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SPECIAL EDUCATION AND FOSTER CARE: A DOUBLE-WHAMMY OF BARRIERS

Over the past twenty years, the number of youth in foster care in the U.S. has nearly doubled to almost 520,000. On any given day, about 10,200 Oregon children are in foster care. Most foster children live in poverty before entering state custody; they are disproportionately children of color and many experience mental health issues associated with separation from family, past experiences of abuse or neglect, profound changes in their living situation, and uncertainty about the future. Adolescents in foster care in Oregon have an average of 7 foster homes, and about 40% of youth are eligible for special education services. If foster youth who have a mental health diagnosis are included, then about 70% of youth have disabilities.

While some recent reports have documented the outcomes of youth in foster care without disabilities, very little attention has been focused on foster youth with disabilities who face a “double-whammy” of dealing with disability and foster care. As a matter of fact, youth with some disabilities - developmental, physical and emotional - have been excluded from key national studies looking at outcomes for youth in care.

Unfortunately, research findings that are available show that foster youth with disabilities are more likely to struggle in school, to dropout, and to use drugs and be incarcerated than youth in care without disabilities. During transition, foster youth with disabilities often face homelessness, unemployment, single parenthood, and incarceration.

HOW ARE FOSTER YOUTH DOING IN SCHOOL?

Many foster youth have difficulty in school. For example, national research showed that:

- 40% of youth in foster care repeated at least one grade;
- 60% of youth in foster care failed at least one class the previous year;

- Students in foster care scored significantly lower on standardized tests than students who weren't in care;
- Students in foster care had higher absentee and tardy rates;
- 75% of students in care had to change schools when they entered the foster care system, which means students left behind uncompleted coursework, putting them further behind in credits; and
- Foster youth were twice as likely to dropout of school, only 16% of foster youth with emotional disabilities completed school, and 18% left school because they were incarcerated.

Research by Portland State University showed that, compared to Oregon youth in special education, youth in special education and foster care had:

- Lower GPAs;
- Changed school more often;
- Earned fewer credits;
- Had lower scores on state testing;
- Had more restrictive special education placements; and
- Were more likely to attend an alternative school.

WHAT ABOUT TRANSITION?

Every year, about 300 Oregon youth are emancipated or discharged from the foster care system, often when they reach the age of majority (typically age 18). For many young people, their sudden transition into adulthood occurs with very limited resources, including few connections to community, little or no financial support, and incomplete skills for independent living, all without the safety net of family. Recently, two large-scale studies were conducted in the Midwest and Northwest to look at transition outcomes for foster youth. The Midwest Evaluation found that young adults who exited foster care were twice as likely to have at least one child, were more likely to be a single parent, and had substantially lower levels of education and employment. Similarly, the Northwest Alumni Study found that the household income levels of young adults who had recently left foster care were 35% lower than the general population, and that within the first year of leaving foster care, 20% of alumni experienced at least one night of

homelessness. One of the few studies of transition by foster youth with disabilities, conducted by Westat in 1991, showed that 2.5 to 4 years after youth had aged-out of the child welfare system, only 54% had graduated from high school, 50% had used illegal drugs, 25% were involved with the legal system, and only 17% were self supporting (not receiving public assistance). Troubling outcomes such as these led the White House Task Force for Disadvantaged Youth in 2003 to identify foster youth with disabilities as one of the most educationally needy group of students who are “too often not provided the opportunity to reach their full potential”.

EDUCATION AND TRANSITION POLICIES FOR FOSTER YOUTH

The 1999 Foster Care Independence Act (FCIA) created the John H. Chafee Foster Care Independence Program (CFCIP) and doubled the federal money states receive to provide foster youth with independent living services. Typically, these services are delivered through Independent Living Programs (ILPs) and focus on employment, education and skills related to daily living. FCIA also allows states to use funds to supplement the room and board of young adults who have aged-out of care but who are under 21 years of age. In addition, federal law (42 U.S.C. § 675) stipulates that youth in foster care, 16 years and older, have a written Independent Living (IL) plan that describes “the programs and services which will help such a child prepare for the transition from foster care to independent living” [42 U.S.C. § 675 (1) (D)]. The Promoting Safe and Stable Families Amendments of 2001 (PSSFA) provides federal dollars for Chafee Independent Living Educational and Training Vouchers (ETVs) that can subsidize the cost of postsecondary education.

State legislation also has been passed for youth in foster care. SB 808 requires the Department of Human Services (or a contractor of DHS) to have a transition plan for youth 16 and older. SB 1034 permits wardship of a youth to be continued until 21 years of age. HB 3075 allows youth in foster care to attend their neighborhood schools if the court determines it is in student’s best interest.

While these policies are intended to help all youth in foster care, barriers keep some youth with disabilities from benefiting. For example, the Foster Care Independence Act of 1999 (FCIA) requires that transition services are coordinated with

programs for youth with disabilities, but there are no policies to facilitate such coordination. Because of restrictions on information sharing mandated by the Family Educational Rights and Privacy Act (FERPA), schools cannot tell DHS, the guardian, that a child is in special education without foster parent consent. DHS caseworkers seldom have the opportunity to attend IEP meetings, and very little coordination occurs in the development of a youth's DHS transition plan and his or her IEP transition plan.

Youth with disabilities may not be referred for ILP services because they are perceived as not capable of participating in the services, and accommodations may be unavailable. Many foster youth in special education who do not have sufficient general education credits receive modified diplomas, and ETVs are available only to youth who receive standard diplomas. While an increasing number of youth are remaining in foster care past 18 years of age, without advocacy many youth continue to transition out of care at 18.

Lack of foster parent training in disability, special education and strengths-based approaches to support youth places foster parents at a disadvantage, and a serious shortage of foster parents gives little flexibility in placement choice by DHS or the youth. As a result, youth with disabilities in foster care are often on their own - trying to get through school and make a life while navigating multiple challenges and service systems.

BUILDING YOUTH CAPACITY AND ALLIES: MY LIFE AND PROJECT SUCCESS

The Regional Research Institute at Portland State University, in partnership with Oregon DHS, Portland Public Schools, and several other school districts is implementing the My Life Project and Project Success in Multnomah County. The Projects, funded by the US Department of Education and Oregon Department of Education, are evaluating the impact of supporting students to build their self-determination on their academic and transition outcomes. Approximately 150 foster youth in special education are being enrolled in waves across the projects. Youth who agree to participate in the projects are randomly assigned to either an intervention or comparison group (standard services). Youth participating in an intervention group work with a coach once or twice a week to learn and apply self-determination skills, such as

goal-setting, finding community resources, problem solving, managing frustration and making allies. Youth actively participate in their transition planning meetings, which are organized to bring together representatives from school, DHS and other agencies involved with the youth. Additionally, youth meet with one another and foster care alumni to learn first hand about succeeding at school and making the transition into adult life. Coaches coordinate their support of youth with teachers, foster parents and caseworkers. Outcomes, including youth self-determination, school performance, employment, and independent living, are measured before intervention, at the end of intervention, and a year after intervention. These projects are the first to focus on promoting the self-determination of youth with disabilities in foster care.

Preliminary data indicates that the intervention group youth in the My Life Project are experiencing significant increase in self-determination, in comparison to the control group which actually declined over time. Furthermore, the intervention appears to have a positive impact on foster care placement stability and school retention. Youth participating in the intervention are also more likely to exhibit an increase in their perceived social and community belonging as well as overall well. Finally, youth in the intervention group self-reported feeling more prepared for life now and in the future than did the comparison group. Complete findings will be available for My Life in approximately one year and for Project Success in three years.

WHAT TEACHERS CAN DO TO SUPPORT YOUTH WITH DISABILITIES IN FOSTER CARE:

- (1) Know which youth are in foster care.** Ask foster parents to sign a release of information so DHS caseworkers can be contacted and invited to the student's IEP meeting.
- (2) Support student self-determination.** The September 2004 Transition Toolbox provides strategies that teachers can use to promote the self-determination of students, and these same approaches are valuable for working with youth in foster care.
- (3) Integrate the transition planning that happens through child welfare and school.** Make sure the student's caseworker is invited to

the IEP/TP meeting and ask how DHS can help with transition – for example, through an Educational Training Voucher (ETV).

- (4) **Be mindful of the issues/challenges that students in foster care often experience.** For example, if a young person is approaching 18, she may be facing emancipation from foster care, which would change her living situation and could affect her ability to stay-in and focus on school. If a youth is short a few credits, encourage and help him find ways to make up the credits and get a general diploma.
- (5) **Make sure the student has an educational surrogate, and that the surrogate understands her/his rights and responsibilities.** IDEA 2004 expanded the definition of parent to include long-term foster parents (unless excluded by state law). While often the foster parent functions in this role, it means that as a youth changes foster homes, s/he typically experiences a change in educational advocate as well. There is strong need for training foster parents about special education rights, procedures and the transition planning process.
- (6) **Have high expectations.** 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.

WHERE TO LEARN MORE

Several websites provide good information on issues facing youth in foster care and how to support their education and transition.

- A report called “Youth with Disabilities in the Foster Care System: Barriers to Success and Proposed Policy Solutions” was recently released by The National Council on Disability and provides an overview of challenges facing foster youth in special education:

http://www.ncd.gov/newsroom/publications/2008/FosterCareSystem_Report.html

- The National Child Welfare Resource Center website links to publications on promising practices, strategies/resources and research around supporting youth in foster care:

<http://www.nrcys.ou.edu/nrcyd/publications.shtml#research>

- FosterClub, a national network for youth in foster care located in Seaside, Oregon. Two websites provide a message board for foster youth, information about independent living programs, information about youth rights in foster care, and connections to foster care alumni who have successfully transitioned into adulthood:

www.fosterclub.com

www.fyi3.com

- A report by United Cerebral Palsy, published in 2006, provides a summary of the research and other available information regarding children and youth with disabilities in foster care:

<http://www.ucp.org/uploads/ForgottenChildrenFINAL.pdf>

For more information on supporting youth with disabilities in foster care and/or the My Life Project or Project Success, please contact Sarah Geenen at PSU (geenens@pdx.edu or 503-725-9604).