court, I feel my education journey would have been significantly different. As a young person I was lingering around in care for almost 18 years because I did not have a proper legal representation. If young people have proper legal representation they would be more likely to have a plan that benefits them that goes with their permanency plan.

- Joshua Christian, experienced foster care in Indiana

Priority 3: Aging Out: Youth should have access to resources and a realistic transition plan to ensure they are on track to succeed when they exit foster care and especially if they age out of foster care.

Start planning our transition earlier and provide information on all options available including our eligibility for Independent Living Services, other options, and how to access those services. Ensure we understand how to sustainably navigate health, housing, education and employment services, While vital documentation such as Birth Certificates and Social Security Cards are required by federal law, we know from our peers that too often, young people struggle to access it. We recommend states' report and youth are educated on their rights to receive these documents and how to acquire them.

Independently navigating the various systems (healthcare, financial, medical, driver's license, housing, etc.) as an older youth can be intimidating. Between acquiring proper insurance,

medical records, creating and maintaining a bank account, and also understanding the information given to you as a transitioning youth, one can oftentimes feel as though the events are more daunting as a youth in care versus a youth whose family can support this. For this reason, Independent Living Program (ILP) assessments should start as early as age 13 so that youth are prepared to begin transition plans by the time they turn 14 years old (the age identified in Chafee guidelines), or two years prior to aging out of foster care, whichever comes first. Moreover, youth who have not been involved in the foster care system typically begin planning for their future with their families and support systems during this period of time. While Birth Certificates and Social Security Cards documentation required by federal law, we know from our peers that too often, young people struggle to access it. We recommend states report and youth are educated on their rights to receive this.

The Council strongly believes that the earlier transition planning begins, the more likely they are to successfully transition. These current priorities continue to build on those previously proposed by the Council.¹⁰ Currently, transitional planning is required to start 90 days prior to aging out of care, and we think that this does not allow enough time to adequately ensure that all service needs are in place. The Council believes that transitioning to adulthood happens in different stages. Similarly, it is imperative for youth in care to have access to the proper resources and tools needed to secure youth in attaining, remaining and sustaining the same pace as their non-foster youth peers with regards to transitioning into adulthood.

Current Priorities/Considerations:

- Chafee was amended in 2018 with an increased emphasis on successful transitions to adulthood, permitting states to provide services to youth who have aged out of foster care up to the age of 23, and allowing five (5) years of eligibility for Education and Training Vouchers (ETVs) up to age 26. The updated program guidelines also permit the Department of Health and Human Services (HHS) to redistribute any unspent Chafee funds as they see fit.

Opportunities for Engagement:

- **Ensure youth access to vital documentation**, such as birth certificates, and social security cards as we know from our peers that too often, young people struggle to access these. We recommend states report and youth are educated on their rights to receive this and have the support, services, and means to do so.
- **Actively engage young people with their communities** to exchange experiences and offer support and/or mentorship. Involving youth within the community allows them to create healthy connections/relationships fostering interdependence. Young people may experience many positive benefits from this engagement including a sense of belonging and healing.
- **Normalize conversations around adolescent milestones in a young person's life.** Foster youth in transition should not be stripped of the opportunity to celebrate important

¹⁰ Originally proposed in [Improving the Transition to Independent Adulthood](#), October 2012

milestones and/or receive the same kind of preparation as a non-foster youth would receive. Additionally, it is imperative that foster parents are involved and informed how they can support youth during these milestones and throughout their transition.

- **Educate policymakers** on how foster youth benefit from programs and services that support a successful transition to adulthood. Encourage stakeholders and policymakers to engage with young people in their own states in reviewing those programs and services - including how they function and are sustained. We urge states to involve young people in developing, reviewing and assessing the transition programs and services.
- **Advocate for specific, periodic training of both social workers and agency/contracting employees** to ensure full awareness of the available opportunities that help youth successfully transition. Training should bring in the voices of lived experiences (for example: young people, parents, kinship caregivers, and foster parents) to promote understanding, inspire growth and create awareness on how to better support young people and to overall better impact the child welfare system. There are other national examples of how this engagement occurs across the child welfare system including Family Voices United¹¹, Birth Parent National Network¹², Birth and Foster Parent Partnership¹³ and GrandVoices Network¹⁴.
- **Transition Planning meetings should be held at least once every three months**, starting no later than two years prior to emancipation, and monthly during the year prior to exiting care. Transition planning must include ongoing efforts regarding permanency; permanency should not be put on the “back burner”, but rather pursued with full engagement of the young person.

“When we are in foster care, all of our major basic needs are met almost automatically. Our healthcare-related needs are generally met without our consultation or guidance. Same goes for our academic and basic needs. The problem is that we are not prepared to have to complete these tasks for ourselves. I didn’t know how to call my doctor, much less my insurance company, just like I didn’t know what social services were available or how to access them. Moreover, in my state, there is a common narrative about how the agency fails to provide youth with their documents and reports (medical, legal, etc.). I recently found out it was federally required for the agency to provide me with these documents. Had I had these at the time, my transition would not have been as difficult.”

- *Anonymous, former foster youth in the State of New Jersey*

¹¹ <https://familyvoicesunited.org/>

¹² <https://ctfalliance.org/partnering-with-parents/bpnn/>

¹³ <https://ctfalliance.org/partnering-with-parents/bfpp/>

¹⁴ <https://www.gu.org/explore-our-topics/grandfamilies/grand-network/>

Priority 4: Normalcy: Promoting normalcy is essential for the youth's well being. In an ideal world, we want a young person to have access to a healthy support system that encourages them to realize their dreams through education, apprenticeship, and support from family and friends.

The Council first elevated the importance of normalcy in *Improving Well-Being by Addressing Normalcy for Foster Youth* (April 2013)¹⁵:

“We should be allowed to experience the same opportunities as our non-foster youth peers in the most normal, healthy and safest method possible. We believe normalcy is a critical component to establishing well-being and normalcy for foster youth deserves a greater degree of consideration and legitimacy by policymakers, practitioners, caregivers, and other stakeholders of the child welfare system.”

As young people transition into adulthood, it is necessary that states are providing normalcy to ensure better outcomes for youth and families. We believe the following are key considerations of normalcy for older youth, in addition to those previously raised by the Council.

Often, social media use is restricted on the basis of safety, instead of recognizing it as a critical and valuable way young people can invest in relationships. Relationships may include those that the young person had prior to entering care, or were able to reconnect with during their time in care (such as relatives or teachers). Young people should also be supported in maintaining new relationships they found during their time in care, such as a foster family that they spent time with. Social media may also support young people in expressing themselves and exploring their identities.

These connections are incredibly important for older youth:

“Data show that the majority of older youth in the child welfare system have contact with their parents to varying degrees, but often those relationships are unacknowledged, unsupported or discouraged. Failing to recognize and promote such relationships may leave youth on their own to manage complicated relationships and feelings. Research shows that supporting and strengthening parent and older youth relationships can result in permanency through reunification, and can be crucial to achieving permanency with other individuals.”¹⁶

Promoting normalcy is engaging youth in school activities, clubs, extracurriculars, religious and cultural activities. These activities can be formalized/structured or informal/unstructured. It is critical for young people to be supported in developing a sense of autonomy which may include growing control of personal privacy and property.

¹⁵ [Improving Well-Being by Addressing Normalcy for Foster Youth \(April 2013\)](#)

¹⁶ [ACYF-CB-IM-20-02](#) Family Time & Visitation for children and youth in out of home care

Young people must be supported, in particular, in finding normalcy when reunifying. Young people and their families must be engaged in establishing and discussing what new “normal” looks like. If they aren’t, it can cause barriers to successful reunification. Barriers may be avoided by increasing unsupervised visitation pre-reunification, age-appropriate conversations on the changes parents are engaging in, and ensuring supportive services continue once reunification occurs. Further, youth and families could find it difficult to meet expectations for plans made without their input which could sabotage a successful reunification. This engagement should begin prior to and continue after reunification. Engagement may include: opportunities for family therapy, family time, discussion of what needs exist and how the family can access resources after reunification, and follow up after reunification to ensure families are connected to necessary resources.

Normalcy is also connected to a young person’s identity. “Without normalcy, we often feel like we are different from others.”¹⁷ In order for young people to experience normalcy, foster parents must be trained in understanding and supporting young people’s full identities. Young people should be part of that training. We affirm statements submitted by the Council in the Foster Family Home Licensing Standards in September 2018. In particular,

“The Council firmly believes the system must do more - including holding caregivers accountable - for protecting and nurturing their identity. This includes respect for the family of origin’s culture and religion, along with the young person’s individual identity formation. While foster youth and alumni respect all there is to learn and experience from the culture and identity of a foster family and individuals who reside in the home, it is important for foster homes to recognize the power deficit a child enters a home with. In a system where it is critical that foster parents provide an assurance to support young people by affirming and supporting their identity, regardless of the foster parent’s own personal beliefs.”

Further, the Council believes this should be expanded to include other stakeholders that interact with a young person, such as caseworkers, judges, agency staff, group home and facility staff and others.

Young people aging out of care deserve support and services to help them successfully transition into adulthood. The Council recognizes the age of 13 as an essential time to begin to provide and allow youth to access the appropriate opportunities such as extracurricular activities, curriculum-based care, culturally appropriate life skills, and other opportunities. We recognize that when it is necessary to remove young people from their families and community, it is also critical to support those meaningful relationships with families and community. It is essential for youth that we maintain and cultivate the young person’s existing relationships, and

¹⁷ [Improving Well-Being by Addressing Normalcy for Foster Youth, April 2013](#)

help reduce the barriers preventing these supportive relationships from flourishing, for example when a young person moves out of the state. Child welfare systems need a holistic plan to surround young people with support and encourage healthy long-lasting relationships with their family and community. When young people are supported in building and maintaining those relationships we can normalize the conversations around critical opportunities for transitioning youth such as co-signing for an apartment, car insurance, and building & maintaining healthy relationships.

Current Priorities/Considerations:

The Family First Act supports expanded services for older youth transitioning out of foster care including the following:

- For states that have extended foster care to age 21, the choice to offer Chafee services to youth who have aged out of foster care up to age 23. This would also provide freedom to explore education and career opportunities in their young adulthood similar to their peers. Many youth take a break from higher education and return when they identify a career they would like to pursue.
- 5 years of eligibility for Education & Training Vouchers (ETVs) up to age 26. The 5 years of ETVs do not have to be consecutive. For example, a youth may be able to take a break from college and go back without losing eligibility. There can be many reasons a young person can use a break including addressing a mental health need, financial instability, and housing challenges.

Opportunities for Engagement:

- **Meaningfully engage young people in any program planning, development, and evaluation (including Family First implementation)** to ensure normalcy is considered, particularly for older youth.
- **Provide young people in foster care the right to know their rights.**¹⁸
- **Track normalcy policies and practices across states and tribes.**¹⁹
- **Value the perspectives of individuals who have had personal experience with the foster care system** - especially in looking at where effective practices can be replicated and where the system needs to change.

“Normalcy does not apply for my longest placements. But for the placement when I was 17 preparing to age out of care, I was assigned an Independent Living Worker, and she taught me budgeting; we practiced shopping for groceries, and she helped me apply to colleges and scholarships.”

- Foster Youth

¹⁸ [Improving Well-Being by Addressing Normalcy for Foster Youth, April 2013](#)

¹⁹ [Improving Well-Being by Addressing Normalcy for Foster Youth, April 2013](#)

Conclusion

When young people are in the foster care system, they need specific supports to help them transition into adulthood. Setting youth up for a successful transition should begin at age 13, or two years before their transition, whichever comes first. Council acknowledges the unique needs of youth in foster care as it relates to their transition to adulthood - including well being, access to quality legal representation, normalcy and aging out. Moreover, youth should be well informed on their rights, how to navigate different systems (ie. healthcare, court, academic, etc.), and be prepared to commemorate important milestones such as obtaining a driver's license and beginning to pay bills. The Council believes that it is vital for transitioning youth to have the opportunity to live as normal a teenage life as possible while ensuring they are well prepared to become connected, self-sufficient, effective and involved members of society when it is time for the transition.

Council acknowledges the importance of addressing unique transition concerns for special populations. For more specific information, please reference another priority statement in this series: Special Populations²⁰ where the Council identifies as expecting/parenting youth, LGBTQIA2-S+, crossover youth and other youth with unique needs related to well being, normalcy and aging out. These are the critical areas the Council is hopeful to provide detailed priorities for the future to better inform policies, practices and improve the lives of young people as they transition through adulthood.

²⁰ [Historic Opportunity for Reform: Youth & Alumni Priorities on Special Populations](#), September 2020

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About the Council

The National Foster Care Youth & Alumni Policy Council convenes to provide federal stakeholders with relevant and timely information as policies and procedures are created that will affect children and families throughout the country. The Council represents a collective viewpoint of youth and alumni who have experienced the child welfare system first-hand.

The Council consists of members geographically distributed across the country, reflecting a broad range of diversity encompassing, but not limited to, ethnicity, location of residence, religion and gender, and child welfare experiences. The feedback contained in this document is based on a compilation and review of the Council’s priorities over the past six years. The original Council priorities are linked in the document, and have been developed by Council members through a process that includes polling of hundreds of peers currently and formerly in the foster care system, reflection on their own lived experiences, and consultation with the constituent organizations they are supported by (such as Youth Boards, FosterClub, and Foster Care Alumni of America Chapters).

For more information, or to view other Council priorities, visit NationalPolicyCouncil.org.