

Fostering Futures Project

Transition Planning for Foster Youth with Disabilities: Are We Falling Short?

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An Awareness Document for Parents, Professionals & Youth



The Current State of Affairs

DO WE HAVE A PROBLEM?

Nationally, approximately 20,000 youth "age out" of foster care each year, typically when they turn eighteen. These youth face extraordinary challenges to becoming successful adults, and the transition outcomes for many youth exiting care appear bleak. A national study* of youth emancipated from foster care revealed that 2.5 to 4 years after they had left the system:

- ◆ Only 54% had graduated from high school
- ◆ 50% had used illegal drugs
- ◆ 25% were involved with the legal system
- ◆ 25% had been homeless at least one night
- ◆ Only 17% were completely self supporting

Among adolescents in foster care, approximately 40% have disabilities. The transition of these youth is especially concerning. The national study described above found that having a disability was associated with even poorer outcomes.

POOR TRANSITION PLANNING

The transition of youth with disabilities has been an area of focus for over two decades, and legislation has been introduced to address the needs of these youth. The Individuals with Disabilities Education Act of 1997 (IDEA) set forth specific requirements around transition planning and services for youth in special education. The transition needs of foster youth are also gaining greater recognition. The Foster Care Independence Act of 1999 (FCIA) provides resources to assist foster youth with planning for their transition to adulthood. Assistance is often given to youth through state independent living programs (ILPs). The Fostering Futures Project

conducted a study to evaluate the school transition plans of students who are in both foster care and special education. Key findings indicate that ***the transition plans of youth in care are generally poor in quality and often do not reflect the requirements of IDEA or effective practices.***

The transition plans of students who were in both foster care and special education:

1. **Were less likely to include goals for post-secondary education** (than youth in special education only). Only 31% of plans had a goal in this area.
2. **Were less likely to include goals for developing independent living skills** (than youth in special education only). Only 16% of plans had a goal in this area.
3. **Had significantly fewer goals overall** (than youth in special education only). Additionally, 20% of plans had no goals listed.
4. **Often had no plan for how to reach goals;** 32% of transition goals listed on the plans had no accompanying action steps.
5. **Revealed less advocate involvement** (than youth in special education only). A family member, foster parent or educational surrogate was present for the IEP/TP meeting less than half the time (42%).
6. **Indicated that caseworkers were typically absent.** Only 31% of the plans provided any indication that the caseworker had attended the Individualized Education Plan/Transition Plan (IEP/TP) meeting.
7. **Often had caseworkers and families listed as responsible for transition activities even though they had not attended the IEP/TP meeting.**
8. **Typically listed the student as responsible for working on transition goals, often with little or no support from others;** 22% of the time the student was listed as the sole person responsible for working towards a goal.
9. **Lacked a specific timeline for goal completion;** only 7% of goals identified a specific target date.

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10. **Rarely described effective practices that are known to promote successful transition outcomes** (such as training around self-determination, person centered or career panning, extra-curricular activities, mentoring, individualized financial support).
 11. **Were more than twice as likely to have youth slotted for a modified rather than standard diploma** (than youth in special education only).
 12. **Did not focus on career development.** Work experience, when described in the plans, was typically segregated, disability stereotypic and inconsistent with the student's employment goals.
 13. **Revealed little understanding or acknowledgement of foster care issues.** For example:
 - a. None of the transition plans made any reference to the transition planning that occurs through child welfare. Indeed, several foster youth in our sample had two separate transition plans, and a comparison between the special education and FCIA transition plans revealed little overlap.
 - b. While almost half the foster youth in our sample were turning 18 before their next scheduled IEP meeting, only 7% of the plans contained any discussion about a student's likely emancipation from child welfare.
 - c. Based upon the meeting notice, over half the time, schools failed to invite a student's caseworker to the IEP/TP meeting.
 - d. Less than one-fourth of the plans made any reference to FCIA Independent Living Programs.

Why Are Efforts to Conduct Transition Planning Falling Short?

5 KEY FACTORS

The disappointing outcomes of both youth in foster care and youth with disabilities have fueled efforts to improve transition planning.

Unfortunately, the results of the Fostering Futures study suggest that the transition plans of foster youth in special education are extremely poor in quality, both in absolute terms and in comparison to youth who are only in special education. Fostering Futures conducted a needs assessment that identified 5 key factors that appear to be contributing to problems in transition planning for foster youth in special education.

FACTOR 1: LACK OF A CONSISTENT ADVOCATE

- A. The Individuals with Disabilities Education Act (IDEA) requires that parents be involved in special education planning and decision-making. When a parent is unavailable (e.g. as is the case when a child is the "ward of the state"), a surrogate parent must be appointed by the school district in a timely fashion.
- B. However, youth sometimes go through special education with no consistent parent surrogate. Frequently, a foster parent is appointed as the educational surrogate, sometimes by default. However, this means that as a youth changes foster homes, s/he typically experiences a change in educational surrogate as well. Thus, foster youth often lack a caring adult who can consistently advocate for their educational needs over time.
- C. As Weinberg** points out "federal special education law assumes parental involvement and oversight so that a disabled child receives an appropriate education." The current study suggests that foster youth often lack this advocacy, and thus may be more susceptible to routine lapses in compliance within special education.



FACTOR 2: LACK OF CHILD WELFARE INVOLVEMENT IN SPECIAL EDUCATION

- A. Caseworkers, who have seen their caseloads expand by two-thirds since the 1980s, are often focused on a young person's immediate protection and safety, with less attention paid to educational priorities.
- B. In addition, IDEA does not define a clear role for child welfare professionals in the special education process, stipulating only that caseworkers cannot be an educational surrogate.
- C. To compound these challenges, the study indicated that there is little to no exchange of information between schools and child welfare agencies.

FACTOR 3: LACK OF AWARENESS BY EDUCATORS

- A. Just as education has not been emphasized in the child welfare system, the needs of foster children have not been a focus of education reform.
- B. The Fostering Futures study suggests that many educators remain unaware of the transition planning that may occur through child welfare and/or Independent Living Programs.
- C. Educators are not sensitized to issues surrounding a foster youth's emancipation from child welfare.
- D. In fact, because of the limited communication between schools and child welfare agencies, many educators may not be aware that a youth is even in foster care.

FACTOR 4: CHILD WELFARE AND SCHOOL TRANSITION PLANNING IS NOT INTEGRATED

- A. Transition planning is an important bridge for ensuring that young people with disabilities move into productive and successful adult lives.

- B. Within child welfare, federal law stipulates that foster youth, 16 years of age and older, have an Independent Living Plan that describes the programs and services they will receive to help them transition successfully into adulthood (42 U.S.C. § 675).
- C. Transition planning also occurs through special education. IDEA 1997 stipulates that at age 14 a student's Individualized Education Plan (IEP) include a statement of transition service need and that a comprehensive transition plan be in place by age 16.
- D. As the Fostering Futures study has shown, the transition planning that occurs through foster care is rarely coordinated with the transition planning that happens through special education. This results in a duplication of services, and sometimes, youth having transition plans that go in different directions.

FACTOR 5: FOSTER PARENTS NEED INFORMATION AROUND THE SPECIAL EDUCATION PROCESS

- A. Foster parents are often confused about their rights and role in the educational process. These caregivers often experience "instant parenthood" and have not had the opportunity to learn about special education policy over time.
- B. There is strong need for training foster parents about school rights, procedures and the transition planning process if they are to be actively involved as educational surrogates.



Addressing the Problem: Recommendations

7 KEY STRATEGIES

While all youth in special education are negatively affected when they have poor transition planning, youth who are also in foster care are particularly disadvantaged. Youth in care with disabilities face extraordinary barriers; thus, they require above-average transition planning, services and supports.

1. ENSURE COORDINATED TRANSITION PLANNING

At the local and state level, agencies (e.g. child welfare, education, vocational rehabilitation, employment) should form "partnership councils," with the goal of the council being to create a transition community for foster youth with disabilities. The council should address policy issues (such as shared consent) across agencies, clarify agency roles and identify mechanisms for pooling resources across agencies to provide flexible funding to help youth establish adult lives.

2. APPOINT AND TRAIN EDUCATIONAL SURROGATES

An educational surrogate should be appointed for each foster care youth in special education. The appointment processes should be thoughtful, and in some cases, a biological parent, family member, mentor or Court Appointed Special Advocate, should be considered to provide greater continuity. While the foster parent may typically be considered for this role, s/he should be fully aware of and prepared to meet the level of commitment and involvement required. Once designated, the educational surrogate should receive training around the special education process and their rights. The training should also focus on supporting the transition plans and self-determination of youth.

3. TRAIN PROFESSIONALS

Train child welfare professionals, school staff, Vocational Rehabilitation counselors, staff in One-Stop Career Centers and other key professionals on supporting the specific transition needs of foster youth – from a youth-directed perspective.

4. ENGAGE IN EFFECTIVE TRANSITION PRACTICES

Research has documented a number of practices effective in promoting successful transition. These include (a) youth involvement in transition planning; (b) participation in extra-curricular activities and general education; (c) career planning and work experience that is individualized to a student's career interests; (d) instruction in skills such as self-determination, self-advocacy and independent living; and (e) mentorship. Foster youth with and without disabilities need more opportunities to participate in these activities, and at an earlier age.

5. DEVELOP TRANSITION PLANS THAT MATTER

While transition plans are meant to provide a roadmap between school and adult life, they may frequently be viewed by professionals as perfunctory paperwork. The majority of plans reviewed in the study were not individualized, but were overly general, and lacked a description of the action steps needed to obtain a goal. In addition, the transition plans generally did not support accountability. Often the plans had no specific timeline for goal completion, failed to identify a responsible person (other than the youth), and did not include measurable outcomes. If transition planning is to have a meaningful impact, we must focus on the goal of students achieving a successful adult life, rather than on the mechanics of simply getting a plan done.

6. PROMOTE HIGH EXPECTATIONS FOR YOUTH

Findings from the Fostering Futures study indicate that the transition plans of foster youth with disabilities, in comparison to peers in special education only, are less likely to address college/post-secondary education, are less likely to have foster youth slotted for a standard diploma, and had significantly fewer goals over all. Considering that the foster care and special education only groups were similar in terms of disabilities, these

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differences may reflect lower expectations for foster youth. For youth with disabilities in foster care to achieve a quality life, professionals must see them as capable of accessing a full range of post-secondary educational and employment opportunities.

7. CONSIDER INVOLVING THE BIOLOGICAL FAMILY

Research has shown that youth who continue to have a relationship with their biological families while in foster care have better outcomes than youth who do not. The connection a young person has to his/her birth parents and/or sibling(s) may be particularly important during the transition to adulthood, when a youth may have little else. Indeed, research reveals that many young people discharged from foster care re-engage with their biological families. While not all youth may choose to re-unite with their family and in some cases this may even be contra-indicated, professionals should consider involving birth parents in the transition planning process more frequently. The Fostering Futures study suggests that schools rarely involve birth families in the IEP/TP meeting or the transition process.

* Westat (1991). A National Evaluation of the Title IV-E Foster Care Independent Living Programs for Youth: Phase 2. (Contract No. 105-87-1608). U.S. Department of Health and Human Services. Rockville, MD: Westat, Inc.

** Weinberg, L. A. (1997). Problems in educating abused and neglected children with disabilities. Child Abuse & Neglect, 21 (9), pp. 889-905.

The Fostering Futures Project is conducting a number of studies investigating the educational and transition experiences of foster care youth with disabilities.

If you have questions/comments, would like additional copies of the brief, and/or would like to receive future updates about other Fostering Futures studies, please contact Dr. Sarah Geenen at the Regional Research Institute at Portland State University: (503) 725-9604; FAX (503) 725-4180; or email to geenens@pdx.edu.

For further information about this study and findings, also see: Geenen, S. & Powers, L. (in press) Transition Planning for Foster Youth with Disabilities: Are We Falling Short? Manuscript accepted for publication at *Journal for Vocational Special Needs Education*.

This study was supported by grant No. H324N010012-02 from the U.S. Department of Education. The views stated in this report do not necessarily reflect those of the funder.
