

Youth in Transition

Illinois and the nation have a well-established interest in policies, programs and research related to the issue of older youth in foster care and the transition to adulthood. Research has shown that youth who exit the child welfare system without achieving permanence are prone to difficulties in education and employment, are more likely to experience incarceration, non-marital pregnancy, drug and alcohol abuse and dependency and may seek assistance through the adult public welfare system in the absence of other assistance and services¹. These adverse life experiences and circumstances can severely limit or compromise a youth's potential and the possibility of a successful transition to adulthood.

In a national effort to ameliorate negative outcomes for older youth, the Chafee Foster Care Independence Act, which was signed into law in 1999, provides new funding and flexibility to states to provide services and support to older youth in care during the transition to adulthood. This legislation doubles the federal funding for independent living programs and provides new flexibility to fund life skills training, substance abuse prevention and preventive health skills.

In Illinois, the implementation of the Chafee Foster Care Independence Act includes a service provision philosophy based in empowerment and responsibility. The Illinois Chafee Plan outlines additional resources for services and programs related to education (Youth in College), employment (Youth in Employment), housing and other supportive services. Despite the achievement of unprecedented permanency outcomes during the late 1990s and the advent of the Chafee legislation, Illinois faces a particular challenge relative to older youth in care: a challenging population of older youth coupled with shrinking resources. Resources to support older youth are shrinking due to the Chafee funding structure, which is calculated according to the portion of the national foster care

population each state possesses. In Illinois, the foster care population has decreased from its highest point in 1997 (more than 50,000 children) to less than 21,000 children in 2003, a reduction of more than 50 percent.

In Illinois, the percentage of youth in substitute care aged 14 and older has climbed from 20% in March 1997 to 30% in March 2002. This shift reflects the differences in permanency dynamics for older and younger children; younger children are adopted more often than older children. The older the child is at entry to the child welfare system, the greater the likelihood that the child will exit the system by reaching the age of majority and 'aging out' of the system. Between 11% and 13% of youth in care do not achieve permanency before the age of majority and age out of the child welfare system after their 18th birthday.

In an effort to enhance permanence for older wards, Illinois designed and was recently awarded an extension to its existing Title IV-E Subsidized Guardianship waiver. This waiver offers private guardianship as an additional permanency option to children and families. The revised terms and conditions for the newly awarded waiver extension will allow Illinois to offer transition services to youth age 14 and older, regardless of placement (adoptive home, private guardianship or foster care placement) to test whether the availability of these services enhances permanence for older wards. The original waiver was designed to meet the permanency needs of older youth but the evaluation of the waiver indicates that an unexpectedly low proportion of the foster care population above the age of 14 entered into subsidized guardianship arrangements. Feedback from youth, caseworkers and caregivers suggests that transition services seem to compete with permanency and that permanency is perceived as a 'loss of services' or



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'missing out' on access to transition services and other opportunities. The waiver will offer youth in care the opportunity to achieve permanence and access necessary supports during the transition to adulthood concurrently.

The transition to adulthood is a process that includes the acquisition of skills in several life domains. These domains include education, employment, health (physical and mental), housing, connections to caring adults, access to community services and life skills. Without the appropriate and adequate exposure, training and learning in these domains, youth are less likely to make successful transitions to adulthood. The Children and Family Research Center conducted an assessment of older wards through caseworker reports for youth age 17.5 and older in 1999. This assessment found that 52% of the youth age 18 years or older have high school diploma degrees (youth in survey sample were 17.5 or older), 22% of youth were enrolled in college and that 15% of wards were idle (not working, not in school or planning to finish school). In addition, the assessment found that over 44% of the youth were employed (32% part-time, 13% full time) and 28% were attending school and working. In addition, caseworkers identified one-third of older wards as having one or more special mental health, medical, pregnant or parenting, substance abuse or developmental needs, which significantly interfered with their ability to live independently.

In an attempt to develop an innovative program to address the needs of youth in care, Illinois recently conducted a planning process for the Jim Casey Youth Opportunities Initiative (JCYOI or the Initiative). The Initiative is a national effort to support youth in care during the transition to adulthood. The Initiative was formed by two of the leading foundations focused exclusively on child and youth well-being: the Annie E. Casey Foundation and Casey Family Programs. The Initiative plans to collaborate with several sites (states or cities) to test a model that includes Youth Advisory Boards, Community Partnership Boards and the Opportunity Passport, which includes a matched savings account, debit account and improved access to education, employment, health, housing and connections to the community.

The planning process engaged youth, representatives from community-based organizations, the Illinois Department of Children and Family Services, and the

Children and Family Research Center in meaningful dialogue to design an implementation plan for the JCYOI framework. The planning process forged new relationships, identified youth priorities, strengths and needs and provided both youth and project partners with a voice in the design of the Initiative in Illinois. Although, Illinois has decided not to move forward with implementation in concert with the Jim Casey Youth Opportunities Initiative, the planning process afforded the opportunity to build relationships and momentum toward improving outcomes for youth in care.

Discussion Questions

In recognition that the Jim Casey Youth Opportunities Initiative is one approach to assisting youth in care, how can Illinois build upon the momentum of the planning process to develop a means to improve outcomes for youth in care? Which JCYOI program elements could or should be included in future endeavors?

How can efforts designed to assist youth in the transition to adulthood also support community connectedness and the continuity of relationships with family and caring adults? In addition, what opportunities does the IV-E waiver extension offer for ensuring that permanency planning and transition planning become synergistic processes?

Understanding that all youth experience the transition to adulthood as a process rather than an event, which young people should serve as the target population for a new effort?

What role can youth-adult partnerships play in shaping new programs that support youth in care?

How can Illinois strengthen the research to practice loop relative to older youth in care? What would be included on a research agenda for older youth in care?

End Notes

¹ Cook, R. (1990). *A national evaluation of title IV-E foster care independent living programs for youth, phase 1*. Rockville, MD: Westat.

Cook, R. (1992). *A national evaluation of title IV-E foster care independent living programs for youth, phase 2*. Rockville, MD: Westat.

Courtney, M.E., & Piliavin, I. (1998). *Foster youth transitions to adulthood: Outcomes 12 to 18 months after leaving out-of-home care*. Madison, WI: University of Wisconsin.