



WHO I AM, WHERE I BELONG, AND WHERE I'M GOING:

*Promoting Positive Identity Development for Youth in
Connecticut Foster Care*

STEPHANIE LUCZAK, LMSW
JESSICA NELSON
LAUREN RUTH, PH. D.

CONNECTICUT
VOICES
FOR CHILDREN

WHO I AM, WHERE I BELONG, AND WHERE I'M GOING:

*Promoting Positive Identity Development for
Youth in Connecticut Foster Care*

Table of Contents

Acknowledgments	P. 4
Introduction	P. 5
Chapter 1: Literature Review	P. 7
Chapter 2: Analysis of CT Department of Children and Families' Policy, Practice, and Relevant Statutes	P. 11
Chapter 3: Connecticut Data Profile of Adolescents in Foster Care	P. 22
Chapter 4: The Voice of Connecticut's Foster Youth	P. 28
Chapter 5: Comparative State Policy & Practice	P. 32
Chapter 6: Policy Recommendations to Promote Positive Identity Development in Foster Care	P. 37
Endnotes	P. 40

Acknowledgements

Much support contributed to the production of this report to collectively improve Connecticut's foster care system.

We gratefully acknowledge the generous support from the Melville Charitable Trust and the Sassafras Foundation, Inc., whose financial contributions made this publication possible.

We would also like to express our gratitude to the Department of Children and Families for their provision of data, qualitative input, expertise, and external reviews of this report. We thank Commissioner Katz for facilitating two powerful statewide Youth Advisory Boards that led to the creation of this publication and for offering her insight throughout the project.

We'd also like to thank Fred North, Susan Smith, and Lynette Warner from the DCF Office of Research and Evaluation, as well as Linda Dixon and Lisa Driscoll from Central Office for their expertise regarding adolescents in foster care. In addition, we'd also like to acknowledge the thoughtful input of Kristina Stevens, Susan Smith, Elizabeth Duryea, Jodi Hill-Lilly, and Weihai Zhan for their external review of the paper. We are also grateful for Cindy Conklin's thoughtful communication between Connecticut Voices and DCF throughout the process of this project.

We'd also like to thank Isiah Branford and Larry Jenkins for providing thoughts and ideas about their roles in working with adolescents. We also commend the extraordinary and tireless work of the Youth Advisory Board Coordinators, particularly the Statewide YAB Coordinator, Joshua Fisher.

Within Connecticut Voices for Children, we are thankful for Wendy Simmons and Sharon Langer for their thoughtful review of this publication, as well as Roger Senserrich for leading the communications work that went into this publication.

Lastly, we'd like to thank all of the youth that we met with over the fall of 2018 for sharing their stories, experiences, and thoughts. This work would not be possible without youth input. Thank you for allowing us to have authentic conversations and for bravely speaking up for yourself and other youth who may not have a voice in the system.

Introduction

Youth

For the purposes of this report, we use the term "youth" typically to describe a young person between the ages of 14 through 23.

Normalcy

A set of developmentally and age appropriate activities, experiences, and opportunities that contribute to the growth and development of youth.

Placement

In this report, when we refer to a "placement," this means a foster care placement. There are typically three major types of foster care placements: kinship (such as a relative or close family-like member) care, traditional (non-kin individuals who meet certain requirements) foster care, and congregate (group or residential) care.

Permanency

According to the Connecticut Department of Children and Families, "permanency means having an enduring family relationship that is safe and lifelong; offers the legal and social status of full family membership; provides for physical, emotional, social, cognitive and spiritual well-being; and ensures lifelong connections to extended family, siblings, and other significant adults as well as family history and traditions, race and ethnic heritage, culture, religion and language."

All **youth** need positive support in order to thrive. During adolescence, youth should have experiences that contribute to their development into successful adults. These experiences lead to the development of personal identity, one of the most important adolescent achievements. For any adolescent developing identity is a complex – yet crucial – process. Adolescents growing up in today's world receive many messages and influences about who they should be, which may have a lasting impact that influences how they view themselves.

All teenagers should have affirming, positive opportunities, relationships, and experiences that help to develop their core identity as well as the multiple facets of intersecting identities. This means being afforded opportunities to explore and understand one's racial and ethnic identity, one's religious and spiritual identity, as well as one's sexual and gender identity. Opportunities to safely explore one's identity may occur by joining school clubs, attending local events held by community organizations, going to summer camps, participating in religious groups, and more. Essentially, adolescents need opportunities to explore one's identity is considered a part of a "normal" teenage life.

For adolescents who may grow up in the foster care system, the nature of the system itself may compromise **normalcy**. Although the use of kinship care in Connecticut has increased over the last few years¹, thousands of youth are still placed into traditional foster homes or sometimes a congregate care placement. Furthermore, normalcy may be further compromised by experiences in foster care that are all too common: multiple **placement** changes that may sometimes require immersion into a new community or new school, a lack of **permanency**,² or changes in caseworkers. For a teenager, this may disrupt many things for the youth, including one's developing sense of self.³





The Connecticut Department of Children and Families (DCF) is the state child welfare agency that serves to protect and promote the well-being of all children and youth, particularly youth in state care. Throughout recent years, DCF has made significant strides toward enhancing normalcy for youth in care, particularly adolescents. These strides include ensuring that youth have access to obtaining a driver's license, are able to partake in traditional high school experiences such as prom and graduation, and have meaningful relationships throughout their time in and after foster care.

However, given the critical impact of this time period in the lives of young people and national disparities in life outcomes between foster youth and youth who grow up with their biological parents,⁴ it is important to continue to improve how we serve adolescents in state care. This includes expanding the scope of normalcy to encompass inclusive **identity development**. To effectively support this developmental process, Connecticut provide further support of adolescents in its care. This includes dedicating sufficient resources to better serve the unique needs of adolescents and implementing strong processes to adequately assess, protect, and support the identity development of adolescents living in foster care.

Identity Development

The process of understanding who one is and one's place in the world, impacted by both by an internal understanding of oneself and external factors such as relationships with others, as well as characteristics such as race and gender.

“We have to listen to [foster youth], have open and honest discussions, and give them spaces to feel comfortable. We have to provide those spaces for them so that they can have each other and educate each other.”

- Connecticut DCF Adolescent Social Worker

Throughout this report, we will explore the impact of foster care on adolescent identity development. We discuss a review of the literature; current policy, practice, and law related to supporting youth from various backgrounds; reflect on the voices and experiences of current foster youth in Connecticut's care; and present a comparative examination of state policy and practice. Through these various perspectives, we aim to broaden how policymakers and advocates understand adolescent identity development and make policy recommendations to better assess, protect, and support the identities of all Connecticut's foster youth.

Chapter 1: Literature Review

Identity Development

The study of identity development began with Erik and Joan Erikson.⁵ The Eriksons theorized that individual progress through a set of stages which describe the way one's identity changes forms and changes over time. In this understanding of identity development, adolescence is a crucial stage during which one strives to answer the questions "Who am I?" and "What is my place in this world?"⁶ The Eriksons believed that several environmental and cultural factors impact how individuals develop answers to these questions: relationships with peers and parents, the school and community, and group affiliation such as race.⁷ When these external forces collide, "role confusion" can occur, an experience that is marked by the conflict of "one's essential personality characteristics, one's view of oneself, and the perceived views of others."⁸ The process of reconciling these different views of the self leads an adolescent to develop a secure sense of who they are.

More recent research expanding on the foundational work of the Eriksons highlights the importance of family in the development of identity. One study on adolescents ages 14 to 19 found that parenting style and parental attachment impacted identity development.⁹ This study found that those who had parents, specifically mothers who were responsive to a child's needs or indulgent to a child's wants, rather than negligent or strict, were more likely to form concrete ideas about their own identity.¹⁰ This study demonstrates the importance of the home environment on the process of adolescent identity development; allowing youth to explore their own beliefs, likes, and dislikes may lead youth to develop a clearer self-understanding.

Additional research on identity development among adopted children has demonstrated the impact of family history and connections to biological family, or lack thereof. Psychologist Harold Grotevant has led much of the research and theory on adoption and identity, describing the way adoptees come to understand their adoptions and connections to their biological and adoptive families as "adopted identity."¹¹ In one study, Grotevant demonstrated how conversations about adoption and contact with birth families positively impacted an adopted adolescent's identity development, allowing them to comprehend the role of adoption in their lives.¹² This research suggests the importance of understanding one's familial roots and personal story in the process of identity development. Similarly to adoption, foster care can present challenges to youth who are going through the identity development process and may feel disconnected from their home and background.

Identity Development and Foster Care

Children living in foster care may experience one to several placement changes during their time in care. Each of these placement changes has the potential to plunge a child into a new household, new neighborhood, and new school. Children may lose connections with friends, adult role models, and entire communities. Each new placement may separate them from their connections to foods, religions, and cultures. Identity development is often as much a social process as it is internal. This constant shifting between different environments, often severing relationships, can

have a significant impact on an adolescent's understanding of who they are and their sense of belongingness.¹³

Existing literature has documented the difficulties that constant movement and separation can have on identity. A study on the identity development of young women found that they related some aspects of who they were in the present to experiences of instability and lack of security that occurred while in foster care.¹⁴ Another study found that foster youth's narratives of their lives often highlighted how the difficult transitions in foster care influenced who they were over time.¹⁵ Additional research on adolescent development has suggested that stressful environments and experiences, such as changing family structure, can affect youth development and self-esteem.¹⁶

The status of being a "foster child" often carries a negative bias that can also impact a youth's sense of self. Psychology literature on stigma and negative stereotypes has shown that negative biases can lower self-esteem and cause uncertainty in one's personal identity.¹⁷ Two studies on identity and foster care have found that foster care youth often feel they are perceived as "delinquent" or "psychologically impaired."¹⁸ These stereotypes can negatively impact a child's self-esteem.¹⁹ At times, stigma from others can even cause a child to view themselves under the negative lens through which others see them; researchers have referred to this as the "devaluation of the self by others."²⁰

To overcome the turbulence and stigma associated with foster care, youth develop certain traits to protect themselves. The literature has indicated that many foster care youth develop a strong sense of self-reliance and a "go-it-alone" attitude. Youth in foster care have described avoiding seeking help from others and withdrawing from deep social relationships.²¹ These tendencies are often the result of being separated from positive relationships during placement transitions and lacking access to a secure base or "safety net."²² At times, self-reliant behaviors lead youth to alienate themselves from people who could provide safety and support, further exacerbating feelings of loneliness and helplessness.²³ However, some youth felt their self-reliance develops into a desire to help others, often younger siblings in the foster care system, and to provide support to others that youth felt they did not receive.²⁴

Overall, being in foster care can impact adolescent identity development in a variety of ways. Foster youth may have to grapple with transitions between different living environments and the stigma that can be associated with being in foster care. As the literature has demonstrated, these experiences have the potential to affect how youth see themselves and their place in the world.



Dimensions of Identity

Multiple components make up a child’s developing identity. For example, racial and ethnic identity, religious identity, and gender and sexual identity are all important to a youth’s understanding of who they are. In foster care, each of these dimensions of identity can present unique considerations in the quest to nurture healthy development. Existing literature has illuminated some specific challenges related to each of these areas of identity development and highlights some youth perspectives regarding specific aspects of their identity.

Race and Ethnicity

Racial and Ethnic Identity

One’s understanding of themselves as part of a racial or ethnic group. Racial and ethnic identity can be based on things such as biological family or country of origin. The United States Census collects data regarding give racial and ethnic identities including Black, White, Latino, Asian, Native American or multiracial.

The examination of **racial and ethnic identity** in foster care has been traditionally seen through the lens of understanding “transracial” placements, where a child is placed with a family whose racial or ethnic background differs from the child. Currently, federal legislation forbids state organizations from using race as the sole determinant in a foster or adoptive family placements (see page 21 for more on this Act). Research has found, though, that Black and Latino youth in foster care sometimes express the desire to be placed in foster homes where the family shared the same racial or ethnic background.²⁵ Homes with different backgrounds present specific challenges to youth, such as a separation from other speakers of one’s native language and separation from other members of one’s ethnic group.²⁶ Research has also shown that a positive ethnic identity and strong connection to one’s ethnic group is related to successful academic outcomes and higher self-esteem.²⁷ Additionally, youth placed in a culturally dissimilar home demonstrated more depressive symptoms and loneliness.²⁸ Thus, maintaining and developing ethnic identity in foster care is important for supporting the long-term wellbeing of youth of color.

Religion

Religious Identity

A way of describing one’s religious beliefs. Religious identity can encompass both the type of religion one subscribes to and to what extent they are devoted to that religions. For example, religious identity can describe whether someone is Catholic or Jewish, Orthodox, or less traditional. Religious identity can also explain varying levels of spirituality including atheism or agnosticism.

While research on **religious identity** in relation to foster care is limited, general research on religiosity and adolescence demonstrates the importance of religious identity for youth. A literature review of religion and spirituality in youth demonstrated that spirituality is correlated with positive mental health outcomes for youth who have experienced traumatic events.²⁹ Additional research has highlighted the risks of religious mismatch between parents and youth, demonstrating that differing religious views and behavior can cause tension within a family.³⁰ This research highlights the potential for disruption in a foster youth’s life if they are placed with a foster family of a different religion. One identified study on religion and foster care suggests that providing youth with foster parents who hold similar religious beliefs can be beneficial to their spiritual development.³¹ In general, research suggests that encouraging the appreciation of all religious activity on the part of caregivers is the most beneficial for youth.³²

Sexual Orientation and Gender Identity

The estimated percentage of **LGBTQ** youth in foster care is about twice that of the general population (19.1 percent versus 10 percent).³³ Since there are a disproportionate number of LGBTQ youth in foster care, it is especially important to understand identity development within this context.³⁴ Adolescence is a critical time for the development of **sexual** and **gender identities**; evidence demonstrates that the early teens are a time when many youth begin to understand and label their sexual orientation and “come out,” expressing their identity to friends and family.³⁵ Many youth experience harassment both within and outside of the foster care system due to their sexual orientation and gender identities. Some youth have had to leave their homes due to rejection by their families because of their LGBTQ identity.³⁶ Once in the foster care system, youth are at risk for suffering harassment in both group homes and foster families.³⁷ Preventing and addressing this harassment by creating anti-discrimination policies and increasing the understanding of age-appropriate dating behavior among foster parents and caregivers is important to allow LGBTQ youth a safe environment for identity development.

These particular identity dimensions— and many more – create unique considerations for identity development within foster care. Specific regard should be paid to the development of these identities to ensure positive and healthy outcomes for all adolescents.

LGBTQ

A common acronym that refers to someone who identifies as part of the lesbian, gay, bisexual, transgender, or queer community.

Sexual Orientation

A way of describing who someone is attracted to romantically, emotionally, or sexually. Some sexual orientations are gay, lesbian, bisexual, and straight.

Gender Identity

One's concept of themselves as being male, female, both, or neither. Gender identity can be expressed through clothing, appearance, and behavior. One's gender identity can be the same or different from their sex assigned at birth.



Chapter 2: Analysis of Connecticut Policy, Practice, and Relevant Law

Connecticut DCF's progress of meeting the needs of youth in care over the last decade is reflected in its updated policies, best practices, and relevant statutes. One of the most prominent changes has been the improvement of the decision-making process and the implementation of the Teaming Continuum, which utilizes input from multiple stakeholders at various points of a case including Considered Removal Teaming and Child and Family Permanency Teaming.³⁸ This approach may particularly benefit youth in foster care by being able to bring multiple important voices to the table at all points of a case.

The DCF Policy Manual and accompanying Best Practices Guides serve as the primary tools for providing instruction, standardizing practice, and assisting in staff decision making at all points of a case. In this section, we examine several of DCF's foster care policies and best practice guidelines, and we identify areas for further growth in policy and practice regarding adolescent identity development. Our policy recommendations at the end of this report address gaps in written policy and best practices and incorporate youth-driven suggestions.

Connecticut Department of Children and Families Policy & Practice

Foster Care Services Policy and Practice

Policy

DCF's mission is for children to grow up to be healthy, safe, smart, and strong.³⁹ This mission is incorporated into DCF's policies regarding foster care services including guidelines for recruiting and licensing foster homes and therapeutic foster homes. This policy, found in DCF's Policy Manual Chapter 41-1, includes guidelines for the foster care system, including the recruitment and licensure of foster homes, as well as therapeutic foster care.

In light of Conn. Gen Stat. § 17a-114e, DCF updated Policy Chapter 41-1 to include policy regarding Foster Family Profiles and Surveys (p. 9-10).⁴⁰ It specifies that DCF staff shall create a foster family profile for each foster family and distribute the profile to the child before the child moves to his or her new placement. Per DCF Policy Chapter 41-1, "the Foster Family Profile shall contain information including but not limited to:

- The name, age, and gender of each person living in the household;
- Information about pets in the household;
- The race and ethnicity of the family and the primary language spoken in the home; and
- A brief summary of the household and neighborhood, including family schedule, hobbies, and expectations" (p. 9).⁴¹

Beyond written policy, the Foster Family Profile form includes information about religion and cultural customs the family may practice.⁴²

Best Practice

The Foster Care Best Practice Guide provides a clear and detailed description of the procedures for recruiting, licensing, and matching foster parents. This section of our research report will only focus on the family matching section of the Foster Care Best Practice Guide (p. 26-29).⁴³ When a placement is determined for a child with a foster family, it is the “matcher’s” duty to “facilitate the match” primarily by information sharing between all parties involved. This includes “notify[ing] the foster family’s FASU Social Worker of the details of the anticipated placement, including:

- Strengths of the child;
- The child’s trauma history, including nurturing relationships and trauma-related reactions;
- The need for any training materials or other family support systems;
- Whether the placement is over capacity or otherwise non-conforming to best practice guidelines; and
- Whether there is a need to call a disruption conference for the child if he or she has had multiple placements due to behavioral issues” (p. 27).⁴⁴

Foster/Adopt Manual

The Foster Care Best Practice Guide notes that the Office of Child and Youth in Placement shall maintain a practice manual about foster care and adoption (p.11).⁴⁵ This manual, titled the Foster/Adopt Manual, is a resource for foster and adoptive parents and includes a wide range of topics to help foster and adoptive parents support the wellbeing of children in their care.

Chapter 2 of the Foster/Adopt Manual focuses on providing care and normalcy to a child in foster care and about the entire experience of being a foster parent including pre-placement matching as well as information for providing the most family-like care as possible, including when the child is old enough to have a sleepover or obtain a driver’s license.⁴⁶

The matching process occurs when the child’s social worker notifies the FASU Unit that a child needs to be placed into a foster home and a search begins for a home that is “licensed to care for a child of this particular age and gender” (p. 2).⁴⁷ When a FASU social worker identifies a foster family to potentially care for a child in need of a temporary placement, the matching social worker then contacts the family and “explain[s] basic facts about the child’s circumstances.” However, the manual states that there may be times when “the matcher has little information to share about the child” (p. 2).⁴⁸

The Foster/Adopt Manual goes on to list a series of “Questions to Ask before a Child is placed in Your Home” (p. 3). This list includes a range of questions from basic information such as gender and ethnicity, background information, placement issues, school matters, health/medical issues, behavior, and legal issues (p. 3-5).⁴⁹

FASU

FASU is known as the Foster and Adoptive Services Unit within the Connecticut Department of Children and Families, which provides support for foster and adoptive families. In addition to the youth’s DCF social worker, foster parents also have a FASU social worker.

“I feel like [foster families] just receive a folder of everything we’ve ever done without giving us a chance to explain ourselves.”

- Connecticut Foster Youth, Age 17

The Foster/Adopt Manual makes it clear that when a foster parent is considering religious involvement for the foster child, foster parents should discuss their thoughts with the child's social worker; the manual specifies that a child cannot be "made or forced to participate in any religious ceremonies without the [biological] parents' permission"

In addition to information about the matching process and the pre-placement experience for foster parents, the Foster/Adopt Manual includes guidelines for when a child is living in the foster home. Under these guidelines, the Foster/Adopt Manual includes information about Religious Matters (p. 14).⁵⁰ The Foster/Adopt Manual makes it clear that when a foster parent is considering religious involvement for the foster child, foster parents should discuss their thoughts with the child's social worker; the manual specifies that a child cannot be "made or forced to participate in any religious ceremonies without the [biological] parents' permission" (p. 14).⁵¹ Moreover, if the biological family wishes that the child participate in a different religion, it is the responsibility of the foster parent to "make these arrangements" (p. 14).⁵²

Identified Gaps in Policy and Practice

Since 2011, DCF has made efforts to better recruit and retain a diverse group of high-quality foster placements and equip these foster families with the necessary training and tools to provide temporary care for a variety of youth. The concept of Foster Family Profiles aims to provide the youth with information useful for preparing for their new placement.⁵³ Moreover, in discussions with current foster youth at Youth Advisory Boards (YABs) throughout the state, it is clear that the foster family profiles have not been uniformly and consistently implemented across DCF Area Offices. Some youth who had changed placements after the law went into effect on January 1, 2017 shared that they had received some type of Foster Family Profile, while other youth who had changed placements after this date were not aware of this tool.

Additionally, the Foster Care Best Practice Guide and the Foster/Adopt Manual are unclear about what information is provided to the foster placement about the child. Although it is listed as best practice for the matching social worker to communicate information about the child to the FASU social worker, the manual does not include instructions about how and when the FASU social worker should communicate this information to the foster placement. While the Foster/Adopt Manual states that this information might be questions that a foster parent could ask the child upon the child's placement, this may be information that a youth in placement may be reluctant to vocalize during the initial days of the placement.

Adolescent Services Policy and Practice

Policy

Connecticut's child-serving agency recognizes the unique needs of the adolescent population. For that reason, DCF has developed policy and practice pertaining to serving adolescents in foster care in a way that is responsive to this crucial developmental stage.

DCF Policy 42-1 mandates that all youth in foster care age 14 years or older receive planning to gradually be able to transition into independence regardless of their permanency status (p. 1).⁵⁴ When a youth in care turns 14, the policy denotes that the youth's social worker must arrange an Adolescent Case Transfer Conference. One of the outcomes of the Adolescent Case Transfer Conference is to assign an "Adolescent Specialist" to the youth (p. 2).⁵⁵ Adolescent Specialists must successfully complete the DCF Workforce Academy's Adolescent Certification Program, complete

training to understand how trauma from early childhood experiences may manifest during adolescence, and develop a “thorough understanding of adolescent brain development” (p. 2).⁵⁶

The services that adolescents shall receive are more deeply described in DCF Policy 42-3.⁵⁷ This includes Life Skills Education and Training, which per policy, the curriculum covers: “skills to maintain a healthy daily living lifestyle, have positive social relationships, self-care, work and study, career planning, finances, communication, and reproductive health care counseling consistent with national guidelines” (p.1).⁵⁸

Best Practice

The Adolescent Best Practice Guide further marks DCF’s commitment towards best serving the adolescent population in foster care. This guide outlines the identified best practice of all the Adolescent Services policies.

The best practices accompanying the Adolescent Case Transfer Conference offer specific topics that may be discussed at the conference, including (but not limited to): “permanency goal, current placement, trauma history, the child’s comprehensive needs and the relationship to current case goals, objectives, identified services and interventions, and progress towards achievement of these, a comprehensive analysis of the youth’s educational status, special considerations that need to be addressed prior to the transfer, the time frame for the transfer to an Adolescent Specialist and any case-related activities to be completed prior to the transfer; and compelling reasons, that the case should remain with the current social worker” (p. 6).⁵⁹

The Guide goes on to provide the job description of the Adolescent Specialist. The Adolescent Specialist is an important and essential role with several functions. Some of the responsibilities listed include “educating youth while in middle school and secondary school about post-secondary education, job training options, and volunteer opportunities, provide support to youth who are celebrating milestones, such as graduations and rituals, and ensure youth are provided with a certified life skills program” (p. 7).⁶⁰

Per Policy 42-3, DCF is required to provide a Life Skills Education and Training, in which components of the curriculum are identified in the Adolescent Best Practice Guide. The Life Skills curriculum contains the minimum components that the program shall cover across several domains including: “person-centered planning based on hopes, dreams, and aspirations, career planning, self-care, decision making regarding drugs, alcohol, and sexuality, understanding one’s own trauma, self-advocacy, and problem solving” (p. 19-20).⁶¹

Identified Gaps in Policy & Practice

While Connecticut’s DCF has made the commitment within its policy and practice guidance documents to identify the necessary support that adolescents in foster care need to thrive into emerging adulthood, a large gap exists in both written policy and best practice of supporting adolescents in foster care through exploring, developing, and understanding their identity.

“There are definitely additional efforts that could be made to better recruit and train foster parents specifically for adolescents. It’s something we really struggle with.”

- DCF Social Worker

In the Adolescent Services Best Practices Guide, the only mention of identity development is found within the congregate care section. It reads: “DCF recognizes the importance of racial, ethnic, and sexual identity to healthy adolescent development. Youth in congregate care settings are encouraged to appropriately and safely develop their racial, ethnic, and sexual identities” (p. 22).⁶² It is important to note that this statement places the responsibility of appropriate and safe identity development entirely on the youth and does not provide any information about how staff within congregate care settings can help facilitate this process. Moreover, while it is certainly important that healthy identity development can occur while a youth resides in congregate care, this is true for all youth who live in foster care. Aside from this sentence in the Adolescent Services Best Practices Guide, DCF’s policies and guides do not address how to best support youth in their identity development.

The Department’s Adolescent Policy and Best Practice Guide makes it clear that DCF has dedicated staff and resources to serving adolescents through a trauma-informed approach. However, the priorities of different administrations have allowed the focus on adolescents to fluctuate. Several systemic factors have also impacted the focus on adolescents and the reduced number of Adolescent Specialists within the Department. This includes consistently high caseloads for DCF social work staff, as well as the state’s multiple budget crises.^{63, 64, 65} As a result, social workers who have received minimal training regarding adolescents may be ill equipped to serve teens on their caseload. However, it is important to acknowledge that there may be occasions where transferring the case to an adolescent specialist may not be the preferred option, such as a youth having a strong relationship with a current social worker or youth who may be a part of a sibling group with younger children.

It is also less clear about how the Adolescent Services Policy and Best Practice translates to current practice. For example, it is unclear about how, if at all, DCF conducts Adolescent Case Transfer Conferences when a youth turns age 14. It also remains unclear to the extent that DCF provides training, professional development, and additional resources to strengthen the professional understanding of supporting adolescents both in general and specifically in their identity development.

For example, both the number of Adolescent Certification Training sessions offered by the DCF Academy for Workforce Development and the number of participants in these sessions have vastly fluctuated over the last five years.

Number of Adolescent Certification Trainings offered by DCF Workforce Academy



Case Planning Policy and Practice

Policy

DCF’s case planning policy seeks to provide guidance for planning and monitoring all cases involved with DCF, including foster care cases. Foster care cases are required to have a case planning meeting known as an Administrative Case Review (ACR) every six months while the youth is in care.⁶⁶ An ACR serves as a process for reviewing the agency’s case planning to meet the child’s case goals, although it is important to note that voluntary

services and ongoing services cases in DCF (when the child has not been removed) also receive case planning. If the child is over the age of 12, current policy states DCF must invite the child to these meetings, as guided by recent federal legislation. The goal of an ACR is to “review the status of the progress toward the child’s case goals,” such as their permanency goal and their educational goal (p. 2).⁶⁷

Policy 36-3 designates the information social workers must include within a child in placement case plan. The child in placement case plan shall include, per policy, “the child’s level of functioning across all areas” (p. 1),⁶⁸ which includes information such as the child’s physical, emotional, and behavioral health, as well as their social supports, and educational history. The policy goes on to list that the case plan should also include the child’s current placement, visitation with siblings, and “additional contents for children in placement age 13 and older” (p. 2).⁶⁹

ACR

In this report, we reference ACRs, known as Administrative Case Reviews within Connecticut Department of Children and Families (DCF). DCF conducts ACRs at least every six months for all children in foster care and their families. The purpose of an ACR meeting is to convene important figures in a foster youth’s life in order to provide responsive planning for the youth’s needs, including achieving permanency.

“We are asking them to absorb so much change and we normalize it.”

- Connecticut DCF Adolescent Social Worker

Best Practice

The Case Planning Best Practice Guide provides a detailed description of each of the required pieces of information for the case plan and has specifications for information pertinent for youth over the age of 13. This includes some information about the youth’s identity, including:

- “Issues involving sexual orientation (include information regarding healthy sexual development);
- And issues involving cultural awareness” (p. 12).⁷⁰

Identified Gaps in Policy and Practice

Case planning is an essential practice of child welfare services.⁷¹ While DCF has improved the case planning process in recent years while under the Juan F. Consent Decree,⁷² there is further room for DCF to improve policy and practice in a way that specifically supports adolescents in foster care. ACR meetings provide a time for the youth’s network of supportive adults to convene and review the current and future safety, permanency, and well-being of the child in placement.

Although the case planning policy and best practices documents briefly upon identity development and issues for adolescents, the case planning process, as well as ACR meetings, can serve as an avenue for supporting adolescents through their emerging identity development.⁷³ For example, the Case Planning Best Practice Guide should further expand the additional information section for youth over the age of 13 to include gender identity, racial identity, and religious identity. The inclusion of this information in the case plan will help both the youth’s social worker and foster placement understand how each individual adolescent could be supported in their identity development throughout their current foster placement and beyond.

Although the case planning policy and best practices touch briefly upon identity development and issues for adolescents, the case planning process, as well as ACR meetings, can serve as an avenue for supporting adolescents through their emerging identity development.

Serving LGBTQ Youth in Foster Care

Policy

Policy 30-9, listed in the Protective Services section of the Policy Manual, is centered on protections for LGBTQ individuals involved in DCF in any way.⁷⁴ The policy is not focused entirely on youth, but instead prohibits discrimination on the bases of sexual orientation or gender identity and expression for youth, potential and current foster or adoptive parents, and biological parents. The policy cites several Connecticut statutes which prohibit discrimination in these circumstances.

Besides anti-discrimination, the policy defines the terms intersex, sexual orientation, transgender, and questioning. Additionally, the policy recognizes that LGBTQ youth in care have a right to DCF services that are “non-discriminatory, safe, affirming and non-detrimental” (p. 1). The policy also stipulates that DCF staff should make referrals to services and groups that “support

- children, youth and adolescents who are experiencing difficulty with issues of sexual orientation and/or sexual identity
- foster children who are placed with LGBTQI foster or adoptive families or mentor(s), and
- foster or adoptive parents(s) or mentor(s)” (p. 2).⁷⁵

The policy also stipulates that LGBTQI-sensitive training will be “made available,” but not required for DCF staff and foster or adoptive parents (p. 2).⁷⁶

Working with Transgender Youth and Caregivers Practice Guide 2014

In 2014, DCF published the most recent version of a practice guide, Working with Transgender Youth and Caregivers Practice Guide, for providing care to transgender youth and caregivers.⁷⁷ The guide is part of a collaborative effort led by DCF and True Colors called the Safe Harbor Project, which offers resources to LGBTQ youth and families involved with DCF.

Through the Safe Harbor Project, CT has established liaisons in each of the area offices and a statewide committee that meets monthly. Training for liaisons is mandatory and revised as needed. DCF has a long standing partnership with True Colors. To ensure ongoing communication, the Director of Change Management sits is a member of the Safe Harbor Statewide Committee and facilitates the exchange of information at the Adolescent and Foster Care Communities of Practice to help improve current practices across the agency.

In addition, DCF has a contract with True Colors which includes:

- the development of a training curriculum,
- the development and facilitation of “Train the Trainer” sessions to providers in their work with foster families
- and the ability to provide ongoing case consultation and skill building processes.⁷⁸

The guide includes definitions of terms that related to gender identity, such as gender expression, gender binaries, and intersex (p. 4).⁷⁹ The guide again highlights the

optional trainings related to LGBTQ youth that are mentioned in Policy 30-9. In regards to transgender youth in foster care, the guide declares that youth should be assigned to placements, that are “consistent with and supportive of” the youth’s gender identity and expression (p. 5).⁸⁰ Specifically, if a placement is sex-segregated, the youth “should be placed based on his or her gender identity whenever possible” (p. 5).⁸¹ Additionally, youth in care should have access to bathrooms and locker rooms that are “consistent with their gender identity, or to a unisex restroom” (p. 6).⁸² The guide then provides questions that could potentially be used by a social worker or therapist to understand how a child and their family has interacted with gender identity and expression and traditional gender roles. Lastly, a list of resources is provided for social workers, parents, and children.

Identified Gaps in Policy and Practice

DCF’s current policy and guidelines offer a general level of anti-discrimination protection and support for LGBTQ youth in care. However, while the policy recognizes the need to provide “non-discriminatory” and “affirming” services to LGBTQ youth in care, it fails to offer specific ways to do so. Additionally, the understandings of gender identity and expression and sexual orientation are constantly evolving, and the policies and practices should be updated regularly to reflect these changes.

Both Policy 30-9 and Working with Transgender Youth and Caregivers Practice Guide fail to suggest systematic policies and practices that could support LGBTQ youth. Each mention an optional LGBTQ sensitivity training for foster and adoptive parents or DCF staff. While the existence of such a training signals that DCF is aware of the unique challenges associated with LGBTQ youth in care, the fact that it is not required significantly limits its effectiveness, and could hinder the ability of staff and caregivers to thoughtfully work with LGBTQ youth who have not openly disclosed their identity. Furthermore, Policy 30-9 states that DCF staff should connect LGBTQ youth and caregivers to support services when they are “experiencing difficulty with” sexual orientation or gender identity (p. 2)⁸³ and does not provide specific provisions to support all sexual or gender minority youth. Furthermore, the policy offers no specific information of what such supports could entail. Importantly, neither the policy nor the guide considers strategies to help youth feel comfortable in disclosing an LGBTQ identity to DCF staff or foster homes, or feel immediately accepted and supported upon such a disclosure. Without a comfortable environment that allows for disclosure, DCF is limited in its ability to provide specific services to LGBTQ youth.

The Working with Youth Guide provides general best practices on transgender youth, it does not engage significantly with youth preferences concerning their identity. The guide does not mention preferred pronouns or names, and offers no guidance on understanding and respecting when and to whom youth may wish to disclose their identity. This is important because youth may have trusted a DCF worker with information concerning their identity and not foster or biological family, school administration, etc. The guide also uses terms such as “transsexual,” which is considered outdated and potentially offensive.⁸⁴

“We partner with certain organizations, but I think that we should make automatic connections to resources should be made for [LGBTQ] youth as a preventative measure to make sure they feel supported.”

- Connecticut DCF Central Office Staff

Adoption Policy and Practice

Policy

Over the past several years, DCF has focused on increasing adoption rates for children in placement. Chapter 48 of the Policy Manual includes in-depth information about how a caseworker can support children during the adoption process, specifically preparing for placement (Policy 48-13-3 and Policy 48-15-5).

Policy 48-13-3 identifies that “there a number of casework aspects to preparation of a child for a placement” (p. 1).⁸⁵ These aspects include examining the attitudes the child displays regarding:

- “Sexual behavior and inherent sexuality/gender identity
- Food and mealtime
- Religious feelings, if any
- Family concepts
- Self-concepts
- Feelings of right and wrong
- Feelings regarding possessions?” (p. 1).⁸⁶

During this pre-adoptive placement process, DCF Policy 48-15-5 denotes that the child’s Social Worker shall complete the DCF 2248 form, otherwise known as the Child Disclosure Form (Appendix A). Before a child is placed into an adoptive home, this form is used to “present a clear picture of the child to the family by discussing both the positive strengths and any problem areas...The description should include:

- The child’s strengths and positive attributes
- Any special needs of the child that require more than usual parenting care, and any significant behavioral issues
- A daily schedule and environment with which the child feels most comfortable
- Clear medical information about any present or potential disabilities which should be shared with the family
- Any relevant information regarding the child’s cultural, religious, sexual orientation, disability, or other identity issues” (p. 1-2).⁸⁷

DCF 2248 form

Before a child is placed into an adoptive home, this form is used to “present a clear picture of the child to the family by discussing both the positive strengths and any problem areas...The description should include:

- The child’s strengths and positive attributes
- Any special needs of the child that require more than usual parenting care, and any significant behavioral issues
- A daily schedule and environment with which the child feels most comfortable
- Clear medical information about any present or potential disabilities which should be shared with the family

Similarly, in-depth policy guidance for providing information about a child upon being placed into a foster home or considerations to make about a child's identity does not exist currently. While adoption is often a preferred permanency goal, many youth spend some time in foster care prior to finding permanency. It is imperative that DCF's foster care policy (and thus, practice) mirror the thoroughness of DCF's adoption policy.

Relevant State Statute, Regulation, & Federal Law

Rights of Children and Youth in Foster Care

Conn. Gen. Stat. § 17a-16 provides the basic rights of children and youth who are placed into public or private congregate care. However, the statutory language is limited to protecting the "personal, property, or civil rights except in accordance with due process of law."⁸⁸

Connecticut Antidiscrimination Laws

According to the Human Rights Watch Campaign, Connecticut is one of only a few states that prohibit discrimination based on both sexual orientation and gender identity.⁸⁹ This change to Connecticut statutes was made in 2011 by Public Act No. 11-55.⁹⁰

Foster Family Profiles

Conn. Gen. Stat. § 17a-114e charges the Commissioner of Children and Families with creating a foster family profile for each foster family to be distributed to a child age 12 or older.⁹¹ The statutory language is the same as the DCF Policy and includes the contents of the profile described earlier in this section. It is important to note that the statutory language includes no mention of reporting or monitoring the uniform and consistent use of Foster Family Profiles.

DCF Policy notes that FASU staff and private child placing agencies shall create a Foster Family Profile for each foster family using the DCF-4928, "Foster Family Profile." The Profile shall be distributed to each child who is 12 years of age or older at least seven calendar days prior to the placement or, in the case of an emergency placement, as soon as possible.

Minority Recruitment Specialist & Cultural Sensitivity Training

Conn. Gen. Stat. § 17a-116c requires that any DCF employee "whose duties concern minority adoption and foster family recruitment" to undergo a training regarding cultural sensitivity. Section (b) creates a permanent position known as a "minority recruitment specialist for foster and adoptive families," whose responsibility it is to create training materials, conduct trainings and workshops for both employees and recruiters.⁹²

Regulations of Connecticut State Agencies

Within DCF's current state regulations, several sections relate to this report. For example, R.C.S.A. § 17a-150-113 establish placement criteria for potential placements, which "shall be based upon the suitability of potential placements for the child and the wishes of the guardian for their child with respect to religion and other appropriate attributes of approved homes."⁹³ However, because of the limited number of foster and adoptive placements in Connecticut,⁹⁴ this may not always translate into current practice.

Furthermore, R.C.S.A. § 17a-150-114 states that the child placing agency (DCF or a contracted provider), "shall ensure that each child is provided with sufficient individual clothing suitable for the child's age and activities and appropriate to the season."⁹⁵ However, the state regulations make no mention of clothing that is appropriate for the child's gender identity, which was a topic of discussion amongst foster youth who are a part of the YABs.

The Multiethnic Placement Act of 1994

The Multiethnic Placement Act of 1994 was put in place as an effort to reduce the drastic disproportionality of youth of color who are in the foster care system. Essentially, this federal act states that youth cannot be denied or delayed foster care or adoption placement solely due to the child or prospective family's race or ethnicity. The intent of this federal legislation was to increase permanency for youth of color in foster care as well as prohibit the discrimination of denying non-white individuals the opportunity to become foster or adoptive parents. It is important to note that the law, however, does allow an agency to consider the racial or cultural background of the child and the capacity of the placement to meet those needs.⁹⁶



Chapter 3: Connecticut Profile of Adolescents in Foster Care

Demographics

Adolescence is a critical period for all youth to continue to develop as individuals. It is also a time where youth begin on their path to emerging adulthood. The below data begin to describe the adolescent population in foster care throughout Connecticut.⁹⁷

Connecticut's Foster Care Population

On any given day, there are roughly 4,000 children in Connecticut's foster care system.⁹⁸ In FY18, more than one-third, or 37 percent, of all youth in Connecticut foster care, are 13 years of age or older. This is more than 1,500 of Connecticut's youth.

When compared to the most recent available national data, Connecticut has consistently had a disproportionate percentage of adolescents and young adults in foster care. In 2012, 45 percent of all Connecticut youth in care were ages 13 or older, compared to the national average of 33 percent. In 2016, the numbers remained disproportionate: 40 percent of all youth in Connecticut's care were ages 13 or older, compared to 40 percent nationally.⁹⁹

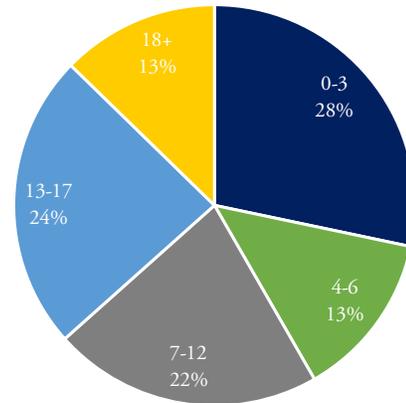
Although the number of adolescents in foster care (ages 13 to 17) has decreased by more than ten percent over the last five years, adolescents continue to make up a significant percent of Connecticut's population.¹⁰⁰

When we look at Connecticut's foster care population by sex, the disaggregated data for youth in foster care by sex is based on sex assigned at birth.¹⁰¹

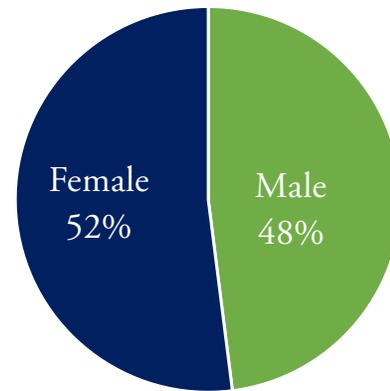
Race & Ethnicity Disproportionality in Foster Care

Both in Connecticut and nationwide, racial disparities persist at every point of the child welfare system. This includes Connecticut's foster care population. Although DCF has taken initiative to promote racial justice within the agency statewide,¹⁰² these initiatives have yet to be reflected in current data. Over the last five years, the disproportionate percentage of Black youth in the foster care system has minimally decreased. The disproportionate percentage of Latino youth has not significantly

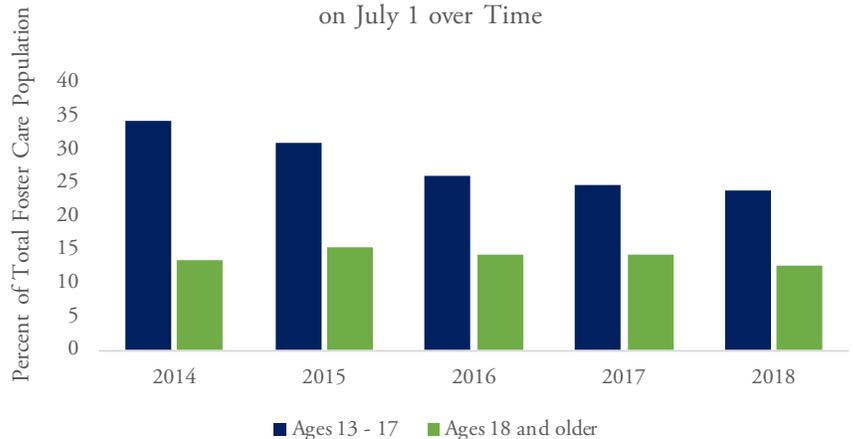
Percent of Total Children in Placement by Age Group on July 1, 2018



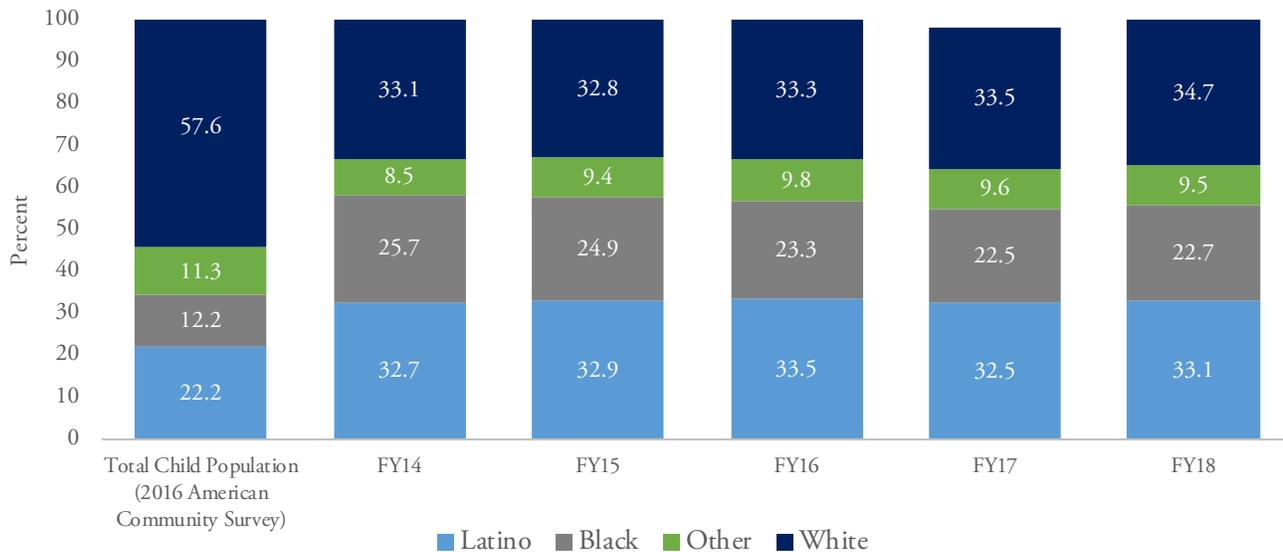
Connecticut Youth in Foster Care by Sex



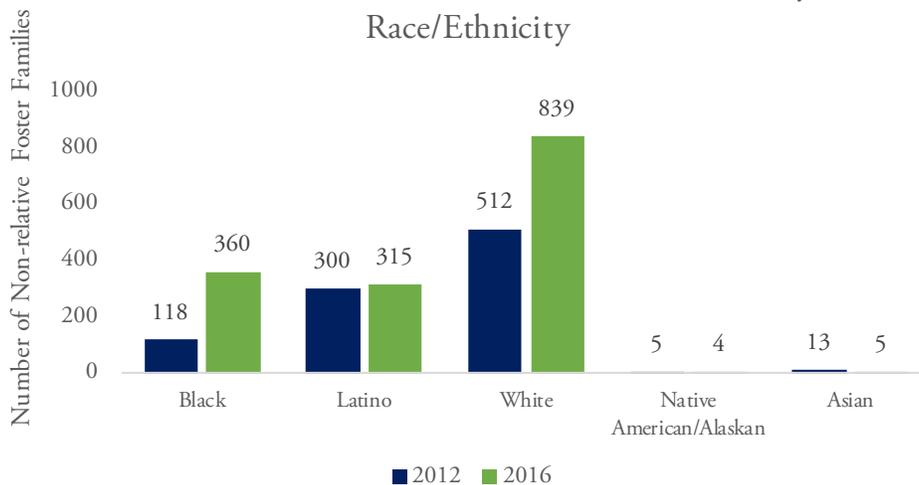
Youth Ages 13 - 18+ in Placement on July 1 over Time



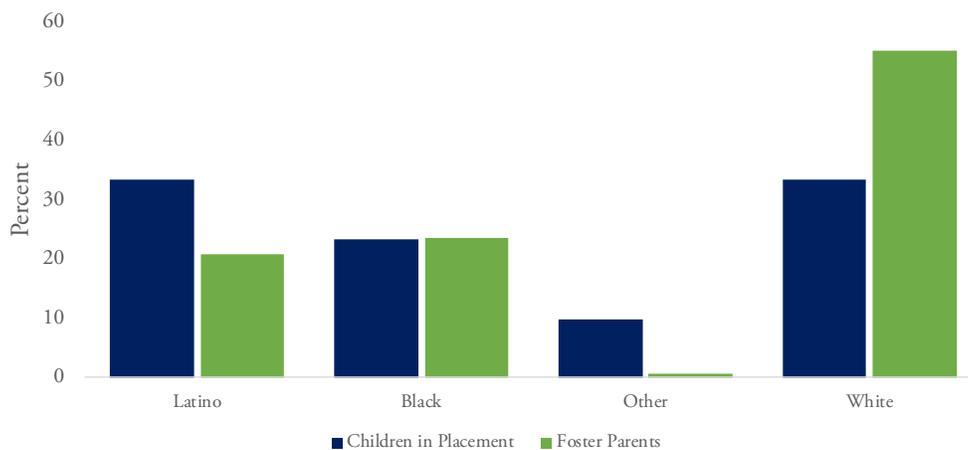
Total Foster Care Population by Race/Ethnicity



Non-Relative Foster Families in Connecticut by Race/Ethnicity



Children in Placement and Non-Relative Foster Parents by Race/Ethnicity



changed, and the actual number of Latino youth in foster care is higher than the number five years ago.¹⁰³

Meanwhile, as the racial disproportionality of the foster care population remains, there exists a gap in non-relative foster families of color as well. The most recent data show that the majority of non-relative foster parents are White. Efforts to diversify the pool of foster families have slowly increased between 2012 and 2016.¹⁰⁴

There has been a large increase in the number of children and youth placed into kinship care (37 percent in 2016),¹⁰⁵ but the majority of children and youth in placement are still placed into traditional foster care. As a result, youth of color are not always placed into homes with parents of similar race, ethnicity, or culture.

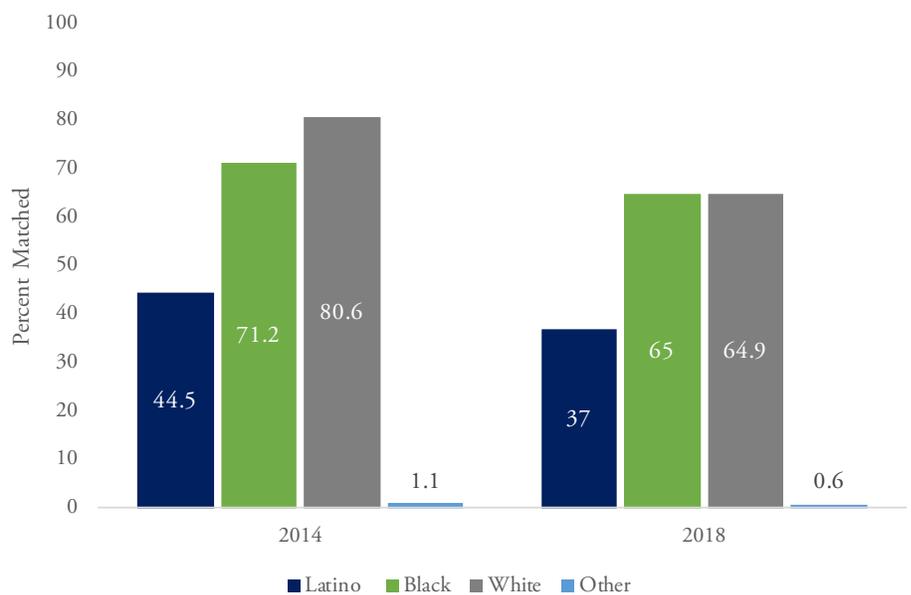
“I wish there were more foster parents for adolescents. Just love me!”

- Connecticut Foster Youth, Age 17

Although the federal Multiethnic Placement Act prohibits child welfare agencies from delaying a placement based on the factors of race/ethnicity, recruiting a larger pool of diverse foster parents will help DCF facilitate positive racial and ethnic identity development for adolescents in care.

Adolescents in Connecticut’s foster care have overwhelmingly expressed the need for more foster parents specifically for teenagers. In conversations with Connecticut Voices for Children both in 2017 and 2018, several youth discussed experiencing placement changes after being placed in care, and this was difficult because they felt that foster families were unwilling to take them in. Despite the lack of quantitative data to inform this issue, youth from across the state as well as DCF social workers have consistently expressed the need for additional foster parents suited to care for adolescents.

Children in Placement Placed in a Foster Home with >1 Parent of Same Race/Ethnicity on July 1 over time



Placement Change Data

As Connecticut Voices for Children explored in our 7th Annual Youth at the Capitol Day project, frequent placement changes may have an adverse impact on youth in foster care.¹⁰⁶ Not only may frequent placement changes impact youth’s behavior and adult outcomes related to work, housing stability, and mental health, it may also have an impact on the identity development of youth in foster care.¹⁰⁷ The literature review from Connecticut Voices’ 7th Annual Youth at the Capitol Day confirms that older child age is associated with increased risk for placement change.¹⁰⁸

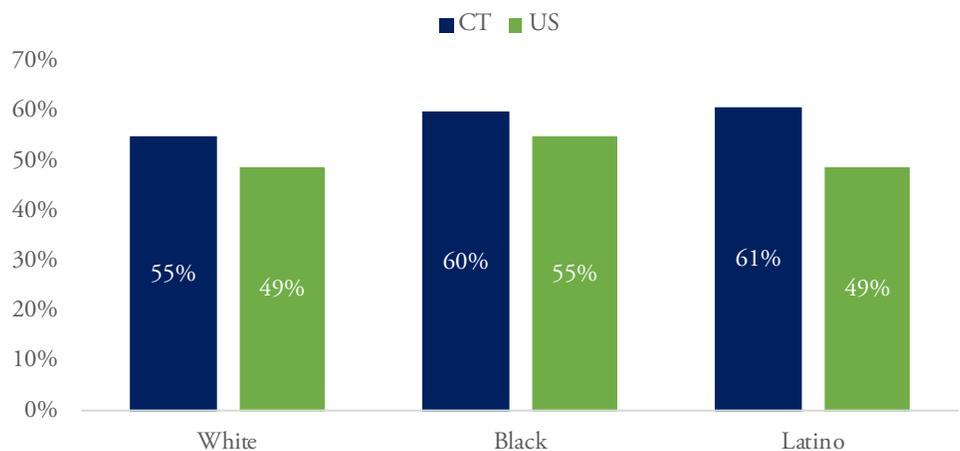
The following data describe the number of placements a youth experienced during the most recent foster care episode. In Connecticut, 59 percent of youth experienced three or more placement changes during their most recent episode in foster care.¹⁰⁹ An “episode” in foster care occurs when a youth enters foster care and then exits foster care.

“There are definitely additional efforts that could be made to better recruit and train foster parents specifically for adolescents. It’s something we really struggle with.”

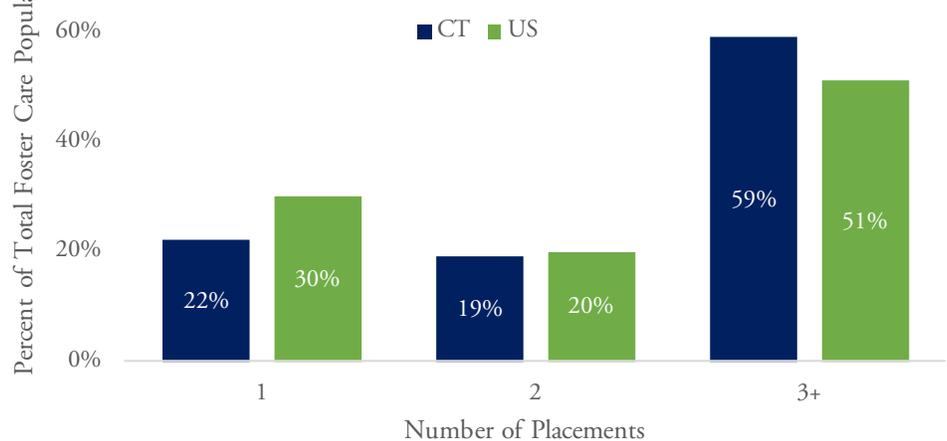
- Connecticut DCF Social Worker

When disaggregated by race, Black and Latino youth are more likely than White youth to experience three or more placements.¹¹⁰ Given the small number of foster parents who seek to care for adolescents, combined with the mismatch of the foster parent pool, it is possible that Black and Latino adolescents may feel less supported in their placements, which may affect their racial or ethnic identity development. This is an area where additional qualitative research could help inform this topic.

Youth with 3 or More Foster Care Placements by Race/Ethnicity



Number of Placements during Most Recent Foster Care Episode



“Changing different environments is a large adjustment for someone who is still trying to manage their own emotions and find out who they are.”

- Connecticut Foster Youth, 7th Annual Youth at the Capitol Day, Age 21

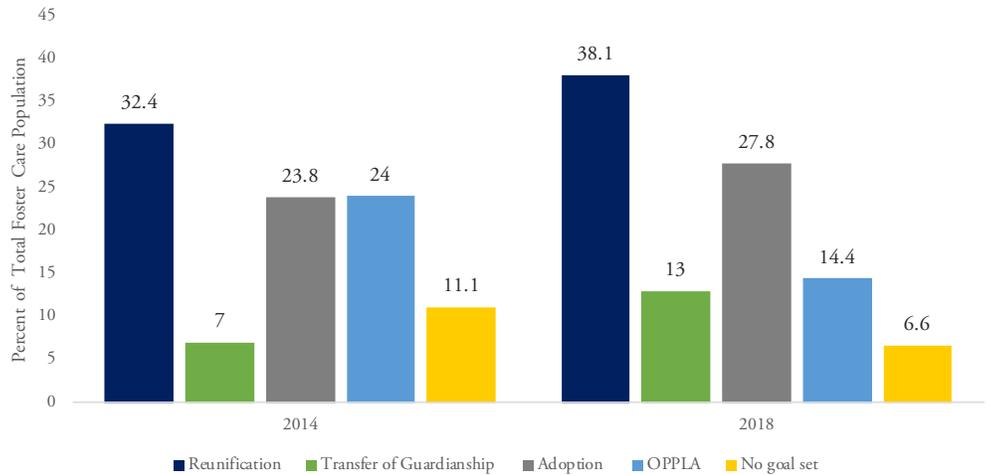
Permanency

According to the Connecticut Department of Children and Families, “permanency means having an enduring family relationship that is safe and lifelong; offers the legal and social status of full family membership; provides for physical, emotional, social, cognitive and spiritual well-being; and ensures lifelong connections to extended family, siblings, and other significant adults as well as family history and traditions, race and ethnic heritage, culture, religion and language.”

Permanency Data

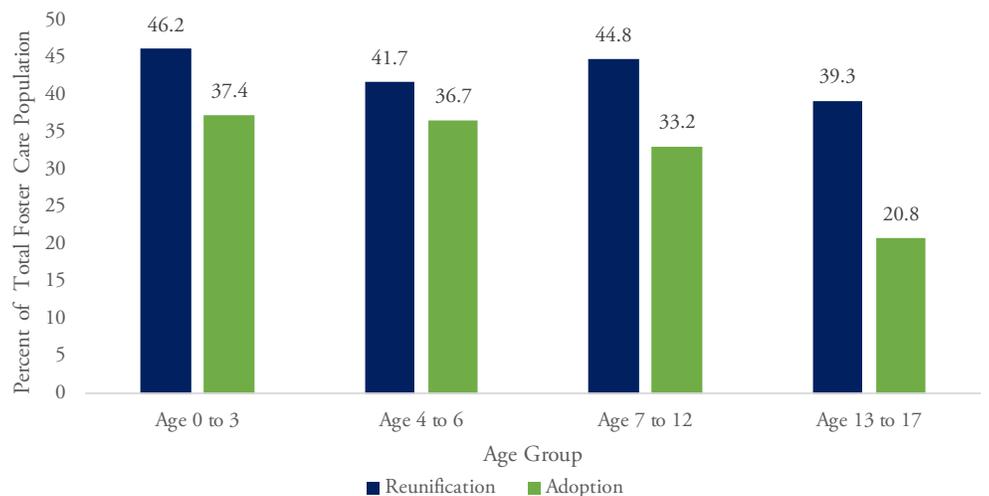
Permanency for youth in foster care promotes the wellbeing of youth and helps establish a constant physical environment that maintains connections to community. A sense of permanency can also support youth in developing a healthy sense of identity. Over the last several years, Connecticut DCF has worked towards increasing the number of children and youth placed into a family-like setting. In addition, DCF has also increased the number of children with reunification or adoption listed as their permanency goal within their case plan.¹¹¹

Permanency Goals on July 1 over Time



However, when disaggregated by age group, adolescents are among the lowest percentage to have reunification or adoption listed as their permanency goal.¹¹²

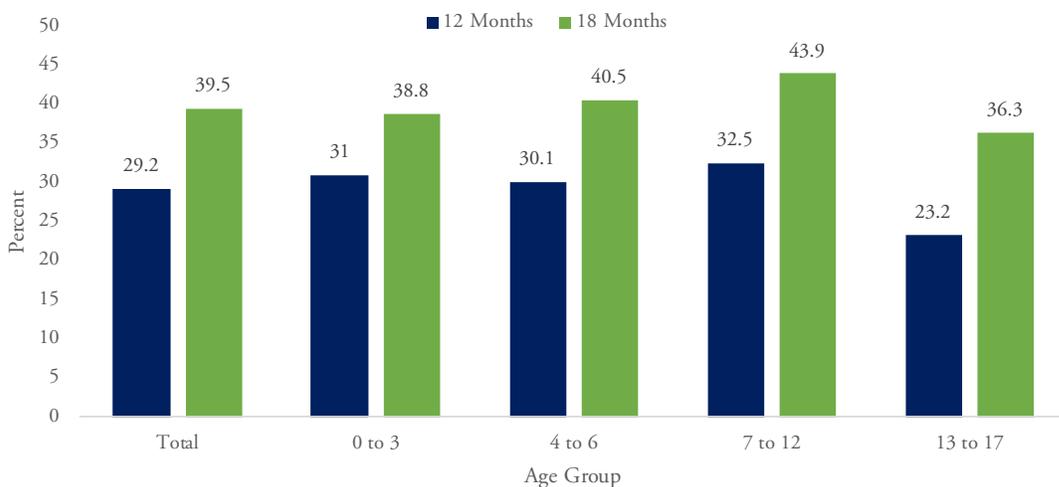
Permanency Goal by Age Group



Moreover, when looking at achievement of permanency within one year and 18 months of residing in foster care, adolescents share the lowest percentage of those who achieved permanency during this time period. For example, less than a quarter (23.2 percent) of youth ages 13 to 17 years old who entered foster care in FY17 achieved permanency within one year of entering foster care. This is significantly lower than the aggregate percent of 29.2 percent.¹¹³

With all of this in mind, adolescents in foster care remain an important and vulnerable population who face an increased risk for adverse outcomes, including frequent placement changes and a lack of permanency, must be provided with enhanced support during this critical developmental period.

Achievement of Permanency within 12 or 18 months for Youth who Entered Care in FY17



Chapter 4: The Voice of Connecticut's Foster Youth

DCF Youth Advisory Boards (YABs)

An important part of DCF's efforts to engage adolescents in foster care is through Youth Advisory Boards (YABs). YABs are small groups of youth in DCF care convened by DCF area offices to hear about the experiences of youth and their thoughts about how to improve policy and practice. The Commissioner of DCF also convenes a quarterly statewide YAB, in which youth from across the state engage in discussion with the Commissioner directly.

In February and June of 2018, the Commissioner convened two statewide YABs focused around racial justice to engage youth regarding the Department's Statewide Racial Justice Workgroup, whose mission is to work towards becoming a racially just child welfare organization.¹¹⁴ While the initial topic of discussion was around youth's perceptions of racial justice in foster care, youth often shared experiences and stories that spanned other facets of identity. Two major themes emerged from the overall discussions:

- The desire to have the freedom to explore their own identity rather than being expected to learn a foster family's way of life and
- The need to be connected to a familiar community when being placed in foster care.

Several youth shared experiences of being expected to participate in a foster family's culture, religion, and routines, without the opportunity to explore alternatives. A few youth from different regions of the state had to learn about a foster family's religion or attend religious services without discussion. Not only do these experiences infringe on the rights of foster youth and violate current DCF policy regarding religious practices, experiences like these may significantly influence the identity development of youth in foster care.

"Part of my heritage is Venezuelan, but I feel that because I've spent 8 years in foster care, I haven't been able to learn about my culture."

- Connecticut Foster Youth, Age 16

Other youth spoke about being disconnected from their root communities by being placed in a foster home in an unfamiliar community. For example, one youth spoke about growing up in a rural part of Connecticut and then being placed in an urban setting, which had a significant impact on her life. Another youth spoke about growing up in an urban area of Connecticut but felt disconnected from his school when attending a wealthy and suburban high school. Overall, these experiences were acknowledged and heard by the Commissioner, and ultimately informed the topic for this project.

Survey of YAB Youth by Connecticut Voices for Children

Over the fall of 2018, Connecticut Voices for Children met with five regional YABs to learn more about youth’s experiences, perceptions, and ideas about their individual identity development. The youth completed an informal, 5-minute survey about their experiences and their perspectives on how being placed in foster care has impacted their identity development (see Appendix B for the full survey). Connecticut Voices for Children staff explained the purpose of the survey to youth and that participation in the survey was both voluntary and anonymous. In addition to Connecticut Voices staff, each YAB had at least one DCF worker present, who helped facilitate follow-up discussion and ensure the emotional safety and well-being of each youth.

Approximately 25 youth completed the survey. These youth self-selected into participating in YABs and self-selected into completing the survey. Therefore, it is not a random sample nor are the results representative of the entire population of youth in DCF care. However, it can provide meaningful information regarding how some youth perceive their experiences of identity development while in care and provide information regarding areas where additional research could help better inform policy and practice.

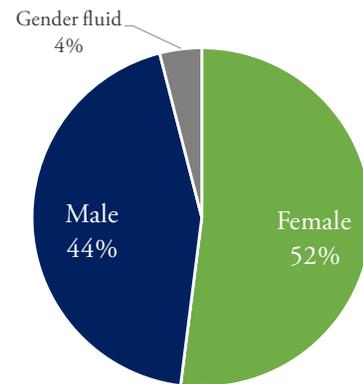
The survey was composed of two parts. Part one captured the demographics of the youth including: age during entry into foster care, gender identity, race/ethnicity, and an approximate number of foster care placements. The respondent pool was demographically diverse, including young people of different races and ethnicities, with different gender identities and experiences in foster care.

Part two was comprised of 17 true or false statements related to youths’ perceptions of their identity development and the related general support they received in DCF care. Several of these statements Examples of these statements include:

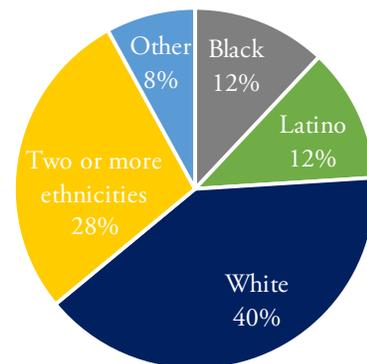
- I feel connected to my community.
- I feel connected to my school.
- I feel supported in figuring out who I am.
- I feel supported in exploring my racial/ethnic identity.
- I feel supported in exploring my religious identity.
- I feel supported in exploring my sexual orientation.

An overwhelming majority of the youth who responded selected ‘False’ for at least one of the above statements. Most commonly, youth responded ‘False’ for feeling connected to their community or school. While these results should not be used to generalize a conclusion about the entire foster care population in Connecticut, these are the experiences for some youth that live in foster care in Connecticut.

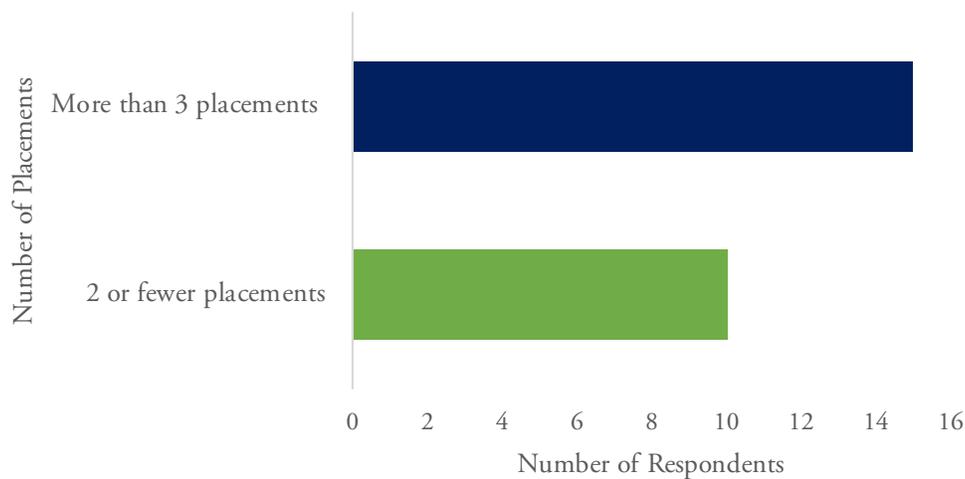
Gender Identity of Survey Respondents



Race/Ethnicity of Survey Respondents



Placement Changes of Survey Respondents



One important pattern that arose from the responses from the survey is that when youth reported having more 3 or more placement changes in total, they often responded 'False' to feeling supported in their identity development or being connected to school and community. Despite the quantitative data, there were no clear patterns among any other demographics and youth responses. For example, Connecticut data shows that Black and Latino youth experience more placement

"It felt like they [my foster parents] blamed me for being me."

- Connecticut Foster Youth, Age 17

changes than White youth, yet survey responses showed no difference in responses when viewed by race/ethnicity.

In addition to these responses, the survey also indicated that numerous respondents did not remember being invited to participate in their Administrative Case Reviews (ACR). Current DCF data shows that only 26 percent of youth ages 12 and older participated in their ACR in FY18.¹¹⁵

Regional YAB Discussions

Connecticut Voices staff held guided discussions at the five regional YABs with discussion questions centered on youth's experiences that impacted their identity development while in foster care. The discussions were led after the survey, giving the youth and facilitators the opportunity to use comments, questions, and reflections on the survey as a springboard to other topics. Three themes emerged from the discussions:

1. The importance of the freedom to be oneself;
2. The need for support in identity exploration from foster parents; and
3. The desire to have a structured way of sharing identity-related information with foster families.

Youth repeatedly discussed how important it was for them to be able to make choices concerning their identity and identity expression. Like the average adolescent, the freedom to choose their own clothing was particularly critical to youth and was discussed in almost all the YABs attended. Additionally, youth expressed the need to have the freedom to wear hairstyles of their choosing and to participate in activities they enjoyed. Youth who were not able to dress how they wanted to or who were forbidden



from participating in fulfilling activities felt as though their foster parents were rejecting or limiting a part of who they were. All parents struggle with conversations about appearance with their teenager as a way of balancing an emerging independence. However, foster parents could be better prepared for navigating conversations about how youth may want to express their personal identity through clothing and hairstyle.

Youth also highlighted the importance of having foster parents who supported their identity and identity exploration. Youth who identified as LGBTQ believed it was important to have foster parents who supported their identities and allowed them the space to explore and express their identities in a way that felt comfortable. Some youth felt that they would not be accepted or supported if they expressed their sexual orientation or gender identity to foster parents. Religion was discussed in several of the YABs as well. Many youth felt like it was important not only for foster parents to support their religious practices, but also to offer additional chances for religious and spiritual exploration. Youth at multiple YABs expressed appreciation at being invited to, but not required to attend, the places of worship their foster families regularly attended. In general, the youth demonstrated the need for their caregivers to support who they were and the identity exploration that is vital to development.

“I feel like I can’t be myself in my foster home, even though I’ve been there for a year. I want to tell them [about my sexual orientation], but I don’t know how they will react.”

- Connecticut Foster Youth, Age 17

Lastly, the youth voiced the wish to have a formalized way of delivering information to their foster families or caregivers prior to arrival. They felt that it was important for foster parents to know general information about who they were such as their likes and dislikes, favorite foods, and daily routines. Some felt that they should be able to disclose sensitive information such as their sexual orientation, gender identity, or important life events to foster parents prior to their arrival. The youth generally felt that this would allow foster parents to have a better understanding of who they were when they moved in, and position foster parents to fully support their identity development.

Chapter 5: Comparative State Policy & Practice

Across the United States, stakeholders in the child welfare arena have made drastic improvements to areas of the foster care system, such as increasing supports for youth aging out of care and decreasing the use of congregate care as a foster care placement.¹¹⁶ However, much of the remaining aspects of foster care policy and practice remains fragmented, with varied responses to improve policy and practice across states. This is often because of differences in priorities within child welfare administrations, high-profile events that may occur, and in-state politics. For that reason, it is common – and important – to utilize a comparative lens to examine the similarities and differences across state policy to make the most promising improvements to the foster care system.

Promising Practices

In this section, we highlight policies and practices from three states related to adolescent identity development. Emails were sent to addresses found on all 49 states' child welfare agency websites on two separate occasions. Eight states had general contact forms that were completed in lieu of contacting an individual email address directly. We received responses from 23 states. Twenty-six states did not respond to our request or indicated that they did not have enough resources to respond to our request.

Among the responses we received, states' focus on adolescent identity development varies greatly. For example, some states had no policy, practice, or emphasis on individual adolescent identity development. Other states, such as Minnesota, have clear and detailed guidelines for how to assess all youth in care in their identity development. A multitude of states have a specific non-discrimination policy within their child welfare manuals or state law that specifically state that youth in care shall not be discriminated against based on any facet of their identity. Some states are comprehensive in what encompasses a foster youth's identity and have included sexual and gender identity, while other states are less detailed about discrimination and limit identity to race and gender. Lastly, several states have developed or are in the process of developing clear policies and best practice guidelines for working with LGBTQ youth in care.

While this section seeks to compare policies across states, it is not meant to analyze each individual states' policies and practices. Rather, we highlight a few promising practices in other states that assess, protect, and support facets of identity development.

Minnesota

In 2015, the Minnesota Department of Human Services implemented the Minnesota Assessment of Parenting for Children and Youth (MAPCY), which serves as a supplemental tool to identify child and youth needs while in foster care and the current level of parenting support provided to the youth while in placement.¹¹⁷ While the MAPCY is used to assess a youth's individual needs while in care and the level of caregiving to meet those needs, it is also used to determine if the caregiver shall receive additional funds due to the possibility of a higher level of caregiving needed to best support the youth.¹¹⁸ The MAPCY has three types of assessments based on one's age: a child assessment (ages birth – 12), a youth assessment (ages 13 – 21 including

youth who are not in EFC – SIL), and extended foster care – supervised independent living (EFC – SIL ages 18 – 21).¹¹⁹

This assessment covers eight domains of youth development and functioning in order to comprehensively examine all levels of functioning. Each domain is a separate section of the assessment. Domains are comprised of an informational portion that discusses the scope of what the domain is intended to measure, the focus of the domain, and why parenting support is necessary for this domain. The assessment then proceeds to list a series of statements related to youth needs followed by a series of statements related to parenting care and attention. Social workers complete the assessment by checking applicable boxes to indicate all needs that the child displays and all parenting behaviors the foster parents practice. Additionally, the full assessment is also accompanied by practice guidelines. The practice guidelines provide thorough and clear directions for completing the assessment as well as examples of each indicator.

One of the domains in the MAPCY is dedicated to Developing Identity (Domain F). Per the scope of this part of the assessment, it states that:

“this domain measures the youth’s developing identity and social connections that sustain and strengthen their well-being and efforts of the caregivers to connect a youth with relationships and community resources that develop membership to a cultural group or multiple groups...Youth’s developing identity, their connection to others and how they feel about it influences behavior, cognitive and emotional outcomes including academic achievement, levels of happiness, anxiety, social integration, self-esteem and overall well-being” (p. 14).¹²⁰

Domain F of the MAPCY contains a checklist of 10 statements of parenting care and attention as it is related to developing identity; these statements range from a basic level, to significant, to extensive, to exceptional, as well as ‘none’ (Appendix C).¹²¹

Alaska

Alaska’s Office of Children’s Services (OCS) currently has an Independent Living Program that works with youth in care ages 16 or older who are eligible for Independent Living Services. Like some of Connecticut DCF’s adolescent services, Alaska’s Independent Living program focuses on providing “experiences, education, and opportunities to develop skills necessary for adulthood” (p. 1).¹²²

A unique feature of Alaska’s Independent Living Program is that the program provides financial support for extracurricular activities related to a youth’s exploration of their identity or preserving connections to their community. This includes tuition to religious camps, cultural classes, and support for youth accessing counseling and referrals to community support networks.¹²³

Within the policy related to Independent Living service delivery, the Regional Independent Living Specialists (RILS) ensure that each youth in care over the age of 16 receives a Casey Life Skill Assessment annually (Appendix D).¹²⁴ The Casey Life Skill Assessment, developed by Casey Family Programs, is intended to measure how prepared a youth may be for independent living. While it aims to examine levels of independence in areas such as daily living, housing, and work, it also includes an assessment of relationships and communication skills.¹²⁵

Within the area of relationships and communication, the assessment includes a host of statements related to facets of personal identity including:

- “I know how to show respect to people with different beliefs, opinions, and cultures.
- I can describe my racial and ethnic identity.
- I can describe the difference between sexual orientation and gender identity” (p. 3).¹²⁶

Additionally, in 2015, Alaska produced a brochure related to youth rights in foster care. Within this brochure includes a statement that youth in care “have the protection against being discriminated against or harassed on the basis of their sexuality or gender identity, age, race, disability, religion, and family history.” The brochure also protects the right to cultural practices and religious beliefs.¹²⁷ Per OCS Case Planning Policy 2.9.5, the Foster Children’s Rights Brochure is required to be distributed to all youth in care age 14 and older.¹²⁸

Vermont

The Vermont Department of Children and Families has several comprehensive policies to support youth in their identity development while in out of home care. First, Policy 75 describes what normalcy should look like for youth in foster care by providing a list of experiences that contribute to normalcy including “choice in personal style and expression” and “cultural and religious practices and expression” (p. 2).¹²⁹ As an Appendix to this policy regarding normalcy, Vermont DCF has created extensive guidelines for their Reasonable and Prudent Parent Standard.^{130, 131} These guidelines provide examples of opportunities and activities that are generally considered normal for youth to participate in. Vermont DCF separates these activities into different categories. Vermont DCF has intentionally included activities that contribute to affirming one’s identity including, community events, cultural events, cultural or language clubs, Gender & Sexuality Alliance (GSA), and Youth Development Program (YDP). The guidelines also have a specific category for religious, cultural, and tribal participation. Most notably, the guidelines include a separate category for personal style and appearance, which leads with the statement: “when children and youth begin voicing their opinions about appearance, personal style and expression (regardless of gender), caregivers should strive to support their preferences...All children and youth will be supported in wearing gender affirming clothing that aligns with their gender identity” (p. 5).¹³²

In 2017, Vermont DCF implemented a specific policy (Policy 76) aimed toward supporting and affirming LGBTQ youth in an effort “to provide a safe, healthy, and inclusive environment for all children and youth served by the division” (p.1, emphasis added).¹³³ The 11-page policy demonstrates Vermont’s DCF commitment to supporting youth in exploring their sexual orientation, gender identity, and gender expression “as a normal part of human identity development” (p. 1).¹³⁴ The policy includes sections regarding identity, name and pronoun preferences, case planning for LGBTQ youth, and placement considerations for LGBTQ youth. Throughout the policy, it is clear that Vermont DCF goes beyond anti-discrimination by creating methods to actively support all youth. This includes using “sensitive, gender neutral, and inclusive language to set a tone of respect and dignity” (p.3), making efforts “to

grow the young person’s safety network” (p. 4), and giving autonomy to the youth to “determine whether information about their identity should be documented” (p. 5).¹³⁵

Lastly, Policy 76 also acknowledges the DCF’s Commissioner’s creation of a Committee on LGBTQ issues, which is designed to “assist division employees in making decisions on medical treatment, situations where agreement cannot be reached by the team, and other complex case issues related to LGBTQ children and youth in DCF custody” (p. 6).¹³⁶

Foster Care Bill of Rights across States

The 2014 federal Preventing Sex Trafficking and Strengthening Families Act was monumental legislation that implemented concrete steps towards better serving youth in foster care across the country, especially older youth. Among the legislation’s mandates is the requirement that state child welfare agencies “ensure that children in foster care age 14 or older participate in the development of, or revisions to, his or her case plan which must describe the foster child’s rights.”¹³⁷

In 2015 in Connecticut, the Statewide YAB helped to create and approve an Adolescents in Care Bill of Rights and Expectations. It is currently published on the CT DCF website. The Preamble of the Bill of Rights reads that “Youth in care must be supported to develop and maintain their own values, hopes, plans, goals, religion, spirituality, and identity (including their sexuality and gender identity with support of the LGBTQ* community if desired) in a safe and caring environment” (p. 1).¹³⁸

In addition, the Center for Children’s Advocacy has authored a comprehensive guide for a youth’s legal rights in care, titled *Speak Up*, which was most recently updated in 2018. The guide includes answers to several legal questions youth may have while in care, including:

- “Can I go to my own church, synagogue, or mosque? (p. 14)
- What if I prefer to speak a language other than English? (p. 21)
- Can I be placed in a home that is the same race, culture, or religion as me? (p. 23)
- What if the foster family treats me badly because I am a different race/ethnicity, am gay/lesbian, or have a disability? (p. 33)
- Are there protections for me if I’m transgender? (p. 33)”¹³⁹

According to the National Conference on State Legislatures, 15 states and Puerto Rico have a Foster Care Bill of Rights codified within their statutes or state administrative code.¹⁴⁰ It is important to note that when something is included in a state’s statute or code, it has legal implications.

At least two states that have codified a Foster Care Bill of Rights in statute acknowledge the importance of a youth’s identity while in care, including their right to participate in cultural and community activities and receive care that is responsive to the youth’s culture and gender.

For example:

- **California** Welfare and Institutions Code § 16001.9 declares that youth in care have the right “to attend school and participate in extracurricular, cultural, and personal enrichment activities, consistent with the child’s age and developmental level.”¹⁴¹
- **Missouri** Revised Statutes § 210.556 (2) reads: “Foster parents shall provide care that is respectful of the child’s cultural identity and needs. Recognizing that cultural competence can be learned, the children’s division and their contractors shall provide foster parents with training that specifically addresses cultural needs of children, including but not limited to, information on skin and hair care, information on any specific religious or cultural practices of the child’s biological family, and referrals to community resources for ongoing education and support.”¹⁴²

One of the most comprehensive Youth in Care Bill of Rights was produced by the Maine Office of Child and Family Services in partnership with youth in foster care as well as Maine’s Youth Leadership Advisory Team.¹⁴³ The 2008 document was updated in October 2016 to include the Normalcy Bill of Rights which was created by the New England Youth Coalition (Appendix E). The New England Youth Coalition (NEYC) is a project that involves current and former foster youth as well as alumni and adult allies from all six New England states to strengthen the child welfare system and improve outcomes for youth in foster care. The NEYC points out that cultural awareness, social and peer inclusion, and community inclusion are all a part of the normalcy experience.

The Maine Youth in Care Bill of Rights exists as a resource for youth in care to understand their rights and empower them to advocate for themselves. Among these is the right to be who they are.

This includes that every foster child:

- “Shall be provided care and services that are free from discrimination based on race, color, national origin, gender, gender identity, religion, sexual orientation, physical and mental ability and the fact that they are in foster care;
- Has the right to their own identity, values, and freedom of expression.
- Has the right to their own religious and cultural beliefs and practices.
- Shall be allowed to discover and express their gender and sexual identity regardless of placement and shall not be subjected to discrimination or fear for their safety because of their gender or sexual identity.
- Has a right to learn about their sexuality in a safe and supportive environment.
- Shall be allowed to build relationships with peers regardless of differences and be provided with opportunities to build relationships within their home and school communities” (p. 1).¹⁴⁴

In Maine, youth who are ages 14 and older receive this list of rights upon the beginning of transition services (like adolescent planning services in CT). In addition to this comprehensive yet accessible list of rights while in care, it is best practice to have the youth sign the Youth in Care Bill of Rights to acknowledge that they have received and understand their rights while in foster care. Having the youth sign this document is a part of a checklist of items that caseworkers follow when providing appropriate transition services to all adolescents in foster care.

Chapter 6:

Policy Recommendations to Promote Positive Identity Development in Foster Care

Recommendation 1:

Update the Adolescent Bill of Rights and Expectations to incorporate protections and supports for identity development and implement a process for all adolescents to receive and understand these rights.

We recommend that Connecticut follow the practice of other states and the New England Youth Coalition by updating its Adolescent Bill of Rights and Expectations to place an emphasis on cultural awareness, social and peer inclusion, and community inclusion as an aspect of normalcy. This update could also represent youth voice by including additional recommendations current or former foster youth have.

An update to the Adolescent Bill of Rights and Expectations should acknowledge that every foster child has the right to:

- “Express their identity as they choose, with guidance from supportive adults, because all people have the right to safety regardless of their circumstances;
- Not be restricted in practicing their religious or cultural customs, listening to their choice of music, wearing their preferred style of clothing, etc.;
- Shall be showed respect for their religious and cultural beliefs and shall be able to participate in any activities associated with their religious beliefs; and
- Shall be allowed to discover and express their gender and sexual identity regardless of placement and shall not be subjected to discrimination or fear for their safety because of their gender or sexual identity” (p. 1).

In addition to updating this document to reflect the New England Youth Coalition’s Normalcy Bill of Rights, we also recommend that DCF include protections and support for both racial and ethnic identity, including protections from discrimination while in a foster care placement and support to manage any discrimination as a part of their development.

Connecticut Voices for Children also recommends that the updated Adolescent Bill of Rights and Expectations be codified in statute alongside the current Sibling Bill of Rights that lies within Conn. Gen. Stat. § 17a-10c.

Lastly, in conjunction with updating the Adolescent Bill of Rights and Expectations, Connecticut should follow in the footsteps of states like Maine, Alaska, and others to implement a process that mandates that adolescents 13 and older should be provided a copy of these rights. We recommend that these rights are explained to the youth, their foster caregiver, and documented with their signatures. Within this process, youth would also benefit from being provided with and explained connected to the Speak Up legal rights guide produced by the Center for Children’s Advocacy.

Recommendation 2:

Bolster protections for youth who identify as LGBTQ and implement programs to support the identity development of these youth.

We recommend that DCF strengthen existing protections for LGBTQ youth identified in Policy 30-9 and create programs that aid in the support of LGBTQ youth in care. The current non-discrimination protections in Policy 30-9 should be expanded, following the model set forth by the Vermont Department of Children and Families to require active support on the part of DCF staff and any adult working with or taking care of LGBTQ youth. Specifically, the policy should include provisions on:

Identity Disclosure Sensitivity: Staff and caregivers should be aware that youth may hold an LGBTQ identity without expressly disclosing to others. Staff and caregivers should be prepared with the tools to make youth feel comfortable if they wish to disclose an LGBTQ identity and know how to support and affirm youth once they disclose. Staff and caregivers should be aware that a youth may choose to disclose an identity to select individuals and should avoid disclosing identity information unless given permission to by the youth.

Identity and Pronoun Preferences: Youth should be able to disclose their identity and preferred name and pronouns in a supportive environment. Staff and caregivers should respect youth's wishes and refer to them using preferred pronouns and names, with consideration of spaces in which a youth may not have openly disclosed their identity. Youth should be able to safely dress and style themselves in accordance with their gender expression.

Placement Considerations and Case Planning: Social workers should consider the safety, support, and wishes of LGBTQ youth when making placement decisions. Social workers should not disclose known information about a youth's LGBTQ identity unless approved by that youth. LGBTQ youth should be placed in an environment where they are not only fully accepted, but also supported in the development of their identity.

We also recommend that Connecticut require that DCF staff and youth caregivers receive trainings specifically about LGBTQ identities that prepare them with the knowledge and resources necessary to support LGBTQ youth. Trainings should include: explanations of LGBTQ identities; ways to support youth with these identities; ways to prevent and address discrimination and bullying within and outside of DCF (particularly at school); and additional resources where youth and caregivers can find further information and build supportive relationships.

We encourage DCF to establish a committee on LGBTQ issues, again using Vermont policy as an example. The DCF commissioner of Vermont has established a trained committee designed to support DCF staff when making decisions on “legal name changes, ... situations where a child feels unsafe, uncomfortable or disagrees with a placement because of their identity, ... medical treatment decisions, including puberty blockers/suspenders, cross-gender hormones, ... gender affirmation surgery” etc. (p. 6).¹⁴⁵ We recommend that Connecticut implement a similar committee to further support DCF staff in creating an affirming environment for LGBTQ youth.

Furthermore, we believe that DCF should conduct this work in partnership with outside organizations that have specialized knowledge, such as True Colors, as they have previously done to create the existing policies and protections.

Recommendation 3:

Work to improve the assessment and support of identity development of all adolescents who reside in foster care.

As DCF continues to strengthen its policy and practice, Connecticut Voices for Children recommends that additional effort be made to improve the assessment and support of identity development for all adolescents who reside in foster care. Specifically, we recommend that DCF implement a tool similar to the Minnesota Assessment of Parenting for Children and Youth (MAPCY) to better assess the needs of individual youth who have been placed into foster care.

In order to better support the identity development of adolescents in foster care, Connecticut Voices for Children recommends that DCF, with support from the state legislature, commit further resources to recruit and train a diverse group of foster parents specifically for adolescents. In several conversations at the YAB meetings, youth repeatedly expressed their belief that DCF does not have enough foster parents who actively want to welcome adolescents into their home and provide a supportive and loving environment for them. In addition to added recruitment efforts for diverse foster parents, foster placements for adolescents must have thorough training of how to best support adolescents from different backgrounds in their identity development. This includes training regarding the importance of adolescent identity development in general as well as specific to race/ethnicity identity development, religious identity development, and gender and sexual identity development.

Finally, several youth from YABs expressed the need for mutual information sharing prior to moving into a new placement. It is the recommendation of Connecticut Voices for Children to continue to implement the use of Foster Family Profiles across DCF regions and to include as much information about the family as possible. In order to support the full implementation of Foster Family Profiles, Connecticut Voices for Children recommends creating a mechanism for clear reporting of the use of Foster Family Profiles. This includes annual reporting on information such as how many Foster Family Profiles have been created to date, the demographic makeup of the Foster Family Profiles, and how many youth received a Foster Family Profile before moving into a placement.

In addition to improving the use of Foster Family Profiles, we recommend the creation of a protocol for youth to share information about themselves with a foster placement before changing placements. This may be information that they wish to share about facets of their identity they feel is important for them to share including cultural preferences, routines, personal favorites (such as food, music, and product brands), and daily practices. Not only will this help facilitate desired information sharing to contribute to a smoother placement change process, but it will assist in ensuring that youth feel safe and comfortable with moving into a new placement.

“Whatever we [foster youth] share with them [foster families], they should accept us no matter what.”

- Connecticut Foster Youth, Age 17

Endnotes



- 1 The Annie E. Casey Foundation. (2015). The Connecticut turnaround. Retrieved from: <https://www.aecf.org/m/resourcedoc/aecf-TheConnecticutTurnaroundCaseStudy2-2015.pdf>
- 2 Connecticut State Department of Children and Families. (Rev. April 2015). Child and family permanency teaming. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter36/368pdf.pdf?la=en>
- 3 Updegrove, N. & Ruth, L. (2016). The time to grow: Meeting the needs of Connecticut youth aging out of foster care. New Haven: Connecticut Voices for Children. Retrieved from: <http://www.ctvoices.org/sites/default/files/Transition%20from%20Care%20Brief%20Report%20Revised%20May.pdf>
- 4 *Ibid.*
- 5 Sokol, J.T. (2009). Identity development throughout the lifetime: An examination of Eriksonian theory. *Graduate Journal of Counseling Psychology, 1*(2), 139-148. (139)
- 6 Karcher, M.J., & Benne K. (2008). Erik and Joan Eriksons' approach to human development in counseling. In Kraus, K.L. (Ed.), *Lenses: Applying lifespan development theories in counseling* (pp. 199-228). Lahaska, PA: Lahaska Press, Houghton Mifflin Company. (201-203)
- 7 Sokol, J.T. (2009). Identity development throughout the lifetime: An examination of Eriksonian theory. *Graduate Journal of Counseling Psychology, 1*(2), 139-148. (142)
- 8 Sokol, J.T. (2009). Identity development throughout the lifetime: An examination of Eriksonian theory. *Graduate Journal of Counseling Psychology, 1*(2), 139-148. (140)
- 9 Karcher, M.J., & Benne K. (2008). Erik and Joan Eriksons' approach to human development in counseling. In Kraus, K.L. (Ed.), *Lenses: Applying lifespan development theories in counseling* (pp. 199-228). Lahaska, PA: Lahaska Press, Houghton Mifflin Company. (210, 211-212, 214)
- 10 Sokol, J.T. (2009). Identity development throughout the lifetime: An examination of Eriksonian theory. *Graduate Journal of Counseling Psychology, 1*(2), 139-148. (142)
- 11 Ratner, K. (2014). The Role of parenting and attachment in identity style development. *The University of Central Florida Undergraduate Research Journal, 7*(1), 15-26. (19)
- 12 Ratner, K. (2014). The Role of parenting and attachment in identity style development. *The University of Central Florida Undergraduate Research Journal, 7*(1), 15-26. (20)
- 13 Colaner, C.W. (2014). Measuring adoptive identity: Validation of the adoptive identity work scale. *Adoption Quarterly, 17*(2), 134-157. (135)
- 14 Von Korff, L., & Grotevant, H.D. (2011). Contact in adoption and adoptive identity formation: The mediating role of family conversation. *Journal of Family Psychology, 25*(3), 393-401. (8-9)
- 15 Steinberg, L. & Morris, A.S. (2001). Adolescent development. *Annual Review of Psychology, 52*, 83-110. (101)
- 16 Colbridge, A.K., Hasset, A., & Sisley, E. (2017). "Who am I?" How female care leavers construct and make sense of their identity. *SAGE Open*, January-March, 1-14. (5)
- 17 Thomas, L.J. (2014). "Once a foster child...": Identity construction in former foster children's narratives. *Qualitative Research Reports in Communication, 15*(1), 84-91. (87-88)
- 18 Compas, B.E., Hinden, B.R., & Gerhardt, C.A. (1995). Adolescent development: Pathways and processes of risk and resilience. *Annual Review of Psychology, 46*, 265-293. (270-272)
- 19 Obrien, L.T. & Major, B. (2005). The social psychology of stigma. *Annual Review of Psychology, 56*(3), 393-421. (398)
- 20 Kools, S.M. (1997). Adolescent identity development in foster care. *Family Relations, 46*(3), 263-271. (266)
- 21 Kools, S.M. (1997). Adolescent identity development in foster care. *Family Relations, 46*(3), 263-271. (267)
- 22 McKinney, J.S. (2011). The situated self and the negotiation of a "bad" identity in therapeutic foster care. *Children and Youth Services Review, 33*, 1212-1223. (1222)
- 23 Kools, S.M. (1997). Adolescent identity development in foster care. *Family Relations, 46*(3), 263-271. (267)
- 24 McKinney, J.S. (2011). The situated self and the negotiation of a "bad" identity in therapeutic foster care. *Children and Youth Services Review, 33*, 1212-1223. (1222)
- 25 Mulkerns, H. & Owen, C. (2008). Identity development in emancipated young adults following foster care. *Smith College Studies in Social Work, 78*(4), 427-449. (439)
- 26 Mulkerns, H. & Owen, C. (2008). Identity development in emancipated young adults following foster care. *Smith College Studies in Social Work, 78*(4), 427-449. (439)
- 27 Mulkerns, H. & Owen, C. (2008). Identity development in emancipated young adults following foster care. *Smith College Studies in Social Work, 78*(4), 427-449. (439-440).
- 28 Colbridge, A.K., Hasset, A., & Sisley, E. (2017). "Who am I?" How female care leavers construct and make sense of their identity. *SAGE Open*, January-March, 1-14



- 29 White, C.R., Jackson, L.J., Phillips, C.M., & Cabrera, J. (2008). Ethnic identity development among adolescents in foster care. *Child Adolescent Social Work Journal*, 25, 497-515. (504)
- 30 White, C.R., Jackson, L.J., Phillips, C.M., & Cabrera, J. (2008). Ethnic identity development among adolescents in foster care. *Child Adolescent Social Work Journal*, 25, 497-515. (506)
- 31 Anderson, M. & Linares, L.O. (2012). The role of cultural dissimilarity factors on child adjustment following foster placement. *Child Youth Services Review*, 34(4). (7).
- 32 White, C.R., Jackson, L.J., Phillips, C.M., & Cabrera, J. (2008). Ethnic identity development among adolescents in foster care. *Child Adolescent Social Work Journal*, 25, 497-515. (498)
- 33 Cotton, S., Zebracki, K., Rosenthal, S.L, Tsevat, J., & Drotar, D. (2006). Religion/spirituality and adolescent health outcomes: A review. *Journal of Adolescent Health*, 38, 472-480. (476-477)
- 34 Schreiber, J. (2010). The role of religion in foster care. National Association of Christians in Social Work. Presented at the NACSW 2010 Convention. (8)
- 35 Schreiber, J. (2010). The role of religion in foster care. National Association of Christians in Social Work. Presented at the NACSW 2010 Convention. (13).
- 36 Schreiber, J. (2010). The role of religion in foster care. National Association of Christians in Social Work. Presented at the NACSW 2010 Convention. (14).
- 37 Human Rights Campaign. (n.d.) LGBTQ youth in the foster care system. Retrieved from <https://assets2.hrc.org/files/assets/resources/HRC-YouthFosterCare-IssueBrief-FINAL.pdf> (2)
- 38 Child Welfare Information Gateway. (2013). Supporting your LGBTQ youth: A guide for foster parents. U.S. Department of Health and Human Services, Children's Bureau. Retrieved from: <https://www.childwelfare.gov/pubPDFs/LGBTQyouth.pdf> (4)
- 39 Child Welfare Information Gateway. (2013). Supporting your LGBTQ youth: A guide for foster parents. U.S. Department of Health and Human Services, Children's Bureau. Retrieved from: <https://www.childwelfare.gov/pubPDFs/LGBTQyouth.pdf> (3)
- 40 Child Welfare Information Gateway. (2013). Supporting your LGBTQ youth: A guide for foster parents. U.S. Department of Health and Human Services, Children's Bureau. Retrieved from: <https://www.childwelfare.gov/pubPDFs/LGBTQyouth.pdf> (4-5).
- 41 Marksamer, J. (2006). LGBTQ Youth in the Foster Care System. National Center for Lesbian Rights. Retrieved from: http://www.nclrights.org/wp-content/uploads/2013/07/LGBTQ_Youth_In_Foster_Care_System.pdf (1)
- 42 Child Welfare Information Gateway. (2013). Supporting your LGBTQ youth: A guide for foster parents. U.S. Department of Health and Human Services, Children's Bureau. Retrieved from: <https://www.childwelfare.gov/pubPDFs/LGBTQyouth.pdf> (5)
- 43 Marksamer, J. (2006). LGBTQ Youth in the Foster Care System. National Center for Lesbian Rights. Retrieved from: http://www.nclrights.org/wp-content/uploads/2013/07/LGBTQ_Youth_In_Foster_Care_System.pdf (2-3).
- 44 The Annie E. Casey Foundation. (2015). Case study: The Connecticut turnaround. Retrieved from: <https://www.aecf.org/m/resourcedoc/aecf-TheConnecticutTurnaroundCaseStudy2-2015.pdf> (3).
- 45 Connecticut State Department of Children and Families. (n.d.) Mission of DCF. Retrieved from: <https://portal.ct.gov/DCF/1-DCF/Mission-Statement>
- 46 Connecticut State Department of Children and Families, Office of Children and Youth in Placement. (Rev. June 2017). Foster care services. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter41/41-1.pdf?la=en>
- 47 *Ibid.*
- 48 Connecticut State Department of Children and Families, Office of Children and Youth in Placement. (Rev. June 2017). Foster care, adoption, guardianship practice guide. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/BPGuides/FCBPGpdf.pdf?la=en> (26-29).
- 49 *Ibid.*
- 50 *Ibid.*
- 51 Connecticut State Department of Children and Families. (n.d.) CT Foster/Adopt Manual. Chapter 2: Child protection, children placed in foster care. Retrieved from: <https://portal.ct.gov/DCF/CTFosterAdopt/Manual/Chapter2>
- 52 *Ibid.*
- 53 *Ibid.*
- 54 *Ibid.*
- 55 *Ibid.*
- 56 *Ibid.*
- 57 *Ibid.*



- 58 Luczak, S., Updegrave, N., Ruth, L. (2018). Between people and places: Reducing upheaval for children moving around in Connecticut foster care. New Haven: Connecticut Voices for Children. Retrieved from: <http://www.ctvoices.org/sites/default/files/Plcement%20Change%20Report.pdf>
- 59 Connecticut State Department of Children and Families. (Rev. Apr 2015). Adolescent services: Administration. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter42/421.pdf.pdf?la=en>
- 60 *Ibid.*
- 61 *Ibid.*
- 62 Connecticut State Department of Children and Families. (Rev. Aug 2015). Adolescent services: Adolescent and young adult programs. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter42/423.pdf.pdf?la=en>
- 63 *Ibid.*
- 64 Connecticut State Department of Children and Families. (2015). Adolescent services practice guide. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/BPGuides/AdolescentBPG.pdf.pdf?la=en>
- 65 *Ibid.*
- 66 *Ibid.*
- 67 *Ibid.*
- 68 Defiesta, N., Iverson, S., Oppenheimer, C., Langer, S., Leventhal-Weiner, R., Shemitz, E. (2015). Impact of the final FY 2016 budget on children and families. New Haven: Connecticut Voices for Children. Retrieved from: <http://www.ctvoices.org/sites/default/files/bud15fy16finalimpact.pdf>
- 69 Noonan, R., Ruth, L., Shemitz, E., Siegel, K., Hudson, C., Updegrave, N. (2017). Impact of the final FY 18-19 budget on children and families. New Haven: Connecticut Voices for Children. Retrieved from: http://www.ctvoices.org/sites/default/files/Impact%20of%20the%20Final%20FY%2018-19%20Budget%20FINAL_0.pdf
- 70 United States District Court for the District of Connecticut. (2017). Findings, conclusions, and recommendations of court monitor. Retrieved from: <https://www.childrensrights.org/wp-content/uploads/2014/08/2017.05.01-Monitor-Recommendations.pdf>
- 71 Connecticut State Department of Children and Families. (Rev. Mar 2014). Administrative case review: ACR meetings. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter36/36112.pdf.pdf?la=en>
- 72 *Ibid.*
- 73 Connecticut State Department of Children and Families. (Rev. Mar 2014). Case planning: Contents of the child in placement case plan. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter36/363.pdf.pdf?la=en>
- 74 *Ibid.*
- 75 Connecticut State Department of Children and Families. (2014). Case planning best practice guide. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/BPGuides/CasePlanningBPG.pdf.pdf?la=en>
- 76 Child and Family Services Reviews Information Portal. (n.d.). Case plan. Retrieved from: <https://training.cfsrportal.acf.hhs.gov/section-2-understanding-child-welfare-system/3027>
- 77 DCF Court Monitor's Office. (2018). *Juan E. v. Malloy* exit plan: Status report October 1, 2017 – March 31, 2018. Retrieved from: https://www.childrensrights.org/wp-content/uploads/2018/08/Juan-F.-Strategic-Plan_Status-Report-Fourth-Quarter-2017-and-First-Quarter-2018-final.pdf
- 78 Jim Casey Youth Opportunities Initiative. (2013). Case planning for healthy development. Baltimore: The Annie E. Casey Foundation. Retrieved from: <https://www.aecf.org/m/resourcedoc/JCYOI-CasePlanningforHealthydevelopment-2013.pdf>
- 79 Connecticut State Department of Children and Families. (2004). Protective services: Non-discrimination of LGBTQQIAA individuals. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter30/309.pdf.pdf?la=en>
- 80 *Ibid.*
- 81 *Ibid.*
- 82 Connecticut State Department of Children and Families. (Rev. Dec 2014). Working with transgender youth and caregivers practice guide 2014. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/BPGuides/TransgenderBPG.pdf.pdf?la=en>
- 83 Information provided by Ms. Kristina Stevens, Deputy Commissioner of Operations within DCF upon her review of the paper.
- 84 *Ibid.*
- 85 *Ibid.*
- 86 *Ibid.*
- 87 *Ibid.*



- 88 Connecticut State Department of Children and Families. (2004). Protective services: Non-discrimination of LGBTQQIAA individuals. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter30/309pdf.pdf?la=en>
- 89 Planned Parenthood. (2018). Transgender Identity Terms and Labels. [Webpage]. Retrieved from <https://www.plannedparenthood.org/learn/sexual-orientation-gender/trans-and-gender-nonconforming-identities/transgender-identity-terms-and-labels>
- 90 GLAAD. (n.d). Media Reference Guide – Transgender. [Webpage]. Retrieved from <https://www.glaad.org/reference/transgender>
- 91 Trans Student Resource Center. (n.d.). LGBTQ+ Definitions. [Webpage]. Retrieved from <http://www.transstudent.org/definitions/>
- 92 Connecticut State Department of Children and Families. (1994). Adoption: Preparing the child for placement – Casework aspects of child preparation. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter48/48-13-3.pdf?la=en>
- 93 *Ibid.*
- 94 Connecticut State Department of Children and Families. (1994). Adoption placement process: Preparing an adoptive family for placement – Child disclosure form. Retrieved from: <https://portal.ct.gov/-/media/DCF/Policy/pdf/Chapter48/48-15-5.pdf?la=en>
- 95 Conn. Gen. Stat. § 17a-16. Retrieved from: https://www.cga.ct.gov/current/pub/chap_319.htm#TOC.
- 96 Human Rights Campaign. (Rev. 2018). State maps of laws and policies: Public accommodations. Retrieved from: <https://www.hrc.org/state-maps/public-accomodations#>
- 97 State of Connecticut. (2011). Public Act No. 11-55. An act concerning discrimination. Retrieved from: <https://www.cga.ct.gov/2011/ACT/PA/2011PA-00055-R00HB-06599-PA.htm>
- 98 Conn. Gen. Stat. § 17a-114e. Retrieved from: https://www.cga.ct.gov/current/pub/chap_319.htm#TOC
- 99 Conn. Gen. Stat. § 17a-116c. Retrieved from: https://www.cga.ct.gov/current/pub/chap_319.htm#TOC
- 100 R.C.S.A. § 17a-150-113. Retrieved from: <https://eregulations.ct.gov/eRegsPortal/Browse/getDocument?guid={D09FE155-0400-CBBA-A67E-6977309BC65F}> (21).
- 101 Thomas, J.R. (2018). When the call comes, and there’s no foster home available. *The CT Mirror*. Retrieved from: <https://ctmirror.org/2018/09/25/call-comes-theres-no-foster-home-available/>
- 102 R.C.S.A. § 17a-150-114. Retrieved from: <https://eregulations.ct.gov/eRegsPortal/Browse/getDocument?guid={D09FE155-0400-CBBA-A67E-6977309BC65F}> (21-22).
- 103 Child Welfare Information Gateway. (n.d.). Multiethnic Placement Act of 1994 P.L. 103-382. Retrieved from: <https://www.childwelfare.gov/topics/systemwide/laws-policies/federal/search/?CWIGFunctionsaction=federallegislation:main.getFedLdgDetail&cid=46>
- 104 The Annie E. Casey Foundation. (2018). Fostering youth transitions: Using data to drive policy and practice decisions – 2018 Connecticut Profile. Retrieved from: <https://www.aecf.org/m/resourcedoc/connecticut-fosteringyouthtransitions-2018.pdf>
- 105 Connecticut State Department of Children and Families. (2018.) Children in placement (CIP) monthly – October 2018. Retrieved from: <https://portal.ct.gov/-/media/DCF/DataConnect/pdf/Children-in-Placement-Monthly-Data--October-2018.pdf?la=en>
- 106 Chronicle of Social Change. (2018). Who cares: A national count of foster homes and families. Connecticut state profile. Retrieved from: <https://www.fostercarecapacity.com/states/connecticut>
- 107 Data provided via email by Ms. Susan Smith, Chief of Quality and Planning of the Connecticut Department of Children and Families. Full data tables available upon request by emailing sluczak@ctvoices.org
- 108 The Annie E. Casey Foundation. (2018). Fostering youth transitions: Using data to drive policy and practice decisions – 2018 Connecticut Profile. Retrieved from: <https://www.aecf.org/m/resourcedoc/connecticut-fosteringyouthtransitions-2018.pdf>
- 109 Connecticut State Department of Children and Families. (Updated 2018). Statewide racial justice workgroup. Retrieved from: <https://portal.ct.gov/DCF/Multicultural-Affairs/Racial-Justice-Workgroup>
- 110 Data provided via email by Ms. Susan Smith, Chief of Quality and Planning of the Connecticut Department of Children and Families. Full data tables available upon request by emailing sluczak@ctvoices.org
- 111 Chronicle of Social Change. (2018). Who cares: A national count of foster homes and families. Connecticut state profile. Retrieved from: <https://www.fostercarecapacity.com/states/connecticut>
- 112 *Ibid.*
- 113 Luczak, S., Updegrove, N., Ruth, L. (2018). Between people and places: Reducing upheaval for children moving around in Connecticut foster care. New Haven: Connecticut Voices for Children. Retrieved from: <http://www.ctvoices.org/sites/default/files/Plcement%20Change%20Report.pdf>
- 114 *Ibid.*
- 115 *Ibid.*



- 116 The Annie E. Casey Foundation. (2018). Fostering youth transitions: Using data to drive policy and practice decisions – 2018 Connecticut Profile. Retrieved from: <https://www.acf.org/m/resourcedoc/connecticut-fosteringyouthtransitions-2018.pdf>
- 117 The Annie E. Casey Foundation. (2018). Fostering youth transitions: Using data to drive policy and practice decisions – 2018 Connecticut Profile. Retrieved from: <https://www.acf.org/m/resourcedoc/connecticut-fosteringyouthtransitions-2018.pdf>
- 118 Data provided via email by Ms. Susan Smith, Chief of Quality and Planning of the Connecticut Department of Children and Families. Full data tables available upon request by emailing sluczak@ctvoices.org
- 119 *Ibid.*
- 120 *Ibid.*
- 121 Katz, J. (2018). Commissioner’s Memo: Racial justice revisited. Hartford: Connecticut State Department of Children and Families. Retrieved from: https://portal.ct.gov/-/media/DCF/Multicultural_Affairs/pdf/Commissioner-Katz-RJ-All-Staff-Memo.pdf?la=en
- 122 Data provided via email by Ms. Susan Smith, Chief of Quality and Planning of the Connecticut Department of Children and Families. Full data tables available upon request by emailing sluczak@ctvoices.org
- 123 Child Welfare Information Gateway. (2016). Major federal legislation concerned with child protection, child welfare, and adoption. Retrieved from: <https://www.childwelfare.gov/pubPDFs/majorfedlegis.pdf>
- 124 Minnesota State Department of Human Services, Children and Family Services. (n.d.) Northstar Care for Children – Minnesota Assessment of Parenting for Children and Youth (MAPCY). Retrieved from: http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=dhs16_195396
- 125 Minnesota State Department of Human Services, Children and Family Services. (n.d.) MAPCY brochure. Retrieved from: <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7060A-ENG>
- 126 Minnesota State Department of Human Services, Children and Family Services. (n.d.) Minnesota Assessment of Parenting for Children and Youth practice guide. Retrieved from: <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-7060-ENG>
- 127 *Ibid.*
- 128 *Ibid.*
- 129 Alaska Office of Children’s Services. (Rev. Oct 2015). 3.14.1 Independent living services delivery. Documents were retrieved via email from the Independent Living Coordinator, Naomi Davidson, of Alaska OCS. Documents are available upon request via email to sluczak@ctvoices.org
- 130 Information retrieved via email from the Independent Living Coordinator, Naomi Davidson, of Alaska OCS. Documents are available upon request via email to sluczak@ctvoices.org
- 131 Alaska Office of Children’s Services. (Rev. Oct 2015). 3.14.1 Independent living services delivery. Documents were retrieved via email from the Independent Living Coordinator, Naomi Davidson, of Alaska OCS. Documents are available upon request via email to sluczak@ctvoices.org
- 132 Casey Family Programs. (n.d.) Casey life skills. Retrieved from: http://www.casey.org/media/CLS_assessments_LifeSkills.pdf
- 133 *Ibid.*
- 134 Information retrieved via email from the Independent Living Coordinator, Naomi Davidson, of Alaska OCS. Documents are available upon request via email to sluczak@ctvoices.org
- 135 Alaska Office of Children’s Services. (Rev. Oct 2015). 2.9.5 Family services assessment: Case planning and transition planning with youth. Documents were retrieved via email from the Independent Living Coordinator, Naomi Davidson, of Alaska OCS. Documents are available upon request via email to sluczak@ctvoices.org.
- 136 Vermont State Department of Children and Families. (Effective Jul 2018). Normalcy and the reasonable and prudent parent standard (RPPS). Retrieved from: <https://dcf.vermont.gov/sites/dcf/files/FSD/Policies/75.pdf>
- 137 *Ibid.*
- 138 113th United States Congress. (2013-2014). H.R. 4980 Preventing Sex Trafficking and Strengthening Families Act. Retrieved from: <https://www.congress.gov/bill/113th-congress/house-bill/4980>
- 139 *Ibid.*
- 140 Vermont State Department of Children and Families. (Effective Oct 2017). Supporting and affirming LGBTQ children & youth. Retrieved from: <https://dcf.vermont.gov/sites/dcf/files/FSD/Policies/76.pdf>
- 141 *Ibid.*
- 142 *Ibid.*
- 143 *Ibid.*
- 144 National Conference of State Legislatures. (2016). Preventing sex trafficking and strengthening families act



- of 2014. Retrieved from: <http://www.ncsl.org/research/human-services/preventing-sex-trafficking-and-strengthening-families-act-of-2014.aspx>
- 145 State of Connecticut Department of Children and Families. (2015). Adolescents in care bill of rights and expectations. Retrieved from: <https://portal.ct.gov/-/media/dcf/YAB/pdf/AdolescentsinCareBillofRightsandExpectationspdf.pdf?la=en>
- 146 Center for Children's Advocacy. (2018). Speak up: Your legal rights in DCF care. Retrieved from: <https://cca-ct.org/wp-content/uploads/2018/04/web-Legal-Rights-in-DCF-Care-R-4-2018.pdf>
- 147 National Conference of State Legislatures. (2016). Foster care bill of rights. Retrieved from: <http://www.ncsl.org/research/human-services/foster-care-bill-of-rights.aspx>
- 148 California Welfare and Institutions Code § 16001.9. Retrieved from: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16001.9.&lawCode=WIC
- 149 Missouri Revised Statutes § 210.556. Retrieved from: <http://revisor.mo.gov/main/OneSection.aspx?section=210.556&bid=11385&hl=cultural+competence%u2044>
- 150 Maine Department of Human Services, Office of Children and Family Services. (Rev. Oct 2016). The Maine youth in care bill of rights. Retrieved from: <https://www.maine.gov/dhhs/ocfs/documents/MaineYouthInCareBillofRights.pdf>
- 151 *Ibid.*
- 152 Vermont State Department of Children and Families. (Effective Oct 2017). Supporting and affirming LGBTQ children & youth. Retrieved from: <https://dcf.vermont.gov/sites/dcf/files/FSD/Policies/76.pdf>