

The Transition of Youth with Disabilities from the Child Welfare System

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Summary

Youth with disabilities are disproportionately represented in the child welfare system (Sullivan & Knutson, 2000; Weststat, 1993). Transition outcomes for youth in special education and for youth in foster care are poor. In comparison to their same-age peers, youth served by both foster and special education are more likely to be unemployed or under-employed, to struggle with poverty and homelessness, and less likely to be enrolled in postsecondary education or training (Courtney & Dworsky, 2005; Johnson, Stodden, Emmanuel, Luecking, & Mack, 2002). Youth with disabilities transitioning from foster care need access to high quality, research-based transition supports and services, coordinated services across systems, and services that are free of negative perceptions of both disability and foster care (Geenen & Powers, 2007; Hill & Lightfoot, in press). This summary presents a review of the literature on the transition of youth with disabilities from the foster care system, and findings from a small case study conducted on a transition program in a foster care agency.

Project Description

Children and Youth with Disabilities in Child Welfare

Although there is not a large body of research, it is undeniable that many of the 20,000 young people who age out of the foster care system every year (GAO,2004) have disabilities. The most rigorous studies of maltreatment of children and youth with disabilities estimate that the rate of maltreatment for children with disabilities ranges from 1.7 times (Westat, 1993) to 3.4 times (Sullivan & Knutson, 2000) greater than that of children without disabilities. A 2004 GAO report found that 30% to 40% of youth in foster care have chronic medical problems (GAO, 2004). Nearly half of the former foster youth in the Chapin Hall's 2005 Midwest Evaluation of Adult Functioning of Former Foster Youth

(Midwest Study) had received special education services (Courtney & Dworskey, 2005; Courtney, Terao & Bost, 2004). A 2006 report by Larson and Jefferys found that 40% of youth in the child welfare system who graduated from high school received special education services. Among non-graduates, the percentage receiving special education services rose to 58%. Other studies put the percent of children in foster care with disabilities as high as 50-80%, if mental and behavioral health problems are included (United Cerebral Palsy, 2006).

Foster Care Transition

Research has demonstrated that the transition from adolescence to adulthood is a challenging time for all young people (Collins, 2001; Osgood, Foster, Flanagan, & Ruth, 2004). As they reach the age of majority, youths are expected to become increasingly independent of family supports, as they move into new areas of education, employment, and independent living. For youths who are engaged with child-serving government systems, such as child welfare, special education, or juvenile justice, this transition can be even more difficult, due to a variety of factors, including a lack of family and parental supports, confusion over how to access those services that are available to them, and a lack of thorough, realistic planning for this transition period. Additionally, many of these youths must accomplish additional tasks, such as finding housing or arranging for medical care, that youth in more stable situations do not have to face (Osgood et al, 2004).

Chapin Hall's 2005 Midwest Study found that as they age out of care, youth face a broad spectrum of challenges to successfully transitioning to adult life. (Courtney & Dworskey, 2005). Almost 63% of the respondents who had left care were not enrolled in any kind of education or training program, and only 11% were enrolled in either a 2- or 4-year college program. Employment for these youth was sporadic and rarely provided financial security; indeed, fewer than half of the youth no longer in care were currently employed. Fewer than one half of the respondents reported receiving independent living services, such as employment services or training, and only 50% reported receiving educational services. A quarter of the respondents reported being "food insecure," (sometimes or often not having enough to eat) and about one in seven of those no longer in care reported that they had been homeless since leaving care. Nearly one half of the females in the study had been pregnant by age 19, and they were over twice as likely to have at least one child. Thirty seven percent those who had left care were not in school and not employed. (Courtney & Dworskey, 2005).

Other research supports these findings. Mech (1994) notes that adolescents in foster care have experienced many disruptions in their growing up; thus, they often require extensive supports, both tangible and intangible in their transition to independent living and adulthood. In 1999, the U.S. General Accounting Office found that youth transitioning from foster care to independent living often have not attained basic education goals, are dependent on public assistance, experience periods of homelessness after leaving care, and struggle with unemployment (GAO, 1999). A study by Foster and Gifford (2004) found that approximately one third of youth leaving foster care were receiving public cash assistance within two years of leaving care. Another study found that youth who have left care are

more likely to struggle with drug and alcohol abuse and have higher rates of unemployment (Massinga & Percora, 2004). Reilly (2003) found that "...a significant proportion of youth exiting the foster care system face serious difficulty in transitioning to life on their own." (p.740). Reilly's research data indicated that many of youth transitioning out of foster care were not prepared to live on their own at their time of discharge, often struggling to find safe places to live, gainful employment, adequate mental and physical health care, and adequate resources to prepare for their daily needs.

Transition for Youth with Disabilities

All youth with disabilities, not just those in the child welfare system, face barriers when they transition from youth serving systems to adult life. These youth may be interacting with many systems simultaneously, including the child welfare system, the adult disability system, the education system, the juvenile justice system, and potentially many others. Youth with disabilities are less likely to graduate from high school, find employment, and participate in postsecondary education than their same age peers (Johnson et al, 2002). Twenty-eight percent of youth with disabilities leave school without receiving a diploma; this percentage increases dramatically for youth with certain kinds of disabilities (Wagner, Newman, Cameto, Garzo, & Levine, 2005). For example, 44% of youth with emotional disturbances drop out of school (Wagner et al, 2005). About 30% of youth with disabilities attend postsecondary classes at either 2- or 4-year colleges; this is less than half the rate of postsecondary attendance for their same-age peers. (Wagner et al, 2005).

A recent Harris Survey found that people with disabilities were less likely to be employed either full or part time, twice as likely to drop out of high school and three times as likely to live in poverty as compared to people who do not have disabilities (National Organization on Disability/Harris Survey of Americans with Disabilities, 2004). Wagner et al (2005) found that the rate of employment for youth with disabilities lagged significantly behind the employment of youth in the general population (40% vs. 63%). Houtenville (2006), using Current Population Survey data, found that only 21.9 % of people aged 18-64 with a disability were employed between 1999 and 2003. One third of youth with emotional disturbances are not employed, or in school (Wagner et al, 2005). These youth are more likely than other youth with disabilities to live in foster care, criminal justice or mental health facilities or to be homeless (Wagner et al, 2005). Some estimates put the prevalence of youth with all types of disabilities in juvenile corrections at between 32% and 50% of the total juvenile corrections population (Quinn, Rutherford, & Leone, 2001).

Transition for Youth Served by Both Special Education and Child Welfare

As mentioned previously, there is very little research available on transition experiences and outcomes for youth with disabilities aging out of the foster care system. Geenen and Powers (2007) found that youth in this population had very little opportunity to practice self-determination skills prior to emancipation, although they were expected to be fully independent as soon as they had aged out of the system. They also found that although caregivers and service providers emphasized the importance of supportive relationships with caring adults as a key to a successful transition, most of the youth in the study

reported feeling disconnected, isolated, and without these kinds of adult supports. A case study by Hill and Lightfoot (in press) also found that although stable adult supports were universally recognized as critical, many youth with disabilities transitioning from care were without access to these types of relationships.

Lack of service coordination and collaboration for youth with disabilities transitioning from foster care also leads to challenges (Geenen and Powers, 2007; United Cerebral Palsy, 2006). Van Wingerden, Emerson, and Ichikawa (2002) note that the special education system is dependent on rigorous documentation, parental advocacy, and collaboration between agencies, the school district, and the youth's parents or guardians in order to be effective. They go on to say "a review of the literature and anecdotal data from the field suggest that the stories of foster children in special education are all too often, stories of unserved or underserved children, lost records, minimal interagency communication, and confusion over the roles of birth parents, foster parents, and social workers" (p.3).

Goerge and Van Voorhis (1992) examined the agency databases of the Illinois Department of Children and Family Services (DCFS) and the Illinois Board of Education (ISBOE). They found that more than six times as many foster children received special-education services according to ISBOE, as had been identified by DCFS. They say that this "...may mean that many children with special-education needs are going not only unserved but unnoticed" (Goerge & Van Voorhis, 1992, p.2). Other findings of the study indicated that foster children who receive special education services are, in general, older than the typical special-education population, and are disproportionately identified as having emotional disturbance as their primary disability.

Geenen and Powers (2006) evaluated the Individualized Education Plans (IEPs) of transition-aged youth who were placed in both special education and foster care, comparing them with the IEPs of transition-aged youth who were placed in special education only. They found that the IEPs of the youth in care had low-quality transition plans, with vague goals and fewer goals listed around independent living skills and post-secondary education than their peer group. Additionally, slightly less than a third of the foster youth were not present at their IEP meeting, and an advocate (such as a family member, foster parent, or other educational surrogate) was absent at 57.8% of their meetings. None of the IEP transition plans "...acknowledged the transition planning that occurs through child welfare" (p.12). Although the research is quite limited, it clearly points to a need for greater education, service coordination, and appropriate services for youth with disabilities transitioning from foster care.

Geenen and Powers (2007) reported that foster youth with disabilities often struggle with feelings of being "abnormal" or outside of the typical adolescent experience. Youth, they explain, do not want to be viewed as different, or in need of special services or supports. Hill and Lightfoot (in press) had similar findings, with both the youth with disabilities in the transition program and the transition program staff reporting at best neutral and often negative perceptions of disability and disability-specific services, as well as a strong reluctance to "label" youth with disabilities with any additional negative connotations. Research also indicates that for those youth who are referred to disability

services, many youth as well as their social workers find the services to be unavailable, inappropriate, or not sensitive to the issues associated with foster care (Geenen & Powers, 2007; Hill & Lightfoot, in press). As well, foster parents and other child welfare service providers, as mentioned previously, are not well-informed about disabilities and disability-specific services (Geenen & Powers, 2007).

Methods and Findings

Methods

A literature review was conducted to examine the relevant findings on outcomes for youth with disabilities aging out of foster care. To date, there have not been large scale studies completed on this population. Additionally, a small qualitative case study was completed of a transition program in a foster care agency in the Upper Midwest. Given the extremely small sample size (6 staff and 3 youth were interviewed) findings from this study are not representative. However, they may begin to cast light on areas for future research in the area.

Findings

The findings from the literature review and case study indicate that there is a critical need to improve services and supports for youth with disabilities transitioning from the foster care system. Areas for further research include:

Best practices in transition: Findings from both the case study and the literature indicated that youth with disabilities who are transitioning from foster care are not able to access what have been identified as “best practice” in transition in the same way that other youth are able to. Research-based interventions to improve transition outcomes should be adapted so they are accessible and appropriate to all youth, including youth with disabilities in foster care. These include: youth involvement in transition and future planning, increasing youth engagement in education, youth-centered career planning including internships, job training, and part time work, support for post-secondary education, mentoring experiences and connections with caring adults, and support for family involvement, systems collaboration (Geenen & Powers, 2007; Hill & Lightfoot, in press; National Alliance on Secondary Education and Transition, 2005). Further investigation is needed in identifying the barriers to accessing the highest quality services and supports for all youth in transition from foster care.

Service providers perceptions and knowledge of disability: There is clearly a need for more efforts to promote a positive image of disability and awareness of disability-specific service among child welfare workers and other youth service providers. Many studies have shown that social workers who are not in the disability field are not comfortable working with people with disabilities (Manders, 1996), have little information about disabilities (Lightfoot & LaLiberte, 2006) and are in need of disability training (Lightfoot & LaLiberte, 2006; Orelove, Hollahan & Myles 2000). While negative perceptions cannot be changed

overnight, providing specific training to social workers and other service providers on alternate, non-medical model perceptions of disability could begin to bring about positive change in the way that disability is perceived and understood. In particular, there is a key need for social workers to have training on how to integrate a positive perception of within a strengths perspective practice approach. This training should be integrated into both academic and post-academic training, such as professional in-services or licensure trainings, and should not be limited to those in the field of disability services.

Youth perceptions of disability/self advocacy/self determination: All youth emancipating from foster care should be given the opportunity to practice self-determination and self-advocacy skills prior to the end of care. This is particularly crucial for youth with disabilities who are preparing to transition from care. While youth with disabilities in general lack positive role models (Burgstahler & Cronheim, 2001), youth in the child welfare system may have even less access to these role models. Many studies have shown that youth with disabilities need exposure to peer and mentor role models (Burgstahler & Cronheim, 2001; Lynch & Lynch, 1997; Rousso, 2001). Youth should have opportunities to participate in self-directed IEP/ILP meetings, leadership development activities, and other activities that allow them to build these important skills.

High quality, universal services: Adolescents are often resistant to any label that sets them apart from their peer group and may reject services that require specific labels for entry. If programs were designed to help any youth that needed assistance, such as independent living skills development, job hunting, or post-secondary training, youth would be able to receive such services without obtaining a disability label. An alternative to developing universal programs is for programs that serve youth with disabilities to downplay the disability label in the marketing of its services to youth, so a youth who is apprehensive of his or her disability might not feel so uncomfortable in initially obtaining its services. However, programs must be careful not to play into the negative perceptions of disability, and find ways to introduce a positive perception of disability within their programs.

Conclusion

Adult outcomes for youth with disabilities transitioning from foster care are troublingly poor. It is clear that current services and supports are not adequately meeting the needs of this population. Research (Geenen & Powers, 2007; Geenen & Powers, 2006, Hill & Lightfoot, in press) has indicated that changes need to be addressed at a systemic level, as well as in work with individual clients. Changing program models to be more universal and inclusive, working to help programs collaborate and coordinate services, and increasing education and knowledge about disabilities and foster care for social service providers in all youth-serving systems, will help to lead to better outcomes for youth.

Discussion and Reflection Questions

1. Universal services are one way to provide services to youth with disabilities. Discuss the strengths and weaknesses of a universal approach to providing services to youth with disabilities in foster care.
2. This module discusses some of the barriers facing youth with disabilities transitioning from foster care. What barriers do you think that these youth face in your community? Brainstorm some strategies for reducing each of these barriers.
3. What are some of the ways that systems coordination could be achieved among the various services that are mandated to provide services to youth in transition?
4. Lack of knowledge of child welfare workers about disability, and of disability professionals about child welfare, can hinder the services to youth with disabilities in child welfare foster care. Think about your own knowledge, skills, attitudes and abilities about child welfare, disabilities and transition. In which areas do you need more training, knowledge or skill development? How will you go about getting the information and training that you need to provide better services to these youth?

Selected References for Additional Readings

Burgstahler, S. & Cronheim, D. (2001). Supporting peer-peer and mentor-protégé relationships on the Internet. *Journal of Research on Technology in Education*, 34(1), 59-74.

Collins, M. (2001). Transition to adulthood for vulnerable youths: A review of research and implications for policy. *Social Service Review*, p. 272-291.

Courtney, M. and Dworsky, A. (2005). *Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Age 19. Executive Summary*. Chicago, IL: Chapin Hall Center for Children.

Courtney, M. E., Terao, S., & Bost, N. (2004). *Evaluation of the adult functioning of former foster youth: Conditions of Illinois youth preparing to leave state care*. Chicago, IL: Chapin Hall Center for Children.

Foster, E. & Gifford, E. (2004, October). Challenges in the transition to adulthood for youth in foster care, juvenile justice, and special education. *Network on Transitions to Adulthood Policy Brief*, 15.

Geenen, S. & Powers, L. (2007, August). "Tomorrow is another problem." The experiences of youth in foster care during their transition into adulthood. *Children and youth services review*, 29 (8), 1085-1101.

Geenen, S. & Powers, L. (2006). Transition planning for foster youth. *The journal for vocational special needs education*, 28 (2), 4-15.

Goerge, R. & Van Voorhis, J. (1992). Special-education experiences of foster children: an empirical study. *Child Welfare*, 71 (5), 419-437

Hill, K. & Lightfoot, E. The dilemma between easing service access through a clear diagnosis of disability and unease in assigning labels to people with disabilities: A case study illustration using foster care transition services. Manuscript submitted for publication.

Houtenville, A. (2006). "Disability Statistics in the United States." Ithaca, NY: Cornell University Rehabilitation Research and Training Center. Retrieved November 28, 2006 from : www.disabilitystatistics.org.

Johnson, D., Stodden, R., Emmanuel, E., Luecking, R., & Mack, M. (2002). Current challenges facing secondary education and transition services: What research tells us. *Exceptional Children*, 68 (4), 519-531.

Larson, A. & Jefferys, M. (2006). High school graduation and child welfare: A description of the education status of older Minnesota adolescents in the academic year after substantiated maltreatment findings. Minn-Link Child Welfare Special Topic Report 1. Center for Advanced Studies in Child Welfare, University of Minnesota. <http://cehd.umn.edu/SSW/cascw/research/publications.asp>

Lightfoot, E. & LaLiberte, T. (2006). Approaches to child protection case management for cases involving people with disabilities, *Child Abuse & Neglect*. 30 (4), 381-391.

Lynch, R. K. & Lynch, R. T. (1997). Pursuing post-secondary education or training. In T.Harrington (Ed.), *Handbook of career planning for students with special needs* (2nd ed, pp. 293-318). Austin, TX: PRO-ED.

Manders, J. E. (1996). Children with disabilities in the child protective services system: the impact of disability on abuse investigation and case management. Athens, GA: University of Georgia.

Massinga, R. & Pecora, P. (2004). Providing better opportunities for older children in the child welfare system. *Future of Children*, 14(1), 151-173. Retrieved July 17, 2005 from www.futureofchildren.org.

Mech, E. (1994). Foster youth in transition: Research perspectives on preparation for independent living. *Child Welfare* 73(5), 603-623.

National Alliance on Secondary Education and Transition (2005). National standards and quality indicators: Transition toolkit for systems improvement. Retrieved May 14, 2008 from: <http://www.nasetalliance.org/toolkit/index.htm>

National Organization on Disability and Harris Survey (2004). Landmark disability survey finds pervasive disadvantages. Retrieved October 21, 2006 from [National Organization on Disability and Harris Survey](#)

Orelove, F., Hollahan, D., & Myles, K. (2000). Maltreatment of children with disabilities: Training needs for a collaborative response. *Child Abuse & Neglect*, 24(2), 185-194.

Osgood, D., Foster, E., Flanagan, C., & Ruth, G. (2004). Why focus on transition to adulthood for vulnerable populations? (Research Network Working Paper No. 2). Network on Transitions to Adulthood. Retrieved July 19, 2005 from: <http://www.transad.pop.upenn.edu/news/vulnerable.pdf>.

Quinn, M., Rutherford, R., & Leone, P. (2001). Students with disabilities in correctional facilities. Arlington, VA: ERIC Clearinghouse on Disabilities and Gifted Education, Council for Exceptional Children. (ERIC Document Reproduction Service No. ED461958).

Reilly, T. (2003). Transition from care: Status and outcomes of youth who age out of foster care. *Child Welfare* 82 (6), 727-746.

Rouso, H. (2001.) What do Frida Kahlo, Wilma Mankiller and Harriet Tubman have in common? Providing role models for girls with (and without) disabilities. In Rouso, H. & Wehmeyer, M. (Eds.). *Double Jeopardy: Addressing gender equity in special education*. Albany: SUNY Series, the Context of Education.

Sullivan, P.M. & Knutson, J.F. (2000). Maltreatment and disabilities: A population-based epidemiological study. *Child Abuse & Neglect*, 24, 1257-1274.

U.S. Department of Health and Human Services. (1999). Title IV-E Independent living programs: A decade in review. Washington, DC: U.S. Government Printing Office.

United Cerebral Palsy and Children's Rights (2006). A case for action for children and youth with disabilities in foster care. Retrieved October 12, 2006 from: <http://www.ucp.org/uploads/ForgottenChildrenFINAL.pdf>

United States Government Accountability Office (2004). Foster youth: HHS actions could improve coordination of services and monitoring of states' independent living programs. (GAO-05-25.) Washington, DC: Author.

United States Government Accountability Office (1999). Foster care: effectiveness of independent living services unknown. (GAO/HHES-00-13). Washington, DC: Author.

Van Wingerden, C., Emerson, J., & Ichikawa, D. (2002). Improving special education for children with disabilities in foster care (Education Issue Brief). Seattle, WA: Casey Family Programs.

Wagner, M., Newman, L., Cameto, R., Garza, N., & Levine, P. (2005). After high school: A first look at the postschool experiences of youth with disabilities. A report from the National Longitudinal Transition Study-2. Menlo Park, CA: SRI International.

Westat, Inc. (1993). A report on the maltreatment of children with disabilities. Washington, DC: National Center on Child Abuse and Neglect.

Potential Guest Speakers

Elizabeth Lightfoot, PhD

Dr. Lightfoot has an extensive background in Public Policy with a specialization in disability policy and services. Dr. Lightfoot is the Principle Investigator on the “People with Disabilities and the Child Welfare System” project, and continues to conduct research in the area of child protection and disabilities.

Katharine Hill, MSW, MPP, LISW

Ms. Hill is a doctoral student at the School of Social Work and the research assistant on the “People with Disabilities and the Child Welfare System” project. Ms. Hill has extensive background in the area of special education transition and plans to continue her research into the transition of youth with disabilities from the child protection system.