

YOUTH SERVICES

ACTION

- Expand eligibility and improve services to youth in the child welfare system, or who were formerly in child welfare, through the John H. Chafee Foster Care Independence Program. Expand eligibility for independent living services to age 24, including room and board. Increase funding to at least \$200 million to support expansion of eligibility and services.
- Require Medicaid coverage for former foster youth up to at least age 21.
- Improve education opportunities for youth in foster care by making improvements to the Education and Training Voucher program. Increase funding for the voucher program to at least \$60 million and ensure that all of the funds are used for this purpose.
- Include provisions in the reauthorization of the No Child Left Behind Act to enhance education supports for children in foster care.
- Provide the necessary resources for implementing the National Youth in Transitions Database.

HISTORY

Federal support for independent living services for foster youth began in 1986 when Title IV-E was amended to include the Independent Living Program to assist youth who would eventually be emancipated from foster care. In 1993, Congress permanently extended the authority for independent living. Significant improvements were enacted in 1999 with passage of the John H. Chafee Foster Care Independence Program, in honor of the Rhode Island Senator who was one of the law's sponsors and who died before it was enacted. The law allows

states to extend Medicaid coverage to former foster children between 18 and 21 years of age, and funding was doubled to \$140 million per year, which became effective in 2001. Also in 2001, Congress authorized an additional \$60 million in discretionary funds for education and training vouchers for youth who are eligible for the Foster Care Independence Program, as well as youth who are adopted from foster care after reaching 16 years of age.

FOSTER CARE INDEPENDENCE

The John H. Chafee Foster Care Independence Program helps states provide services to young people who are likely to remain in foster care until age 18, as well as former foster children beyond age 18. The program helps eligible children make the transition to self-sufficiency through such services as assistance in earning a high school diploma, support in career exploration, vocational training, job placement and retention, and training in daily living skills. In addition to Medicaid coverage, the program allows up to 30% of the funds to be used for room and board. Chafee is a capped entitlement with an annual ceiling of \$140 million, which has not been increased since 2001.

Adolescents constitute a major segment of the youngsters the child welfare system serves. Most youth enter out-of-home care as a result of abuse, neglect, and exploitation. Others have run away from home or have no homes. Young people transitioning out of the foster care system are significantly affected by the instability that accompanies long periods of out-of-home placement during childhood and adolescence. These young people often find



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themselves truly “on their own,” with few, if any, financial resources, no place to live, and little or no support from family, friends, and community. The experiences of these youth place them at higher risk for unemployment, poor educational outcomes, health issues, early parenthood, long-term dependency on public assistance, increased rates of incarceration, and homelessness.

The resulting harm to the youth themselves, their communities, and the society at large is unacceptably high. To reduce these outcomes, outreach to youth and the quality of services provided need to be improved. In addition, expanding eligibility for critical support for young people leaving foster care will ensure a successful transition to independence and self-sufficiency, and reduce the numbers of young people who become homeless, unemployed, incarcerated, and/or at high risk of becoming victims and victimizers. To accomplish this improvement and expansion, funding for the Chafee Foster Care Independence Program needs to be increased significantly.

HEALTH COVERAGE

For young people leaving foster care, lack of health care poses a substantial challenge. The Chafee Program allows states to extend Medicaid coverage to former foster children between ages 18 and 21. Despite Medicaid’s tremendous advantage for youth in foster care, only 11 states had implemented the extension as of December 2006: Arizona, California, Indiana, Mississippi, New Jersey, Oklahoma, South Carolina, South Dakota, Texas, and Wyoming.

Given the high rates of physical and mental health problems extensively documented among children and youth in foster care, access to health services is a critical factor as young people transition to adulthood. Because most children and youth in foster care are covered by Medicaid, use of the expansion option would allow a state to readily facilitate the transfer of a youth’s Medicaid eligibility from one category to another without any gap in coverage as they exit foster care. Medicaid coverage should continue for all foster youth until at least age 21.

Keeping medical records up to date and accessible is another challenge for young people involved with child welfare. Advances have been made in electronic record keeping, but more are needed.

EDUCATION

The correlation between out-of-home care and low academic performance has been documented nationwide. Although all children are entitled to education services under federal, state, and local laws, the specific educational needs of children

and youth in care often go unmet, and the harmful effects of poor educational opportunities while in out-of-home care can outlive a youth’s tenure in the system.

The 110th Congress will consider the reauthorization of the federal legislation governing elementary education—the No Child Left Behind Act. The legislation must be improved in several areas to meet the education needs of children in out-of-home care. There must be more collaboration between school systems and child welfare agencies to enhance educational progress. Education districts must ensure that quality education is provided to children and youth in out-of-home care, and prohibit unnecessary delays or resistance in recognizing an individual education plan (IEP), which many children in care have. Schools also need to provide a social environment that accepts children in care.

The Education and Training Voucher (ETV) program provides assistance of up to \$5,000 per year for the cost of attendance at an institution of higher education for youth who age out of foster care or are adopted after age 16. Funding for this program has never reached the amount requested by President Bush—\$60 million—which itself is not enough to meet the need. The ETV program began receiving funds in 2003 and was set at \$42 million. In 2005, funding increased to \$46.6 million. The benefits of a college education are significant. Funding for the ETV program should be expanded to at least the level proposed by the President, \$60 million.

Further improvements to the ETV program are needed, including requiring technical assistance for states to make sure the funds are fully utilized. Also, it should be required that any ETV funds not used in one state be transferred to other states’ ETV programs where there is a demonstrated unmet need, rather than being returned to the federal treasury.

NATIONAL DATABASE

Congress should provide the resources necessary for the implementation of the National Youth in Transitions Database. This new initiative is a tremendous opportunity to provide valuable information that will inform future improvements in services to young people. The funds for this implementation should be a priority for Congress and should not come at the expense of existing services or supports or reduced services to adolescents receiving Chafee and ETV funding.

KEY FACTS

- In 2004, 22,718 children aged-out of out-of-home care.



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- A study of young adults who had spent a year or more in foster care between the ages of 14 and 18 found that 25% had experienced post-traumatic stress, compared to 4% of the general adult population.
- Three in 10 of the nation's homeless adults report having foster care histories.
- A recent study found that one-third of older youth in foster care were identified by caseworkers as having one or more special mental health, medical, pregnancy and parenting, substance abuse, and developmental needs that significantly interfered with their ability to live independently.
- In Clark County, Nevada, 55% of former foster youth reported not having any health insurance after leaving foster care.
- Forty-four percent of former foster youth in Wisconsin reported difficulty accessing health and mental health services.
- The rate at which foster youth complete high school (50%) is significantly below the rate at which their peers complete high school (70%). The rate at which college-qualified foster youth attend postsecondary education (20%) is substantially below the rate at which their peers attend postsecondary education (60%).
- The Census Bureau reports college graduates make \$23,000 more per year than those with high school diplomas.

Sources for statistical information are provided in the online version of this fact sheet. See www.cwla.org/advocacy/2007legagenda.htm.

C W L A C O N T A C T

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