

Shaping Tomorrow with Today's Minds

Applying Updated Solutions
to an Outdated System



Congressional Coalition on Adoption Institute

2014 Foster Youth Internship Report

History

The Congressional Coalition on Adoption Institute (CCAI) is a non-profit organization that works to raise awareness about the needs of children without families and to remove policy barriers that hinder them from knowing the love and support a family provides. CCAI is unique in that each of our programs brings together policymakers and individuals with direct foster care or adoption experience. We have found that when policymakers hear direct experiences of those affected by orphan and child welfare policy, they become engaged in this issue and work to bring about legislative improvements in an effort to ensure each child has their right to a family realized.

CCAI was founded in 2001 by advocates of the world's orphaned and foster youth. In founding CCAI, these advocates sought to match the commitment of members of Congress' Adoption Caucus, the Congressional Coalition on Adoption, with the information and resources needed to make the dream of a family a reality for every child.

Mission Statement

The Congressional Coalition on Adoption Institute is a non-profit, non-partisan organization dedicated to raising awareness about the millions of children around the world in need of permanent, safe, and loving homes and to eliminating the barriers that hinder them children from realizing their basic right of a family.

Foster Youth Internship Program

CCAI's Foster Youth Internship (FYI) Program is a highly esteemed Congressional Internship for young adults who spent time in the United State's foster care system. The FYI program began in 2003 as an effort to raise awareness to federal policymakers about the needs and unique perspectives of those who spent time in foster care. As part of the program, CCAI organizes retreats, advocacy trainings and various networking opportunities with experts in the child welfare field. Throughout the summer, the interns spend time researching about policy issues affecting foster children across the country. These experiences allow them to create a policy report that is presented at a Congressional briefing and released to child welfare advocates across the country.

As a result of the program, federal policymakers are shown firsthand the experiences of youth in foster care, and use their new knowledge to inspire legislative change. Interns participating in this program benefit both personally and professionally, gaining experience and skills that will bolster their careers for years to come and developing the foundation to be lifelong advocates for improving the foster care system.

FOREWORD



You are greater than you know.

Mother Teresa

This quote along with a similar image of a crown hang in a frame on my wall. They capture the very essence of the Congressional Coalition on Adoption Institute's (CCAI) Foster Youth Internship program.

A core value of our work at CCAI is to bring those with experiential knowledge of child welfare policy and practice to Washington, D.C., to share their firsthand accounts with policymakers such as the 150 Members of Congress in the Congressional Coalition on Adoption. The Foster Youth Internship program is designed to do just that. Once again this summer, our interns have combined their individual life experiences in foster care across the nation with what they have learned about federal child welfare policy during their internships in the U.S. Congress. The result is this report filled with their innovative ideas to solve challenges they and other children in foster care face growing up in the system.

One of the things I love most about our work at CCAI is this opportunity we have to crown experts such as our Foster Youth Interns and give them a platform for their voices and experience to be heard.

To the Foster Youth Intern Class of 2014: Thank you for the time you invested this summer in diligent research for this report in addition to your already demanding work schedules on Capitol Hill. We are so proud of your efforts. Amnoni, Darrah, Dominique, Emily, Jane, Kaylia, Kellie, Sam, Tony, Ty and Wilo—you are extraordinary. Your voices are powerful. You are greater than you know.

And now, it is with great pleasure that I present CCAI's 2014 Foster Youth Internship Report, *Shaping Tomorrow with Today's Minds: Applying Updated Solutions to an Outdated System*.

Rebecca Weichhand

Rebecca Weichhand
Interim Executive Director
Congressional Coalition on Adoption Institute

TABLE OF CONTENTS

2 FOREWORD

4 INDIVIDUAL FOSTER YOUTH INTERN REPORTS

This section is a collection of individual policy papers written by the 2014 Class of Foster Youth Interns (FYIs) They have each chosen a topic relevant to foster care or child welfare about which they are passionate and provided research, unique insight and policy recommendations with respect to the topic.

- p. 4: Giving Youth a Voice: Contact after Involuntary Termination of Parental Rights
Jane Krienke
- p. 8: Increasing Stability and Permanency for Infants and Toddlers in Care
Robert Parsons
- p. 14: Essential Documentation for Youth in Care
Dominique Freeman
- p. 19: Addressing the Trauma: Treating Children’s Mental Health with Screening and Assessments
Emily Satifka
- p. 23: Creating Best Practice Standards for the Intersection of Immigration Enforcement and the Child Welfare System
Samuel Leiva
- p. 28: Renewing the System’s Commitment to Child Well Being: Fostering Resilience through Trauma Informed Training
Amnoni Myers
- p. 33: Providing Comfort and Information to Children Transitioning into the System
Kellie Henderson
- p. 38: Stolen Pasts, Corrupted Futures: Preventing Identity Theft for Youth in Foster Care
Kaylia Ervin
- p. 43: Empowering Foster Youth through Case Plan Trainings to Increase Youth’s Acceptance Rate of Extended Foster Care
Darrah Hall
- p. 47: Helping Foster Youth Overcome Barriers to Employment
Wilondja Muyoma
- p. 51: Improving Educational Outcomes for Foster Youth: Special Education and Mental Health
Ta’Kijah Randolph

55 ABOUT THE INTERNS

59 ACKNOWLEDGEMENTS

60 REFERENCES

Giving Youth a Voice: Contact after Involuntary Termination of Parental Rights

Jane Krienke



Savage, 2011

Executive Summary

Social media has opened doors for contact between foster and adopted youth and their biological parents. This unregulated contact can be stressful and traumatic for youth who have been abused or neglected (Loxterkamp, 2009). State laws do not adequately protect youth from the trauma and safety concerns that may stem from unwanted contact with biological parents whose parental rights have been involuntarily terminated. Without the opportunity for youth to document their preferences regarding future contact, their voices are left unheard.

A Personal Reflection

I was taken into protective custody when I was almost two years old due to abuse and neglect. My brother voiced his concerns about contact with our parents to a social worker. Fortunately, his wishes as an eight-year-old were respected, and visitation during our five years in foster care was suspended due to the trauma associated with the interaction. We were eventually adopted, and for 17 years our new last names and location were unknown to our biological family. We never contacted them, nor had any desire to do so.

I was 23 years old when my biological parents contacted me through Facebook. I did not know who they were. I had to ask my brother. He told me about the extent of the abuse and neglect our biological parents put us through, so I knew that I did not want to reestablish contact. Although I was a senior in college, I was not mentally or emotionally prepared for contact with my biological mother, even if it was only through Facebook. She had taken my public profile picture, printed it and then posted a photograph of herself posing with the picture. I couldn't sleep that night. The whole situation was shocking to me. Unfortunately, social media has made foster and adopted youth vulnerable to unwanted contact from people who abused or neglected them in the past.

Recommendations

To ensure that youth have a voice regarding contact with their biological families after the involuntary termination of parental rights (TPR), Congress should do the following:

- ***Amend Section 302 of the Adoption and Safe Families Act of 1997 to provide an opportunity, during the involuntary TPR hearing, for youth to document their wishes regarding future***



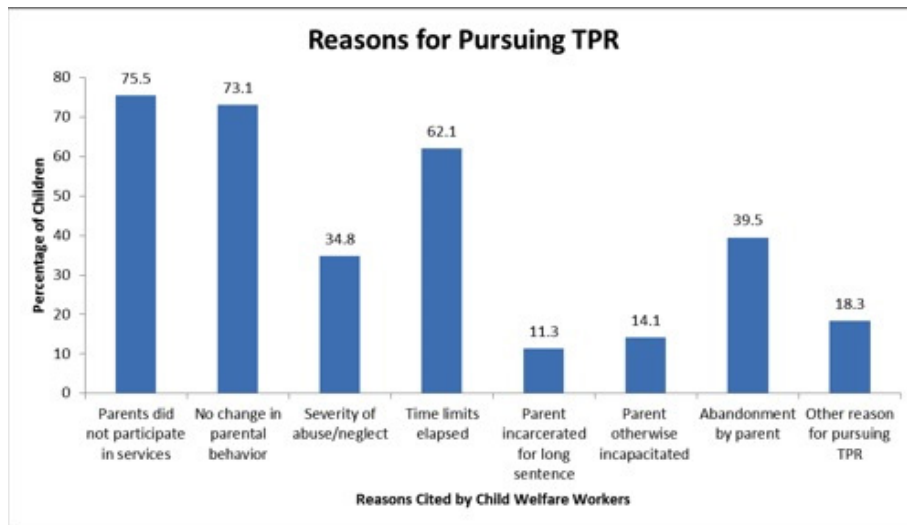
contact with their biological families and to have their wishes incorporated into their permanency plan. Youth should have the opportunity to reevaluate their decision at their last permanency hearing when they either emancipate or are adopted. The final court order should make clear that when contact is prohibited, this includes contact via social media, unless the court order specifically states otherwise.

Unsolicited Contact

Sharp increases in unsolicited contact from biological parents via Facebook have been reported in the United Kingdom (Hazell, 2012). Anecdotally we know such contact is occurring in the United States as well. For foster or adopted youth who have experienced severe abuse or neglect, contact with biological family members through social media can be harmful (Howard, 2012, p. 39). However, websites like Facebook have also opened doors for adult adoptees looking to reconnect with biological family members.

Depending on the reason for removal from the home, future contact with biological parents may be detrimental to youths' emotional well-being and safety. While 39% of youth adopted into non-relative homes from foster care in 2007 maintained contact with their biological families (Malm, Vandivere, & McKlindon, 2011, p. 8), youth who have suffered severe abuse or neglect may wish never to see their biological parents again. The reappearance of former abusers can have devastating effects for youth. For example, a Donaldson Adoption Institute report, *Untangling the Web*, shares the story of an 11-year-old girl who returned to intensive therapy sessions after her biological father contacted her through a social media site (Howard, 2012, p. 7).

The Nevada Supreme Court has described involuntary TPR as being equivalent to a death penalty sentence in how it severs the legal relationship between parents and children (*Tammila v. Dep't of Human Res.*, 2006). One third of TPR cases result from the severity of abuse or neglect (Gibbs et al., 2004, p. 5-4). In "Social Media and the Post-Adoption Experience," Deborah Siegel notes the difference in how social media contact with biological parents affects youth depending on whether parental rights were involuntarily or voluntarily terminated (2012). Parents whose rights have been involuntarily terminated may utilize social media to convince youth that they were "stolen" by child welfare services (Siegel, 2012). However, for youth who know very little about their past, social media could open up relationships that would be beneficial—one size does not fit every situation (Siegel, 2012).



This data is from a nationally representative study of 5,501 children whose families were investigated by Child Protective Services and is taken from Table 5-3 in Gibbs, D., Dalberth, B., Hawkins, S., Harris, S., Barth, R., Wildfire, J., & Mitchell, J. B. (2004). Termination of Parental Rights for Older Foster Children: Exploring Practice and Policy Issues. Washington, D.C.: The U.S. Department of Health and Human Services, Administration on Children Youth and Families, Children's Bureau.

No Voice, No Protection

Because of social media, physical distance no longer suffices to protect youth who want to avoid future contact with biological parents after involuntary TPR. Youth are negatively affected when they are unable to fully participate in their permanency plans because they lack an opportunity to voice their desires in court regarding future contact. They may be more vulnerable to unwanted contact from biological parents, including social media contact. Conversely, they may be unable to maintain valued relationships because they lack a voice.

When parental rights are voluntarily terminated, biological parents and adoptive parents can enter into post-adoption agreements regarding contact between the biological parents and adopted youth (Children's Bureau, 2011). In some states, adoptive parents can stop contact at any time if they deem the contact to be contrary to the youth's best interest (Children's Bureau, 2011). For youth age 12 or older, Arizona and Louisiana require youths' wishes regarding post-adoption contact agreements to be considered (Children's Bureau, 2011). In six states, youth who are at least 12 years old must give written consent for the agreement, and four states and the District of Columbia require the consent of youth age 14 or older (Children's Bureau, 2011).

In the case of involuntary TPR, there is a lack of state laws addressing contact with biological parents, and no federal law addresses the issue. Instead, determinations are likely made by judges on a case-by-case basis. Many states allow youth of a certain age, some as young as 10 years old, to voice their desires regarding termination and adoption (Children's Bureau, 2013). However, youth often lack an opportunity to voice preferences regarding future contact.



Sadly, because youth often lack a voice in court, some who want contact may be denied the opportunity to maintain relationships with their biological family members, and some who do not want contact are put at risk emotionally and physically by continued contact. This is especially a concern for the most vulnerable youth whose parents had their rights involuntarily terminated due to the severity of abuse or neglect.

A Voice in the Courtroom

To ensure that youth have a voice regarding contact with their biological families after an involuntary TPR, Congress should do the following:

- ***Amend Section 302 of the Adoption and Safe Families Act of 1997 to provide an opportunity, during the involuntary TPR hearing, for youth to document their wishes regarding future contact with their biological families and to have their wishes incorporated into their permanency plan. Youth should have the opportunity to reevaluate their decision at their last permanency hearing when they either emancipate or are adopted. The final court order should make clear that when contact is prohibited, this includes contact via social media, unless the court order specifically states otherwise.***

If youth do not want contact with their biological families, a court order prohibiting such contact would respect the youths' wishes. The court order would help protect youth from potential physical and emotional harm caused by contact with someone who formerly abused or neglected them. If the youth does want contact, then this desire should be taken into account and honored if the youth's safety would not be compromised by the contact. Facilitating desired contact can help youth maintain valued relationships for the rest of their lives.

Giving youth the opportunity to reevaluate their decision when they emancipate or are adopted would allow them to document their current feelings regarding contact with their biological family members. For some youth, their preference may have changed since the initial TPR hearing. Additionally, if the youth or a member of the youth's biological family encounters extenuating circumstances at any time prior to emancipation or adoption, such as a serious illness, the prohibition on contact should be revisited if the youth so desires.

The prevalence of social media enables an increasing number of biological parents to contact youth after their parental rights have been terminated (Hazell, 2012). Ensuring that the court order defines "contact" to include social media would better protect youth. The court order could also specifically only allow social media contact if the youth expresses a desire for social media contact but no other forms of contact.

Increasing Stability and Permanency for Infants and Toddlers in Care

Robert Parsons

Executive Summary

The multiple placements and lengthy permanency decisions many infants and toddlers ages zero to three experience in foster care have severe negative effects on their brain and emotional, mental and social well-being and can lead to the development of behavioral disorders and challenges later in life. These vulnerable young children account for 107,973, or 27%, of the total U.S. foster care population (U.S. Department of Health and Human Services, 2013). Brain science research suggests that increasing the permanency and stability of placements, recognizing the bond formed with caregivers early in life, and shortening timelines for permanency determinations could significantly improve the emotional and behavioral health of this voiceless third of foster children. Congress should invest in a plan that promotes these improvements.

A Personal Reflection

I have seen firsthand the harmful effects of the lack of congressional guidance to states on infant and toddler placements. Three years ago, my family fostered twins that came to us at 10 days old. After they were with us for two years, a woman claiming to be their aunt (who we ultimately found out was not a relative) came forward and adopted them. Their removal from our home and placement with her occurred very quickly, and since then, we have lost direct contact with them. This experience led me to research legal placement determinations and timelines, and I have since come to learn of much more dramatic stories, such as the story of one preemie who was born five weeks premature and then moved four times in four weeks. Imagine moving a child that many times when she should not even be out of the womb yet!

Unfortunately, these problems are not unique to the twins and my family or this little preemie. In 2012, 27% (107,973) of children in foster care were between the ages of zero and three (U.S. Department of Health and Human Services, 2013) and in what scientists call a critically sensitive period of brain development. Too many are experiencing the trauma of separation from caregivers they have attached to and multiple placements.

Recommendations

- *Require states to report through the federal Adoption and Foster Care Analysis and Reporting System how many times each child moves placements cumulatively while in care, as well as how many placements each child had within 365 days, both for the purposes of analysis of the average number of placements annually and their entire stay in care by child's age.*



Foster Youth Internship Report: *Shaping Tomorrow with Today's Minds*
Congressional Coalition on Adoption Institute

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- *Shorten the Adoption and Safe Families Act of 1997 timelines to reflect the critically sensitive brain development and attachment period for infants and toddlers between the ages of zero and three to nine months so that within their first year in foster care a permanency plan is established.*
 - *Amend Section 104 of the Adoption and Safe Families Act to allow foster parents who have been the primary caregiver of an infant or toddler to be a party to the child's court case consistent with the provisions of receiving notice and the opportunity to be heard by the court in that same section.*

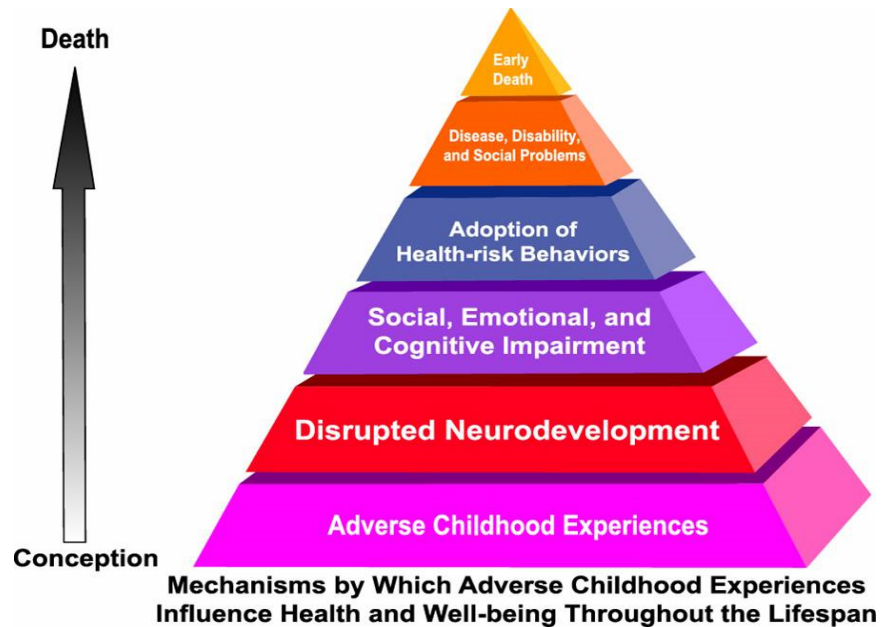
The Problem

The impact of multiple placements in foster care is monumental for these infants and toddlers, both physically and socially, as the consequences of their traumatic experiences manifest themselves as they grow and develop. According to the Harvard University Center on the Developing Child, the trauma that a child experiences from multiple placements physically impacts “the architecture of the brain,” because for a child’s brain to properly develop, the child requires stable responses from a caregiver (Harvard Center on the Developing Child, 2010). If a child is quickly or repeatedly moved from one family to the next, these stable, responsive interactions are interrupted, and this has a direct, devastating effect on the child’s brain.

This does not mean that children should only be exposed to one adult in order for their brains to develop successfully, but rather that the trauma of interaction with many strangers is difficult for these little ones and can lead to “toxic stress,” which occurs when a child is exposed to “long durations of adversity” (Harvard Center on the Developing Child, 2010). Multiple placements early in life can cut off a child’s ability to bond, and the stress of this causes long periods of adversity as the child must go through the bonding process over again. Ultimately, brain development can be slowed or harmed.

The Harvard Center on the Developing Child study explains that when children are deprived of the stability they need at the beginning of their lives—when they are exposed to toxic stress—there is a tangible negative effect on their ability to learn, how they behave and their physical health long-term (Harvard Center on the Developing Child, 2010). And a study entitled *The Lifelong Effects of Early Childhood Adversity and Toxic Stress* reveals children who experienced toxic stress are more likely to be obese, use drugs, and be promiscuous; furthermore, of the children who engage in these things, 40% of them will meet an early death (Shonkoff and Garner et al, 2011).

Consequences of Early Childhood Adversity Over Time



Source: Yukon Health and Social Services

Additionally, researchers have detailed how children being raised in foster care are considered at risk of developing Reactive Attachment Disorder (RAD) from an interrupted bond with a caregiver. RAD can manifest itself in severe social behavioral problems like depression, mood swings, and temper issues, which researchers note can cause continued difficulty for the child to bond (Barfield, David, and Steinhart, 2012). The American Psychological Association estimates that 47.9% of children in the foster care system have an emotional or behavioral problem (American Psychological Association, 2012).

This data is alarming. If we do not intervene to provide stable placements and relationships that enable healthy brain development for these infants and toddlers in foster care, many of these children will end up on the wrong path, and some will even pass away before their time. Current federal law does not reflect the existing brain science as it relates to the too common multiple placements of and need for timeliness of permanency placements for infants and toddlers in foster care. It also does not properly acknowledge the role of foster parents in the attachment and development of these little ones.

Current Law

In 1997, the Adoption and Safe Families Act (ASFA) established timelines for courts to terminate parental rights and establish permanency for foster children: within 15 of 22 months (PL 105-89).



At the time, this law was revolutionary to courts that allowed many children to languish in foster care in hopes that their biological parents might someday be safely able to reunify them. But this law was arguably intended to help older children in foster care, and in light of the attachment and brain development of infants and toddlers, this timeline should be reassessed. Fifteen to 22 months in the brain development of a young infant or toddler is actually an extensive amount of time, and in such a young life can be detrimental. It does not take into account that there is a scientific timeline established for infant attachment to a caregiver. Within the first two months, the infant looks for faces to see if someone is there. Then, between two and seven months of age babies begin to notice and look for specific faces, and the foundations of those crucial bonds have formed. By seven months, babies have preferences for a caregiver, and seek certain contact with certain people (Marvin and Britner, 1999). If we know attachment forms this early and is necessary for healthy brain development, why is it once this has happened, state agencies and courts allow the infant or toddler to be removed quickly and often repeatedly from the home they are in, only for them to have to start the process of attachment over again?

Federal law does not address the multiple placements infants and toddlers experience in foster care. As mentioned, ASFA attempts to address the importance of early permanency for children but does not take into account the critical attachment and brain development timelines in the life of a very young child. Yet Section 101 of ASFA specifically states: “...in making such reasonable efforts, the child’s health and safety shall be the paramount concern...” (PL 105-89). Brain science tells us that moving a young child and severing the bond between him and a caregiver is detrimental to his health. ASFA’s provisions do little to stabilize these young children in foster care and keep their placements to a minimum. Fifteen months is a very long time in the life of a child age zero to three, and since this time is so crucial to physical, emotional and mental development, Congress needs to address this.

Also critical to the needs of this young population in care is the voice of their caregivers. Section 104 of ASFA states:

the foster parents (if any) of a child and any preadoptive parent or relative providing care for the child are provided with notice of and an opportunity to be heard in, any review or hearing to be held with respect to the child, *except that this subparagraph shall not be construed to require that any foster parent, preadoptive parent, or relative providing care for the child be made a party to such a review or hearing solely on the basis of such notice and opportunity to be heard.* (Emphasis added) (PL 105-89)

Upon review, this provision for caregivers such as foster and preadoptive parents seems to be contradictory and does not give adequate voice to the people the child has attached to and who provide the child with the routine and stability we know these young children need to develop and be healthy. It gives the caregiver of a child notice and the “opportunity to be heard” in the legal matters of the child, but it clearly follows that by saying this does not make the caregiver a party in

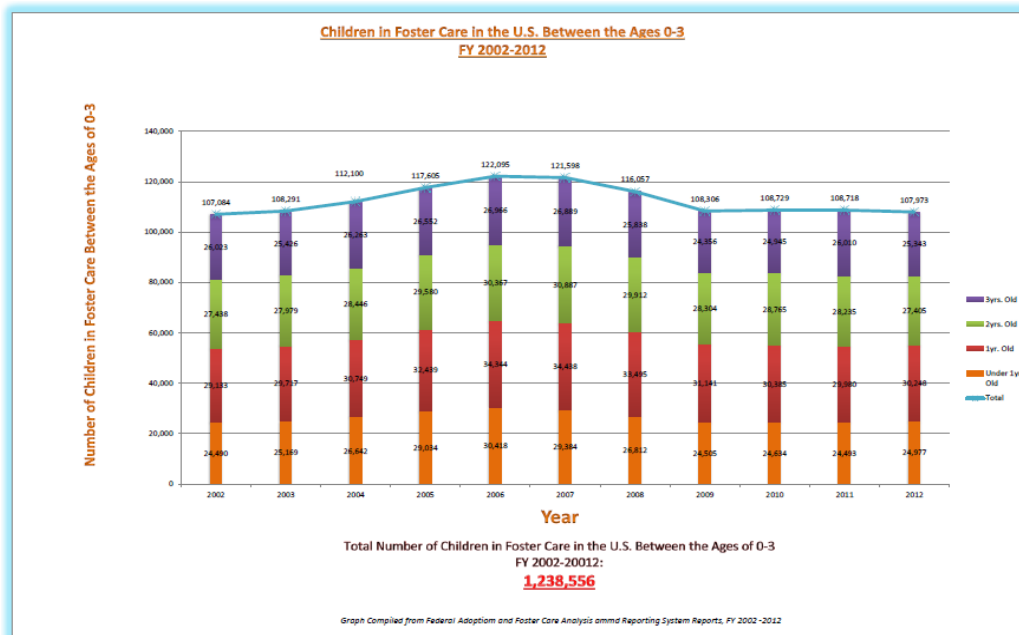
the case. This seems like a strong disincentive for families to step forward into the role of primary caregivers for foster children, when their voice is cut off in court.

California courts have developed a helpful approach to allow these caregivers to give voice to their opinions on the needs of the children they are caring for in court proceedings. It is called “de facto parent status” and is defined as “a person who has been found by the court to have assumed, on a day-to-day basis, the role of parent, fulfilling both the child’s physical and psychological needs for care and affection, and who has assumed that role for a substantial period” (California Rules of Court 5.502(10), 2014). If courts grant a caregiver de facto parent status, the caregiver is then a party to the child’s court proceedings. This approach makes good sense in light of the attachment and brain science we know about infants and toddlers, particularly those in foster care. Without the granting of de facto parent status, foster parents are often not given a voice as an infant’s or toddler’s primary caregiver.

Analysis

The government’s approach to the permanency of infants and toddlers has not kept pace with the scientific research available to us today and does not fully address the issue of instability and timeliness of placements for infants and toddlers in foster care or their attachment bond and sensitive development with primary caregivers like foster parents.

To gain a sense of the population focused on, the Adoption and Foster Care Analysis and Reporting System (AFCARS) FY2002-2012 data shows that the number of children ages zero to three in foster care are consistently above 100,000.



Source: Department of Health and Human Services, 2003-2013.



However, AFCARS data does not reveal the number of placements or length of time children spend in each placement, which is critical information for this vulnerable population and would help Congress best respond to their needs through policy.

The California Child Welfare Indicators Project is an amazing foster care data system that does track the number of placements children in foster care experience by age at the University of California, Berkeley, in collaboration with the California Department of Social Services. Accessing the database revealed that in California, 20.6% of infants and toddlers ages zero to three were moved between three and five times or more before there was some semblance of stability in their lives (University of California, Berkeley, 2014). National data such as this would be incredibly insightful.

Recommendations

The time has come for Congress to carefully review and amend child welfare law as to its impact on infants and toddlers. My recommendations are simple. Congress can make strong strides towards the stability, permanency and emotional, social and mental well-being of infants and toddlers in foster care by incorporating into law what we know from brain science of the impact of trauma, toxic stress and attachment and doing the following:

- *Requiring states to report through the federal Adoption and Foster Care Analysis and Reporting System how many times each child moves placements cumulatively while in care, as well as how many placements each child had within 365 days, both for the purposes of analysis of the average number of placements annually and their entire stay in care by child's age.*
- *Shortening the Adoption and Safe Families Act of 1997 timelines to reflect the critically sensitive brain development and attachment period for infants and toddlers between the ages of zero and three to nine months so that within their first year in foster care a permanency plan is established.*
- *Amending Section 104 of the Adoption and Safe Families Act to allow foster parents who have been the primary caregiver of an infant or toddler to be a party to the child's court case consistent with the provisions of receiving notice and the opportunity to be heard by the court in that same section.*

Essential Documentation for Youth in Care

Dominique Freeman

Executive Summary

Although Congress has recently begun to address the issue of foster children emancipating without proper documentation, current proposed legislation does not go far enough. States should be required to ensure that all children in foster care have access to necessary and important documents, including birth certificates, social security cards, health insurance information, medical and educational records and driver's licenses. States should house these records in a centralized database. These documents are essential for the successful transition from foster care into adulthood, and no child should be without them for any period of time.

Personal Reflection

I was born to drug-addicted parents in a Los Angeles crack house. Abandoned at the hospital, I was known as "Baby Girl," and my actual date of birth was unknown. Despite this rough beginning and a tumultuous time in the foster care system, I excelled in school and had dreams of attending college. However, it wasn't until I had emancipated from the foster care system and was in the process of completing the Free Application for Federal Student Aid (FAFSA) form that I realized that not only did I not have access to my birth certificate, I was actually never issued one. Additionally, I could not register for the SAT college admission exam because I did not have a social security number or an official government-issued identification card. The bureaucracy that ensued lasted over a year and included reopening my case as a foster youth to confirm my existence. All the while, I was a homeless teenager living in a shelter.

Those were some of the scariest years of my life. It was not until a judge took pity on me and decided to issue a Delayed Registration of Birth Certificate that my life took a positive turn. At times I wanted to give up, but I knew that securing housing and employment, obtaining a higher education and healthcare coverage, opening a bank account and receiving a government-issued identification card was the only way to escape what otherwise would have been a life of poverty and crime. It was only because I received these necessary documents that I am now a proud senior at Howard University.

To address the problem of foster children and youth living without necessary documents, Congress should do the following:

- *Congress should amend the Preventing Sex Trafficking and Strengthening Families Act (H.R. 4980) to allow foster children of all ages, as well as foster children placed in guardianship and kinship care, access to their birth certificate, social security card, health*



insurance information, medical records and a driver's license or an equivalent state-issued identification card.

- *Require states to create an electronic database system to store information about foster children and necessary documents.*

The Problem

In 2012, over 23,000 children emancipated from the U.S. foster care system (U.S. Department of Health and Human Services, 2013). The statistics are bleak for this underserved population: poor educational performance, poverty, homelessness, substance abuse and criminal activity are all too common occurrences upon emancipation. Children who emancipate from foster care often experience considerable family instability and educational disruption and suffer mental health problems at a much higher rate than children in the general population (Allen, 2005). These negative outcomes are only exacerbated for foster children without necessary documents.

Congress should be alarmed at the many ways the lack of these documents can negatively impact children in foster care. The lack of necessary medical documents for children in the foster care system can lead to “over-immunization, over-prescription of medication and misdiagnosis” (O'Brien, 2014). According to Children's Action Network, “Doctors often have no reliable birth or immunization records, don't know who has previously treated the child, and have no facts about current and past diagnoses, treatments, or prescriptions” (Child Health and Education, 2005, p. 5).

Missing documents also makes normalcy for foster children nearly impossible.

In our post 9/11 society, someone without necessary documents or with documents in the incorrect name simply cannot function. They cannot be legally hired for a job because an employer must complete an I-9 form before they start work, which requires several pieces of identification. They cannot rent an apartment, take a GED exam, replace their Medicaid card, fly on an airplane or even take a bus. And by the very fact that they were in foster care, they won't have the necessary family support available to assist them in obtaining missing documents. (Reed, 2013, p. 1)

Furthermore, children in the child welfare system are especially vulnerable to sex trafficking if they enter and exit the foster care system without proper documentation. In 2013, 60% of child sex-trafficking victims rescued in the FBI Innocence Lost Operation had previously been in foster care (2013). Possessing essential documents provides a degree of permanency and security to these children who often lack a sense of permanency in their lives.

Lastly, if foster children do not have documents prior to emancipation, former foster children will be unable to reapply for Medicaid, abruptly leaving them uninsured when they age out (Kruszka, 2012). This is especially problematic considering that foster children use mental health services at a rate 15-20 times higher than non-foster children (Macbeth, 2010) and that children in foster care are more likely to have health problems, even compared to other disadvantaged children, such as those receiving Medicaid (Vandivere, Chalk, & Moore, 2003).

Despite the many negative outcomes from not having these vital documents, a two-year national evaluation by Casey Family Programs found that as many as 50% of foster youth did not have access to their birth certificate, social security card and driver's license upon emancipation (Ellis & O'Brien, 2011). The evaluation also found that having more essential documents upon emancipation "was predictive of positive educational outcomes" for foster children (Ellis & O'Brien, 2011, p. 28).

Congress has both the responsibility and the capability to ensure that foster children are not without documentation and do not slip through the cracks of society. If Congress fails to implement creative solutions to addressing this issue earlier on for foster children, all of the great work accomplished by the federal government to support and serve them will be undermined simply because foster children lack the proper and necessary identifying documents.

Foster children have complex needs and receive services from a fragmented system of numerous providers (foster parents, social workers, judges, attorneys, etc.) and generally experience numerous placements during their time in foster care (Cluckman & Phelps, 2010). Often, the reason children emancipate without necessary documents is the constant transition, such as moving to a different foster home, having relationships with birth parents severed or being assigned a new social worker. In other instances it is simply due to the apathy of the child's caretakers and service providers. Precious Sims, a foster child who encountered difficulties obtaining important documents, explains, "Social workers don't prepare foster kids to be an adult. I asked my social worker to get my social security card and birth certificate. I wanted to get a California ID and you need an original birth certificate for that and I wanted to open a bank account and look for a job. She would say she had to get it from my file but she never brought it" (Sims, 2013).

Current Law and Programs

Until recently, Congress did not hold states accountable to provide essential documents to foster children prior to emancipation. However, Congress has taken positive steps to address this issue by drafting the Preventing Sex Trafficking and Strengthening Families Act (H.R. 4980). Section 114 of the Act ensures that youth ages 18 or older who have spent at least six months in care are provided with a birth certificate, social security card, health insurance information, medical records and a driver's license upon emancipation (Preventing Sex Trafficking and Strengthening Families Act). The Act shows that Congress recognizes the value of providing these documents to older youth as they turn 18. Congress needs to expand this proposed legislation to ensure that states provide documents



to all foster children. The current version of this bill does not address the situation of children like me who were placed into kinship care as infants and who lacked basic documentation.

Additionally, several states have recently developed databases to store these basic documents, which provides transparency and accountability in ensuring records are actually being collected. In 2007, the federal government funded an electronic database in Texas called Health Passport. Health Passport includes information about children in foster care, such as name, birth date, address, medical ID number, name and address of each of the child's physicians and record of doctor visits, and information on all prescriptions (Alejandro, 2013).

In California, there are various database programs, such as HealthShack and Foster Youth Student Information System, where medical files, education records, job histories, financial information and other identity-based documents are uploaded. This kind of database can easily show what documents are missing. It also addresses another challenge once records are obtained: safeguarding them. In a series of interviews with nurses, "[a]dolescents using the [HealthShack] service report feeling more empowered and knowledgeable about their health, whereas program staff report multiple cases in which the service has enhanced access to and improved the quality of medical care" (Miller, 2014).

Congress's current effort to address the lack of necessary documents among foster children must be broadened to include younger children and those in legal guardianship and kinship care, as well as to incorporate creative technological solutions, such as an online database.

Recommendations

- ***Congress should amend the Preventing Sex Trafficking and Strengthening Families Act (H.R. 4980) to allow foster children of all ages, as well as foster children placed in guardianship and kinship care, access to their birth certificate, social security card, health insurance information, medical records and a driver's license or an equivalent state-issued identification card.***

Ensuring that foster children have access to this documentation at all ages will aid in their success while in foster care and early in life, as well as in their transition to adulthood. Having these documents will also help children's self-esteem, because, just like their peers, they will have a birth certificate and state-issued identification card. Foster youth should not miss critical opportunities, such as enrolling in higher education or obtaining school loans, because of a lack of documentation. These documents are essential for a successful transition into adulthood and ensure that children are not hindered in their transition from foster care to higher education, employment and independent living.

- ***Congress should require states to create an electronic database system to store information about foster children and necessary documents.***

Databases will allow states to upload basic documents as children of all ages enter the foster care system. To promote privacy and security, access to the database should be limited to child welfare professionals directly involved in a particular foster child's case. Additionally, children who are age 14 and older should be allowed access to their own information in this database; this access would provide another level of transparency and a sense of empowerment, especially since some children emancipate from foster care at the age of 16. An electronic system where children in care can easily store, organize, share and access vital information about their personal identity, education, health care, and home placement can diminish errors and increase life outcomes as foster children transition into adulthood.

The image displays four screenshots of the Foster Youth Student Information System (FY-SIS) interface:

- FY-SIS Home Page:** Shows a login form with fields for Username and Password, and a "Welcome to FY-SIS User" message.
- FY-SIS User Agreement Page:** Displays a legal disclaimer regarding the use of the system and the user's responsibility for the accuracy of the data.
- FY-SIS Education & Grades Screen:** Shows a student profile for "Rosarita Beach" with fields for School Name, Address, Phone Number, ID Number, and CSES Number.
- Transcript Page:** Displays a table of academic records for the student.

Period	Date of Grade	Course Title	Grade Mark	Citizenship Mark
	02-03-2005	PE	B	A
	02-04-2004	ART	A	B
	02-04-2004	ENG 9	C	C
	02-04-2004	GEOM 1	F	F
	02-04-2004	PE	A-	B
	02-04-2004	PHYSICAL SCI	D	B
	02-04-2004	WORLD HIST	B	B
	02-08-2006	ALGEBRA 2A	B	B
	02-08-2006	ART	B	B
	02-08-2006	ENGLISH 11A	D	A
	02-08-2006	PE	A	A

Source: San Diego County Office of Education, Foster Youth and Homeless Education Services



Addressing the Trauma: Treating Children’s Mental Health with Screening and Assessments

Emily Satifka

Executive Summary

Foster children are especially at risk for post-traumatic stress disorder and other mental illnesses due to trauma from abuse and neglect they experience prior to entering care. This trauma, coupled with the trauma of being separated from their childhood homes, sets foster children up to face significant disadvantages as they grow up with hopes to be happy and contributing members of society. Although mental health services are generally available to youth in care through Medicaid, youth are not being screened and assessed in a timely manner for their mental health needs and are then not accessing appropriate evidence-based therapeutic services. In fact, foster children are commonly treated with psychotropic medications to sedate disruptive behavior without addressing the underlying reason for the behavior. Additionally, I believe regardless of how well adjusted foster children appear to be, they should still receive mental health support for the constant stress the foster care system puts on them.

A Personal Reflection

Too often, a lack of obvious mental health issues in foster children means they do not receive therapy to process the trauma and significant life changes they are facing. This was my experience as a child in state custody. I entered the foster care system emotionally unstable due to physical and sexual abuse. Up until the night I was removed from my home, I had been told I was mentally disturbed and was fabricating the abuse I experienced. Though in reality I felt overwhelmingly confused, depressed and disgusting, my caseworker assumed that because I was a cheerleader and had high grades, I did not need to see a therapist. I do not recall receiving a formal mental health screening or assessment from a health care professional, and although I did not ask to see a therapist, I wish an adult had helped me access professional support so I could heal from the trauma I had experienced.

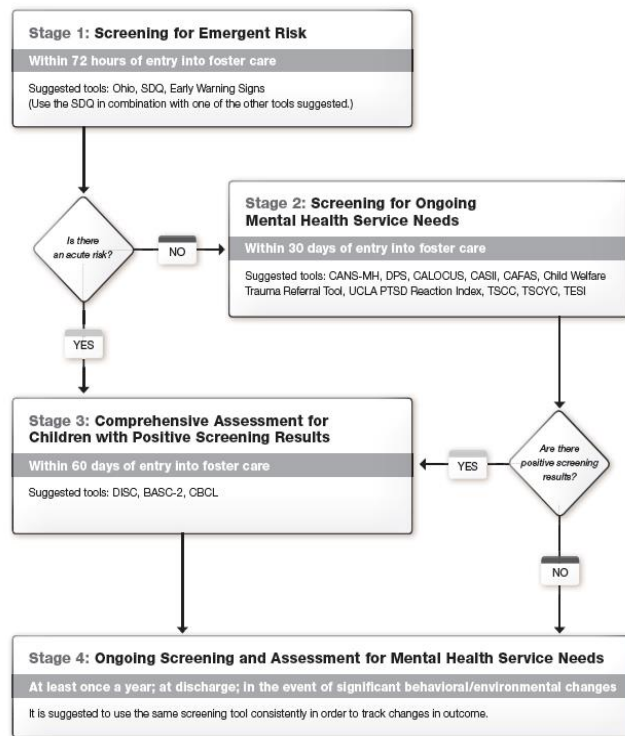
The Problem

The Center for Mental Health Services and Center for Substance Abuse Treatment determined that 49.4% of children in foster care are diagnosed with mental disorders compared to 10.9% of children outside of foster care (Center for Mental Health Services and Center for Substance Abuse Treatment, 2013). In fact, these already staggering rates of mental health issues among foster youth are probably higher than recorded due to a documented lack of regimented and effective mental health screening and assessment for youth in care.

Of foster youth alumni who have been properly screened and assessed, approximately 25% are diagnosed with post-traumatic stress disorder (PTSD), a rate approximately twice that of U.S. combat veterans (Foster Care Alumni Studies, 2005). With such appalling outcomes for foster youth alumni regarding low academic achievement, lack of job attainment and retention, and frequent incarceration (Courtney, 2011), it is not difficult to see how former foster youth grow up to perpetuate a cycle of generational foster care by being unable to appropriately care for their own children. The human capital lost when these children fail to grow into educated and mentally stable adults is incalculable.

There is no regimented protocol established for mental health screening and assessments for foster youth. However, the Reach Institute, Casey Family Programs, Annie E. Casey Foundation and other foster youth advocates consulted mental health professionals to create the following chart detailing best practices in mental health evaluation:

Mental Health Screening and Assessment Flowchart



(Casey Family Programs, 2009)

The Center for Health Care Strategies, Inc., defines a screening as an “initial, comprehensive examination to determine the need for further diagnosis or treatment” and an assessment as an “in-depth, diagnostic examination—often, but not necessarily, in response to a positive screen—to establish the extent of need or presence of a condition that may require treatment and follow-up” (Allen, 2010). Sadly, many foster youth are not able to access either of these mental health evaluations.

Even when mental health needs are determined during the screening and assessment process, a foster child is not always referred to the appropriate therapy treatment, because the most appropriate



service may not be covered by Medicaid. The Center for Health Care Strategies reports, “Targeted case management, some evidence-based treatments (must be delivered by qualified Medicaid providers), and substance abuse treatment services for youth are reimbursable under Medicaid. However, not all services needed by children and youth in foster care are covered by Medicaid” (Allen, 2013).

Accessing appropriate mental health services, specifically appropriate therapy, is of the utmost importance for youth in care in order to contextualize traumatic experiences. A stable mental health regime for traumatized children is a necessary safety net to help protect children from future abuse. Although mental health services are obviously necessary to the foster youth population, sadly, findings from the National Study of Child and Adolescent Well-Being indicated that three of four children involved in the child welfare system with clear clinical impairments had not received any mental health care within 12 months following a child abuse investigation (Pecora, 2009).

Foster youth are frequently prescribed psychotropic medications to subdue disruptive behavior instead of research-supported, trauma-informed methods of therapy. Nationally, youth in the foster care system are prescribed medication at higher rates than the general youth population, with some states reporting prescription rates of more than 300% the national average (Citizens Commission on Human Rights). These rates led to the Government Accountability Office (GAO) recently publishing a report on the necessity for federal oversight in the prescription of psychotropic drugs (Government Accountability Office, 2014). In addition to determining that multiple states had minimal practices in place to monitor the overmedication of psychotropic drugs, GAO noted that only three of 15 children who may benefit from evidence-based therapies are receiving such services.

Effective Therapy Models for Foster Children

An example of the type of evidence-based therapy children in foster care could benefit from is Trauma-Focused Cognitive Behavioral Therapy (TF-CBT). This treatment specifically focuses therapy sessions on the knowledge that all interactions are governed by previous traumatic experiences; it therefore allows patients to create successful coping mechanisms for the rest of their lives. TF-CBT was given the highest level of empirical support from the U.S. Department of Justice. “Over 80 percent of traumatized children who receive TF-CBT experience significant improvement after 12 to 16 weeks of treatment” (Project Best).

The lack of therapeutic services for foster youth is addressed by the work of A Home Within, an organization in 22 states that brings together volunteer mental health professionals with foster youth who are not otherwise accessing therapeutic mental health services. Of the foster children served by the organization, 79% demonstrate significant reductions in stress, anxiety and associative disorders, showing how helpful having a consistent and caring supportive relationship is for youth in the child welfare system (A Home Within). This organization begins to address the gap in therapeutic mental health services being offered to foster youth, but it does not exist in all states.

Current Law

The majority of foster youth are enrolled in Medicaid to provide for their healthcare needs. Through Medicaid, all foster youth should receive Early and Periodic Screening, Diagnostic, and Treatment (EPSDT), which includes mental health services. Section 205 of the Fostering Connections and Increasing Adoptions Act of 2008 amended the Social Security Act to establish the necessity for

a plan for the ongoing oversight and coordination of health care services for any child in a foster care placement, which shall ensure coordinated strategy to identify and respond to the health care needs of children in foster care placements, including mental health and dental health needs, and shall include an outline of—(i) a schedule for initial and follow-up care health care screenings that meet reasonable standards of medical practice; (ii) how health needs identified through screenings will be monitored and treated.

While this law establishes the requirement for health screenings, it does not specify timeframes for when these screenings should occur for foster youth or address the need for assessments, leading to drastic differentiations between states. For example, the Center for Health Care Strategies, Inc., reported in 2010 that Oklahoma required a behavioral health screening within 90 days of entry into foster care, Illinois required this screening to occur within one day, Pennsylvania did not require a formal behavioral health screening, and South Dakota reported not requiring a timeframe (Allen, 2010). Overall, only 27 states required a behavioral health assessment for children and youth removed from their homes. Additionally, 20 states documented expecting a behavioral health assessment to be conducted, but only when subjectively deemed necessary and without an explicit agency policy requiring it (Allen, 2010).

Children in the foster care system lack the oversight a parent often provides in regard to their healthcare, especially mental health. As such, additional federal guidelines should be put into place, as outlined in my recommendations below, to ensure their unique needs are addressed.

Recommendations

- *Amend Section 205 (15)(A) of the Fostering Connections to Success and Increasing Adoptions Act of 2008 to specify that screenings for physical, mental and oral health should occur within 30 days of entry into the foster care system for all foster youth.*
- *Amend Section 205 (15)(A) of the Fostering Connections to Success and Increasing Adoptions Act of 2008 to include comprehensive assessments for physical, mental, and oral health within 60 days of entry into the foster care system.*



Creating Best Practice Standards for the Intersection of Immigration Enforcement and the Child Welfare System

Samuel Leiva

Executive Summary

As of 2011, 5,100 children were in the U.S. foster care system due to immigration enforcement (Wessler, 2011). When these children enter care, there are no best practice guidelines to ensure procedural protections for parents who are faced with immigration detention or deportation, which leads to barriers in reunification and children's prolonged exposure to foster care.

A Personal Reflection

As a child of immigrants and a former foster youth, I understand the difficulties of being forced to leave one's biological parents and of transitioning into a new language and culture. Although I was not one of the 5,100 children who entered care due to U.S. immigration enforcement, I am a foster care alumni who entered foster care due to abuse and necessity, so I can understand the trauma children of detained or deported parents who enter care must face. Unlike me, these children are often separated from loving families with no history of abuse or neglect and are removed solely on the basis of their parents' immigration status.

Policy Recommendations

In order to address this crucial intersection between immigration enforcement and the child welfare system, Congress should do the following:

- *Create federal procedural protections that ensure detained or deported parents are able to satisfy all of the requirements of their case plans before being subject to the termination of parental rights.*
- *Mandate additional training for immigration enforcement and child welfare agencies in the best practice guidelines for families caught in the intersection of immigration enforcement and the child welfare system.*

Obstacles to Reunification and Children's Right to a Family

The current intersection between Immigration and Customs Enforcement (ICE) and state child welfare agencies is one that emphasizes removal over reunification (Wessler, 2011). Without uniform best practice standards to help parents, caseworkers and enforcement personnel navigate through

this perilous intersection and observe the legal rights of children and parents, these children will remain separated from their families. The two systems do not communicate well—their intersection is defined by a lack of coordination between all parties that ultimately fails to take a child’s best interests and right to a family into account.

From 1998 to 2007, the United States conducted a total of 2.2 million deportations, of which 8% were alien parents of U.S.-citizen children (U.S. Department of Homeland Security, 2009). As hundreds of thousands of noncitizen parents continue to be removed from the United States and no sufficient best practice guidelines exist to regulate the intersection of immigration enforcement and the child welfare system, thousands of children are left behind to linger in the foster care system when their parents are deported (Urban Institute, 2007).

In 2011, there were 5,100 children in foster care due to immigration enforcement, a number that is expected to increase by 15,000 children by 2016 (Wessler, 2011). Without enhanced federal oversight over both the parent detainment process and the child dependency process, the number of children in care due to immigration enforcement will continue to escalate. A 2009 study estimated that there are currently 5.5 million children (4.5 million of whom are U.S. citizens) in the United States with unauthorized parents; this is approximately 7% of children in the United States (Passel & Cohn, 2009). Entering the foster care system not only creates significant trauma for these children but also impacts taxpayers, as the average total maintenance and administrative cost per child in foster care per year is \$25,782 (Zill, 2011).

Among the obstacles to reunification faced by detained parents is that of physical distance. Before 2012, on average, detainees were moved to detention centers 370 miles away from their home jurisdictions; in 2012 an ICE directive was implemented to reduce such drastic transfers when possible (Human Rights Watch, 2011). The lack of communication systems between detention centers, juvenile courts and state child welfare agencies prevents parents from participating in the court process and often leaves them unaware of the progress of their children’s cases (Wessler, 2011). Even detainees in the same jurisdiction are regularly barred from appearing in court by ICE, and dependency court judges cannot require ICE agents to allow parents to participate in dependency hearings regarding their children while the parents are detained in ICE detention centers (Wessler, 2011).

Juvenile dependency courts typically allow parents who are unable to be physically present in court to participate by phone. Although parents in immigration detention are sometimes given phone access, ICE has no uniform practice guidelines to ensure that this happens. Parent input is essential to a decision of whether a child should be placed in temporary or long-term foster care, but detained or deported parents many times do not receive the opportunity to give such input in court (Wessler, 2011). As a result, the decision of whether to place a child in temporary or long-term foster care is left exclusively to the courts and individual child welfare workers. Furthermore, when both physical representation and participation by phone are denied, parents are effectively deprived of the right to advocate for themselves and their family’s reunification.



Because ICE or the counties and companies contracted to run detention centers do not provide detainees access to the necessary services to work toward family reunification or allow detainees to request transfers to centers where they would be able to fulfill the guidelines outlined by their child welfare case plans, parents in immigration detention are almost universally denied access to the services they need to comply with their reunification plans (University of Arizona, 2011). As a result, the termination of parental rights moves forward while detained parents are left powerless to complete their case plans. Although ICE must first conduct procedures such as determining whether a detainee is a primary caregiver, only four out of nearly 70 parents interviewed by the Applied Research Center replied that ICE personnel had even asked them during or after the time of apprehension whether they had children (Wessler, 2011). Most reunification plans require parent-child visitation, but since child welfare agencies and dependency courts often have little knowledge on how to locate detained parents, this visitation is often impossible for detained parents to accomplish (Wessler, 2011).

Federal Law

The Adoption and Safe Families Act of 1997 is a federal law intended to make it easier for children in the child welfare system to be adopted or placed in permanent homes by requiring the termination of parental rights when a child has spent significant time in foster care. If a child is out of parental custody for 15 of the last 22 months, state child welfare agencies must petition for the termination of parental rights (P.L. 105-89). The extended separation inherent to many cases of immigration detainment is thus a common reason why parental rights are terminated (Wessler, 2011). However, terminating parental rights in these cases does not necessarily lead to adoption. In fact, many children instead are severed from their biological parents only to remain in foster care indefinitely.

Detained or deported parents are often penalized for not participating in family or juvenile court hearings by being denied reunification with their children (Urban Institute, 2007). Parents who cannot speak English or do not understand legal procedure are greatly disadvantaged both within the United States and in legal court proceedings involving child custody, leaving them unable to navigate the child welfare system and unaware that they can make arrangements, such as requesting that their children be placed with relatives or returned to them in their home country. Because detained or deported parents are unable to protect their children, the children consequently enter the foster system for indefinite periods of time.

Too often, the result of the intersection of immigration enforcement and the child welfare system is parent deportation, the termination of parental rights, and the subsequent placement of children into the foster system when parent and child would desire otherwise (Women's Refugee Commission, 2010). If we ensure that parents receive adequate due process before the termination of parental rights, the services necessary to comply with reunification plans, and the right to return to their country of origin together with their children, we can also stop these children from unnecessarily entering the foster care system for prolonged periods of time.

Legislative Action to Address this Intersection

In 2001, the U.S. Supreme Court held that all persons in the United States are entitled to due process regardless of their immigration status (University of Arizona (2011) citing *Zadvydas v. Davis*, 533 U.S. 678). The federal government should work to ensure that laws allow children and families to remain together by establishing federal guidelines to address the intersection of immigration enforcement and the child welfare system. These guidelines should include federally mandated procedural protections for detained or deported parents and training for those involved in the meeting of both systems.

Recommendations

The issues obstructing detained parents' due process rights and children's right to a family have been addressed through proposed legislation before, but the legislation has not been enacted. The Humane Enforcement and Legal Protections (HELP) for Separated Children Act includes many protections for children caught in the intersection of ICE and state child welfare agencies by addressing the inadequacies in protecting children found in the current immigration enforcement process. Congress should enact the following, which is critical to best enhance the intersection of immigration enforcement and the states' child welfare agencies:

- ***Create federal procedural protections that ensure detained or deported parents are able to satisfy all of the requirements of their case plans before being subject to the termination of parental rights.***
- ***Mandate additional training for immigration enforcement and child welfare agencies in the best practice guidelines for families caught in the intersection of immigration enforcement and the child welfare system.***

All too often, the uncoordinated workings of ICE and state child welfare agencies obstruct the reunification of families, resulting in a system where children remain in care indefinitely. By ensuring that parents receive necessary protections, such as reliable phone access, visitation rights and adequate time to make arrangements for their children after apprehension, Congress not only would encourage more informed and coordinated participation by the parties involved, repairing what is currently broken in the intersection of these systems, but would also prevent the unnecessary separation of families. These services would lift the imposing barriers to reunification and allow parents to complete case plans and work toward keeping their families together.

If child welfare caseworkers, ICE agents and detention center personnel are trained in best practice standards, these professionals will be better equipped to make sure that immigration enforcement does not infringe upon the rights of children and detained or deported parents. The above recommendations are necessary to create best practice standards for parents and children caught in this intersection and would return the focus of both systems to reunification rather than removal.



Addressing the inadequacies in the intersection between these two systems would not require major shifts in either current immigration enforcement or child welfare policy. However, if these key provisions are instituted and meaningfully enforced, their impact in protecting the nation's children would be immense.

Renewing the System's Commitment to Child Well Being: Fostering Resilience through Trauma Informed Training

Amnoni Myers

Executive Summary

While over 70% of foster youth experience at least two forms of complex trauma, foster, adoptive and kinship caregivers, unfortunately, often lack the necessary trauma training for these issues (National Child Traumatic Stress Network, 2011). If the caregivers of foster children continue to parent without trauma informed training, the rates of additional trauma, mental health medication prescriptions and government spending will inevitably continue to rise. Shockingly, a study by the Center for Disease Control and Prevention (CDC) on Adverse Childhood Experiences found that experiencing childhood trauma could decrease a person's life expectancy by as many as 20 years (Central Iowa ACEs Steering Committee, 2012). By merely requiring all caregivers to partake in on-going trauma training that follows a minimum federal standard of core trauma informed care elements, foster children will have a better chance of living the long and healthy lives they deserve.

A Personal Reflection

Even though I personally experienced serious emotional trauma from the time I was young, I refuse to be a former foster youth who is unrightfully robbed of 20 years of my life, as the above CDC study indicates can happen. Before I entered the foster system, I lived with a caregiver who neglected to feed and properly care for me. Sadly, when I entered foster care, my multiple foster mothers were uninformed about how to properly treat children with serious traumatic histories. When I was 12 years old, one foster mother chain-locked the fridge to prevent me from eating. This inhumane treatment was a psychological "trigger" from my past, so it naturally increased my anxiety and led me to feel afraid and worthless. As an adult, I am now independently finding the emotional strength to feel like a worthy human again. I know that if my foster parents had been required to participate in trauma informed care and had ongoing trauma training, some of my former and current personal battles would not exist.

Recommendations

- *Congress should require states that use Title IV-B and Title IV-E caretaker training funds and respective grants to follow a minimum federal standard of core trauma informed care elements, so states then have the autonomy to implement trauma informed training programs for caregivers that best serve their population.*

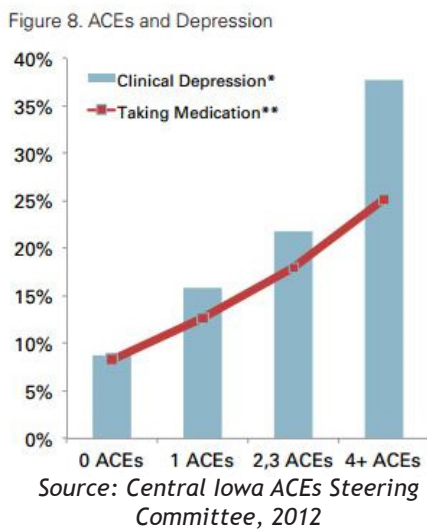


- *Congress should amend the Foster Care Independence Act of 1999, which requires that caretaker training resources and training preparation be “continued as necessary after the placement of the child,” to include a standardized ongoing trauma informed training for caregivers of foster children throughout care.*

The Problem

As foster children enter the foster care system, their past traumatic experiences commonly affect their mental and social health. According to the Northwest Foster Care Alumni Studies, former foster youth surprisingly experience post-traumatic stress disorder at a much higher rate than the normal population, which is also more than twice that of U.S. war veterans (Pecora et al., 2005). Also, a study by Central Iowa’s Adverse Childhood Experiences Steering Committee found that higher instances of adverse childhood experiences (ACE) greatly increased a person’s likelihood of developing both clinical depression and being prescribed mental health medications as an adult (Central Iowa ACEs Steering Committee, 2012). These statistics clearly show why foster children’s caregivers need to be trauma informed.

Figure 1. The following graph represents the likelihood of clinical depression, and the red line is the likelihood of taking mental health medication.



Caregivers provide a vital and supportive role for the 397,122 children in foster care (U.S. Department of Health and Human Services, 2013). How these caregivers raise their foster children actually affects government spending. One study by the CDC shows that the total lifetime estimated federal cost associated with child maltreatment is approximately \$124 billion per year (Prevent Child Abuse America, 2014). According to the report *Understanding Child Trauma*, untreated trauma presents problems that communities are left to face, problems such as poverty, crime, low academic achievement, addiction, mental health issues and overall poor health (Gerrity & Folcarelli, 2008, p. 5).

Because caregivers are not trained in trauma, they are often unintentionally re-traumatizing foster youth. Federal law currently requires that foster parents participate in parenting training before the foster child enters their home in order to become licensed (Foster Care Independence Act 1999, PL 106-169). States do not have to specifically require that caregivers participate in trauma informed training throughout foster care (Gerstenzang, 2009). Therefore, due to the lack of a trauma informed training standard, foster children’s prior traumatic effects are often silenced with medications, ignored or worsened. Congress cannot allow this toxic cycle to continue—caregivers deserve to be educated in trauma in order to best support their foster child.

Thankfully, studies show that if a foster child is emotionally supported by a positive and understanding family, the biological effects of trauma on the brain do not remain permanent (Central Iowa ACEs Steering Committee, 2012). Standardized core trauma training elements and allowing ongoing access to trauma training would ensure that caregivers better identify and provide emotional support for foster children who have been maltreated and traumatized, ultimately preventing long-term government spending.

Current Law

The federal government provides funding for training of foster and adoptive parents in three different programs. Under Title IV-B of the Social Security Act, states spend an average of 6% of their Child Welfare Services funding for foster and adoptive parent trainings and 11% for family support or prevention services (U.S. Department of Health and Human Services, 2013). And under Title IV-E, states allocate about three cents per dollar toward parent trainings to adequately prepare caregivers with “appropriate knowledge and skills” prior to a child being placed in their home (Stoltzfus, 2014). (See Figure 2) Lastly, the Chafee Foster Care Independence Program provides funds for training caregivers, group home workers and caseworkers who work with adolescents who are aging out (Stoltzfus, 2014). Unfortunately, trainings under these funds are not sufficiently reaching caregivers with trauma informed training. Additionally, Congress did not address the quality of the trauma training that caregivers receive from state programs, nor do they indicate when these trainings are required (Stoltzfus, 2014). A minimum federal standard of core trauma informed care elements and access to ongoing trauma training after parenting foster children begins would better serve caregivers and foster children.

Figure 2. What a FY 2012 Title IV-E Foster Care Dollar Buys* federal share (\$4.208 billion) and states share (\$3.848)



Several states have trauma informed care standards for caregiver training and licensing. For example, a current model in 150 centers across the U.S. is Caring for Children Who Have Experienced Trauma under the Children’s Health Act (The National Child Stress Network, 2010). This free curriculum bases its model on three foundational elements. First, caregivers must understand what childhood



trauma means. Second, they learn the biological and long-term impacts of childhood trauma. Third, they understand the particular behaviors of children who have experienced trauma (C. Foreman, personal communication, July 1, 2014). Specific training subjects within the model promote emotional security for children and provide supportive trauma-focused assessments and treatments for caregivers (The National Child Stress Network, 2010).

Many states currently do not require any ongoing training for caregivers after licensing. (Gerstenzang, 2009). Other states with ongoing training have different requirements. Iowa requires six hours of training “annually to renew their foster care license and at least three of those training hours must be done in a group setting,” and then caregivers are given the discretion to choose a three-hour trauma training to meet requirements (Iowa Foster and Adoptive Parent Association, 2013). Alternatively, Colorado mandates a minimum 20 hours of general ongoing training and education annually, which can include trauma informed care for caretakers if they choose that curriculum (Gerstenzang, 2009).

Due to the absence of a federal standard for trauma informed training, several states do not require any trauma informed training, and some existing trauma training programs are insufficient. According to the U.S. Administration on Children and Families, certain services that have a goal of improving caregiver parenting skills and interventions did not use strong evidence-based practices to create their programs (Administration for Children and Families, 2013, p. 6). Moreover, foster children often do not receive the proper services that will help them effectively overcome trauma (U.S. Department of Health and Human Services, 2012). Congress needs to address this issue by creating a minimum federal standard of core trauma informed care elements.

Recommendations

- ***Congress should require states that use Title IV-B and Title IV-E caretaker training funds and respective grants to follow a minimum federal standard of core trauma informed care elements, so states then have the autonomy to implement trauma informed training programs for caregivers that best serve their population.***

“There are no federal eligibility criteria for recipients of training funds. Instead, states may elect to fund services and activities to meet goals on behalf of any child or family that it determines to be in need of them” (Stolzfus, 2014). The federal government provides states with funds for caretaker training, so to best serve caretakers and foster youth, Congress should require standardized core trauma informed training elements to ensure effective programs. I believe the four necessary elements to include are (1) caregivers must understand and recognize the biological impact of trauma; (2) caregivers must be trained to support and manage their foster child’s overwhelming traumatic emotions; (3) foster children must be placed in safe and properly trained foster homes; and (4) foster children must be provided with therapeutic tools, as opposed to medications, to help cope with trauma and to understand their personal stories.

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- *Congress should amend the Foster Care Independence Act of 1999, which requires that caretaker training resources and training preparation be “continued as necessary after the placement of the child,” to include a standardized ongoing trauma informed training for caregivers of foster children throughout care.*

Ongoing trauma training for caregivers is crucial, because sources show that although some traumatic effects surface immediately, long-term outcomes can emerge months or years after the event (Substance Abuse and Mental Health Services Administration, 2013). Ongoing trauma training for caregivers of foster children, such as the Trauma Recovery and Empowerment Model, increased caregiver parenting skills, addressed foster children’s trauma symptoms as they arose and improved the outcomes for youth and foster families (U.S Department of Health and Human Services, 2012). As in Colorado, ongoing trauma informed training and education for caregivers of foster children should be standardized to require caretakers to participate in a minimum of 20 hours of in-person trauma informed trainings per year, in addition to current state training standards. This would ensure that all caregivers are prepared to identify their foster child’s mental conditions as they emerge.



Providing Comfort and Information to Children Transitioning into the System

Kellie Henderson

Executive Summary

The child welfare system is designed to be a safe place for abused and neglected children, but little, if anything at all, is done to prepare children to navigate life as a foster child upon entering the system. Children are rarely provided with necessary materials explaining the child welfare system and their rights as a foster child, leaving traumatized children vulnerable and unable to contribute to decisions being made on their behalf. Congress can play a strategic role to help foster children by ensuring that states provide them with this information.

A Personal Reflection

My childhood was filled with violence and sexual abuse. My older brother, one of my perpetrators, told me that the foster care system is filled with people who would abuse me in more horrific ways than what occurred on a daily basis within our home. However, after nine years of being victimized, I shared my dark secret with a neighbor who contacted the authorities. For the first time in my life, I was free. I hoped for a better life, but at the same time feared what might lie ahead. From when I was rescued to when I actually entered foster care, I felt lost and confused and concerned for my other siblings who were also removed from our home. Thankfully, I was saved from my abusive home, but the following hours and days were quite frightening. The night of my rescue, adults I had never met before asked me to explain in exhausting detail the abuse I had endured. After midnight, I was taken to a state-run children's home. Then one day, without any explanation, I was instructed to get into a vehicle with a single, older male who took me on a four-hour drive to a foster home. Coming from a history of sexual abuse by male family members, I was afraid and did not have a safe place to ask my many unanswered questions. Decisions were made on my behalf, and I was excluded from the decision-making process. I, like many foster youth alumni, believe that if I had had a caring child welfare professional to comfort me during this transition into care and take the time to explain the purpose of the foster care system and my rights as a foster child, I would have adapted to my new surroundings with less anxiety and fear.

Congress can ease the transition into care for foster children by doing the following:

- *Require each state to develop a Comfort and Inform Curriculum for children that explains the foster care system, the rights of foster children and the roles various professionals play. This curriculum must be trauma-informed, child-focused and age appropriate for children and youth transitioning into the foster care system.*

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- *Require each state to train individuals to explain the Comfort and Inform Curriculum to children and youth transitioning into the foster care system.*
 - *Ensure accountability by requiring states to explain the Comfort and Inform Curriculum to the child before the child's first court hearing.*

The Problem

It is common knowledge that foster children are removed from their homes due to abuse and neglect and are emotionally distressed as a result of the maltreatment they experienced. However, those abusive and neglectful homes, albeit dysfunctional, are the only family many of the children have ever known. “One of the cruel ironies for children placed in the foster care system is that being removed from one family and moved to another may often be traumatic, resulting in further losses and confusion in the child’s life” (Whiting & Lee, 2003, p. 288). The transition into foster care can be so abrupt that children have no time to process what is occurring and face pressures to quickly adjust to their new foster home.

A qualitative study on children entering the foster care system found that “nearly every child was confused about one or both of the following: the reasons for being in care and what would happen in the future” (Whiting & Lee, 2003, p. 292). In a separate study, “children . . . reported feelings of self-doubt, uncertainty about the purpose and duration of the foster care placement, varying expectations from within their new family environment, [and] difficulty adjusting to new relationships, roles, and life changes” (Mitchell & Kuczynski, 2010, p. 437). Because children are emotionally distressed when they enter foster care, it is not uncommon for them to develop behavioral issues. As a result of both, foster children are often labeled as “troubled” and struggle to stay in permanent and safe homes. Researchers have found that “after six placement changes, over 60% of any subsequent changes were behavior related” (Fisher, Stoolmiller, Mannering, Takahashi & Chamberlain, 2011).

In October 2013, U.S. Senator Orrin Hatch gave testimony before the House Ways and Means Subcommittee on Human Resources, stating, “Youth in foster care routinely report that they feel uninvolved, unaware, and disconnected to any planning around their care or future. They are not informed of their rights while in foster care. This can lead to a sense of disenfranchisement and a lack of connection to siblings, relatives or other caring adults” (Preventing and Addressing Sex Trafficking of Youth in Foster Care, 2013). Foster children are particularly likely to experience such a sense of disconnection and disenfranchisement at the time of entry into the foster care system, especially if no one explains what is happening and what will happen to them.

Research has found that “[foster c]hildren were able to cope better with the transition if someone explained, if necessary several times, where they had come to and why this had happened, and



provided an open ear for questions, anxieties and wishes” (Reimer, 2010). This finding reinforces the idea that investing in a curriculum that comforts and informs children upon entry into foster care would greatly benefit foster children. I believe considerable attention is given to foster youth as they transition out of care, but very little attention is given to the critical phase of transition into care. If Congress prioritizes comforting and informing children upon their entry into the foster care system, I believe the federal government can minimize unnecessary stressors throughout a child’s time in foster care.

The foster care entry process primarily focuses on the safety, removal and placement of a child, but rarely is there a child-focused approach to ensure the child is comforted and informed during the transition into the system. Although many members of Congress would agree that this should happen, there is no federal law that requires support and access to pertinent information for children as they enter foster care, nor is there one that ensures states are held accountable for providing this support and information.

Current Law

The Fostering Connection to Success and Increasing Adoption Act of 2008 requires states to implement a transition plan for youth exiting the foster care system. And hopefully Congress will pass the Preventing Trafficking and Strengthening Families Act (2014), which would ensure children receive a “List of Rights” while in the foster care system. Notably, Section 114 of the Act lists important documents that must be provided to children prior to emancipation. It is encouraging that Congress is addressing issues youth encounter as they transition out of the foster care system and is even taking steps to help them while in the system by providing them with information about their rights as foster children. However, Congress has generally neglected to legislate regarding a child-focused and trauma-informed transition into the foster care system.

What are the Private or Nonprofit Sectors Doing?

Even though federal law does not address this important subject, some child welfare organizations have taken notice of its importance. The American Bar Association teamed up with Florida’s Children First, Inc., to create The Empowerment Project. The project provides children with information about foster care that includes terminology, court information, answers to common questions, roles played by various professionals and advice (American Bar Association, 2014). This information has been proven to minimize anxiety and empower foster children as they begin the court process. Other states, such as Wyoming, California, Florida, Iowa, and Rhode Island, provide similar guides (K. Kelly, personal communication, July 7, 2014).

Another organization that provides specialized support for children when they are initially removed from their families is the South Florida nonprofit 4Kids. The 4Kids SafePlace model recognizes the needs and vulnerability of children faced with the trauma of entering into a system that is foreign

to them. After an interview with the Congressional Coalition on Adoption Institute, Marie LaBranche, 4Kids' SafePlace Director of Foster Care, provided a statement addressing the emotional outcomes that are often seen when a child enters the child welfare system:

What occurs in those initial few hours [after the trauma of entry into care] helps the child's brain to process the event. Was it my fault? Did I do something wrong? What is going to happen to me now? Where are my parents? These are all questions that children start to ask themselves immediately after removal. . . . It is very possible, that months and years later, that child will wrestle with the event, and conceptualize it using their own limited capacity, and internalize these events to mean that I am unlovable, I am unworthy, I am bad. No one wants me, no one loves me (M. LeBranche, personal communication, July 10, 2014).

While these are promising practices among nonprofit organizations, federal law remains silent on the issue of child-focused and trauma-informed transitions into the foster care system. To fill this need for training and education, Congress must begin to focus on the emotional vulnerabilities and needs of children entering the foster care system.

What Should Congress Do?

- ***Require each state to develop a Comfort and Inform Curriculum for children explaining the foster care system, the rights of foster children and the roles various professionals play. This curriculum must be trauma-informed, child-focused and age appropriate for children and youth transitioning into the foster care system.***

The federal government should pass legislation providing a list of items in the Comfort and Inform Curriculum that states will be required to explain. Upon passage of such legislation, states will have one year to develop, publish and distribute this curriculum. Funding for this project could be provided through Section 426 of the Social Security Act, which authorizes grants to be appropriated to public or other nonprofit institutions of higher learning and various state or local public agencies for child-welfare related research and special projects (Social Security Act, 1935).

- ***Require each state to train individuals who will explain the Comfort and Inform Curriculum to children and youth transitioning into foster care.***

Recognizing that children require more than printed materials to aid in the transition into foster care, states must train volunteers, called Comfort and Information Providers (CIPs), to accompany social workers as they remove a child from his or her home and to both comfort the child and give helpful information about the foster care system to the child using the curriculum. Similar to Court Appointed Special Advocates (CASAs), who volunteer to help foster children navigate the court process, CIPs would be assigned to specific children as they enter the foster care system,



providing in-person comfort and answers to many of the children’s questions (Court Appointed Special Advocates, 2014).

- ***Ensure accountability by requiring states to explain the Comfort and Inform Curriculum to the child before the child’s first court hearing.***

Often, federal mandates to state agencies and courts are not fully implemented. To ensure that children entering the foster care system benefit from the Comfort and Inform Curriculum and receive in-person assistance from Comfort and Inform Providers, a judge must ask the child, or the child’s caseworker if the child is not present, whether the curriculum and assistance was provided at the time of entry into the foster care system and note the response in the court record.

Comfort and Inform Curriculum Content

Reasons for Entering the Foster Care System

What the Foster Care System Entails

Roles of Child Welfare Professionals

List of Expectations While in Foster Care

Medical Services

List of the Child’s Rights

Terminology

Important Contact Information

Common Questions and Answers

List of Resources the Child can Utilize

Foster Care Outcomes

How to Navigate the Foster Care System

Stolen Pasts, Corrupted Futures: Preventing Identity Theft for Youth in Foster Care

Kaylia Ervin

Executive Summary

Foster youth are subjected to identity theft at a higher rate than the average American child, leading them to negative outcomes such as unemployment, homelessness and the inability to complete higher education (California Office of Privacy Protection, 2011). Although the Child and Family Services Improvement and Innovation Act of 2011 includes a provision to respond to identity theft in foster care, because the Act focuses on response instead of prevention, it still fails to adequately protect foster youth from identity theft.

A Personal Reflection

As a former foster youth who still experiences the crippling effects of identity theft, I believe Congress can and should do more than respond to existing credit fraud. In 2009, my birth mother used my social security number to apply for an energy utility account. I did not become aware of the account until after I had aged out of foster care, because the account did not show up on my credit report until it went into collections. I explained to the energy company's collections department that at the time my mother opened the account I was only 15 years old, but the representative simply advised me to fill out a fraud packet and return it. Upon receiving the packet two weeks later, I realized that the first step was to file a police report. My immediate thought was that I did not want to get my mother in trouble, but I knew that in about a year I would need student loans to fund law school. If I chose not to report the fraud, it could take more than seven years to reestablish my credit in order to be eligible for student loans.

Recommendations

Foster youth who face identity theft should not be forced to choose between having poor credit and filing a police report against their family members. Congress should instead employ measures to prevent identity theft for foster youth and protect them from making that impossible decision. In order to do this, Congress should do the following:

- *Amend the Child and Family Improvement and Innovation Act to require states to run credit reports for each youth upon entry to care, not just when a youth reaches the age of 16.*
- *If a report reveals credit inaccuracies, states must place a security freeze on the child's social security number in order to prevent further credit fraud.*



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- *If there is no evidence of credit fraud, states must notify the three credit bureaus (Equifax, Experian, and TransUnion) that the child has entered foster care and is a minor unable to request lines of credit.*

Stories of Other Foster Youth

Studies conducted by Richard Power, a distinguished fellow at Carnegie Mellon's CyLab, have confirmed that youth as young as five months old have been subjected to identity theft (Carnegie Mellon, 2011). Mercediz Hand, a former foster youth, was left homeless and sleeping in a 2002 Monte Carlo after her credit had been ravaged. After aging out of the system, Hand learned that her credit had been ruined when no one would rent her an apartment. When she received her credit report, she discovered that her social security number had been used for a mortgage and \$3,000 in unpaid cell phone bills. Another former foster youth, Helena Kelley, was placed in 14 different homes from the time she entered the foster care system at age ten until she aged out. After aging out, Kelley became aware of her credit report, which had evidence that her social security number had been used for student loans, an apartment lease and a car lease (Smith, 2014). Sixteen-year-old Jaleesa Suell experienced the most monumental record of fraud experienced by a foster youth: \$725,000 of debt possibly linked to eight different individuals (Horton Flaherty, 2011).

The Importance of Good Credit

"Credit Repaid Strategies Revealed" indicates that credit establishes the foundation for daily life in America and refers to it as "one of the most valuable assets you have" (Constantino, 2011). Youth in foster care are especially prone not only to become victims of identity theft but also to experience more severe consequences because of identity theft. When aging out of foster care, youth must find a job and a method of transportation and figure out how to fund a higher education. With poor credit, it is extremely difficult to obtain a cell phone, rent an apartment or obtain student loans. Poor credit as a result of child identity theft can cause adults to become stagnant and leave them without flexible solutions to obtain items crucial to their success (Schiferle & Monaco, 2014).

Clean Credit is Essential to the Success of Foster Youth

Aging out of the foster care system and transitioning into adulthood has its own unique challenges even when identity theft is not an issue. While most young adults are able to rely on parents and family members to co-sign for loans to develop their credit, foster youth rarely have that luxury. For former foster youth, it is tough to find an apartment, purchase a car and get student loans without a co-signer (Kieler, 2014). However, when this problem is compounded by poor credit due to identity theft, the transition becomes nearly impossible. Former foster youth who cannot go to school due to ineligibility for student loans will not be able to find decent jobs, likely causing them to become another statistic on the welfare chart.

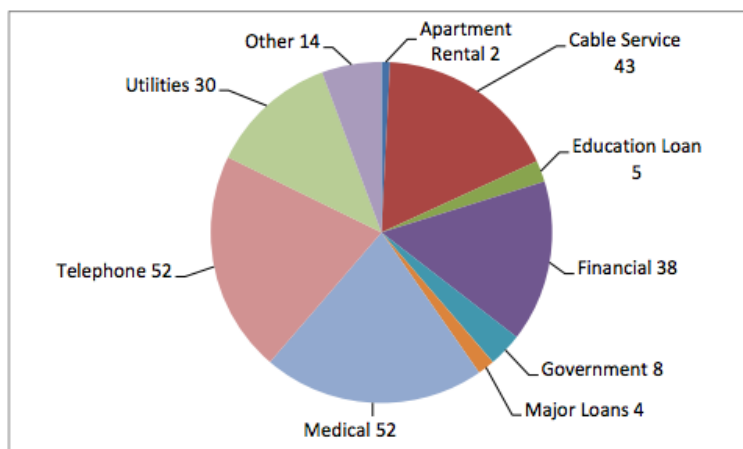
Former foster youth tend to find themselves living paycheck to paycheck with no way out, as

minimum-wage jobs often perpetuate poverty (Greenhouse, 2014). Sadly, once the youth begin to work low-wage jobs to pay for rent, health insurance, car payments and other financial obligations, it is nearly impossible to save money for college to better their circumstances. The odds of a foster youth with bad credit becoming successful after aging out of the foster care system are low.

By not addressing identity theft prevention for all foster children, Congress is actually allowing generational poverty to continue (Tanner, 2012). According to the Cato Institute, the government spends an average of \$20,610 per year on each person receiving welfare (Tanner, 2012). With an average American life expectancy of 78.7 years (Hoyert & Xu, 2012), one youth aging out of foster care at 18 and receiving welfare benefits for life would cost U.S. taxpayers \$1,251,027 in welfare benefits (OECD Health Data, 2013). Finding themselves crippled by credit fraud upon aging out of foster care is not an acceptable outcome for the already vulnerable youth in foster care.

California’s Office of Privacy Protection’s Pilot Study

Figure 4. Types of Accounts Found



274 accounts were found in foster children’s credit reports.

Figure 5. Amounts of Accounts Found

	Mean Amount	Median Amount
Apartment	\$2,076	\$2,076
Cable	\$371	\$306
Education	\$4,613	\$4,693
Financial	\$1,238	\$472
Government	\$243	\$188
Major Loans	\$79,550	\$14,558
Medical	\$1,034	\$347
Telephone	\$446	\$330
Utilities	\$228	\$173
Other	\$1,091	\$640

(California Office of Privacy Protection, 2011).

As part of a pilot project conducted to determine the percentage of currently-in-care foster youth subjected to identity theft, California’s Office of Privacy Protection extracted the credit reports of



2,110 foster youth in the state of California (California Office of Privacy Protection, 2011). Of the 2,110 credit reports, 104 of them (roughly 5%) showed signs of fraud. After working with the credit bureau to clear the negative credit history, it was found that 1% of the accounts were erroneous and the other 4% were fraud related. The above chart shows the average amount of money defrauded using a foster youth's identity, and the graph breaks down the specific accounts the funds were used for. Although 4% may seem minuscule, the reality is that the number can and should be zero with proper preventative measures.

Youth are already targets of identity theft due to their clean credit reports, as they have not yet established credit (Schiferle & Monaco, 2014). However, foster youth are even more exposed to identity theft than other youth because their private information is more readily available and easier to access than adults' would be via school records and doctors' offices. Some states even use the child's social security number as a case identification number (Schiferle & Monaco, 2014).

The Child and Family Services Improvement and Innovation Act

Although the Child and Family Services Improvement and Innovation Act of 2011 (Act) was enacted to address identity theft in the foster care population, holes in its response still remain. The Act requires state child welfare agencies to pull credit reports when a foster youth reaches 16 years of age. After the credit report has been pulled, the state has the responsibility to aid foster youth in resolving inaccuracies (P.L. 112-34). However, under this Act, fraud can go undetected and unresolved until the youth turns 16. Because this Act does not aid foster youth before the age of 16 and does not require states to actually resolve the fraud, it perpetuates the need for more credit recovery efforts and programs. If Congress were to utilize preventative measures such as requesting a credit report upon a child's entry into care rather than before a youth turns 16, the need for credit recovery efforts would decrease, and youth would be less susceptible to credit fraud.

Proving that fraud against a minor has taken place is a fairly simple process if one can prove that the individual was under the age of 18 at the time it occurred (Schiferle & Monaco 2014). Legally, minors are not allowed to sign contracts; any contract signed by a minor is voidable, including credit accounts. However, after a person reaches the age of majority, it is much more difficult to prove innocence in credit fraud and remove the inaccuracies from credit reports. This unfortunate circumstance can often be the case when youth do not receive their credit report or notice of fraud until age 16.

Prevention Identity Theft in Foster Care

In order to ensure that foster youth are not hindered by credit fraud and identity theft, Congress should be proactive in requiring states to take preventative measures—beginning with requesting credit reports for youth as they enter foster care, which could be accomplished by the following:

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- *Amending the Child and Family Improvement and Innovation Act to require states to run credit reports for each youth upon entry to care, not just when a youth reaches the age of 16.*
 - *If a report reveals credit inaccuracies, states must place a security freeze on the child's social security number in order to prevent further credit fraud.*
 - *If there is no evidence of credit fraud, states must notify the three credit bureaus (Equifax, Experian, and TransUnion) that the child has entered foster care and is a minor unable to request lines of credit.*

Placing a freeze on an account is important to prevent further debt from being incurred while also providing time for the state to aid the youth in clearing credit inaccuracies. Notifying the three credit bureaus that the social security number is associated with a minor who has recently entered care will put the credit bureaus on notice that the social security number belongs to a minor who is unable to form contractual agreements. Because it is impossible for credit bureaus to know the age of a person based solely on their social security number (Social Security Administration, 2014), these important steps will aid in the prevention of foster youth identity theft and lower the need for services to clear youths' credit reports. By taking these critical steps, Congress can significantly reduce or eliminate credit fraud for foster youth, leading to better outcomes in the youths' transition into adulthood.



Empowering Foster Youth through Case Plan Trainings to Increase Youth's Acceptance Rate of Extended Foster Care

Darrah Hall

Executive Summary

Sadly, while 19 states and Washington, D.C., provide extended foster care services, many youth aging out of foster care are declining the option to stay in extended foster care beyond age 18 and are missing out on important transitional living services during their critical young adult years due to their feelings of disempowerment and disengagement throughout their foster care process. By participating in specialized trainings at age 14 or upon entry into care after that age, youth will understand the system, their permanency options and the services and supports available to them as they approach their 18th birthdays. Youth trained in this way will experience increased empowerment and ultimately be more willing to accept beneficial transitional living services in states where they are available.

A Personal Reflection

It was not until years after I exited foster care and took on a role as a peer advocate for current foster youth in Tennessee, through the Federal Court Improvement Program, and was required to undergo training that taught me how to read and understand youth's permanency, treatment and transitional plans that it dawned on me how greatly I would have benefited from access to such trainings during my own foster care experience. For instance, until I entered this advocacy role, I did not understand the legal term "permanency," nor that I had options such as adoption, guardianship or kinship care for my own permanent placement while I was in care.

As a peer advocate, I counseled older youth about their upcoming transition out of care. As I listened to them, I noticed a recurring theme of confusion surrounding their permanency and treatment plans, and many expressed a complete disinterest in their transition plans. They believed their input did not matter to child welfare professionals. As a peer advocate, I was to encourage these youth to accept the extended foster care services, but my request was often met with refusal. The youth felt turning 18 meant "freedom" from the system that regulated every aspect of their lives, and they preferred that "freedom" even to their own detriment and future lack of support and services such as health care, housing and a monthly financial stipend if they extended their stay in care.

Recommendation

I believe the powerlessness these older foster youth often feel would be combatted if there were specialized trainings through the Court Improvement Program that teach youth how to comprehend

and develop their permanency, treatment and transition plans. If more youth were trained and engaged in these plans, youth would likely choose to stay in foster care beyond the age of 18. Congress should do the following:

- ***Amend the federal Court Improvement Program (CIP) to clearly specify that trainings funded for courts use for legal professionals and child welfare advocates include current foster youth age 14 and above.***

The Problem

By declining critical supports through not extending their stay in care after age 18 in states where they are eligible, aging-out foster youth are setting themselves up for an incredible uphill battle to be successful in life. Research consistently shows aged-out foster youth as the most statistically vulnerable youth in the U.S. today, facing higher chances of homelessness, incarceration, unemployment, academic failure and unplanned pregnancy (Youth Villages, 2012). To make matters worse, many of these already vulnerable aging-out youth are declining transitional living services and choosing not to extend their time in care beyond age 18. For example, in 2013 only 39% of the eligible aged-out population of foster youth accepted extended foster care services in Tennessee (O’Neal, 2013).

Without trainings early in the process that engage and empower youth to understand the system’s timelines, procedures and options for permanency, treatment and transitioning, many youth who ultimately age out will continue to decline access to extended foster care support in states where it is allowed. When youth lack support services during their transitions, they are ultimately vulnerable to the negative outcomes of returning to the care of the state as adults, either through the public welfare or criminal justice systems (Congressional Research Service, 2012).

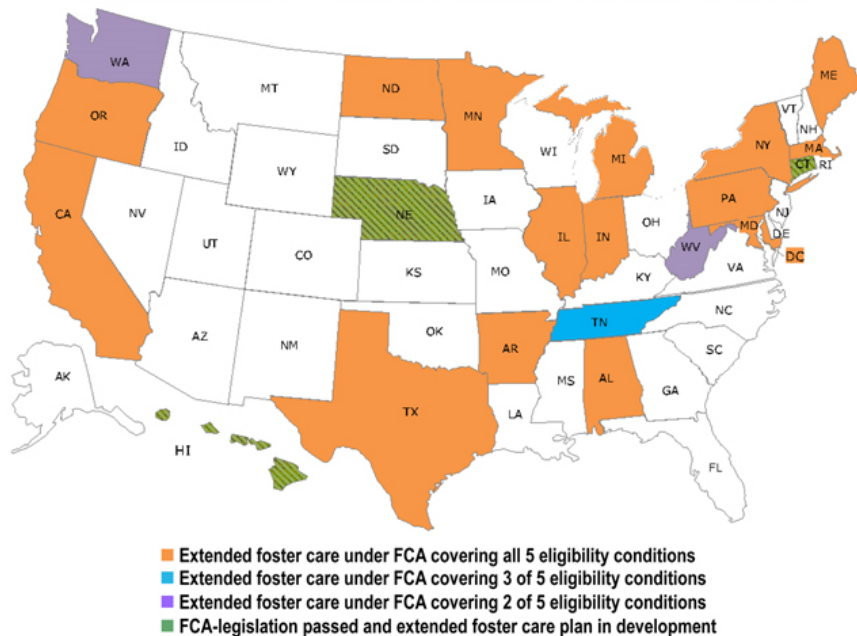
It seems to me that Congress can engage and empower youth quite easily by requiring states to engage foster youth—when they turn 14 in care or at any time they enter care after age 14—through specialized trainings that help them understand their permanency, treatment and transitional living plans and options.

Foster Youth Access to Extension of Foster Care Beyond Age 18

Since Congress passed the Fostering Connections to Success and Increasing Adoptions Act in 2008, 19 states and the District of Columbia have extended foster care services beyond age 18 (Jim Casey Youth Opportunities Initiative, 2014).



Extended Foster Care Under FCA



Source: jimcaseyyouth.org/success-beyond-18

According to the Government Accountability Office (GAO), 13 of the states that have extended foster care services reported using data to assess the impact of extending care. GAO reported the number of youth age 18 or older receiving Title IV-E payments in these states increased from 3,992 in 2008 to 4,997 in 2012 (GAO, 2014). GAO noted that, because states are still transitioning their systems to report this information to the Adoption and Foster Care Analysis and Reporting System, these numbers are lower than the true numbers (GAO, 2014). Once the transitions occurs, Congress will be able to assess the percentage of youth choosing to receive extended foster care services in these states.

Current Federal Law Related to Youth Transitioning Out of Care

Additionally, the Fostering Connections to Success Act amended Section 475(5)(H) of the Social Security Act to require states to ensure the creation of a transition plan no earlier than 90 days before the youth's 18th birthday (Congressional Research Service, 2008). But this three-month period is not an adequate timeframe for youth to plan for their future. Imagine only being enabled to provide input on issues that affect your life and future just 90 days before you reach adulthood. It is no surprise that youth are choosing not to extend foster care beyond age 18 or accept transitional living services when they are reached this late in the game and forced to make decisions so quickly. Section 113 of the Preventing Sex Trafficking and Strengthening Families Act of 2014, which was recently introduced by Congress, amends the age that youth are included in transition planning from age 16 to 14 (H.R.4980, 2014). Congress is headed in the right direction with all these efforts, but such requirements would be significantly enhanced if youth were trained to understand these plans by court and agency personnel. This demonstrates that Congress understands the need for youth

engagement; however, it does not specify a requirement that youth be trained in how to read and understand their transition plans.

There are presently no requirements in federal law that states train foster youth in knowledge of the development of a transition plan and child welfare court proceedings. This critical information gap needs to be bridged in order to encourage youth to engage in and to ultimately trust the foster care system. In my personal experience, learning how to comprehend these court and agency plans in my peer advocate training assured me that I was fully equipped to assess the needs of transitioning foster youth. Why not use similar trainings to place the power in the hands of the foster youth?

The Court Improvement Program: An Opportunity for Congress to Engage and Educate Foster Youth

Under the federal Court Improvement Program (CIP), the highest court in each state may receive funds to support a training grant in order to increase the knowledge of judges, attorneys, and other legal personnel related to child welfare court proceedings (Congressional Research Service, 2011). The Child and Family Services Improvement and Innovation Act of 2011 allowed funding from these CIP training-grants trainings to include improving the engagement of the entire family in child welfare proceedings (P.L. 112-34). However, the law does not yet clarify that states may specifically train the foster youth who are going through the foster care process.

Policy Recommendation

To best educate and empower foster youth in their case planning, which will ultimately lead to greater satisfaction in their foster care experience and higher rates of youth choosing to stay in foster care after turning 18 in states where these supports are available, Congress should:

- ***Amend the federal Court Improvement Program (CIP) to clearly specify that trainings funded for courts use for legal professionals and child welfare advocates include current foster youth age 14 and above.***

Like my peer advocacy training under CIP, this training for foster youth should be at a minimum three hours, with one hour devoted to explaining each of the following: permanency, treatment and transitional living plan comprehension and development trainings that help to increase youth's knowledge of child welfare court proceedings. These trainings should explain court and agency personnel, their roles, legal definitions, court processes and timelines.

Similar to how Section 113 of the Preventing Sex Trafficking and Strengthening Families Act establishes an earlier age of 14 for when states must engage youth in their transition living plans, I believe that foster youth who either turn 14 while in care or youth who enter care at age 14 or older need to participate in this new training. I believe implementation of these trainings will produce more empowered and engaged foster youth who will be more likely to choose the support of extended foster care services when it is offered.



Helping Foster Youth Overcome Barriers to Employment

Wilondja Muyoma

Executive Summary

The 23,396 youth who aged out of foster care in 2012 should be prepared to live independently and support themselves (Children's Bureau, 2013). However, a Midwest Study found that only 48% of foster youth were employed four years after aging out of care, compared to 72% of youth in the general population, and that most of those employed were not earning a living wage (Courtney, 2010). This employment gap for foster youth is a result of the disadvantages of growing up in the foster care system instead of in a nurturing, stable home in a family. Unfortunately, the existing federal Chafee program that provides independent living services has not helped close the employment gap, allowing foster care to continue producing thousands of young adults who are unable to become self-sufficient and who thus face the consequences of unemployment (Courtney, 2010).

A Personal Reflection

As a former foster youth, I am personally concerned about the disadvantages that foster youth face when seeking employment because I have known many youth who aged out of care and were unable to find employment. They could not compete for jobs because they lacked the skills that employers considered essential for entry-level jobs. I am concerned because, despite Congress's existing efforts to provide employment services to help foster youth transition to adulthood, there is still a great employment gap between foster youth and non-foster youth.

I was fortunate enough to overcome these disadvantages by, during my senior year of high school, participating in the Microsoft Apprentice Program (MAP). Through this experience, I learned valuable skills, developed a professional network, obtained letters of recommendation and gained access to available job openings. This experience greatly increased my employability. Unfortunately, most youth in foster care do not have similar opportunities.

Recommendations

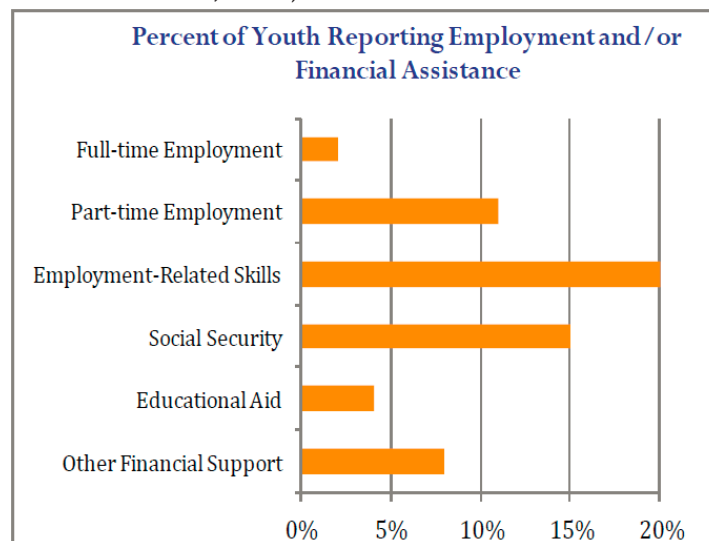
- *Congress should require states to use designated Chafee funds to develop partnerships with local businesses and create an internship program and set Chafee services age eligibility at 14 years old.*
- *Congress should reauthorize and amend the Work Opportunity Tax Credit to include foster youth as a new target group in order to incentivize businesses to hire foster youth.*

The Problem

Employment is crucial for independent living, especially for former foster youth who have nowhere to go and must find a way to provide for themselves when they age out. Unfortunately, foster care alumni suffer a great disadvantage in seeking employment opportunities, because they grow up in the foster care system where they tend to be moved around often, which often prevents them from gaining meaningful experience from holding down a single job (Pecora, 2007). This inability to gain work experience, marketable skills and a professional network places them in a particularly vulnerable and desperate position.

The employment gap between former foster youth and their peers is a major problem. If only 7% of foster care alumni go on to receive a postsecondary education and only 48% are employed, the question is where the rest end up (Fernandes-Alcantara, 2012). Sadly, foster youth who are unable to find jobs have an increased likelihood of becoming homeless and/or relying on public welfare as adults in order to survive (Courtney, 2010). Also, unemployed foster youth who age out of care are at a higher risk of turning to crime and ending up in prison, as demonstrated by the Midwest Study, which found that 81.8% of the males and 59.0% of the females have been arrested at some point in their lives (Fernandes-Alcantara, 2012). Such results ultimately cost taxpayers significantly more than investing in the futures of foster youth. Instead, Congress must invest in preparing foster youth for employment, creatively if necessary.

Studies show that everyone in their developing teen and young adulthood years needs opportunities to experience work and attain the skills needed for long-term success and that lacking such experience increases the likelihood of enduring later unemployment (Annie E. Casey Foundation, 2012). Foster youth alumni are greatly disadvantaged because they receive limited exposure to opportunities that would provide them with experience, valuable skills and a professional network. According to the National Youth in Transition Database, only 28% of the youth had employment experiences by age 17 (National Youth in Transition Database, 2012).



National Youth in Transition Database, 2012.



Current Law

Federal laws such as Public Law 106-169, which created the John H. Chafee Foster Care Independence Program (Chafee) in 1999, played an important role in improving employment outcomes. Congress established Chafee to provide States with funding to carry out programs and provide services that assist foster youth in making the transition from care to self-sufficiency as adults (National Youth in Transition Database, 2012). The goal of the program is to identify youth who are likely to remain in foster care until the legal age limit set by the state the youth resides in and provide them with support services such as employment, education, housing and other services necessary to transition to self-sufficiency. However, the program does not go far enough, as demonstrated by the employment gap.

Successful Private Programs

Year Up is a private program that combines hands-on skill development, college credits and corporate internships to prepare students for success in professional careers and higher education (Year Up, 2014). Year Up serves vulnerable urban youth and has a placement rate of 85% of either employment or college attendance four months after youth complete the program. Unfortunately, this program is only available to college students, and only 7% of foster care alumni attend college.

The Microsoft Apprentice Program provides high school students with the opportunity to develop the skills, experience, and a professional network through a year-long internship. Interns participate in business and marketing activities and have the opportunity to organize and execute a series of presentations about their experience to their high school peers. This program is open to all high school students, with preference given to youth who face the greatest barriers to college and career success (YouthForce, 2014).

The employment gap between foster youth and the general population supports the Midwest Study's conclusion that "more than a decade after the creation of Chafee, far too many foster youth are not acquiring the life skills or developing the interpersonal connections they will need if they are to become productive adults" (Courtney, 2010). Employment services provided by Chafee are inadequate for putting foster youth on a path to employment, because they emphasize training on résumé writing and interview skills but do not provide foster youth with hands-on experience. A recent ABC news report states that 80% of all entry-level jobs are gained through networking, which is another missing component in Chafee for foster youth (McIntosh, 2012).

A More Impactful Model

Businesses know best the types of skills that they look for in future employees; therefore, businesses should be a part of preparing their future employees with valuable work experience. Public Law 104-188 created the Work Opportunity Tax Credit (Tax Credit) in 1996 to target veterans and recipients of Temporary Assistance for Needy Families for work opportunities and incentivize businesses to

employ them (U.S Department of Labor, 2010). The credit expired in December 2013 but should be reauthorized and expanded to incentivize businesses in every state to provide internships specifically for foster youth before they age out of care. This incentive could lead businesses to offer permanent positions to those who excel in the program. The expansion should allow youth to apply during high school, which would give students the opportunity to network with other personnel within the company and expose them to possible career paths. The recommendations above were derived from the Inroad program, in which over the past two years, 92% of their interns accepted a job offer upon graduation (INROADS, 2011).

Recommendations

- ***Congress should require states to use designated Chafee funds to develop partnerships with local businesses and create an internship program and set Chafee services age eligibility at 14 years old.***

According to research by Success Beyond 18, career services that help youth transition from dependency to self-sufficiency should begin at age 14 (Jim Casey Youth Opportunities Initiative, 2013). Chafee requires states to provide employment services to youth without specifying an age. This resulted in many states only providing those services to youth ages 15 and older (Fernandes-Alcantara, 2012). Setting the age eligibility for receiving Chafee employment services at 14 would give youth the early start they need to prepare for employment. Additionally, a certain percentage of Chafee funds should be designated to create internship programs in partnership with businesses to help foster youth gain valuable work experience before aging out of care. States should model the expanded internship component under Chafee on successful existing programs such as Year Up and the Microsoft Apprentice Program.

- ***Congress should reauthorize and amend the Work Opportunity Tax Credit to include foster youth as a new target group in order to incentivize businesses to hire foster youth.***

Businesses should be incentivized to create internship opportunities for foster youth with the Tax Credit. Currently, the credit targets veterans and recipients of Temporary Assistance for Needy Families (U.S Department of Labor, 2010). Foster youth should be added as a target group under the Tax Credit to increase the likelihood that employers will hire people from this group. This will help foster youth obtain future employment and get connected to a community, which will help close the employment gap between former foster youth and the general population.



Improving Educational Outcomes for Foster Youth: Special Education and Mental Health

Ta'Kijah Randolph

Executive Summary

Studies show that significant educational gaps exist between youth in foster care and their non-foster care peers (Barrat & Berliner, 2013). Research also shows that “children in foster care experience rates of emotional and behavioral problems impacting their education that are higher than their peers who have not been involved in the child welfare system” (National Working Group on Foster Care and Education, 2014, p. 5). School professionals are uniquely positioned to improve education outcomes and mental health for children in foster care.

A Personal Reflection

I know firsthand how devastating it is to be uprooted from life as you know it and placed into a home with complete strangers in an alien world. It is traumatic for children to adapt to a new life in new surroundings. Compounding this, children with serious emotional disturbances have the highest rates of school failure. Fifty percent drop out of high school, compared to 30% of all students with disabilities (National Alliance on Mental Illness, 2014). Developing a mental or behavioral disorder most certainly affects one’s academic success.

My sister is 16 years old and has been in special education classes since she entered foster care at age six. Like most foster youth, she endured great emotional trauma, which led to problematic behavioral patterns. For example, she was not able to manage her bipolar disorder, was often involved in fights and violence in school and suffered badly from depression. She will be a high school senior next month, and she has been taught exclusively in special education classroom settings, despite her 3.2 GPA. I will never forget when she said, “I don’t know why I am still in special-ed. I just want to be normal; I am smart too.” I asked, “What are they doing to help you with your PTSD and bipolar disorder?” and she simply said, “Nothing.” I think an advocate could help my sister receive the mental health services she needs, which would ultimately help her academic performance. If her behavioral issues were addressed, she may not need special education.

Recommendations

To help foster youth like my sister, who may have unmet mental health needs and resulting behavioral problems and who may never know what a regular classroom setting is like before leaving high school, Congress should:

-
- *Require that advocates for foster children be trained to help screen and refer foster children for mental health and behavioral needs.*
 - *Amend individualized education programs (IEPs) to include ways to address and help with the mental health, emotional and behavioral needs of foster children.*
 - *Mandate biannual assessments of IEPs to prevent foster youth from ending up in long-term special education due to emotional disturbances and/or behavioral issues.*

Behavior, Emotions, and Special Education

It is worrisome that foster youth are entering special education classes at high rates. In fact, foster youth are 2.5 to 3.5 times more likely than their peers to enter special education (National Working Group on Foster Care and Education, 2011, p. 4). There is no doubt that special education is effective for some students; in fact, it is recommended that youth in out-of-home care have access to special education (Legal Center for Foster Care & Education, n.d., p. 4). However, foster youth—who are already vulnerable—should participate in special education only as needed. I am concerned that (1) foster youth across the country are overrepresented in special education; (2) foster youth are often in special education for too long; and (3) even if special education is meeting their educational needs, foster youth often have unmet mental health and behavioral needs. Given the right educational and mental health support, I believe America’s foster youth can succeed.

My concern is that many foster youth are placed in special education due to their behavioral and mental health needs and not based on their educational abilities.

How Long Are Foster Youth in Special Education?

There is currently no federal data on the duration of the special education that foster youth receive. We know that the average cost for a child receiving special education services is \$9,369 to \$16,921, compared to \$7,552 for a general education student (National Education Association, n.d.). If students are in special education because their behavioral or mental health needs wrongly placed them there, this places unnecessary expense on the federal government and does not resolve the challenges the students need addressed. As long as foster children continue to be improperly labeled as special education without proper screening, taxpayers will continue to pay more for them to attend special education classes. The foster children should instead be screened and diverted to necessary mental and behavioral health services rather than special education.

Special Education Does Not Address Mental Health Needs

We know that foster youth are already at risk educationally: They frequently experience school changes (Courtney, Terao, & Bost, 2004, p. 41). They have higher school absence rates than their



non-foster care peers (Lips, 2007). Their average reading level is seventh grade (Courtney et al., 2004, p. 45). They are significantly less likely than non-foster youth peers to complete high school (Wolanin, 2005). Foster youth who do not earn a high school diploma earn an average of \$8,500 less per year than a high school graduate (National Working Group on Foster Care and Education, 2014, p. 5). Only 2-9% of former foster youth attain a bachelor's degree (National Working Group on Foster Care and Education, 2014, p. 1). Given the outcomes discussed above, it is clear that we are failing to address the mental health and behavioral needs of foster youth students.

Another key concern is that special educators are not trained to screen for or address the behavioral issues and mental health needs of foster youth that undoubtedly affect their academic performance. Foster children are “more likely to receive mental health care services than similarly situated children who are not placed in out-of-home care” (Baumrucker, Fernandes-Alcantara, Stoltzfus, & Fernandez, 2012, p. 40), and among foster youth entering care, “[a]s many as one-half to three-fourths show behavioral or social competency problems that may warrant mental health services” (Baumrucker et al., 2012, p. 2). Even if special education is meeting their educational needs, foster youth often have unmet mental health needs and behavioral issues (National Center for Mental Health Promotion and Youth Violence Prevention, 2010, p. 9). Special educators need to be trained to understand the unique needs foster youth have and better screen them for needs and refer them to services related to their behavioral and mental health.

Current Law

Special education is primarily governed by the Individuals with Disabilities Act (IDEA), which guarantees that every child with a disability has the right to a free and appropriate education that “emphasizes special education and related services designed to meet their unique needs and prepare them for further education, employment, and independent living” (Individuals with Disabilities Education Act). IDEA requires that students with disabilities are taught the individualized skills and goals outlined by their individualized education plans (IEPs). The goals may be academic or address social, behavioral, physical or educational needs (Skinner & Dragoo, 2014, p. 6). Once it is determined that a student is eligible for special education, IEP goals are set for the child. IDEA specifies what an IEP must include. IDEA does not specifically mention any IEP goals relating to children's mental health issues or foster youth mental health, despite the fact that a foster youth can be assigned to special education due to emotional disturbance.

Congress is responsible for ensuring that all children, including foster youth, have access to a quality education. It should follow that federal policy should require justification for long-term special education for foster youth and should strive to ensure that the mental health and behavioral needs of students who are foster youth are met.

More research needs to be conducted on the mental health needs of foster youth in special education programs so we can develop policies to better support these youth. It is clear that foster youth are more likely to have mental health, behavioral and emotional problems and

that our special education system does not adequately address mental health and behavioral issues for foster youth (Smithgall, Gladden, Yang, & Goerge, 2005, p. 52-53). I believe the overrepresentation of foster youth in special education is in part due to the fact that their mental health and behavioral needs are not being met while they are in these special education classes.

Recommendations

In order to properly screen out foster children who are wrongly designated for special education due to their behavioral and mental health challenges, Congress should do the following:

- *Require that advocates for foster children be trained to help screen and refer foster children for mental health and behavioral needs.*
- *Amend individualized education programs (IEPs) to include ways to address and help with the mental health, emotional and behavioral needs of foster children.*
- *Mandate biannual assessments of IEPs to prevent foster youth from ending up in unnecessary long-term special education due to emotional disturbances and/or behavioral issues.*



ABOUT THE INTERNS



Kaylia Ervin

Hometown: Muskegon, MI

Age: 21

School: Ferris State University

Major: Criminal Justice

Graduation: May 2015

Years in care: 10

Status: Aged out

Favorite quote: "Life is what happens between your plans."

Aspirations: To become a Member of Congress or be appointed a Supreme Court judge.



Dominique Freeman

Hometown: Los Angeles, CA

Age: 23

School: Howard University

Major: Psychology

Graduation: May 2015

Years in care: 12

Status: Emancipated

Favorite quote: "To improve is to change, to perfect is to change often."

Aspirations: I aspire to be a child psychologist, and to also open a charter school for foster children where I will counsel.



Darrah Hall

Hometown: Memphis, TN

Age: 22

School: University of Memphis

Major: Anthropology and African and African-American Studies

Graduation: May 2014

Years in care: 2

Status: Kinship Guardianship

Favorite quote: "If you don't stand for something, you will fall for anything."

Aspirations: To become an activist for minority (specifically African American) rights.

ABOUT THE INTERNS



Kellie Henderson

Hometown: Wichita, KS

Age: 23

School: University of Kansas

Major: Social Work

Graduation: May 2014

Years in care: 5

Status: Emancipated

Favorite quote: “Everyone thinks of changing the world, but no one thinks of changing himself.” - Leo Tolstoy

Aspirations: Earn a Ph.D., start a non-profit organization, help improve the foster care system towards promotion of success for foster youth, and encourage foster youth to pursue their dreams.



Jane Krienke

Hometown: Wentzville, MO

Age: 24

School: Truman State University

Major: Biology and Communication

Graduation: December 2013

Years in care: 6

Status: Adopted

Favorite quote: “If you can learn a simple trick Scout, you’ll get along a lot better with all kinds of folks. You never really understand a person until you consider things from his point of view...until you climb into his skin and walk around in it.” - To Kill a Mockingbird

Aspirations: I want to be a journalist, doctor, social worker, or work in public health.



Samual Leiva

Hometown: Alexandria, VA

Age: 20

School: Wesleyan University

Major: American Studies and English

Graduation: May 2016

Years in care: 6

Status: Aged out

Favorite quote: “Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.” - Margaret Mead

Aspirations: To become a lawyer and embark on a career in public service.



ABOUT THE INTERNS



Wilondja (Wilo) Muyoma

Hometown: Seattle, WA

Age: 21

School: Whitworth University

Major: Economics and Political Science

Graduation: May 2016

Years in care: 4

Status: Emancipated

Favorite quote: "Stay hungry. Stay foolish." - Steve Jobs

Aspirations: Represent the United States Government as a Foreign Affairs officer.



Annoni Myers

Hometown: Boston, MA

Age: 26

School: Gordon College

Major: Social Work and Sociology

Graduation: May 2014

Years in care: 6

Status: Emancipated

Favorite quote: "Your past does not have to determine your future."

Aspirations: Motivational speaking and advocating for social justice.



Robert (Tony) Parsons

Hometown: Redford, MI

Age: 20

School: Michigan State University

Major: Political Science and Pre-Law

Graduation: May 2016

Years in care: 2

Status: Adopted

Favorite quote: "Friendship is the only cement that will ever hold the world together." - Woodrow Wilson

Aspirations: To become a lawyer who specializes in Family law, become a United States Senator, and then eventually become President

ABOUT THE INTERNS



Ta'Kijah Randolph

Hometown: Pittsburg, CA

Age: 22

School: California State University Long Beach

Major: Communication and Africana studies

Graduation: December 2014

Years in care: 8-9 years

Status: Aged out

Favorite quote: "Do not simply get a higher education for monetary benefits, but get educated to enhance the human condition as well."

Aspirations: To help people reach their full potential, recognize their personal destiny, and love unconditionally.



Emily Satifka

Hometown: Montoursville, PA

Age: 23

School: Temple University

Major: Political Science

Graduation: December 2014

Years in care: 8 years

Status: Aged out

Favorite quote: "Live with the seasons."

Aspirations: I want to learn as much as possible as I can in the world. I see myself possibly working in politics with immigration, child welfare, and education policy.



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