

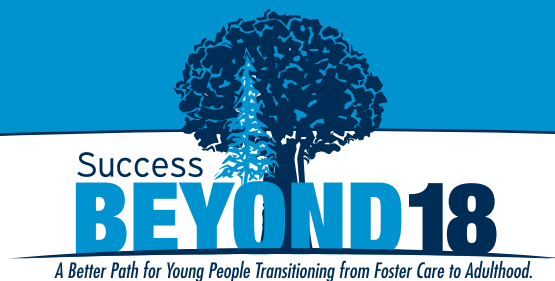
Success Beyond 18:

QUALITY CASE PLANNING WITH YOUNG ADULTS IN EXTENDED FOSTER CARE

Issue Brief

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INTRODUCTION

Case planning is a core child welfare practice required by federal law for children and youth in foster care. Case planning ensures that services are provided in a planned and purposeful way toward the achievement of safety, permanency and well-being. The case plan identifies strengths, challenges, strategies and interventions and lays out tasks, goals and outcomes.

With the enactment of the Fostering Connections to Success and Increasing Adoptions Act of 2008, states have the option to extend foster care services beyond the age of 18 for the first time with federal support. More than 20 states have taken the option and now offer young adults at age 18 the opportunity to remain in care up to the age of 21. Young adults in extended foster care have the benefit of additional years of supports and services to help them prepare for a successful transition to healthy adulthood. These supports are similar to those provided to many of their non-foster care peers who often remain at home or continue to receive the support of their parents during this transitional period. Unlike their non-foster care peers, however, young adults in foster care may not have family guidance and the benefit of collaborative planning with their parents to help them chart their trajectories into adulthood.

As states begin to serve young adults in extended foster care, it is essential that careful attention be brought to the case planning process with legal adults who choose to remain in voluntary foster care. For young adults in foster care, quality case planning is a foundational tool. It can help build social capital, ensure that their strengths are recognized, identify their needs, and confirm the services and supports that they must have for a successful transition to adulthood are well-planned and implemented. Prior to turning 18, young people experience a formal case planning process implemented by the child welfare systems that are legally responsible for them. That plan may or may not be consistent with, or supportive of, a young person's plans for himself or herself. Upon reaching the legal status as an adult at age 18, these young people frequently report being happy to be free of formal case planning requirements. Finally, they can take more control of making decisions for themselves and are able to pursue their own plans, rather than being subject to plans created for them by caseworkers and/or other professionals. When young adults choose to remain in extended care, case planning remains essential, but it must be developed and implemented in partnership with young people, taking into consideration their legal status as adults and their developmental needs as they transition from adolescence to young adulthood and beyond.

For those young people about to reach age 18, case planning takes on special significance. Many will leave foster care at 18 because the state mandates that they age out or, in states that provide extended care, they may leave care voluntarily often because of negative experiences in foster care. Adults working with these young people should know in advance when the young person will leave care and facilitate a meaningful planning process. They should support young people's decisions while encouraging them to remain connected in the event they need to access available supports in the future. Through authentic engagement of young people in case planning, caseworkers and other supportive adults should focus on identifying permanent, caring adults who are committed to being available to them on an ongoing basis and ensure that a plan is in place for them to access services and supports once they leave care.



In states that have implemented extended care programs, some young adults will choose to remain in care and continue to plan for themselves and their futures. A developmentally attuned and quality case planning process is essential to ensure that the needs of these young adults are identified and met. This issue brief focuses on the case planning process and the critical importance of young people building strong social networks and being prepared to enter adulthood with confidence and purpose. It begins by describing traditional case planning and how young adults envision quality case planning. It then addresses the importance of developing and implementing a quality formal case planning process with young people in foster care before they reach age 18. That planning process must provide the foundation for young people to move through early and mid-adolescence in developmentally appropriate ways; for the young people who leave care at age 18 to do so with a sound plan; and for those who choose to remain in care to continue the future planning process as legal adults. A formal case planning process is not always required for young people who participate in extended foster care after age 18; nonetheless, young adult-led planning is still essential as young people work to achieve their goals and successfully transition to healthy adulthood. The issue brief concludes with a summary of the key elements of quality case planning with young adults transitioning from foster care.

TRADITIONAL CASE PLANNING

Too often, young people in foster care have been subject to an array of plans prior to reaching the age of 18. These various plans may include case plans, permanency plans, independent living plans, transition plans, and Individual Education Plans.¹ Frequently, these plans have operated independently from one another despite the reality that they are for the same young person. When permanency has not been achieved, these plans generally focus on efforts to prepare young people to be on their own at age 18. The plans do not take into account the young person's experiences before foster care that play an important role as they look to the future, nor do they take the longer view of what young people in foster care will need to have in place to be healthy adults at age 25 or 30.

Child welfare systems too often focus on "getting the youth to 18" at which time many youth age out of foster care ill-prepared for adult relationships, roles and responsibilities, and lacking the permanent family and social connections all people need.² As states have extended foster care for young people up to age 21, many have not redesigned traditional foster care services and supports so that they meet young adults' changing developmental strengths and needs. By default, extended care is "foster care as usual." Under these circumstances, the focus can easily shift from "getting a youth to 18" to "getting the young adult to 21." The results can be the same undesirable outcomes that young people would have had at age 18. The steep cliff faced by young people upon aging out has been merely postponed.

At age 18, many young people report negative experiences with the case planning process.³ They have not been given opportunities to participate or become engaged in the planning process for themselves and have had no voice in the decisions being made. The result has been a planning process that does not reflect the young person's emerging identity, strengths, needs or voice—and the resulting plan is not representative of the young person's goals and dreams.

Too often young people walk into their caseworker's office only to find that their transition plan has already been completed for them.

1. Child Welfare Information Gateway, 2011

2. Chipungu & Bent-Goodley, 2005

3. Bass, Shields, & Behrman, 2004



WHAT YOUNG ADULTS WANT IN CASE PLANNING

Young people are clear about what they want from the case planning process. They want a planning process that mirrors, as closely as possible, the growing-up experiences of their peers who are not in foster care. They want a supportive environment that helps them make sense of their past and present experiences while working toward their future goals. They want to be able to exercise growing levels of autonomy and self-responsibility.

Young people want support as they gradually transition from dependence on adults to a healthy interdependence with others. For young people in intact families, turning age 18 does not constitute a major shift in their lives; they become legal adults but otherwise continue their daily routines with parents, other family members, friends, and community, and seamlessly maintain their educational and employment efforts. Turning 18 for young people in foster care, however, represents a dramatic shift in their daily lives. Child welfare systems do not acknowledge the gradual transitioning process from adolescence to adulthood that characterizes this development period. As young people in care reach their eighteenth birthdays, these systems often require them to suddenly transition from having no opportunities to make any decisions for themselves to assuming full adult responsibilities and making all decisions on their own.⁴ Even young people who participate in extended foster care often face threats of removal of services and supports when they make poor decisions that are typical for their age and result from a lack of decision-making experience. Quality case planning begun in early to mid-adolescence helps ensure that turning 18, whether or not there is extended foster care, is not a big event for young people in care but is simply another marker of the transition toward (not achievement of) adulthood.

In a perfect world, where foster care still existed, you would already feel integrated and comfortable so that 18 isn't such a scary thing. For a lot of kids in foster care, it's terrifying and that's not fair.

Young people want an ongoing case planning process—not a case plan. Like their peers who are not in foster care, they want a conversation, a relationship and someone to help them make better decisions, even when they may appear to ignore the advice they are given. Case planning is an active process; it is not a document that is only reviewed at specified periods of time. Young adults want to be fully supported and engaged in exploring who they are, what happened to them, what they want for themselves, and the supports they will need as they transition into adulthood and into their post-foster care lives. When case planning is viewed as an ongoing process rather than simply the development of a written plan, the focus is on supporting young people's identity development, one of the major tasks of adolescence. Case planning supports young people in optimizing their cognitive, social and emotional development, allowing them to reach their full potential as they move from adolescence to young adulthood.⁵ It is through achieving a strong sense of identity that the young person is able to successfully enter and reach the next major life stage of emerging and young adulthood.

My caseworker and I made case plans and then didn't talk about them for 90 days.

Young adults want to be treated as partners. Case planning with young adults as partners means a change in the nature and tone of caseworkers' work. Instead of traditional case management activities directed by the caseworker, the case planning process between caseworkers and young adults supports the young person in

4. Samuels & Pryce, 2008

5. Arnett, 2000



exploring who he or she is, in creating the young person’s vision for himself/herself, and in working toward a realization of that vision.

Young People’s Vision of Quality Case Planning	Traditional Case Planning
Young people have a team of people to help them, with young people choosing some, if not most, of the team members.	Young people have only their assigned case-workers.
Young people establish their own future goals.	Caseworkers tell young people what is required of them.
Young people state what they can do and ask the team for help with other things.	Caseworkers tell young people who is doing what.
Teams meet regularly to review the progress that has been made and next steps.	A plan is made and then discussed infrequently or never again.
Young people are supported in building and maintaining relationships and provided with opportunities to address the barriers they may face in doing so.	Priority is not placed on helping young people build relational skills.
Young people gradually experience increasing challenge and responsibility and decreasing protection as they practice adult roles and responsibilities.	Young people may be present at meetings but are not given decision-making power at any level.

THE FOUNDATION FOR CASE PLANNING WITH YOUNG ADULTS: QUALITY CASE PLANNING IN EARLY ADOLESCENCE

To prevent dramatic shifts in case planning at age 18—as young people suddenly move from making few, if any, decisions about their lives to being held completely responsible for all decisions—quality case planning must begin well before age 18. The Jim Casey Youth Opportunities Initiative’s issue brief, *Case Planning for Healthy Development*, provides an in-depth look into quality case planning with young people in foster care. It makes clear that case planning with young adults in extended foster care will appropriately support their strengths and meet their needs only when caseworkers begin a quality case planning process with them before they reach the age of 18.

It is great that we want caseworkers to create a life plan with foster youth when they turn 16. However, a caseworker cannot just sit a 16 year old down and say, “Okay, now we’re going to work together” if they have not been working together already. If the caseworker has decided everything for the young person and has not asked her how they felt about anything over the course of their working relationship, odds are that the young person is not going to want to do anything with the caseworker just because the caseworker is now willing to include her.

In a quality case planning process, caseworkers engage young people no later than age 12 in all discussions about what is happening in their lives. Young people already have these issues on their minds or are avoiding them through behaviors that are providing an escape, such as substance abuse and unhealthy relationships.

Each young person needs the support of caring adults in making sense of their life experiences. Through authentic engagement of the young person, the caseworker discusses the choices that must be made about the young person's life and the many factors that the adults in his or her life are considering. The caseworker communicates and demonstrates to the young person that his or her input is valuable to the process. The caseworker ensures that the authentic engagement of the young person in the case planning process is developmentally appropriate based on age, desires, maturity level and abilities. As the young person matures, the caseworker begins to gradually prepare him or her to take full leadership of the planning process.

My case manager became my mentor. He worked at a group home where I lived and then became my caseworker. I am now 22 and I call him regularly. He has become a friend. It feels like I have grown up with him.

When young people are not engaged in case planning from early adolescence onward or have not been given opportunities to genuinely participate in the process, they may be unwilling to engage in any planning process with their caseworkers when they reach mid- or late-adolescence. Having little or no experience, they may lack skills that allow them to feel comfortable participating in the planning process. No later than age 16, the young person needs the benefit of a relationship with his or her caseworker that supports a full exploration of the many things that he or she will be required to know and do at age 18. His or her relationship with a caseworker and the case planning process should serve as a corrective experience to prior negative experiences and, consequently, be a bridge to other relationships and supports that the young person will need upon leaving foster care.

Caseworkers need to inform young people from 16 onward – let them know that there are things they will need to do before they reach 18. My caseworker broke it down for me so that it was no big deal when I turned 18. College, for example, can be very scary. My caseworker broke it down for me: you will be responsible for your own homework and you will have to do certain things to keep your financial assistance. She built on what I was already doing – showing me that I was doing well in school and would be able to become more responsible. She brought a positive attitude about what I needed to think about and plan for and my choices.

A TRANSITIONAL MODEL FOR CASE PLANNING WITH YOUNG ADULTS IN EXTENDED FOSTER CARE

Case planning that begins in early to mid-adolescence focuses on readying young people for the roles they will play at age 18 and beyond. Though not fully mature (a process that neuroscience teaches will take until the mid to late 20s), the young adult at age 18 typically operates at a higher level of social, cognitive and emotional maturity, and is poised to exercise greater autonomy and begin to take on adult roles.⁶ The formal case planning process that existed prior to age 18 must be significantly restructured as the young person attains the status of a legal adult with the power to make his or her own decisions. There is a clear demarcation at age 18 as young people leave mandated services with court supervision to participate in voluntary services, which they are free to walk away from at any time. In order to attract young people to voluntary extended care and provide them with the significant benefits it provides, child welfare agencies and the courts must make significant cultural shifts in how they work with young adults, releasing the levels of social control that characterize their work with legal minors.

6. National Institute of Mental Health, 2011

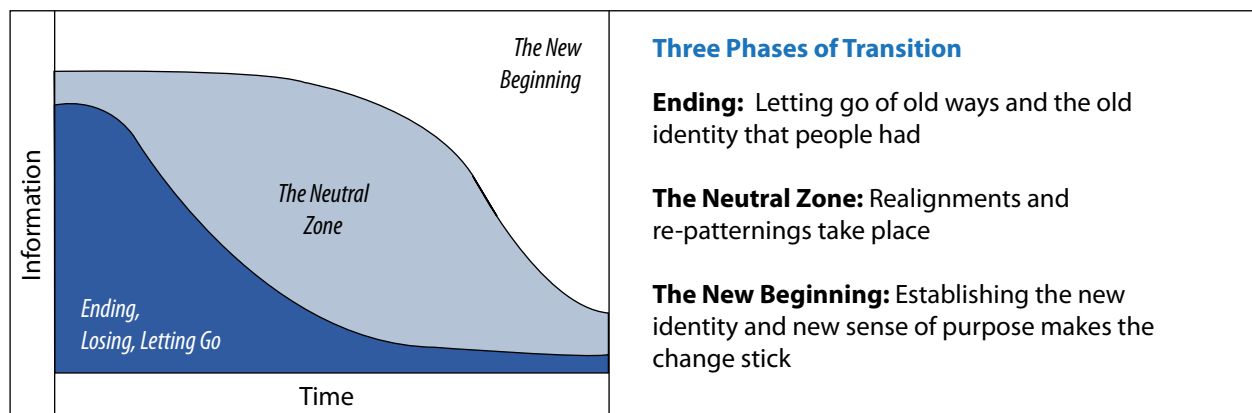
Case planning that supports the gradual healthy transition of young people in foster care from adolescence to adulthood must be grounded in a view of transition as a physical, emotional and psychological process rather than an age-related event. Case planning cannot be effective without explicitly acknowledging the many transitions and relationship disruptions young people in foster care experience from the time they enter care. The entry into foster care is itself a substantial transition that carries with it often abrupt separations from family and community. These separations often result in ambiguous losses that generally are not acknowledged or resolved through a grieving process, largely because the adults around these young people too often urge them simply to move on. Many young people who have been part of the foster care system have experienced extraordinary changes and multiple transitions throughout their lives.⁷ Many times, the changes they have encountered occur with little or no warning, leaving young people feeling as though their lives just happen to them with little control or input into how the events unfold. With each new caseworker, each placement change, each new group care staff member, and each school change, the young person faces the stresses of transition that often go unrecognized by adults and the systems that serve them. An exit from foster care is yet another major transition. Not having closure on the many changes they have experienced in foster care and often not even having them acknowledged, young people are frequently challenged in their efforts to work through the stages of this next major transition in their lives.

*“Change is external; transition is internal.
Unless transition occurs, change will not work.”*

—Bridges, 2009

The William Bridges Transitional Model, currently implemented by many agencies that serve youth in transition, is an approach that holds promise for young adults in foster care. It provides a framework for understanding that young people need to work through the transition process in order to move forward in a healthy and integrated way that is grounded in firm identity development.⁸ The model makes a clear distinction between change, an event or situation that happens relatively fast and is defined by an outcome, and transition, a slowly occurring process that is the psychological reorientation experienced when individuals come to terms with the change (see Figure 1). The model demonstrates why young people may not readily embrace “the new beginning” phase, which adults often pressure them to reach, without opportunities to work through the entire transition process.

Figure 1. The William Bridges Transition Model



7. Lawrence, Carlson, & Egeland, 2006

8. Bridges, 2009

Application of the William Bridges Transition Model to Case Planning with Young Adults in Foster Care

Pre-Phase: Understanding of the Need for Change

Although not a formal part of the William Bridges Transition Model, this pre-phase—developed by Cornelius Bird and colleagues—provides young people with opportunities to develop a sense of clarity about the need for change as they approach adulthood⁹. The work around the need for change prepares the young person to launch into the first formal phase of the model, the ending phase. It becomes the anchor for young people to return to when the ending phase becomes challenging or when the young person struggles through the neutral zone.

Phase I: Ending

The ending phase focuses on losses and letting go of what has been, including old identities. When a young person in foster care is removed from one foster home and placed in a new home, the change is the specific move to the new home while the transition or psychological process encompasses much more: the loss of familiar foster parents, a familiar home, friends, school, and the identity associated with that community—with significant psychological effects on the young person. There are multiple transitions set into motion as a result of what may appear to be one single change. Young people may process some of these endings slowly while they may be able to process other transitions more quickly. The ambiguity of many of these losses—including the loss of birth parents, siblings and other relatives, and/or other young people in foster care with them—will likely make the ending more complex. As an ending is processed, it may be that some relationships can be built or rebuilt or boundaries created when safety continues to be an issue.

*“Endings are marked by losses and a letting go
of what has been, regardless of whether the old way was good,
bad, pleasant or unpleasant.”*

—Bridges, 2009

All young people in the transition from adolescence to adulthood—whether in intact families or in foster care—will likely experience growth ambivalence as they move through this phase. There is the excitement of moving forward into adulthood and anxiety about what this next step will mean. Transitioning from an adolescence spent in foster care to adulthood can be a particularly precarious prospect. The reality of aging out of the foster care system can be daunting. It also can be an opportunity for young people and the significant adults in their lives to reflect on previous transitions and identify the challenges associated with these experiences. Acknowledging those losses that are endings enable the young person to move into the next phase, the neutral zone.

Phase II: The Neutral Zone

The neutral zone is the uncomfortable in-between time, when the old way of being is gone and a new way of being has not yet been realized. For young people in foster care, having had their losses acknowledged and having accepted that it is time to “let go” and “move on,” the neutral zone can be confusing, chaotic and scary. During this period, the young person may feel lost and even discouraged about the very change—exiting foster care at age 18 or remaining in care as a legal adult—that previously may have seemed quite attractive. Young people may experience a re-triggering of previous experiences creating anxiety, self-doubt and/or resentment. They may

9. Personal communication, Cornelius Bird, January 27, 2014

devote most of their energy to resisting their emotions or utilizing old coping tactics, leaving little energy for the actual management of the new situation. However, the neutral zone may also be a time of great innovation and creativity, particularly when young people are supported by caring, committed adults who give them “permission” to move on to a new beginning. The neutral zone represents a journey from one identity to the other and takes time.

Phase III: New Beginning

The timing of a new beginning differs for every event and every individual. It is said that new beginnings cannot be measured by dates or be predetermined, but rather follow the timing of the mind and heart. That said, young people in foster care face the definitive date of their eighteenth birthdays as a major event in their lives, and they do not have the luxury of postponing a decision about the next step in their lives beyond that date. It is important to recognize that young people may want a new beginning but may also experience fear and ambivalence. Beginnings reactivate some old anxieties originally triggered by the ending. They establish the ending as real and the new way of doing things represents a risk. Beginnings are a time of integration and a new chapter in one’s life and, as a result, they may bring ease and a sense of comfort. As young people move into the phase of new beginnings, a process that happens multiple times for them, the support of caring, committed adults is essential.

Bird and colleagues add a final step to the new beginning phase that focuses on sustaining or maintaining the gains of their transition in response to change. Young people are supported in developing and putting into place a plan to maintain the desired change. They work with their case planning teams to identify ways to use informal and formal supports on an ongoing basis as protective factors, minimizing the risks for regression or relapse into old behaviors or unhealthy relationships. Team members help young people create backup or relapse prevention plans to help maintain healthy behaviors and relationships. Often, young people and team members explore the question, “What could go wrong with the plan?” Assessing what might not work begins crisis planning and the development of a Plan B. Young people have the opportunity to talk about potential conflicts, anticipate possible crisis situations, and develop responses and solutions. They may re-enter the neutral zone as they encounter challenges or reconsider decisions, and with their team’s support, continue the transition journey.

A Teaming Approach to Case Planning with Young Adults in Extended Care

A teaming approach is the optimal vehicle for implementing the William Bridges Transition Model at any age. With young adults in foster care, it is an inclusive strategy that promotes authentic youth engagement and self-determination. Practice experience shows that authentically engaging young people in foster care in a teaming approach can result in helping them successfully identify goals and make plans that truly work for them.¹⁰ Teaming is a core child welfare strategy that allows young people to have conversations, talk through decisions they are making, and build those relationships that they want and need with people they know, who care about them.

To be effective, young adults must be supported in intentionally creating their own team to help them with transition planning. Young adults need support in identifying the people who can take them to adulthood and support them into the future. Under the young adult’s leadership, the team brings together the wisdom and expertise of his or her informal helping system, including family, friends, mentors, community/church members, and others who are not paid to be there—people whom young people may not immediately identify as key supports for them. It is important that caseworkers and other adult partners help young people understand that their natural supports are not only appropriate but essential team members. Young adults’ formal supports—such as caseworkers, CASA volunteers, teachers or counselors—may join the members of their informal support system.

10. Children’s Services Practice Notes, 2012

All team members from the young adult's informal and formal support systems are expected to help him or her plan for the next transition and meet the goals that he or she designs. Team members work together to learn about the young person's strengths and needs; they are ready, willing and able to support the young adult in setting and achieving his or her goal(s); and they stand ready to support the young person in taking the steps in their transition according to his or her life plan.

The essence of teamwork lies in the development of relationships and the building of the young adult's social capital.¹¹ The caseworker and the teaming process itself serve as the bridge to a growing supportive social network for the young person. Through teaming, young adults are supported in identifying the important people already in their lives and clarifying the roles that they want these people to fill. The young person is provided with opportunities for healing relational experiences and connections that can open the door to relationships outside of formal systems. Within the teaming process, opportunities emerge for young adults to define and explore their communities as they identify the types of people that are not currently in their lives, but with whom they may want connections and relationships.¹²

The success of the teaming process in transition planning for young adults hinges on the ability of adult partners to shift their thinking about how they work with young people. The adults themselves need to be prepared for the team planning and decision-making process. They must be able to recognize young adults as leaders of their teams; work with young people regarding the composition of teams; acknowledge that team decisions will be with the young adult's guidance and leadership; and support young people in healthy risk-taking opportunities as they explore, experiment and learn from experience. The focus is on what young adults need for healthy development and resilience, and creating multiple opportunities for positive youth development. Teaming models such as family group decision making, family group conferencing, and Team Decisionmaking (TDM) emphasize youth involvement in the teaming process.¹³ The EPIC 'Ohana Youth Circles¹⁴ and the Iowa Dream Teams¹⁵ are powerful examples of team approaches that empower young people as drivers of their team planning and decision-making processes.

I can name every single person who I was connected with since I left my parents at age 16. I stayed in contact with them. They were important and would play a role in my life. They were molding me back to the path I wanted. They asked questions and made me think about what I want. You go down a path and it can go back to the very first caseworker you had when you left home. I had maybe four or five case workers, I remember them, my judge, my guardian ad litem. It makes you remember the path you are on. The notion of being engaged in the process because you want to be. Their asking me questions made me open up.

11. Jim Casey Youth Opportunities Initiative, n.d.a

12. Jim Casey Youth Opportunities Initiative, n.d.b.

13. Casey Family Services, n.d.

14. Epic'Ohana, Inc., <http://www.epicohana.info/youthcircle.aspx>

15. Iowa Foster and Adoptive Parents Association, http://www.ifapa.org/resources/transitioning_to_adulthood.asp

THE KEY ELEMENTS OF A QUALITY CASE PLANNING PROCESS WITH YOUNG ADULTS IN EXTENDED FOSTER CARE

In summary, a quality case planning process with young adults in extended foster care has ten elements which, when effectively implemented together, provide these young adults with the support they need to gradually transition to productive, healthy adulthood:

Key Element #1: *Ongoing efforts to connect young people with supportive adults as early as possible and help these relationships become lifelong and perhaps legal.* Young adults in foster care are fully in charge of whether they have a permanence goal and if so, the nature and extent of the permanency planning process. They select the supportive adults they want in their lives who can help them think through their permanency decisions. It is not uncommon for young adults who formerly rejected permanent legal relationships to reconsider this option for themselves as they transition to early adulthood.

Key Element #2: *Support for young people to understand and manage their unresolved feelings of grief and loss and create a sense of closure so they can move forward with permanent connections.* Young adults in foster care make decisions for themselves as to whether, when and how they wish to work on issues of grief, loss and closure. They decide whether to utilize clinical services. The supportive people in their lives ensure that young people know they are there for them and young people are aware of the therapeutic and supportive services that are available.

Key Element #3: *A focus on fostering self-determination and resiliency by providing young people with skills that will serve them throughout all major life transitions, not only the transition from adolescence to adulthood.* Young adults in extended foster care are not likely to respond positively to rigid case planning or prescriptive guidance that mirrors the traditional case planning process they may have experienced before they reached legal adulthood. Such processes, in fact, may work against the very developmental tasks essential to their successful transitions to adulthood: opportunities to learn how to make decisions for themselves, learn from success and failure, build greater resilience, connect with networks of social support, and develop higher levels of self-confidence in their own abilities to control their lives and what happens to them. The fine balance at this stage in young adult development is challenging to achieve—both for foster care systems serving young adults who can walk away at any time and for parents in intact families as they support their adult children in gaining greater self-sufficiency.

Key Element #4: *Accessible assessments of cognitive, social and emotional development status.* Young people in foster care over age 18 are free to accept or reject assessments and to decide when and under what circumstances these assessments will take place. They are entitled to know what each assessment is for and how the information will be used. Assessments that focus on deficits are no more likely to appeal to young people in extended foster care than to other young adults making the challenging transition to adulthood. Such assessments, in fact, may cause the young person to reconsider his or her participation in extended foster care as yet another demeaning experience. Young adults are more likely to accept strengths-based assessments that yield tangible benefits for them.

Key Element #5: *Case plans that are strengths-based and directed by the young person.* Young adults in extended foster care will participate in the program only to the extent that they perceive the planning process is truly helpful to them. Plans should reflect what the young person wants and needs. Young people will need varying levels of preparation to become the leaders of their planning processes. As they lead their teams, they will need the support of team members in exploring what they want for themselves and in considering their goals and options. Each plan should reflect their individuality and focus on their specific needs and interests. Although plans should address the need for young people's compliance with state requirements in order to remain in extended foster care, the primary focus is what the young person wants for himself/herself.



“For young people transitioning from foster care, mastery in goal setting, forecasting need, developing strategies to build on strengths, and creating and maintaining their team are essential components of the planning process. Equally important are skills in socially contracting or building working agreements with others to get their needs meet.”

—Cornelius Bird

Key Element #6: *Preparation of young adults to lead and actively participate in the case planning process.* As young adults in extended foster care take a leadership role in their case planning process, the supportive adults in their lives play essential roles in preparing them for specific aspects of this role. They assist young adults in developing agendas for each team meeting, thinking through the desired results for each meeting, and preparing for the conversations that will take place both within and outside of team meetings.

Key Element #7: *Active involvement of informal supports, including family members, caregivers, friends, and foster peers in the planning process.* Before age 18, the adults primarily involved in case planning with the young person are those within the child welfare and judicial systems. Young adults in extended foster care may be far less involved with these professional service systems while experiencing an ever-expanding world of school, peer, work and community connections. Young people are encouraged to invite more people from outside the formal system to participate on their teams and support their case planning and transition efforts. It is their decision to make, but with support, they may begin to develop an ever-broadening social network that will be there for them during case planning and beyond.

Key Element #8: *Skilled professionals with a clear understanding of adolescent and young adult development, knowledge of the processes of major life transitions, and cultural competence and awareness.* As young people reach age 18 and become legal adults, they take the lead on planning for themselves. Caseworkers are generally not accustomed to deferring to young people’s judgment and can struggle with the challenges of this new relationship—just as parents in intact families can struggle to accept their adult children’s judgment. Caseworkers and other professionals in these young adults’ lives must understand the critical importance of supporting them in exercising their capacities to use judgment, make decisions, and learn from mistakes. These opportunities are not to be “earned;” they are essential to healthy transitions to adulthood. Not having found permanent families for these young adults before the age of 18, caseworkers must provide the supportive learning that they need to become healthy, productive adults.

Key Element #9: *Collaboration among all agencies and systems currently involved in the young adult’s life.* As young adults in extended foster care direct their own case planning, they will interact with adult service systems, potentially including higher education, health care, adult mental health services, housing, and vocational development services. Cross-systems collaboration is critical to the success of the case planning process. Child welfare agencies are familiar with and accustomed to collaborating with children’s services systems. Child welfare staff will need to learn about and develop working relationships with adult services systems as they support young adults in developing and implementing their case plans.

Key Element #10: *Clear lines of accountability regarding who is responsible for ensuring that the case plan is carried out.* Young adults in extended foster care lead the case planning process for themselves and their plans specify who is responsible for each step in the plan—the young adults themselves and/or the supportive adults in their lives. As young adults, they take on increasing responsibility and accountability but with the support and guidance of adults. A delicate balance must be achieved as young adults are held accountable for their decisions and actions but are not expected to function wholly independently simply because they have reached the age of 18.

CONCLUSION

As states implement the extended foster care provisions of the Fostering Connections to Success and Increasing Adoptions Act of 2008, careful attention must be given to the case planning process for legal adults who voluntarily participate in extended care. Quality case planning is the foundation on which young people prepare for successful transitions to healthy and productive adulthood. Young people make clear that they need to authentically engage in quality case planning that provides them with a team of adult partners who support them in establishing their own goals, building and maintaining relationships, and planning for their futures as they take on increasing levels of autonomy and responsibility. It is essential that quality case planning begin before young people reach the age of 18 so they are prepared to assume leadership roles in the case planning process as young adults. As young people reach 18, the William Bridges Transition Model provides a strong framework for team planning and decision-making processes that authentically engage young people in their transition planning to successful adulthood. A quality case planning process fully integrates ten key elements that have been shown to provide young people with what they need and want at this critical developmental juncture in their lives.

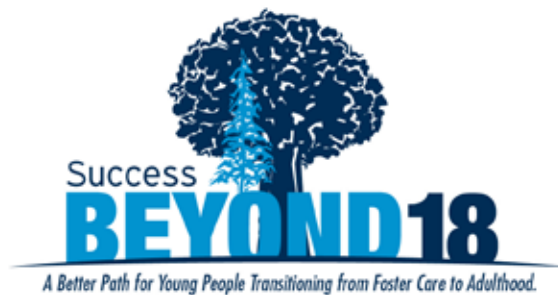


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About the Jim Casey Youth Opportunities Initiative

The mission of the Jim Casey Youth Opportunities Initiative is to ensure that young people—primarily those between the ages of 14 and 25—make successful transitions from foster care to adulthood. We do this by working nationally, in states, and locally to improve policies and practices, promote youth engagement, apply evaluation and research, and create community partnerships. Our work creates opportunities for young people to achieve positive outcomes in permanence, education, employment, housing, health, financial capability, and social capital.



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