Youth with Disabilities in Foster Care: Identification and Support

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Snapshot of Children and Youth in Foster Care

- 427,910 children and youth in care FY 2015 (US DHHS, 2016)
  - 52% males; 48% females
  - 44% 1-6 years old; 30% 8-13 years old; 26% 14–20 years of age
  - 43% White; 24% Black/African American; 21% Hispanic; 2% American Indian/Alaskan Native; 1% Asian; 7% two or more races; 2% unknown
    - Black/African American and American Indian/Alaskan Native youth are overrepresented
    - Concordance in racial identity between older youth and child welfare records only 64.7% (Schmidt, et al., 2015)
Overall Placement and Discharge

- **Placement:** More than 90% of children and youth are placed in foster care due to child neglect or abuse or parental drug abuse
  - 30% live in kinship care, 45% non-relative placement; 6% group home, 8% institutional placement
  - 40% are in foster care for one year or less; 25% two years; 11% three years; 15% three years or more

- **Discharge:** 51% are reunified, 6% go to other family, 22% adopted, 11% other guardianship or other agency
  - Over 10% or 21,000 youth are discharged through emancipation or runaway each year
Key Barriers During Foster Care

- Barriers reported in the Northwest Alumni Study of 659 young adults who exited care (Pecora, et al., 2006)
  - Average of 6.5 foster care placements over 6.1 years
  - About one-third of youth reported 10 or more school changes from elementary to high school
  - About one-third of foster care alumni reported self-perceived maltreatment while in care
- Related barriers include lack of overall adult support (Kerker & Dore, 2006) and adult support around trauma (Zetlin, Weinberg, & Shea, 2010); low expectations (Quest, et al., 2012); and restricted opportunities for participation in typical activities (Schmidt et al., 2014).
Outcomes for Youth Exiting Care

- On time high school graduation rate of 50% vs. 70% general population (Wolanin, 2005)
- At age 19, 39% vs. 59% enrolled in in postsecondary education (Courtney and Dworsky, 2006)
- One year after leaving care, 1:5 had experienced homelessness (Pecora, Kessler, et al., 2006)
- Former foster youth appear more likely to become early parents than do other young adults or youth remaining in care (Courtney & Dworsky, 2006)
Later Young Adulthood Outcomes

- At 25-27 years of age:
  - Employment rate of 48.3% vs 79.9%
  - Median annual earnings $18,000 lower
  - 8% vs. 46% graduated with a two- or four year postsecondary degree
  - Incarceration rates 10 times greater

(Courtney et al., 2011)
Youth with Disabilities in Foster Care

- Historically, limited overall attention given or research conducted related to children and youth with disabilities in foster care
  - Children and youth with disabilities not identified
    - Disability not systematically documented in child welfare administrative databases
    - History of little interagency coordination (e.g., Geenen & Powers, 2006)
    - FERPA and IDEA restrictions
    - Conflicting interpretations of Higher Education Act
    - Lack of consistency in disability definition and data sources
Disability Prevalence

- Most studies of children and youth in care suggest 30-50% have disabilities (e.g., Gao, 2004; Lambros, et al., 2010; Westat, 1991; Wulczyn, et al., 2009)
  - Majority have emotional and behavioral disabilities
  - Prevalence could be 70% when all youth with mental health diagnoses are included
  - In examining only child welfare data, Lightfoot et al., 2011 found a rate of 27.9% for children age 5 or older

- Recent studies comparing child welfare and special education databases suggest 60% prevalence for older youth with disabilities (Hill, 2012, Schmidt, et al., 2013), and 25% prevalence for youth with developmental disabilities (Powers, et al., 2012; Schmidt, et al., 2013)
Mental Health Disability Prevalence

- Northwest Foster Care Alumni Study (Pecora, et al., 2005):
  - 54% had a diagnosed mental health problem
  - 25% PTSD
  - 20% major depression
- Midwest Evaluation Study (Courtney, et al., 2011):
  - 33% social anxiety
  - 25% depression
  - 60% PTSD
  - 14.5% taking psychotropic medications
Barriers and Outcomes Youth with Disabilities in Foster Care

- First and only major comparative study conducted by Westat (1991). Compared to foster youth without disabilities, those with disabilities were less likely to:
  - Be employed
  - Graduate from high school
  - Have social support
  - Be self-sufficient

- During high school, youth in care with disabilities had lower grades, changed schools more frequently, and earned fewer credits towards graduation than either youth in foster care without disabilities or youth with disabilities but no foster care (Geenen & Powers, 2006)
Barriers and Outcomes for Youth in Care with Disabilities

- Compared to youth in care without ID, those with ID had more placement instability and they were 61% less likely to be placed in kinship care (Slayter & Springer, 2011)
- Compared to youth in care without disabilities, youth in care with disabilities had greater placement instability and they were less likely to have permanency plans involving family of origin (Hill, 2012)
- Youth with disabilities were more likely to be in restrictive foster placements than youth without disabilities (Schmidt, et al., 2013)
  - Those youth with ID were in the most restrictive placements
Barriers and Outcomes: Youth in foster care with disabilities

- Only 16% of foster youth with ED graduated from HS; 18% left HS because incarcerated (Smithgall, 2005)
- Compared to former foster young adults without physical and/or mental health conditions, those with physical and/or mental health conditions had lower levels of economic stability, employment, educational attainment, physical health and self-esteem (Anctil, et al., 2007a and 2007b)
- Several qualitative studies have documented numerous struggles and poor outcomes for older youth with disabilities in and/or exiting foster care (e.g., Geenen & Powers, 2007; Quest, et al, 2012; Zetlin, 2006)
Key Policy Initiatives

- The Foster Care Independence Act of 1999 (Public Law 106-169) funds independent living program services, including housing and postsecondary support.
- The Promoting Safe and Stable Families Amendments of 2001 (Public Law 107-133) funds educational training vouchers.
- The IDEA 2004 Reauthorization enables foster parents to serve as educational surrogates for youth in care.
Key Policy Initiatives

- The Fostering Connections to Success and Increasing Adoptions Act of 2008 (Public Law 110-351), limits school placement change, gives states option to extend care to age 21 for youth in college and/or working, and requires a written transition plan for exiting care
- The Uninterrupted Scholars Act of 2013 (P.L. 112-278) amends FERPA to enable sharing of information between schools and child welfare
- Every Student Succeeds Act (ESSA) (P.L. 114-95) Reinforces need for school-child welfare collaboration and maintaining stability of school placements
- State tuition waivers and peer-driven advocacy and support programs (e.g., FosterClub, Guardian Scholars)
Intervention Research to Improve Transition Outcomes

While growing evidence documents very concerning educational and transition disparities, which appear even worse for youth with disabilities, very little research has validated effective intervention approaches.

Three RCTs conducted to evaluate Foster Care Independent Living Programs (ILP) found no significant differences, after controlling for youth’s age, except suggesting that ILP may encourage youth to remain in foster care longer and, as a result, complete more preparation activities (Courtney, et al., 2011a; Courtney, et al., 2011b; Courtney, et al., 2011c).
Our Research: Youth in Foster Care with Disabilities

- Interrelating experimental (RCT) and qualitative studies to systematically evaluate outcomes and processes
- Intervention model centered on self-determination enhancement and rooted in self-efficacy theory
  - Acting as the primary causal agent in one’s life and making choices and decisions regarding one’s quality of life free from undue external influence or interference (Wehmeyer, 1996)
  - Self-directed action to achieve personally valued goals (Powers, et al., 1996)
  - Intrinsic motivation driven by universal needs for competence, autonomy and relatedness (Deci & Ryan, 2002).
Self-determination Enhancement

- Increasing self-determination involves learning to apply skills such as setting goals, planning, negotiation, problem-solving, managing discouragement and tracking accomplishments, rather than focusing on building typical transition skills (e.g., budgeting, cooking, work behaviors).

- Can be incrementally acquired, expressed and refined during movement through developmental milestones vs. being a fixed attribute.

- Expression of self-determination is clearly culturally defined, however fundamental motivation for control over life decisions, activities, and relationships appears universal.
Essential Ingredients for Increasing Self-determination

• Having knowledge to make informed decisions
• Being exposed to opportunities to do activities, take risks, assume responsibilities
• Learning and practicing skills in self-direction and working with others
• Getting support from trusted others

Inclusion and Interdependence

Primary objectives: Experience and self-attribute success in achieving goals and managing barriers
Related Research Findings

- Meta-analysis of 22 studies with youth found that self-determination skills can be increased (mean ES of 1.38 for interventions) (Algozzine, et al., 2002)
- Findings from RCT with 371 youth found that participation in various self-determination skill development interventions increased self-determination (Wehmeyer, et al., 2010)
  - Young people with high self-determination are more likely to be employed and live independently (Wehmeyer & Schwartz, 1997; Wehmeyer & Palmer, 2003)
  - Across 14 studies, evidence found for a protective effect of self determination on sexual risk behaviors (Gloppen, David-Ferdon, & Bates, 2010)
“My Life” Model

- Youth-directed coaching from an adult or more experienced near peer
  - Provide consistent, transparent, and accepting relationship
  - Introduce youth to achievement, partnership, and self-regulation self-determination skills
  - Coach youth through experiential activities in pursuing their goals and managing barriers (at least 33% of time)
  - Support youth to convene a youth-led transition planning meeting and develop support agreements with allies

- Workshops with peers and successful near peers: youth-defined topics, peer support and fun
  (Geenen, et al., 2007; Phillips, et al., 2015; Powers, et al., 2012)
Overview of Experimental Studies

Series of studies reflecting a cycle of development, efficacy evaluation, and model refinement and adaptation

1. Take Charge - Initial development and testing of self-determination model for youth in secondary special education (Powers, et al., 2001a, 2001b)
2. My Life Pilot - Tailoring and initial testing for youth in special education and foster care (Powers, et al., 2012)
3. Project Success – Efficacy testing for improving secondary education and related outcomes (Geenen, et al., 2013)
4. Better Futures – Adapted for postsecondary focus and initial outcome evaluation; Summer Institute component added (Geenen, et al., 2014)
5. My Life Efficacy Study – RCT for youth with and without disabilities in foster care (analyses underway)
Across the Studies...

- More than 650 youth in special education and foster care, ages 14-18.5 at study enrollment
- Population-based, inclusive recruitment
- Assign youth randomly to intervention or community as usual services (Powers, et al., 2012 study had ILP comparison condition)
- High fidelity and focused retention management (Blakeslee, et al., 2013)
- Follow-up for 6 -12 month post intervention
- Relatively low attrition compared to many other studies involving disadvantaged, transition-aged youth
Outcomes: Self-determination, Transition and Related Measures

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Study</th>
<th>Intervention Effect Size at Follow-up</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-determination</td>
<td>1,2,3,4</td>
<td>Moderate to large effects</td>
</tr>
<tr>
<td>Hopelessness</td>
<td>4</td>
<td>Large effects</td>
</tr>
<tr>
<td>Engagement in Educational and Transition Planning (post-intervention)</td>
<td>1,2,3,4</td>
<td>Moderate to large effects</td>
</tr>
<tr>
<td>Credits toward HS Graduation</td>
<td>3</td>
<td>Moderate effects</td>
</tr>
<tr>
<td>Postsecondary Preparation</td>
<td>3,4</td>
<td>Moderate to large effects</td>
</tr>
<tr>
<td>Career Planning/Preparation</td>
<td>3,4</td>
<td>Moderate to large effects</td>
</tr>
<tr>
<td>Independent Living Preparation</td>
<td>2</td>
<td>Moderate effects</td>
</tr>
<tr>
<td>Mental Health</td>
<td>3,4</td>
<td>Moderate to large effects</td>
</tr>
<tr>
<td>Quality of Life</td>
<td>2,4</td>
<td>Moderate effects</td>
</tr>
</tbody>
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## Outcomes: Transition Milestones

<table>
<thead>
<tr>
<th>Milestone</th>
<th>Study</th>
<th>Control vs. Intervention</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School Completion</td>
<td>2</td>
<td>50% vs. 72%</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>52% vs. 65%</td>
</tr>
<tr>
<td>Postsecondary Participation</td>
<td>4</td>
<td>36% vs. 73%</td>
</tr>
<tr>
<td>Employment</td>
<td>2</td>
<td>28% vs 47%</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>37% vs 60%</td>
</tr>
<tr>
<td>Criminal Justice Involvement</td>
<td>5</td>
<td>15.7% vs. 5.4%</td>
</tr>
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Youth Perspectives

- I started making goals. I started changing my life. I started getting a different state of mind. It felt good, too...

- “I spent half a day at the school bothering them about letting me go back [to school]. I had this call about a day and a half later saying we have accepted you. They said this kid is the first person who has ever come in to apply for herself.”

- “So if I can accomplish one thing, and then one thing went to another thing, that made me feel that I had hope that I could do it..”.

- “Practically everything that I've learned has become a habit.”

- “Instead of being like, okay, I'm done, it makes me want to be like, what can I continue doing so when I look back and can say, you know, I did a lot.”
Uptake and Policy Impacts

- My Life designated as an exemplary national model for positive youth development by the Center for the Study of Social Policy
- My Life study paper incorporated into the What Works Clearinghouse; design standards met without reservation
- Better Futures study included as level 2 EBP in California Evidence Based Clearinghouse for Child Welfare
- Several local and national organizations have proactively adopted My Life: A certification training program has been developed
- Important qualitative data gathered related to effective coaching and mentoring strategies, experiences of youth exiting high school and foster care, and strategies for maintaining contact with youth during transition (as required by CFCIP; Public Law 106-169; National Youth in Transition Database) (e.g., Blakeslee, et al., 2013; Quest, et al., 2012)
Implications

- Young people with disabilities – even when doubly disadvantaged by foster care – can transition toward successful adult lives if provided with youth-directed support and opportunities to build self-determination and pursue their goals.

- Urgent need for further rigorous research to identify and validate:
  - Systematic methods for identifying children and youth with disabilities in foster care
  - Effective approaches for promoting improved outcomes of children and youth with disabilities in foster care
Thank you for thinking about youth with disabilities in foster care!

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