FINDING YOUR VOICE:
SUPPORTING THE SELF-ADVOCACY OF YOUTH IN THE CARE OF THE CONNECTICUT DEPARTMENT OF CHILDREN AND FAMILIES

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INTRODUCTION

As children transition into teenagers and young adults, they begin taking on more responsibility in their lives, defining what they need and want, and taking steps to get those things. These skills are part of those that are often referred to as self-advocacy, which also includes understanding one’s position in society and how the systems around oneself may be injurious and oppressive. Self-advocacy skills allow youth not only to complete necessary tasks in adulthood such as securing stable housing, accessing healthcare, and applying for a job, but also to see the world through a lens that empowers them to advocate for systems change. Developing self-advocacy skills is an on-going process that can involve introspecting on strengths and needs, mirroring the behavior of others, specific instruction, and creating supportive teams.

Developing self-advocacy skills is especially important for youth in care. Youth in care can experience disruptive transitions such as changing schools, switching between foster families, and moving between different neighborhoods. When children are removed from their birth families and communities, they are removed from the built-in safety nets and networks of champions that many children living with permanent families enjoy. With each new foster family or group home, youth have to adapt to new rules and a culture different from their own. Additionally, youth in care face barriers to accessing education, employment, and stable housing that youth in other situations may not face. Finally, youth in care face institutional barriers within the child welfare system that can make it difficult to develop youth’s voices, provide youth with supports to amplify their voices, and to cultivate youths’ skills. The destabilization and systemic blockades that many youth experience within the child welfare system means that finding ways to support youth in care as they advocate for themselves is crucial to promoting their well-being and success. Learning strong self-advocacy skills can help youth in the child welfare system get what they need and ultimately change the system for the better.

The child welfare system is just one of the many systems that youth in foster care must learn to navigate. Youth in foster care must also navigate the court system, the education system, healthcare systems, and others. Within each system, there are opportunities to help youth learn how to identify their needs, communicate those needs to others, understand their rights, and advocate for their rights. Within each system, there are also barriers to youth’s voices being heard that may seem insurmountable. Exploring the policies and practices influencing youth self-advocacy in each of these systems in-depth is beyond the scope of this paper, but all of these systems play important roles in supporting the voices of youth in care and all warrant close attention.

In this report, we explore how the Connecticut Department of Children and Families (DCF), and to a lesser extent the Courts, teaches and supports the development of self-advocacy skills for youth in care and the issues that arise in promoting youth self-advocacy. We begin by exploring the academic literature defining the development of self-advocacy in youth, the literature regarding teaching self-advocacy skills to groups of vulnerable and marginalized youth, and the literature about how this may translate to teaching and supporting self-advocacy when youth are in foster care. From there, we dive into the manuals that guide policy and practice within Connecticut’s Department of Children and Families to understand which policies are structured to allow for and support youth self-advocacy including the Adolescents in Care Bill of Rights & Expectations, case planning, Administrative Case Reviews (ACRs), permanency teaming, adolescent services, and others. We also explore promising policies supporting youth advocacy in other states.
Then, we analyze four types of data to understand how Connecticut’s policies translate into youths’ experiences: youth surveys, youth focus groups, interviews of DCF staff, and quantitative system data. Across multiple types of data, four large themes emerge. First, Connecticut’s youth in care generally find self-advocacy to be important. Second, relationship building is a critical part of building self-advocacy skills. Third, DCF’s current tools for self-advocacy are helpful but can be improved and expanded, and fourth, there are a number of institutional barriers within DCF that limit youth self-advocacy.

We combine the information gained from the literature review, DCF policy scan, scan from other states, and collected data to provide a series of recommendations to promote the self-advocacy of youth in DCF. We provide administrative recommendations to improve and standardize current practice, which we break into goals that can be achieved relatively soon, goals that may take a few years to implement, and longer-term goals. Additionally, we provide legislative recommendations to ensure that youth have the information they need to find help when they feel their rights have been violated and to center youth and the trusted adults in their lives within DCF procedures by ensuring that they can be present at critical meetings.
LITERATURE REVIEW

What is Self-Advocacy?

Self-advocacy is the ability to identify and advocate for one’s needs, wishes, and rights, understand the systems one exists in, and know when to challenge those systems. Education researchers Astromovich and Harris identify empowerment and social justice as two concepts closely related to self-advocacy, highlighting its connection to systems change, and advancing the rights of marginalized communities. They name three competencies needed to develop strong self-advocacy skills:

- Developing an “awareness and appreciation of [one’s] cultural background and sensitivity to diverse worldviews and cultures,”
- “Understanding the role of power, privilege, and status in oppression” and “identify[ing] oppressive practices within society” and,
- Developing “assertiveness and negotiation skills” and working with mentors to “promote change within the educational system and society.”

While Astromovich and Harris center their definition on systems change, other researchers focus on self-advocacy that can help one navigate specific situations. Advocates who work with students with disabilities describe self-advocacy as:

- “communicating your strengths, needs, and wishes,”
- “knowing your rights,” and
- “knowing where to get help or who to go to with a question.”

In this way, self-advocacy skills can help youth navigate situations in their everyday lives such as talking to doctors and securing stable housing, as well as lead to larger systemic change.

The importance of self-advocacy skills stems from the fact that many institutions and systems in society are oppressive or fail to support the people they are supposed to. Self-advocacy is a tool for getting what one needs when those needs are not being met. Because of this, self-advocacy has been tied to a range of marginalized groups including students of color, foster youth, and youth with disabilities.
Psychologists consider self-advocacy to be a key component in self-determination. Self-determination is a mindset marked by intrinsic motivation and the ability to determine what one wants and needs, set goals, and take action to achieve those goals. Self-determination develops throughout a person’s lifespan, but adolescence is an especially important period within that development. Neuroimaging studies show that when individuals engage in thought marked by high levels of self-determination, their salience and central executive networks are extremely active, while their default mode network is suppressed. During adolescence, youth’s brains develop increased connectivity within the central executive network nodes and increased segregation of the central executive network and default mode network. Thus, brain development happening during adolescence is critical to developing a self-determined mindset as adults. A strong sense of self-determination has been linked to positive mental health, physical health, and employment outcomes in adulthood.

Teaching Self-Advocacy

Advocates for children and young adults with learning disabilities have created several methods for helping youth develop self-advocacy skills. A guide designed by PACER Center, an advocacy agency for youth with disabilities, has established recommendations for practicing self-advocacy skills in Individualized Education Plan (IEP) meetings. PACER recommends role-playing situations in which self-advocacy is crucial, such as an IEP meeting. The PACER guide provides several ways that youth may participate in an IEP meeting, each with varying levels of involvement to suit a youth’s comfort level. Youth may choose to participate in ways that do not involve speaking such as writing down their questions, concerns, and ideas before the meeting takes place and giving them to a trusted adult. In the meeting, youth may participate by talking about their interests and strengths, explaining their specific needs, asking questions if they need something clarified, reviewing what has been decided, or even leading all or part of the meeting. Providing a variety of ways for youth to be involved in an IEP meeting makes the meeting more accessible to youth who may have a wide range of comfort levels and abilities. It also offers youth a way to increase participation over time as they become more comfortable with self-advocacy. Throughout IEP meetings, adults should listen to youth and consciously highlight their strengths.

Similar research on youth with learning disabilities in college highlights the importance of emphasizing strengths and goal setting. One particular resource suggests working with students to make sure they understand a college’s policies and systems and are given information on how to communicate with faculty successfully. The creators recommended dedicated and direct instruction on developing self-advocacy skills.

Guidelines produced by special education educators Land and Duquette also argue that self-advocacy skills should be explicitly taught. They focus self-advocacy education on the acquisition of skills that include understanding one’s strengths and weaknesses, knowledge of services available, understanding of one’s rights, and the ability to make requests for services and assistance. The educators suggest that students should receive specific instruction of self-advocacy and involvement in IEP meetings that teaches them how to:

- “Inventory their strengths and needs
- Provide this inventory information during the IEP conference
- Ask questions
- Respond to questions
- Summarize the IEP goals.”

While these programs are designed to support students with learning disabilities, their core tenants can be applied to other situations that require youth self-advocacy.
Youth in Care and Self-Advocacy

The positive outcomes that self-advocacy help support are especially beneficial to youth in care. Youth in care often face unique barriers to positive outcomes such as pursuing education and securing stable housing. Children and adolescents in care may face placement changes, which can uproot them from schools and support systems, making it more difficult for them to build relationships with teachers and stay on top of their coursework. Furthermore, youth in care may not have the support of an adult who can guide them through college application processes, or help them find a stable income and housing to support themselves. As a result, youth in care attend college at a rate lower than the general public and are at a high risk for homelessness once they age out of state care. Since youth in care are disproportionately Black and Hispanic, racism and bias can further exacerbate the issues that arise from being in state care. Self-advocacy is one skill that can help youth in care navigate these systemic barriers and fight for systemic changes that benefit themselves and other youth in their position.

While self-advocacy skills are especially important for youth in care, there are several barriers that make it harder for youth to develop and implement self-advocacy skills. For all youth, research suggests that adults do not consider youth advocacy to be significant and meaningful. Studies have found adults to be skeptical of a young person’s ability to understand their own needs, and then react by undermining a child’s self-advocacy, doing what they think is best regardless of the young person’s wishes. Adults can also perceive youth self-advocacy as acting out, which leads to resistance to, rather than nurturing of, self-advocacy skills. Additionally, research suggests that gender can impact self-advocacy skills, as boys are socialized to avoid being emotionally open and asking for help, and girls can be perceived as overly demanding in their advocacy attempts.

Furthermore, aspects of the child welfare system counter the principles of self-advocacy, as many of the children and families enter the system involuntarily and then are required to make certain decisions or join certain programs as part of their case. Youth in stable households are often able to learn self-advocacy skills by observing how their parents, family members, and mentors work to meet their own needs. However, in care, youth may not have access to supportive role models who are able to demonstrate self-advocacy skills.

Two studies have identified specific difficulties that youth in care have when attempting to voice needs and concerns to case workers. In one study, youth in care in Britain who advocated for themselves felt that adults in the room were ignoring what they said and the concerns they pointed out. In one case, after social workers repeatedly failed to address concerns about a foster family, one youth found it necessary to escalate the situation by running away the family in order to make his complaints heard. This drastic action garnered more attention from the social worker than verbal complaints did.

The other study found that many youth lacked information on how the formal complaint processes worked in the child welfare system. The youth reported that after verbal complaints to social workers went unaddressed, they were unsure of what to do next and lacked information on how to make a formal complaint or reach out to someone else about the issue. These studies demonstrate how the child welfare system can make it more difficult for youth in care to advocate for what they need, and the negative outcomes that can occur when youth self-advocacy is not supported by adults in the system.

Research has also pointed to best practices for supporting the self-advocacy of youth in care. This research suggests that adults should:

- be open to listening to the concerns and needs of youth,
- take what youth say seriously,
- be comfortable with youth complaints that may challenge the system, and
- follow-up with youth on the outcomes of suggestions they made.
Often, youth in care feel best supported when they are with a trusted adult. Youth have discussed feeling supported by a social worker, a family member, or an outside advocate who is not part of the child welfare system. In each of these cases, the supportive adult was someone the youth felt they could trust and confide in. Alternatively, for some youth, having an advocate with distance from the situation was important because they felt that they could not fully rely on a biological parent or social worker to support what they wanted since the parent or worker had competing interests in the situation.

In addition to youth self-advocating with their social workers, foster families, and in child welfare planning meetings, court hearings are also an important settings for self-advocacy for youth in care. In hearings, judges make influential decisions for youth including, but not limited to: placement, permanency, education, and family visitation. Each of these decisions has the potential to significantly change a child’s life, and thus that child should be involved in the decision making process. Judges, attorneys, and social workers should work to include youth in court hearings and give them an opportunity to have their voice heard.

Best practice stipulates engaging children throughout the court hearing process at an age-appropriate level. Starting in adolescence--around age 12--youth should be able to provide their input, opinions, and wishes. The American Bar Association outlines several ways to make sure youth are included and heard in hearings:

- Judges and attorneys should make sure to explain what is happening with developmentally-appropriate language and avoid using jargon and acronyms.
- Hearings should be scheduled when youth can avoid missing school and transportation provided.
- All alternatives should be considered before youth are excluded from participation. For example, if a youth is uncomfortable or unsafe around family members that will be present in the hearing, the family members should be asked to leave for the portion the youth is present.
- Youth should be able to have a person of their choosing for support.
- Youth should be able to communicate their thoughts in a variety of ways including to the judge in private, via letter, or through a video call.

Ensuring that youth are able to participate comfortably and effectively in court hearings allows them to advocate for themselves when decisions are being made that will have a serious impact on them.

The background research presented helps illuminate ways that child welfare systems and court systems can support youth in making connections that support them in self-advocacy, support social workers in navigating the multiple barriers their clients face while engaging in self-advocacy, and clarify chains-of-command so that youth can advocate within the system if they do not feel heard by their social worker or foster family. Next, our research will explore the policies and practices within Connecticut’s child welfare system that help youth understand their rights and entitlements as well as prepare youth to communicate when their rights are violated or they are not receiving services to which they are entitled.
Connecticut Department of Children and Families (DCF) recognizes the importance of youth voice in the process of helping youth in care articulate and achieve their own goals and best outcomes. This is reflected in the existence of the DCF’s Youth Advisory Boards (YABs) and the ways in which the department tries to create space for youth to self-advocate within DCF’s own policies.

This section will explore avenues to self-advocacy that have currently been made available to youth through DCF policies and tools. The DCF policy manual and practice guides serve as the primary sources and guidelines for the ways in which the Department encourages youth in care to voice their needs and have a say in determining their best outcomes. In addition, this section will also take a look at the tools that have been created by advocates with the intention of equipping youth with the knowledge they need to advocate for their own needs and rights.

**Adolescents in Care Bill of Rights and Expectations & Sibling Bill of Rights**

*Policy*

The Department of Children and Families’ Youth Advisory Board adopted the Sibling Bill of Rights and Adolescents in Care Bill of Rights and Expectations in 2014 and 2015 respectively. As a result of determined DCF youth advocacy, these bills of rights created for youth in care by youth in care have since been adopted into DCF policy. Additionally, they have been codified into law by Public Act (PA) 19-44 (An Act Concerning a Children in Care Bill of Rights and Expectations and the Sibling Bill of Rights), and included on the DCF-780 Child in Care/ Siblings Bill of Right and Expectations form that all social workers are responsible for reviewing with out-of-home caregivers and youth “whenever a child is placed in the home.” The rights and expectations listed serve as the bedrock from which stems the youth in care’s ability to self-advocate. The DCF-780 form covers different aspects important to a youth’s ability to self-advocate, including the rights:

- “To develop and maintain [one’s] own values, hopes, goals, religion, spirituality, and identity;”
- “To consistent and regular visitation or ongoing contact with [one’s] parents, siblings, extended family and friends, and assistance in connecting with birth family if desired.”
- “To be placed with siblings, or in close proximity to facilitate frequent and meaningful contact;”
- “To be placed in a safe environment in [one’s] home community, participate in preplacement visits when possible, receive prior notice of planned changes in placement when for [oneself] or [one’s] siblings, and notice of when siblings are discharged from care;”
- “To have meaningful participation in the development of [one’s], as well as [one’s] siblings, case plan and permanency plan, including, but not limited to, the ability to participate in and select individuals of [one’s] choice to participate in meetings concerning such plans;”
- “To have meaningful and regular in-person contact with your social worker” who must answer calls and correspondence, and keep youth informed of case status, and inform them of their rights regarding “health, visitation, court participation, and credit report monitoring;”
- “To stability and support in all aspects of education.”
In addition, the form goes over expectations of caregivers and their responsibilities to the youth in their care. These expectations include that caregivers:

- Treat youth with respect, and maintain relationships that emphasize “trust, understanding, empathy and communication;”\(^{52}\)
- Assist youth in building life skills, obtaining legal documents and licenses, and participating in extracurricular and personal enrichment activities;
- Improve their own skills by participating in training programs, and;
- Provide youth with privacy and space, including “privacy with respect to personal items and communications”, such as journals, phone calls, texts, and emails.\(^{53}\)

Practice Guide

The PA 19-44 Practice Guide states that upon reaching an appropriate age, all children deserve to know their rights. Social workers should review the DCF-780 form with children whenever they are placed in out-of-home care, moved to a new home or placement, and annually for however long the child is in an out of home placement.\(^{54}\) Children should also be informed of who to contact if they feel their rights are ever violated, as well as informed of the “role and responsibilities of the child’s attorney, the DCF Office of Community Relations, and the Office of the Child Advocate.”\(^{55}\) The DCF-780 form should be submitted at the time of the child’s Administrative Case Review meeting with the case plan. Additionally, according to the practice guide, the Child in Care Bill of Rights and Expectations should be reviewed with the child and the caretaker at the same time whenever possible.

Case Planning

Case Planning- the DCF Case Planning Best Practice Guide describes case planning “a road map for safety, permanency and well-being for families and children.” The primary goals of case planning are to “(1) assess families’ strengths and areas of need in a culturally and linguistically responsive manner, (2) identify and assure provision of effective services to address their needs, and (3) monitor progress on an ongoing basis.” (Pg 3)

As the Child in Care Bill of Rights states, youth are meant to take meaningful part in the development of their own case and permanency planning, meaning DCF should do its best to ensure that youth are attending, informed of, and involved in planning. Chapter 20-1 of the DCF policy manual further describes the process for creating case plans for children in placement. Case planning is a legally required\(^{56}\) and ongoing process that is used to “assess and address the family’s needs in a culturally- and linguistically-responsive manner through engagement and partnership with family members and service providers.”\(^{57}\) Planning occurs through a “trauma lens,” meaning it “includes a recognition and appreciation of the high prevalence of trauma that is often experienced by children and families served, coupled with an understanding of the profound neurological, biological, psychological, cognitive and social effects of trauma and violence on the child.”\(^{58}\) Case plans for children in placement serve to assess the strengths and needs of the child, services that may be provided to address those needs, and continuously monitor the progress of the child and family.\(^{59}\)

The child in placement case plan must include the child’s reason for initial and ongoing placement, a description of the child, and the means of contact between the child, their siblings, and other significant individuals in their life. These case plans must also assess the child’s physical, emotional, behavioral, educational, and developmental health. Additionally, planning makes note of the youth’s social supports.\(^{60}\)
For youth age 14 and over, the case plan must be done in consultation with the youth, and document that the adolescent has been informed of his rights regarding their education, health, visitation and contact, court participation, annual credit report, and placement expectations. They should also be made aware of the name and contact information of their attorney. Adolescent youth will be asked to sign the DCF-780 form, and must be notified if the rights are changed with their social worker explaining any changes and having the youth sign a new DCF-780.  

In the development of the case plan, adolescent youth have the right to have two people of their own choosing to participate.

**Practice Guide**

The DCF Case Planning Practice Guide gives better insight into how case planning meetings, including meeting compositions, are determined, and individuals involved in the youth’s life are engaged. Youth are permitted to bring a number of supports to their case planning meetings. According to the Case Planning Practice Guide, “case planning shall include all family members and any other significant household relationships, including those who reside inside or outside of the home. Other significant relationships may include, for example, boy- or girlfriend, uncle, [or] grandmother.”

The practice guide also emphasizes the importance of making “concerted efforts” in the engagement of family and other potential supports for youth in care. “The ‘concerted effort’ standard implies planned, diligent, thoughtful, and repeated attempts to overcome barriers to achieve safety, permanency, and well-being.” It describes engagement as an ongoing process and should take place every time contact is made with those involved in the case planning process. The guide also makes special mention that fathers, incarcerated parents, and undocumented persons should not be neglected in engagement outreach. It is also states that all attempts at engagement should be documented, whether or not they are successful.

**Administrative Case Review (ACR)**

The Administrative Case Review process is the required process in which DCF reviews the electronic record and case plan of youth in care. ACR Social Work Supervisors (ACR SWS) facilitate these review meetings “no less than 60 days from the child’s entry into care and at least once every six months (180 days) thereafter […]”. Invitations to attend the ACR meeting are sent out to:

- the parents or guardians;
- the child, if 12 years of age or over;
- the attorneys for the parents and child;
- any guardians ad litem appointed by the court;
- community providers;
• placement providers;
• any other professionals involved with the child or family;
• school personnel; and
• any DCF Regional or facility staff that provide services to the child or family.68

Administrative Case Reviews occur periodically to determine the condition of the youth in care and how well the case plan is being upheld. The DCF policy manual sets a standard of what should be examined at these sessions. The elements of the review process include evaluating:

• the physical and psychological safety of the child;
• the extent of compliance with the case plan;
• the extent of progress that has been made toward alleviating or mitigating the causes necessitating DCF involvement;
• if the child is placed in out-of-home care, the appropriateness of the placement;
• the treatment and monitoring of any trauma associated with maltreatment and removal from home;
• a projected likely date by which the child may be returned to and safely maintained in the home or placed for adoption or legal guardianship;
• for a youth for whom OPPLA has been approved, the steps taken to ensure the child’s foster parent or institution is following the reasonable and prudent parent standard; and
• the extent to which the child has regular, ongoing opportunities to engage in age and developmentally-appropriate activities.

The ACR meetings provide a time when the youth and their families, guardians, and other support systems are given a chance to go over the state of the youth’s situation and well-being. The DCF policy manual states that “every effort shall be made to hold the ACR meeting at the time and location that allows the parents or guardians, foster parent and the child, if 12 years of age or over, to attend.” The ACRs are supposed to serve as an opportunity for youth to voice their questions and concerns surrounding their permanency plans and placements. Separate sessions may be held when “necessary to protect participants or when it is in the best interests of the child.”70

Child and Family Permanency Teaming
Policy

Permanency- by Connecticut DCF standards, permanency is defined as an “enduring family relationship that is:

- is safe and lifelong;
- offers the legal rights 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.”

Chapter 21-2 of The DCF Policy Manual concerns permanency planning for youth within the jurisdiction of the DCF. The Child and Family Permanency Team (CF-PT) is a group comprised of all persons connected to a child in care. Permanency teaming is the intentional work of DCF to actively involve the social supports of the youth “in the process of engaging, assessing, and planning for the child's best interests in order to achieve safety, permanency, health and learning.”71
The CF-PT’s purpose is:

- “to ensure decisions are made on behalf of the child with:
  - the child’s active participation (or the representation of the child’s voice);
  - the active participation of parents and family members; and
  - the child’s natural support network; and
- to support the continuity of safe family relationships and connections with other caring adults.”

The ultimate goal of the CF-PT is to achieve permanency for youth, meaning a safe, lifelong, enduring family relationship that conveys all the legal and social status, well-being, and significant connections of full family membership. The search and process of achieving permanency are done through ongoing individual and joint, large team meetings consisting of:

- child;
- parents and legal guardians;
- out-of-home caregivers;
- case-related professionals;
- and other members of the child’s natural support network.

Following preparatory individual meetings, team meetings occur as often as necessary based on the individual needs of the case of the youth, and typically “shall be held every six to eight weeks.” These meetings are opportunities for collaborative planning and coordination of supports and services of the youth, while also giving all individuals involved input in the ongoing decisions being made for the youth in care.

While large team meetings “are not designed to be event-driven,” they are required in advance of:

- development of initial and subsequent Family Case Plan;
- development of initial and subsequent Child in Placement Case Plan;
- prior to a change in placement or within two business days of an emergency removal;
- prior to a change in the child’s permanency goal; or
- prior to a return home to parents or placement in kinship care.

However, these meetings are not required for respite placements, or in advance of an emergency placement or emergency placement change.

**Practice Guide**

The Child and Permanency Teaming Practice Guide elaborates on the purpose of the individual and joint meetings that are a part of permanency teaming. The practice guide clarifies the ways youth can be prepared to advocate for themselves in planning their own permanency. It states that goals for the individual child conversations are in part to:

- identify adults that the child would like to include on their planning team;
- support the child in thinking about their future;
- empower the child to fully participate in planning for their future; and
- ultimately prepare them for the large meeting.

As permanency planning moves forward to joint meetings between, parents, caregivers, and the child, among others, the CF-PT practice guide notes that it is important that the child’s involvement in their own permanency planning be encouraged as strongly as possible. The Practice Guide Appendices states that “when working with older youth (12-18) the team process is primarily defined as youth driven. It is a collaborative planning process
done with the youth not to the youth or for the youth.” 

For youth below the age of 12, discussions and decisions should still remain centered on the child’s needs and best interests. The practice guide emphasizes that when the child is not present at discussions, their voice—"their story, wishes, feelings, fears, the people whom he/she loves and feels safe with"—should be echoed through caregivers and adults who share a significant relationship with the child.

**Adolescent Planning and Services**

Regardless of permanency planning, once any youth in care reaches age 14 they are to receive adolescent planning. This program should include “educational, vocational and employment services as well as an array of living settings that will allow youth to gradually assume more independence within a supportive atmosphere as they age and mature.” For all eligible youth, DCF should provide a variety of services to through the Adolescent Services program.

**Adolescent Specialist**

According to the DCF Policy manual, Adolescent Specialists are social workers that have completed or are “willing to complete” the DCF Workforce Development Academy’s Adolescent Training series. Adolescent specialists are to be responsible for providing services to youth in care ages 14 and older.

**Adolescent Specialist Social Work Supervisor**

As the name suggests, Adolescent Specialist Social Work Supervisors are DCF employees responsible for the supervision of Adolescent Specialists; they are tasked with ensuring that the Adolescent Specialists are qualified, experienced, receive appropriate training, and are acting in accordance with DCF policy and best practices.

**Driver’s Permit and License**

Youth in care ages 16 and older can attempt to obtain a driver’s license with the aid of DCF. According to DCF’s manual of adolescent services, once the request is made by a youth in care, the Adolescent Specialist should review the request with the youth and caregiver to determine if the youth is responsible enough to obtain a license. If yes, DCF should provide financial assistance: “DCF shall pay 100% of the cost of one driver’s education program for eligible youth.” Youth may take the written test and obtain a learners permit. Then, they may attempt the driving test six months after receiving their permit. The Adolescent Specialist should then verify with the owner of the vehicle that proper insurance is carried so the youth may drive, and that the owner assumes responsibility for the youth’s actions while they are driving.
Adolescent Transition Plan

An Adolescent Transition Plan is a form of permanency planning and preparation for youth who might age out of care. The purpose of transition planning is to identify the areas of need that must be met for a youth to transition from living in care successfully. Each youth in DCF care ages 16 or older are to review the transition plan “at the first Administrative Case Review after the youth’s 16th birthday.”

The DCF policy manual states that transition plans should be “youth-driven and based on the youth’s identified needs.” Each personalized transition plan should include concrete options and steps for youth to take as they transition from care; particularly each plan should include options for youth regarding “housing, health insurance, education, personal and community supports, workforce supports and employment services.”

Additional Tools

Office of the Ombudsman

The Office of the Ombudsman resides in the Office of the Commissioner for the Department of Children and Families, and is tasked with addressing questions and complaints related to the Department. The Ombudsman staff manage inquiries to the DCF commissioner from DCF clients, providers, and youth, as well as Connecticut residents, “the Governor’s Office, federal, and state legislators, local officials, the Office of the Child Advocate and many other entities.”

The Ombudsman’s office’s duties are to respond to, engage with, and potentially resolves issues brought to them. If youth in care are experiencing problems with their situation, and other support systems, such as caregivers, social workers, or guardians are unable to aid the youth, the Office provides an additional space where youth can advocate for better outcomes.

The Office of the Ombudsman 2017 Annual report states that in CY 2016, 33 youth contacted the Office. Several youth reached out to the Commissioner’s office “with the intention of speaking directly to the Commissioner to express their views.” Other reasons youth contacted the Office included requesting Re-Entry into DCF and asking about their financial support eligibility if there was a disruption by a change of guardian placement. The report also mentions that social media has helped improve communications between youth and DCF staff.

Youth Advisory Boards

The Department hosts Youth Advisory Boards (YABs) throughout the regional offices and quarterly at the central office in Hartford. YABs are small convenings of youth organized by a local coordinator in each of the area offices and a statewide coordinator at the central office. In some regions, area offices partner to host larger YAB meetings. At YAB meetings, youth in DCF care are able to share their insights and thoughts on DCF policy and practice and make suggestions for improvement.

The statewide meetings, called the Commissioner’s YAB, are attended by the DCF Commissioner and other members of the Commissioner’s administration. Youth from across the state representing the regional YABs attend these quarterly meetings. Local meetings are attended by a local coordinator and other social workers, often those who transport youth to the meetings. Some local meetings are organized in partnership with organizations that DCF contracts with to provide services. For example, the local YAB held in Hartford is currently coordinated by both DCF and the community-based organization Our Piece of the Pie. Besides discussing DCF policy and practices, YABs organize events such as a yearly graduation party for youth in care who have graduated high school.
YAB meetings have been a positive space for cultivating youth-led change in DCF. YAB members have been instrumental in the creation of the Adolescents in Care Bill of Rights and Sibling Bill of Rights. Members of the YABs have also written and performed in a video campaign designed to attract and inform potential foster parents titled “Meet Me Where I’m At.” In September of 2019, the YABs held a youth-organized conference called the Leaders In Training Summit. At the Summit, youth in care led sessions to inform their peers on issues such as racial equity and tools like the SpeakUp handbook.

*SpeakUp Handbook*

The SpeakUp handbook is a particularly useful tool for youth in care. The first iteration of the handbook, created by the Center for Children’s Advocacy (CCA) in 2018, serves as a guide to help youth understand their legal rights and the responsibilities of DCF and other individuals and organizations that serve youth in care. SpeakUp covers many questions and concerns held by children in care, informing them of their responsibilities, the responsibilities of their caretakers, and what is within the youth’s power to enact change. To ensure that the handbook is accessible to children with a range of skillsets and needs, CCA also developed a series of videos to explain the content within the handbook. The back of the handbook includes a card for social workers to fill out with youth identifying contact information for important supportive adults such as youth’s lawyer, doctor, counselor, and DCF worker.

The information in the SpeakUp handbook covers many issues including, but not limited to: how to contact DCF, the DCF chain of command, how living arrangements are made once a youth is placed in care, and programs and support systems that can be accessed when transitioning out of care. In order to make the issues easy to find, the book is divided into sections relating to different problems youth may have, with headings such as “Family and Community Contacts,” “Abuse in Care,” “Disability Benefits,” and “Education.” Each of these sections are further broken down by framing issues as questions that a child in care might ask, for example:

- “What if I can’t read the documents DCF sends to me?”
- “What is a case plan? Can I participate?”
- “Can I choose my own lawyer?”

The handbook also references the DCF policies and the Connecticut and federal laws that pertain to each issue. However, the printed handbook that DCF currently has available is in limited supply and was last updated in March of 2018. Since, the DCF Policy handbook and relevant Connecticut General Statutes were updated in July of 2019, the printed SpeakUp booklet does not contain the most up-to-day information available. The CCA has an updated version of the SpeakUp handbook in digital form, accessible on their website. The Department has not yet purchased printed copies of this version.

*Work to Learn*

Work to Learn is a collection of DCF-funded regional programs that aim to ensure that youth aging out of DCF care do so with the skills and opportunity to “assist in a more successful transition to adulthood.” The goal of these programs are to develop independence and tangible life skills that will translate into better outcomes later in the youth’s life. These programs are made available to DCF Child Welfare and Juvenile Justice Youth between the ages of 14 and 21, and exist in the cities of Waterbury, New Haven, Hartford, and Norwich.
An example of the Work to Learn program is the one run by the Marrakech, Inc. Center. Both the Waterbury and New Haven programs are run by Marrakech, Inc., a “a diverse nonprofit organization that has been providing person-centered, unique, and cost-effective human services for children and adults with and without disabilities throughout Connecticut since 1971.” The Marrakech program provides “educational, vocational, employment, financial literacy, life skills, personal and community connections, and other support services” to youth ages 16 to 21 transitioning into or out of care. Youth take part in onsite businesses and community internships while receiving a stipend. After completing the internship, youth may be referred to community employment if they are determined to have the skills and ability to work independently in the community. The center also provides a “job developer” to aid youth in applying and interviewing for jobs. Youth who continue on in the program can receive a match of money withdrawn from their program bank accounts of $1000 per year to be spent on materials for their independent development, such as investments, educational, transportation, or housing needs.

Mentoring

The DCF Mentoring program pairs adult mentors with youth mentees to provide youth with a positive role model and confidant. This program aims to help youth develop a long-term and ideally life-long relationship. Mentors are supposed to meet with youth at least three times a month.

Additional Adolescent Services

Additionally, DCF has an array of clinical services to support the behavioral health needs of youth and families, services to support the complex needs of adolescent young women, life skills training to help youth learn skills for independent living, and employment opportunities such as summer youth employment and CHEER (Community, Housing, Employment and Enrichment Resources). Most of these programs include components to help build youth’s skills identifying their strengths and needs, setting goals, and creating plans to meet their needs and reach their goals.

Public Defender Services

Children and adolescents in the care of DCF are legally represented by public defenders and counsel contracted by the Division of Public Defender Services. The Division lays out a set of guidelines for dealing with children and youth in child welfare matters. The guidelines show that among their duties, lawyers assigned to youth in care are supposed to serve as counsel and support for youth self-advocacy. The counsel should be “an advocate for the client’s wishes, interests, rights and goals.” Legal counsel should also serve as an advisor, explaining and helping determine the likelihood of achieving their client’s goals.

Lawyers should also work to build relationships with their clients and keep them involved in their cases. The guidelines state that lawyers are to meet with clients prior to each hearing and consult with them “in a place that is conducive to building a relationship with the child client.” Counsel should also meet with youth “at least four times a year and whenever the placement is changed.” During these visits, the lawyer is tasked with interviewing caregivers, staff, or family members at any placement. To the extent allowed by the youth’s age and abilities, lawyers should be in communication about the “progress of the case, trial strategy and preparation, negotiation and settlement strategies, and post-trial goals.”

Lawyers have a role to play in the development of self-advocacy skills for youth in care. Hearings are an additional space where youth have the chance to make their voice heard, and most juvenile courtrooms in the state include a designated space where youth can privately consult with their lawyers before and during a hearing. In addition to “diligently and zealously” protecting and advancing the rights and wishes of youth in care, lawyers should also be working to make sure they are participating in the legal process in an age appropriate manner. For children younger than 12, counsel must ask youth if they wish to attend court in an appropriate, and take steps
to accommodate the child’s wishes. Youth 12 and over should be asked if they wish to attend all scheduled court hearings, and “all necessary steps” should be taken to make sure they are able to attend. Additionally, lawyers should meet with youth in care at age 16 to begin transition planning and taking any steps to ensure youth have the services and supports they need to successfully transition to independence.

Once reaching the age of 18, however, youth are no longer entitled to an attorney, despite Connecticut extending foster care supports to age 23. The Division of Public Defender Services’ guidelines state “counsel is expected to maintain representation of the client through the end of all court order in delinquency and child welfare cases.” This allows space for the argument that counsel should stay on until youth are out of DCF care entirely, but the guidelines also state “if a child is remaining in DCF custody after age 18, an attorney can petition OCPD for permission to continue to be compensated for representation.” Representation for youth 18 and older is thus left entirely up to the discretion of their attorney and the Office of the Chief Public Defender.
When it comes to providing youth in care with potential avenues to self-advocate, Connecticut’s DCF policy and state laws stand out prominently compared to other states and departments. Connecticut is one of twenty-five states to have ratified a version of a Foster Youth Bill of Rights that also guarantees the right of youth to participate in their case and permanency planning. Reviewing the policies of other states, however, can provide additional ideas to strengthen the ways DCF teaches and supports youth self-advocacy.

**Colorado**

*Permanency Pact*

As a way of helping youth in care identify reliable adult support systems, Colorado uses the Permanency Pact tool in their case planning and Facilitated Family Engagement practices. This tool is aimed at helping youth find adults who can provide specific support and ultimately help develop kin-like relationships that the youth can rely on in the long-term. In developing a permanency pact, the youth, with the aid of a facilitator, identify a supportive adult. The group then sits down to create a written plan of specific ways in which the adult can support the youth in their development. The permanency pact guide offers suggestions of different support that an adult may commit to. These suggestions include committing to necessities like a place to stay during holidays, do laundry, or find occasional meals. They include committing to helping youth development by providing legal support, mentorship, or job search assistance. Adults can also commit to helping youth with co-signing, finding community resources, or advocacy. The process results in a certificate, witnessed by the facilitator, that identifies the concrete ways in which the youth will be supported.112

**Maine**

*Make Youth Voice Count Worksheet*

The Make Youth Voice Count worksheet is a tool created in partnership with Maine’s Youth Leadership Advisory Team (YLAT) and Maine’s Office of Child and Family Services (OCFS). The tool aims to help youth clearly organize and articulate their goals for case planning and family team meetings. The form asks the youth to identify the goals they would like included in their case plans, necessary steps, the supports needed, and their strengths and worries. Youth are also asked to identify individuals and support teams with whom they share significant connections, including family and friends. The form also gives youth a chance to voice their concerns over living arrangements, their education, potential employment, and their own health and wellness.113 The Make Youth Voice Count tool provides a method of helping youth identify clear areas in which they may have needs.

**Iowa**

*Youth Participation in Case Planning*

Iowa is another state that sets a good example of the ways youth voice can become a central part of case planning. According to the Iowa Department of Human Services Employee’s Manual, unless it is decided to not be in the best interests of the child as determined by an attorney, arrangements should always be made for youth over 14 to attend all court hearings and staff or family meetings that involve placement options or services to be provided to the youth. If the youth is unable to attend in person, arrangements should be made for them to attend over video or phone. In addition, youth over 14 are also encouraged to select an adult who is not their parent or social worker who will advocate on their behalf in planning meetings, as assist in advocating for services and during court hearings.114

Furthermore, the Iowa state legislature guarantees the right of youth in care to be present and heard in court hearings.115 In the case that a youth of an appropriate age does not appear at a court hearing, the court must determine whether or not the youth was aware of their right to attend the hearing. The law also states that there is
presumption “that it is in the best interests of a child fourteen years of age or older to attend all hearings and all
staff or family meetings involving placement options or services provided to the child.” 116 Putting the right of
youth in care to participate in hearings in the state law is an important step in protecting youth participation in the
meetings and that determine aspects of their future. Establishing the presumption that it is in the best interest of
the youth to participate makes it clear that the state understands the importance of self-advocacy.

The next section of this report examines data from Connecticut to understand whether youth are participating
in opportunities to advocate for themselves, barriers to advocating for themselves, and supports youth need to
advocate for themselves.
RESEARCH ON DCF POLICIES AND TOOLS IN PRACTICE

We utilize four types of data within this analysis: a youth survey, youth focus groups, DCF staff interviews, and analysis of quantitative systems data provided by DCF and the Juan F. Federal Court Monitor’s Office. See Appendix A for detailed information on our methods of collecting data and analyzing data.

Four major themes emerged across the survey, focus group, interview, and quantitative data we analyzed. First, the data highlighted the importance of advocacy to youth. Youth felt that self-advocacy was important to them, and youth advocacy resulted in better outcomes for the youth. Youth also felt that advocacy for others was important, and youth wanted more opportunities to engage in advocacy. Second, the data underscored that relationships are a fundamental piece of self-advocacy. Youth felt more comfortable advocating for themselves when with other people they trust—trusted others ranged from social workers to lawyers to friends and biological family. Third, while DCF has some excellent tools for teaching and supporting youth self-advocacy, these tools were not always accessible to all youth or appropriate for all youth. Fourth, systemic barriers to youth learning and practicing self-advocacy remain. These barriers include youth struggling to know whom to contact when they have problems, placement stability impacting youth relationships, social workers not having enough time with the youth in their care, and social workers needing accessible training to support the different needs of the youth in their care.

We surveyed youth volunteers from three Youth Advisory Boards. As opposed to the entirety of children in DCF care, the youth we surveyed were entirely teenagers and young adults. Given our small sample size (N=17), the non-random nature of recruiting participants, and demographic differences between our survey sample and the entirety of the population in DCF care, we recommend interpreting this data with caution. The data collected through the surveys and focus groups, however, provide insight into the experiences and beliefs of some youth in state care.

![Age of Children in DCF Placement](image)

*Figure 1. Comparison of the age of surveyed youth and the population in DCF care. DCF data is point-in-time data from July 1, 2019 and was provided through a DCF data request.*
Additionally, we asked participants in our survey to report the age at which they entered DCF care. A larger percentage of youth in our survey entered care as teenagers, and a smaller percentage of youth in our survey entered care as infants or as children (7-12).

Figure 2.

![Age When Child Entered DCF Care](image)

*Figure 2. Comparison of the age at which surveyed youth and the population of youth in DCF entered care. Data about the DCF population is a Connecticut Voices for Children analysis of DCF data reported for state fiscal year (SFY) 2018 on the CT Open Data Portal.*

The gender demographics of the sample of youth we surveyed also differed from DCF’s larger population. As of July 1, 2019, DCF had 2 percent more boys in care than girls. The population we surveyed had far more youth who identified as female than youth who identified as male.

Figure 3.

![Gender of Children in DCF Placement](image)

*Figure 3. Comparison of the gender demographics of surveyed youth and all children in DCF care. DCF data is point-in-time data from July 1, 2019 and was provided through a DCF data request.*
Finally, we collected racial/ethnic demographic data from youth differently than DCF. We asked youth to self-report their racial/ethnic identity, which may have allowed more specificity than it is reported elsewhere. In addition to collecting data on whether youth identify as “Hispanic,” “Black,” or “White,” we asked youth whether they identified as Asian or Pacific Islander or as two or more races. DCF utilizes a category of “other race” under which youth who have diverse ethnic identities might be categorized. The sample we surveyed had a smaller percentage of children who identified as Black and white than DCF as a whole. We had youth identify as Asian or Pacific Islander as well as youth who identified as two or more races, so we had a greater population of youth who might otherwise be characterized as “other race” in publicly reported data sets.

Figure 4.

![Race/Ethnicity of Children in DCF Placement](image)

**Figure 4.** Comparison of the racial and ethnic demographics of youth surveyed and all children in DCF care. DCF data is point-in-time data from July 1, 2019 and was provided through a DCF data request.

Our DCF staff interviewees were also a non-random volunteer sample. We conducted interviews with five (N=5) staff members who were all social workers or social work supervisors with experience serving adolescents in care. All five had experience working with YABs.

**Theme 1: Self-advocacy is very important to youth in DCF care**

*Across all four types of data, self-advocacy emerged as critical to youth development.*

Surveyed youth believed that self-advocacy was important; 76.5 percent of youth “agreed” with the statement “It is important to me that I am able to advocate for my needs,” and an additional 5.9 percent “somewhat agreed” with the statement. We found a significant correlation where youth who felt that self-advocacy was more important to them were also more comfortable advocating for their needs, r(15)=.64, p=.005.

During focus group discussions, youth indicated that self-advocacy allowed them to speak their minds, avoid being taken advantage of, and get what they needed. Youth described how they used self-advocacy skills to access needed mental health care and educational programs as well as to receive an allowance so they could attend events.
DCF staff also underscored the importance of youth learning to advocate for themselves. All interviewees discussed how sometimes when a youth comes to them with a problem, often what the youth needs is someone to talk it through with them to help figure out the solution. Two staff members went on to discuss that when a youth comes to them with a problem about their foster placement, their first step is to try to coach youth through addressing the problem themselves.

Youth’s ability to self-advocate--to understand their strengths, needs, and wishes and communicate these to DCF--may ultimately result in better outcomes for youth. Data requested from the Juan F. Federal Court Monitor’s Office suggested that across domains of youth needs including educational, behavioral, medical, and dental needs, the services provided for these needs and compliance with services were more likely to be considered “very good” or “optimal” in ACR meetings where youth attended. These results were not statistically significant, perhaps due to the low number of youth who attend their ACR meetings, but their consistency of direction is worth exploring further.

Figure 5.

Advocacy for others is also important to youth in DCF care.

Over 82 percent of youth surveyed “agreed” or “somewhat agreed” that it was important to advocate for changes that could improve the lives of others. When youth felt more supported in their self-advocacy, they placed a higher value on advocating for others, r(14)=.56, p=.023. Youth who felt that their social worker advocated for them also placed a higher value on advocating for others, r(13)=.70, p=.004, as did youth who felt heard in YAB meetings, r(13)=.69, p=.004. One possible explanation for this is that when youth feel their advocacy is supported and responded to, they react to the positive feedback and are more likely to value advocacy in general. Youth who placed a higher value on advocating for others were also more likely to have ideas for future changes to DCF, r(14)=.74, p<.001, and see a way for these changes to be heard and responded to by DCF, r(14)=.69, p=.003.
Four out of the five DCF staff interviewed said that the youth in their care speak openly about the changes they want to see from DCF, and three of the five said that the youth in their care offer these ideas during YAB meetings. Thus, YABs are an important space for youth not only to advocate for their needs and desires, but for the needs of other youth in care.

**Youth wanted more opportunities to engage in advocacy.**

While YABs are important spaces for youth to learn, practice, and engage in advocacy, surveyed youth indicated wanting more opportunities for advocacy. Sixty-five percent responded that they “agreed” or “somewhat agreed” that they wished there were more opportunities to speak with DCF administrators, and 69 percent responded that they “agreed” or “somewhat agreed” that they wished there were more opportunities to speak with Connecticut legislators. Youth who had accessed the SpeakUp booklet were more likely to want opportunities to speak with Connecticut legislators, r(14)=.56, p=.026.

ACR meetings are an important place for youth to engage in self-advocacy, but few youth attend these meetings. Three out of five DCF staff raised that they thought it was important for youth to be involved in the case planning process. To help youth navigate this process, social workers indicated their strategies included formulating the case plan with youth in advance of the meeting, trying to help youth understand that they can have a lot of power over their case plans, and supporting youth in speaking during ACR meetings. One staff member relayed that DCF has recently streamlined the ACR meetings to make the process friendlier for youth and families; meetings now take around 20 minutes and focus on planning for the future rather than recounting past events. While this is a wonderful change, staff still relayed that youth may not attend ACR meetings because of bad past experiences, because they are angry at the system, because the meeting has been scheduled at a place that is uncomfortable or inaccessible for the youth, or because the ACR meetings are scheduled during school hours or during after school activities. Even if youth want to participate, their parents, foster parents, or social workers may discourage them from attending because they should be in school.

Data provided by the Juan F. Federal Court Monitor’s Office spanning a sample of case review meetings between 2014 and 2019 show that ACRs are woefully under-attended by youth.

**Figure 6.**

![Attendance of Youth Aged 12+ and Biological Parents at ACR Meetings 2014-2019](image)

*Figure 6. Attendance of youth, biological mothers, and/or biological fathers at ACR meetings between 2014 and 2019. Data provided by the Juan F. Federal Court Monitor’s Office.*
Youth attendance at their ACR meetings differed drastically by DCF area office, but only one office had more than half of eligible youth attend. Eighty-six percent of area offices had between 20 percent and 40 percent of youth attend their ACR meetings.

There are, however, alternative ways for youth to engage in ACR meetings if they are not able to attend. Prior to meetings, youth can talk with their social workers to express their needs and set preferred goals. Many youth do engage in this more informal manner with the ACR process, and since 2011, DCF has improved in the extent to which youth’s voices are integrated into the case plans. Considering previous data showing that youth’s needs are better met when youth are present during the ACR meetings, being physically present at the ACR meetings may help youth “buy-in” to the goals and services deemed important during the meetings.

Figure 7.

![Graph showing Youth Engagement in Case Planning Over Time](image)

*Figure 7. Percent of case plans with documented youth engagement and input. Data provided by the Juan F. Federal Court Monitor’s Office.*
### Theme 2: Relationships are fundamental to youths’ self-advocacy

*Youth appreciated the support of someone they trust while advocating for themselves.*

While 76 percent of surveyed youth “agreed” or “somewhat agreed” that they felt comfortable advocating for their needs, they also indicated appreciating having someone they trust present when voicing their concerns. This was especially true for youth who entered care later in their lives, \( r(13) = .69, p = .004 \). Eighty-seven percent of youth indicated that they felt more comfortable voicing concerns when with their social worker, 81 percent of youth indicated that they felt more comfortable voicing concerns when with a friend, and 69 percent of youth indicated that they felt more comfortable voicing concerns when with their lawyer. Youth who had attended more YAB meetings expressed greater appreciation for others to be present when they engaged in self-advocacy, \( r(15) = .54, p = .026 \), suggesting that this is an important community for youth to practice and receive support in their self-advocacy.

Youths’ lawyers, in particular, can be powerful allies for youth. Some lawyers maintain frequent contact with the youth they represent, but they are often an exception. During focus group discussions, one youth specifically wished to know how to contact their lawyer to get help. During interviews, two DCF staff raised the importance of youth connecting with their lawyers prior to ACR meetings, but one staff member relayed that some lawyers had only met the youth they represented once or twice.

There are barriers to lawyers attending ACRs. Data provided by the Juan F. Federal Court Monitor’s Office indicates that lawyers or guardian ad litems only attended 25 percent of ACRs and Treatment Planning Conferences (TPCs) reviewed between 2014 and 2019, greatly limiting the extent to which they can support youth in their self-advocacy efforts during these meetings. Follow-up conversations suggest that often, the ACR is scheduled during the day, and lawyers may be in court during that time.

*Social workers are most often youths’ trusted source of support for engaging in advocacy.*

Most youth surveyed, 76.4 percent, “agreed” or “somewhat agreed” that they felt their social workers listened to their concerns and complaints, and no youth “disagreed” or “somewhat disagreed” with this statement; 62.5 percent of youth “agreed” or “somewhat agreed” that their social workers try to address problems youth bring them, and no youth “disagreed” or “somewhat disagreed” with this statement. This suggests that overall, youth feel positively about their ability to self-advocate to their social worker.

During focus group discussions, youth highlighted the importance of having a strong relationship with social workers to cultivate an environment that supported them in voicing their concerns. Some youth had connections with multiple workers that allowed them to advocate for specific things more effectively. One youth relayed that the lack of “trust, honesty, and communication” had made her less comfortable telling her social worker about a situation that came up with her foster family.

The DCF staff interviewed were cognizant that youth relied on them to be sources of support in self-advocacy. All five staff indicated that they felt it was always necessary to listen to youths’ complaints, but the response needed to be tailored to the youth and the situation. Some youth just need an ear, others need coaching, and still others need social workers to intervene on their behalf.
For some youth (but not all), biological family members are an important source of advocacy support. During focus group discussions, one youth spoke about wishing her mom were there to support her, saying that her mom “knows her more than anyone.” However, only 31.3 percent of surveyed youth indicated that they feel more comfortable voicing their concerns in the presence of a biological family member. Youth who entered care later in their lives felt less comfortable advocating in the presence of a biological family member than youth who entered care youth, r(11)=.63, p=.020.

DCF engages in activities to help youth maintain connections with their biological families, but many youths do not maintain regular visitation with their biological parents and siblings. To encourage the maintenance of these relationships, the Connecticut General Assembly passed a 2019 bill mandating that DCF must share the Sibling Bill of Rights (as well as the Adolescents in Care Bill of Rights and Expectations) with adolescents annually. All DCF staff interviewed discussed that they review these bills of rights with youth in their care, but two mentioned these documents being “new.” This suggests that while DCF has been committed to helping youth maintain connections for years, it is only recently that some youth gained the knowledge they needed to advocate for this right.

Data provided by DCF indicates that although DCF has improved in facilitating parent visits between 2015 and 2019, less than half of youth ages 13-17 and just over 50 percent of Hispanic youth engage in what their case plans determine to be regular enough visits to maintain connections.

Figure 8.
Siblings can also be important allies for youth when engaging in self-advocacy, as siblings are often both friend and family member. Data provided by DCF indicates that between 2015 and 2019, DCF improved in facilitating youths’ visitation with siblings to maintain some of these powerful supportive relationships. However, many youth do not meet with their siblings regularly. In particular, youth between the ages of 13 and 17 are less likely to maintain consistent visitation with siblings, girls are less likely to maintain consistent visitation with siblings than boys are, and Hispanic children are less likely to maintain consistent visitation with siblings than white or Black children are.

**Figure 9.**

![Child-Sibling Visitation Goals Met by Age, Gender, Race, and Year](image)

Helping youth maintain these connections may result in improved outcomes for youth in DCF care. Data provided by the Juan F. Federal Court Monitor’s Office showed that when parents attend ACRs, youth are more likely to receive “very good” or “optimal” services to meet their identified behavioral health needs. This effect is statistically significant for biological mothers, $X^2(3, N=496)=6.10, p=.047$, biological fathers, $X^2(3, N=467)=6.52, p=.040$, and foster parents, $X^2(3, N=474)=8.01, p=.046$. While few ACR meetings had biological parents present (37.6 percent had mothers present and 20.5 percent had fathers present, see Figure 6), and fewer than three percent had youth and both biological parents in attendance at once, the involvement of youth as well as the involvement of family members seems to improve the likelihood that DCF will meet the needs of the youth, particularly behavioral health needs.
Male youth in DCF care may have additional challenges to creating the connections needed for engaging in self-advocacy.

Across data sets, we find that male children and youth may face cultural and systemic barriers to creating the relationships that support self-advocacy. Our survey data indicated that male respondents were less likely to agree that their social workers tried to address their problems than female respondents, r(14)=-.70, p=.003. The DCF staff we interviewed also noted these challenges. Two out of five interviewees brought up that boys in their care express feeling as if they have to take care of themselves and are reluctant to ask for resources from their foster families. Furthermore, boys are twice as likely as girls to live in congregate care placements, in which they have limited opportunities to form close relationships with parent figures. Congregate care placements are most common among youth ages 13 and above—the time when foster parents can be helpful as youth navigate transition planning for college or career and stepping into independent living.

Figure 10.

Figure 10. Percent of ACRs reviewed in which services provided and compliance with services to meet behavioral health needs were rated as “marginal,” “very good,” or “optimal.” Data provided by Juan F. Federal Court Monitor’s Office.
Theme 3: DCF has some wonderful tools for teaching and supporting youth self-advocacy, but these tools are not appropriate for all youth.

The SpeakUp booklet is important for helping youth understand what their rights are and who to call if they feel their rights have been violated.

Forty-seven percent of youth surveyed had heard of the SpeakUp book. Of the youth who had heard of the SpeakUp book, 100 percent indicated that the information in the book was useful. Youth also spoke about the SpeakUp book during focus group discussions. Youth who had heard of the book found it to be a valuable tool for advocating for their rights. Youth had stories of bringing up what they read in the book to social workers in order to gain access to services or visitation with family members. One youth said that the SpeakUp booklet was useful because it gave her important information and allowed her to advocate for herself by highlighting things she should have “according to the book.”

In some cases, youth had attempted to use the book but found that policies were outdated or that social workers did not honor the complaints they brought. These youth suggested that the book be updated. One stated “they need to change some of the information because I asked DCF and they say that’s not how it works.”

All five DCF staff we interviewed said that they review the book with adolescents in their care. Two of the staff said they have run out and want more because they cannot give the books to new adolescents coming into care for the first time. Another staff indicated that her unit keeps records of having reviewed the book with an adolescent so that if the youth changes units, that youth’s new social worker will know the youth has seen the book. One social worker said of the book, “All my kids have it. I don’t think foster parents like it, though.”
Youth Advisory Boards are also a valuable space for helping youth learn about advocacy, but they should not be the only place youth learn advocacy skills.

Of the youth we surveyed, half “agree” that they feel that what they say in YAB meetings is heard by workers and administrators in DCF, and an additional 25 percent “somewhat agreed.” Half of the youth we surveyed “agreed” or “somewhat agreed” that YABs have made positive changes to DCF.

Three out of five DCF staff indicated that YABs are an important place for youth to talk about what they need from their foster families, and two staff members talked about YABs being an important place for youth to connect with each other. Two out of five staff members, however, also mentioned that they do not think many social workers know what the YABs are and what they do.

While YABs are an extraordinarily valuable opportunity for youth in care, they do not meet the needs of every child. Two out of five DCF staff interviewed said that they do not perceive YABs to be a good match for all the youth in their care.

Additionally, YABs are not accessible to all youth. In many units, YAB coordinators struggle to recruit a “critical mass” so that at least a handful of youth attend every meeting. In some cases, the groups meet less regularly so that youth make more effort to attend when they happen. In other cases unit YABs may merge into a regional YAB so that more youth attend. This may cause transportation to become a problem for youth. Two out of five staff interviewed spoke at length about the challenges lack of transportation poses for youth interested in community activities. One staff member said, “It may take a youth an hour to get to the office to sit for an hour-and-a-half meeting. Sometimes it may make more sense to go to a different office that’s closer to where the youth live.”

It is especially important to support youth with special needs in learning self-advocacy tools.

Many children in DCF care require special supports due to behavioral health challenges, developmental disabilities, or learning disabilities. YABs are not always accommodating for youth with special needs. One DCF staff member interviewed indicated that YABs are good spaces for “high functioning” youth. Another staff member discussed the YAB in her unit specially creating spaces for children with Department of Developmental Services (DDS) involvement. One staff member discussed intentionally spending time with youth in care discussing what to expect when transitioning out of DCF care and into the care of DDS or the Department of Mental Health and Addiction Services (DMHAS). For youth transitioning into these programs, the staff member made sure youth understood who to call in the agencies for specific problems and how to reach them. This same staff member indicated that special needs, such as the ones discussed here, impact youths’ confidence and ability to advocate for themselves in foster family settings.

Data provided by the Juan F. Federal Court Monitor’s Office indicate that children with special education needs in DCF care are less likely to have their educational, health, and dental needs met than children without special needs in DCF care. Explicit instruction in self-advocacy and support while self-advocating is critical to helping these youth with high needs experience high qualities of life as both children and after aging out of care.
Theme 4: Youth in care face systemic barriers to receiving the tools and support they need to self-advocate.

Youth need additional resources to learn whom within the DCF system they should contact when they have problems.

Sixty-five percent of youth surveyed said that they “agree” or “somewhat agree” that they see ways for changes they want made in DCF to be heard and responded to. Some youth, however, “disagreed.” Twenty-nine percent of youth indicated that they did not know who to talk to if their social worker did not address their concerns.

During focus group discussions, youth said that in some cases, when social workers and foster families were not receptive to their advocacy, youth felt they had to escalate situations in order to be heard. Two youth told stories of repeatedly telling their social workers about problems they were having with their foster families. When their social workers did not address the issues, they felt they had to purposely cause trouble to get their workers to respond to their needs. These youth said that they wished they had not felt like they had to escalate their situations to be heard.

DCF staff recounted similar stories. One staff person stated that when youth struggle articulating their needs, it may manifest as self-injurious and/or acting out behaviors. Another staff member talked about their unit creating an Adolescent Services manual to help youth navigate the services and systems within DCF that they may need. One of these systems is that of the DCF ombudsman. Only two out of five staff interviewed talk to their youth about the ombudsman. Another staff person did not know what the ombudsman was or does. Multiple DCF staff suggested helping youth understand the office of the ombudsman and how to reach that office is an area where they could strengthen their practice.
Social workers are critical to supporting youth self-advocacy, but many social workers are unable to spend the time they need with youth in their care.

Of the youth surveyed, 52.9 percent “agreed” or “somewhat agreed” that they wanted more opportunities to speak with their social worker. For some, participation in YABs helps meet this need, as there was a negative correlation between youths’ desire to speak more with their social workers and the extent to which they felt heard during YAB meetings, r(14)=-.56, p=.024.

During focus group discussions, youth expressed a desire for social workers to have more time to build a relationship with them. One youth suggested that having social workers “drop in, say hi, and not always have it be about business” would allow youth the opportunity to build trust with workers so that they could feel confident confiding in them.

DCF staff agreed that they did not have enough time and resources to give appropriate care to the adolescents on their caseloads. A few staff discussed that adolescents often have higher levels of need than younger kids do; youth may battle issues of substance abuse, dating violence, and trafficking, and still other youth need lots of support to transition into college or job placements. These workers indicated that they believed adolescent workers should have smaller caseloads than other caseworkers. Another social worker mentioned having not only adolescents but also younger children on their caseload and said that switching between the various needs of different developmental levels was challenging. A different social worker mentioned that “streamlining” caseloads by grouping together youth by age and location would make it easier to spend time with youth outside of the monthly visit. This worker indicated that having three or four youth in the same group home would allow for doing activities with multiple youth at once.

Data provided by DCF indicates that over the past five years, DCF has made tremendous improvements ensuring that youth in care meet with their social workers at least monthly, and DCF has succeeded in closing harmful racial and ethnic disparities in which children of color were less likely to see their social worker every month than white children. These are important improvements to celebrate, however youth still desire more time to build trusting relationships with their social workers.

Figure 13.

Figure 13. Percent of children meeting with their social worker on a monthly basis disaggregated by race and year. Data provided through DCF data request.
Social worker stability greatly influences youth comfort with self-advocacy.

Survey data indicated that as the number of social workers a youth had during their time in care increased, youths’ comfort with self-advocacy decreased, r(14)=−.50, p=.049, and their sense of being supported while engaging in self-advocacy decreased, r(14)=−.58, p=.020. Youth who experienced more social worker turnover were also less likely to know who else to talk to if their social worker wasn’t addressing their concerns, r(14)=.63, p=.009.

All five DCF staff interviewed expressed that they are the first people youth turn to when they need something from their foster families. If youth do not know and trust their social worker, they may not feel like they have anyone to turn to when they have issues with their foster placements.

Foster placement stability also greatly impacts youth comfort with self-advocacy.

Surveyed youth who experienced a greater number of moves (6 or more) placed less importance on self-advocacy, t(14)=2.50, p=.026; they felt less supported by others when self-advocating, t(14)=2.40, p=.032, and they placed less value on advocating for others, t(13)=3.96, p=.006.

When youth have issues with their foster families, two out of five DCF staff interviewed indicated that they encourage going directly to these families to work out issues. However, three of five staff also indicated that youth might struggle discussing problems with their foster families because they fear creating animosity in their homes. One worker said, “Depending on the foster family, youth have to acclimate and assimilate to that family structure, or they may feel like they’re jeopardizing their longevity in that home.”

Although DCF makes efforts to keep youth in stable foster homes, DCF youth—particularly youth who enter care in adolescence—move around a lot. Data provided by DCF indicates that the rate at which youth move has had a slight uptick in 2019, and across time, Hispanic youth seem to experience more placement changes than other racial and ethnic groups. This is notable, especially in light of Hispanic youth being less likely to have regular visits with parents and siblings (see earlier analyses).

Figure 14.
Trainings that help DCF staff and foster parents learn about teaching and supporting adolescent self-advocacy are not readily accessible.

By the time youth in care reach their teenage years, youth may have experienced multiple placement changes. One DCF staff member we interviewed discussed how teenagers already have a high level of developmental needs—based on the rapid hormonal development they go through and period of transitioning toward adult live—and that compounds with the trauma from moving placements. The staff member suggested that foster parents should receive intensive training specific to adolescents in care before bringing a teenager into their home.

Interviewed staff also discussed training needs for adolescent social workers. While adolescent social workers receive a five-day training on caring for youth in this age group, not all social workers or social work supervisors who work with adolescents have received this training. Another DCF staff member discussed the need for additional trainings in adolescent programs such as CHEER and Work-to-Learn so that caseworkers can help youth navigate which services and programs are best for them.
RECOMMENDATIONS

The recommendations listed below are broken into two sections. The first section is a set of recommendations to Connecticut’s Department of Children and Families. These recommendations include changes to administration policy, DCF programs, and employment practices and trainings. The second section deals with recommendations for changes in state law and requests for state funding; these are directed towards the Connecticut General Assembly.

Within each section, the recommendations are further broken down into tiers by how long we believe it would take to implement them. “Short-term” recommendations are changes that can occur within a year. “Medium-term” refers to recommendations that may take one to three years to manifest. Those that may take four to five years are deemed “long-term”.

Administrative

In our recommendations to Connecticut’s DCF, we focus on the following areas:

**DCF Youth Advisory Boards**

The DCF Youth Advisory Boards have played a substantial role in amplifying the voices of youth in care. YABs allow youth to take a more involved role in their care and planning, which leads to better outcomes. To promote self-advocacy among youth in care, strong and regular YABs should be supported, encouraged and promoted by DCF.

**Administrative Case Reviews**

ACR meetings are important opportunities for youth to evaluate their time in care and advocate for what they need going forward. Being a part of an ACR gives youth in care power to engage with their own narrative while developing the skills to determine their own best outcomes. Youth presence in their ACR meetings increases the likelihood that their needs are met, improving their long-term outcomes. Youth attendance should be central to the ACR process.

**Child and Family Permanency Teaming**

Permanency teaming is an important process for organizing support systems behind youth in care so that they can achieve permanency. Identifying and developing reliable relationships and support systems increases the avenues available for youth in care to successfully advocate and be supported in advocating for their needs.

**Social Workers**

For many youth in care, the social worker is the face of DCF. A social worker’s presence is most often a sign that a youth’s life is going to change. A lot of the burden of helping youth navigate and understand these changes fall on the shoulders of social workers. They are one of the first points of contact between youth and DCF, and the part of DCF that youth in care will usually engage with most often. A successful relationship between social workers and youth is important to the success of youth in care. If a youth has a problem, the first person they are told to call is their social worker. When youth change workers too often, our survey suggests that youth confidence in their ability to advocate and have their needs met decreases. It is important that DCF social workers have the time and resources to fully support the youth under their care.
For the reasons listed above, for the purpose of strengthening youth voice and youth self-advocacy in DCF, we recommend:

**Short-Term**

**DCF promotes awareness of YABs throughout the department.** Many youth that participated in our surveys and focus groups reported that despite having been in care for months, and even years, they had not heard of the YAB until recently, and were attending their first meeting. Anecdotes from the youth have suggested that some social workers are not fully aware of the YAB or its function. Further anecdotes from some social workers suggest that there are those within DCF who are unaware of the YAB and its functions, which in turn could also explain the lack of support for coordinators.

There are already a few regional practices within DCF that, if standardized, could greatly improve awareness of YABs. One social worker interviewed reported that in their region, new social workers are required to attend a YAB meeting to better familiarize them with the program. Another social worker reports that in addition to receiving information on the Youth Bill of Rights, youth in care are also provided with a booklet of adolescent services that talks about the YAB and its purpose.

The Department of Children and Families is working to build awareness of YABs by highlighting their work in a monthly newsletter all staff and external stakeholders receive, but ongoing hiring of new staff requires ongoing awareness efforts. High employee attrition is a national problem within the child welfare workforce, and DCF is no exception.

**DCF utilizes technology to facilitate youth and trusted others attending ACR meetings.** In cases where transportation is an issue for youth, parents, lawyers, or other people youth trust and want to include in the ACR meetings, DCF should try to utilize an online conferencing program such as Skype, FaceTime, or Zoom to help all interested parties participate.

**DCF offers to schedule meetings in a location accessible to youth.** Scheduling ACR meetings at a youth’s school may help ensure that youth are able to get to the meeting. Some youth are sensitive to others knowing that they have DCF involvement, so this option should be exercised only with youth consent. Other options might include scheduling ACR meetings at a location within a youth’s community such as the public library or a Youth Service Bureau building.

**Medium-Term**

**DCF lessens the workload of YAB coordinators.** Organizing the YABs is important work. The task of organizing space, youth, food, activities, and all the other pieces that make YABs successful is a job unto itself. If the YABs are to be spaces where youth voice can be uplifted and amplified, DCF needs to give the coordinators time, space, and resources for success. YABs can only improve when coordinators are not expected to organize meetings in addition to full social worker caseloads.
DCF ensures that local YABs meet monthly. When coordinators have appropriate time, financial, and partnership resources to devote to planning YAB meetings, YAB meetings should occur monthly rather than regularly. Indicating that YABs need to meet every month will ensure that youth have frequent and regular time to build trust with YAB coordinators and each other, which is needed to support youth self-advocacy.

DCF improves transportation for youth to and from YAB meetings. With DCF youth located throughout the state, coordinating regional YAB meetings can prove challenging. Many youth who come to YAB meetings rely on their social workers or DCF provided bus passes for transportation. Transportation is further complicated when some YABs partner with other regional YABs for meetings, unfortunately placing these meetings out of reach for some youth. For those youth without a license, car, or readily available social worker who can drive them to meetings, transportation can be a huge barrier to participation. A more reliable system of getting to and from YAB meetings will aid youth already participating and bring in voices who have been unable to participate in the past. Once DCF rolls out the Central Transportation Unit, created through the fiscal year 2020-2021 budget, the automated logistical software should help smooth numerous problems coordinating rides for youth. For older adolescents, programs like the Keys to Independence (K2I) adopted in Florida are tackling problems of transportation by aiding youth and caregivers with the cost of gaining a driver’s license and associated costs and liabilities such as auto insurance.

Partnering with community-based organizations can help shoulder some of the work that is being done by DCF YAB coordinators. Our Piece of the Pie (OPP) is a good example of a community organization that provides educational and youth services while also participating in the organization of local YABs. Partnering with organizations like OPP can help DCF coordinate services for youth in care while also relieving some of the work that goes into making YABs successful.

DCF develops a course to teach youth how to advocate in their ACR meetings with a focus on giving youth progressive control over leading and reporting in their case planning. As established in our literature review, there are methods of teaching self-advocacy to youth developed by advocates for children and young adults with disabilities. Individualized Education Plans (IEPs) are similar to ACR meetings in that they are meetings between youth, family, and other supports with the goals of identifying youth and family needs, and creating goals to have those needs met. The PACER Center, an organization that advocates for youth with disabilities, suggests that role-playing IEP meetings can help better prepare youth for handling unexpected and uncomfortable situations that may arise. PACER also suggests that some of the best ways to involve youth in their meetings include having youth leading meetings, developing goal areas, and reviewing what the team has agreed upon during meetings.

Tools like the Make Youth Voice Count worksheet used in Maine’s Office of Child and Family Services already aim to help youth organize and articulate their goals for their case plans. The tool emphasizes youth identifying their supports and their strengths, and places positives about youth as the focus of their narratives. Adopting use of a proactive planning tool for youth will help youth identify their strengths, needs, and goals; participate meaningfully in the ACR by sharing this content; and center ACR conversations around building on youths’ strengths.

Developing a video to help teach youth skills to self-advocate in ACR and teaming meetings or a strengths and goals inventory youth fill out with their social worker prior to meetings may be a project of interest to the YABs. DCF should, however, work to ensure that tools created are accessible to youth with special needs or to create other tools appropriate for these youth.
DCF develops or adopts a tool similar to the Permanency Pact used by the state of Colorado. The Permanency pact helps youth identify supportive adults and work together with those adults to cover the youth’s areas of need. Not only does this tool help develop the youth’s ability to identify their needs and advocacy skills; in best case scenarios this tool helps develop long term and possible permanent vital supports for youth.

DCF ensures that youth and trusted others can attend permanency teaming meetings. Just as youth, parents, and lawyers struggle to attend ACR meetings when they are scheduled during the daytime, they also struggle to attend permanency teaming meetings during this time. While DCF’s permanency teaming policy creates a successful structure for supporting youth in advocating for their permanency needs, it only works if all members of a youth’s team are consistently present.

DCF creates accessible standardized trainings for social workers regarding topics like the SpeakUp handbook, YABs, youth rights, and other youth advocacy tools. As important as it is for youth to be empowered to advocate for themselves and their needs, it is equally important that these attempts at advocacy are met with the appropriate responses. In our focus groups, youth have reported times when they have attempted to use the advocacy tools available, only to be told that the tools were not available or to learn that social workers were unaware of the tools available. Some social workers that were interviewed supported the idea of training in these areas but said that only holding trainings in the central DCF office can make them inaccessible. DCF can alleviate the problem by hosting youth advocacy training in regional offices, or creating webinars that can be accessed by social workers wherever they are located. It is important that social workers have the tools available to them to aid youth in care in their self-advocacy.

DCF consider how the average social worker, ACR reviewer, Child Protection Service lawyer, and foster parent is trained to support youth self-advocacy and whether policies and best practices are being used. Some youth we talked to mentioned trying to self-advocate by using the tools in the SpeakUp manual and feeling shut down by the adults in their lives. It is important for all of the people DCF entrusts to care for youth—not just adolescent social workers—to have a basic understanding of the importance of supporting youth self-advocacy and tools to support youth. Although it was beyond the scope of this paper to examine training curriculum for adults working with youth in various capacities, it is important that training materials include information on how each adult can teach and support youth self-advocacy within their roles. When training curriculum include this information, it is also important to hold adults accountable to utilizing these best practices.

DCF creates a Youth Ombudsman position. The DCF Ombudsman’s Office provides assistance to biological parents, foster parents, adoptive parents, service providers, youth, and other citizens to help solve disputes with the Department. Reasons for calling the office range from concerns about case managers to licensing issues to requests for services. In comparison, concerns of youth span issues such as being able to purchase clothing, practice the cultural and religious customs of their communities, finding housing when they do not feel comfortable living with a foster family, and other issues related to living arrangements, rights, fair treatment, and resources. Having a Youth Ombudsman, similar to one within Washington D.C.’s Child and Family Services Agency, will help ensure that older youth are able to talk with someone who understands not only DCF systems and processes but also the developmental needs specific to teenagers and young adults.
Medium-Term

**DCF utilizes a Universal Design for Accessibility framework to ensure all youth have self-advocacy tools and opportunities.** Universal Design for Accessibility is a framework that works to ensure that the “design of products and environments are useable by all people, to the greatest extent possible.” As DCF creates tools for youth and restructures internal processes like ACR and permanency teaming meetings, DCF should build in scaffolding so that youth with learning disabilities, developmental delays, and behavioral health needs experience meaningful learning, engagement, and self-advocacy when engaging with these processes. Considering whether a particular process is accessible for all youth can dramatically impact the way that administrators design processes to be streamlined, inclusive, and transparent. While centering youth with different abilities in thinking through processes and practices helps ensure that these youths’ needs are met, in practice applying a universal design framework often benefits all individuals involved by creating systems that truly strip away unnecessary limitations.

**DCF ensures Adolescent Specialists are mandatory for every region.** Social workers that were interviewed discussed the ways in which working with adolescents come with unique challenges and require greater amounts of time and commitment. The intensity of adolescent cases is felt not to be supported by DCF. Some regions have reportedly done away with Adolescent Specialist programs altogether. In order to ensure that the unique needs of adolescents in DCF care are being met, and that social workers are adequately trained and prepared, every DCF region should have an adequate amount of Adolescent Specialists. DCF has indicated to Connecticut Voices for Children that they are working to utilize a past model where adolescent specialists serving youth aged 14 through 23 no longer have mixed caseloads. This is an exciting, important, and challenging change. Given Juan F. mandates on maximum caseload size, DCF will need time and resources to ensure that they have enough staff throughout every region to meet both required caseload sizes and streamlined adolescent specialist caseloads.

**Judicial and Executive**

There are ways that Connecticut’s court system can strengthen the ways in which youth learn and practice self-advocacy within Child Protective Services (CPS) hearings. Additionally, other systems--such as education and healthcare--are important places for youth to learn and practice self-advocacy. While these systems often operate independently, they have an intertwined impact on youth.

**Short-Term**

**The Leaders of DCF, the Courts, the State Department of Education, the Department of Social Services, and other child-serving agencies should come together to discuss youth self-advocacy.** An adolescent in DCF care interacts with and is impacted by many systems--the child welfare system, the court system, the education system, the healthcare system, and for some youth the system serving individuals with disabilities. Each of these systems have their own policies and procedures youth must navigate. In some instances, these systems have overlapping procedures such as transition planning for youth exiting DCF care and transition planning for special education students graduating from high school. Each system has critical spaces where youth’s voices can be heard and responded to, ignored, or shut down. It is important for these agencies to open a dialogue of how they can better coordinate their work to ensure that youth learn the skills they need to advocate for themselves and have meaningful opportunities to utilize and build upon these skills. Hopefully, these discussions will lead to creating cross-trainings to spread best practices and tighten similar planning processes.
Medium-Term

The Judicial Branch collect and report data on youth attendance in CPS hearings. Currently, the courts do not collect and report data on youth attendance at CPS hearings. This data would help illuminate which courts need additional support making hearings a positive experience for youth.

The Judicial Branch work to ensure that youth have been invited to hearings and that youth voice is meaningfully integrated into hearings. The Connecticut Court Practice Book currently requires that the court consult youth in child welfare hearings. These hearings are a place where decisions are made that have a significant effect on the future of the child, including, but not limited to placement and family reunification. Because of their impact, courts should prioritize checking that youth are informed of being invited to these hearings and that the timing and transportation allow youth to attend.

Legislative

In addition to the aforementioned DCF administrative policy changes, there are ways in which the State of Connecticut can support the department and reinforce the idea that youth advocacy and input are a necessary part of DCF work. To fortify DCF policy and uphold the importance of developing youth advocacy, we recommend:

Short-Term

The Connecticut General Assembly passes a bill that requires social workers to review the SpeakUp manual and an adolescent services manual with youth when they receive the Youth Bill of Rights. In the past, the CGA has done great work supporting the implementation of the Adolescents in Care Bill of Rights and Expectations and the Sibling Bill of Rights. It is important that youth in care not only know their rights but are also taught how to take action when they feel their rights are being violated. It is already mandatory that social workers review these two bills of rights with youth when they enter care. We believe that it should also be mandatory that youth and social workers discuss the more concrete ways in which youth rights can be protected and youth voice best utilized by reviewing the SpeakUp manual with youth in care and documenting this within DCF’s LINK system. For youth with cognitive disabilities, verbal delays, or language barriers, the Center for Children’s Advocacy has also recorded videos social workers can watch and discuss with youth.

In the back of the SpeakUp manual, social workers should help youth fill out the “Important Contacts” page that helps youth understand how to reach their social worker, their social worker’s supervisor, the DCF program manager, their lawyer, their doctor, their counselor, and other numbers that aid youth in receiving advocacy assistance. Additionally, the practice of having an Adolescent Services manual to help adolescents understand service offerings in their region should be expanded to all units and provided to youth.

Medium-Term

The Connecticut General Assembly passes a bill making it mandatory that adolescent youth ACR and permanency teaming meetings occur outside of work and school hours. Although Administrative Case Review (ACR) meetings may be easy to view as “just another requirement” for social workers who are juggling high caseloads and lots of paperwork, in reality they are important moments in which adolescent youth have the chance to set their own goals and advocate that their needs be met. In a sense, ACRs and permanency team meetings are the core of child welfare work.
A large part of the lives of youth in care are determined during these meetings, so it is troubling that the majority of them do not attend their ACR due to scheduling conflicts. When ACRs are usually scheduled in the mornings, during work/ school hours, youth are left to decide between missing valuable school time, missing time to participate in an enjoyed extracurricular activity, or missing a valuable opportunity to advocate for themselves. The timing also makes it difficult for lawyers, parents, and caregivers to attend the meetings as well, leaving only social workers as the table making decisions. Furthermore, youth have expressed that they have been discouraged from attending ACR meetings during school hours due to apprehensions of youth missing school.

Ideally ACR meetings and permanency teaming meetings for youth aged 12 and older should be scheduled in the evening so that youth will not need to miss school or extracurricular activities, and parents will not need to take time off work. Minimally, DCF should schedule ACR meetings and permanency teaming meetings for youth aged 14 and older between 2:30 pm and 5:30 pm so that youth can participate after school.

The Connecticut General Assembly passes a bill to ensure that youth that are over 18 years of age and still in DCF have legal representation. Youth in care between the ages of 18-23 can apply to remain in care through education, vocational, and housing services. As youth strive to safely and successfully transition from care to independent living, legal representation plays a large part in ensuring that youth’s needs are met.

Passing policy to bolster DCF practices and making administration changes in DCF could greatly improve outcomes for youth in care, but some of the recommended changes require additional funding for the Department. In order to support social workers, youth in care, and the programs and tools dedicated to self-advocacy, we recommend the CGA appropriate monies to:

The Connecticut General Assembly fund overtime for social workers so that ACR meetings can take place after school and work hours. As mentioned before, planning and review meetings result in better outcomes for youth when the youth is present and engaged. Having ACR meetings that happen outside of school and work hours would sometimes require social workers to work beyond normal hours.

The Connecticut General Assembly increase funding to the Office of the Chief Public Defender so lawyers can continue to work with young adults in DCF care. Youth who are pursuing educational or employment opportunities are eligible to remain in DCF care past the age of 18. These youth may struggle with ensuring that their rights are met in higher education settings, in labor settings, and in housing settings. Lawyers can continue to play a critical role in helping young adults in extended care meet stability and well-being goals. However, this will not happen without additional funding to support extended Public Defender client loads.
FURTHER RESEARCH

Limitations

This study utilizes a mixed methodology of collecting data to provide convergent validity to our findings, however, each methodology contains limitations that warrant care in interpreting results.

The first limitation of our survey and qualitative data is that we had small sample sizes. Within our youth sample, the small sample size limited the power we had to detect statistically significant relationships. Within our DCF staff sample, the limited sample size meant that we were limited in making conclusions about themes unless we saw themes that were consistent with youth data or quantitative data as well.

The second limitation of our survey and qualitative data is that we used a non-random method of recruiting participants. Recruiting youth participants from YABs means that the youth voices represented within this paper are more likely to be those of high-functioning youth, less introverted youth, and youth who are more interested in advocacy and systems change. Many youths in DCF care have special behavioral health, developmental, and/or learning needs. Others may be shy or have limited verbal skills. While the voices of these youth are not represented in our survey sample, their needs must be included within any policy recommendations to support the self-advocacy of youth in DCF care.

Recruiting DCF staff participants by leveraging pre-existing relationships means that the staff voices represented in this paper are staff who are more likely to have a background serving adolescents through having adolescent training, participating in YABs, or having many adolescents on their caseload. While this provides a great deal of information regarding best practices for serving adolescents in care, we do not have a baseline understanding of how “most” DCF social workers and staff interact with adolescents on their caseloads.

The data we collected through DCF and the Juan F. Federal Court Monitor’s Office allowed us to review youth, biological family, foster family, and lawyer participation in ACR meetings, but DCF holds other meetings (such as permanency planning meetings and transition planning meetings) during which youth can practice self-advocacy. Although this report does not include data regarding youth participation in those meetings, they are an important piece of the spectrum of opportunities youth have to advocate for their interests and needs. Additionally, DCF runs other programs youth may participate in (such as life-skills curriculum and the Wilderness School leadership development program) that have opportunities to incorporate youth self-advocacy instruction and support.

The data we collected also allowed us to examine five years of trends, but it does not allow us to make any longitudinal conclusions about youth outcomes after leaving care. Much of the self-advocacy literature displays that stronger self-advocacy skills contribute to youth becoming more successful and self-actualized adults, however our research cannot demonstrate this. It would be worthwhile to merge data such as the data we present about engagement in opportunities to self-advocate and datasets that track outcomes after youth exit care, such as data from the National Youth in Transition database or the Jim Casey Youth Opportunities Passport database.

Finally, this report includes a close review of DCF’s policy and practice guides, but it does not include an in-depth review of DCF’s training materials for social workers and foster parents. These are important places to teach staff and foster parents how to explicitly instruct youth in self-advocacy, support youth practicing self-advocacy, and scaffold youth’s responsibility for advocating for themselves.
This research represents a deep-dive into the ways in which DCF teaches and supports youth self-advocacy, but youth in the child welfare system interact with many different public systems, all of which present opportunities to teach and support youth self-advocacy. The court system and the public school system are two especially important systems where youth can learn to advocate for their needs.

While all youth in DCF have a lawyer, this report does provide extensive information regarding how youth connect with the lawyers and communicate with their lawyers. Other important questions to investigate include:

- How many youths are present during their child protective services hearings?
- What are the policies and practices around youth being involved in child protective services hearings?
- How does lawyer compensation influence the amount and quality of time lawyers spend with youth they represent?
- How often are lawyers supposed to meet with the youth they represent? How are these meetings documented?
- What other barriers prevent lawyers from more frequently meeting with youth they represent?

Numerous youth in DCF care have educational and emotional needs and may receive additional services to meet these needs from their schools. Important questions to investigate include:

- How often do social workers connect with special education case managers, school guidance counselors, and college and career advisors?
- How are IEP goals integrated into ACR goals and vice versa?
- How are education transition plans and child welfare transition plans coordinated?
- Do schools offer a curriculum for youth to learn and practice self-advocacy skills?
- Do schools offer structures to help youth in foster care connect with other youth in care?

Additionally, our data showed some patterns indicating that boys in DCF care may have different opportunities and experiences than girls in DCF care. Particularly for adolescent males, we are interested in learning about the ways in which DCF helps young men develop close interpersonal relationships that allow them to ask for and receive help meeting their needs.

Our data also indicated that Hispanic children in DCF care experience more placement changes and fewer visits with their siblings and biological parents than Black children, white children, and children belonging to other racial and ethnic categories. Our data does not begin to explain why these disparities exist, but they are important to flag for workers, administrators, policymakers, and researchers.

We mention throughout our report that youth in DCF care with special needs and youth in DCF care who are more introverted may not be able to access all of DCF’s resources that help youth learn self-advocacy. This report speaks to the importance of teaching these youth self-advocacy skills, but it does not provide detailed research into programs and structures that may better serve these youth. In the recommendations that follow to help improve policies and practices for teaching and supporting youth self-advocacy, we encourage policymakers and practitioners to consider how they can make changes accessible for youth with language and verbal barriers to communicating as well as youth with developmental disabilities or behavioral health challenges. In some cases, it may mean creating tools that utilize different methods by which youth in care can learn about their rights and communicate their strengths, needs, and goals.
CONCLUSION

This report covers promising trends and areas for improvement in DCF’s support of youth self-advocacy. Currently, Connecticut’s youth in care regard self-advocacy as important and have tools in place to support their advocacy. Connecticut’s Department of Children and Families has done an admirable job crafting policies that center youth voice in case review meetings, permanency teaming, and transition planning as well as supporting the Youth Advisory Boards that provide a space for youth to connect with each other, learn advocacy tools, and work together to improve DCF’s policies and practices. Yet, more can be done to cultivate strong self-advocacy skills for youth in DCF care. We recommend administrative changes within DCF, legislative changes to ensure youth are given information on how to advocate for their rights and who can help them, and funding changes that allow DCF to hold case reviews and permanency team meetings at times when youth and families can participate; these changes will further support youth in developing self-advocacy skills. By establishing strong self-advocacy skills, Connecticut’s youth in care will be better prepared to address the challenges of being in care and have more confidence to strive towards their goals for the future.

ACKNOWLEDGEMENTS

This project would not have been possible without the contribution of many partners, all of whom do this work to help ensure that Connecticut’s children and youth have the opportunities they deserve to thrive.

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

We would like to thank numerous individuals within the Department of Children and Families:

- Commissioner Dorantes for believing in the importance of youth advocacy and supporting this project from beginning to end.
- Vincent Russo for shepherding our questions and helping us navigate department processes, and Diane Fasano for facilitating communication.
- Lynette Warner for helping our team prepare our Institutional Review Board (IRB) research application, and Lynette Warner, Fred North, and Weihai Zhan for finding and providing data to speak to our questions surrounding youth advocacy.
- The DCF team that reviewed our paper and provided feedback--Commissioner Dorantes, Jodi Hill-Lilly, Maureen Duggan, Linda Dixon, Vincent Russo, Treena Mazzotta, and the External Affairs Division.
- The extraordinary work of the Youth Advisory Board coordinators, and we thank them for opening their doors to our team.
- Steven Smith, the Statewide YAB Coordinator, for facilitating our efforts to connect with YABs and collect information from youth.

We thank Martha Stone and Stacy Schleif from the Center for Children’s Advocacy and Sarah Eagan from the Office of the Child Advocate for contributing their child welfare policy and practice expertise to make this paper more robust and thorough. We thank Judge Bernadette Conway from the Judicial Branch and Susan Hamilton from the Office of the Chief Public Defender for contributing their juvenile court and representation expertise.

We thank the DCF Federal Court Monitor’s Office--Raymond Mancuso, Joni Beth Roderick, and Mary Corcoran for providing data for the research and reviewing the paper for accuracy.

Lastly, we’d like to highlight the generosity of time and wisdom shared by the youth and DCF staff who volunteered to participate in this research project so that future youth in care will have more tools and opportunities to advocate for their needs and goals. Thank you for allowing us to ask questions about trust, relationships, frustrations, goals, and needs. Your openness, honesty, and authenticity is what makes this research special and powerful.
APPENDIX A

METHODOLOGY

This report integrates data from four different methodologies to create a robust understanding of how youth in DCF care learn tools for self-advocacy, receive support for self-advocacy, and systemic barriers to youth engagement in self-advocacy. These methodologies include surveys, focus groups, interviews, and analyses of quantitative public data. The methods and tools used to collect these data were approved by DCF’s Institutional Review Board.

Survey data collection methodology

Connecticut Voices for Children attended three regional YAB meetings to meet with youth in care, administer a survey, and conduct focus groups to discuss youths’ experiences with self-advocacy in DCF. We contacted every regional YAB across the state and conducted research within the YABs that held meetings in late October and early November of 2019. Overall, Connecticut Voices staff spoke to 17 youth with DCF involvement across the state of Connecticut. The sample is limited to youth who choose to attend YAB meetings and consented to take part in the survey.

The survey questions were informed by literature on self-advocacy and conversations with youth that took place at the Commissioner’s YAB in the spring and summer of 2019 and at the YAB’s Leaders in Training Summit. The survey questions were designed to understand youths’ opinions on the importance of self-advocacy, when and how they felt that they were most supported in self-advocacy, and their understanding of tools such as the Speak Up handbook. The majority of the survey questions presented a statement such as “I am comfortable advocating for my needs,” with a Likert scale ranging from 1 to 5 that allowed the youth to circle “Disagree,” “Somewhat Disagree,” “Neutral,” “Somewhat Agree,” or “Agree.” A few questions such as “I have heard of the Speak Up booklet” allowed the youth to answer “Yes” or “No.” The survey also asked youth to record basic demographic information including age of entry into care, current age, school placement, and race/ethnicity as well as information on their experiences in care such as the number of social workers and foster placements they had. For a full list of survey questions, see Appendix B.

Focus group data collection methodology

The focus group discussions occurred after the youth had completed the survey. The focus group questions were designed to provide context to the survey answers, covered similar topics, and allowed youth to tell stories, elaborate on their ideas, and provide suggestions for policy and practice changes.

We followed a semi-structured interview format in which we followed a list of questions (Appendix C) but asked follow-up questions as-needed. Follow-up questions allowed youth a chance to provide more information on their stories and experiences as well as to clarify our understanding. The questions often provoked back-and-forth dialogues, which we allowed to unroll naturally as long as the discussion stayed related to the topic of self-advocacy. When discussions moved off track, we directed youth back to the questions.

We took handwritten notes during the discussion to capture quotes and content. In instances where youth told stories that could be identifying or contained sensitive information, we did not take notes that contained details that could identify the youth.
DCF staff interview data collection methodology

To better understand the nuances of DCF practice and systemic barriers to teaching and supporting the self-advocacy of youth in care, we conducted interviews with DCF social workers and social work supervisors who have adolescents in their caseloads. We selected staff participants using a snowball sampling method in which we e-mailed DCF staff that have worked with Connecticut Voices for Children in the past. We asked these staff members if they were interested in participating in an interview about teaching and supporting self-advocacy for youth in care. We also requested that they circulate our email to other staff who may be interested. Overall, we interviewed five social workers and social work supervisors. All five interviewees had some past or present involvement with YABs.

We utilized an interview schedule (Appendix D) in which we asked each staff participant the same questions in a predetermined order. During this time, we typed notes to be as close to a transcript as possible. To ensure that notes were accurate, we asked interviewees to wait as we typed notes before we continued to the next question. Although we encouraged participants not to answer a question if it made them uncomfortable, all five participants answered every question.

Quantitative data collection methodology

We collected quantitative data from three sources. First, we completed a request for data with Connecticut DCF. Where possible, we requested longitudinal data from the past five years (2014-2019), disaggregated by child race/ethnicity, age grouping, and gender. Second, we completed a request for data with the Connecticut Juan F. Federal Court Monitor’s Office. All data provided by the Court Monitor’s Office is data that is regularly--but not always--provided within quarterly public Juan F. reports. Third, we accessed data through the Connecticut Open Data Portal. Throughout this paper, we identify which data is retrieved from which public source.

Survey analysis methodology

We entered anonymous survey data into SPSS statistical software for analysis. Most of our descriptive questions required numerical answers, however race, gender, educational program, number of foster care placements, and YAB attendance required categorical or ordinal answers. For these questions, we coded data to appropriately group and order the answers. See Appendix E for coding.

Other survey questions asked youth to answer their perceptions on a scale of “disagree,” “somewhat disagree,” “neutral,” “somewhat agree,” and “agree.” We coded disagree answers as 1, neutral as 3, and agree as 5. For survey questions that asked youth to answer “yes” or “no,” we coded yes answers as 1 and no answers as 0.

We analyzed data primarily using descriptive statistics, percentages, and Pearson’s correlation methods. See Appendix F for descriptive statistics of youths’ answers to each survey question. For the question “How many foster care placements can you remember having?” we performed a median split (0-5, 6 and over) to analyze the data because a number of youth indicated having had “more than 10” placements. We utilized an independent samples t-test to analyze differences related to this question.
Focus group analysis methodology

We used the thematic content analysis method to analyze the qualitative data collected from the youth focus groups. For each focus group, we identified sections of the youth’s answers that could inform us of their experience and perception of youth advocacy. We then analyzed the responses to each question across focus groups, determining which themes were the most salient based on their frequency. The themes identified in the focus group data were then compared to those identified in the analysis of the survey data, social worker interviews, and quantitative data.

DCF staff interview analysis methodology

We utilized thematic content analysis methods to analyze the interview data we collected from social workers and social work supervisors. Given the small sample size (N=5) and non-random sampling methods, this data is best interpreted as a piece to contextualize youth data and quantitative data. Within each question, we searched for themes with broader patterns of meaning, counted the number of interviewees who answered within a particular theme, and then compared the themes that emerged with themes that emerged from youth data and quantitative data to verify that the themes fit the broader data set. We use the themes we pulled from these qualitative analyses to guide the discussion of results.

Quantitative data analysis methodology

Because the data provided by DCF through data request represents the entirety of youth in care, we present the data trends without further tests of statistical significance. Data provided by the Juan F. Federal Court monitor represents a sub-sample of youth in DCF care (those whose cases are randomly chosen for an in-depth review on a quarterly basis), so we utilized chi-square analyses to determine which differences are unlikely to be due to chance.
APPENDIX B

YOUTH SURVEY

How old were you when you entered foster care? ________________________________

How old are you currently?_________________________________________________

Circle one or more:

What is your race or ethnicity?
- Asian or Pacific Islander
- Black
- Hispanic/Latino
- Native American or Native Alaskan
- White
- 2 or more

What is your gender?
- Male
- Female
- Non-binary
- Transgender
- Gender identity not listed

What kind of educational program do you attend?
- High school
- Vocational program
- Work-to-learn program
- 2-year college
- 4-year college

How many foster care placements can you remember having?
- 1
- 2
- 3
- 4
- 5
- 6 - 10
- more than 10

How many social workers can you remember having?
- 1
- 2
- 3
- 4
- 5
- more than 5

How many YAB meetings have you gone to?
This is my first meeting.
This is my second meeting.
I’ve come to a handful of meetings or events.
I’ve been involved in the YAB for a while.
It is important to me that I am able to advocate for my needs.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree

I am comfortable advocating for my needs.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree

I appreciate having support from someone I trust as I advocate for my needs and voice my concerns.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree

I feel supported when I voice my concerns and advocate for my needs.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree

I feel comfortable advocating for my own needs.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree

I would feel more comfortable voicing a concern or advocating for something with another person than alone.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree

I feel more comfortable voicing my concerns when I am with a biological family member.

Yes  No

I feel more comfortable voicing my concerns when I am with my social worker.

Yes  No

I feel more comfortable voicing my concerns when I am with a friend.

Yes  No

I feel more comfortable voicing my concerns when I am with my lawyer.

Yes  No

I feel more comfortable voicing my concerns when I am with a trusted adult.

Yes  No

I think it’s important to advocate for changes that could improve the lives of others.

Agree  Somewhat  Agree  Neutral  Somewhat Disagree  Disagree
If a tell my social worker about a problem I am having he or she works to address it.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I feel like my social worker listens to my concerns and complaints.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I wish there were more ways or opportunities for me to speak with my social worker.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I wish there were more ways or opportunities for me to speak with DCF administrators.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I wish there were more ways or opportunities for me to speak with Connecticut legislators.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I have heard of the Speak Up booklet.

Yes No

I have read some or all of the Speak Up booklet.

Yes No

I have found the information in the Speak Up booklet useful.

Yes No

I feel like what I say in YAB meetings is heard by workers and administrators in DCF.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I feel like the YAB has made positive changes to DCF.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I have ideas about changes I would like to see in DCF.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree

I see a way for the changes I would like to be made in DCF to be heard and responded to.

Agree Somewhat Agree Neutral Somewhat Disagree Disagree
APPENDIX C
YOUTH FOCUS GROUP QUESTIONS

1. How familiar are you with the YAB?
2. What does self-advocacy mean to you?
3. Do you think it is important to be able to advocate for yourself?
4. Have you attempted to advocate for your own needs with your foster family or social worker?
   a. What did you advocate for?
   b. What happened?
5. Do you feel supported advocating for your needs?
   a. How do these people support you?
7. What type of support do you wish you had?
8. How familiar are you with the self-advocacy tools available to you, like the Speak Up handbook?
   a. If you have used the Speak up handbook, how have you used it?
   b. What were the results?
9. What are some useful tools you wish you had, but don’t see available?
10. If you feel your social worker isn’t addressing your concerns or complaints, what do you do?
11. Do you have ideas for changes you would like to see in DCF?
APPENDIX D

DCF STAFF INTERVIEW QUESTIONS

1. How do you see youths in your care articulate what they need from their foster families?
2. How do you see youths in your care struggle in articulating what they need from their foster families?
3. Do you find youths in your care are able to articulate changes they’d like to see from DCF?
4. How do you teach youths in foster care the tools they can use to advocate for themselves during case planning?
5. When a youth contacts you with a problem concerning their foster family, what is your process to address the situation?
6. Do you feel like you have the time and resources to give appropriate attention to all of the youth in your care?
7. Is it necessary, in your opinion, to follow up with every complaint made by a youth in care? If no, how do you distinguish between what does and doesn’t merit attention?
8. If a youth in care presents you with a problem or idea that is beyond your knowledge and/or power to solve, what are your next steps in addressing the situation/finding a solution?
9. When bringing attention to problems regarding the treatment of youth, do you feel supported in your attempts to advocate for youth by supervision and administrative staff in your region?
10. How would you go about helping youths in your care connect with other groups and support networks?
11. How do you discuss the Youth in Care Bill of Rights and Sibling Bill of Rights with youths in your care?
12. How do you teach youths in your care about the role of the ombudsman?
13. Do you go over the Speak Up handbook with youths in your care?
14. Are you aware of the Youth Advisory Board for your region? What is your understanding of what YABs do?
15. Are you aware of the statewide Youth Advisory Board? What is your understanding of what this YAB does?
16. Are you involved in helping youth participate in the YAB, i.e. hosting meetings, transporting youth to meetings, coordinator, etc.?
Appendix E
Coding Guide for Survey Answers

Race/Ethnicity
1=Black
2=Hispanic/Latino
3=White
4=Asian/Pacific Islander
5=2 or More Races

Gender
1=Female
2=Male

Number of Foster Placements
Median Split
0=0, 1, 2, 3, 4, 5
1= 6-10, more than 10

Educational Program
1=Middle School
2=High School
3=Vocational Program
4=4-Year College

YAB Attendance
1=First Meeting
2=Second Meeting
3=Handful of Meetings
4=Involved for a While

Yes/No Questions
0=No
1=Yes

Likert Scale Questions
1=Strongly Disagree
2=Disagree
3=Neutral
4=Agree
5=Strongly Agree
## Appendix F

### Survey Descriptive Statistics

<table>
<thead>
<tr>
<th>Surveyed Youth Descriptive Statistics</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
<th>Range</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age when entered care</td>
<td>8.70</td>
<td>6.24</td>
<td>9.00</td>
<td>Baby-17</td>
<td>15</td>
</tr>
<tr>
<td>Current Age</td>
<td>16.93</td>
<td>1.87</td>
<td>17.00</td>
<td>13-21</td>
<td>15</td>
</tr>
<tr>
<td>Number of Social Workers</td>
<td>2.94</td>
<td>1.44</td>
<td>3.00</td>
<td>1-5</td>
<td>16</td>
</tr>
</tbody>
</table>

*Table 1. Descriptive Statistics of Youth Advisory Board youth surveyed.*

<table>
<thead>
<tr>
<th>Self-Advocacy is Very Important to Youth in DCF Care</th>
<th>Mean</th>
<th>SD</th>
<th>Mode</th>
<th>Range</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is important to me that I am able to advocate for my needs.</td>
<td>4.59</td>
<td>.20</td>
<td>5</td>
<td>3-5</td>
<td>17</td>
</tr>
<tr>
<td>I think it’s important to advocate for changes that could improve the lives of others.</td>
<td>4.13</td>
<td>1.20</td>
<td>5</td>
<td>2-5</td>
<td>16</td>
</tr>
<tr>
<td>I have ideas about changes I would like to see in DCF.</td>
<td>4.18</td>
<td>1.02</td>
<td>5</td>
<td>2-5</td>
<td>17</td>
</tr>
<tr>
<td>I wish there were more ways or opportunities for me to speak with DCF administrators.</td>
<td>4.12</td>
<td>1.05</td>
<td>5</td>
<td>2-5</td>
<td>17</td>
</tr>
<tr>
<td>I wish there were more ways or opportunities for me to speak with Connecticut legislators.</td>
<td>4.19</td>
<td>1.05</td>
<td>5</td>
<td>2-5</td>
<td>16</td>
</tr>
</tbody>
</table>

*Table 2. Descriptive statistics of surveyed youth beliefs about the importance of self-advocacy.*
## Appendix F cont.

### Survey Descriptive Statistics

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Mean</th>
<th>SD</th>
<th>Mode</th>
<th>Range</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am comfortable advocating for my needs.</td>
<td>4.29</td>
<td>.99</td>
<td>5</td>
<td>2-5</td>
<td>17</td>
</tr>
<tr>
<td>I appreciate having support from someone I trust as I advocate for my needs and voice my concerns.</td>
<td>4.47</td>
<td>.87</td>
<td>5</td>
<td>3-5</td>
<td>17</td>
</tr>
<tr>
<td>I would feel more comfortable voicing a concern or advocating for something with another person than alone.</td>
<td>3.88</td>
<td>.86</td>
<td>4</td>
<td>2-5</td>
<td>17</td>
</tr>
<tr>
<td>If I tell my social worker about a problem I am having he or she works to address it.</td>
<td>4.19</td>
<td>.98</td>
<td>5</td>
<td>3-5</td>
<td>16</td>
</tr>
<tr>
<td>I feel like my social worker listens to my concerns and complaints.</td>
<td>4.29</td>
<td>.85</td>
<td>3</td>
<td>3-5</td>
<td>17</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>% Agree</th>
<th>% Disagree</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel more comfortable voicing my concerns when I am with a biological family member.</td>
<td>31</td>
<td>69</td>
<td>16</td>
</tr>
<tr>
<td>I feel more comfortable voicing my concerns when I am with my social worker.</td>
<td>87</td>
<td>13</td>
<td>15</td>
</tr>
<tr>
<td>I feel more comfortable voicing my concerns when I am with a friend.</td>
<td>81</td>
<td>19</td>
<td>16</td>
</tr>
<tr>
<td>I feel more comfortable voicing my concerns when I am with my lawyer.</td>
<td>69</td>
<td>31</td>
<td>16</td>
</tr>
<tr>
<td>I feel more comfortable voicing my concerns when I am with a trusted adult.</td>
<td>82</td>
<td>18</td>
<td>17</td>
</tr>
</tbody>
</table>

*Table 3. Descriptive statistics of surveyed youth beliefs about the fundamental importance of relationships to self-advocacy.*
## Survey Descriptive Statistics

### DCF has some Wonderful Tools for Teaching and Supporting Youth Self-Advocacy, but these Tools are Not Appropriate for All Youth

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Mean</th>
<th>SD</th>
<th>Mode</th>
<th>Range</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel like what I say in YAB meetings is heard by workers and administrators in DCF.</td>
<td>4.25</td>
<td>.86</td>
<td>5</td>
<td>3-5</td>
<td>16</td>
</tr>
<tr>
<td>I feel like the YAB has made positive changes to DCF.</td>
<td>3.87</td>
<td>1.19</td>
<td>5</td>
<td>2-5</td>
<td>15</td>
</tr>
</tbody>
</table>

### Survey Item                                                                 % Agree % Disagree N
| I have heard of the Speak Up booklet.                                      | 47   | 53  | 17   |
| I have read some or all of the Speak Up booklet.                          | 41   | 59  | 17   |
| I have found the information in the Speak Up booklet useful.              | 50   | 50  | 16   |

*Table 4. Descriptive statistics of surveyed youth beliefs about the self-advocacy tools currently present at DCF.*

### Youth in are Face Systemic Barriers to Receiving the Tools and Support They Need to Self-Advocate

<table>
<thead>
<tr>
<th>Survey Item</th>
<th>Mean</th>
<th>SD</th>
<th>Mode</th>
<th>Range</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>I wish there were more ways or opportunities for me to speak with my social worker.</td>
<td>3.65</td>
<td>1.06</td>
<td>3</td>
<td>1-5</td>
<td>17</td>
</tr>
<tr>
<td>I know who to talk to if I feel like my social worker isn’t addressing my concerns.</td>
<td>4.12</td>
<td>1.17</td>
<td>5</td>
<td>1-5</td>
<td>17</td>
</tr>
<tr>
<td>I see a way for the changes I would like to be made in DCF to be heard and responded to.</td>
<td>3.94</td>
<td>1.14</td>
<td>5</td>
<td>1-5</td>
<td>17</td>
</tr>
</tbody>
</table>

*Table 5. Descriptive statistics of surveyed youth beliefs about systemic barriers to self-advocacy.*


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94. Ibid. 25.
95. Ibid. 35.
99. For more information on DCF’s mentoring program, see: https://portal.ct.gov/DCF/Mentoring/Home.
100. For more information on DCF’s array of adolescent services, see: https://portal.ct.gov/DCF/Adolescent-Services/Home.
102. Ibid.
103. Ibid. 10.
104. Ibid.
105. Ibid.
108. Ibid. 11.
111. Ibid. 8.
115. Iowa Code Section 232.91.
116. Ibid.
117. For more information on Outcome 15 of the Juan F. Exit Plan, please see the 2017 Juan F. Revised Exit Plan at: https://www.childrensrights.org/wp-content/uploads/2017/12/Revised-Exit-Plan.pdf.


125. For more information on the CFSA Youth Ombudsman, see: https://cfsa.dc.gov/service/be-heard-for-youth.

