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Enhancing services to youths leaving foster care: Analysis of recent legislation and its potential impact

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Abstract

Recent federal legislation has provided funding to states to provide additional services and supports for youth and young adults leaving foster care. The Foster Care Independence Act of 1999 and the Chafee Foster Care Independence Program allow states to design enhanced programming in the areas of education, housing, life skills and other needed supports. Additionally, the Education and Training Voucher Program specifically provides financial assistance to former foster youth attending post-secondary education. This article is designed to examine the implementation status of these policies, potential areas of strength and weakness, and further steps in policy development to support youth transitioning from foster care.

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1. Background of independent living policy and programs

Public child welfare agencies face numerous challenges in satisfactorily meeting their mission of protecting children and assisting families. While policy, practice and public sentiment may aim toward prevention and quick re-unification, for some young people the child welfare system through foster care provides their only access to concrete and emotional support. Thus, when required to leave care due to aging out, they may be left with no support regardless of their needs. Although the aging out process and its

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subsequent challenges to former foster care youths has historically received little attention, this has recently changed, as both policymakers and researchers have focused some attention on this issue. Most prominently, the Foster Care Independence Act (FCIA) of 1999 was passed by Congress and signed into law by President Clinton (P.L. 106–169) establishing the Chafee Foster Care Independence Program. Additional recent legislation (Chafee Education and Training Voucher Program [ETV]) has focused specifically on economic assistance for post-secondary education. This paper examines what is currently known about the implementation of these additional supports for adolescents in foster care and identifies potential impacts and cautions of these approaches. Suggestions for further strengthening policies and programs regarding the transition from care are also provided.

Within the context of broader research on foster care, it quickly became apparent that youths with extensive foster care histories were vulnerable to poor outcomes later in their independent young adulthood. One early and notable study (Festinger, 1983) conducted a comprehensive follow-up of young adults who left foster care in the New York metropolitan area. Collecting data from 277 respondents the study found, for example, that more than one-third of respondents had not completed high school and that 21% were receiving public assistance.

In response to professional concern and research which documented poor outcomes, initial legislation to begin to address the needs of foster care youths was passed in 1985. The Independent Living Initiative (P.L. 99–272) amended Title IV-E of the Social Security Act to provide federal funds to states to help adolescents in foster care develop independent living skills. This legislation was an important beginning as it recognized a problem and provided initial resources for child welfare systems to begin to respond through the development of programs. Given the extensiveness of the multiple and serious challenges facing public child welfare agencies, attention to the needs of adolescents in care remained a minor focus, the federal resources provided through the Independent Living Initiative were small, the development of programming limited, and consequently the overall impact on youth was negligible.

Although several studies have been conducted since the advent of independent living programs, the methodological limitations in this body of research have been serious. There is, therefore, little clarity about the impact of independent living programming and the circumstances in which it may be most and least effective. Recent literature reviews have focused on the research base that identified poor outcomes for youth leaving foster care and the effect of independent living services (e.g., Collins, 2001; Loman & Siegel, 2000). Most evaluations of independent living programs were conducted with small samples, no comparison group and few standardized measures. They tended to be evaluations of individual small programs rather than of the policy or programming model. Only one national study was conducted, identifying a slight, but positive impact of independent living services (Cook, 1994). Additionally, a government report (GAO, 1999) documented the substantial variation and limitations in services provided by states, the unknown effectiveness of independent living services, and the limited federal monitoring of state implementation of independent living programs. There is no doubt that the need for assistance for this population is great and there is reason to believe that some assistance is helpful to some youth. Even in the absence of a fully developed body of research knowledge, it is hard to argue that supports are not helpful to development (i.e., all people

need supports at stages of life transition) although questions remain about the most helpful mechanisms of providing support to the adolescent foster care population.

2. Foster Care Independence Act and Chafee Program: Description

Key provisions of the Chafee Foster Care Independence Program included the following: a US\$140 million capped entitlement requiring a 20% state match; an updated funding allocation formula based on the proportion of a state's children in Title IV-E and state funded foster care; expansion of eligibility—up to age 21 for those children who are “likely to remain in foster care until age 18” and those who have aged out of foster care without regard to their eligibility for Title IV-E funded foster care (previous eligibility was focused on those 16–18 in Title IV-E funded foster care); states can use of up to 30% of funds for room and board for those ages 18–21 who left foster care because they reached age 18 (previously use of funds for room and board was prohibited); and states can extend Medicaid coverage to young people ages 18–21 who were in foster care on their 18th birthday. Additional provisions include a statement that establishing permanency for these youths should remain the emphasis of child welfare services; the need to involve participation of young people in planning program activities; a 1.5% set aside of program funds for evaluation and technical assistance; a requirement that benefits and services are available to Indian children in the state; emphasis on accountability and outcome measures; the use of funds for training; and the need for state plans to certify coordination among key stakeholders.

The states may use the Chafee funds in “any manner that is reasonably calculated to accomplish the purposes” of the program. The Chafee Program identifies five purposes: (1) identify children who are expected to be in foster care to age 18 and help them make a transition to self-sufficiency; (2) help these children receive the education, training and services necessary to obtain employment; (3) help them prepare for and enter post-secondary training and education institutions; (4) provide personal and emotional support for children aging out of foster care; (5) provide a range of services and support for former foster care recipients between ages 18 and 21 to complement their own efforts to achieve self-sufficiency and to assure that the program participants recognize and accept their personal responsibility for adulthood.

More recent legislation provided an additional emphasis on higher education for foster care youth. The Promoting Safe and Stable Families Amendments of 2001 amended section 477 of the Social Security Act to add a new purpose to the Chafee Foster Care Independence Program. The objective of the Chafee Education and Training Voucher Program (ETV) is to provide resources to states to make available vouchers for post-secondary training and education to youths aging out of the foster care system or to youths adopted from public foster care after age 16. States may allow youths participating in the voucher program to remain eligible until they attain 23 years of age as long as they are enrolled in a post-secondary education or training program and are making satisfactory progress toward completion of that program. The voucher is to be used for the cost of attendance at an institution of higher education as defined in section 102 of the Higher Education Act of 1965 and can be up to US\$5000 per year for each student.

3. Implementation, potential impact and cautions

Given the recent nature of the FCIA and the ETV, relevant evaluation questions relate to the implementation status of the states' independent living programs, challenges to implementation and potential for successfully assisting youth in attaining young adulthood success. Using available evidence in reports, on-line sources and published literature, I analyze several components of the legislation: program values, program flexibility, targeted population, life skills training and concrete assistance (education, health and housing).

3.1. Program values

The legislation contains statements that suggest the following values: youth development, permanency and self-sufficiency.

3.1.1. Youth development

The U.S. Department of Health and Human Services, Administration for Children and Families (2003) describes positive youth development as “a policy perspective that emphasizes providing services and opportunities to support all young people in developing a sense of competence, usefulness, belonging and empowerment”. Youth development programming has typically been associated with community-based organizations rather than the child welfare system. Historically, child welfare practice has viewed clients in terms of needs rather than strengths and clients of the system, particularly children and youths, have not been included in decision making for their future. Moreover, from the perspective of the young people, the agency's power over their lives may make them reluctant to participate in activities focused on youth development.

In several ways, the FCIA facilitates a youth development perspective: it aims to provide supports and prepare youth for normative challenges related to job-seeking, education, and other aspects of independence; it is a non-clinical, non-problem-focused effort; and it attempts to be empowering by stating the need to include youths in designing program activities.

The application for Chafee funding must include certification from the state's chief executive officer that “the State will ensure that adolescents participating in the program under this section participate directly designing their own program activities that prepare them for independent living and that the adolescents accept personal responsibility for living up to their part of the program”. A transitioning service plan should include youth's perspective and goals. This is consistent with good social work practice emphasizing a client-driven, empowerment-oriented approach to service delivery. At the state policy level, youth involvement is not standardized regarding the type and extent of involvement. Youth Advisory Boards are an increasingly common method for attempting to insure that youth voices are heard in planning and policy-making and they appear to be the main mechanism by which states make efforts to involve youth in planning. The National Foster Care Awareness Project (2000b) reports that half of the states have formal youth advisory boards and that other states are considering this option.

The literature on empowerment practice with youth can provide theoretical guidance as to the optimal means for including youth in decision-making (e.g., Checkoway, 1998;

Delgado, 2002). Delgado (2002) emphasizes process rather than outcome when discussing youth development. “Youth development simply cannot take place without active and meaningful involvement of youth in all aspects of programming. Participation is central to any activity undertaken within a youth-development perspective. . .ways to measure participation must be developed as a central part of any formal program evaluation” (Delgado, 2002, p. 68).

Despite the potential of negative or mixed feelings youths may have toward continued engagement with the child welfare system, some research suggests that many view the child welfare system in fairly positive terms and as a resource. Courtney et al. (2001) report that the majority of sample members had a positive attitude toward their experience in the child welfare system; about 73% reported general satisfaction with their experience in care. Sample members did, however, report some dissatisfaction; 17% felt the child welfare agency did not have their best interests in mind and over one-third (34%) reported that they had been “mistreated” at least some of the time while in out-of-home care. In terms of seeking help from the child welfare system after leaving care more than 41% reported it “likely” or “very likely” that they would turn to the agency for help with finances, and similar percentages reported turning to the child welfare system for help with employment (49%), health problems (41%) and housing (53%).

3.1.2. *Permanency*

The concept of permanency was a major focus of the 1997 Adoption and Safe Families Act (P.L. 105–189), but a secondary focus of the FCIA. Nonetheless, the FCIA reinforces the emphasis on permanency for adolescents in four ways: explicitly clarifying that independent living services are not an alternative to adoption; requiring states to train both foster and adoptive parents about preparation for independent living; reinforcing the importance of personal and emotional support for young people aging out of care; and specifying that independent living services can be provided to young people at various ages and stages approaching independence (NFCAP, 2000a).

Others have discussed at length the importance of permanency for older adolescents in foster care (e.g., Charles & Nelson, 2000) and the need to help youth make lasting connections to family, friends and supportive networks. A closely related topic is the potential importance of mentoring in guiding youths through the transition period (Jaklitsch, 2003; Massinga & Pecora, 2004) and the FCIA explicitly lists mentoring among the possible use of federal funds. These are obvious needs; yet some cautions regarding the mentoring enterprise are needed (Rhodes & Spencer, in press). Knowledge development regarding the utilization, development and supervision of mentoring relationships in the context of youth programming is in an early stage and given the vulnerability of the foster care population an extensively thoughtful approach to forging relationships through mentoring is needed.

3.1.3. *Self-sufficiency*

The FCIA provides funding “. . .to help children make the transition from foster care to self-sufficiency. . .” and it provides funding to provide support and services to former foster care recipients ages 18–21 “to complement their own efforts to achieve self-sufficiency and to assure that program participants recognize and accept their personal responsibility for

preparing for and then making the transition from adolescence to adulthood". Among the certifications required by the chief executive officer of the state is that adolescents will participate directly in designing their own program activities "...and that the adolescents accept personal responsibility for living up to their part of the program".

Self-sufficiency and independence are frequently articulated values in contemporary American culture. Efforts to empower foster care youths to attain eventual self-sufficiency is important with the caveat the some youths within the child welfare system, and other state service systems, may have multiple and serious vulnerabilities that make full self-sufficiency an inappropriate goal, especially in the young adult years. For example, a disproportionate percentage of youth in foster care have serious mental health and behavioral problems (Szilagyi, 1998) that are likely to require some level of ongoing care.

Others, most recently Propp, Ortega, and NewHeart (2003), have questioned the premise of self-sufficiency and independence in relation to foster care youth. They have argued that interdependence, the degree to which one relies on external resources, is a healthier and more realistic goal for most people and for foster youth in particular. For example, the ability to ask for help is viewed as a strength rather than weakness. Successful practice with youth should balance the emphasis on independence and interdependence, and public policy must recognize the limitations of self-sufficiency alone.

3.2. Program flexibility

The FCIA provides a list of possible services that might be provided by states with federal funding. The potential services identified include: assistance in obtaining a high school diploma; career exploration, vocational training, job placement and retention; training in daily living skills, training in budgeting and financial management skills; substance abuse prevention; preventive health activities; education; training and employment services; preparation for post-secondary training and education; mentors and interactions with adults; financial, housing, counseling, employment, education and other appropriate supports and services for young people ages 18–21 formerly in foster care.

It is up to the individual state to determine in their planning process, the services that they will offer consistent with identified needs and resources available in the state. The state child welfare agency which administers the Title IV-E Foster Care Program develops an application to the Department of Health and Human Services (DHHS) for Independent Living funds for a period of 5 years. The plan must detail the planned implementation of the program and certify the collaborative process for developing the application. The collaborative process should include the input of foster care youths and other key stakeholder groups such as representatives of other relevant state agencies (e.g., mental health, juvenile justice) and service providers.

Limitations on federal funding insure that states will have difficulty in providing a comprehensive array of services. Review of state plans suggests that there are numerous potentially good ideas but, overall, a chaotic blend of programming with little theory base or evaluation.¹ Exacerbating the diversity of programming across states is the

¹ State plans are available on the website of the National Resource Center for Youth Development.

variation in state-funded independent living services that can supplement those provided with federal funds. Currently available reports and documents regarding the services provided through independent living programs provide descriptions (and sometimes limited evaluation data) of specific programs and promising practices that may be of use to program developers (e.g., Jaklitsch, 2003; Massinga & Pecora, 2004; NFCAP, 2000a, 2000b). Nationally, however, there is no agreed upon understanding of priorities for use of funding.

Among the specific concerns noted in a federal report reviewing independent living services (GAO, 1999) were that few programs provide apprenticeships or affordable vocational programs, connections to potential employers were not well developed, experiential activities to practice living skills were not common, availability of transitional housing services was limited, and after care services were highly variable. Some barriers that states have reported regarding the implementation of independent living services have included: staff turnover, transportation problems, lack of coordination among services, limited involvement of foster parents, lack of youth employment opportunities, scarcity of housing and supervised living arrangement, lack of affordable educational services and a shortage of mentors and volunteers (Massinga & Pecora, 2004).

Through the use of expanded Chafee funding, states and localities may be making incremental progress on these issues. Yet, as a whole, there is little reason to believe that these problems are not going to continue to plague the delivery of independent living services. “The diversity in programming for transitioning youth across the nation is, in part, related to gaps in knowledge left by the inconsistent results of empirical studies, the lack of consistent scholarship and in adequate funding (Propp et al., 2003, p. 259)”. Moreover, there is a long standing and unresolved policy debate regarding the relative strengths of federally prescribed use of funds for services resulting in greater uniformity versus flexible funding designed to meet specific needs within communities.

3.3. Targeted population

The FCIA expanded eligibility for independent living services to include youth up to age 21 and to include youth without regard to their Title IV-E status. Less clear is the legislative criterion related to those youth “likely to remain in foster care until 18 years of age”. The *National Foster Care Awareness Project (NFCAP) (2000b)* noted that states are finding this criterion hard to define and that many are using indicators (e.g., age at entry into care) to help determine the likelihood that a child will remain in care until age 18. All youth, regardless of eventual discharge placement, can benefit from exposure to the services and opportunities provided through the independent living program. Yet, the services might be of most benefit to those who remain most vulnerable and with fewest supports.

Generally, it is not known the extent to which available independent living services are available to those eligible to receive them. A longitudinal study in one state (Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001) found 76% of youths reported receiving life skills training while in care. Yet, at follow-up smaller percentages reported receiving concrete assistance in preparing for discharge; ranging from a high of 44% reporting help obtaining a driver’s license to much lower percentages (11%) reporting help finding a job, obtaining health insurance or obtaining public assistance.

Given funding limitations it is unlikely that all eligible youth are receiving all the available services provided within a state. Formal and informal rationing are likely to occur and front line workers are often in a position to make determinations regarding who is most likely to benefit. Youth who are engaged, interested and mature may be those most likely to be enrolled in the services provided. They may, in fact, be those most likely to benefit from the services provided. Yet, they may also be the least vulnerable of a highly vulnerable group. Although some program descriptions and evaluations provide information regarding the characteristics of youth involved in the programs, the research literature is silent regarding the comparison of youth receiving services to the population of adolescent youth within the child welfare system.

One specific concern is that youths residing in group or residential care have equal access to supports and opportunities available to other youths living in family foster homes. Older foster children are more likely to be living in group care than are younger foster children. In 1999, 18% of foster children ages 14 and above lived in group homes, 22% lived in institutions, 3% were in supervised independent living and 5% had run away (Wertheimer, 2002). It is not clear the extent to which independent living programming is targeted to youth in one living situation versus another or whether youth in one living situation benefit to a greater degree than those in another.

3.4. Life skills training

Life skills training has been the foundation of independent living programming. Though a widely used approach to assisting youths leaving care there remains little reported evaluation of life skills training in the literature. A national study of independent living (Cook, 1994) found that youths receiving skills training in five key areas (money management, credit management, consumer skills, education and employment) had significantly better outcomes in living independently than those receiving no training in these areas. A more recent but smaller study compared foster care youth who had participated in an independent living program with those who had not. Outcome data (collected 1–3 years after leaving care) found the independent living program participants were more likely to live independently or pay all of their housing expenses. They also had a higher level of educational attainment than nonparticipants. There were not, however, significant differences regarding employment or financial self-sufficiency (Lindsey & Ahmed, 1999).

A variety of resources are available to programs providing life skills training to youths including: training curricula, workbooks, videos, games and exercises. There is wide variation in the quality of the materials, their content and specific target. There is little empirical evidence and no widely accepted standards for content or delivery. There is, however, consensus that an emphasis on the practice of skills in the real world is needed and that reliance on classroom-oriented delivery or workbooks is not sufficient for youths' skill development (Barth, 1990; Cook, 1994; Courtney et al., 2001). Program developers and researchers are also addressing increased attention to the accurate assessment of youths' level of competence regarding independent living skills, and the use of assessment data in planning and monitoring of skill development (Bressani & Downs, 2002; Nollan et al., 2000).

3.5. Concrete supports

The legislation has the potential to provide concrete supports in three areas: education/training, health care, and housing. Some, albeit limited, Chafee funds are provided for education/training and housing. Furthermore, the FCIA allows, but does not require, the extension of Medicaid coverage to this population. To the extent that the concrete supports of education/training, health care and housing are developed and implemented, these benefits are an important advance in supporting young people.

3.5.1. Education and training

The ETV program was funded for fiscal year 2003 and states are in the process of implementing these programs. Youth who age out of foster care or are adopted after age 16 could be eligible for up to US\$5000 a year toward post-secondary education in universities, colleges and vocational schools. According to the data reported to the National Resource Center on Youth Services (http://www.nrcys.org/edu/NRCYD/State_Pages/f), 24 states were actively participating in the ETV program. Since this legislation was quite recently passed, many other states are in the process of developing their state plan in order to receive these funds.

Several states also have their own state-level educational assistance programs and most of these programs are quite new. Thirty-one states provided information about some type of post-secondary education support specific to the population of foster youth (NRCYS, 2004). There was wide variation regarding how long programs had been in place, eligibility requirements (e.g., type of state ward [child welfare or juvenile justice], length of time in care, age at exit from care, age at entry into post-secondary education program) and the form of the educational assistance (e.g., tuition waivers at state schools, scholarship funds, coverage of related expenses [room and board, fees, books]).

For instance, in Massachusetts, post-secondary educational programs for foster care youth include a state tuition waiver program (covering the cost of tuition in state universities and community colleges), a foster child grant up to US\$6000 (covering tuition, fees, room and board for full-time students) and a scholarship program (covering any financial costs related to school or college). As in most states, a condition for receiving state aid is that the student also applies for federal financial aid.

Due to the wide variety of eligibility requirements, there are potential equity issues regarding the appropriate distribution of education and training funds. Obviously, some states contribute state resources to educational assistance and foster youth in those states would have greater access to post-secondary education and training. To the extent that states supplement the ETV program, opportunities and choices are expanded to allow for public university education in addition to vocational education or community college classes. As noted, eligibility requirements within states may vary according to the length of time an adolescent was in care, the reason he or she came into care (maltreatment versus delinquency) and age at entry into post-secondary education. This, too, raises potential equity issues in the distribution of resources among this vulnerable group.

Although not a limitation of the ETV program itself, a further fundamental issue is that finances are not the only barrier to higher education for foster youth. Potentially more serious

barriers are the educational deficits accumulated in primary and secondary education that make entry into many types of post-secondary education virtually impossible. Research has shown that foster youth are more likely to need special education services than non-foster youth (Seyfried, Pecora, Downs, Levine, & Emerson, 2000) and many youth exit foster care without a high school diploma or a General Equivalency Diploma (Barth, 1990; Cook, 1994; Festinger, 1983). Research has not been clear as to the reasons for limited school success while in care but these reasons are likely to include: lack of placement stability leading to frequent change of schools, effects of emotional trauma of maltreatment and/or removal from family on ability to learn in school, and stigma of foster care that may preclude greater access to learning opportunities within schools or lowered expectations on the part of teachers. Shin (2003) found that youth placed in kinship foster care had higher reading levels as teens compared to those in non-relative care. Whether this finding is due to family influences on education, greater stability of kin foster home placements, or other factors, is unknown. Obviously, the ETV Program does not assist with these educational challenges and more attention to helping foster youth to attain educational competence while in primary and secondary school is needed.

3.5.2. Medicaid option

With limited work experience, and generally low educational levels and skills, young people having left care are unlikely to secure the type of employment that provides health benefits. Consequently, publicly funded health care is a needed option for this population. Although the age group 18–21 in the general population is quite healthy, those leaving foster care are likely to have greater health care needs than others in the age cohort. Research using Medicaid data found that children in foster care accounted for a disproportionate share of Medicaid expenditures relative to their share of Medicaid enrollment. Moreover, children in foster care were more likely than other groups of Medicaid children to have a mental health or substance abuse condition, either alone or in combinations with a physical condition (Rosenbach, Lewis, & Quinn, 2000).

According to the NFCAP (2000b), the Congressional Budget Office estimated costs of the Medicaid option prior to the passage of the FCIA. About 60% of former foster youth 18–21 were already eligible for Medicaid because of another type of eligibility (for example, income-eligible pregnant or parenting youth, youth with disabilities receiving SSI) and that half of this group was already enrolled in Medicaid.

A recent report (Redmond, 2003) identifies seven states that have acted to extend Medicaid to the foster care transition age population (specifically, Arizona, California, Mississippi, New Jersey, South Carolina, Texas and Wyoming). Additionally, Oklahoma had adopted, but not yet implemented legislation to extend coverage. All seven states providing extended Medicaid eligibility provided coverage to age 21 and only Texas implemented an income limit of 400% of the federal poverty line and an asset limit of US\$10,000. Enrollment procedures are described as simple and fairly automatic. Redmond also addresses the justification for states to provide this coverage despite budget challenges. In addition to describing both the need and importance of covering this population, the author argues that (1) the small numbers in need of coverage suggests the cost would be modest and (2) states that do not expand Medicaid coverage to foster

youth forgo federal matching funds. Failure to extend Medicaid coverage will result in states and localities fully covering medical costs when these uninsured young people need medical care.

3.5.3. *Housing*

Research studies have documented that young people leaving foster care are at increased risk of homelessness. For example, in a longitudinal study, Courtney et al. (2001) found 14% of males and 10% of females reported being homeless at least once since discharge from foster care. Additionally, research has shown that among homeless adults large percentages have a history of child welfare system involvement (Burt, Aron, & Lee, 2001). To address this need, the FCIA allows states to use up to 30% of funds to provide room and board to transition age youth. Use of federal funds for any type of housing had previously been prohibited. The Chafee funds, however, cannot be used for housing young people under the age of 18.

Housing may be the most difficult challenge to providing assistance to young people. It is an obvious and fundamental need, it is expensive, and the availability and cost of housing are subject to numerous factors over which programs have little control (e.g., the housing market). Jaklitsch (2003), too, argues that housing is the most challenging area for young people after leaving care. Although the FCIA begins to provide some support for housing, it does not describe what constitutes room and board, it does not deal with the larger societal needs for affordable housing, and it does not ensure that young people will be able to maintain stable housing over the long-term (Jaklitsch, 2003; NFCAP, 2000b).

The NFCAP (2000b) reports that states are grappling with the question of whether to provide some very limited housing assistance to a large number of young people or more complete assistance to a smaller number of youth. An additional issue is maintaining open cases for youth receiving housing and other assistance when they are otherwise closed at age 18. Recently enacted legislation enables youth aging out of foster care to receive time-limited housing vouchers (up to 18 months) under HUD's Family Unification Program (NFCAP, 2000b). There is no available information about the utilization of this program by former foster youth and the Section 8 program is not without its own limitations, especially the lack of available units accepting vouchers.

Housing assistance is a critical need for this population but the lack of specificity regarding the use of funding for room and board raises concern. In most communities, particularly in urban settings, any apartments in the private market that are affordable with independent living dollars are likely to be sub-standard and in less safe neighborhoods. Furthermore, programs may over-utilize certain buildings and neighborhoods resulting in large numbers of former foster care youth geographically concentrated. Although good programming might use this opportunity to develop support networks among youth, young people may be at risk of exploitation by others in these settings. Jaklitsch (2003) has noted that early attempts at providing supervised apartment programs were largely unsuccessful; they "...were viewed as dumping grounds for youth who were unmanageable in other settings. Poor assessment and screening, combined with a financial incentive to fill apartments, caused programs to put young people into supervised apartments who were clearly not ready for this level of freedom".

4. Conclusions and recommendations

The legislation does not provide a vast infusion of needed resources or a fundamental shift within the child welfare system. The needs of foster care adolescents leaving care exceed the resources provided through the FCIA. Far more extensive and sophisticated research is needed to examine the effectiveness of the legislation, and in particular, the interaction of program elements and clients, in order to understand the best use of these resources. Thorough evaluation is needed to examine the effectiveness of each of the components (and their combined effect) on helping young people establish themselves as competent, effective and healthy members of the community. Such research also must take account of the numerous challenges these youth bring with them into the child welfare system. This involves a sustained and rigorous research agenda over the long-term. While technical calculations to measure efficiency would be dependent on first measuring the effectiveness of the program, the incremental nature of the reforms embedded in the Chafee program and the relatively small numbers of eligible youths suggest that even minor improvements in youth well-being are likely to be worthy of the social investment. Thus, two obvious conclusions are the need for more resources and the need for more research to understand the best use of these resources.

The legislation does offer two important incremental shifts. The first is philosophical; it provides greater attention to the needs of adolescents and young adults (long neglected by the child welfare system) emphasizing a youth development model of practice rather than a traditional child welfare model of practice. There are elements within the policy that can be translated into program practice that emphasize normative development, supports and connection, and youth empowerment.

The second incremental shift is the beginning of the provision of concrete supports, and consequently a lesser reliance on independent living skills alone. Training in life skills, heretofore, has been the primary support provided to transition-age youth. While such training can be helpful, it is far more likely to be successful if provided in addition to concrete support. States need to make full use of the federally funded ETV and to use the Medicaid option to obtain some federal reimbursement for health coverage. Substantial creativity and use of financial resources are needed to deal with the challenges of providing safe housing for this population.

Analysis of the implementation of the policy thus far suggests that equity considerations are paramount. As a whole, the FCIA, the Chafee Program and the ETV program are all designed to provide increased resources to the needs of a population whose vulnerability is sufficiently demonstrated. In this sense, the legislation promotes more equitable distribution of societal resources (e.g., housing, education, health care). Moreover, the extension of services to those ages 18–21 (even if the youth had left care) suggests an effort to reach those that left abruptly but may realize the need for additional support. This is consistent with a normative approach to youth services and mirrors a normal transition experience; youth and young adults who grew up with their family of origin frequently return home after initially moving out (Goldscheider & Goldscheider, 1999).

On the other hand, highly variable state implementation, supplementation of services with state resources, varying eligibility criteria for state services and lack of attention to

understanding the characteristics of those served (versus all those eligible), suggests that distribution of the resources within states may be inequitable. There is a potential danger that those receiving supports through these funds are among the best functioning of this vulnerable group. Research needs to provide data to address this issue.

These improvements in supports for youths leaving care should be considered in the context of more extensive youth policy in the United States. Increasing supports and transitional services for the wide variety of youth in the country, not just those in care, would help all youth, but perhaps disproportionately benefit youth with extensive child welfare system involvement. Describing successful anti-poverty policy strategies, Skocpol (1991) has argued for targeting supports to those with most need through more universalistic approaches. This decreases the stigma associated with supports and increases the political sustainability of programs. This concept is equally appropriate to policy-making for youth. Although the policy and research reviewed here has focused on youth leaving foster care, the issues of import related to preparing youth for adulthood are not limited to young people involved in the child welfare system or even with vulnerable youth more generally. More universalistic approaches to funding higher education, providing job training and employment opportunities, and health insurance, with specific or enhanced services for particularly vulnerable populations such as foster care youth, would provide the most successful strategy in the long-term.

In the more immediate future, there are several other categorical and targeted policies, from which some transitioning youth can receive services, supports, or other benefits. These include transition services available to youths receiving special education services. The Individuals with Disabilities Education Act (IDEA, P.L. 101–476) mandated transition services for students in special education who were 16 years of age or older. Transitional Living Programs, part of the DHHS Family and Youth Service Bureau's (FYSB) Runaway and Homeless Youth Program can provide longer term residential services to homeless youth ages 16–21 for up to 18 months. Other federal policies with potential assistance to foster care youth include the Workforce Investment Act, additional financial aid programs within the Higher Education Act, and services and cash assistance provided under the Temporary Assistance for Need Families (TANF) block grant (Levin-Epstein & Greenberg, 2003).

Improvements in supports for youth leaving care must also be considered in the context of overall improvements in the child welfare system. More stable foster care homes, greater connections to family and culturally competent service delivery are all fundamental improvements in the child welfare system that would aid the success of youth aging out of care as well as other clients of the child welfare system. This is particularly visible in discussion of enhancing youth education and employability. The foundations for later success in these domains are laid in early stages of life. Insuring that the education needs of all foster care youth are met in primary and secondary schools would result in improved self-sufficiency outcomes for youth aging out of care.

Finally, although policy attention to the normative developmental needs of foster care youth is an important shift, this should not happen to the detriment of the most highly vulnerable youths within the child welfare system. Some young people may never be fully self-sufficient. Assurance that youths with specific vulnerabilities have access to supports as adults is needed and is not addressed by the FCIA. These supports might

include access to adult mental health systems for those with psychiatric disorders, supportive housing for those needing supervision and income support through TANF or SSI for those unable to work.

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