



COMMONWEALTH of VIRGINIA  
DEPARTMENT OF SOCIAL SERVICES  
*Office of the Commissioner*

Margaret Ross Schultze  
COMMISSIONER

November 1, 2015


**MEMORANDUM**

**TO:** Honorable Terence R. McAuliffe  
Governor of Virginia

The Honorable Chris Jones, Chairman  
House Appropriations Committee

The Honorable Walter Stosch, Co-Chairman  
Senate Finance Committee

The Honorable Charles Colgan, Co-Chairman  
Senate Finance Committee

**FROM:** Margaret Ross Schultze 

**SUBJECT:** Report on Impact of Adoption and Independent Living Services on the Transition to Adulthood

I am pleased to submit the Department of Social Services' report on efforts to assist foster care youth with transition to adulthood. The report was prepared pursuant to Item 339 (K) of the 2015 Appropriation Act. If you have questions or need additional information concerning this report, please contact me.

MRS:kc

**IMPROVING OUTCOMES FOR OLDER YOUTH IN FOSTER CARE:  
AN ANALYSIS OF THE IMPACT OF ADOPTION AND INDEPENDENT LIVING  
SERVICES ON THE TRANSITION TO ADULTHOOD**

**PREFACE**

The 2015 Appropriation Act (Chapter 665), Item 339 K, directed the Commissioner of the Department of Social Services to report on a range of program impacts on the transition to adulthood of youth who age out of foster care. Pursuant to this directive, the report addresses:

- Demographic data on foster children who are eligible for adoption;
- Efforts to increase adoptions of children from foster care;
- Barriers to adoption of children in foster care;
- Current efforts to help foster children who age out of the system transition to adulthood and options to improve that transition;
- Current trends for this population as compared to the general population in employment, education, living arrangements, use of public assistance, early parenthood and family situations, health care access, and involvement with the criminal justice system;
- Analysis of independent living services and other efforts to assist youth with this transition; and,
- Recommendations to modify services and programs to improve outcomes in the transition to adulthood.

The Division of Family Services invited a broad range of stakeholders including other state agencies, local departments of social services, public and private providers, youth advocates and current and former foster youth to participate in focus groups to provide information for this report. Representatives of the following agencies and stakeholder groups participated:

Virginia Office of Children's Services (state and local)  
Department of Juvenile Justice  
Department of Medical Assistance Services  
Division of Licensing, Virginia Department of Social Services  
Virginia Board for People with Disabilities  
Virginia Commission on Youth  
Connecting Hearts Foundation  
Great Expectations

Local departments of social services  
Local city attorney  
Virginia Poverty Law Center  
Voices for Virginia's Children  
Barry Robinson Center  
C2Adopt  
Cumberland Hospital  
Skill Builders  
United Methodist Family Services



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**EXECUTIVE SUMMARY**

The best outcomes for older youth in foster care are associated with permanency achieved by returning home, being placed with relatives, or being adopted. For youth for whom permanency cannot be achieved, the years immediately after exit from foster care at age 18 into the early twenties become a critically vulnerable period. The cumulative effects of abuse and neglect experienced in childhood and the subsequent effects of separation and loss have disadvantaged these young people, delaying their accomplishment of the milestones of adolescence necessary to a foundation for adulthood. Abruptly faced with living independently, often with no “home base” to offer security, these young adults flounder. Common challenges include the inability to secure and maintain a living wage, and to secure stable housing. Without dependable adults to turn to, many become homeless, rely on public assistance, have unaddressed physical and mental health concerns, and become involved in the criminal justice system. In contrast, other young adults typically depend on family for financial, emotional, educational and housing support well into their early twenties. According to a report of the Pew Research Center, 56% of all young adults between the ages of 18 and 24 lived in a parents’ home in 2012.

Professional stakeholders from public and private agencies, advocates and local departments of social services (LDSS) participated in focus groups convened by the Virginia Department of Social Services (VDSS) to identify barriers to achieving permanency for youth in foster care. Virginia has reduced the number of children in foster care by half since 2007 through efforts to prevent entry into foster care when possible and to discharge children to permanency more quickly. The home and family situations of children who do enter care, therefore, are more challenging and difficult to alter. When youth enter care as teenagers, there is less time to effect change or accomplish termination of parental rights. Placement with relatives is limited by lack of financial assistance and difficulties in approving relatives as foster parents due to Virginia’s lengthy list of “barrier crimes” which prohibit approval. Other barriers identified included staff turnover, reluctance of teens to agree to adoption, children and youth with special needs and a lack of foster and adoptive homes.

Focused efforts have been made to address the specific challenges identified related to achieving permanency through adoption. In 2014, there were 818 children in foster care eligible for adoption of which nearly half were diagnosed with special needs. In 2013, the VAdopts Campaign was launched to increase adoptions. Contracts were awarded to model special initiatives in recruitment for homes for hard to place children, support for adoptive families, and targeted marketing to more effectively recruit adoptive homes. Other collaborative initiatives and specialized training continue with an emphasis on initiating prompt and intensive adoption efforts as soon as a child is legally available for adoption.

An analysis of existing independent living services shows that VDSS program guidance has established a system of best practices starting at age 14 to prepare youth for adulthood. However, diminishing funding for services and financial support for young adults limits the ability of LDSS to engage and serve youth ages 18 to 21. Two primary funding sources have been reduced: federal Chafee Foster Care Independence Program funds by almost 30% since 2009, and Education and Training Vouchers funds by about 25% since 2010. The Children's Services Act (CSA) funds a monthly housing assistance stipend of \$644 which is inadequate to cover rent and other housing expenses. CSA may also fund, for example, mentoring, employment services and counseling on a case-by-case, service-by-service basis, but because a local match is required, local budget constraints can influence funding decisions.

The stakeholder focus groups, as well as focus groups of current and former foster youth, recognized challenges that youth aging out of foster care face in transitioning to adulthood. The period of young adulthood from late teens to early twenties is a distinct developmental stage during which the brain continues to mature. During this time, brain function encourages risk-taking which can be channeled into healthy risk-taking that leads to coping and resilience, rather than harm, if youth are provided continued guidance and support. The stakeholders' greatest concern was the lack of stable and safe housing for these young adults due to their lack of financial and familial resources. Educational deficits limit these young people's ability to secure employment or access postsecondary education. One foster youth observed that older youth in foster care need to know they will have access to assistance with housing, job training and education when they need it "so they don't have to stress about their 18<sup>th</sup> birthday and where they are going afterwards."

Federal legislation enables states to extend financial and programmatic supports to these youth to age 21 and to access federal funding to do so. If enacted by the Virginia General Assembly, this program would be known as the Fostering Futures program. The value of providing support and services to former foster youth beyond age 18 is underscored by an examination of the outcomes of youth who are not in permanent families and do not have the support of the system after age 18.

To measure outcomes of Virginia foster youth who aged out of care against young adults in the general population, a cohort of nearly 4,000 former foster youth who turned 18 between July 2007 and June 2012 was identified. Personal identifying information was compared, where possible, to data from other state systems. Although there are limitations to the data (e.g., data is not available on youth who have left Virginia, and exact identifying matches between the former foster youth and the data in other agencies' data systems were not always possible), comparison revealed that in Virginia:

- In 2012-2014, 40-50% of the former foster youth were employed either full-time or part-time at some time in a given year, similar to the rate in the general population of the same age, but by age 23 their earnings were less than half of the income of their non-foster care age peers (\$5,774 vs. \$13,100 in 2013).
- From 2008-2015, former foster youth (56%) were one and a half times less likely to complete public high school than students in the general population (81%).



- In 2013-2015, former foster youth (48%) were more than twice as likely as their age peers (20%) to participate in SNAP (Supplemental Nutrition Assistance Program), and for an average of 15% longer.
- In 2013-2015, former foster youth (6%) were three times more likely to participate in TANF (Temporary Assistance for Needy Families) in a given year than their age peers (2%).
- In 2013-2015, former foster youth (42%) were three times more likely to enroll in Medicaid than their peers (12%), and remained covered for about a third longer.

It is apparent that in the first few years after turning 18, Virginia's former foster youth are faring worse than their non-foster care peers, depending more heavily on public resources and leading less productive, less stable lives. The time to devote additional resources to shore up their foundation for adulthood is the period immediately following their aging out of foster care. From age 18 to 21, youth are still positioned to complete educational requirements, secure training, develop employability skills, and practice independent living when there is still time to fail and recover. Without advancement in education or training, youth are unlikely to improve their employment status over time, and are more likely to continue to find themselves unstably housed, potentially homeless, parenting children they cannot adequately support, and involved with the criminal justice system. As one of the foster youth insightfully stated, "Our generation is the future and to encourage an improved future, we need people to care."

Implementation of Virginia's Fostering Futures initiative is recommended. Utilizing federal Title IV-E funding under provisions of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008, room and board payments for foster home placements can be continued for youth age 18 to 21 along with developmentally appropriate programming to support and guide them through this vulnerable period. The program will enable many to remain in their existing foster homes and continue to receive parental mentoring and support. Youth will participate voluntarily but are required to engage in education, training or employment. For youth unable to participate due to a medical condition, this period can be used to securely engage the resources of adult services systems.

Additional recommendations address strengthening tangible supports for and reducing barriers to placements with relatives. Implementing a Custody Assistance program with federal Title IV-E funding will enable relatives who assume custody of a child from foster care to receive a monthly stipend comparable to maintenance payments made to foster parents and subsidy payments made to adoptive parents. The final recommendation is to develop a program evaluation to capture and analyze data related to any initiative undertaken to guide future program and policy decisions.

In its role *in loco parentis*, the state has created, through decades of legislative and regulatory action, a foster care system designed to match or exceed the level of care provided to children who are raised in their families of origin. Changing times call for extending this quality of care to age 21 for youth who age out of foster care.

# **IMPROVING OUTCOMES FOR OLDER YOUTH IN FOSTER CARE: AN ANALYSIS OF THE IMPACT OF ADOPTION AND INDEPENDENT LIVING SERVICES ON THE TRANSITION TO ADULTHOOD**

## **Background**

The transition from childhood to independent adulthood is challenging for most young adults. The transition from foster care to independent adulthood is even more challenging. Foster care was created to be a short-term solution, providing substitute parenting when a child's biological family cannot meet the community's standard of care. It becomes a long-term problem when older foster youth reach emancipation at the age of 18 without permanent family ties. Today, young adults typically continue to rely on family for financial, emotional, educational and housing support well into their early twenties. For example, according to a report of the Pew Research Center, 56% of young adults ages 18 to 24 lived in their parents' home in 2012. Even the proportion of 18 to 31 year olds living at home was 36%, the highest in four decades.

With the general shift in the population at large moving the age of independence in adulthood well beyond the age of 18, youth who age out of foster care at 18 are particularly disadvantaged. They are more likely than their non-foster care counterparts to follow negative pathways into adulthood and at a higher rate. Negative outcomes include lack of secondary or postsecondary education, unemployment, criminal justice system involvement, homelessness, early parenting, and dependence on public assistance.

The propensity of youth to follow these negative pathways can be attenuated by achievement of permanency in foster care. Efforts to achieve permanency occur across a continuum of goals. The most frequent initial goal for children who enter foster care is to return to their home of origin. When reunification is not possible, permanent placement with immediate or extended family is attempted. When this cannot be accomplished, legal termination of parental rights is sought and efforts are directed to permanent placement with an adoptive family. For the youth who have not successfully been returned home, placed with relatives or adopted, permanent connections to supportive adults are developed concurrent with efforts to provide the youth with the skills and foundation for independence at the point that they exit foster care. Services provided to develop the ability to live independently include, but are not limited to, education and/or vocational training, developing financial management skills, social skills, employment skills, and health and parenting information. However, these youth frequently lack the financial, social and emotional resources to weather this period alone.

Since 2007, when Virginia initiated the Children's Services System Transformation, the Virginia Department of Social Services (VDSS) policy, procedures and training have focused on providing family centered care and achieving permanence for children. Concomitantly, child-serving state agencies adopted the Virginia Children's Services Practice Model, a guide for decision-making based on ensuring the safety and well-



being of children and families through family engagement and community based provision of services. Best practice efforts include preventing children from entering foster care by supporting at-risk families and engaging extended family, improving adoption success, and developing and strengthening independent living services provided to youth in foster care. As a result of these efforts, the number of children in foster care has declined, and those in care are less likely to be placed in non-family settings such as group homes or residential facilities.

The number of youth entering foster care has decreased significantly. Today there are nearly half as many children and youth in foster care as there were in 2007, a reduction from 7,765 in 2007 to 4,327 in 2013. A review of reasons children and youth exited foster care from 2009 to 2013 (Table 1) shows that Virginia has improved rates of reunification and placement with relatives, while increasing the rate of adoptions and steadily reducing the proportion of youth who exit foster care due to aging out.

**Table 1 - Reasons for Exits from Foster Care in Virginia**

<b>Exit Reason</b>	<b>Data Type</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Reunified/ return home	Number	972	910	888	808	760
	Percent	29%	28%	30%	29%	28%
Placement with relatives	Number	605	621	463	479	541
	Percent	18%	19%	16%	17%	20%
Adoption	Number	692	770	812	694	753
	Percent	21%	24%	27%	25%	28%
Emancipation	Number	1,015	829	743	691	580
	Percent	30%	26%	25%	25%	21%
Other*	Number	76	94	80	141	101
	Percent	2%	3%	2%	4%	3%

\*Other (e.g. transfer to another agency such as Dept. of Juvenile Justice, runaway, death)

Source: Child Trends report of Adoption & Foster Care Analysis and Reporting System (AFCARS) data in National KIDS COUNT Data Center.

The reduction in children entering foster care reflects successful efforts to ensure that children remain safely at home or are placed with relatives through cooperative family arrangements. Thus, the home and family situations of children who do enter foster care are more difficult to alter. Often youth who age out of foster care enter the system in their teens, when there is less time to effect change or accomplish termination of parental rights, or they have significant mental health, substance abuse or delinquency problems. As a result, there will always be some youth in foster care who reach the age of 18 without permanency. While these numbers continue to decrease, the youth who do age out require continued support and assistance into young adulthood.

Since 2012, Virginia has incrementally explored the opportunity to enact the provisions of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 that allow states to utilize federal funding through Title IV-E of the Social Security Act to



extend foster care and adoption assistance to youth in the 18 to 21 age group. Previous reports prepared for the General Assembly on this topic include:

- *Plan for Implementing Provisions of the Federal Fostering Connections to Success and Increasing Adoptions Act of 2008: Expansion of Foster Care and Adoptions Assistance up to 21 Years of Age*, October 2014;
- *Options for Implementing the Extension of Foster Care Maintenance and Adoption Assistance Payments for Individuals up to 21 Years of Age*, November 2013; and
- *Extending Foster Care and Adoption Assistance Eligibility to Age Twenty-One*, November 2012.

[These reports are available online through the Virginia General Assembly Legislative Information System (<https://leg1.state.va.us>). The 2014 report, [Report Document No. 377](#), includes the prior reports as appendices.]

In recent years, neurological research has shown the negative impact of childhood trauma on development, contributing to the challenges experienced by most foster children. The period of young adulthood from late teens into early twenties is now recognized as a distinct developmental stage during which the brain continues to mature and offers another opportunity to re-wire the brain and heal from the impact of past trauma and disadvantage. This same brain development encourages risk-taking which is best channeled into healthy risk-taking that leads to coping and resilience, not harm. However, youth require continued guidance and support to encourage healthy risk-taking.

Data from other states show that youth who age out of foster care without achieving permanency experience negative outcomes. The *Midwest Evaluation of the Adult Functioning of Former Foster Youth* (the Midwest Study) compared outcomes for foster youth age 17 to 26 to a national sample of same age peers. At age 26, less than half of the former foster youth were employed compared to 80% of the national sample, with few earning a living wage and more than half receiving food stamps in the previous year. More than 15% of former foster youth had been homeless at least once in the two previous years, many had been homeless multiple times. One fifth of the former foster youth had no high school diploma or equivalency credential.

In this report, Virginia-specific programming and data are examined. Efforts to increase adoptions are described and provisions of the state's Independent Living program are examined. Available data on outcomes for a five-year cohort of youth who aged out of foster care is compared to their non-foster care age peers in five domains: employment and wages, education, use of public assistance, family status, and health insurance.

In addition, VDSS sought input from a variety of stakeholders to ensure an understanding of the issues and make recommendations. VDSS convened six focus groups around the state to gain insight and perspectives from professionals in youth-serving agencies and from youth themselves. In two focus groups, a total of 34 professional stakeholders participated in discussions to identify barriers to achieving permanency, outcomes of concern for youth aging out of foster care, barriers to



successful transition to adulthood, and services or programs which would improve outcomes, including how their agencies might contribute to addressing the needs of this population. In four focus groups, a total of 20 older foster youth and youth who have aged out of foster care shared their own experiences and insights into their needs in preparing for independent adulthood. Input from the agency stakeholders and youth informs the discussions which follow.

This report addresses Virginia's barriers to achieving permanency, efforts to increase adoptions, efforts to support successful transition to adulthood, current trends for youth, adequacy of independent living services, and other efforts to assist with transition to adulthood. The report concludes with recommendations to improve outcomes in the transition to adulthood for Virginia's foster youth.

### **Barriers to Achieving Permanency**

Permanency planning is a goal-directed process designed to maintain children safely in their own homes or place them permanently with another family. For all foster children, caseworkers seek to establish enduring family relationships that provide lifelong commitment, continuity of care, a sense of belonging and a recognized legal and social status. Foster care goals which lead to permanency are return home or reunification, permanent placement with immediate or extended family, and termination of parental rights and permanent placement with an adoptive family. Best practice involves concurrent permanency planning which is making simultaneous efforts to work with the birth family and engage relatives while laying the groundwork for adoption if this becomes necessary. Independent Living cannot be chosen as a foster care goal until a youth has turned 18 without achieving permanency, but services to develop independent living skills are provided to all youth in foster care beginning at age 14.

In 2015, focus groups were convened in two areas of the state to identify barriers to permanency for older youth in foster care. Representatives participated from state agencies, local departments of social services (LDSS), and other public and private stakeholder agencies that provide direct services or advocacy. They identified barriers in four areas addressed below: (1) placement with relatives; (2) characteristics of the children and families; (3) timelines; and (4) the service delivery system.

Placement with relatives Stakeholders recognized unique barriers to placing children permanently with relatives in addition to the challenges presented by the child and family of origin. Relatives are often ruled unacceptable as placements because they have been convicted of barrier crimes that may have occurred years earlier. Children in foster care cannot be placed with a relative unless the relative has been trained and certified as a foster parent, which many relatives are unwilling to do, or cannot do because they or another adult in their household is ineligible due to having been convicted of one or more barrier crimes at some point in the past. A complete list of barrier crimes can be found in the Code of Virginia in § 63.2-1719.



Lack of financial support for relative placements was also noted as a challenge. Because Virginia does not have a subsidized guardianship program, there is no dedicated funding available to relatives who agree to accept custody of a child. Typically, the birth parents do not have sufficient resources to consistently pay child support. Relatives may qualify for very limited funding through public assistance programs like Temporary Assistance to Needy Families (TANF) or General Relief (GR). In many cases, if relatives were able to access adequate funding, they would take custody before the child entered foster care. Relatives can receive foster care funding only if they are approved as foster parents, but under current policy this funding is available only as long as the child remains a foster child, which does not facilitate permanency for the child.

Characteristics of the children and families Agency stakeholders reported that characteristics of the children who enter care, and of their families, often make it difficult to achieve permanency. Increasingly children entering care have significant behavior problems for which inadequate services exist including mental health diagnoses, disabilities (often undiagnosed or untreated), and sex offender histories. Family challenges include mental health issues, substance abuse, poverty (inability to maintain employment and safe, affordable housing) and language barriers. Intensive efforts to divert children from entry into foster care likely mean that children who do come into care represent the most difficult situations. Lack of adequate services for families can result in their inability to bring about needed changes. The federal timelines require the LDSS to make every effort to achieve permanency within a year or, if the goal becomes adoption, within two years. The timelines are based on the needs of children and youth, but can be at odds with the seriousness of parents' challenges and their ability to correct a lifetime of problems.

Timelines Further, focus group participants observed that the older the youth when entering care, the less time there is for the family to stabilize and the less time for the system to ameliorate the youth's behavioral challenges. Once youth turn 14, they must consent to an adoptive placement, which many oppose because of their desire to return home. These challenges can lead to multiple placement disruptions whether the LDSS is trying to return children home, to stabilize them in foster homes, or even to achieve adoption. It requires very strong support for birth families, relatives, or foster and adoptive families, to understand the youth's behavior and provide effective parenting. Even with support, not all families are able to do so.

Service delivery system That the system itself can also be a barrier was acknowledged by both LDSS staff and other agency representatives. Often caseloads are high making it difficult for LDSS caseworkers to deliver effective services and many localities experience high turnover in caseworkers that results in lack of continuity in provision of services. It is challenging to effectively engage older youth in planning. This is an area of specialization in which worker training and experience are key to program effectiveness, two areas significantly impacted by staff turnover. While training is offered on an ongoing basis, it takes time for new workers to access and apply this training.



Particularly in small agencies, where staff work in multiple programs, training in permanency services is but one of many mandatory curricula to be mastered.

Similar barriers were cited in a previous series of focus groups across the state in 2013, convened to specifically identify barriers to adoption of children in foster care. The agency stakeholders who participated in the 2015 focus groups on older youth in care echoed these same barriers. Three problem areas emerged as barriers to adoption in both the 2013 and 2015 focus groups: family issues, LDSS processes, and the “stall to finalization” phenomenon.

Participants noted that there is only a small pool of families available to adopt the older youth and/or children with special needs who comprise the majority of those waiting for placement. Some potential adoptive families find the process of approval, matching and placement to be too cumbersome, yet LDSS must proceed slowly with caution to avoid disruption for the child or youth. Some foster parents are willing to continue a child’s placement, but are unwilling to commit to adoption.

At the LDSS level, there is high turnover of staff and lack of specialized adoption staff in small agencies. Variability across LDSS agencies poses a challenge to adoption agencies. While bound by the same policies statewide, each LDSS has its own organizational structure and procedures. It is often difficult for LDSS to match the waiting children with families who have been approved to adopt through other public or private agencies (in and out of state) due to challenges with interagency collaboration and logistics.

When families and children are successfully matched, a new set of challenges arises after the adoption agreement is signed, dubbed the “stall to finalization.” While federal guidelines envision a two-year timeline from foster care entry to termination of parental rights and adoption, legal proceedings can be protracted. Multiple appeals may be filed delaying the process or other family members may petition for custody creating delays. Variability in practice across localities due to procedural differences in LDSS and the courts also plays a role.

### **Efforts to Increase Adoptions**

Adoption is one option to provide permanency for a child in foster care. Adoption is not pursued until it is determined that services to the family cannot effectively resolve the safety concerns which brought the child into care and the legal rights of the birth parents have been terminated.

In state fiscal year (SFY) 2014, there were 818 children in foster care eligible for adoption, of which 53% were male, 47% female. These are children whose mother and father have had their parental rights legally terminated. Of these children, 54% were white and 30% black; 16% were of mixed or other races. Nearly half (46%) had been diagnosed as having special needs. The largest proportion of children (50%) was under

age 10, while 16% were age 16 and older (see Table 2). In general, younger children are easier to place for adoption while older youth are the most difficult to place.

**Table 2 – Age of Virginia Foster Children Available for Adoption in SFY 2014**

Age	Total	0-9 yrs.	10-12 yrs.	13-15 yrs.	16+ yrs.
Current Age	818	405 (50%)	143 (16%)	151 (18%)	128 (16%)

Source: Virginia Department of Social Services

At the time of their entry into foster care, 93 (11%) were already teenagers. Six were 16 or older (see Table 3). For children who are older when they enter foster care, it is more difficult to terminate parental rights and achieve adoption before they turn 18 and age out of foster care.

**Table 3 – Age at Entry of Virginia Children Available for Adoption SFY 2014**

Age	Total	0-9 yrs.	10-12 yrs.	13-15 yrs.	16+ yrs.
Age at Entry to Foster Care	818	572 (70%)	153 (19%)	87 (10%)	6 (1%)

Source: Virginia Department of Social Services

VDSS has introduced several initiatives to increase adoption of children and youth in foster care whose parental rights have been terminated. Children with special needs and older youth, particularly those who entered care as teens, are the most difficult to match with adoptive homes. Multiple strategies are used to recruit a range of types of adoptive homes.

In 2013, the VAdopts Campaign was implemented to increase adoptions. This initiative resulted in development of three one-year adoption contracts, totaling \$1.5 million, specifically designed to increase adoption of Virginia's youth in foster care.

One contract utilized Extreme Recruitment® which is a model of child specific recruitment for youth whose parents' rights have been terminated and have been waiting the longest for an adoptive family, or have characteristics that put them at risk of aging out of foster care without permanent placement. In Extreme Recruitment® all strategies for adoptive home recruitment are exhausted, and attempts are made to reconnect youth with safe and appropriate adults from their past. Intensive weekly meetings with team members span 12-20 weeks, and there is a focus on preparing the youth for adoption, including addressing mental health and educational needs. Diligent searches for kin are made. Goals are to match youth with a network of safe, appropriate adults and place 70% of referred youth with an adoptive family. In the first year a total of 68 youth were served with 33 being reconnected with kin or other supportive adults, 20 matched with a prospective family, and 3 legally adopted.

A second contract provided for innovative post-adoption services and support to



adoptive families. These services help families build on their strengths in order to stabilize and prevent adoption disruption (before finalization of adoption) as well as adoption dissolution (after legal finalization of adoption). Underserved areas in Virginia and unmet post-adoption service needs were given greater consideration. Services were provided to more than 200 adoptive families. In addition, 24 mental health clinicians received specialized training on the unique issues of adoptive families and adopted children. This will increase access to "adoption competent" clinical services to support stable and healthy families, reducing disruptions and dissolutions.

The third contract focused on foster and adoptive family recruitment. In Virginia, families are dually approved for both foster and adoptive placements. The 2013 Adoption and Foster Care Analysis and Reporting System (AFCARS) data shows that almost 90% of Virginia adoptions that year were by foster parents, minimizing moves to new placements for the children. The National Resource Center for Diligent Recruitment, in partnership with VDSS, used the Environmental Systems Research Institute, Inc., Business Analyst software to plan effective recruitment. They identified segments of the population likely to become prospective foster and adoptive parents for Virginia and identified marketing characteristics associated with these groups. This profile helps determine where to recruit and how to develop marketing materials. Special recruitment efforts yielded 1500 inquiries and more than 150 new prospective foster and adoptive families initiated the approval process.

For SFY 2016, the three VAdopts contracts extended the projects' reach and included options for renewal. Continuation of contractual services supplements the efforts of LDSS by offering continuity of expertise despite gaps due to LDSS staff turnover and providing new tools to manage adoption processes successfully. In addition, as a result of lessons learned from previous efforts, changes were made to two of the contracts to maximize the potential for increasing adoptions. The Extreme Recruitment contract was expanded to afford an opportunity for statewide provision of services. This resulted in vendor contracts which cover the eastern, central and northern regions of the state. A Memorandum of Agreement is currently being developed to provide the service in the western region as well. The Foster and Adoptive Home Recruitment contract was modified to solicit responses from organizations with the capacity to conduct marketing campaigns to assist in the development of recruitment materials and technical assistance for LDSS.

In addition to these new projects, VDSS continues to oversee one other major adoption resource, Adoption Through Collaborative Partnerships (ATCP). This resource has existed for several years and was renewed for SFY 2016. Twelve contracts with adoption agencies support timely adoption for a subset of children in foster care. The youth identified in this subset are those who are hard to place with special needs including physical, mental or emotional conditions; a hereditary tendency, congenital problem, or birth injury leading to substantial risk of future disability; membership of a minority group based on racial, multi-racial, or ethnic heritage; a close relationship with one or more siblings such that the siblings will be placed together; and a youth age six or older. The agencies recruit and train prospective foster and adoptive families, and



collaborate with local departments of social services to prepare children for adoption, match children with families, and supervise placements. Over the course of fiscal years 2012 through 2014, grant contractors finalized adoptions for 783 children.

In 2014, Governor Terry A McAuliffe appointed Deborah J. Johnston as the "Adoption Champion" for the Commonwealth of Virginia. Since her appointment she has made more than 50 appearances across the state at adoption events, conferences, meetings, via radio, television, print and social media to bring awareness to the number of Virginia foster care youth available for adoption and the need for more foster and adoptive families. Ms. Johnston has specifically messaged the need for foster care adoptions. In 2015, Ms. Johnston created Connecting Hearts, The Deborah J. Johnston Foundation. The mission of the foundation is to engage and educate the public about foster youth available for adoption and the need for more foster and adoptive homes. In an effort to bring awareness to the public, the foundation has sponsored photography shoots for our foster youth and match retreats to match foster youth with prospective adoptive families. Connecting Hearts is also planning an Adoption Summit to be held in November 2015 to provide education, awareness and advocacy to LDSS staff.

Since 1985 VDSS has contracted with Virginia's One Church, One Child program (OCOC), the only organization that solely recruits adoptive families within African-American churches and communities. The mission of OCOC is to recruit through African-American churches that make a commitment to find an adoptive family within their congregations. OCOC has a strong network due to substantial support from churches of diverse religious affiliations and community organizations within the African-American community. Maintaining funding for this program will ensure the continuation of recruitment within the African-American community with an outcome of more families adopting.

Virginia held its first Heart Gallery in 2005. A Heart Gallery is a collection of portraits of foster care youth who are eligible for adoption that are taken by professional photographers. These photographs are often displayed at child welfare events, conferences, businesses, museums or libraries to raise awareness regarding waiting youth. In 2012, OCOC created a travelling Heart Gallery that is displayed at various events across the state. OCOC forwards prospective family referrals that are generated by these events to the ATCP contractors.

An additional contract is with the Change Who Waits (CWW) organization. The CWW contract is intended to increase the visibility of children waiting to be adopted by a family. CWW helps find adoptive homes for children in Virginia's foster care system who have been abused or neglected. CWW uses professional photographers and videographers to give these young people a face and a voice to connect them with potential families. In 2014, Change Who Waits partnered with VDSS to showcase three Heart Galleries primarily at churches, in the central region.

Currently, VDSS is undertaking a major project to update the photo-listings of children awaiting adoption on the AREVA (Adoption Resource Exchange of Virginia) and

national AdoptUSKids websites. This will allow families in and out of state to view Virginia's waiting children. AdoptUSKids is a federally-funded project raising public awareness and assisting states to recruit and retain foster and adoptive families and match them with children. There are currently 211 children from Virginia who are listed on the AdoptUSKids website.

VDSS works with a sense of urgency to achieve permanency for youth, continuing to emphasize prompt and intensive adoption efforts as soon as a child is legally available for adoption. The department provides training to LDSS staff, promotes innovative approaches to recruitment and matching children with families, and collaborates with other entities such as adoption agencies, the judicial system and national resources to improve the adoption process. VDSS is committed to collaborating with both public and private stakeholders utilizing the Virginia Children's Services Practice Model to reduce barriers and increase opportunities to secure families for a lifetime for Virginia's children.

### **Efforts to Support Transition to Adulthood**

For youth who do not achieve permanency through reunification, placement with relatives or adoption, lifelong connections with supportive adults and independent living skills will be the basis for their success in adulthood. All youth must make the transition from adolescence to adulthood whether they remain in their family of origin, live with relatives, age out of foster care or are adopted. Young adulthood, typically considered to be from age 18 to 26, is a time to finish education, begin working, develop adult relationships, and establish the foundation for independent adulthood.

#### **A. Current Population Trends**

Several domains can be used to measure outcomes during this period of young adulthood: employment, education, living arrangements, use of public assistance, early parenthood and family situation, health care access, and involvement with the criminal justice system. From national and other states' data, it is clear that youth aging out of foster care tend to experience poor outcomes. While prior VDSS reports have provided data in these areas from a national perspective or from selected states, the data in this report examines Virginia's youth aging out of foster care in comparison (where possible) to the general population of young adults in Virginia.

Capturing data for analysis on youth who have exited foster care is difficult. If services are not being actively provided, the locations of these youth are often unknown and the youth are difficult to find. At the federal level, the law establishing the Chafee Foster Care Independent Living Program (Chafee, § 477 of Title IV-E of the Social Security Act, 42 U.S.C. 677) required creation of a nationwide data collection system to track independent living services and outcome measures. The National Youth in Transition Database (NYTD) began collecting data in 2010. In Virginia, each LDSS conducts a survey of specific cohorts of youth in foster care, starting with a baseline survey of all youth in care immediately after their 17<sup>th</sup> birthday in specified years. The same youth



are surveyed around their 19<sup>th</sup> birthday and again around their 21<sup>st</sup> birthday. Virginia makes targeted efforts to reach out to and engage former foster youth to encourage their response to the surveys.

The latest published data reflects youth who turned 19 in FY2013 (see Table 4). Comparing outcomes for the subset of Virginia former foster youth to former foster youth nationwide, the data shows that Virginia youth performed better than the national average on all outcomes measured. However, the Virginia and national figures do not vary greatly, the Virginia sample is small (175 youth), and NYTD does not include comparison data on youth who have not been in foster care. More importantly, there is significant room for improvement on each of these measures in Virginia.

**Table 4 - Outcomes for Former Virginia Foster Youth at Age 19 in FY2013**

<b>Outcome</b>	<b>National N=11,712</b>	<b>Virginia n=175</b>
Employed full-time or part-time	35%	38%
Receiving public assistance	34%	25%
Completed high school or GED	55%	59%
Attending educational program	54%	69%
Referred for substance abuse treatment (in past 2 years)	15%	15%
Incarcerated (in past 2 years)	24%	16%
Became a parent (in past 2 years)	12%	7%
Homeless (in past 2 years)	19%	10%
Positive connection to an adult	89%	94%

Source: National Youth in Transition Database

To supplement the Virginia information obtained from the NYTD surveys to date, for this report we have attempted to match data on individual former foster youth to data from other Virginia state agencies, using personal identifying information (e.g. name, date of birth, Social Security number), in order to determine status of the youth in these other systems. However, privacy interests and other barriers to data sharing have limited the results.

A five-year cohort of former foster youth was created by identifying youth who aged out of foster care and who are no longer receiving any independent living services. The cohort contains almost 4,000 young adults who were born between July 1, 1989 and June 30, 1994, turning 18 from FY 2008 through FY 2012. The characteristics of these youth (see Table 5) are typical of the foster care population.



**Table 5 – Demographics of Virginia Former Foster Youth Cohort**

Aged out of Foster Care at Age 18, FY2008-FY2012 N=3,926			
<b>Gender</b>	Male 1,925 (49%)	Female 2,001 (51%)	
<b>Race</b>	White 2,028 (52%)	Black 1,667 (42%)	Other 231 (6%)
<b>Legal Basis for Custody</b>	Abuse or neglect 1,579 (40%)	Child in Need of Services 842 (22%)	Relief/transfer of custody 787 (20%)
	Delinquency 593 (15%)	Cannot be determined 125 (3%)	

Source: Virginia Department of Social Services

**Limitations of Data** There are limitations to consider when reviewing the data that follow. The status of former foster youth in their young adult years (19 to 23) is compared to young adults in the general Virginia population in the same age range where possible. These data do not include youth who moved out of Virginia. The total number of former foster youth reported in each area of analysis may differ due to data matching limitations such as invalid or duplicate Social Security numbers, or missing or incompatible information. Therefore, the status of all of the youth is not represented in every measure. Due to differing methodologies and age categories used in available data sets, specific comparisons could not be located for each indicator. In some instances, published data from other systems has been used to provide a broad comparison.

**Employment**

The former foster youth cohort data was matched with Virginia Employment Commission (VEC) files to determine which former foster youth were employed during the period 2013-2015, and their median wage. Duration of employment and full-time or part-time status are not available. Results are displayed for each annual cohort for each year as well as for the three years combined (see Table 6). The latter provides a broader view via an unduplicated count of youth who were employed at any time in the three-year period.

Specific general population data for comparison could not be obtained because the VEC does not have labor force data or wage data by age category. The U.S. Census Bureau does provide employment data by age category through the American Community Survey. Data for both 2012 and 2013 shows that 44% of all persons age 20-24 in Virginia were employed. Similarly, the former foster care cohort rate of employment for each of these two years averaged 46%. The inability to compare exact categories within this domain limits any ability to draw further conclusions.



**Table 6 – Virginia Former Foster Youth - Employment and Wages 2012-2014**

<b>Former Foster Youth, Age 19-23 N=3,622</b>	<b>Turned 18 in FY2008 N=722</b>	<b>Turned 18 in FY2009 N=838</b>	<b>Turned 18 in FY2010 N=775</b>	<b>Turned 18 in FY2011 N=660</b>	<b>Turned 18 in FY2012 N=627</b>
<b>2012</b>					
<b>% Employed</b>	41%	46%	47%	47%	47%
<b>Median wage/yr.</b>	\$5,188	\$5,066	\$3,974	\$2,979	\$2,040
<b>2013</b>					
<b>% Employed</b>	42%	45%	45%	49%	50%
<b>Median wage/yr.</b>	\$5,774	\$6,590	\$5,367	\$3,590	\$3,191
<b>2014</b>					
<b>% Employed</b>	41%	46%	47%	48%	52%
<b>Median wage/yr.</b>	\$6,717	\$6,529	\$5,800	\$5,360	\$4,497
<b>2012-2013-2014</b>					
<b>% Employed anytime 2012-2014</b>	56%	62%	63%	65%	68%
<b>Median wage</b>	Not calculated on annual basis for the aggregated years.				

Source: Virginia Employment Commission and Virginia Department of Social Services

The American Community Survey also provides income data by age category but uses the category of “personal income” comprising all sources of income including, for example, child support, not just wages. The 2013 median personal income for the age groups of interest is shown in Table 7.

**Table 7 – Virginia Personal Income 2013**

<b>General Population</b>	<b>Age 23 (18 in 2008) n=112,095</b>	<b>Age 22 (18 in 2009) n=122,135</b>	<b>Age 21 (18 in 2010) n=129,547</b>	<b>Age 20 (18 in 2011) n=115,727</b>	<b>Age 19 (18 in 2012) n=112,343</b>
<b>Median income</b>	\$13,100	\$8,400	\$7,200	\$4,300	\$2,000

Source: U.S. Census Bureau, 2013 American Community Survey

While the amount of personal income in 2013 for the general population at age 19 (\$2,000) is comparable to the 2013 wages of the former foster youth cohort at age 19 (\$2,040 for the youth who turned 18 in 2012), by age 23 there is a substantial gap: the general population personal income of \$13,100 is more than double the former foster youth wages of \$5,774 (for the youth who turned 18 in 2008). In 2013, the U.S. Census Bureau designated the poverty threshold for one person to be \$12,119, more than



double the median wages of the former foster youth. Despite other sources of income represented in the population figure, and acknowledging that former foster youth may have had income beyond wages, the former foster youth appear to be significantly lagging behind. Again, the inability to compare exact categories limits conclusions that can be drawn.

### **Education**

The former foster youth cohort data was matched with statewide Department of Education (DOE) public school data to compare the outcomes of former foster youth with their same age peers across Virginia (see Table 8). Youth in the general population were almost one and a half times more likely to complete a high school education than the former foster youth.

Only 56% of the foster youth cohort received a high school diploma or equivalent credential from the Virginia public school system. The NYTD data for 19 year olds in 2013 shows a slightly higher rate (59%) for “completed high school or GED” which would include completing schooling in other settings or states. Given the necessity of a high school education to secure employment, the former foster youth are at a distinct disadvantage. In addition, the former foster youth who did finish high school had a much lower proportion of diploma types that facilitate admission to four-year colleges. The general population students were more than twice as likely to earn either an advanced studies or standard diploma (74%) than the former foster youth (31%). Increasingly, employers require some postsecondary education, signaling another disadvantage for the former foster youth. Data on postsecondary education for the former foster youth cohort is not available.

**Table 8 – Virginia Secondary Education Outcomes**

<b>Outcome</b>	<b>General Population N=866,374</b>	<b>Former Foster Youth N=3,687</b>
<b>Graduation in 4 years/ “On-Time Graduation”* 2008-2012</b>	85%	50% (based on N=2,808)
<b>Graduation in 6 years* 2008-2012</b>	87%**	52%** (based on N=2806)
<b>Graduation in 6+ years - Any type of completion* 2008-2015</b>	81%**	56%**

Source: Virginia Department of Education and Virginia Department of Social Services

\* “On-time graduation” refers to students who graduated within four years of entering ninth grade for the first time; “graduation in 6 years” adds those who graduated in the ensuing two years. “On-time graduation” and “graduation in 6 years” rates include only Board of Education approved diploma types (standard, modified standard, advanced studies, special, and general achievement); the rate for “any type of completion in 6+ years” adds students completing a GED (General Education Development) certificate as part of an alternative education program and those receiving a certificate of program completion. (For further explanation of diploma types see [DOE website at www.doe.virginia.gov](http://www.doe.virginia.gov).) \*\*Percentages are cumulative. Each rate also includes those graduates in the previous categories.



### **Living arrangements**

Data on the living arrangements of the Virginia former foster youth cohort is not available. Nationally, 56% of the population age 18 to 24 lived with their parents in 2012 (Pew Research Center). While many former foster youth return to their family of origin after aging out, this is typically an unstable arrangement. The employment and income data of the foster care cohort suggest that a large proportion of these young adults may be sharing living quarters, and are likely unstably housed or even homeless. The NYTD data for 19 year olds in 2013 indicated that 10% of those youth reported having been homeless in the prior two years. Virginia does not currently provide a count of homeless young adults so there is no basis for comparison. The Governor's Coordinating Council on Homelessness has created the Interagency Partnership to Prevent and End Youth Homelessness to develop data sources and leverage state resources on behalf of the 14 to 24 age group. Two identified target populations are youth in the foster care and juvenile justice systems. The Partnership has begun to develop strategies to collect data in addition to anecdotal evidence of the problem of homelessness among former foster youth in Virginia.

### **Public Assistance**

The former foster youth cohort data was matched with VDSS data on recipients of public assistance in two primary benefit programs: Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps) and Temporary Assistance to Needy Families (TANF). Participation rates and average number of months of participation for the years 2013, 2014 and 2015 were reviewed.

SNAP is the most frequently accessed program, averaging a 20% participation rate by the general population in Virginia over recent years. The former foster youth were more than twice as likely (48%) than the general population to enroll in SNAP, and tended to remain enrolled for one to two months per year longer, a difference of up to 15% longer (see Table 9).

For each year 2013 to 2015, the Virginia population (age 19 to 23) rate of participation in SNAP ranged from 18% to 22%, with an average of seven months participation per year. For the same time period, the participation rate of former foster youth ranged from 44% to 52%, for an average of eight and a half months.

**Table 9 – Participation in SNAP, Virginia 2013-2015**

	<b>General Population Age 19-23 N=571,818</b>	<b>Former Foster Youth Age 19-23 N=3,622</b>
<b>2013</b>		
<b>% Receiving SNAP</b>	22%	52%
<b>Average # months</b>	7.2	8.6
<b>2014</b>		
<b>% Receiving SNAP</b>	20%	48%
<b>Average # months</b>	7.6	9.2
<b>2015</b>		
<b>% Receiving SNAP</b>	18%	44%
<b>Average # months</b>	7.4	8.2
<b>2013-2014-2015</b>		
<b>% Receiving SNAP any time 2013-2015</b>	29%	62%
<b>Average # months total 2013-2015</b>	15.4	20.2

Source: Virginia Department of Social Services

TANF is the public assistance program accessed by parents of minor children for cash assistance and supportive services. The average annual TANF public participation rate was 2% in Virginia from 2013-2015 (Table 10). The former foster youth were two and a half times more likely than the general population to be enrolled in TANF, but both groups remained enrolled for an average of almost 11 months in the full three-year period.

For the years 2013-2015, the Virginia general population rate of participation in TANF was level at 2% with an average of six months participation per year. For this same time period, the participation rate of former foster youth averaged 6%, also for an average of six months per year. Participants tend to cycle on and off of TANF as their employment status and other circumstances change. There is a lifetime limit of 60 months (five years) for receipt of TANF benefits.



**Table 10 – Participation in TANF, Virginia 2013-2015**

	<b>General Population Age 19-23 N=571,818</b>	<b>Former Foster Youth Age 19-23 N=3,622</b>
<b>2013</b>		
<b>% Receiving TANF</b>	2%	6%
<b>Average # months</b>	6.4	5.7
<b>2014</b>		
<b>% Receiving TANF</b>	2%	6%
<b>Average # months</b>	6.3	6.2
<b>2015</b>		
<b>% Receiving TANF</b>	2%	6%
<b>Average # months</b>	6.3	6.1
<b>2013-2014-2015</b>		
<b>% Receiving TANF any time 2013-2015</b>	4%	10%
<b>Average # months total 2013-2015</b>	10.8	10.9

Source: Virginia Department of Social Services

**Parenthood and family situations**

Data that specifically addresses pregnancy, birth, parenthood, marriage or other indicators of family status is not available for the former foster youth cohort. However, utilization of TANF may be an indicator of current parenting. For an individual to be determined eligible for TANF, there must be a minor child in her or his care in the same household. Ten percent (n=379) of the former foster youth cohort received TANF at some point in 2013-2015. This is likely an underestimate of the number of youth who became parents. The birth rate is almost certainly higher. Many youth who bore children may not have been able to provide a home for their child, placing the child with relatives or even in foster care. Differences by gender are also relevant. It is likely that the TANF data represents primarily females. A male parent who is not living with his child would not be counted in TANF data.

**Health care**

Data on the health and health care access of the former foster youth is not available. However, information on health care coverage in the form of Medicaid is available. While some former foster youth may have health insurance coverage through employers, the number is not expected to be significant. Enrollment rates and average



number of months of enrollment in Medicaid for the years 2013, 2014 and 2015 were reviewed (Table 11).

Former foster youth were three times more likely than their age counterparts in the general population to be enrolled in Medicaid, and they remained covered for about a third longer (21 months vs. 14 months for the full three year period).

**Table 11 – Participation in Medicaid, Virginia 2013-2015**

	<b>General Population Age 19-23 N=571,818</b>	<b>Former Foster Youth Age 19-23 N=3,622</b>
<b>2013</b>		
<b>% Enrolled in Medicaid</b>	12%	45%
<b>Average # months</b>	7.2	8.8
<b>2014</b>		
<b>% Enrolled in Medicaid</b>	12%	40%
<b>Average # months</b>	7.3	8.8
<b>2015</b>		
<b>% Enrolled in Medicaid</b>	13%	40%
<b>Average # months</b>	7.1	9.0
<b>2013-2014-2015</b>		
<b>% Enrolled in Medicaid anytime 2013-2015</b>	18%	55%
<b>Average # months total 2013-2015</b>	14.3	20.8

Source: Virginia Department of Social Services

For each year 2013-2015, the Virginia population rate of enrollment in Medicaid was 12-13% with an average of seven months enrollment per year. For this same time period, the enrollment rate of former foster youth ranged from 40% to 45%, for an average of eight to nine months per year. Changing laws will have an effect on Medicaid enrollment as former foster youth who are eligible, enroll in the program up to age 26 under the Affordable Care Act. However, former foster youth who rely on Medicaid will be those who do not have coverage through employment.

**Criminal justice system involvement**

At this time, data from the Virginia former foster youth cohort has not been matched to data in criminal justice databases in Virginia. National data shows a high rate of involvement with the criminal justice system for former foster youth in comparison to



their non-foster care age peers. For example, in the Midwest Study, former foster youth at age 26 were five times more likely than their peers to have been incarcerated.

In summary, Virginia data confirms a range of poor outcomes for youth who aged out of foster care between 2008 and 2013. While the data reviewed is clearer in some domains, or on some measures, than others, it is apparent that a significant proportion of youth who leave foster care to live on their own are unable to manage self-sufficiently or productively in their first five years of independence and that they lack a strong foundation for improving their lives.

## **B. Adequacy of Independent Living Services**

To address the adequacy of existing independent living services, a review of what constitutes those services and the funding associated with these services is explained. This is capped with feedback on the adequacy of these services provided by the agency stakeholders and youth in focus groups.

Before age 18, "independent living" is not an allowable foster care goal, and permanency efforts should proceed with a sense of urgency. After age 18, the "independent living goal" reflects a planned program of services designed to assist former foster care youth age 18 to 21 prepare for self-sufficiency in adulthood.

Independent living services involve assessment, planning for adulthood, and very limited funding. The primary funding sources are the Virginia Children's Services Act (CSA), the federal Chafee Foster Care Independence Program (Chafee), and federal Education and Training Vouchers (ETV). Independent living services comprise a complement of services provided to youth in three overlapping groups: (1) all youth in foster care beginning at age 14 to 18; (2) youth in foster care age 18 to 19 who are expected to complete high school by age 19; and (3) youth age 18 to 21 who aged out of foster care at 18 or 19 and voluntarily participate in services.

Starting at age 14, all youth in foster care are assessed, and planning for adulthood begins and continues until the youth exits foster care, or to 21 for youth who turn 18 in foster care and voluntarily continue IL services until age 21. The standard assessment tool is the Casey Life Skills Assessment administered within 30 days of the youth's 14<sup>th</sup> birthday or within 30 days of youth older than 14 entering foster care and annually thereafter. Results of the assessment are addressed jointly between the youth and caseworker, reviewing strengths/needs, setting personal goals to master the skills of independence, documenting a transitional living plan and identifying resources. The assessment and transitional plan are updated annually and coordinated with the youth's foster care service plan. Services and resources are matched with identified needs for counseling, education, health care, housing, employment, money management, daily living skills, social relationships and effective communication.

Youth in foster care when they turn 18 who remain in high school or vocational/technical school and are expected to complete the program of study by age 19 may continue

receiving the full range of foster care services (including the foster care maintenance payment) until they graduate, in addition to independent living services. This is allowable under federal law and federal Title IV-E funds may be utilized.

Youth who age out of foster care at age 18 and youth who graduate before turning 19 after remaining in care to complete school, may voluntarily receive independent living services to age 21. However, these services are curtailed in comparison with the full array of foster care services. Because the youth are no longer eligible for placement services, the foster care maintenance payment is no longer available, precluding continued placement in a foster home. Group home and residential treatment facility placements are also not allowable.

Another group eligible for voluntary independent living services is those youth who were in foster care immediately prior to commitment to the Department of Juvenile Justice (DJJ); these youth are eligible upon their release from DJJ after age 18. They may opt to voluntarily receive independent living services from VDSS to age 21.

Basic independent living program services are funded by federal Chafee funds to assist youth in making the transition from foster care to self-sufficiency. Under federal guidelines, expenditures may be made on behalf of youth for academic support, postsecondary education support, career or vocational preparation, budgeting assistance, housing education and home management training, preventive health care activities, family support, mentoring, and supervised independent living and room and board. However, due to insufficient funding, Chafee funds are not used for room and board in Virginia. Instead, payments for rental or utility deposits may be made.

Virginia allocates Chafee funds (80% federal, 20% state) in three categories: basic allocations to each LDSS, private contractor funding, and state administration. The local allocation formula is based on LDSS percentage of statewide population of foster care youth (age 13 to 17 still in care, and 18 to 20 still receiving independent living services) for the previous 12-month period. To receive its allocation, the LDSS must complete an application to be approved by VDSS. Funds may supplement but not supplant other funds available for the same general purpose. The private contractor funding is awarded to Project Life, a collaborative effort between VDSS and UMFS (described under Other Efforts to Assist with Transition to Adulthood).

In local FY 2015 (June-May), the total Chafee allocation for Virginia was \$1,916,135 with the majority supporting LDSS services to youth (Table 12). However, in the past five years, Virginia's federal Chafee grant has gradually decreased almost 30%, from \$2,005,337 in FFY 2009 to \$1,418,699 in FFY 2015. This has reduced the average allocation per eligible youth per local FY from \$437 to \$383.



**Table 12 – Chafee Funding Allocation, Virginia FY 2015**

<b>Category</b>	<b>Amount</b>
LDSS purchase of services and local administration	\$ 1,187,299
Private contractor: United Methodist Family Services	\$ 550,000
State staff administration	\$ 178,836
<b>TOTAL ALLOCATION (\$1,532,908 federal, \$383,227 state)</b>	<b>\$ 1,916,135</b>

Source: Virginia Department of Social Services

A second funding source is the Education and Training Vouchers (ETV) program. This provides federal and state funds to help foster youth with expenses associated with college and postsecondary vocational training programs. Allowable expenses include tuition and fees, room and board, rental or purchase of required equipment, allowance for books and transportation, required residential training, and childcare. To be eligible for ETV funds a youth must be at least age 16, be eligible for Chafee funding, have received a high school diploma or equivalent (or GED), have applied for financial aid through the program they plan to attend, and maintain a cumulative grade point average of 2.0 on a 4.0 point scale. Youth still receiving ETV funding at age 21 may continue to age 23 if enrolled and making satisfactory progress toward completion of a program.

In federal FY 2014 (October-September) the total ETV allocation for Virginia was \$614,163, with the majority supporting LDSS services to youth (Table 13). Like Chafee funding, ETV is 80% federal, 20% state funded, and can supplement, but not supplant, other funds available for the same general purpose.

**Table 13 – ETV Funding Allocation, Virginia FY 2014**

<b>Category</b>	<b>Amount</b>
LDSS purchase of services	\$ 555,203
State staff administration	\$ 58,960
<b>TOTAL ALLOCATION (\$491,330 federal, \$122,833 state)</b>	<b>\$ 614,163</b>

Source: Virginia Department of Social Services

The federal portion of ETV funds has been reduced by about one-fourth over the past five years, from \$649,633 in 2010 to \$491,330 in 2014. Goods and services can be funded under ETV up to a maximum of the lesser of \$5,000 or the total cost of attendance per youth per state fiscal year. However, the Virginia ETV program does not receive adequate funds to allocate the full amount per student.

Each year LDSS must apply to VDSS for the ETV funding and identify the number of eligible youth who will be attending postsecondary education institutions or vocational training programs. The number of eligible youth statewide is divided by the total

allocation to determine a basic amount per youth, allocated to each locality based on its number of eligible youth. In SFY 2015, the basic amount per eligible youth was \$817. VDSS conducts a mid-year budget review to identify underutilization of funds and redistributes funds to LDSS seeking additional resources. In school year 2013-2014, a total of 575 youth received ETV-funded services in Virginia.

The third primary funding source is the Children's Service Act (CSA). LDSS must also work closely with the local CSA teams to fund additional services not covered by Chafee or ETV. As a part of the provision of foster care services, CSA is tasked with providing independent living services to youth age 18 to 21 who are transitioning from foster care to self-sufficiency. Through the multidisciplinary, community-based Family Assessment and Planning Teams (FAPT), funding must be approved in advance on a case-by-case, service-by-service basis. CSA-funded services may include, but are not limited to, mentoring, employment services, transportation, rental deposits, and counseling (when not covered by Medicaid). In addition, CSA funds a monthly housing assistance stipend of up to \$644 for youth age 18 to 21 who are voluntarily participating to receive independent living services and cooperating with the conditions of a transition plan. Unlike Chafee and ETV funds, CSA funds are state and local, with a local match that varies by locality. Some localities are more liberal than others in support of this population as local budget constraints can influence funding decisions.

Integrating these funding streams into a blended resource which best meets the needs of the greatest number of youth as well as individual youth is challenging for LDSS staff juggling multiple priorities. The limited funding negatively impacts LDSS ability to adequately serve youth age 18 to 21. However, LDSS staff continue to provide direct casework services to youth who choose to receive independent living services. These casework services include much of the foster care casework activity provided for youth under 18, i.e., assessment, planning, monitoring, and advocacy underpin continued efforts to achieve permanent connections with family, fictive kin, or supportive peers.

Another critical dimension of limitations to independent living services for youth 18 to 21 affects youth who choose to discontinue receiving services. Youth have the right to terminate services as well as the right to request resumption of services. Under the Code of Virginia (§ 63.2-905.1) the LDSS must restore services upon request if the youth has not turned 21 and the youth requests to re-enter services, signing a new agreement with the agency detailing terms and conditions of participation less than 60 days after the discontinuation of services. Once 60 days have passed, LDSS can no longer expend independent living funds or provide direct services.

Youth who do return within the 60 days are afforded the opportunity to work with a team of supportive professionals and other adults to re-assess short and long-term goals, plan participation in appropriate education or training, and address other factors such as substance abuse or mental health issues, lack of family support, social skills, and securing housing. A written agreement, reviewed quarterly, is required. These youth are eligible for all funding and independent living services as long as they comply with the terms of the agreement.



Taken in the context of this programmatic information about independent living services, the feedback received from the stakeholder focus group participants about barriers to successful transition to adulthood reflects further on the inadequacy of independent living services. To agency stakeholders, the lack of safe, affordable housing was primary. Youth are unable to find housing they can afford, cannot access housing vouchers, have no one to co-sign a lease, or require support and supervised independent living settings which are not widely available. The CSA-funded \$644 per month housing assistance stipend is inadequate to cover rent or other living expenses. Homelessness often results, which is likely to lead to involvement in the criminal justice system.

Stakeholders also observed that youth either cannot secure employment, or cannot earn a living wage, due to the lack of work skills which match available jobs, or because they lack interviewing skills or social skills. Youth do not have transportation to jobs, either because they cannot access public transportation, or cannot afford a vehicle, or have failed to obtain a driver's license.

Focus group participants expressed concern that many youth do not understand the reality of the need for postsecondary education in today's job market, or they have basic educational deficits that preclude college without substantial remedial work. Those who could benefit from the greater ease of living on a residential college campus may not be aware that they can access this. Many youth will not be able to make educational progress on normal timelines because multiple placements and school changes have put them behind. Despite the existing policy that allows youth to remain in foster care to age 19 to complete high school (or equivalency), these youth often need even more time to reach education or training goals.

Other youth may have cognitive deficits, developmental delays or untreated mental health needs, which are more difficult to address through the adult-serving systems. Medicaid waivers, which allow individuals with intellectual or developmental disabilities to receive community-based alternatives to institutionalization, are administered locally by Community Service Boards. Many youth will be placed on a waiting list for Medicaid waivers. The Department of Medical Assistance Services reported that as of September 15, 2015, statewide there are 7,719 individuals on the waiting list for a Medicaid Intellectual Disability Waiver and 1,747 on the waiting list for a Medicaid Developmental Disability Waiver. A segment of youth will fall between the cracks, with conditions that make self-sufficiency impossible but are not severe enough to qualify for Medicaid waivers that could support them. Other youth will become parents too early, multiplying their economic and emotional burdens.

Focus group participants observed that former foster youth often do not know how to access community resources. They do not know what may be available, whom to ask, or what to request. There was a consensus that youth need help accessing resources, whether it is a person to go to, or an online resource targeted to them, or an application on their cell phone. This is consistent with the observation that the youth often do not

have healthy family connections or permanent relationships with stable, supportive adults to whom they could turn in time of need, especially on the 24/7 basis fulfilled by family. Years of trauma in the home of origin and/or as a result of the separation and loss in foster care lead to a poor sense of self-worth and lack of self-advocacy skills.

Many stakeholders reported that young adults often return for services after saying "I wish I'd known" about the demands of living independently and their lack of preparation for it. Youth who are not living in or connected to family settings are further disadvantaged by not having an adult to turn to for help with day to day problem solving or when crises arise.

Focus group feedback identified the 60-day opt-back-in timeframe as a significant barrier, described as impractical and at odds with the nature of young adults. At the time they turn 18, many youth - whether in foster care or not - are ready to leave adult supervision behind and go out on their own. Or, after trying college or a training program they decide it is time to get away from rules. Their emotional sense of earned independence and associated risk-taking overtake what adults see as common sense. It may easily take longer than a 60 day period for the youth to find that he or she cannot maintain employment, cannot afford food and housing, or that going back to birth parents was not the solution imagined. Given the developmental characteristics of this age group, this short opt-back-in period means that many youth who are ready to receive help again do not get it because they realize the need too late. Without jobs, skills or housing, these youth have nowhere to turn but public assistance and other very limited adult-serving programs. At this point, many become homeless and/or engage in criminal behavior.

Other agency stakeholders identified LDSS staff turnover as a concern both because of the inconsistency this causes and because it increases workloads. In addition, there were concerns that caseworkers did not adequately prepare youth for independence. LDSS staff who participated in the focus groups acknowledged the challenges in preparing youth and identified inadequate funding for independent living services as a significant barrier to their assisting youth in the transition.

Youth who participated in focus groups were a combination of current and former foster youth. They articulated their perspective on what foster youth need and the adequacy of independent living services. The youth raised concerns about being ready for independence, with one youth saying, "Just because someone turns 18 doesn't mean they are prepared for adulthood and don't need assistance." Many of their comments centered on how difficult it is to achieve educational goals in the face of the challenges of daily living. They cited the need to know the educational opportunities available to them, an earlier start on planning postsecondary education, and earlier assistance when high school academics are not progressing well. Youth pointed out the challenges to focusing on education after aging out when worrying about the uncertainty of housing and other basic needs. Too many youth choose to forgo further education when they realize they have to support themselves. The youth acknowledged the impact of not having a family to return to, as one young woman offered: "Most 18-year olds are not on



their own. Some go to college and go back home to their parents after school ends and during breaks. Imagine not being able to go home during Christmas break." A sampling of additional comments by the youth, quoted in Table 14, speaks to the range and depth of their concerns.

**Table 14 – Virginia Current and Former Foster Youth Focus Group Input**

<p><b>In their own words . . .</b></p> <p><i>"Every person should have an opportunity to be the best they can be . . . We need support. We need to know that we haven't been given up on."</i> Ro'Dah*</p> <p><i>"There needs to be a bigger push for education at a younger age. Education is important and the youth need to be aware of it! The younger the better."</i> Sophia</p> <p><i>"Young people over the age of 18 need assistance with housing, job training, and education because they're going from having assistance to not having any. Youth under 18 need this so they don't have to stress about their 18<sup>th</sup> birthday and where they are going afterwards."</i> Cassie</p> <p><i>"We need enough financial support that will allow youth that are 18 and up to be capable of obtaining their own apartment until they are financially stable."</i> Mirian</p> <p><i>"[We need] resources to learn how to be independent. We need support and dedication to helping us succeed in life. We need preparation for young adulthood."</i> Jernice</p> <p><i>"Our generation is the future and to encourage an improved future, we need people to care."</i> Brittany</p>
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\* These youth gave permission to use their first names.

Another population inadequately served by independent living services is those youth who were adopted at age 16 or older. These youth have typically spent years in foster care before being adopted in their late teens. Despite the permanency of adoption, they share the negative foundation of youth who age out of foster care, including a history of trauma, lack of stability and early impermanence. They are eligible for only limited independent living services.

### **C. Other Efforts to Assist with Transition to Adulthood**

While Independent Living is a specific program of VDSS, a range of other resources helps these youth. In addition to services funded through VDSS, LDSS or CSA, a

variety of alternative private and non-profit providers assist youth transitioning out of foster care with support, tangible resources and case management services. Community-based resources and programs may offer supports to youth in achieving competency in daily living tasks, provide housing along with work or training opportunities, or meet food and clothing needs.

Agency stakeholder focus group participants frequently noted the value of the Great Expectations program for foster youth. A program of the Virginia Community College System, Great Expectations helps foster youth finish high school and access community college while supporting their successful transition to living independently. The program engages youth when program coaches collaborate with independent living service providers and provide outreach to area high schools. As staffing permits, Great Expectation coaches may begin working with youth as young as 14. Once students are older and ready to enter college, the program provides tutoring, assistance in applying for college admission and financial aid, career exploration and coaching, help securing and maintaining employment, life skills training, counseling and student mentors. The individual support and case management offered provides structure to help youth stay on track. Expanding from 5 schools to 18 schools since 2008, Great Expectations served 1,064 youth in 2015. From 2011 to 2015, a total of 188 former foster youth served by the program have achieved academic awards including GED or equivalent, occupational/technical certification, or an associate's or bachelor's degree.

The Virginia Tuition Grant Program assists foster youth to attend college. The program provides tuition and fees at any Virginia Community College for youth who have a diploma or GED and are in foster care or aged out of foster care at 18.

A new resource benefitting former foster youth is the extension of their access to health insurance through Medicaid. The federal Affordable Care Act established eligibility to age 26 for youth who have aged-out of the foster care system and who had previously received Medicaid while in foster care. Effective in 2014, all former foster youth are eligible for Medicaid up to the age of 26. This mirrors the Affordable Care Act provisions for coverage for young adults on their parents' insurance plans to age 26.

VDSS is cognizant of the challenges faced by older youth who age out of foster care. The growing literature on characteristics of this developmental stage and the deleterious outcomes experienced by so many youth are informing policy and shaping practice in this arena.

As one resource, VDSS funds Project Life (Living Independently, Focusing on Empowerment), a partnership between VDSS and UMFS, through the Chafee allocation. The mission of Project LIFE is to enhance the successful transition of older foster youth to adulthood by increasing the capacity of professionals working with youth to engage in sound, evidence-based practices to promote permanent connections and effective preparation for transition to adulthood. The project also aims to ensure meaningful youth input into policy and practice. Some former foster youth have been employed as youth outreach staff. In each of five regions across the state, an



Independent Living Consultant helps with ensuring youth response to the NYTD surveys and facilitates a network of youth focusing on youth empowerment. In the ten-month period ending June 2015, project staff engaged 152 youth.

In 2014, VDSS designed and implemented a new training curriculum for LDSS staff. Titled *Transition Planning with Older Youth in Foster Care* the course emphasizes six key concepts to strengthen services:

- Effective transition planning begins early, at puberty or when a teen enters care, affording youth opportunities to build skills and knowledge incrementally that will sustain their ability to fulfill adult roles and responsibilities;
- Tools such as the Casey Life Skills Assessment and trauma assessments should be explained and used with the youth on a regular basis to track progress and changes in priorities;
- The optimal venue for transition planning is within a team of individuals who care about and take a role in providing needed supports as the youth plans for leaving foster care;
- The transition plan is a living document, guiding all activities and services, that should be focused on the goals of highest priority, tracking progress and changing as needed as goals are added;
- Transition from foster care to adulthood is a process, not an event. All team members need to understand how a youth's trauma experiences and current circumstances may affect the process; and,
- Truly involving a youth in planning for successful adulthood is challenging and requires patience, flexibility and persistence of all team members. A youth who is not engaged is less likely to benefit from the opportunities provided.

The curriculum takes a holistic approach to transition planning and maximizing resources.

Also in 2015, VDSS has developed an online training video, *Transition Planning*, designed for older youth explaining transition planning and the youth's role in the process. During development, a cadre of current and former foster youth contributed to the content and shared their ideas for creating a product that would appeal to youth. The video tells youth what a transition plan should be and how it will help them. Video clips of youth sharing their own experiences emphasize the key concepts:

- the value of participating in the planning process;
- the domains of life which affect independence;
- the importance of the team in planning; and,
- the timeline for planning.

The video is posted online on the VDSS website on the Services for Older Youth page (<http://www.dss.virginia.gov/family/fc/independent.cgi>) and will be made widely available at various sites youth tend to access. It is anticipated that informed youth will be in a better position to know what should be available to them and will encourage them to expect and ask for resources from their caseworkers and others. To close the communication loop, workers participating in the new *Transition Planning* course view the video so that they know how to assist youth.



In conclusion, youth who are eligible for independent living services share a common set of barriers to successful transition to adulthood. All have experienced significant exposure to the trauma of separation and loss, not only in their own homes but also in foster care. For many, this has been exacerbated by the trauma of abuse or neglect, chaotic family life, physical and emotional deprivation, and a lifetime of focusing on survival rather than growth. Most have experienced multiple household moves (in their own homes as well as in foster care), accompanied by frequent changes in schools, adjustment to new expectations for behavior, and transient relationships with adults and peers. To this fragile foundation, add the impact of special needs and delays in normal development. The usual challenges of transition to adulthood are both multiplied and magnified for these youth. The need to maximize support and resources for them beyond emancipation into young adulthood is apparent.

### **Recommendations to Improve Outcomes in Transition to Adulthood**

Virginia ranks high among states in the rate of youth who age out of foster care at age 18 without having achieved permanency. However, from 2009 to 2013 the percent of Virginia youth exiting foster care due to emancipation dropped from 30% to 21% and, due to the overall decrease in the number of youth in care, the actual number who aged out of care significantly decreased: the 30% who aged out in 2009 represented 1,015 youth; the 21% who aged out in 2013 represented only 580 youth. While this is progress, it represents nearly 600 former foster youth per year facing the transition to adulthood alone. As discussed earlier, VDSS is strengthening efforts to improve permanency outcomes. The following recommendations are directed to both reducing the number of youth who turn 18 in foster care without permanency as well as improving outcomes in adulthood for youth who do age out of care.

#### **1. Implement the Fostering Futures initiative to extend supports and services for youth aging out of foster care and youth adopted after age 16.**

Fostering Futures is Virginia's name for provisions of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 that permits states to utilize federal Title IV-E funding to provide maintenance payments for foster youth age 18 up to 21. To qualify, youth must participate in education, training or employment, or be unable to do so due to a medical condition. More than a funding source, Fostering Futures would offer programming that recognizes the developmental challenges of the 18 to 21 age group (e.g., risk taking, inability to hear options/expectations until they are ready, ability to fail and try again) and aligns with the societal shift moving the age of independence to the early twenties. Programming built on a foundation of supports, oversight and opportunity for the youth to experience and practice independence with a safety net can help counter the cumulative effects of trauma and instability with financial, social and emotional support to age 21. In a civilized society, it is a widely held belief that parents should not give up on their children, nor should the state as it serves *in loco parentis* for these youth.



Only youth who are engaged in school, training, or employment, or are unable to do so due to a medical condition, will be eligible for Fostering Futures. The program will maximize opportunities and support for postsecondary education and employment for youth age 18 up to 21 while providing the means to access and afford safe, stable housing. The program will promote permanent relationships, improve lasting connections and provide opportunities for youth to live with a family, in many cases continuing to live in the current foster home. A family is better able to allow the youth to make mistakes and still have support and an opportunity to recover. Additionally, a foster parent can serve as a mentor as the youth transitions into early adulthood. Currently when a youth in a foster home turns 18, some foster parents are willing to allow the youth to continue to live there as an independent living setting while others terminate the placement.

Fostering Futures will also be available to young adults over age 18 up to 21 in two other categories: youth who were adopted from foster care after age 16 and are subject to an adoption assistance agreement, and youth who were in foster care immediately before commitment to the Department of Juvenile Justice and are discharged after age 18. These youth have experienced comparable backgrounds to youth who age out of foster care and require the same resources in transitioning to adulthood.

As a funding source, Fostering Futures will offset the impact of inadequate and decreasing funding for Independent Living Services (e.g. Chafee and ETV reductions), by utilizing federal IV-E funding to provide room and board. This will permit LDSS to access administrative funding for staffing through Title IV-E as well.

## **2. Improve programmatic support for kinship care to better support youth.**

Every young person needs a permanent place to go back to when things do not work out. Former foster youth tend to go back to their birth families after emancipation. Emphasizing placement with relatives as an alternative to foster care, or as a permanency option for youth in foster care, will facilitate family living for a greater number of youth during childhood, adolescence and young adulthood. Family ties are strong. Such an approach will better prepare extended families to help youth in young adulthood. This recommendation has three components.

### **a. Strengthen tangible supports for relatives to divert youth from foster care.**

Better options for placement with kin can be especially helpful for older youth. The older the youth when entering care, the less time there is for the birth family to stabilize and the less time to achieve permanency. Kinship care options have the potential to divert more older youth from foster care while maintaining youth in their own family system. VDSS is in the process of developing recommendations for regulations governing placement of children in kinship care to avoid foster care placement (as required by Senate Bill 284 (Chapter 530, 2014)). Concurrently, efforts should be made to increase financial support and access to resources for relatives who accept custody of children.

**b. Create a Custody Assistance program to expand relative placements as a permanency option.**

Custody Assistance is Virginia's name for provisions of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008, which permit states to utilize federal Title IV-E funding to provide maintenance payments to certain relative caregivers in a qualifying state subsidized guardianship program. In such a program, permanent kinship care placements can be subsidized.

To take advantage of federal funding, custody assistance would be available on behalf of children who have been in foster care at least six months, have been placed for at least six months with approved foster parents who are relatives of the child, and for whom the goals of return home and adoption have been addressed and ruled out. The relative foster parent must be willing to make a long-term commitment to the child and become the legal guardian. At the time the relative assumes custody, the child exits foster care and a monthly stipend is paid to the relative comparable to maintenance payments made to foster parents and adoptive parents under adoption subsidy.

Relatives who currently cannot accept responsibility for a child because there is minimal funding will be eligible for the same funding foster parents receive. Such a program will increase placements with relatives, creating another path to permanency, which will reduce the number of youth who age out of foster care. Further, a child who is permanently placed in subsidized guardianship after age 16 will be eligible to participate in the Fostering Futures program and funding up to age 21.

The value of this program is its expansion of permanency options for youth. It will not reduce expenditures because it will only serve youth who were already in foster care, already funded through the same funding streams. However, youth who can be placed permanently with relative guardians will have a permanent family and will no longer be in foster care.

**c. Make legislative changes addressing barrier crimes to lessen restrictions on foster and adoptive placements with relatives.**

A time limit on prohibited felony convictions, and a narrower range of types of applicable felony convictions, would enable more relatives to be determined eligible to foster and adopt, facilitating more placements for children with family in Virginia. A range of stakeholders should conduct a comprehensive review of the Code of Virginia sections identifying barrier crimes with the goal of recommending changes to create less restrictive rules that still ensure safe placement of children. Virginia law continues to be stricter than federal mandates on this issue despite state legislative changes in recent years to amend some restrictions. Existing restrictions continue to prevent relative placements for some youth.



### **3. Design and implement a program evaluation to assess impact of the above recommendations.**

The absence of outcome data hampers the ability to support and refine program structure and services. Including a plan for program evaluation with implementation of significant new programmatic offerings – Fostering Futures, Kinship Care, and Custody Assistance, as well as innovative efforts to increase adoption – will assure funders of program impact and effectiveness and provide a foundation for well-grounded programmatic refinements in statutes, regulations, policy, guidance and training. Research to inform policy in this arena is rapidly accumulating and should be systematically applied. A well-designed evaluation will address need for the program, assess program implementation and service delivery, measure program impact and outcomes, and appraise program efficiency and cost effectiveness. As part of this process, protocols can be established with other data systems to share relevant data for comparison purposes. An evaluation component will ensure accountability and demonstrate commitment to achieving the best outcomes for all children and families.

### **Conclusion**

VDSS and the many professional stakeholders and advocates who collaborate to serve children and youth continually seek to improve outcomes for children and youth across permanency options. In its role *in loco parentis*, the state has created through decades of legislative and regulatory action a foster care system designed to match or exceed the level of care provided to children who are raised in their families of origin. Despite access to federal resources to extend this level of care into young adulthood, Virginia continues to abruptly limit services and financial support to youth who are still in foster care when they reach the age of majority. The economic and social realities of today call for extending support and assistance to age 21 for youth who turn 18 in foster care.

If available resources are not invested in creating better outcomes for older youth exiting the foster care system, research shows that significant taxpayer funds will likely be expended for them as young adults to be housed in jails, homeless shelters and hospitals, and these youth will claim resources through public assistance programs and perpetuate the cycle of dependence through unprepared parenting. Targeted support and assistance to youth into young adulthood holds the promise of creating productive adults who are adequately educated, gainfully employed, managing self-sufficient households and positively contributing to their communities.

## **Appendix**

### **Legislative Mandate**

#### **2015 SESSION**

##### **VIRGINIA ACTS OF ASSEMBLY - CHAPTER 665**

An Act for all amendments to Chapter 3 of the 2014 Acts of Assembly, Special Session I, which appropriated funds for the 2014-16 Biennium, and to provide a portion of revenues for the two years ending, respectively, on the thirtieth day of June, 2015, and the thirtieth day of June, 2016, submitted by the Governor of Virginia to the presiding officer of each house of the General Assembly of Virginia in accordance with the provisions of § 2.2-1509, Code of Virginia.

[H 1400]

#### **Item 339**

K. The Commissioner, Department of Social Services, shall report on all efforts undertaken by the agency to increase adoptions of children from foster care. The report shall include the number, ages and other appropriate demographic data of children in foster care who are eligible for adoption, available information on the number who have special needs, and barriers to adoption of children in foster care. In addition, the report shall include information on current efforts to help foster care children who age out of the system transition to adulthood and options to improve that transition. The report shall include current trends for this population as compared to the general population related to employment, secondary and post-secondary educational attainment, living arrangements, dependence on public assistance, early parenthood and family situations, health care access, and involvement with the criminal justice system to the extent data are available. Furthermore, the department shall analyze the adequacy of independent living services and other current efforts to assist foster care youth with the transition to independence and provide recommendations to modify the appropriate services and programs in order to improve outcomes for this population in their transition to adulthood. The department shall engage other appropriate state agencies and stakeholders as necessary to develop the report. The department shall submit the report to the Governor and Chairmen of the House Appropriations and Senate Finance Committees by November 1, 2015.