

FOSTER PARENTS' PERCEPTIONS OF INDEPENDENT LIVING SERVICES FOR  
YOUTH WHO AGE OUT OF THE SYSTEM

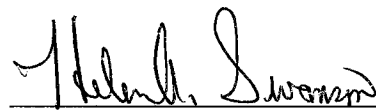
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## ABSTRACT

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Foster Parent's Perceptions of Independent Living Services for Youth who Age Out of the System  
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Every child is entitled to a loving and stable home. Unfortunately, many children in America do not have a family to love them, a place to call home, or the stability of knowing where they will go to school year after year. According to statistics by the U.S. government, there are currently over half a million children in the foster care system in the United States. Only about half of these children will return to their parents. Every year, approximately 18,000 youth will age out from the foster care system when they reach the age of 18 or graduate from high school.

This research project is designed to record how well foster parents believe the foster system does in preparing foster youth who turn 18 while in care for adulthood and independence. Foster parents' perceptions are important because they are there day in and day out with foster youth. They know which services are being provided and which services are not being provided that would be helpful. Foster parents see these youth leave the foster system with no family to turn to and no support.

The two research questions for this study were: (1) How well do the foster parents believe the foster system prepares foster youth who age out of the system for adulthood? and (2) What do foster parents believe are the needs for foster children who age out of the system to prepare them for adulthood?

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## CHAPTER I

### INTRODUCTION

Every child is entitled to a loving and stable home. Unfortunately, many children in America do not have a family to love them, a place to call home, or the stability of knowing where they will go to school year after year. According to statistics by the U.S. government, there are currently over half a million children in the foster care system in the United States. Only about half of these children will return to their parents. Every year, approximately 18,000 youth will age out from the foster care system when they reach the age of 18 or graduate from high school. According to the Child Welfare League of America (CWLA) National Data Analysis System 2001, youth who age out of the foster care system are more likely than youth in the general population to not finish high school, be unemployed, in prison, homeless, teen parents, and dependent on public assistance. According to Propp, Ortega, and NewHeart (2003), it was not until the late 1970's that attention was given to the frequency of foster youth aging out of the system. During the 1980's, adolescents in out-of-home care with little hope of reunification with birth families or adoption made up approximately 50% of the caseload. As a result, every year thousands of adolescents were discharged from the foster care system without a plan or resources to prepare them for making their own way in the world. According to the Jim Casey Youth Opportunities Initiative (2001), as a society, we are legally responsible, *parens patriae*, for the preparation of foster youth for the adult world. Little is known about what transitional services youth receive as they leave the system or what becomes of them.

The child welfare system as we know it today is relatively new. The defining legislation was passed between 1971 and 1980. Although children had been living in institutional care for years, little attention was paid to planning for their future. Before 1970, foster care was seen as long term care. In 1971, the project Freeing Children for Permanent Placement resulted in the conclusion that foster care should be a temporary placement preparing families and youth for reunification or adoption (Charles & Nelson, 2000). Because children often languish in foster care for years, moving from one placement to another, "permanency planning, the process of taking prompt, decisive action to maintain children in their own homes or place them permanently with other families, has been a defining feature of the American child welfare system for the past two decades" (Kemp & Bodonyi, 2002, p. 59). In 1980, The Adoption Assistance and Child Welfare Act was passed to improve efforts to assure permanency and stability for at-risk children through a three-way method of placement prevention, timely reunification with birthparents, or placement with a permanent alternative family. With the passing of this Act, America should have seen fewer children entering out-of-home care, shorter stays for children who did enter the system, and an increase in the number of legally free children being adopted. Unfortunately, in the last decade, there has been an increased number of children in out-of-home care and a large number of legally free children who are unlikely to get a permanent placement (Kemp & Bodonyi, 2002). These unhealthy outcomes have stimulated further governmental policies for the permanent placement of children. The Independent Living Initiative, President Clinton's Adoption 2002 Initiative, and The Adoption and Safe Families Act of 1997 strove to increase the

number of foster children who are adopted into loving families and prepare those who do not obtain a permanent placement for adulthood.

In 1985, the Independent Living Initiative amended Title IV-E of the Social Security Act to provide federal funds to states to help youth in the foster system develop independent living skills (Collins, 2001). This law allowed states the flexibility to design and implement their own independent living programs. According to Collins (2001), there are some basic services that are outlined by this law. These include, but are not limited to: outreach programs; education and employment assistance; daily living skills training; individual and group counseling; financial planning; and a written transitional independent living plan for each participant.

In the mid-1990's, the numbers of children in foster care reached an all time high. Statistics showed that a child who entered the system would remain in foster care for an average of 32 months. According to McDonald, Allen, Westerfelt, and Piliavin (1996), achieving adult self-sufficiency is an expected goal in western society. On December 14, 1999, President Clinton signed the Foster Care Independence Act into law. This law was passed in an effort to give foster youth greater support for the transition from foster care to independent living (Kellam, 1999). According to Collins (2001), this law provided states with more money and greater flexibility in designing and carrying out their independent living programs. This law doubled the funds allocated to the Federal Independent Living Program, increased the age of youth who were eligible to receive services from 18 to 21 years old, allowed states to extend medical coverage to these older youth, and allocated funds for room and board.

On December 14, 1996, President Clinton issued an executive memorandum on adoption that has come to be known as The Adoption 2002 Initiative. According to the U.S. Department of Health and Human Services 1997, this initiative aimed to double, by the year 2002, the number of children adopted or placed in other permanent homes each year, move children more rapidly through the foster care system to permanent homes, to increase awareness about the number of children waiting for families, and to encourage more people to consider adoption. The U.S. Department of Health and Human Services quoted President Clinton in 1997 as stating, "No child should be trapped in the limbo of foster care; no child should be uncertain about what the words 'family' or 'parent' or 'home' means" (n.p.).

The Adoption and Safe Families Act of 1997 mandated that the termination of parental rights process begin after a child has been in foster care for 15 of the last 22 months (Kemp & Bodonyi, 2002). Although the law was signed in 1997, it wasn't until 2000 that timeframes and mandates began to take effect. According to Charles and Nelson (2000), the future of the child welfare system will be greatly determined by the implementation of this law.

### *Purpose and Significance of the Present Study*

A review of the literature showed that foster youth who emancipate from the system are not well prepared for the independence of adulthood. As a result of this lack of preparedness, these young adults are likely to have problems such as homelessness, poverty, criminal trouble, low self-esteem, depression, and problems with alcohol and drug addiction. A review of the literature also showed that in the past three decades, many laws have been passed to protect these youth and hold child welfare systems

accountable for the success of these youth as they enter adulthood. The majority of the available research discussed independent living programs that are available and the laws that require this availability. There is little research available on the success of those youth who have received independent living services. This study is significant because of the limited availability of research on what foster parents think and feel about the independent living services that some foster children receive.

### *Statement of the problem*

The purpose of this study was to assess foster parents' perceptions of how well the foster care system prepares foster children who age out of the system for adulthood in several counties in west central Wisconsin. The data will be gathered by mailing a questionnaire to current and/or former foster parents in these counties. This questionnaire was mailed in the spring of 2004.

### *Research Questions*

This research addressed the following questions:

- 1) How well do the foster parents believe the foster system prepares foster youth who age out of the system for adulthood?
- 2) What do foster parents believe are the needs for foster children who age out of the system to prepare them for adulthood?

### *Definition of Terms*

For the purpose of this research, some definitions need to be clarified.

*Age out:* Children who turn 18 years old while in out-of-home care in the foster system.

*Emancipate:* To be free from the foster care system.

*Legally free:* Children in out-of-home placement without legal ties to a permanent family.

*Permanency planning:* “The systematic process of carrying out, within a brief, time-limited period, a set of goal-directed activities designed to help children live in families that offer continuity of relationships with nurturing parents or caretakers and the opportunity to establish lifetime relationships” (Fein, Maluccio, Hamilton, & Ward, 1983, p. 486).

#### *Assumptions of the study*

In preparing the content of this paper, the researcher relied on the following assumptions:

- 1) The researcher assumed that foster parents would complete the questionnaire and return it in a timely manner.
- 2) The researcher assumed that foster parents would respond to the questionnaire in an honest and complete way.

#### *Limitations of the Study*

For the purposes of this research, a questionnaire was mailed to foster parents within several counties in west central Wisconsin. The findings of this study should not be generalized to all foster parents. Also, foster parents’ perceptions may differ from time to time and services may differ from county to county and state to state. Finally, the foster parents who participated in this study may have completed the survey in an effort to be accommodating to the researcher.

## CHAPTER II

### LITERATURE REVIEW

#### *Introduction*

This section is a review of the literature relevant to this study in the following areas: child abuse and neglect, permanency planning, family preservation, reunification, foster care, adoption, and independent living.

#### *Child Abuse and Neglect*

Child abuse and neglect is a significant problem in the United States. According to The National Child Abuse and Neglect Data System, in 2001, three million referrals were made to the child welfare system throughout the United States. Over 28% of these referrals resulted in a finding that a child had been maltreated or was at risk of maltreatment. This percentage translated to 903,000 children identified as being victims of maltreatment in the U.S. in 2001. This data system also showed that 275,000 children were removed from their homes as a result of a child abuse investigation and 1,300 children died of abuse or neglect in 2001 (U.S. Department of Health and Human Services, 2003). The Federal Child Abuse Prevention and Treatment Act defined child abuse and neglect as, “any recent act or failure to act on the part of a parent or caregiver which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act which presents an imminent risk of serious harm” (U.S. Department of Health and Human Services, 2004, n.p.). Most families first become involved with the child welfare system due to a report of alleged child abuse or neglect. The U.S. Department of Health and Human Services (2003) described the child welfare system as “a group of services designed to promote the well-being of children by

ensuring safety, achieving permanency, and strengthening families to successfully care for their children”(n.p.). After a report of possible child abuse or neglect is received by a child welfare agency, the following federally regulated procedures must be followed by every state: A child welfare worker must investigate the allegation and determine if abuse or neglect has occurred and if there is a risk of it occurring again; services must be provided to families who need assistance in the protection and care of their children; arrangements must be made for these children to live with families outside of the abusive home; and arrangements must be made to achieve some permanent placement for these children (U.S. Department of Health and Human Services , 2003).

### *Permanency Planning*

The main focus of the child welfare system is to provide a permanent home for foster youth. The child welfare system struggles to balance the preservation of family with a child’s need for safety. The Adoption and Safe Families Act was enacted to reduce the amount of time children spend in temporary out of home care and place them in permanent homes (Charles & Nelson, 2000). The passing of this law presented a new problem for the child welfare system. According to Charles and Nelson (2000), “child welfare staff must consider how safety can be ensured while still protecting familial relationships, how permanency can be achieved for a diverse population and how the states can ensure that every child can reach their greatest potential” (p. 8). While reunification with birth families is the preferred permanency option, other options exist: legal guardianship, adoption, and lengthy stay in one foster home. All of these options address young people’s need for lifelong meaningful relationships (Charles & Nelson, 2000).

In response to the passing of the Adoption and Safe Families Act, Colorado began a program called the Expedited Permanency Planning (EPP) project. According to Potter and Klein-Rothschild (2002), this project accelerated the pace of court hearings for children in out-of-home placements, included early provisions of services to birth parents and their children, discouraged delays and transfers of judicial proceedings, and permitted the termination of parental rights for several reasons. Colorado's EPP used a concurrent planning model which worked with families to emphasize the need to maximize the intensity of family service and focus on children's need for permanence. According to Potter and Klein-Rothschild (2002), "this approach requires a commitment to the child's sense of permanence and to the suspension of judgment about the ultimate nature of the permanence until the outcomes of intensive intervention plans can unfold" (p. 29).

Potter and Klein-Rothschild (2002) conducted a study examining predictors of timely permanence for children served under this project. The results of their study were as follows: African American children were half as likely to be reunified with birth parents and less likely to be adopted as Caucasian children were; each year of increase in age reduced the chances of adoption for all children in care; children with emotional and behavioral disorders were less likely to achieve timely permanence; children who had medical conditions were more likely to achieve timely permanence; families who had little or no change in caseworkers were more likely to achieve timely permanence; children who were placed in foster care rather than those who received home care were more likely to achieve timely permanence; and families who had agreed to clear family service plans were more likely to achieve timely permanence. Potter and Klein-

Rothschild made some observations and suggestions after conducting their research. They observed that child welfare worker turnover and the means by which responsibilities are diffused across workers may both be associated with delays in timely decisions on the permanent placement of children in care. They also observed that the level and quality of communication between child welfare agencies and the courts were very important factors in achieving the desired outcome of timely permanent placement. They suggested that child welfare agencies examine their procedures for case transfers and their communication with the court system to guarantee the best interest of the children.

### *Family Preservation*

The term “family preservation” is used to describe a variety of programs that provide services to families who are in crisis: about to have a child removed from the home. These services are often referred to as family-centered services. The basic philosophy of family-centered services is endorsing the rights of families and children. This idea is based on the following beliefs: families are the best place to raise children; families have the right to fair access to resources and opportunities needed for successful child rearing; and families have the right to privacy unless children are endangered (McCroskey & Meezan, 1998). There are two major types of family-centered services: family support and family preservation. Each is designed to serve families in different ways. According to McCroskey and Meezan (1998), family support services are designed to help families cope with the normal stresses of parenting with the ultimate goal being prevention of child maltreatment. Family preservation services are designed to assist families who are at serious risk of having a child placed in foster care or already

have a child in foster care. The major goal of these services is to prevent foster care placement and improve the home life and family unit. In 1993, legislation was passed that provided federal funds specifically for family support and family preservation services. In 1997, with the passing of the Adoption and Safe Families Act, more federal funds were allocated to these services. At that point the program name was changed from "Family Support and Family Preservation Services" to "Promoting Safe and Stable Families." Out of this initiative came The Intensive Family Services Program, which began in Oregon in 1974. According to The Westat Inc. (1995), this program was based on a family treatment model with the most important aspect being family therapy. It focused on family strengths, involvement of the families in the case planning process, provided the entire family with services, and treated the family with respect. There are many different services that states use in providing family preservation services. Some states provide follow-up care to families after the child has been returned, some states provide respite care to provide temporary relief to parents who are struggling, while other states provide services to improve parenting skill. According to McCroskey and Meezan (1998), intensive family service workers usually carry a caseload of two to six families, see families 4 to 20 hours per week, and can be reached by the families 24 hours a day. These programs are designed to be short, usually lasting from 4 to 12 weeks.

### *Reunification*

The preferred course of action for most children who are removed from their home is timely reunification with their biological family. This is believed to be the best plan because a continuous care taking relationship is important for a child's well-being and the separation and instability of the foster care system could be psychologically

harmful to children (Ahart et al., 1992). Although a majority of foster children are eventually reunified with their families, according to Ahart et al. (1992), the numbers should be higher. The problems with the system that prevent more reunification include: not enough reunification services available to these families; the child welfare system's overload causing delays in the reunification process; and some children in the foster care system never have a permanent placement established. Because there is inadequate support offered to families after their children return home, many of these children re-enter the foster care system. Due to the overloading of the child welfare system, many children do not return home as quickly as they could. According to Ahart et al. (1992), this is a problem because research indicates that there is an inverse relationship between the length of time in foster care and successful reunification. Some child welfare agencies and policy makers have begun to focus their attention on intensive family reunification programs. These programs provide counseling, parenting and life skills training, and link families to community support systems to help the reunification be successful. These programs also focus on making the family a partner in the planning process, giving families more responsibility to take a major role in identifying their needs and available resources.

### *Independent Living*

Adolescence is a turbulent time in which youth gain the skills needed to transition into adulthood. According to Vera Fahlberg, a child development expert, "the primary task of adolescence is individuation; this is the process of psychologically separating from family and finding a place in society. For youth who are removed from their families before they are emotionally ready, the task of individuation becomes very

challenging” (cited in Charles & Nelson, 2000, p.12). Without belonging to a family, it is difficult for these youth to successfully make the transition into adulthood . These young people are in desperate need of a consistent relationship with a caring adult in order to overcome the obstacles they will face. Adolescents in foster care rarely have access to support that is provided by most families of origin. This is due to the fact that they have spent a large part of their lives in out-of-home care and come from families that have multiple problems (Collins, 2001).

Since 1986, the federal government has provided states with funding to develop independent living programs. In 1999, The Foster Care Independence Act was passed. This is also known as the Chafee Act, named after the late John H. Chafee, the senator who passed the bill. This law was passed to provide increased support to youth aging out of the foster care system. According to the CWLA (2001), the provisions of this law included: an increase in federal funding for the Independent Living Program to from \$70 million to \$140 million a year; reallocation of where the funds may be used; a mandate that states must contribute a 20% match for the Federal Independent Living Program funds; a mandate that states must use federal training funds to assist foster parents, group home workers, and case managers in preparing these adolescents for adulthood; increased the age for assistance from 18-21 years old; offered states more flexibility in designing and implementing their independent living programs; and most importantly, this law established accountability for states in implementing their independent living programs (Kellam, 1999).

There are very few studies that follow up with youth who have aged out of the foster care system. According to Collins (2001), in 1983 Trudy Festinger conducted a

comprehensive follow-up of young adults who left foster care. This study found that one-third of those who responded had not completed high school, 21% were receiving public assistance, 56% had used drugs, 39% had trouble finding stable and affordable housing, and one-third of them reported having been involved in criminal activity.

Wisconsin's Department of Health and Family Services has an ongoing study that surveys young people at the time they leave care, and again 1-1½ years after leaving care. This study has found that 1-1 ½ years after leaving care 37% had not obtained a high school diploma, 39% were unemployed, 32% were receiving public assistance, 24% had been homeless at some point since they left care, and 37% had been incarcerated at least once since they left care (cited in Collins, 2001). In 1992, The Westat Study analyzed the effects of independent living services. This study found that youth who received independent living services showed better outcomes than those who did not. These positive outcomes were in the areas of employment, health care, basic satisfaction with life and positive self-sufficiency (cited in Collins, 2001). In 2000, Thom Reilly interviewed 100 youth who had aged out of care at least 6 months prior. The results of his research showed that one-third had not finished high school, 30% were unemployed, 60% of those employed earned less than \$10,000 per year, 24% reported that they had sold drugs to support themselves, 11% had sexual intercourse in exchange for money, 36% indicated that since they left care they have had at least one period of homelessness, 30% had had a serious health problem, and 55% had no health insurance. There were 70 pregnancies reported by the 100 people interviewed, 45% had been in trouble with the law, and 41% had spent time in jail. In asking these people if they had received independent living services while in care, most of them said that they had. Most of them

also reported that they had not received any concrete assistance at the time of discharge. One-third of them reported that they had no place to live at the time of discharge (Reilly 2003).

There are some limitations to the Independent Living Programs that states have designed. According to Collins (2001), few programs provided affordable vocational programs, connections to potential employers were not developed, most of the independent living skills were taught in a classroom setting, rarely provided ways to practice and implement these skills, transitional housing services were very limited, aftercare services were often times not readily available, and there have been very few formal evaluations of independent living services. According to the Youth Advocacy Center report (2001), temporary placements and caretakers are unsuited for the future planning of teens in care. Child welfare agencies are more focused on finding placements for these teens than helping them plan for their future. This is largely due to the shortage of foster homes available for adolescents, the constant turnover in child welfare workers, and oversized caseloads. These factors result in a lack of consistent relationships with adults who can help foster teens plan for their future.

## CHAPTER III

### METHODOLOGY

#### *Participants*

The researcher made contact with three agencies in west central Wisconsin that provide foster care to adolescents in surrounding counties. The supervisor in each agency agreed to send out a questionnaire to the foster parents who provide service in these areas. Between the three agencies, the questionnaire was sent to about 70 foster parents. Of the 70 questionnaires sent out 23 (33%) were returned to this researcher. The participants ranged in age from 30 to 65 years old. The mean age was 46.22 years and the standard deviation was 1.45. The participants were made up of 3 males (13%) and 20 females (87%). The participants provided foster care for 16 different counties in west central Wisconsin. Most of them provided care for more than one county. The length of time that the participants had provided foster care ranged from 2 to 25 years, with a mean of 9.92 and a standard deviation of .68. The type of foster care that the participants provided was in one of these categories, children and pre-teens, teenage girls, teenage boys, treatment care, any adolescents, medically fragile, severe mental and behavior disorders, and all ages 0-18. A majority (83 %) of the participants provided treatment foster care for adolescents.

#### *Materials*

A ten-item questionnaire was designed by the researcher for the purposes of this study. There were nine open-ended questions and one rating question. After completing the literature review it was decided what information needed to be gathered from foster parents that would be relevant for this study. This instrument was designed to measure

foster parents' attitudes about the independent living services that their foster children received. No measures of validity or reliability have been documented since this questionnaire was designed specifically for this study. The questions were as follows: (1) age; (2) gender; (3) what county do you provide care for; (4) how long have you been a foster parent; (5) what type of care do you provide; (6) approximately how many foster children have you had living in your care; (7) how many of those children left your home and returned to their birth parents; (8) how many of those children turned 18 while in your care and aged out of the system; (9) please rate your level of satisfaction with each service provided on a scale of 0 (no services provided), 1 (very low) to 5 (very high). Services rated were: Education, stable residence upon leaving care, money management, employability skills, basic life skills, family planning, medical services, mental health services, and basic social skills; (10) what other services, if any, would be helpful for foster children who turn 18 while in care to help prepare them for independence?

### *Procedure*

An appropriate number of questionnaires and self-addressed stamped envelopes were sent to the supervisors at each agency, who mailed them out to the foster parents. The foster parents returned the completed questionnaires directly to the researcher in the enclosed envelope with no name or return address on it. No direct access to names or addresses of the foster parents was available to the researcher.

### *Data Analysis*

The data was analyzed using descriptive statistics. Ranges, frequencies, percentages, means and standard deviations of foster parents' perceptions were tabulated.

*Limitations*

The findings of this study should not be generalized to all foster parents in the counties sampled or in general. Also, the foster parents' perceptions may differ from time to time and services may differ from county to county and state to state. Finally, some participants in the study may have completed the survey in an effort to be accommodating to the researcher.

## CHAPTER IV

### RESULTS

#### *Introduction*

This chapter presents the results of the questionnaire completed by foster parents on their perceptions of independent living services provided to foster children when they turn 18 years old while in the foster system.

#### *Item Analysis*

##### *Research Question 1*

How well do foster parents believe the foster system prepares foster youth who age out of the system for adulthood?" Question number 9 this research question. The data is based on the responses to nine items based on a 6-point Likert scale. A mean, range, and standard deviation analysis was completed for each item. The question was, "rate level of satisfaction with each service provided on a scale of 0 (no service provided), 1(very low) to 5(very high)". Twenty of the twenty-three participants responded to this question. The three that did not respond had not had any foster children turn 18 years old while in their care.

*Education.* The responses ranged from 2-5 and the most frequent response was 4.

The mean was 3.62 and the standard deviation was 1.63.

*Stable residence upon leaving care.* The responses ranged from 0-3 and the most frequent responses were 1 and 3. The mean was 1.67 and the standard deviation was 1.14.

*Money management.* The responses ranged from 0-5 and the most frequent response was 3. The mean was 2.56 and the standard deviation was 1.40.

*Employability skills.* The responses ranged from 1-5 and the most frequent response was 4. The mean was 2.89 and the standard deviation was 1.11.

*Basic life skills.* The responses ranged from 0-5 and the most frequent response was 4. The mean was 3.50 and the standard deviation was 1.65.

*Family planning.* The responses ranged from 0-4 and the most frequent response was 4. The mean was 3.0 and the standard deviation was 1.5.

*Medical services.* The responses ranged from 0-5 and the most frequent response was 4. The mean was 2.84 and the standard deviation was 1.48.

*Mental health services.* The responses ranged from 0-5 and the most frequent response was 3. The mean was 2.78 and the standard deviation was 1.95.

*Basic social skills.* The responses ranged from 0-4 and the most frequent response was 3. The mean was 2.84 and the standard deviation was 1.48.

Overall, the data showed that the foster parents are most satisfied with the presence and quality of services that are provided to foster children who age out of the system for education, basic life skills, and family planning. They are somewhat satisfied with the services that are provided in the areas of money management, employability skills, medical services and basic social skills. The data also showed that foster parents are not satisfied with the services that are provided in the area of obtaining stable residence upon leaving care.

### Research Question 2

What do foster parents believe are the needs for foster children who age out of the system to prepare them for adulthood? Question 10 dealt with this research question. The data is based on one open-ended question. A content analysis was completed on this

question. The question was, "What other services, if any, would be helpful for foster children who turn 18 while in care to help prepare them for adulthood?" Seventy-five percent of the foster parents who completed the questionnaire provided an answer for this question. The most common answer was that there needs to be services provided until the youth are 21 years old. One parent stated, "It is during this transitional time that they need somebody to turn to so that they can really mature."

The next most frequent answer that was reported by almost all (85%) of the foster parents was that these youth need a stable place to live immediately after leaving care. One parent who has provided foster care for 25 years reported, "I feel as though we are returning to the Dark Ages, these youth are being cast out into the cold with no place to sleep at night."

The next most frequent answer, that was reported by 66% of the foster parents, was that there needs to be proper health and dental care provided to foster youth once they exit care. Most of the youth receive medical assistance while they are in care and until they are 21 years old. The major problem with medical assistance is that it is difficult to find health care providers that accept MA coverage. This is especially true for people who live in rural areas; they may need to drive an hour to receive health care. This poses a big problem because most youth who exit care do not have a driver's license and if they do they do not have a vehicle. The parents who answered this question wrote, "Health and dental care needs to be more easily accessible to these young people." Many foster youth are on some kind of medication that needs to remain stabilized and be monitored, without accessible health care this is very difficult.

The next most frequent answer, that was reported by 35% of the foster parents, was that there needs to be money available for higher education and support services offered to help these youth pursue higher education. Two parents wrote, "There needs to be grants available for these youth to pursue higher education." One parent wrote, "These youth need somebody to help them make decisions about higher education, to show them how to apply for colleges and financial aid."

The next most frequent answers were reported by 18% of the foster parents were in the area of basic life skills. The parents reported that these youth need help getting a driver's license, buying a vehicle, paying rent, making proper telephone calls, using directories, making appointments, cleaning, shopping, cooking, and nutrition. One parent wrote, "Independent living services should begin at age 13 because many children in care will return home and have to take on the responsibility of taking care of the household and their younger siblings."

Three of the foster parents answered that emotional support was one thing that youth who age out of care are desperately in need of. Without the support of a healthy family they are often left to figure it all out on their own. One parent reported, "These youth need to know that there is somebody that they can count on to help them answer questions and to offer emotional support and encouragement; this is the role that healthy parents play for their children after they turn 18."

Other suggestions offered by the foster parents were teaching these youth how to say "no", more sex education, education on caring for children and having a safety plan for when they find themselves in trouble.

Overall, the data showed that foster parents would like to see more services provided to foster youth in many areas. According to the participants, the most important area is providing youth a safe and stable residence upon leaving care. Next was accessible health and dental care provided to these youth until they are 21 years old. Other areas that foster parents reported they would like to see more services were in the areas of emotional support, sex education, child-care, basic life skills, and providing them with a safety plan upon leaving care.

## CHAPTER V

### DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

#### *Introduction*

This chapter includes a discussion of the results and conclusions of the study.

This chapter concludes with some recommendations for further research.

#### *Discussion*

The present study involved an examination of foster parents' perceptions of how well the foster system prepares youth who age out of the system for adulthood. The results of this study showed the overall consensus of the participants was that the foster system does an average job at preparing foster youth for independence but there is need for improvement in many areas. The Foster Care Independence Act of 1999 was designed to give foster youth greater support for the transition from care to independent living. One area that this law was designed to focus on was establishing stable residence for youth exiting care (Kellman, 1999). Despite the passing of this law over 5 years ago, the area that most of the foster parents who participated in this study reported needed major improvement was helping foster youth establish a stable residence upon aging leaving care. Although many efforts have been made to achieve this, the system continues to fall short and too many young people are left homeless or living in unfit residences. According to Collins (2001), in an ongoing study conducted by Wisconsin's Department of Health and Family Services 24% of the youth who were questioned had been homeless at some point since leaving care. The Foster Care Independence Act also increased the age of youth who were eligible for services to 21 years old. Although the law states that services continue until age 21, it appears from the answers to question

number 10, the foster parents believe that the system falls short in this area as well. The services may be legally available to foster youth until age 21 but many of these youth do not benefit from services at all after they turn 18.

One answer given by three of the participants of the study was that there must be more emotional support offered to foster youth during the transition into independent living. This is supported by the literature, which reports that without belonging to a family, it is difficult for youth who age out of the foster system to successfully make the transition into adulthood. They are in desperate need of a consistent relationship with a caring adult in order to overcome obstacles they will face (Collins, 2001).

The results of this study were similar to what I expected to find. Based on the literature review I was expecting that services provided to foster youth who age out of the system would fall short of the needs of these youth in many areas. I was expecting that stable residence would be one area that most of the participants would report needed major improvement. Many times in my research I came across a report on this problem. I was surprised that most of the participants of the study answered that they were pleased with the employability services that these youth receive. Based on my review of the literature, I was expecting that to be the second most frequent inadequacy reported by the foster parents. This may be because many of these youth are involved in work-study programs at school so they are employed while they are in foster care. The foster parents may not know that many of them lose these jobs after graduation. The area of emotional support was not as prominent in my research as it was in the results of this study. I was surprised that many of the foster parents reported this area as being one that is highly important for the successful transition from foster care to independence. It may be that

emotional support rated so high with the foster parents who participated in the study because they live with these youth day in and day out. The foster parents spend time talking with these youth and offering emotional support while they are in care. They see the need for this type of support when these youth leave care and enter independence. Perhaps the literature did not focus this area because it is not an area that is mandated by law to be provided to foster youth who age out of the system.

The results of the questionnaire showed that education and employability skills were the only two services that were available in all of the counties that were represented. At least one foster parent reported that services were not available in their county in the others areas; stable residence upon leaving care, money management, basic life skills, family planning, medical services, mental health services, and basic social skills. It was interesting to see that foster parents who provide services for the same counties rated their level of satisfaction different in many cases. It may be that this discrepancy exists because they answered the question based on their personal experience. There were similarities among satisfaction of services provided among the counties represented. The biggest similarities were that foster parents in all counties were the least satisfied with services provided in the area of providing a stable residence upon leaving care and they were the most satisfied with the services that were offered in the area of employability skills.

### *Conclusions*

The purpose of this study was to evaluate how well foster parents in several counties in west central Wisconsin believe the foster system prepares youth who turn 18 while in care for independence. The participants were 23 foster parents who each

participated in a 10-item questionnaire in which the means scores, frequencies, percentages, and standard deviations were calculated by the researcher. This type of research is important because far too many young people leave the foster system with no place to turn. Foster parents try to offer as much help to these youth as possible but they cannot begin to meet all of their needs. Much legislation has been passed in attempts to improve independent living services for foster youth who age out of the system but there are still too many youth who fall through the cracks. As one foster parent put it, "These kids need to be closely monitored after they leave the system so that they are not just 'dumped' out in society with no anchor. These kids are just cast out into a cold, unforgiving society where they are set up for failure right from the start."

#### *Recommendations*

The results of this study were based on a small sample from several counties in west central Wisconsin. It is recommended that this study be conducted in many more counties across Wisconsin and in all states. It is also recommended that the questionnaires be distributed to foster parents at meetings where they regularly gather in an effort to access a larger sample.

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## APPENDIX A

## Cover Letter to Foster Parents

Dear Parents:

My name is Kim Ellis, I am a graduate student at UW-Stout in the Guidance and Counseling program. I am conducting a study for my written thesis, which addresses the issue, "foster parents' perceptions of how well the foster system prepares foster children who age out of the system for independence." This questionnaire has been mailed to you by the Independent Living Coordinator in your county; I did not have direct access to any names or addresses of recipients.

I would appreciate your time and effort in filling out this questionnaire and mailing it to me in the enclosed self-addressed stamped envelope within one week of receiving this. Please do not put your name on the form or your return address on the envelope.

In filling out and returning this questionnaire, you give your consent in providing information necessary for this study. Though the information will be very helpful in the research of this topic, your participation is completely voluntary. You have the right to withdraw from this study at any time. I perceive no risks to you as a result of participating in this study. It is my hope that through this study, foster parents' opinions will be heard and used to help make a system that is better equipped at helping foster children in the transition to adulthood. The information you provide will be treated in a completely confidential manner. No names of participants will appear in the final report. You will have access to the results of this study by contacting the Independent Living Coordinator in your county.

Questions or concerns about this research study can be addressed to any of the following individuals:

Kim Ellis  
3335 Trimble St.  
Eau Claire, WI 54701  
715-839-8084

Dr. Helen Swanson, Psychology Dept.  
308 McCalmont Hall, UW-Stout  
Menomonie, WI 54751  
715-232-2784

Sue Foxwell, UW- Stout- Human Subjects Protection Administrator  
152 Vocational Rehabilitation Building  
UW-Stout  
Menomonie, WI 54751  
715-232-1126

Thank you again for your consideration and participation in this study.

Sincerely,

Kim Ellis

## APPENDIX B

## Foster Parent Questionnaire

The purpose of this questionnaire is to acquire information as to what you believe the needs are for foster children who age out of the system for adulthood and how well you believe the foster care system prepares these foster children for adulthood. It is this researcher's hope that through this study, foster parents' opinions will be heard and used to help make a system that is better equipped at helping foster children in the transition to adulthood.

- 1 Your age:  
\_\_\_\_\_ years old
- 2 Gender:  
\_\_\_\_\_ female  
\_\_\_\_\_ male
- 3 What county do you provide care for?
- 4 How long have you been a foster parent?
- 5 What type of care do you provide? If you do not or have not provided care for adolescents please stop here.
- 6 Approximately how many foster children have you had living in your care?
- 7 How many of those children left your home and returned to their birth parents?
- 8 How many of those children turned 18 while in your care and aged out of the system?
- 9 Please rate your level of satisfaction with each service provided on a scale of 0 (no services provided), 1 (very low) to 5 (very high).

Education:	0 (not provided)	1	2	3	4	5
Stable residence upon leaving care:	0 (not provided)	1	2	3	4	5
Money Management :	0 (not provided)	1	2	3	4	5
Employability Skills:	0 (not provided)	1	2	3	4	5
Basic Life Skills:	0 (not provided)	1	2	3	4	5
Family Planning:	0 (not provided)	1	2	3	4	5

Medical Services:	0 (not provided)	1	2	3	4	5
Mental Health Services:	0 (not provided)	1	2	3	4	5
Basic Social Skills:	0 (not provided)	1	2	3	4	5

Others (write in service and rating 1-5): \_\_\_\_\_

10. What other services, if any, would be helpful for foster children who turn 18 while in care to help prepare them for independence?